

## EMAGAZINE

Voices of Experience





## INTRODUCTION

My vision for this magazine came from reflection of my own practice. I have been in the bodywork industry for a mere seventeen years and I realised how much my hands, my touch and my way of looking at the body had changed over the seventeen years with experience. This got me thinking about some of our founders of Structural Integration. How had they changed over the years with their wealth of experience and with new insights and research? I love the way Structural Integration is moving forward and how it has gained new momentum. I am also very proud of its history and roots. This magazine was a great way to reach out to people who inspire me, to hear their stories as well as insights into what experience has added to their work.

It's also a great time to look at the SI history, as our KMI training has just been redesigned and renamed and is now going to be Anatomy Trains Structural Integration (ATSI).

I asked Tom Myers, Judith Aston and Mary Bond the same question "How has your work changed with experience?" They are all very busy people so it was such a pleasure to have them all agree to featuring in this E mag. I hope you enjoy their replies as much as I have. I also have to admit to having a bit of a "girl crush" after interviewing Judith Aston.

I am really pleased to be able to feature one of our American senior teachers, Carrie Gaynor, as our Teacher in Focus. We have our regular research review by Holly Clemens and have added a new feature 'Friends of Anatomy Trains,' as well as showcasing work that has evolved from Anatomy Trains. This edition features Ari Pekka Lindberg (AP) and his Anatomy Trains in Training. AP has just finished a tour in Australia and will be heading to America in April next year.

We will be adding a new section in our December edition – 'Questions for the team'. If you have questions for Tom and the faculty or if you would like to submit an article, we would love to hear from you. As our Anatomy Trains teaching team and the number of Structural Integration graduates grow, we have amazing people and a wealth of knowledge to share and I would love to showcase some of this talent in our E magazine. If you want to be featured in the e mag, email: julie@anatomytrainsaustralia.com

Enjoy

Julie

JULIE HAMMOND // DIRECTOR ANATOMY TRAINS AUSTRALIA & NEW ZEALAND



#### [ AUGUST 2017 ]

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## Heart and soul

have been so very fortunate to be involved with bodywork - making a living through touching people with the intent to create progressive change toward balance - since 1974, now 43 years ago. After so long, I'm grateful to be invited to share a few of its lessons.

(Actually, it reaches back further in my life: when I was in summer camp in the 1950's I used to give my counsellors 'back rubs' - that is, until another boy called me 'queer' for doing it. I was nine years old and had no idea what 'queer' meant but it sounded bad, so I stopped. The things we do to each other, all unwitting! I am so grateful I had the good fortune to return to this native talent as an adult. I remembered those early back rubs during a hypnotic regression a few years into my career.)

Performing manual therapy professionally is an art and a craft and a science, as well as a business, let's be honest. It is hard to sustain a practice if it is not giving you a good living so let us look at one practitioner's journey in all three sides of that triangle.

As a young adult I had likely heard of massage but in those days the separation between legitimate therapy and adult entertainment had yet to be delineated. So if massage was brought up I likely tittered like the rest of the populace at that time. In 1973, however, I quit the path my parents and university had set me on and set out to, as the saying went, 'find myself'.

America was tilted at the time so, like many seekers of that era, I rolled west toward California. Also, as with many, I happened onto meditation and Gestalt psychology and what was then called the 'Human Potential' Movement (a term I have always preferred to 'New Age' or 'alternative medicine'. As far as I am concerned, I am still in the human potential camp and I continue to be astounded at what humans can

I was in a meditation 'boot camp' and some of the members were sneaking away from their focus for a couple of hours and coming back with welts on their bodies. "What are you doing?", I enquired. "Oh, we're getting rolfed" came the answer, to which I raised a quizzical eyebrow.

One member of the group said, "I'll show you". He placed both hands on my chest and flayed the skin off my breastbone. It hurt like hell but my teeth started to tingle and I could definitely feel my breath change. "Far out" - as 'Awesome!' was expressed back then.

When, a few months later, I heard that Ida Rolf was giving a talk I tootled down Santa Monica Boulevard to a down-at-heels motel conference room to have a listen. Within that banal setting, a little white-haired old lady commanded the room and my full attention with a riveting talk (fully academic with a New York accent) on the human condition, at least with regard to body use.

Another member of my spiritual 'sect' had taken a ride down with me and, after Dr Rolf's opening lecture, he volunteered to be the model for her demo. In 45 minutes of precise, definite (to the point of pain) probing and prodding tissue, releasing the guy-wires and the secret places of tension, he stood up, visibly changed. His chest was deeper, his voice was deeper, and (I knew him) his emotional affect was deeper as well - even to my untrained eye.

had been headed for a career in promoting a form of highly verbal 'American zen' but at this moment my eyes were opened to another form of intervention. She had not psychologised my friend - indeed, she seemed remarkably unsympathetic, attentive but remote, as she practiced her craft on his body. If there was a placebo, she wasn't giving it a chance. (That said, her focus truly was awesome but it was focus in her hands and in his body, not much sympathy in evidence.) And yet the effects of this single treatment lived on in his body for weeks after the session.

I signed up for the series of sessions that constitute rolfing. (She herself hated that name; her name for her work was 'structural integration' but we hippies tagged it as 'rolfing.' Structural Integration now names the profession that has stemmed from her work.) I signed up to be a model in one of her classes which meant I got the sessions cheaper - hey, I was 23 and running on a shoestring.

Turned out I was the one-too-many class model but that meant I got lucky; I was worked on after class by her assistant, with some of the students staying on to see the session and ask questions they didn't dare ask in Ida's presence. (She did not suffer fools gladly, nor did anyone call her 'Ida' to her face but it was a term of endearment among us when she was not around.) Thus I got to experience my first serious foray into structural bodywork and at the same time hear some of the intellectual and strategic logic behind what I was experiencing.

What I experienced was a lot of pain being released from my body - from around traumatic areas such as where my fibula had broken, my repressed and unmoving pelvis and generally from my tight muscles - and I was an uptight New England twit in need of having my tree shaken.

Besides the lightness and freedom, I have to say that the most telling (and motivating) result for me was an expansion of my emotional range. My poor roommates experienced some sonic booms as I passed through one feeling state to another.

By the time the series was over, however, I had entered a new world of sensitivity to feelings my parents never contemplated. Whatever emotional deficits remain within me, I have never retreated from the honesty and authenticity those sessions - again, without any overt psychologising - instilled within me. Or I might better say 'revealed' in me.

I remain unsure to this day as to whether we can truly 'add' anything to a person. It's debatable. We add information, we add sensation, we encourage experimentation in movement, but in fact the best structural bodywork is more of a process of elimination - a taking away of the tensions and holding that have been imposed by their accidents, traumas, training, and the heroes they emulated. We don't want to 'impose' good posture on top of that accumulation of compensations but rather progressively decompensate them to 'expose' the essential individual within.

"Sculpture is easy," said Michaelangelo, "just start with a block of marble and take away everything that doesn't look like David."



Structural Integration is much the same. We look for those places or patterns that have imposed limitations on the person's movement and work to lift them off. How can we 'lighten the load' people impose on themselves? What is revealed is not some robotic 'perfect posture' but a return to the person's original intent, less hobbled by the slings and arrows they have encountered.

Somewhere around the third session, I asked the guy working on me, "How do you get to do this work?" His immediate response was "Don't even think about it, you're not suited for this" - a comment we have had cause to laugh about in the ensuing decades as colleagues.

In spite of his opinion, within a couple of months I had disengaged from my other pursuits and enrolled in massage school and an anatomy course with a dissection lab, and immersed myself in kinesiology books in an attempt to meet Ida Rolf's demanding prerequisites. Although in reality I could probably have got into her school with less study, I am very glad that I took the time to get a firm foundation of anatomical and kinesiological vocabulary under my belt before I began training in the craft.

(The Johnson-O'Connor Research group, after extensive testing of human aptitudes, found that those who advanced the most within any given profession were those with the highest vocabulary - whether you were testing architects, musicians, or pharmacists, whichever. As a practitioner of bodywork, you can get away with a lower vocabulary. Once I became a teacher and a writer, an extensive and versatile vocabulary became a must.)





# THE POWER OF TOUCH

Massage school was my beginning in this craft. However much my prior education had crafted my verbal facility, my 'vocabulary' of touch was abysmal. My family was loving but not demonstrative and certainly not in a touchy way. I shook hands with my father and called him 'sir' until I ran into all this stuff. From then on I stepped past his outstretched hand to give him a hug, which he first resisted and then welcomed.

The power of touch was the first lesson I learned in massage school. We live in a culture dominated by the other two major modes of learning - visual and auditory. The third, kinesthetic learning, is sadly undervalued; in my family and in Western society in general. Aldous Huxley, in Brave New World, imagined the 'feelies', an entertainment of the future where you can not only see and hear the action but also feel it. Today, sadly, haptic technology is still in its infancy and seeing and hearing wins out over bodily sensing - in our entertainment, our education, and in the social investment allotted to that sense.

But in this small upstairs room in Berkeley, California, I learned how touch could be used as an educational tool; and a deeply healing one. The training was short on science but good on craft. Here one learns - I learned - about contact, the essential of touch communication. Presence. How to feel what's under your hand and how to stay in contact with the person that tissue belongs to. Without it - and I have been under the hands of practitioners who do not have it - no skill or technical expertise will penetrate the client. Without that essence of contact and presence, even deep, sustained touch can bounce off your tissue, and your consciousness, without effect.

I also learned the first rudiments about 'energy', a term that is too often used as an excuse when we do not know the 'why' of what is going on but is nevertheless a real phenomenon. One evening, I finished the massage I was doing and in my satisfaction clapped my hands loudly. The teacher, a transplanted Swede named Gunvar, snapped at me. She lost her usual dulcet Scandinavian tones to rebuke me for breaking the 'energy' of the room. At first I protested but then I could feel what she said was true - the clap had broken something ethereal but palpable, a net of energy, in the room. I never forgot that lesson. No matter how much you 'know', there is something sacred beyond that.



Another big lesson in energy is: What is 'yours' versus what is 'theirs'? You come to the table with your talents and your faults and your attitude and they come to the table with their talents and faults and attitude. During the work you create another arc that is 'ours'. This is called transference and counter-transference in psychology but it is made a bit more complicated and tricky in bodywork because of the added complications of touch, where non-verbal communication streams in both directions. Learning to tease out that energetic intertwining is a lifelong lesson.

I was a massage therapist for only about nine months as I prepared for my rolfing training. I never was, nor am I now (ask my wife) a good masseur. I was poor and needed to make a living at it, so I had a practice where I did home visits, mostly with upper-middle class housewives in the Bay Area. I became competent but I am not a good soother, which is a necessary component of the successful massage therapist.



# ALL IS NOT KNOWN IMAGO

side from improving my skills in simply handling the details of a practice - calling back, showing up reliably, paying attention - I wish to focus here on the touch skills, not the ancillary business ones. As necessary as they are, I learned one great lesson during this time. It was the early 70's and IUDs were a popular form of birth control. I started noticing as I worked on the feet of these women that the inside top of the heel was always a triggering point, capable of sending them through the roof with not very deep touch.

Looking in the reflexology book, I noticed that this was the reflex point for the uterus. Now these were the old 'copper 7' IUDs that worked not by releasing hormones but by irritating the lining of the uterus so that the egg would not implant. This irritation was consistently creating a sore reflex at the corresponding point of the heel.

Over many years, again and again, I have been impressed with the specificity of reflex points on the feet. It was not there on women who did not use this device and was consistently there on those who did or those who were pre-menstrual. And yet there is no medically credible explanation for these reflex points to date. The explanation offered by the reflexologists - there are 70,000 nerve endings on the feet and these nerve endings connect directly to the corresponding organs - is on its face ridiculous, with the most rudimentary knowledge of neurology.

Yet there it is. Alcoholics (even former alcoholics) will have a zinger on the pituitary point and kidney, heart, or breathing restriction will reliably show up at their corresponding points. To this day I have no explanation for how these reflexes work but I can see that they do relate nevertheless. Since then I have seen maps of corresponding points for the whole body not only on the foot, but on the hand, the ear (auricular acupuncture), the eye (iridology), the face, the lips, and even the genital organs.

## "THIS IDEA OF CONTINUAL

#### HAS BEEN A CENTRAL TENET OF OUR SCHOOL

hether you observe the same phenomenon (which I have named imago, an image of the entire body laid out on a single part, a bit like the brain's homonculus), I urge upon you the lesson I took from this: You need some faith in what you feel and find, even if a scientifically sustainable explanation for it is not available at the time. No one knows how aspirin works, or why angina pectoralis precedes a heart attack, or what powers the cranio-sacral pulse, yet it is reliable information just the same.

Of course, I have also held beliefs about the body that I've had to let go of - beautiful theories that were destroyed by ugly facts. We must be prepared at all times for our knowledge to overcome our superstitions. At the same time, a feeling that is reliable may not have a ready explanation right now but that does not mean it is not useful, or that someday there will not be a suitable explanation for what you have experienced. This dance between the intuitive experience and the available evidence is a familiar one but I learned early on that the absence of evidence is not the evidence of absence.

Once involved in Structural Integration (SI) training with Dr Rolf, the lessons came too thick and fast to detail them all. My own anatomy training was actually better than some of my fellow students and I have been an anatomy enthusiast for the rest of my career. To give credit where it is due, my first real anatomy teacher was Dr. R Louis Schultz, a student of Ida's and the author of The Endless Web and Out in the Open.

As an embryologist, he gave me the appreciation of the fascia as a system and the intriguing idea that we are all still embryonic, all still 'becoming', all of us with a supply of pluri- and toti-potential mesenchymal cells waiting for the demands we create.

This idea of 'continual becoming' has been a central tenet of our school for years - again harkening back to the idea that we are not forcing development or imposing good biomechanics but simply removing the blocks where someone has gone down some somatic cul-de-sac, where they need to be backed up a little to find another way with the self-imposed blocks relieved.

#### THE USE OF THE SELF

Speaking of biomechanics, I was also fortunate to learn good body use in this work from Judith Aston, a master of the art. Ida Rolf herself was bent in her old age from many years of working on her knees on the floor. By the time I got to train with her we were working on tables that were only 17" (40 cm) from the floor. These were still too low for most but such was the 'law' laid down by Ida - she wanted us leaning into the tissue, not namby-pambying around on the surface.

Judith taught us that getting inside the other person was less a matter of force and more a matter of correct body use by the practitioner. Too many massage therapists pay little to no attention to how they are using themselves, preferring to focus their attention on the client instead.

## BECOMING

#### FOR YEARS "

An admirable attitude but, when carried to extremes, the lack of attention to self-care and self-use will lead to burn-out, breakdown and a short career.

To speak far too generally, personal trainers and yoga teachers mostly start self-absorbed and have to shed that attitude to become more other-centred as they begin to teach. It's fine to be self-absorbed in your own practice or discipline but as soon as you begin to charge you must drop that to focus your full attention on the person in front of you.

Massage therapists - again, I speak in generalities - tend to be other-centred to begin with and must learn to be attentive enough to themselves to be effective and enduring in the craft. Too many drop out after fewer than ten years because they do not know how to attend fruitfully to their own needs, and so they end up in pain.

As with pottery, woodworking, painting, or any other craft, one is honestly just getting good after 5-8 years of practice. Even with the best will in the world it takes time in the field to mould a good practitioner. Efficient 'use of the self', as F.M. Alexander called it, is not only career-extending, it is key to the conundrum of 'How do I get deep and still stay sensitive?' Overuse of the arm and shoulder muscles is not only a recipe for neck pain and back trouble after a few years (even in the strong), it is also a recipe for insensitive work that drives many clients away.

Conversely, working from the floor - i.e. through responsive ankles, hips, and thoracic spine - with your own body weight is a recipe for a happy body at the end of the day and the end of the decade.

In our flagship training classes we are assiduous about teaching good body use - mostly still based on Judith Aston's insights with a few of our own added and a healthy dose of Tai Chi mixed in as well - for both these reasons. It makes the practitioner more sensitively 'literate' in terms of delivering deep work with minimum pain and disturbance, while at the same time allowing the practitioner to finish even a full day of sessions with enough energy left over to devote to family or other pursuits of happiness. If you are so consistently tired at night that you are incapable of doing anything but binge-watching (name your favourite series here), you are likely not using yourself well during your practice.



"WE ARE ALL CALLED TO THIS WORK BY A SUBJECTIVE, PERSONAL EXPERIENCE."

#### KEEP THEM MOVING

hile in massage school, one learned to disturb the client as little as possible with the idea that the time spent in massage was time off from the usual demands of modern life. Ida Rolf, however, had an integrating intention; her sessions were not a vacation. She always had her clients moving, small but purposeful movements that again served two purposes:

On the one hand, it keeps the client engaged with the process. In some forms of bodywork, and SI in particular, you do not want the client 'sleeping on the job'. While I am happy to drool into the sheet and float about metaphorically on pink clouds when I am getting a massage, I want to be actively engaged with the process in other somatic work, including SI. Keeping the client moving increases the amount of new proprioceptive information the brain is processing during the session, which enhances the integration of the work into their movement pattern. Client movement also reduces the 'sensationfulness' of your interventions.

