Monica Caspari

Mindful Motion

ROLFING® Movement Integration Techniques
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FOREWORD

Although I did include some movement techniques that I myself have developed and successfully used many times (marked with an *), most of the techniques here described and explored were either created and developed by Rolfing Movement Instructors/teachers, or/and were inspired by other somatic education techniques (like the Kaya Kalpa and Self-Pelvic Lift for example). So, if in writing them down I made mistakes let them be mine, and if you find exquisiteness in the techniques here described and explored let it belong to whomever first developed them.

The “awareness questions” lists are not meant to be “complete”. They are only suggestions of what you can explore yourself or with your clients and you will certainly find other questions that will be specific for each of your clients. Many of the awareness questions can be issues in themselves for the client and Rolfer to explore together. One single awareness question could be developed into a big piece within a session or it could be the theme of a whole session. And of course, in most movement techniques here described there is more material in the awareness questions list than you can, or should use in one session. So, oftentimes it is better to develop one little piece so that the power of our work can reveal itself.

October 1996

[Signature]
1) ACTIVE LYING DOWN *

For us, Rolfing Movement Teachers, lying down is an activity, just as standing or walking. Our clients can be more present for their sessions and they benefit more from them if first we teach them about “Active Lying Down”. Our goals will be sensitive contact with the environment and inner openness for life processes (which include transformation) and also a fresh sense of gravity.

(Use pillows under knees and/or head when necessary)

Some possible questions to ask your client (or group):
- are you taking enough room to lie down comfortably?
- or are you pressing your legs together?
- or are you crossing your feet?
- or are you holding your arms tight?
- or are you closing your fists?
- explore opening the arms and legs a little bit.
- does your energy change with the way your limbs are lying?
- does the air flow freely through your axilae? your groin? your pelvic floor?
- are you holding it away from the pillow/mat?
- are you holding your chin back?
- are you holding your chin close to the thorax?
- does the air flow freely through your throat?
- through the nape of your neck?
- do you feel the surface where you are lying down?
• do you feel its texture? its temperature?
• do you feel the hardness of the wood after the softness of the mat?
• do you feel the softness of the mat through the whole extension of your body?
• do you feel the hardness of the wood through the whole extension of your body?

• do you relate to the floor/ table?
• do you feel the support the floor/table offers you?
• do you trust this support?
• do you surrender yourself to it?
• does anything change inside your body as you allow yourself to trust the support and surrender more to it?

• how long does it take until you have fully arrived?
• and when you arrive, do you really allow resting?
• how much resting do you allow?

You may explore active or passive raising of the weight of each limb, one at a time, without the limb leaving the floor/table at all. The client then has the opportunity to feel the difference between just touching the floor/table and coming to rest fully on it. Often the same exploration with the head is highly interesting and useful.

**Examples:** raise the weight of your left/ right leg, left arm/ right arm, without leaving the floor/table. Then allow the limb to come back and fully rest on the floor/table. Explore it again, feeling the pull of gravity.

• raise and lower both arms together and compare the effects to moving them separately.
• raise one leg and one arm together and compare the effects. Feel the connections.
• as you are exploring these movements, are you giving full, sustained attention to your inner processes?

• or:
• raise the weight of your head without it leaving the table...and then let your head fully come back to resting on the table.
• explore it again feeling the pull of gravity.
• where do you initiate this movement from? your throat? your forehead? the base of your skull? your jaw? your eyes? your belly? etc.
• does the place where you initiate the movement from have any relationship to any habitual holding you were not aware of before?

• does your brain rest inside your cranium?
• how much space do you allow inside your cranium, between your ears?
• do the contents of your cranium breathe?
• does your face breathe?

• does your whole body surrender to the table?
• does your whole body surrender to the force of gravity?
• does your body open itself to breathing?

• are you still giving full, sustained attention to your inner processes?

• now, before finishing our explorations, name the qualities, and/or remember some of what you have experienced today in this work.

• imagine sitting up and taking your discoveries into your sitting.
In group work on breathing you may briefly review “Active Lying Down”, then ask the group (or client) for their current experience of breathing before beginning work (or touching the client). The following are some questions you may ask the group or client:

- allow your awareness to notice the phases of breathing.

