



# OPINION

## We're failing our children's spines

BE OUR GUEST

BY DR. MICHAEL GERLING

In a far earlier era, before there were smartphones, iPads, and laptops, good posture was actually part of required health education in schools. Your bearing was considered a sign of character. Far more important, while not recognized at the time, it had health benefits that would last a lifetime. Not so today.

As a spinal specialist, I can see the future of our children's health, and it is being dictated by a digital age encouraging millions to be hunched over a screen for hours on end. As a result, we are in the midst of a growing public health challenge which, unfortunately, may not become a recognized crisis for yet another decade.

Studies reveal children are more sedentary than ever. From school to home, they spend hours bent over laptops, tablets, and smartphones. The average child now spends more than seven hours a day on screens, much of it with poor posture. Research found that 63.3% of adolescents showed smartphone addiction, with a constant connection to social media of all kinds.

This isn't just about "bad habits" or nagging parents to instruct their children to "sit up straight." We're talking about structural damage — forward head posture, spinal compression, and muscle imbalances that can eventually lead to chronic pain, reduced mobility, and even long-term degenerative spinal issues.

We are literally seeing middle schoolers with the posture of elderly retirees.

This phenomenon even has a name: "tech neck." The human head weighs about 10-12 pounds. Tilt it forward just 15 degrees, and the pressure on the cervical spine nearly doubles. At 60 degrees, which is the average angle when looking down at a phone, the spine is supporting the equivalent of 60 pounds. Our bodies, especially growing ones, aren't built for this.

Ironically, there is already a proven strategy that can be applied to confront and combat this emerging crisis.

In schools across the country there are programs in place to prevent concussions and related football injuries among student athletes. Coaches and trainers receive instruction on prevention of heat stroke and brain trauma. There are strict rules in place regarding how and where opposing football teams can tackle each other. Failure to follow those rules can lead to being benched or barred from play. These efforts have dramatically reduced student injuries. It is a proven protocol that works.

We need to do the same in addressing emerging spinal issues, creating school-based health programs to

recognize, but better yet, prevent, early signs of spinal misalignment, scoliosis, or overuse injuries in the neck and back. Such programs should be considered a call to action for parents, educators, coaches, and policy makers, compelling schools to incorporate spinal health education into physical education and health classes.

The curriculum could include the introduction of microbreak routines during long study sessions, phone and device positioning strategies, sleep posture and pillow selection, and postural training with relevant physical exercises specifically designed to strengthen postural muscles.

This effort might include a month-long personal challenge to build healthy habits. Its content would be applicable for different populations beyond teenagers. That would include office workers, gamers, and parents—since their usage will likely differ.

The curriculum would include behavior change techniques, ("When I check my phone, I'll check my posture first"), environment design (smartphone stands that compel the user to elevate the neck), and linking new personal habits to existing ones designed to prevent "tech neck." Ironically, there are apps that prompt posture checks for smartphone users.

This program is not meant to lecture people about their smartphone use being harmful. Rather, let's accept the reality that smartphones are here to stay and teach practical coexistence. The goal is autonomy — people understanding their own bodies well enough to self-correct throughout their day, making spinal health automatic rather than something requiring a constant conscious effort.

Within this program a family's pediatrician would routinely screen for posture-related issues during checkups. And yes, parents would be part of this effort, teaching their children as soon as they are given a digital device, to periodically look up from their phones, not just for their social development, but for their own physical well-being.

We shouldn't wait until this digital generation recognizes later in life the cause of chronic neck and back pain. The warning signs are already here, and a preventive pathway is necessary. If we don't take spinal health seriously, right now, we are setting our children up for a lifetime of pain and a generation that will face chronic spinal woes.

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