On the other hand, having the client move is good for the practitioner. It is the best way to highly specifically feel the actual functional anatomy. When the client moves, the fascial layers, specific structures and recruitment patterns come alive under your hands in a way they cannot if the client is still.

Client movement is the secret way to know exactly where you are in their body (of course, the more accurate picture you have of anatomy in general, the more precise your body GPS will be). When in doubt about where you are and what you are doing, ask them to move. Even small movements - i.e. knee back and forth a few centimetres as you work with the gluteals - just turns the lights on and shows you where the tissue needs release.

#### EMBODY YOUR TRAINING

Now, my training with Ida Rolf had a lot to do with fascia and much has been written on fascia, including by me, so let us leave those details out of this discussion. Also on display for emulation were Ida Rolf's passion and compassion, intellectual rigour and personal failings, utter dedication and (there is no other word for it) disdain for those who would try to get away lightly without reaching the depths she called us toward. I was in awe, glad I had found a worthy teacher, and I was an eager student - way too eager, probably, for any objectivity.

But objectivity is not the attribute of the beginner - we are all called to this work by a subjective, personal experience - whatever drew you to it in the first place. In my case, as in most cases, it was the personal experience of how much I had received from the work and wanting to convey that experience to others.

There are hundreds - thousands - of trainings out there in the realm of 'bodywork', from dance to osteopathy, from acupressure to body-centred psychotherapy. Whatever your chosen field, embody that training. There is no substitute for this. No matter how much you paid for your training or how highly rated it is, or how long it took, or what letters go after your name, it will only take root in you if you practice it.

## "MANY FORMERLY MAGICAL THINGS I CAN NOW CONVEY TO OTHERS WITH WORDS AND TOUCH."

n my own case, I went to a new town, culturally different from my upbringing, where I had no friends or contacts and started fresh. I was fortunate to have a full practice in short order. (Here is a tip: when you are first starting out, look for the social innovators in your chosen target audience. They are usually a bit crazy or desperate because they have not found help elsewhere. Artists, others eager to change their conditions, those who are a little nuts - they will often be the first ones through your door. Do a good job with them and the others, the opinion leaders who watch them, will follow.)

Make your training sing in your own life. Test your work on as many different kinds of people as you can muster. Take all comers. Work long and hard to bring the work, whatever it is, from the outside to your inside. Get lots of training and work from practitioners within your field, most of whom you will like, though you can learn a great deal from those you do not. Malcolm Gladwell talks about 10,000 hours of practice to master a craft. It depends upon the craft of course, but five years is another benchmark people use. If you have been practicing steadily for five years, you have likely embodied your training.

At that point it becomes a little boring but do not let boredom stop you. Innovation and authenticity lie on the far shore of the sea of boredom.

## EXPAND YOUR EXPERIENCE

So after the five years (however long your five years is), you will want to expand your training. I studied with Ida Rolf and returned to take Advanced Training from her two years later. For the first five years, although I took other classes from other 'rolfers', I stuck to the straight and narrow. Beware of trying to take in too many modalities too soon. Few people who try to combine, say, acupuncture, massage, and PNF do so successfully (and the few who do are great synthesists). More often, trying to combine too many things too soon ends up making dishwater rather than soup.

Five years in, I got the chance to study with the great Moshe Feldenkrais. In doing so, I thought I would give up my rolfing practice and take up Feldenkrais as a full-time job but as it happened all the knowledge I gained flowed back into my SI practice, which continued to flourish.

A couple of years later, I delved into osteopathy, especially cranial osteopathy. I had been dealing in my SI practice with what is called the parietal myofasciae, the muscles and surrounding fabric. Studying osteopathy took me into the 'ligamentous bed' (the fascia close to the bones, what I have termed the 'inner bag'). Cranial osteopathy took me into the meningeal fascia that spans the dorsal cavity.



A few years later, I was drawn into the world of visceral osteopathy of Jean-Pierre Barrall, which gave me a fresh and expanded perspective on the fascial connections and intrinsic movements in the ventral cavity.

An intensive study of the movement meditation called Continuum further informed my work. In my own case, all I learned got plowed back into the fertile field of my SI practice but by now my SI practice bore only some resemblance to what I had received from Ida Rolf. I still genuflect to her in gratitude and her basis is definitely still there, but each outside training I do changes my work toward something I can genuinely call my own.

By now, teaching is my primary way of learning - my days of being able to stop and take other people's long trainings are over. Teaching teaches me a great deal. I learn from my faculty, from my student's questions, from challenging students and colleagues and mostly from the practice of trying to articulate what it is I do now, which sometimes seems magical, even to me. But

many formerly 'magical' things I can now convey to others with words and touch - it has made my work better to be a teacher.

Now my students are beginning to surpass me and I am learning from them - like James Earls, Karin Gurtner, Wojciech Cackowski, and Ari-Pekka Lindberg.

As I passed the 12 year mark - and now to more than 40 years - I achieved a state I call 'mastery', but I mean nothing egotistical in that. It is a state where the work lives within you and you are its source, or at the very least its clear channel. You will know it when you are there and then you can call yourself a master too. Technique and method give way to intuitive ease and invention. Everyone wants to hurry themselves to that state; ironically it will take longer if you try to hurry.

## EXP YOUR EXP

ne pitfall that should raise a red flag in you is when all your sessions start to look the same. After some years, we get our 'favourite hits' we keep going back to because they are effective and we are comfortable with them. Yes, but they can get us stuck in a rut when we are too comfortable with them. Do not believe your 'tricks.' Keep working with them, even plowing them under sometimes to fertilise the soil, until they show up, in subtler form, from within your work, not imposed on top of it.

When this happens, you need a new training, something to shake you out of the rut.

The other way to expand your experience is to take all comers. The exception is, of course, if you do not feel safe with the person but otherwise it is a practical benefit in your practice to be able to deal with a wide variety of people - athletic ones, obese ones, the elderly and children, body aware and numb, hardheaded professional and etheric airhead, all the doshas - how many types of people can you field, build rapport with and deliver lasting positive information to?

A corollary of this idea is to allow your practice to teach you. In a long practice, you will get 'runs' of people. I had two years where the majority of my practice was pre- and post-partum women. One year, for no reason I could determine, I had five cases of spasmodic dystonia. It was as if God wanted me to learn about it.

Another year I had a tor musicians, for a while I h Saddlers Wells and one was a year of British sex groups dominated my pr taught me lessons I coul others.

Or reach outside: Is the work in your community unlikely to make it to you Those volunteer experie me as much useful and pas expensive (and not not satisfying) training exper

In hindsight, it was a machoose bodywork as a pyears it provided the abil know cultures through me them. It always kept me rich in such service. But portability and low equip with the somatic profess

Somatics is anything but to answer the questions: and 'How do we get out better?' My studies to some into anatomy, of cour psychology, anthropolog cellular structure and ten as well as all the insights Continuum, personal trailetc. You can attach all k bodywork and successful

## AND PERIENCE

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dull. All therapists have 'How did we get here?' of here to someplace apport my practice led se, but also medicine, y, sociology, embryology, segrity engineering, a derived from yoga, ning, martial arts, dance, inds of points-of-view to lly find a niche.

I found myself progressively attracted to first one part of the body and then another: "Oh, oh, it's the feet! Get the feet right and everything on top gets fixed". Sure, explore that idea for a few months or a year. Another year it might be the pelvis or the breath or the neck (and there are equally convincing arguments for each of these). Go ahead and delve into your passions, secure in the knowledge that, like all storms, they will pass, but you will move on with more knowledge about the feet, or spine, or cranium, whatever you let take your fancy for a while.

So, looking at our triangle - the art, the science, and the craft - like any triangle each side determines and fixes the angle between the other two sides. Neglect any one of these and your journey becomes more linear, one-dimensional. They are all necessary for a solid practice and career.

Concerning the science, you may or may not be as conversant with fascial research, or with the anatomy or chemistry, as the bodyworker beside you but your intuition will be better the more science you know - not all the Latin names, necessarily, but an accurate picture of what is actually under your hand. Let your hand become more 'knowing' and the pictures in the books will suddenly come alive for you. Steal from the best but steal accurately!

#### A PROFESSION THAT ENGAGES THE

## SENSES

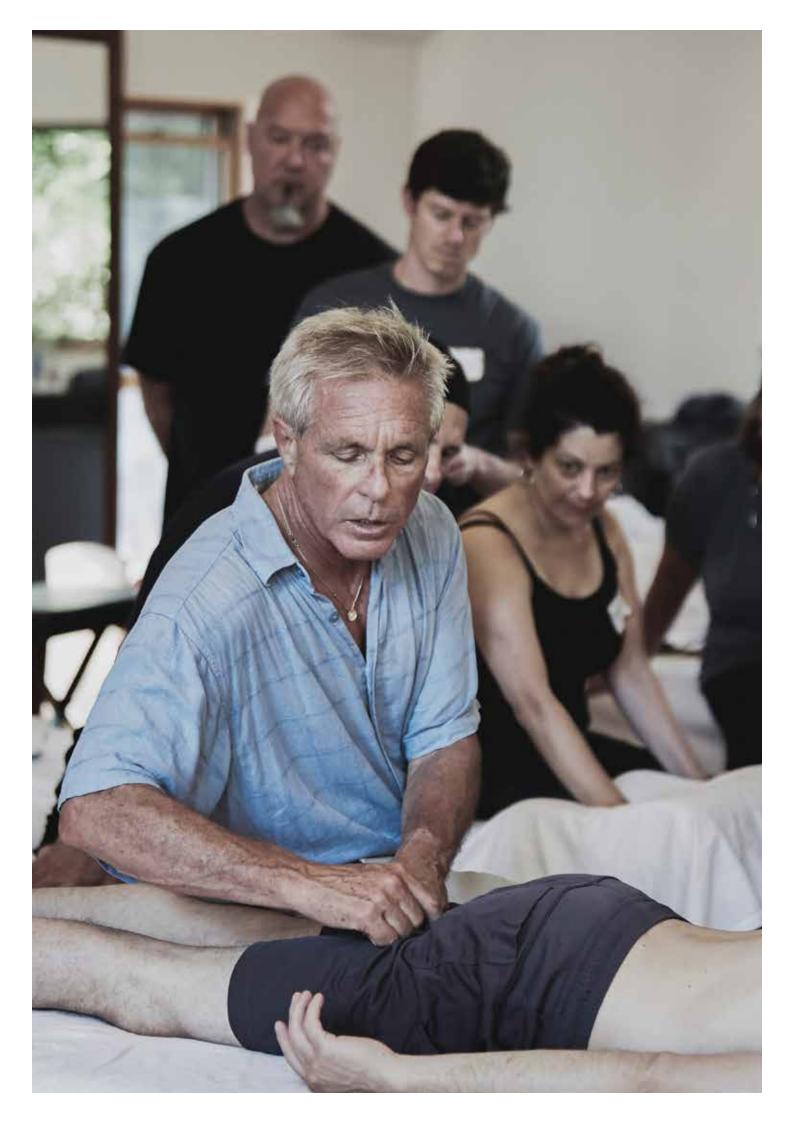
To master the craft there is no substitute for a daily practice for several years. Let yourself have the foundation of a few years in the trenches, churning out daily professional healing. Let it become you without, hopefully, consuming you. I know musicians who can get up every afternoon, go to smoky bars or raucous clubs and deliver cracking good music reliably every night. They can also be healers but they are going to lay on hands (or whatever they do) when they want to, how they want, and on whom they choose.

I am the opposite - I can get up, dress appropriately and deliver professional healing on cue for ten hours but when I go to play music, it is when I want and for whom I want. Which type of person are you? An artist healer is one thing (and valuable) but a professional healer is another.

The art of healing, the third side of that triangle, begins from the beginning. "What brought you in?" is a crucial question and key to your art and the art only becomes richer and richer with the ensuing years.

No one can tell you what will contribute to your art. Fleeting moments - as when a teacher replaced my 'intentional' touch with 'invitational' touch - can have profound effects for years. Being a sailor contributes to my bodywork art, an appreciation of nature and my encounters with animals of all kinds. Altogether though, my clients, especially the difficult ones, have taught me more about this art than anything else.

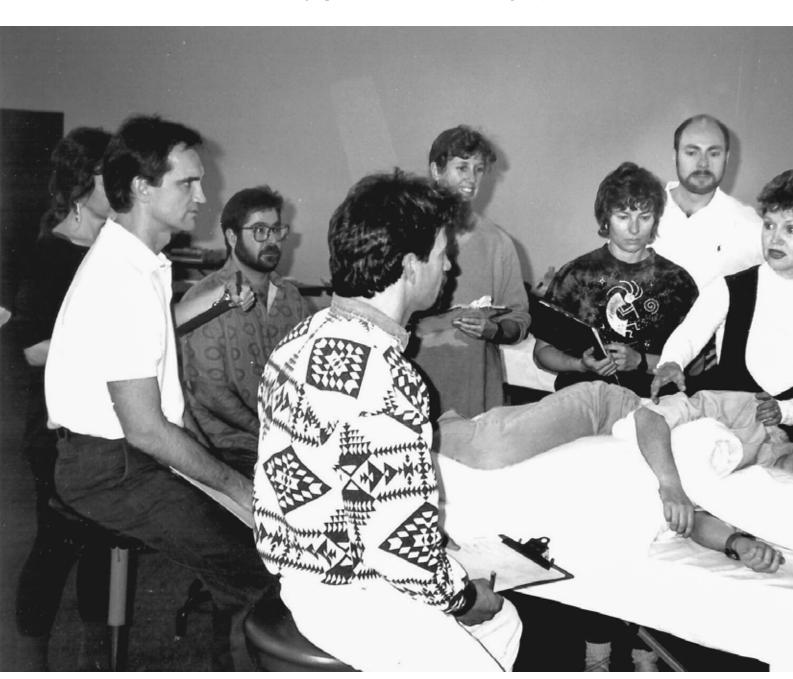
I have been dragged, kicking and screaming, into my future. There was no grand plan. I followed intuitive opportunity. It worked out better than if I had planned it and in perfect hindsight I could make no better choice. A profession that fully engages the senses, the physical self, requires emotional maturity, admits of so many luscious theoretical implications and at the same time leaves your clients in a more empowered stance. It is hard to beat.



## AN INTERVIEW WITH

## JUDITH ASTON

BY JULIE HAMMOND





I was very excited and a little bit nervous to interview Judith Aston. I have been told many great stories about Judith and even though I have had the pleasure of meeting her before I was quietly in awe of this very successful lady who is an important piece of the beginnings of Structural Integration. The interview went far too quickly and to be honest I could have listened to Judith talk for hours. She is a very intelligent, witty lady with a very infectious, playful laugh that I feel has probably got her in and out of trouble throughout her successful career.

Julie: This E mag is very much about experience and how your work changes over the years with refinement, maturity and a wealth of experience. So I would like to look at your life's journey and what led you to where you are now. Starting with your childhood. I read an article that said as a child you were a great mimic. Can you tell me about this?

Judith: Yes, for some reason, it was easy for me to duplicate other people's movement patterns, so when I did not remember someone's name, my mother and others would know who I was talking about.

As a child I was always wanting to fix toys or problem solve things. For example, if a watch didn't work, I would take it apart and put it back together. It would work. Probably only because it was dirty and when I put it back together I cleaned it. Not because I felt I was a genius for fixing things but I was intrigued.

Someone who does a lot of work with Gil Hedley asked me "How did you discover the grain?"

I think it started probably as a child because I always wanted to do things faster, easier or better and if it could be all three, I really liked that the best.

## PATTI

My mother would make apple pies and she would ask me to peel the apples. I would look and there would be an enormous bowl of apples and I would start peeling the apples and then something would happen and I would put it down and then go back and start again. However, something had happened and it was easier. The knife hadn't changed but evidently I started with the stem side of the apple instead of the other side of the apple. Only years later when I started teaching people about the grain of the tissue did I realise what I had been doing. The apple has a grain, everything has a grain. So I have been actually reading grains for a very long time. I have a curiosity about things that many people would probably let pass. If something gets my attention. I have to back up to try to figure out why it happened.

I don't know if you have flown with Southwest Airlines but they don't assign seats in the States. Everybody wants to get there early to get in line. You get to the airport and you see the line from the desk to the entrance to the airplane and it goes perpendicular to the flow of traffic at the airport. Why do people not go parallel to the traffic? Maybe it's because they are not paying attention.

Sometimes I would become the traffic director and say, "you know if you would just line up this way then I, being number 50, wouldn't be standing in the way of people walking down the terminal to get to their gate."

Julie: Did this get you into a lot of trouble?