- during the inhale:
  - what expands?
  - what opens?
  - is there a pause at the end of the inhale?

- during the exhale:
  - is there a release?
  - what releases?
  - is there a letting go?
  - what do you let go?
  - into what do you let it go?
  - what wants to soften?
  - what softens?
  - is there a pause at the end of the exhale?
  - does the exhale wait for the next inhale?

- feel how some cycles are longer than others.

- our breathing, like the waves of the sea vary in size, so now, just feel the different cycles of your breath, without expectations.

- as you exhale do you trust that another inhale will come?
- what physical sensations tell you that you are trusting or not trusting that another inhalation will come?
• does your breathing simply find its way in and out, or do you have to suck the air in and force it out?
• do you feel your breathing finding its way through delicate meanders and waking up secret regions long closed to your perception, or long closed to movement?
• like the ocean tides that go up and down, allow your breathing to be patient and with no ambition, allowing softness and sweetness into whatever opens itself to it, insisting on nothing.

• do you feel the movement of your breathing?
• where do you feel it the most?
  • in your abdomen?
  • in your chest?
  • somewhere else?

• do you have a sense of an internal space?
• do you feel the front of this space that breathes?
• do you feel the back of this space that breathes?
• do you feel the sides of this space that breathes?

• do you have a sense of the movement of your breath in its length?
• do you have a sense of the movement of your breath in its width?
• do you have a sense of the movement of your breath in its depth?

• do you have a sense of your internal shape?
• do you have a sense of your internal volume?

• does your breath begin deep inside or does it begin with the ribs expanding?
• next time you exhale, allow your awareness to go to your coccyx. As you inhale, allow your breath to sequence up the spine, then back down the spine during the next exhalation.

• who breathes? Do you breathe or does the Universe breathe?

• focus your breath anywhere in your body you feel silent, discomfort or pain, and allow the movement of your breath to wake up this area of your body.
• experience your breath flowing in and out this area, awakening motility.
• the movement of your breath creates movement.
• feel the rhythm in this movement.
• feel the movement in this rhythm.
• does your internal movement and rhythm create a sense of an internal shape?
• does your internal shape support your posture?
• does your internal shape change as you breath?
• does your ever-changing internal shape create a pulsating movement through your body?
• do you allow this movement to take over your body?
• your whole body?
• or do you interrupt it somewhere?
• etc-etc

• when you feel ready, think about coming into sitting. However, before you come to sitting, describe your sensations; or describe the sensation(s) this breathing work awakened in you. Allow these sensations to stay with you as you slowly come into sitting.

• allow yourself to take time and explore your most exciting or important findings in the sitting position.
Within Yoga there is a series of practices named “Kriyas” which means “Cleansing”. I find the Kaya Kalpa especially interesting for the movement work as it is at the same time a diagnostic tool and a re-patterning modality. The complete Kaya Kalpa is rather complex, and can be done in parts as follows:

A- Beginning the Kaya Kalpa - or the “Heel Rock Kaya Kalpa”

**Goals**
- locate where there is tension blocking the free flow of movement from feet/legs through axial system
- release tension in the ankles
- open the ankle joints
- prepare for the Complete Kaya Kalpa
- relaxation and rest for the axial system
- stimulation of response in the axial system as you walk
Preparation: lying on your back, with legs straight, feet about a palm’s distance apart, arms along your body, your hands about one palm length away from your body so that the air can flow. Briefly review “Active Lying Down”.

Movement: allow your awareness into your ankles, and from there into your heels. Then allow a gentle rock to begin in the heels, flexing and extending the ankles in a rhythmic, rather slow motion as a body-mantra.

Awareness questions:
- are your feet relaxed?
- are the back of your knees relaxed?
- does this rocking flow through the whole body?
- where does the rocking get blocked?
- what happens if you tighten this (these) blocked area(s) even more?
- are you doing this movement or is this movement “doing you”?

Note: the “Heel Rock Kaya Kalpa” can be beneficial to “wake up” the spine in the morning and to bring some relaxation and rest for the Rolfers during a busy day between sessions. It is especially interesting for external body types and people with rigid spines.

