Stability and Posture

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Posture is the body's expected state once it is is at rest or relocating (Buck, 2006). As a function of concerted action of different muscle groups operating to ensure stability, posture is achieved. Simply put, a posture could be comprehended as the position you hold when you stand or sit. According to the studies, posture constitutes two types i.e. active and inactive. Active postures require simultaneous action of several muscles while an inactive posture requires minimum muscle activity to facilitate relaxation in times of rest or sleep (Buck, 2006).

As with any study, there is a norm, the same applies to the evaluation of postural orientation. The perfect orientation of the skeleton is regarded as the Ideal Posture or Standard Posture. We ought to learn the optimal orientation of both the backbone and other joints in rest to comprehend the ideal posture. Remember this ideal posture contributes towards giving the body stability which mainly results in a coordinated action of a component of a skeletal system (Buck, 2006).

I think you recognize the correlation between posture and stability at this stage. The joints in the human body are structurally balanced to maintain stability as they adopt an appropriate posture. Our joints are arranged to ensure that our ligaments are evenly positioned on both points with sufficient surface interaction with tension. Muscle orientation is also optimal for enabling and relocating the lever arms of our body (Buck, 2006). The stabilization elements at the other side of the spectrum include good ligaments. They can endure mechanical forces to provide support to the skeletal system that it requires to sustain an ideal posture, both spatially and sequentially, across all movement planes.

In addition, a highly tuned nervous system administers muscular contractions for all sides of the body's joints to somehow generate the assistance required to maintain an ideal posture. From such a perspective, it is easy to comprehend that when the body posture loses its efficiency, it, in turn, loses stability and vice versa. To build effective systemic and structural physical movement, the two are largely dependent on each other (Buck, 2006).

**References**

Buck, M. (2006). Low Back Syndromes: Integrated Clinical Management. *Physical Therapy*, *86*(12), 1712–1713. https://doi.org/10.2522/ptj.2006.86.12.1712