Judith: Rather than get me into trouble, it has gotten me involved. Someone would ask me to do something I would ask, "Is it okay to possibly do this differently? Sometimes they would say "No just do what you have been asked…" like with former bosses.

But immediately, I was involved in trying to figure out an easier or faster way to do it. That seemed to be my curiosity and mission.

Julie: I read about your love of maths and patterns, what was it that got your interest?

Judith: I found very early on I had a skill and aptitude for maths and perceiving patterns. I think probably all of us do but my skill was highly tuned to patterns of voice, body motion or stillness and repetitions, maybe more so because I was sensitive to getting in trouble. I knew from three rooms away when my mother called if she was pleased or not. I think most kids know these voice patterns. For some people, it is a movement pattern, they cross their arms and they look at you with their head down and you know, even without them saying anything, that there is some concern. I became more and more aware of people's patterns and their differences.

I would say observing people's patterns, the maths and my desire to want to fix things have been my tendencies in life and still are.

## ERNS

Julie: I would imagine these were amazing skills to take into your movement education and body reading practice.

Julie: In the mere 17 years I have been in Bodywork, my treatments and hands have changed and it is not a lot of years in comparison to your work. What do you feel has changed for you? What have you learnt over the years?

**Judith:** Oh Lots, I have learnt so much..... I have also learnt how much I do not know; this is a great thing.

One of my college friends gave me an aptitude test for a study she was doing. She showed me a glass of water and said, "is that glass half full or half empty?" I said, "it depends, did you just hand me the glass or are you still pouring?" She just threw their hands up and said "could you just answer the question?" So I said "no it depends, the answer depends. If you are still pouring it will be half full. If I have drunk some then it is moving towards empty." This is how I make myself crazy because there are so many possibilities. Everything I have created has come from working with people and their questions. A client might say, "no-one can seem to figure out my discomfort or problem and I have had so much work." I suggest "Bend your knee and describe it." They say "that hurts when I bend my knee". Then I observe and neutralise their pattern by supporting them up in a certain way and say "bend your knee again".

They say, "it doesn't hurt." I reply "I believe it has something to do with the rest of your body and not as much in your knee, even though the original injury was at your knee".

An experience like that makes me want to teach people how to unweight a body to figure out where the consequence is coming from. These intriguing questions go on and on and on for me because I have by now worked with tens of thousands of people. This September will be my 54th year of teaching. (I think wow, I am seriously in awe)

Julie: You graduated from college (Masters in Fine Arts, Dance) in 1965. You developed your own programme for dancers and actors, can you tell me about this? Did you always have a clear vision of where you wanted to go?

Judith: No, not at all. As an undergraduate student at UCLA, I started teaching at a college in 1963. I was hired by a college to create movement programs for their theatre department, music department, physical education department and creative dance department. I remember saving "oh sure of course I can do that" and they said "good because that is why we are hiring you". I had to create a program for all athletes coming through to get their degree - that meant the football team, swimming team, water polo, you name it. I had to find common denominators to work with all these different athletes to help them improve their body movement skills. That was my first class you know and I had to teach them social dance, she chuckles here....

(Judith has the most amazing naughty laugh that can't be reflected in words but is obviously a hugely important piece of her character)





#### I WAS THE

## MOVEMENT LADY

Judith: The social dance instruction was pretty interesting and so was the modern dance. I frightened them by telling them they would have to wear tights. At that time men didn't usually wear tights, only in Robin Hood. Because I am a problem solver and the person who interviewed me appreciated this, he hired me. I stayed there nine years but in my sixth year there I had a terrible car accident. A car going fifty plus miles per hour rear-ended me. I had stopped - we didn't have seat belts in those earlier years. My body was whiplashed up from the seat, thrown back into an arch over the driver's seat and then thrown back into the steering wheel. When I came up again I saw my car was headed towards an 18-wheeler so I turned the wheel and went over a kerb and then another kerb into a parking lot. I was temporarily paralysed and I couldn't stand up straight: I couldn't get the last fifteen degrees of straight for a very long time. At the time, I also had a couple of other part time jobs and I became a movement lady for an Esalen type centre in California. I worked with great people - I was the "movement lady" for Fritz Perls and Alan Watts and all these great people.

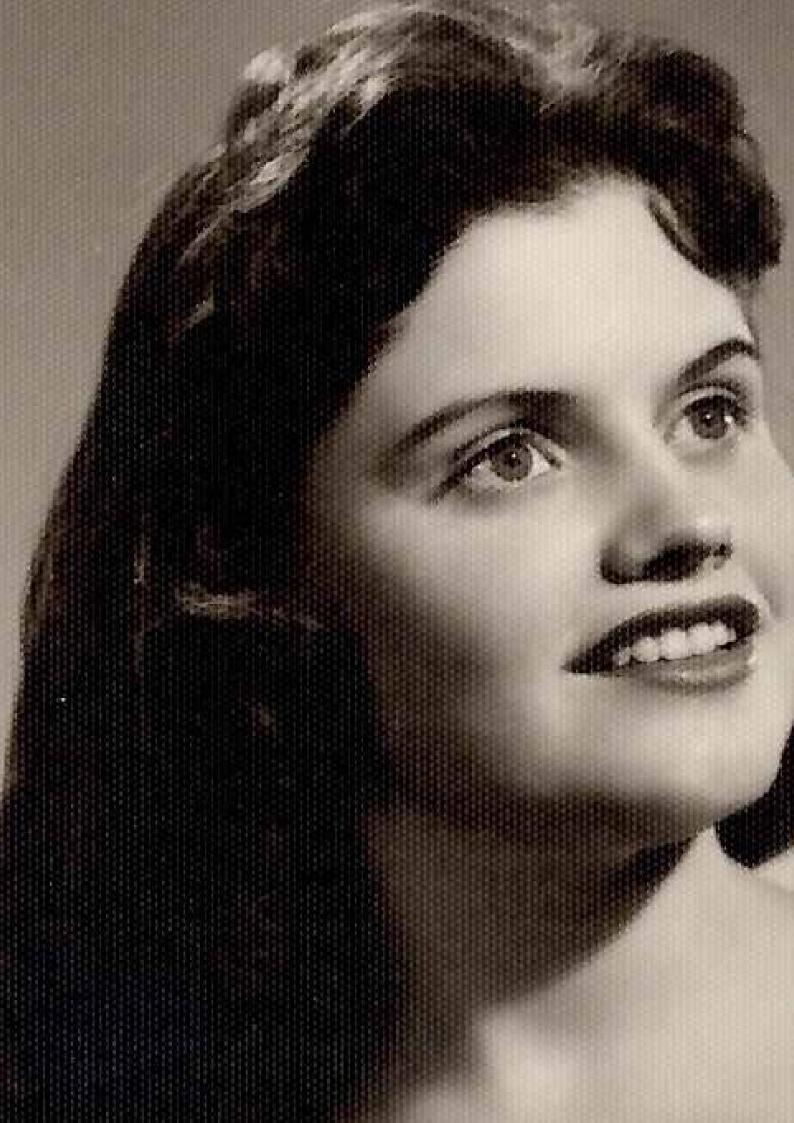
Julie: Can you tell me about the incidents that led you to meet Ida Rolf? Where was this? Do you remember your first session with her?

Judith: I co-lead groups with a psychiatrist named Dr Thomas Munson and he asked me to create a movement program for the people who took his weekend workshops. He saw me unable to straighten up and knew that I had been trying everything and asked how I was. I said, "you should be able to tell me, I have had scans and nothing is showing up and they are saying it's all in my head." He said, "no it's not in your head, I have heard of a woman they call the white witch Dr Ida Rolf, she is coming to Big Sur California in the spring and you should go see her."

I left there and started calling people at Esalen because I had taught at Esalen and they advised good luck because she is all booked. So I said "ok, I'm coming anyway."

This is the story many people have heard because I camped on her doorstep. She would open the door to let someone in or out and she would say "you're not still here are you?" I would say "oh yes I am waiting until you get a cancellation." So on the second day she opened the door and said, "I have an opening at 2pm tomorrow, be here."







## Gréalé

She must have done some homework on me wondering who the strange lady was on her doorstep. At that time, I was in my mid-twenties and I went into the session knowing nothing about it. She started working on me and I was surprised how this older woman (70s) used her knuckles and elbows to change tissue and it hurt. However, when she stopped, it didn't hurt, so I tested my movement because I knew my body and it had improved. I would say "Wow that's great how did you do that" and she would dig in some more and I would test it again, each time being able to straighten up more. I knew she had done some homework because somewhere in this session she said, "I understand you create movement programmes for different groups." I told her that's what I do and she said, "do you think you could create a movement programme for me, for Rolfing" and I said "sure", like I have said for many others.

She then went on to say she would have to train me and I asked why she would have to train me. She said "So you would know what to create." "Usually I just go and observe people, I ask questions and I create, then we go through the preliminary and we refine it" was my reply. She said very adamantly, "No, that won't work, I need to train you. Of course you will never make it in this field because you are too small but I still have to train you and the training starts mid-June". I said "Oh no Ida I am sorry, I finally get to go to Europe then, I have my plan to travel all over Europe" and she said "No, the class starts mid-June and you will have to change your plans". I started to say no again and she said "I said change it" and she said it strongly. In a tiny voice, I said, "okay".

# Massage Bodywork



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**Exclusive Interview with** 

**JUDITH ASTON** 

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New Column!

Reflexology: Heart & Sole

#### I SAW BODIES AS

shape and space.

I did leave her house and remember leaping to my friends' house across the lawn to tell them that Dr. Rolf had performed a miracle on me and that she had asked me to develop a programme for her.

I cancelled my trip and because I was late to book accommodations, everything was booked. I moved 16 times in the six week training. I could stay with people one or two nights and then had to move on to another friend's house or the motel. I was a basket case by the time I finished. I loved auditing and seeing so many body patterns and also realized I had something to contribute. It was great to sit in on Dr. Rolf's training where I was again intrigued by the potential to change patterns and influence movement.

One of the movement programmes I had developed was called Stage Movement for Actors. I had to create the ability for these students to see bodies because they were 18 to 22 years old and if they had to portray someone 45 they made it look like they were 95. To them, being that old meant they were really old. They didn't understand how they walked. I had to teach them first of all about their own body and then how to use body patterns to change themselves into their character.

That experience helped me in Big Sur with Ida's class. I would be in the back of the room with other auditors and Ida would ask the group what they could see about the person standing in front of the class. Someone would whisper to ask me what I saw. I would say well the pelvis is higher on the left. They would go and tell Ida and she would say "well of course you're right but it's the psoas that is short on the right".

I didn't see muscles but Ida did, if you have ever heard stories, she would say "it's the upper part of the psoas just under your middle finger on the right." She was unbelievable. I did not see bodies through anatomy, I saw bodies as shape and space. People started hanging out with me at the back. I don't know if Ida was okay with that in the beginning but then she said "maybe you could teach a class for our students".

I did sometimes wonder if she wanted me there or not or did she just need a Girl Friday? I ran all her errands, I picked up her cleaning, I took all her messages and called people for her. So I thought maybe that was all she needed but then she started asking me about my opinion on movement.

That was the beginning of my connecting with Dr Rolf, how I found her and how I loved her forever, I still do and it was great. Studying Structural Integration with Dr. Rolf introduced me to bodywork. The field and its effects gave me numerous opportunities to apply many of my skills and interests and develop from there.

#### EXPERIMENTING



Julie: You were asked by Ida to develop her movement programme, how did you feel at the time? Did you realise the importance of this at the time?

Judith: Not at all. She turned me down on the last day of class. She waited until everybody had left and walked me out to my car which I thought was strange. She said "I have decided not to take you" and I said "sorry, what, surely I have misunderstood." She said "I have decided I am not going to train you after all." I asked her why and she said "you are too small, you just can't make it."

So I asked "why are you telling me now?" and she replied "I have just decided."

"You didn't know this a few days ago or maybe a few weeks ago, you couldn't have let me know?"

She said, "no I have just decided now."

I told her she was wrong and hopped in my Firebird 400 and zipped down from Big Sur to Los Angeles, gunning it all the way and immediately enrolled into massage school.

Because I had been teaching at the college for five years, they wanted to make me a teacher at the massage school. This was working for me because I asked "would I be able to sign off on people I train who want to go into Rolfing?" They said, "yes we will authorise you" and I thought to myself "awesome I will become a teacher", (as she chuckles). I got my massage qualification and I gained ten pounds and I heard Ida was coming to Los Angeles for something. I wrote to Ida and asked to meet with her. I found out the cost for the full training which was February 1969 in Los Angeles. I went into my little savings, wrote a cheque and walked in to meet her.

Have you ever seen the Rolf walk? It's the waist line back, feet close together, pelvis tucked under slightly, elbows out, knee goes forward, top of the head up, chin in. I had the cheque in this hand and I walked like that and I said, "I have gained ten pounds." I walked by her and paused with the cheque and she took it and said "Alright, alright, alright". So I said "Ok then, am I accepted for the training?" She said, "yes you are". I did the training in February 1969 and I did the auditing in June 68.

#### Julie: Tell me about the auditing process?

Judith: Do you not have auditing?

(Dr. Rolf created the 6 week auditing class so that students could begin to train their sight and knowledge of the series before doing their practical training.)

Julie: No, we go straight into the training. They all have manual backgrounds although we have taken a couple of movement students, who I call our "wild cards." They have been really good - great hands with no preconceived ideas.

**Judith:** I think that's what I would probably have been called back then, her "wild card". Because she really didn't want to take me.

"The important piece isn't that someone is a movement therapist it is who they are besides being a movement therapist."

Dr. Rolf had asked Dorothy Nolte to supervise my practitioner training sessions with women and children who practiced in another room so Dr. Rolf could supervise the "bigger folks" in the main room. On the last day of the class, she said, "Dorothy Nolte has a movement program: maybe you could study with her."

So I did a lesson with Dorothy. It was lovely: body sensory work on the floor. I immediately called Dr. Rolf in New Jersey and said, "It's not at all what I had planned for our movement education. Do you want me to go ahead or not?" Dr. Rolf then gave me the go ahead to create my program.

Dr. Rolf gave a few exercises she liked in training classes. I included some of these. For example: toes up, feet up. I saw the need to create skill sets for practitioners, helping them assess, problem solve, and eventually teach, helping them with ways to communicate with each individual client. All these skill sets were needed so I kept creating. Because Ida did all my ten sessions, then she did advanced work, she didn't always use the recipe. I commented on that. I said "Ida, you are making everybody do the recipe only". She said, "I want everybody to do the recipe for five years."

I started experimenting and you are going to laugh at me Julie but I taught a class in England and said to this group "maybe you could start with the upper extremities instead of the lower in this sequence" and they were shocked. They were yelling heresy!!

I insisted with one practitioner because I could see his client could use the upper first and it totally threw him off. I felt bad because he was confused. So I started creating all new classes for these skill sets for people and that's how that grew.

Julie: What I like about the KMI /ATSI training is that in Part 3 the students are starting to find their own style and adapting it to suit their own style. But I do feel that you should follow a recipe for a long time until you understand it well enough to be able to mix it up. It's like baking a cake and making sure you follow the recipe until you understand how all the ingredients work together. You can't miss something out or add in something else.

**Judith:** Exactly, you know Ida had this worked out. The woman was brilliant. Also, from a marketing business point of view, people would travel to make sure they could get all their sessions and not be left unfinished. Once you have learnt from it then yes that's the time to start adapting it.

## WONDERFUL SURPRISE

Julie: What made you decide to move away from Ida and the training?

Judith: I didn't decide, it just came to a natural end. I was doing a lot of presentations and I did one for a national psychology convention where someone in attendance listened to my presentation and wrote an article. I was Dr. Rolf's first faculty person, I worked on the movement and I started training people in 1971. I trained Rolfers between 1971 and 1977 in body mechanics and postural assessment. I think I worked with two hundred Rolfers as well as many people from movement practices. Then one day, a wonderful surprise - what happened was, things were expanding beautifully and Ida had asked me to work on her. I was extremely honored because of my care and admiration for her. I worked on her in Big Sur, New Jersey, Florida whenever we could meet. I assisted in several classes so I could be available.

Naturally, I incorporated the ideas that were coming to me in the work I did on Ida. I figured if she was not liking them she would have let me know, yet she hadn't said anything. At the same time that I started teaching and traveling around the country. Emmett Hutchins and Peter Melchior became faculty followed by Michael Salveson and Jan Sultan and several others. I was the head of the movement education division because I had created it and I was on the board of directors. I got wind of a board meeting and I said "Oh I didn't know there was a board meeting." The person looked frozen and I deferred, saying, "that's ok, I can't go anyways". I didn't have a clue that the meeting was about me. I got called in to another board meeting about an article saying that Judith Aston, an originating genius had created soft

#### Rolfing.

I got called in and they asked me to explain the article. I had to say "I'm sorry I don't know what you're talking about". I knew nothing about the article. They insisted I should remember being interviewed. I had never been interviewed.