B- The Pelvic Girdle Kaya Kalpa

Goals:
- open and lubricate hip joints.
- open and lubricate sacro-iliac joints.
- release tension in the thighs.
- release tension in the gluteals.
- locate and loosen the distal portion of the psoas.

Preparations: same as in the “Heel Kaya Kalpa”. Briefly review “Active Lying Down”. Allow weight into the back of your legs.

Movement: allow your awareness into your hip joints. Then allow both legs to roll in together, then away from each other, initiating the movement from the hip joints in a rhythmic, slow motion body-mantra.

Awareness questions:
- are your toes relaxed?
- are your ankles relaxed?
- are you initiating the movement from the hip joints, or do the knees want to take this responsibility?
• are your quads (thighs) doing a lot of work? if so, allow your legs to roll in and out with the least amount of effort possible.
• are you using your abdominal muscles? if so, let them go.
• are you allowing your organs to relax into your lower back?
• do you feel the head(s) of the femur(s) rolling in the hip socket(s)?
• do you feel the back of your pelvis getting wider and heavier each time you roll your legs in?
• do you feel the front of your pelvis getting wider and heavier each time you roll your legs in?
• are you breathing?
• do you feel something tugging above and on each side of the pubic bone (this is the lower portion of the psoas muscle)?
• do both sides feel the same?
• allow the side that feels tighter to let go and lengthen.

C- The Shoulder Girdle Kaya Kalpa

Goals:
• open and lubricate the shoulder joint
• release tension in the shoulders
• release tension in the pecs
• release tension in the arms
• release tension in the upper back
• differentiate the arms from the neck / throat

Preparation: Same as in the “Heel Kaya Kalpa”, or lying on your back with your knees bent, your feet flat on the table, two to four inches apart.

Movement: allow your awareness into your shoulder joints (gleno-humeral joints). At the same time allow both arms to roll in and out initiating the movement from the gleno-humeral joint in a rhythmic, slow motion, body-mantra.

Awareness questions:
• are your fingers relaxed?
• are your wrists relaxed?
• are you initiating the movement from the shoulder joints, or do the elbows want to take this responsibility?
• are your upper arms doing a lot of work? if so, allow your arms to roll in and out with the least amount of effort possible.
• are you tensing your neck muscles? if so, let them go.
• are you tensing your throat muscles? if so, let them go.
• are you allowing your middle layer (i.e. your lungs) to relax?
• do you feel the head(s) of the humerus (es) rolling in the socket(s)?
• do you feel the space, between your shoulder blades getting wider as you roll both arms in?
• do you feel the space between your clavicles getting wider as you roll both arms in?
• does the movement feel the same in both arms? in both gleno-humeral joints?
• allow the side that feels tighter to let go and lengthen.

D- The Neck/ Head Kaya Kalpa

Goals:
• open and lubricate the AOJ
• open and lubricate the neck joints
• release tension in the neck
• release tension in the throat
• differentiate the neck from the S.G.

Preparation: same as in the “Heel Kaya Kalpa”, or lying on your back with your knees bent, your feet flat on the table, two to four inches apart. Briefly review “Active Lying Down”.

Movement: Allow your awareness to the inside of your cranium, and from there to your AO joint. Slowly allow your head to gently roll from one side to the other in a small movement (about half inch to one inch to each side) repeating it over and over again in a rhythmic, slow motion body-mantra.

Awareness questions:
• is your chest relaxed?
• is your upper back relaxed?
• are your shoulders participating in this movement? if so, allow them to rest.
• is your throat open and relaxed?
• is your jaw relaxed?
• is there space inside your cranium between your ears?
• is your tongue relaxed inside the mouth?
• does your head follow the eye movement, or do the eyes follow the movement of the head? What feels freer?
• is the scalp loose, or is it tight around the cranium?
• do you feel your cervicals lengthening?
• what happens if you increase the amplitude of this movement?
• how far to the side can your head roll without dragging the shoulders with it?

E- The Complete Kaya Kalpa
Goals:
• “clean up” our patterns
• relax the body
• help movements find their way through the body
• increase body fluidity
• increase inner awareness

Preparation: same as in the “Heel Kaya Kalpa”. Briefly review “Active Lying Down”.

