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# W-Sitting: What's the Big Deal?

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# What is "W-sitting?"

"W-sitting" is a position in which a person sits with his or her bottom, knees, and feet all touching the floor, with the knees bent and the feet resting near the sides of the hips/pelvis. When viewed from the front or above, the person's legs appear to form the shape of the letter "W." It is not uncommon to see toddlers transition briefly through a W-sit to other movement patterns as they learn to crawl, walk, and sit upright and unsupported for extended periods of time. This is because the W-sit position provides a wider base of support and helps the child balance. However, when children continue to W-sit as they get older, this position can become problematic in many ways.

## What are the dangers of W-sitting?



 Long-term W-sitting can lead to a variety of problems including joint strain in the hips and knees, poor core stability, and limited movement during play.



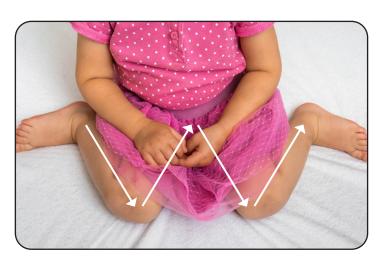
• It can also increase the risk of hip dislocation and cause muscle shortening or tightening of the hamstrings (backs of the thighs), adductors (muscles that work to bring and keep the legs together), and internal rotators (muscles that turn the toes in toward the middle, which can cause a "pigeon-toed" walking pattern).



 Children who are frequent W-sitters may have persistent poor core strength which makes it difficult to play, sit up in a chair without excessive slouching or fidgeting, and complete self-care tasks; they often have trouble crossing midline, or reaching across the body during common daily activities; and they may even develop misshapen bones in their legs.



 Long-term W-sitting can also contribute to back issues, hip pain, and osteoarthritis in adulthood.



# Why do kids W-sit?

Kids who have low muscle tone, poor balance, or difficulty with motor control and coordination are often W-sitters. Since W-sitting creates a wider base of support and makes balancing easier for these children, they often continue to sit this way, even though the position actually decreases their ability to move since it limits side-to-side motions such as leaning and trunk rotation.

# How should I address W-sitting?

Even very young children can be taught to avoid W-sitting. It is helpful for adults to establish a consistent cue, such as saying "fix your legs" while modeling a more appropriate way to sit (see below for options). Children who continue to W-sit often





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need help to address underlying issues such as core weakness, leg muscle tightness, and difficulties with balance, coordination, and crossing midline. A pediatric occupational or physical therapist can help treat these problems and can provide recommendations for fun, play-based exercises. Therapy ball exercises, yoga, obstacle courses, and gentle stretching can all help to address some of the underlying issues that can contribute to prolonged W-sitting.



### What are some good alternative positions?

It is actually really important for babies, toddlers, and children to have a lot of opportunities to sit, move, and play on the floor. Floor play promotes many skills including balance, body awareness, bilateral coordination (using the two sides of the body together), strength, and flexibility. Kids who are frequent W-sitters may need consistent adult cueing and demonstrations or even light physical assistance to learn how to sit in different positions on the floor. Here are some great alternatives to W-sitting:



• Tailor/"criss-cross" sit: sitting with one leg crossed over the other



 Long sit: sitting with legs out straight in front of the body (can use arms/ hands to prop if needed)



 Straddle sit: straighten both legs at the knees and pull them apart into a comfortable half-split



• **Knees up:** from the straddle position, pull the knees up slightly toward the chest, then lean forward to rest as needed



• Half cross/knee prop: a combination of the "criss-cross" sit and the "knees up" position



• Ring/"butterfly" sit: bringing the bottom of the feet together at midline, either loosely apart (ring sit) or touching ("butterfly" position)



 Side-sit: sit with both knees bent on one side of the body and both feet resting on the opposite side of the body



 Squatting: keep the feet just wider than shoulder-width apart and the bottom off of the ground



 Low (or high) kneel: keep the hips, knees, and feet all in alignment; may sit with bottom resting on heels (low kneel) or with bottom up (high kneel, requires more balance)



 Prone: child lies on his/her belly during floor play



 Use a low chair, stool, or pillow: backless, soft surfaces require more core strength and activation for balance

#### Resources:

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