Dr Rolf knew I worked on the diagonal pathways rather than perpendicular. The truth is I had never used the term soft Rolfing, but I did teach about vectors, body mechanics, and how to save the hands – all of which would make the work easier and more efficient. But people felt I had been disloyal to Dr. Rolf. Unfortunately, this issue never got resolved and eventually got a bit ugly.

I need to digress slightly to give you one of the pieces that lead into all of this. In 1976 I organized a trip for 16 Rolfers to go on a 13-day trip down the Colorado River. Once we got past the first couple of days and we realised we were stuck with each other for that many days we made it work well. At the end of the first night trying to sleep on a tiny pad I went to the leader of the group and said "do they have any helicopters that can fly in here and take me away" he said "no, you're stuck here. "Oh no, I couldn't sleep last night I was so uncomfortable" and he said "well princess you are going to have to deal with it." So that night I thought, what can I do? I took my clothes out of my duffel bag and stuffed them in all the unsupported areas to support my body in neutral and I slept like a baby. I started putting this same idea of support into my sessions and I realised that I was more accurate with my strokes and I was more accurate in my sessions. I started introducing it into all my sessions and into my classes.

The teachers decided Ida should see this so during an advanced training, someone said "Ida, Judith has something to show you." I said, "I'm not sure if this is appropriate right now" (with a little hint of humour in her voice). I told her the story and explained the pillow propping and I could see by her Triple Taurus expression that I was in trouble. "Why are you pampering the client, you don't need to pamper the client." She said, "it doesn't hurt when you get to that layer because you are not at the right layer. If it doesn't hurt, you are not getting it"

Afterward, I wondered how could I have missed that message. I had been teaching so many students how to work deeply without causing unnecessary pain for themselves or client. I began to question what I was doing there.

The stress went on for a while and I realised it wasn't going to work. I had more than enough material to teach if people wanted the information. Once I changed the alignment model of the details of good posture, a new paradigm emerged and things happened so fast I couldn't keep up.

So, I didn't plan on leaving: it just happened.

Julie: Is this when you developed Aston patterning or was it something else before then.

Judith: Originally, in 1970, I called it Rolf Aston Structural Patterning. In 1972, I started describing the movement work as Neuro-Kinetics. By 1976, I had uncovered a different biomechanical paradigm, so I called it Aston Patterning. I kept describing new forms of the work. In 1977, I created a bodywork form called Arthro-Kinetics. In 1979, Myo-Kinetics. 1980, Ideo-Kinetics. As I added more and more forms, for massage, fitness, ergonomics, seniors, etc., I put all forms under one name: Aston Kinetics.

Julie: Where did your work go from there? Did you have a clear plan of how it was going to progress?

**Judith:** It progressed quickly. It wasn't long before I started to design ergonomic products. By 1983 I had created 300 product designs. I had 5 patents. It just came fast and furiously.

Julie: I was lucky enough to take a workshop in Australia with you and your husband (Brian Linderoth) taught alongside you. How did you two meet?

Judith: I used to teach 5-day intensives where people were welcome to come to receive bodywork, movement group classes, share several meals together, it was a community experience. Brian came to one of those, he came as a massage therapist, fitness trainer, he was a swimmer and coached swimming. He taught a few classes at Boulder School of Massage and he came to one of these intensives and decided he wanted to train, lucky me....

So he trained and after that we became friends, then good friends, then a year and a half later we got married. We have taught together since mid-1984.

# "BALANCE IS THE MOMENT TO MOMENT TO MOMENT NEGOTIATION OF ASYMMETRICAL DIFFERENCES."

Julie: In Australia, Structural Integration has had a new lease of life through KMI, and the training is going from strength to strength. How is Structural Integration looked at in the USA? How do you feel it has changed? What would you like to see happen for the next generation of Structural Integration practitioners?

Judith: One of the dilemmas with Structural Integration is that the trainings vary widely depending on the teacher, and with so much variation, it can be challenging for one organization to guide its progression. Because of what Tom Myers has organized and by building a system with a specific focus that is anchored to and fits with Anatomy Trains, there is more consistency. I would suggest that this is key to its momentum and ability to attract a whole new generation of SI practitioners.

I would also like to congratulate you Julie as I know the job you have taken on is significant. Running my own company, I empathise with you knowing how much this encompasses.

I am so glad you and Lou Benson are working together. Through Lou, you were interested in doing this interview.

Julie: Structural Integration has a new lease of life and a lot of newer practitioners maybe don't understand the history. So for me I feel it is important to acknowledge where the work comes from and who it comes from. It's also about connecting the Structural Integration community.

**Judith:** In this day and age being able to easily communicate with each other around the world, makes it easier to be able to be cooperative with others and play well together, which brings a certain balance. My definition of balance is "the moment to moment negotiation of asymmetrical differences."

"Balance is the moment to moment negotiation of asymmetrical differences."

Julie: One more question: One piece of advice you would give to your younger self?

Judith: Be PATIENT., I am so fast and, when I was dancing at UCLA, when anything needed fast movement I got the part. My brain is fast, my wit is fast and my thinking and problem solving is fast. While I appreciate the positive aspects that come from this skill, my impatience would trip me up physiologically and spiritually. I am similar to my Firebird car that I drove from Big Sur. I had all the elements - fire, flying, speed.

Julie: Obviously your fire and determination is what led your amazing career so I wouldn't change a thing. It's what has driven you and I think you did it perfectly.

Judith: Oh, about perfection: I might say to a student, "I tell you why I want to give you this feedback - it appears as though you are trying to perform for me and other faculty and not make a mistake. Your cautiousness is interrupting you. So here's the deal: if you make a mistake you get to learn at least two things. You get to learn what not to do and you get input from your teacher on how to do it differently. Let go of the stress of perfection and make grandiose mistakes." This is another example

## STRUCTURAL INTEGRATION THE JOURNAL OF THE ROLF INSTITUTE® SUMMER 2001

FUNCTION AND STRUCTURE

"So here's the deal: if you make a mistake you get to learn at least two things. You get to learn what not to do and you get input from your teacher on how to do it differently. Let go of the stress of perfection and make grandiose mistakes."

Judith: Moshe Feldenkrais taught a class in 1972. He was teaching in one room in Big Sur and Ida Rolf was teaching in another and I was going back and forth. One day he was feeling frustrated. I said, "I'm sorry, I need to go back over to Ida's class" He said "yes, yes Structural Integration, if she can call it Structural Integration I am going to call this work Functional Integration" and that's where it came from. Talk about being at a moment where something gets created, that was fun.

**Judith:** Julie, thank you for your interest. You are a fun interviewer!





#### **BIOGRAPHY**:

Judith Aston is widely recognized as a pioneer in the art and science of kinetics for her discovery of the Aston® Paradigm and consequent development of the many forms of movement training, bodyworks, fitness programs and ergonomics of Aston® Kinetics.

She created and developed Aston Kinetics as an educational system of movement and bodywork that aims to treat a person's physical body as something that is unique to them. Rather than to enforce physical symmetry, Aston Kinetics seeks to recognize the asymmetries that are natural to a person's body. Aston Kinetics is a holistic approach and works to ensure that the whole body is in sync with itself.

Early in her career, from 1963 to 1972, Judith taught movement, physical education and dance for performing artists and athletes at Long Beach Community College. In 1968, at the request of Dr. Ida Rolf, she developed the movement education program for Rolfing SI and taught this program until 1977.

In 1999, Judith was honored by the Association of Humanistic Psychology for her work as a somatic pioneer, 2006 National Office of Aging - Best Practices in Health Promotion Award, 2008 AMTA President's Award for Distinguished Service, and was inducted into the Massage Therapy Hall of Fame at the World Massage Festival in 2011. She was also included in a documentary by Emilie Conrad for the Moving Legends: Individuals who have created somatic systems beginning as dancers. She is particularly proud of her charter membership in the Nevada Inventor's Association.

Judith divides her time between presenting and teaching bodywork, fitness, performance, and movement workshops. She leads many Aston Kinetics training and certification courses, as well as speaking at professional conferences. She devotes a portion of her time to work on her ergonomic product designs and re-envisioning how products can work optimally for the body in various environments. Judith lives with her husband Brian Linderoth in Lake Tahoe, Nevada, the headquarters for Aston Kinetics, and part time in Hawaii.

Judith is tentatively scheduled to teach at the summer school in Maine in 2018. For more information on Judith go to: http://www.astonkinetics.com

### SI MEMOIR

Her keen blue eyes peered down at me as if from a great height. My being taller than Dr. Rolf had zero bearing on her towering presence. Could I come to her class, I asked? We stood in a church basement where she had been lecturing about gravity's effect on the body and demonstrating her work. It was 1969.



## Mary Band

adidjah Lamas, one of fourteen Rolfers in the world at that time, had taken me through a series of mysterious treatments. Hadidjah let me believe that what she was doing with my body was magical, but this strange old woman set my experience squarely on the ground. I now understood why double pirouettes had become easy, whereas prior to the "magical treatments" they were unreliable. What Rolf had to say about the physics of movement meshed with what my ballet teacher, the famous Mia Slavenska, claimed as the secret of flawless performance: gravity.

At loose ends after earning a Master's degree in dance, I was curious to learn more from Dr. Rolf. I was meek and skinny and not at all the kind of student she had in mind.

I could see her beginning to say "no." "But I don't want to do the work," I said, "I only want to learn to see." Later I understood that teaching people to see was one of her great challenges.

In those days there was no Guild or Institute—there was only Ida, Rosemary Feitis, then her personal assistant, and whatever facility was available. That January the class was held in the Bel Air Sands Hotel on the edge of Beverly Hills. Peter Melchior was one of four students that Dr. Rolf was training in an ordinary bedroom suite. The work was performed on the floor on mattresses that had been taken off the beds. Emmett Hutchings and I were auditing the class. The curriculum was straightforward—you sat and watched other students sweat it out. If you passed muster (were able to answer Dr. Rolf's questions, and could see),

you might be invited to train in the next class. Across the hall in another bedroom, Dorothy Nolte was teaching Judith Aston how to work with children. I remember that it rained for the entire six weeks.

At the end Dr. Rolf invited Emmett and myself to come to Big Sur. We sat in the hotel coffee shop, stunned, wondering what this would mean for our lives.

Before training, we had to have massage licenses. I got mine by mail order. Judith Aston taught me some strokes and I set about getting fifty signatures on my form.

So that's how I found myself commuting up and down the California coast in May 1970. Emmett and I shared a cabin in Big Sur and walked through the trees to Dr. Rolf's house every morning. A skinny guy called Jan Sultan was among the auditors. Dr. Rolf called me "the little school teacher."

Ida Rolf had a big job. She needed to get this bunch of hippies to see structure and touch bodies accordingly. But she also wanted to teach us how to think. To that end, she held forth on Gaston Bachelard's Five Levels of Thought, Alfred Korzybski's General Semantics, and L. Ron Hubbard's emotional Tone Scale. She wanted us to view reality as relationship, and human beings as energy fields. I had majored in music and dance—I was utterly out of my depth.

At the end of June we drove down Highway One as Rolfers. We stopped in Pismo Beach where a palmist told Emmett there was a white haired personage that he would follow, and that he would travel to Brazil. Which is exactly what happened. I was too timid to have my palm read. The truth was that I had embarked on this whole adventure because I was lost and lonely, and I found the atmosphere around Dr. Rolf to be mesmerizing. I was interested in the aesthetics of the work—in making people look better. I had no particular ambition to help them in any other way.

Although the Polaroid photos indicated positive changes in my clients, I knew that I didn't know what I was doing. So I enrolled in a second training course the next time Dr. Rolf came to Los Angeles. I'd always had the capacity to identify patterns visually, but this second time through Rolf's "recipe" helped inform my hands. Big-hearted Stacy Mills was assisting the class and she took me under her wing.

Judith Aston, meanwhile, had developed Structural Patterning at Dr. Rolf's request. This movement education program was based on exercises Dr. Rolf had borrowed from an osteopath named Amy Cochran and was meant to help clients sustain their structural improvements. Judith made it into a kind of ritualized movement meditation. It was an obvious choice for me to study with Judith.

A few years later, I was asked to work with a five-year-old child who had drowned. He was severely brain-damaged and his whole body was contorted in a spiral pattern. I was at a loss as to how to help him and asked Judith to come with me on one of my visits. I remember that she sat watching his movements as he spiraled in and out of contractures. And then she took his wrist and followed it as his body twisted. She seemed to be making up this indirect approach on the spot, supporting him as he entered his spasm, and following it as it unwound for a few moments of release. I've often wondered whether that visit was the genesis of the approach Judith called "arthrokinetics" after she built her Aston Patterning school. (Little Donald eventually passed away.)

It was strange to have Judith Aston crossing my path so many times. Being in the audience at her Masters thesis dance concert was what had inspired me to earn my own degree in choreography at the University of California. Who knew either of us would end up here?

And yet I wasn't really settled on this path. That became clear when I married and dropped out of the bodywork and movement world. My only connection with the body was teaching aerobic dance classes at a local church. I had two stepchildren to raise, and a lot of growing up of my own to do. That little family, and the hardships we endured together for nine years helped me learn to be compassionate and intimate with others' lives. When it was over, in the mid-eighties, I applied to re-join what was by then called the Rolf Guild. The director, Richard Stenstavold, remembered me from the days when a group used to meet with Dr. Rolf in his living room to discuss the production of her book. I was reinstated after taking a class with Jan Sultan, Rolf guru extraordinaire. Jan was actually better at demonstrating the ten series than was Ida herself. This time I learned how to use my hands.





ow that I knew what I was doing, I developed a practice and was able to help people. It was satisfying, but movement remained my first love. I took a Rolf Movement® Certification program then being offered by the Rolf Institute and wrote a book based on that experience. It was called Balancing Your Body: A Self-help Approach to Rolf Movement®. Shortly after the book came out, in 1993, I had the opportunity to study with Hubert Godard, a movement theorist whose work had begun to be embraced by Rolfers. I remember walking into a studio in Philadelphia and seeing a chart on a white board. That chart of Godard's "tonic function theory" has mapped the direction for my thinking, teaching, and writing, ever since.

In the nineties I began teaching at a local massage school—basic anatomy, body usage, and "deep tissue integration," a course I devised that was based on the first three sessions of the ten series. I also offered "playshops" -- movement-oriented classes that explored Godard's idea that changing how people sense their bodies and perceive the world could affect structure and coordination. I took a lot of classes too-cranial therapy and visceral manipulation, subtle energetic work, soft tissue joint mobilization, and an introduction to the theory and practice of Bodynamics. a somatic psychology developed by a group of Danish researchers. I also studied aikido, belly dancing and rock climbing (very basic), taking to heart Godard's advice that broadening your coordinative repertoire affects your capacity for self- expression. I was ever on a quest to serve my clients more fully, but also to find my own way of working.

In the early 2000s I wrote a second book, The New Rules of Posture. This was my attempt to couch Godard's work in terms that could be understood by the general public. It gives me joy to know that people have found it helpful. I'm especially happy when someone writes to me after finding the book in a local library. In response to readers who needed to see as well as read, I produced a DVD, Heal Your Posture. That was fun—my father had worked for Paramount Studios, and I had always wanted to be in a movie!

I'm in a stage of life now—I just turned 75—in which I find myself easily drained by one-on-one work with clients. The intimate energy exchange no longer seems appropriate for where I am on my journey. I see a few clients each week, special ones who are more interested in studying themselves than in having me fix them. Teaching is a different matter. In workshops I find the group mind and group body exhilarating. The energy of a group buoys me up.

Looking back, I see that I was always seeking to become a communicator-Dr. Rolf was right about "the little school teacher." I've also come back to my beginnings—to movement. When it is deeply experienced, movement-whether infinitesimal or gross—informs the organism in a way that can shift behavior towards freedom and empowerment. My new book, Your Body Mandala: Posture, Perception and Presence is written to that end. In it I talk about fascia, interoception, neuroplasticity, structural integration, bio-tensegrity, and how spatial perception shapes posture and action. Through linked audio and video files I also share explorations that will help readers feel what I'm talking about. I guess this book is my legacy.





## "MOVEMENT

REMAINED MY FIRST LOVE."





## Expérience

o write this little memoir, I looked back through my notebook from that first training with Dr. Rolf in 1970. I was an obsessive note-taker. I had to laugh at one entry: evidently on May 21 I smoked a little dope and had an epiphany about the mobility of the spine and the flow of spirit. After ruminating on that for two pages, I wrote the following: "Coming here (to Big Sur) to experience it, not even to learn, only to experience. It is possible that I don't really want to do this—it may turn out that way—that I can see the beauty and truth of the spine and yet not want to be involved in creating it."

But the old lady didn't let me off the hook so easily.

# MARY BOND

ary Bond has a Master's degree in dance from UCLA and trained with Dr. Ida P. Rolf as a Structural Integration practitioner.

She is a movement instructor at the Rolf Institute and teaches movement workshops nationally.

Mary is a former Chair of The Rolf Movement® faculty. The author of Balancing Your Body and The New Rules of Posture, she has also published articles in numerous health and fitness magazines. She lives in California.

Mary will be teaching in Maine August 14th - 16th at Tom Myers summer school: https://www.anatomytrains.com/product/the-sole-of-mobility/

For more information on Mary and her workshops go to: http://healyourposture.com





#### **APHORISMS**

#### FROM IPR AS I RECORDED THEM IN 1970

asic direction for "processing": take the tissue and bring it in the direction that lessens aberration, and then demand it should do a physiological movement. In the thorax this movement is breathing.

Patients don't want to understand, they want to be fixed. This is the biggest problem, yet reeducation is the object of the exercise.

To be a good practitioner you must live, must be, in three-dimensional space. Everything you do is directing the body into appropriate space.

Reasons are merely antecedent states that may or may not have any causal relationship. Ask not "why?" but "what goes on here now?"

When driving a car over a cliff, you can keep a poker face, but you can't keep a poker anus.

No matter where you have come to grief, the grief gets inscribed in the pelvis.

The crux of the problem may not be the cause.

Regarding shock trauma: when they're in a sweat, they are taking care of themselves; when they are in a chill, you have to take care of them. You never put a body together by manipulation—you only take it apart that way. You get the joints to balance only by invoking the activity of the individual.

We are in the business of making superior humans. We must face this responsibility by not just "fixing"—to indeed refuse to fix.

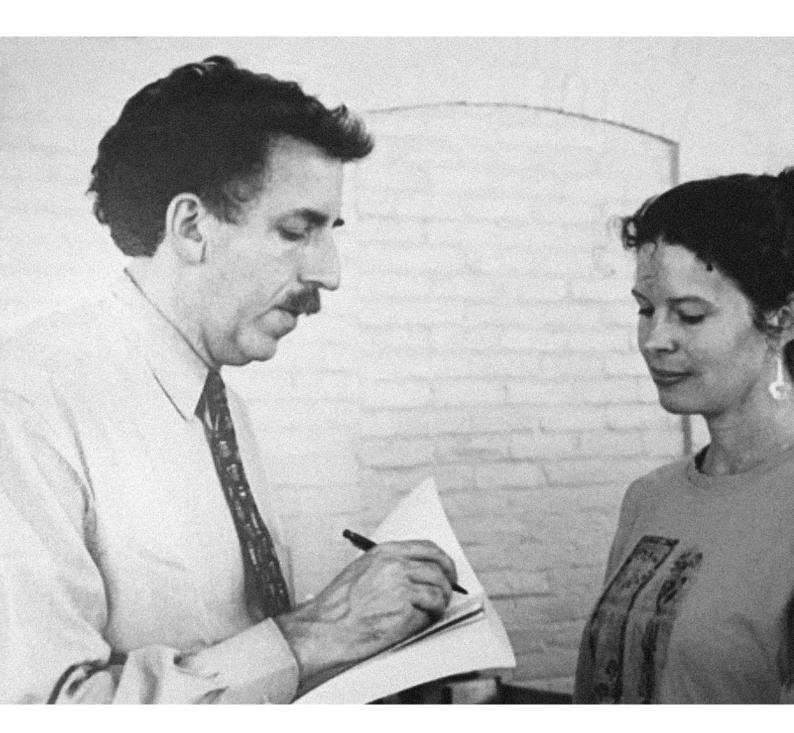
Use the right words—the ones that have magic in them to reach the mind of the client. This produces integration.

When the work is done properly, a core and sleeve emerge. The core is the "being" part of the person. The sleeve is the action body. You should be able to work with the doing part of you without tearing down the being part of you.

Lives change, but not if they insist on returning to old postures. You must get them past the point of no return. Get them to take responsibility. You can't do it to them.

When you are working fully and truly into the body, it's response will reverberate through your own.

# Carrie Gaynor TEACHER IN FOCUS



Dr. Ornish is signing my first copy of Reversing Heart Disease: The Only System Scientifically Proven to Reverse Heart Disease With He invited me to apply to work at one of his retreats as a cardiac rehabilitation nurse, a path I seriously considered. (1996)



Prompt: An honest account of your journey with Anatomy Trains and Tom and how you have changed over the years

#### HOMEWARD BOUND THE INCREDIBLE JOURNEY

"We shall not cease from exploration, and the end of all our exploring will be to arrive where we started and know the place for the first time." T.S. Elliot

I would not be who I am today had I not walked into Tom Myers' course, Learning to See, at a Kripalu Yoga Teacher retreat in 1996. Nor would I be as fulfilled as I am today in my professional life. I love my daily practice as a Board Certified Structural Integrator, a Fascial Stretch Therapist, a TriYoga Teacher and a senior Anatomy Trains teacher. I did not start out, however, as a small business owner with a dreamy career. I began as a nurse. This is a chronological tale spanning 20 years, my journey with Tom and the guardianship of the Anatomy Trains model.

#### 1996 - 2001 Transition from Nursing.

I initially pursued nursing to become a midwife. For many reasons, I instead found myself working as a cardio-thoracic surgical nurse and then moved into cardiac rehabilitation. As a cardiac rehabilitation nurse and yoga teacher, I began to follow Dean Ornish MD and the application of yoga practice to combat heart disease. Yoga had already helped reduce my own chronic back pain. I wanted to be able to understand why my students, and I, were experiencing pain and focus on yoga as a therapy.

thout Drugs or Surgery .

## LEARNING

and Exploring

That first class with Tom started me on the path that has been pivotal to my life and practice today. I started by attending every regional anatomy course he taught within a 300 mile radius from my home between 1996 and 2001. Our text book was Body 3 (Cubed) and I still own that tattered single sided black and white version. My synthesis of Tom's anatomy lessons and yoga became part of my nursing practice as I taught yoga to the cardiac rehab patients. As a group, these people came with multiple structural issues that needed consideration. All too soon I found myself limited by the conservative and somewhat narrow vision of the hospital setting in which I was operating. I needed to go.

#### 2002 - 2004 KMI Training - Best Educational Experience EVER.

The decision to leave nursing practice for Structural Integration (SI) deepened with my experience of the Rolfing Structural Integration series. At that time, I lived with a lot of physical pain. With each successive session, I noticed that pain lessen and I simultaneously experienced a deeper sense of 'self'. My own more integrated structure also made yoga and other activities more pleasurable. I began to "see" more into the structures in my yoga students. Applying to Tom's KMI program (Tom's contemporary adaptation of the Rolfing program) above other schools was a natural progression.

The first edition of the Anatomy Trains book was published in 2001. In 2002 I was accepted into the KMI program. Coming from nursing, I knew I needed to acquire touch skills before starting.

The most amazing bodyworkers I knew were Leslie Kaminoff and Victor van Kooten, both esteemed yoga teachers with whom I studied. Under their tutelage, I learned to touch with sensitivity and presence, a craft I continue to hone.

Learning SI from a master teacher like Tom will remain one of the most exceptional educational experiences of my life. The KMI classroom is a sanctuary for learning and exploring. Under Tom's direction, the KMI 12 series unfolded session by session, suggesting a pathway to help others live with less pain, move through trauma and achieve higher levels of physical and emotional intelligence. Who would not want that?

In 2004 I graduated and went home to start a KMI practice. Becoming self-employed afforded the opportunity to forge my two passions - Structural Integration and Yoga - into a business model. The name of our business changed to reflect a new vision. Absolute Yoga became Absolute Yoga & Wellness. I shifted from teaching Gentle Yoga and began to develop Yoga for the Health of It. This dynamic balance between manual and movement therapy became the foundation of my practice model.





In back(standing): Ashby, Brad Yantzer, Mike Duray, Charmaine Cortez, Mark Finch, Joanne Avison (TA), Ann Frederick, Chris Frederick, Jamie Huntsberger, Koichiro Togo, Gary Edge, \_\_\_\_\_

In middle (sitting): Tom Myers, Claire Wargaski, Polly Mendez, Sang Curtis, Larry Phipps (TA)

In front (sitting): Kathleen Mary, Lauren Christman, Carrie Gaynor, Laurie Moretto (TA)



Back Row: Yaron Gal-Carmel, Eli Thompson, Mark Finch, Bob Vinson, Peter Elers, Larry Phipps

Middle Row: Lauren Christman, David Lesondak, Simone Linder, Jazz Hands, Carrie Gaynor

Front Row: Gary Edge, Joanne Avison, Tom Myers, Laurie Moretto



My debut teaching an Anatomy Trains line took place at The Breathing Project, Leslie Kaminoff's yoga studio in NYC. Presenting in front of both of my teachers was a moment to never forget

At Tom's home, David, Tom, Ella and I enjoy a little down time.

David would go on to publish Fascia: What It Is and Why It Matters (Handspring Publishing 2017).

## LEARNING,

Evolving, Teaching

#### 2005 - 2008 Learning, Evolving, Teaching.

The first Anatomy Trains (AT) faculty group began with a request asking for KMI graduates interested in teaching AT. With some trepidation, I enthusiastically raised my hand confident that this was a path I wanted to pursue. Our initial group was 14. We would finish 3 years later with 7.

During the years 2005 to 2007 I was an AT apprentice teacher. The road to teaching AT was arduous, unstructured and on the spot. Those demanding moments were offset with opportunities to assist Tom at events such as the Canadian Holistic Health Conference in Winnipeg, Canada or for segments of KMI trainings. Apprenticing also took place informally and over those years I traveled to Maine in the summers, often accompanied by my daughter Ella. I have so many memories like those reflected in these pictures - full of laughs and memorable teaching moments.

#### Solo Flights and wow moments in fascia.

One of the first AT courses I taught was at the Body Therapy Institute in NC. That experience was followed directly as I joined Larry (the Paw) Phipps to co-teach the first full 'non Tom' KMI training ever. The responsibility to disseminate the teachings was a challenge and I suffered more than my fair share of sleepless nights. Thus began the process of Tom handing over the reins to his faculty. Guardianship of the AT legacy was being handed down and it was heavy.

#### tatal

### **IMMERSION**

#### Professional Status and Certification.

This first AT faculty was also called upon by Tom to support establishing SI as a profession. That meant membership in the newly formed International Association of Structural Integrators (IASI) and attending the first IASI symposium held in Seattle, Washington.

On the heels of that first IASI conference came the first Fascial Research Congress (FRC), in Boston, in 2007. Our community would hear about research that showed the fascial system acting like an adjustable sliding system with an intrinsic intelligence all its own. Mind. Blowing.

The first Certification Exam for Structural Integration was held in conjunction with the FRC. The exam itself is a means to unite SI practitioners and provide an official working title, Board Certified Structural Integrator, independent of school affiliation. I would go on to work tirelessly for two years in support of these goals both on the Certification Board for Structural Integration (CBSI) and IASI boards. These early signals suggested that the SI community would embrace the steps necessary to become a 'profession' in the same sense that nursing is a profession. This flow would be followed by an ebb... the rose-colored glasses came off and we rolled up our sleeves and settled in.

#### Total Immersion (Absorption / Guardianship)

I think of these years 2001 to 2008 as my total immersion into everything AT and fascia. I had become one of the first Certified Anatomy Trains Teachers, co-taught the first full KMI course without Tom's physical presence, become proficient at teaching AT in a variety of settings and presented at a national convention. I became a member of IASI and served on the CBSI and IASI boards. On the home front, my private SI practice was flourishing and evolving to incorporate all I was learning. Our yoga studio began offering 500 hour Absolute Yoga Teacher Trainings and I steeped them in AT anatomy.

Another highlight of this total immersion period was co-teaching An Integrated Approach to Treatment at the Natural Health Practitioners of Canada National Convention in 2008. There, we taught participants how to incorporate yoga into their manual therapy practices. Our course was filled to capacity!

6 poses for a good night's sleep Quiet your mind 5 poses for 5 INNER CALM Why massage works Transform your life with yoga of the heart How to eat like a yogi The best yoga vacation + 9 amazing destinations PLUS SUMMER SPORTS SPECIAL

#### A DECADE

# af AM

#### 2009 - 2014 Deepening.

Tom started 2009 with the release of the 2nd edition of AT, which integrated relevant new research to provide scientific rationale for the AT model. Tom also turned 60 and held the first KMI reunion attracting practitioners from the first decade of KMI trainings, as well as Tom's friends and colleagues from a variety of SI schools. I started 2009 at the Atlantic Yoga Conference in Halifax, Nova Scotia presenting Fascia and Applied Tensegrity: A Framework for Practicing Structurally Sound and Integrative Asana. It was my own synthesis of the material I had been studying for the past 10 years.





A celebratory hike after teaching at the NHPC. Lake Louise, Banff National Park, Canada 2008



My favorite experience of this period was co-teaching the 2011 KMI course with Tom and deepening relationships with Lou Benson, Kelly Chadwick and David Vendetti.



Stretching the Superficial Back Line with FST

Mentoring new teachers was a wonderful learning experience for all and forged new and lasting relationships.

Seen here: Carrie Gaynor, Laurie Nemetz, Amy Baker and seminar host, Andrea Littlewood.

# Anatomy Trains IN TRAINING

The combined science from the FRC and Dr. Robert Schleip's development of Fascial Fitness (FF) led to a new course offering called Anatomy Trains in Training. The study and teaching of this material brought about a significant change in my SI practice and more so in my yoga teaching. In the blink of an eye, I could see movement flow through the vibrancy, elasticity and gracefulness of their tissues – or not.

This was also a time of synergistic intersections between fascial anatomy, FF and my two professional yoga teacher certifications (Ester Myers Yoga and Kali Ray TriYoga Flow).

Interestingly, most of the concepts of FF already existed within the TriYoga Flow methodology and brought together everything I loved about yoga practice and fascia.

Additionally, I certified in Fascial Stretch Therapy (FST) as it mirrored the AT lines and thus added to my understanding of them. This enhanced my teaching and professional practices.

This deepening era saw the maturation of the (now) senior AT teaching group and the company (Kinesis). There was a need to expand the faculty and a second AT Teacher Training began. For the next three years I would be closely mentoring a few of these talented people.

# Anatomy Trains IN TRAINING

#### 2014- 2017 Expansion

The third edition of AT was published in 2014. Again we were pushed through another fascinating portal. The application of AT to gait analysis and functional movement patterns netted a new course offering ~ Anatomy Trains in Structure and Function (ATSF).

Tom / Kinesis called for a Brain Trust faculty meeting in Bermuda 2014. This was another call to guardianship and a more dynamic and collaborative transfer of the reins to faculty members. Twenty-one AT teachers and apprentices attended this event. After this, smaller groups of us gathered at the 4th FRC and continuing education courses in Maine.



A group photograph taken at the AT Brain Trust Faculty meeting in Bermuda May 2014.

**Back Row:** Michael Watson, Sherri Leigh Iwaschuk, Wojtek Cackowski, Simone Linder, Jason Spitilnik, Beatriz Soter Carrie Gaynor, Eli Thompson, Kirsten Schumacher, Ari-Pekka LIndberg, James Earls, Quan Myers, Tom Myers

**Front Row:** Don Thompson, Karin Gurtner Merideth Stephens, Lou Benson, Holly Clemens, Julie Hammond, Kelly Chadwick, Amy Baker, Shelly Stephenson, Becky Eugley, Laurie Nemetz

Countries Represented: Australia, Bermuda, Brasil, Canada, Finland, Ireland, Poland, Sweden, USA



4th Fascial Research Congress was held in Washington, DC. , September 2015
There were many KMI grads and AT faculty in attendance. I notice that both Tom and I have aged gracefully over these many years!

**Back Row:** David Lesondak, Joseph and Joanna Welch, James Earls, Ari-Pekka Lindberg, Jason Spitalnik, Carrie Gaynor, Tom Myers, Laurie Nemetz.

Front Row: Dallas Cohen, Amy Hilton, Merideth Stephens, Holly Clemens

## i see so much I AM SO MUCH

#### On to the future.

The spark ignited and nurtured by Tom over the years continues to drive my explorations. Functional movement has proven so interesting that I am now engaged with course study at the Gray Institute, plans for FST L3 and other related interests. I continue to study with Kali Ray and TriYoga Flow. And I should mention that the next IASI symposium is scheduled for April 27 - 29, 2018 in Vancouver, Washington.

Today, my business, now named Modern Nature Bodyworks, is 60% Structural Integration/FST, 20% TriYoga Flow/Yoga for the Health of It and 20% teaching Anatomy Trains material in all of its expansions. That is guardianship. That is integration. You could say that I am a midwife to the body!

Today, when I walk into the room

I see so much. I feel so much. I am so much...

Carrie Gaynor, RN, BCSI, FST, E-RYT 500 Certified Anatomy Trains Teacher Owner and Director: Modern Nature Bodyworks





Class picture with the students of ATSF course, Austin, Texas at The Lauterstein Conway School of Massage (TLC), Aug 2016

I have taught at TLC for 4 consecutive years with scheduled dates in 2017 to return for ATSF and the newly updated regional anatomy courses Tom created in Body 3 all those years ago!

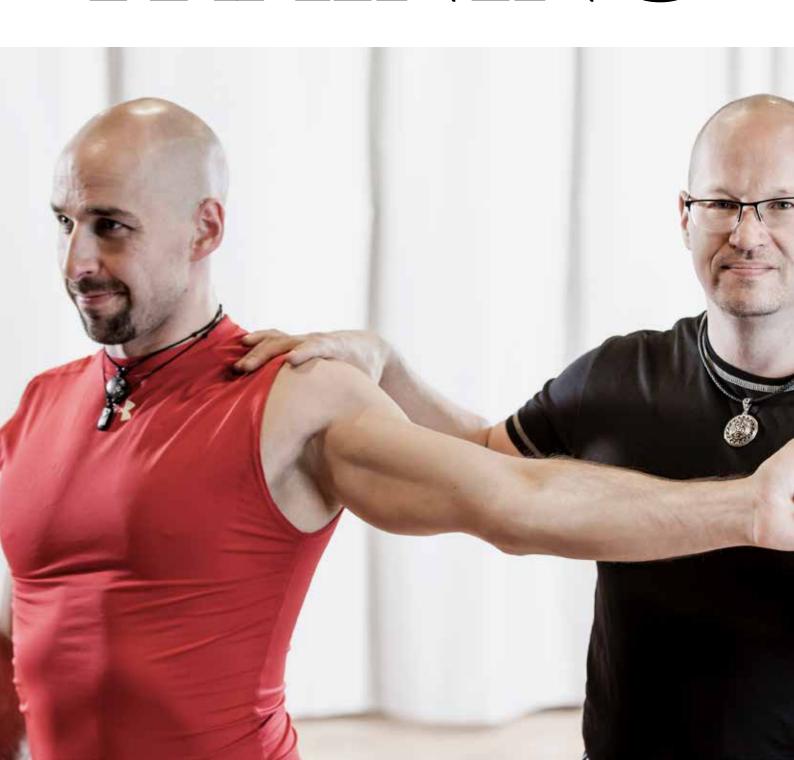


Each year finds me trekking to Maine for CEU courses and to re-connect with Tom.

2016 was notable for courses with Jaap van der Wal, seen in front, who taught The Ultimate Embryo.

Jaap and the topic of Embryology are of key importance to Tom.

### ANATOMY TRAINS IN TRAINING



"For us to be really effective, we should learn how to use whole body movement and the whole myofascial network for strength and power."



I'm Ari-Pekka (A-P) Lindberg, a Physiotherapist, a Strength & Conditioning Coach and a Personal Trainer. My passion has always been movement and exercise. Of course I used to play ice hockey as a kid because I'm from Finland... But I also played several other ball sports. Moving and exercising have always been fun for me – a lifestyle that has followed me throughout the different phases of my life. First as a hobby then, by surprise, as a profession.

I started working in the gym in the early 1990's after my talents in ice hockey ran out and I had quit my short career in American Football. I couldn't see that as a profession for myself even though I liked strength training a lot and it has followed me ever since.

So I followed my other passion of constructing and building with my hands, especially carving and moulding wood which has always been part of me. Designing and watching how a vision becomes reality – just the feel and sense of the wood - gives me a lot of satisfaction and is why I chose my first profession as an interior carpenter.

I graduated during one of the deepest economical depressions in Finland in the mid 1990's, which meant no work for rookies... So I decided to study more but I changed direction – closer to my other passion – movement.

Then 3.5 years later I graduated as a physio and ever since I have tried to understand the structure and function of our living organism through the different lenses of schools, concepts, methods or dogmas. I haven't found one truth and light but I have found many fractions of truths.

That's why I fell in in love with Anatomy Trains, it's not exclusive – it's inclusive.

Not claiming to be the one and only, but a perspective that can be added into any other perspective. Not taking away anything but adding in more depth and width...

When I came across Anatomy Trains ten years ago, fascial hype hadn't even started in Finland. I didn't understand much about myofascial continuities but to me they were made for movement. For some reason, they made sense in our way of moving. I tried to understand them by reading the book but it was too complex. So I went for my first Anatomy Trains workshop with James Earls who has been my mentor now for almost a decade. I realized later what a pain in the butt I was in the workshop with all my questions in the breaks... But that's how our route together began. Of all the people I have met in my years of Anatomy Trains, I have a deep gratitude and respect for James.

During these years of movement understanding, the perspective to training has changed many times depending on the trend and hype. It seems that we have created trenches to protect our beloved way of training instead of collaborating and giving respect to others.

Unfortunately we need as much variation in our training as possible for exercise to correlate to a life that is more versatile. Still, in all that variation of training there should be at least a couple of common principles. Training and exercise should benefit health and wellness, meanwhile increasing performance. To increase health we first need to consider two main aspects of training: quality and dosage, which are both crucial for maximising performance.

Health is the foundation for performance. If we lose health, our performance will drop.





Appropriate dosage is not easy to maintain because of our hectic yet sedentary and physically passive lifestyle. Our lifestyle drives us to rush and push in training and the mindset that more is more is universal. Unfortunately it doesn't hold because we don't develop when we exercise. We may develop while we recover, if we have the opportunity to recover. Recovery should be the first thing in mind while thinking of dosage; it's challenged because recovery should be active not passive. All our tissues and systems have developed for activity during the day. Light, low intensity movement throughout the day is necessary for physical and mental recovery. Even our brain's development is dependant upon it, our stress management is crucially dependant on it. That's why we need to flip the mindset of training upside down; recovery first. Then after that, when we have created space for development, we should start to introduce more intensive development exercises in appropriate timing.

Quality of movement sits right at the heart of health and performance. Quality means the ability to use the movement organism appropriately in any given situation. Our focus for many decades has been on neutral stability. It's still very much valid but on the other hand, most of our movement in normal life and in sport is out of neutral. So neutral stability can't be our only perspective to the quality or control of movement.

When we assess different movement strategies needed for different situations, we need to play with different rules. When we use submaximal loads, it's more appropriate not to be in neutral but to be out of neutral (swinging movements). If we use maximum loads, then it's reasonable to stay in neutral to be safe (lifting movements).

## MOVE amount EX IS NOT M

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## MENT ERCISE EDICINE



Anatomy Trains in Training (ATinT) is about balanced movement, enhancing the model of neutral stability which is applicable for local isolated and lifting exercises, into dynamic control of global movement. In global swinging movements we use as much isometric muscle contraction as possible and the power and strength of the movement comes from the fascia that is related to the muscle.

For us to be really effective, we should learn how to use whole body movement and the whole myofascial network for strength and power. If we are able to incorporate as much of our myofascia as possible, it's more efficient to move the loads. Using as much myofascial network as possible means as wide a distribution of movement as possible to gain maximum amount of recoil from the system.

Wide distribution of movement and load means also minimising the risk of injury while maximising performance. For load distribution we need to learn different movement patterns for submaximal loads, which means we need to have different sets of principles when we assess global movements.

In ATinT we focus on the principles of 4D movement. These are crucial to understand for our normal daily movement and sport in order to enhance health and performance at the same time. It's also critical to understand when to use these strategies to be safe and efficient and how to incorporate these global recoil exercises into training periodization with other training modalities like hyperthrophy, power, speed, endurance etc...

ATinT approaches training from this inclusive point of view, looking at the whole spectrum that is affecting our neuro-myofascia and its development, to improve our movement habits and to be as balanced as possible. Principles from ATinT are transferable to any sports, daily movement or training modality while also looking at the movement from an overall perspective and incorporating the myofascial meridians.

Let's turn our present healthcare system (which is more of a sickcare system) into a real healthcare system. Preventing injuries and problems instead of reacting when harm is done, because that is expensive, economically and humanely.

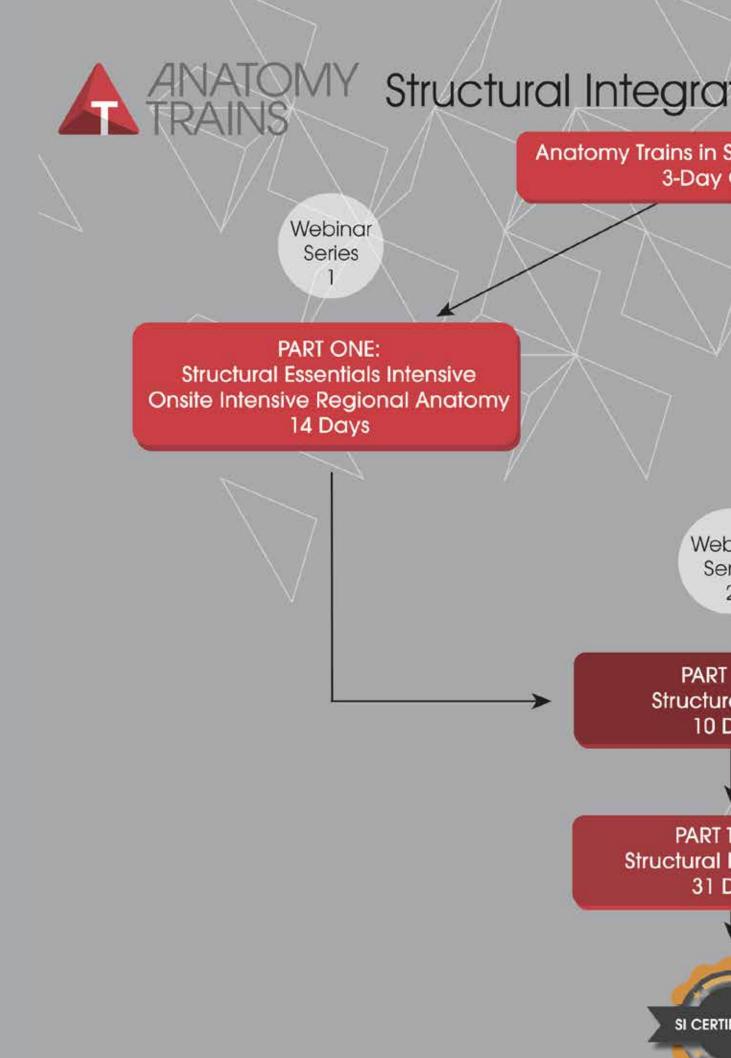
Our philosophy of movement in ATinT – movement and exercise is not medicine, but it can be.

It doesn't matter if you are a personal trainer, physical educator, yoga teacher, medical doctor, athletic coach, pilates teacher, fitness instructor, bodyworker, massage therapist, medical doctor specialized in sports, physiotherapist, osteopath or anyone in the movement and exercise field, AT in Training will give you a new perspective on how to look at movement, exercise and training.

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### tion Certification

tructure & Function Course Webinar Series PART ONE: Structural Essentials Short Courses (6) 14 Days Arches & Legs - 2.5 Days Fans of the Hip - 3 Days Abdomen, Chest & Breath - 2.5 Days oinar Tensegrity Spine - 2 Days ies Shoulders & Arms - 2 Days Head, Neck & Jaw - 2 Days TWO: al Vision ays · 2 PAPERS CLINCIAL PRACTICE - 48 SESSIONS HREE: ntegration ays ICATION

### NEWATSI PATHWAY



om Myers' Anatomy Trains has now been translated into 12 languages, with workshops taught around the world. To take advantage of the awareness of Anatomy Trains we are re-branding our core Structural Integration Certification Program, formerly known as KMI, to Anatomy Trains Structural Integration (ATSI). We are bringing everything we do into and under the well known Anatomy Trains brand and logo. As part of this process we are restructuring our six regional anatomy workshops on Fascial Release for Structural Balance to align with part one of our intensitve Structural Integration Certification program. Part one is called Structural Essentials. Students now have the option of taking the modular weekend workshop format, or the intensive 14 day program.

### ATSI PART I: STRUCTURAL ESSENTIALS

Prerequisite

Anatomy Trains in Structure and Function - 3 day course

FRSB courses:

Arches and Legs - 2.5 days

Fans of the Hip - 3 days

Opening the Breath (Abdomen, Chest and Breath)

-2.5 days

Tensegrity Spine - 2 days Shoulders and Arms - 2 days

Head Neck and Jaw - 2 days

Note: written anatomy exams to be taken online and passed for each of the FRSB courses prior to attending the 5-day Class.

### ATSI PART II: STRUCTURAL VISION

Structural Vision is a 10 day course where students learn assessment, strategy, technique, and practice working with outside models. Students will learn the 3 series of structural bodywork developed by Tom Myers and based on Anatomy Trains. All students will be evaluated during the program and approval is required to move on to Part III at end of this session.

### ATSI PART III: STRUCTURAL INTEGRATION

Students will build on the skills and experience of Structural Vision, learning the traditional 12 series working with the methodology developed by Tom Myers, and based on Anatomy Trains.

Session I: 11 days

(first 4 sessions of the ATSI 12 Series)

Session II: 10 days

(second 4 sessions of the ATSI 12 Series)

Session III: 10 days

(last 4 sessions of the ATSI 12 series)

In Australia and the UK Part III will be offered in two blocks:

Session I: 16 days

(first 6 sessions of the ATSI 12 series)

Session II: 15 days

(last 6 sessions of the ATSI 12 series)

## ALEXA NEHTER

a student perspective of KM

inally. I have arrived. It's the 1st of June 2017.

The unforgettable days of my voyage on over 200,000 kms of seemingly infinite Australian roads have come to an end and, with it, a new chapter of my life begins. I'm holding the Anatomy Trains Structural Integration Certificate in my hands. I reflect whilst swallowing some tiny tears through my smile, "How did this all happen?"







## INEED CHANGE



### REALISING I NEEDED CHANGE

Rishikesh, India 2015 - "I cannot live like this anymore. This is not me. I'm lying to Will (my best friend and, now, ex-husband), Eve (my beloved mentor and yoga-mum) and, most importantly, to myself."

A truth that came to me after a dynamic Kundalini Yoga meditation. (Note: Kundalini Yoga practices are very fascial in nature)
At that moment I made myself a promise to follow up on what my feelings were telling me (even when unpleasant). I began to undo the knots and complications in my life that had been getting bigger and increasingly restrictive. Part of this became more entwined with the world of intuitive, fascial movement and the somatic meditation that I was exploring.

At that stage I was teaching Scaravelli-inspired yoga full time, traveling Australia, teaching at yoga festivals, as well as hosting retreats and workshops all around the world. I was successfully sharing my yoga with the big wide world. My ego loved the attention I received on stage and on social media but, just quietly, my soul was telling me something different.

### FLASHBACK TO MY TIME IN ITALY

Sometime during my first years of teaching yoga, Vanda Scaravelli's book, Awakening the Spine, landed in my hands.

The depiction of a more non-linear, unscripted, non-secular way of practicing yoga, with the emphasis on moving with gravity, breath and freedom of movement as opposed to must-do postures and sequences, sang sweetly to my heart.

And, because of this exposure to Scaravelli yoga from the dawn of my yoga studies, my own classes were influenced by this recognisably different style and intention that one would not find in a commonly known yoga class. It's about listening openly, about feeling curiously and about undoing naturally. It's about taking ownership of perception, rather than following rules and postural prescriptions.

Tofia, near Rome 2011. I followed the traces of this book and began studying with Diane Long, long time student of Vanda Scaravelli herself.

In our first session Diane had me laying on the floor of her Italian cottage for over 15 minutes, disallowing me to make any move that would be initiated by a thought or image. Instead it had to be set in motion by an awareness of unanticipated bodily correspondence. In the early stages of my practice with Diane, I thought she'd been making it all up. The way she cued me felt disturbingly random. After hours of practicing under her guidance, instructing me in a way that I had difficulty understanding because I couldn't yet sense the descriptions in my body, it finally clicked. I experienced the most springy-feeling, open and light backbend in wheel pose. Diane also paid for my very first craniosacral therapy session, which was another stepping stone toward my more sensitised way of living.

### FASCIA AND YOGA

The Scaravelli approach to yoga is about allowing ourselves the freedom to move. And, through this, we explore ways of cultivating conditions - mentally, physically and emotionally - for developing a freely moving body. We allow space for the new, the undiscovered, for regained balance and further inner growth. (Which could also be a description of the work we are persuading with Anatomy Trains Structural Integration).

For me, a yoga practice should not be an exercise in endurance or postural performance as we try to achieve a set of poses, but rather gentle, playful acts of kindness to our bodymind in order to experience the entirety of possibility that we are. (Much as we do with and through the guidance of a Structural Integration practitioner.) We shall use yoga postures and flows as frameworks and ideas but not as the ultimate goal of the practice.

Moving in this way you'll notice the places where your body is holding on at a deeper level than your muscles or connective tissue. You learn to feel the fast and slow vibrations of your neurological patterning and, when you allow yourself to let go and open even deeper, you notice these openings giving way to your life-force, known as prana or chi. This can be a new, scary place. Many of us don't want to go there because it is quite powerful. Prana shows how it wants to move through our body, how it wants to change direction, to fill, exhilarate, restore and heal us. Interoceptive movement teaches us higher sensitivity and, the more sensitive we are, the deeper the patterns we are able to unwind. The more we do that, the more freedom, love and passion for life we can experience.

### THE LANGUAGE OF, AND A LINGERING IN, FASCIA

When I realised that my studies of fascial movement and Anatomy Trains gave me the vocabulary for what I'd been aiming to teach to, and explore with, my students, I began to dive deeper into the universe of fascia. Through lucky coincidences, I met Professor Dr Robert Schleip and became friends with Faszio - Fascial Fitness trainer, Miriam Wessels, in Germany.

### FINALLY JUMPING ON THE MANUAL THERAPY TRAIN

Fast forward to 2016 and I found myself between Melbourne and Sydney studying Anatomy Trains with Julie Hammond and Tom Myers. It was then that I knew I had found the missing piece to my yoga, movement and somatic meditation studies and teachings. This was the hands-on piece. I fell in love with the science of fascia for many reasons: Fascia is our internal ocean.



For me the current fascia research brings everything together with what I've learned through surfing (yes, that's right, riding the waves of our oceans), meditation and yoga. All this involves our mental attitude towards the practice (and our lives), our internal spacial awareness and the different ways of working with our bodies to create a dynamic stability and a multidimensional freedom of movement. Moving with 'fascial' awareness, we can dive deep physically, emotionally and spiritually. For me it's the ultimate way to teach and practice the essence of yoga: A genuine balance between effort and ease.

### INTEROCEPTIVE EXPLORATIONS

By becoming more and more in touch with, and sensitive to, myself, my feelings and the reality around me, I felt more keenly where I wasn't in proper alignment with who I knew I really was and how I wanted to live my life.

I decided to go on a 3-month soul sabbatical because, apart from my love of teaching, working within the yoga community and feeling 100% of service while doing so, my longing to live in Western Australia became stronger day by day. I wanted to wander alongside the Indian Ocean again. I craved space for reflection (and secretly I wanted to be closer to the Australia/ New Zealand Anatomy Trains headquarters).

As the days flew by, I began to question: 'What if this would be your last year to live, Alexa?' ... 'Have you done the things you wanted to do? Said the things you really wanted say? Dived into and lived out the feelings you really wanted to feel?



Did you contribute, hug, praise, sing, dance, laugh and love as much as you know you're capable of?' With this in mind I climbed into my van and left my current life on the East Coast in the rear view mirror. For over 18.000 kms I let landscapes hypnotise me and Spotify take me on (at times hilarious) roller coaster rides. I had hours of gazing over my steering wheel, sometimes listening to the same song on repeat over and over again. I leaned back into the crests of remote dunes and walked the edges of majestic coastlines. Sometimes I felt like the first human on Earth. Sometimes all humanity became 'I'.

In those months, I dove deeper into the Scaravelli way of practicing yoga. I gave myself permission to feel my body through slow, non-linear, explorative movements.

This also led me to do things I was afraid to, but knew deep down had to be done. I said things I was afraid to say. I gave my inner-fire a voice because I understood more and more that life is urgent and had to be lived in its full individual expression. I'm so bloody glad I did! I began to open doors of internal and external awareness. I got lost in beauty, patience, gentleness, generosity and unexpected signs of synchronicity - in storms, rain, whitewash and flames of never ending bonfires. Simply because I could now recognise, feel and see them.

After those three months of soul exploration, I decided to give up my life on the East Coast and to live in the Wild West of Australia for good.

### LOCOMOTION

Settling in Western Australia, letting go of most of my belongings and the life I had established on the East Coast was part of getting into the third phase of my Anatomy Trains Structural Integration Training. It felt scary at times, yet I knew that I had no other option.

After leaving my marriage, giving up a 'promising' career, I eagerly made my way to the West to receive my twelve sessions (at the Anatomy Trains HQ'!) and do the concluding component of the Anatomy Trains Structural Integration training. The finish line for this part of my life's journey was in sight.

Even though it has not all been an easy and pain-free process, I noticed that I started to wholeheartedly laugh again. I began to experience spontaneous, unexplainable 'laughing fits' (most probably to the embarrassment of my companions.)

Receiving the twelve sessions was exactly what I needed when I finally landed on my feet in my new life in Western Australia. Ashley Kemp, my Structural Integration practitioner helped me to grow my inner roots. Most of our sessions left me grounded and strong. The bodywork helped me to trust that life has got my back.

### TRUE, NEW BONDS

As I felt like 'the new one in town', I reconnected with old friends I had from the time I used to live in the West many years earlier. I began taking them through the three session Structural Integration bodywork series, as part of the prerequisite to complete Part 3 of my training.

Doing the work with them, and reconnecting in this way by spending 4+ hours together, chatting, getting to know each other again, was truly wonderful. I felt the growth of something new in me when it came to relationships of any kind. It was the sprout of what I was subconsciously longing for; allowing a new, more deep-seated form of closeness into my friend- and intimate relationships. It was, and still is, a healing and heart opening experience. The word of my Structural Integration bodywork spread unexpectedly fast in the little town of Margaret River, so i found myself fully booked and I began earning back the money for my training.



## THE LAST PART OF TRAING

### 30 DAYS TO GO

Day 1 of Part 3. There I was, landed, and it was getting real. Really real. I felt very motivated. I also felt that it was the right time for the integration of everything I'd been going through in the months before. The integration of my truth. A more honest, vulnerable, openfor-learning and evolution of self; and the integration of what I've been practicing in my 3-session series as a Structural Integration Bodyworker.

### SWIMMING INSIDE MYSELF

One afternoon I received a treatment from three people at once during our salonmentoring hour. It was probably one of the most insightful bodywork experiences I'd ever had to-date. A fullness of intricate subtleties.

Whilst one student had my head and neck in her hands, another touched and held my ribcage, whilst Lou (Benson) was standing over me, with her hands on my bent knees, communicating and bathing with my sacrum. After a few minutes, I felt my entire body floating. I was swimming inside myself. I felt waves moving through me. I felt my body in sometimes bigger and smaller expressions of ripples and oscillations. To my surprise, as the group consolidated afterwards, nobody noticed anything from the outside.

I now understand that, if you can learn to let go, I mean truly let go and allow the experience of drifting in an undefinable space is part of your journey, you will be able to feel life in its fullest expression.

### NOW

I am immensely grateful that I've pursued the path to train with Anatomy Trains. I'm proud that I took the expression: 'fascia our organ of innerness', seriously and followed up on what my teachers, the waves and my yoga practices have been telling me along the way: "Follow the feeling - and you will arrive in a place of freedom."

It's the time to pay attention to what you sense, and accept what is, choosing your own way and allowing your intentions to cling with the right timing.

a seni

## GRATI

begin to see or, better yet, 'sense' others more.
I sense them in different shades and shapes
with more eye for detail. I also learned that my touch was not yet deep and intentional enough.
Truly understanding the anatomy gives me a lot of confidence.

Through this work, I'm learning to become a leader of the moment that speaks to the body. I need to keep that in mind when working with 'intentional hands'. Learning to find my way in thinking about my abilities and my inner dialog: "Where is it helpful?" "Where and when do I own and take responsibility for leadership?"

For this the best thing to know is to get to know what I don't know. I learn about how much energy I waste by not being present. I learn the dance between my head, my hands and my awareness. What are the vibrations I'm bringing in? If I want a person to find their centre (without looking for a particular expression but rather a sense of centre), I have to be so utterly present. Word, touch, body posture, sound, my breath, are all speaking to the other system I'm communicating with.

More and more I'm falling not the way my ego would a Universal-interconnecte process in this work. A propeeling off layers, and the of accepting what you see yourself and others, as a

### **GRATITUDE**

Without Tom, I wouldn't be am truly grateful for being Trains community. A community open, to let go of what being vulnerable won't hu Lou Benson, for showing pause and unconditional a Thank you to Julie Hammincredibly knowledgeable open and honest. And for a mentoring student. That that there is nothing wron own way and working har in.

se af

## TUDE

g in love with myself; d like it, but rather in d way. There is a ocess of unravelling, in there is the exercise with compassion. In reflection of yourself. Thank you also, Julie Mower, for taking some time with me, answering my questions about the work and the KMI journey. You are the reason I began the training as a Structural Integrator.

And you, who are reading this, I hope you understand that it's this lifetime we are meant to live. I trust you can see that what you are in is boundless and that the lessons you learn are your medicine.

Alexa Nehter, is an Anatomy Trains Structural Integrator, Fascia Vinyasa Yoga Teacher and Teacher Trainer. You can find out more about her work, trainings and travels at www.alexanehter.com

e writing all this. I part of the Anatomy munity that allowed me is not true. To trust that rt me. I'm grateful to me the magic of the acceptance and love. ond for being so powerfully humble, initially taking me as ak you for inspiring me g about going your d for what you believe

### SARAH GREGSON

a student perspective of KM

I originally qualified as a physiotherapist way back in 1992. I went on to do my rotations through the hospital setting before specialising in musculo-skeletal physio and sports injuries in particular. I became very interested in what was then called muscle imbalance work, which in those days was headed up by Shirley Sahrman, Mark Commerford and Co.

I then stepped out of the physio world to apprentice as a pilates instructor. This was way before it was mainstream. I felt this would be a good add-on to my muscle imbalance work. By 2004 I had been recommended to read a new book called Anatomy Trains. I subsequently found a copy and dipped into it. I loved Tom's style of writing. However, I have to admit that for the next ten years really I spent more time evolving exercises based around the myofascial meridians than I did taking note of the hands-on techniques. This was mainly because my work was now in a pilates studio with a ratio of 1 of me to 3 clients.

Then about three years ago one of my pals at work said to me that I either needed to shut up about these Anatomy Trains or go on a course to learn more about it.

I searched for any such trainings here in Australia and discovered that models were required for a KMI training being held in Rockingham, Western Australia. I volunteered. This would expose me to this bodywork stuff and Anatomy Trains. I loved being a model and listening to the students being launched and landed. I would look around the room at the other models and remember seeing a lady with what I then labelled as back griper posture. As the sessions went on this lady's posture became more aligned without too much coaching from her student. I was hooked - it took me months with movement therapy to achieve this result and this student had done it in a couple of weeks. I went home and immediately booked into the Anatomy Trains for manual therapists. And so in June 2015 I met Julie Hammond properly.

From the moment I met Julie I just knew that I wanted to know everything she knew. She has a wonderful way with people. She's firm, strong, takes no prisoners as they say, yet is open and friendly, inclusive and nurturing. And so it was that I decided that I would go ahead and do the full KMI training.



### KMI TRAII



### VING



n March 2016 I arrived in Sydney to meet not only my course colleagues but Tom Myers himself. You know in life he even talks the same way as he writes. I could have listened for days longer than the Part 1 of the course!!

I was horrified to find out that over the years my anatomy knowledge was vague and not precise. I also realised that I filed my anatomy differently in my brain. Tom wanted us to know such things as which muscles tilt the pelvis and that a pelvic rotation can be held by muscles using their reversed actions! Shock horror I had not thought about reverse action of muscles in this detail since I was a student! And how long ago was that? I was mostly assessing the body to find out which part was injured.

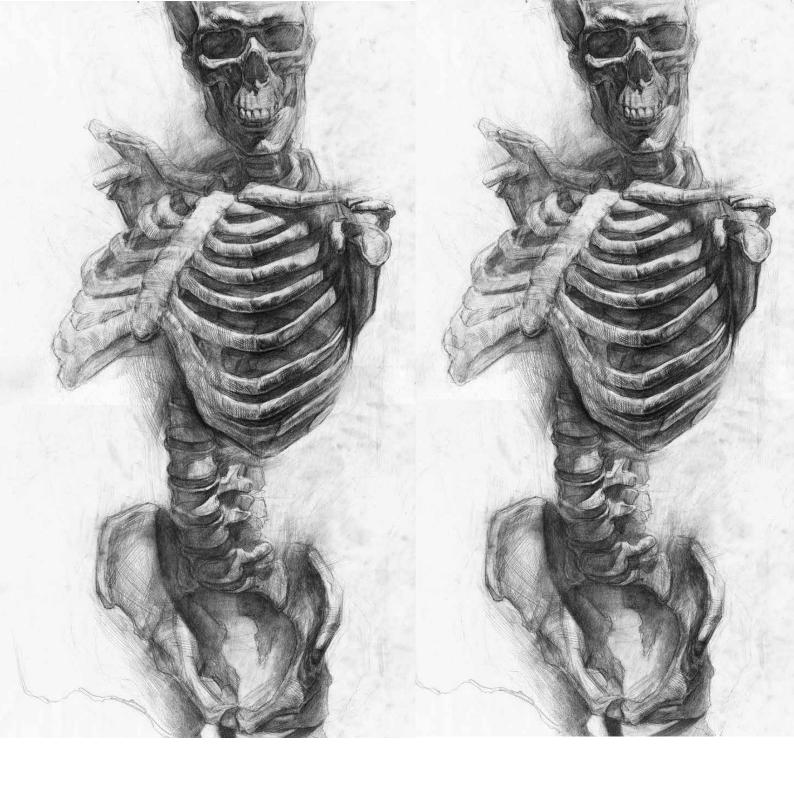
The next part of the KMI training was monthly weekend workshops on different areas of the body, with assessment tests and hands-on techniques.

I absolutely loved these weekends. I have always loved learning and here I was again in the thick of it - literally. The monthly workshops were presented in depth, were practical and pertinent. I then went away for a month to assimilate the information and practice the new techniques. This went on for a period of six months. I slowly morphed my thinking towards the Anatomy Trains style and lo and behold I was already beginning to treat my own patients from a different vantage point. To top it all off I was getting a great result. From time to time I faltered with fear of not removing the pain in a satisfactory time and so resorted to old tried and tested ways for me.

But invariably I applied the new techniques to the raving praise of my patients who said, 'you're a blooming miracle worker, I've not felt this loose and free of pain in years!'

Part 2 of the KMI training saw me again in Sydney. It was here I learnt to put the previous six months of FRSBs into a coherent formula. Now things were really beginning to take shape.

There were three 'quizzes' which set the cat amongst the pigeons, especially as the pass mark was set at 75%. I kept my mouth closed and my head down as others around me twittered about how hard it was and how daft this form of testing our knowledge was. For me it made sense.



# I HAVE FALLEN IN LOVE WITH ANATOMY.

'm very much of the opinion that if you know your stuff then the test should be easy. To a certain extent it was. The good thing I found was that getting answers wrong gave me a springboard for further learning. I have to say that this style of anatomy and the type of understanding I was required to demonstrate was very different to that at university or in the hospital setting. However, I found it excellent as I have been saying to my clients for years now that despite having shoulder, back or knee pain, for example, the cause is likely to be elsewhere; from a poor movement pattern or poor joint alignment or increased load through a structure at the site of pain. I just needed them to buy into my way of thinking.

We were sent home after Part 2 with two essays to write and sixteen case studies to do. I felt totally overwhelmed by the nature of it all. Things had just got very serious!

I put up a notice at the surf club and at my weekly mat pilates class saying I needed volunteers for cheap structural bodywork. And was nearly trampled in the stampede! I ended up doing far more than sixteen clients and am still getting phone calls from spouses and friends of the clients; all saying they were looking for something different as what they were doing wasn't really giving them what they wanted.

When doing the sixteen case studies I started out with an enthusiasm and focus that was soon replaced by fatigue and disillusion. I had a mentoring session with Julie and she quickly discovered that I was doing too much to everyone and attempting to perform miracles!!! Oh dear, the fix-it physio had returned. I set off again with Juile's words in my ear – "what one thing can you do for this person?" That was much better, I wasn't wrung out after each session. However now I was seeing that there was always more to do and nearly everyone wanted to come back after their three series.

The essays were interesting. I had to choose 2 out of 18. After much procrastination as to which to do, a friend of mine said to do numbers 4 and 13. And so I did!! I researched the subject for the respective essay and attempted to put pen to paper.

It was actually a great experience as it had me learning new things, revising some things and getting up to date with the latest research on other things. I believe it's important to stay up to date with the latest research otherwise you get left behind and pretty soon the clients know you're an old dinosaur because they're not daft. Alot of them arrive having already consulted Dr Google anyway.

Before I knew it Part 3 had begun. Quite quickly a formula of theory, teacher demonstration and outside model had ingrained itself. Lou Benson was our lead tutor for this section of the training and boy does that girl know a thing or two. I definitely had a pupil teacher crush. In fact I just wanted to follow her around within her practice in order to learn all the stuff in her head. I still do. That's two tutors now, hope that's not too creepy!!

All in all the KMI training has been full on, intense, fun and immensely worthwhile. I have fallen in love again with anatomy. I am seeing a different set of patterns within movement that I was blind to before. This hasn't changed what I see already in my clients, it simply adds more depth and gives me more avenues to work with.

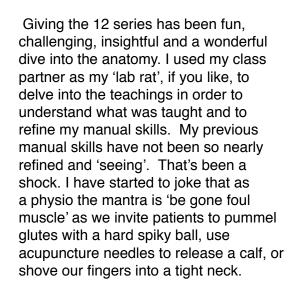
During this Part 3 experience we have all received a 12 series from a class partner and have given a 12 series to the class partner, as well as to an outside model.

Receiving the 12 series has been an intense event in its own right. This time around I really understand the reasons behind each session. Previously I kind of got it but, as I only sporadically felt any major changes, I didn't appreciate it. I get it when Lou says we are simply starting something for our clients and it's up to them where it leads. I also am now beginning to understand that emotional, psyche connection to the body more. Something I've not ever been trained on in the physio world although I have explored this side on my own through life experiences, reading and courses. It is now on the agenda for physios, which is a good thing.

## LIFE CHA



### NGING



All the techniques are aimed locally at the offending tight muscle. Mind you, in my defence your honour, I have spent the last ten years talking about the victim of a crime (the symptoms) and the perpetrator (the reason for the symptoms). I've been saying to my patients that we need to ask a bigger question, "why has your shoulder tightened up and caused you pain?" So I guess this training has been perfect for me because now, instead of reinventing the wheel with every patient during assessment, I have a road map. I must say that during the two week break whilst back at work it was as if I had X-ray glasses on. I found myself seeing the Anatomy Trains patterns so easily it was as if they were lit up. Very exciting.

The KMI training has been intense. I've spent as many free hours as possible studying anatomy and the Anatomy Trains book. Sadly (some would say) I am glad we had lots of tests. Firstly they ensured that I stayed true to studying and secondly they gave me a pointer as to where I needed to spend more time and learning. It has been full-on and I suppose time-consuming. I took myself away from my family in order to stay in the learning bubble. This was good for me as it eliminated distractions and gave me the extra time to study.

I do think that I had somewhat of an advantage compared to some people in my group - those being the ones without manual or extensive anatomy knowledge. However, the teaching has been so thorough that these guys have come so far in the last eighteen months. It's fabulous to see and hear as we all chat about anatomy and client patterns.

This training has been thorough, fun, intense, has made me look into myself at times and life changing.



### KMI/ATSI

graduates

Congratulations to the graduates of 2016-2017 KMI/ATSI certification programme welcome to the family.



### HOLLY CLENS research review

### COLD VERSUS HEAT THERAPIES TO REDUCE MUSCLE SORENESS - WHICH IS BEST?

ow many times have you been asked by clients if they should use ice or heat after an injury or exercise session to help reduce muscle soreness and pain? This is a very common question with many different answers, sometimes diametrically opposed. Are you confused on the best advice to give your client? You are not alone. Many individuals in the movement and manual profession are looking for evidence-based research to answer this question and support their own recommendations on the use of cold versus heat.



# COLD THERAPY research review



For thousands of years, cold and heat have been the two non-pharmacological interventions to treat muscle soreness (Petrofsky et al., 2015). The use of ice for 2 to 3 days after an injury or intense workout followed by heat has traditionally been the common practice. Yet, to this day, there is still no clear understanding of which modality (cold versus heat) is best to minimize muscle soreness and reduce pain. Most recommendations for the use of heat and cold therapeutic modalities are based on empirical evidence with limited evidence-based research to support the efficacy of these modalities.

To answer the debate on heat or cold to manage DOMS, Malanga, Yan and Stark (2015) completed a literature review on the use of heat and cold therapeutic modalities based on the mechanism of action, physiological effects and medical evidence to support their clinical use. In addition, Petrofsky et al. (2015)

conducted a well-designed experimental study to determine if cold or heat after exercise was more effective in reducing muscles soreness. The goal of this e-magazine article is to provide practitioners with a review of the research done by Malanga, et al. (2015) and Petrofsky et al. (2015).

Before we review the mechanisms and effectiveness of these modalities, it is important to define muscle soreness. Muscle soreness can result from passive or active indirect trauma injuries.

Passive injuries are caused by tensile overstretch of muscle without contraction while active injuries are caused by eccentric overload of the muscles (Malenga et al., 2015). Muscle damage caused by eccentric overload may lead to an acute strain or muscle soreness, commonly referred to as delayed onset muscle soreness (DOMS). DOMS occurs after intense or unaccustomed exercise that is beyond what is usually completed.



DOMS is characterized by decreased range of motion (ROM), decreased muscular strength, inflammation and increased concentrations of myoglobin. Muscle pain associated with DOMS may occur about 24 hours after exercise, cresting within 72 hours, and then slowly dissipating over 5 to 7 days (Lewis, Ruby, & Bush-Joseph, 2012). DOMS has been subjectively assessed by visual analog pain scales and objectively through blood analyses, such as myoglobin, cytokines and lactic acid dehydrogenase (Petrofsky et al.,1992).

#### **COLD THERAPY**

Cold therapy, also known as cryotherapy, is the application of any substance or physical medium to the body (Ivins, 2006). In addition to managing DOMS, cold therapy has been accepted as a method to reduce tissue damage and microtrauma. Cold therapy is generally used with RICE (Rest, Ice, Compression, Elevation) or PRICE PRICE (Protection, Rest, Ice, Compression, Elevation) therapy for acute injuries such as ankle sprains. Table 1 lists the physiological effects of cold therapy on injured tissue.

#### TABLE 1 - COLD THERAPY

Decreased skin and muscle temperature

Decreased blood flow

Decreased metabolic demands of hypoxic tissue

Decreased inflammation, edema, pain, muscle spasm, and elasticity

Induces a local anaesthetic effect by decreasing threshold of tissue nociceptors and conduction velocity of nerve signals conveying pain

Table 1 adapted with modification from Malanga et al. (2015)

Methods of applying cold therapy include ice massage, bags of crushed ice, cold compression units, ice and gel packs, cold whirlpool and cold water immersion (CWI).

One of the more popular strategies to manage or prevent DOMS is CWI, especially among athletes. Immediately after exercise, athletes will immerse themselves in cold water baths. However, the duration of the cold and the temperature vary greatly in not only CWI, but in most all the cold therapy applications.

## RESEARCH ON COLD THERAPY AND DOMS

A number of reviews and meta-analyses evaluating cold therapy in the prevention or treatment of DOMS have been published. The largest was a review of 17 small trials (n = 366) looking at the effects of cold-water immersion in the prevention or management of muscle soreness after exercise (Bleakley & Davison, 2010). Fourteen of the trials compared cold-water immersion (CWI) applied after exercise with passive treatment (rest or no treatment). The temperature, duration and frequency of CWI, as well as the exercises and settings, varied between the trials. There was no statistical difference in pain measures immediately after exercise between CWI and passive treatment. However, there was some evidence that CWI reduces DOMS at 24, 48, 72 and 96 hours compared to passive treatment. Most of the research trials had limited data comparing CWI to other modalities such as warm or contrasting (warm/cold) water immersion.

Most of the reviews and meta-analyses on cold therapy have been on elite athletes, college athletes and recreationally active adults. Recently, Murray and Cardinale (2015) conducted a meta-analysis and systematic review of the effects of cold therapy on recovery among pre- and peri-pubertal (i.e., adolescent) athletes. Based on the findings, reduction in DOMS after CWI among young athletes are small or non-existent immediately after and up to 96 hours. So, while cold therapy may have conflicting results in reducing DOMS among adults, the knowledge is too limited regarding adolescent athletes. More research is needed among this population to ascertain the impact of cold therapy on DOMS.

# HEAT THERAPY

Heat therapy, also known as thermotherapy, is the application of heat to the body to increase tissue temperature. Superficial modes of heat therapy include heat pads, hot towels, heat wraps, heated stones, hot water bottles, sauna, steam, paraffin, and infrared health lamps. Deep-heat therapy includes ultrasound, shortwave and microwave diathermy.

The physiological effects of heat therapy are included in Table 2. Increasing tissue temperature stimulates vasodilation ad increases tissue blood flow. This is thought to promote healing by increasing the supply of nutrients and oxygen to the injured site. Heat-induced changes in the viscoelastic properties of collagenous tissues may enhance elasticity and improve ROM.

TABLE 2 - HEAT THERAPY
Increased skin and muscle temperature
Increased blood flow
Increased metabolism
Decreased pain
Increased elasticity
Increase heating

Studies on heath therapy generally show a decrease in pain intensity and reduction in DOMS immediately following exercise and 24-48 hours after exercise. The studies, presented in Table 3, compared heat therapy interventions with different heat modalities, cold wraps and no intervention.

## TABLE 3: RESEARCH ON HEAT THERAPY AND DOMS

Other heat modalities, such as ultrasound and warm water hydrotherapy offer adequate penetration to the deep tissue. However, for healing to occur, it seems logical that the heat application should be left on for hours and not just minutes. This can be only accomplished by low-level heat therapy. However, only a few studies have examined low-level heat therapy after exercise with heat wraps (Petrofsky, et al. 2015).

## RESEARCH ON COLD THERAPY VERSUS HEAT THERAPY

A small number of studies, as shown in Table 4, have directly compared the effects of cold therapy versus heat therapy in prevention and treatment of DOMS (Mayer et al., 2006; Garra et al., 2010). In both studies, no significant differences in pain scores or physical function between the heat and cold treatment groups occurred.

Table 2 adapted with modification from Malanga et al. (2015)

Table 3: Research on Heat Therapy and DOMS

\*RCT = Randomized Control Trial

STUDY	SAMPLE SIZE & AGE	METHODS	RESULTS
Mayer et al. (2006) RCT*	n = 67; 23.5 ± (6.6 yrs); Female and male participants	Participants performed vigorous eccentric exercise to experimentally induce low back DOMS. Participants were randomized to 1 of 2 treatment groups within each sub study: prevention study (heat wrap, control [nontarget muscle stretch] and treatment study (heat wrap, cold pack). Interventions were administered 4 hours before and 4 hours after exercise in the prevention study and between 18 to 42 hours post exercise in the treatment study	In the prevention study, at hour 24 post exercise, pain intensity, disability, and deficits in self-reported physical function in subjects with the heat wrap were reduced by 47% compared with the control group. At hour 24 in the treatment study, post exercise, pain relief with the heat wrap was 138% greater than with the cold pack; there were no differences between the groups in changes in self-reported physical function and disability.
Petrofsky et al. (2011)	n = 120 Young participants (20-45 yrs, n = 40) Older participants (45-70 yrs, n = 40 Diabetics (45-70 yrs, n = 40); Female and male participants	Participants were examined to evaluate the soreness in the abdominal muscles after a matched exercise bout using a p90x exercise video for core fitness. Three heating modalities were assessed on how well they could reduce muscle soreness: ThermaCare®, heat wraps, hydrocollator heat wraps, and a chemical moist heat wrap. Interventions were administered immediately after exercise and up to 2 days after exercise.	People with diabetes were significantly sorer than age-matched controls. The greatest reduction in soreness after applying the modalities was using moist heat, both immediately after the modality and up to 2 days after the exercise. Right after the modality, moist heat reduced pain by 52.3% in the older subjects compared with 30.5% in the subjects with diabetes and 33.3% in the younger subjects.

# RESEARCH

Tindings

In a recent study, Petrofsky et al. (2015) looked at previous research findings on cold versus heat therapy in reducing DOMS. Because of the differences in the temperature and timing of the use of heat and cold modalities after exercise in different studies, Petrofsky et al. (2015) found there was no clear conclusion on the effectiveness of either modality on reducing DOMS. As a result, Petrofsky et al. (2015) compared cold wraps to ThermaCare heat wraps immediately or 24 hours after intense exercise. The hypothesis was that cold modalities would be better to reduce muscle damage and treat DOMS than heat or no thermal modalities.

Participants in the study (n = 100, age 20-29 yrs, men and women) were randomly assigned to one of the following groups: (1) control, (2) cold packs immediately after exercise, (3) cold packs applied 24 hours after exercise, (4) heat wraps immediately after exercise, and (5) heat wraps applied 24 hours after exercise. The cold therapy was applied on the quadriceps muscle of each leg for 20 minutes. The heat therapy was applied on the quadriceps muscle of each leg at low-level and held in place for 8 hours.

To promote the DOMS, all participants did three supervised bouts of squats. Each bout lasted 5 minutes with one squat performed every 3 seconds. Outcome assessments, to determine the effect of the DOMS intervention, included: (1) maximal strength of the knee during flexion and extension, (2) a visual analog scale from 1 (pain free) to 10 (very, very sore), and (3) measured myoglobin, which is a biomarker for muscle soreness (Petrofsky et al., 2015).

#### SO, WHAT DID THE RESULTS OF THE PETROFSKY ET AL. (2015) STUDY INDICATE?

- Both the immediate heat and cold groups significantly minimized loss of strength (4.5%) compared to the control group (24%) due to DOMS
- The immediate heat group had slightly better muscle strength after strenuous exercise compared to the immediate cold group. Using heat immediately after exercise seemed to result in less damage to muscle, as assessed by myoglobin levels.
- When cold and heat were applied at 24 hours, the cold was slightly better in preserving strength and reducing muscle damage.
- •With the visual analog scale, the least amount of pain was observed in both the heat and cold immediate therapy groups compared to the control group, although slightly better in the cold group.

For movement and manual practitioners, the findings of this study may be insightful. A client's perceived soreness is likely reduced best with the immediate application of 20 minutes of cold packs to the target area.

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Table 4: Research on Cold vs. Heat Therapy and DOMS

\*RCT = Randomized Control Trial

STUDY	SAMPLE SIZE & AGE	METHODS	RESULTS
Mayer et al. (2006) RCT*	n = 67; 23.5 ± (6.6 yrs); Female and male participants	Participants performed vigorous eccentric exercise to experimentally induce low back DOMS. Participants were randomized to 1 of 2 treatment groups within each sub study: prevention study (heat wrap, control [nontarget muscle stretch] and treatment study (heat wrap, cold pack). Interventions were administered 4 hours before and 4 hours after exercise in the prevention study and between hours 18 to 42 post exercise in the treatment study.	In the prevention study, at hour 24 post exercise, pain intensity, disability, and deficits in self-reported physical function in subjects with the heat wrap were reduced by 47% compared with the control group. At hour 24 in the treatment study, post exercise, pain relief with the heat wrap was 138% greater than with the cold pack; there were no differences between the groups in changes in self-reported physical function and disability.
Garra et al. (2010) RCT*	n = 60; 37.8 ± (14.7 yrs); Female and male patients	Sixty patients presented to emergency department for acute back and neck strains were included in the study. All patients received 400 mg of ibuprofen and were randomized to 30 minutes of heating pad (n = 31) or cold pack (n = 29) applied to the strained area. Pain severity was assessed by a visual analog scale (0 = no pain, 100 = worst pain)	The addition of a 30-minute topical application of a heating pad or cold pack to ibuprofen therapy for the treatment of acute neck or back strain resulted in a mild yet similar improvement in the pain severity However, no significant differences in pain scores were observed between the heat and cold therapies after a single 30-minute treatment. It is possible that pain relief is mainly the result of ibuprofen therapy.
Hassan et al. (2011) RCT*	n = 60; Approx. 22 yrs of age; Male young athletes	Participants were split into 3 immersion groups (n = 20). The immersion groups were a cold water, warm water and notreatment control group. Immersions were administered 15 minutes after participants completed an eccentric exercise consisting of 10 sets of 10 eccentric contractions of the hamstrings muscle group.	Warm water significantly decreased markers of muscle stress reaction, including creatine kinase, myoglobin and skeletal troponin I levels, compared with cold water or control. In contrast, cold-water immersion elevated levels of muscle stress reaction markers.



# HIND

#### DISCUSSION

Heat and cold therapy are considered part of the standard of care for DOMS and acute musculoskeletal pain. This review indicates that some studies show heat is better, whereas others favor cold and still others show little or no effect. The confusion frequently exists because the temperature, timing and duration of hot and cold modalities varies in each study as does the populations being studied. Because of this confusion, there is a need for high quality, blinded, randomized controlled trials examining heat and cold therapies on a variety of populations in order to enhance the body of literature.

#### TAKE HOME MESSAGE

When a client, patient or athlete asks should they use heat or cold for recovery, you should ask this question. "Recovery from what?" Many coaches, movement professionals and manual practitioners have strong opinions on why and when to use heat or cold modalities for recovery. It is important to understand the time and the place for these modalities as well as the current knowledge (or lack of it) about the implications for these interventions.

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Dealing with muscle soreness is not only a physiological but also a psychological process. It is beneficial to know how your client/athlete responds to cold or heat therapy. If your client or athlete prefers ice because they have seen positive results from this modality and you inform them you are using heat, how will this person respond? It is important to educate your client/athlete regarding the modality you are using based on their injury status and the research regarding the benefits of this modality to treat their injury. Education reduces confusion and enhances knowledge. Remember, recovery is a holistic process and the therapeutic use of heat or cold is just one step in the process.

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