Movement: gently allow the “Heel Kaya Kalpa” to happen for a while, or until you feel your spine relaxed. As this movement comes to an end, allow the “Pelvic Girdle Kaya Kalpa” to initiate. Once you are comfortable with the movement, allow the “S.G. Kaya Kalpa” to join, but, as the legs roll in, allow the arms to roll out. Once you are comfortable, let the head roll from side to side for as long as it feels right to you.

Awareness questions:
• what are you feeling through your body? allow these sensations to stay with you.
• do you feel the inner dynamic forces flowing through your body?
4) TOES & ANKLE FLEXION

**Goals:**
- differentiate the toes / ankle hinges
- open and lubricate the toes / ankles hinges
- establish the primary diaphragm in the foot
- evoke horizontals in the toes / ankles hinges

**Preparation:** sit on the floor with your back against the wall and the sacrum as close as possible to the wall (this may be very difficult for people who have short hamstrings). Bend one leg, allowing the heel to stay aligned with the ischial tuberosity. Move the heel of the bent leg until it is beside the knee of the extended leg. Allow the weight to sink into the back of the extended leg, especially in the back of the knee.

**Movement 1:** you are going to work with the foot of the bent leg:

- allow toes to lengthen forward.
- then allow toes to arc back.
- let the toes return to the starting position while extending and widening.
- explore this sequence about three times.

**Awareness questions:**
- as your toes lengthen forward, do you feel your whole plantar fascia lengthening?
- as your toes arc back, do they all come together? or just the big toe?
- what happens if you allow this movement to start with the 4th and 5th toes, as if they are wings opening to the sides?
• do you feel something moving along the side of your lower leg?
• as the toes come down, do they come down together? do they widen?
• what do you feel in your lower legs as you do this movement?
• what happens if before arcing your toes back, you let go of your gastrocs?
• are you breathing?

Movement 2:

• after exploring the previous movement about three times:
• arc the toes back, then hinge the foot at the ankle allowing the foot to arc back towards you.
• then let the foot move down hinging at the ankle. After your foot finds the floor, let the toes move down.
• explore toes up/ ankles up/ ankles down/ toes down, about three times.

Awareness questions:
• as you hinge your foot back are the quads relaxed? is the sole of your foot open? are you breathing?
• are you using a lot of energy, or the least amount possible?
• are you using force?
• as you lower your foot, are you aware of the EOF?
• are you allowing your EOF to “look” into the earth? wide and deep?
• as you hinge at the ankles, does your foot maintain its alignment, or does your foot pronate or supinate?
• do you feel movement in the interosseous membrane?
• do the toes and ankle hinge have independent movements?

Closure awareness questions:

• after having explored this sequence with one foot, you are ready for your other foot. Allow yourself time to stay with the sensations in your feet and legs.
• What is new? what is different?
• as you get up and walk, are you aware of your toe hinges? of your ankle hinges? do they “work” each step you take? are you aware of the EOF? do they “make contact” with the floor?
5) **GRASSHOPPER**

*(Toes-Ankle-Knee Flexion)*

**Goals:**
- differentiate toe/ankle/knee hinges
- open and lubricate toe/ankle/knee hinges
- evoke horizontals in the toe/ankle/knee/hip hinges
- evoke movement through the hinges
- improve lines of transmission in the entire leg
- evoke congruency in the entire leg
- connect the leg to the psoas
- awaken the LDH
- evoke lift
- get a sense of the front of the spine (or back of core space at LDH)

**POSITION #1**

**Preparation:** the same as in “Toes and Ankle Flexion.”

**POSITION #2**

**Preparation:** after having explored “Toes and Ankle Flexion” with both feet, bend the first leg you worked while keeping the heel aligned with the ischial tuberosity. This time bring the foot as far forward as possible still keeping all toes in contact with the floor. If you want you can help stabilize the knee with both hands.
Movement:
- as before, allow your toes to lengthen forward.
- then up and back in an arc.
- next, allow your ankle to hinge as far back as possible and then down again allowing the foot to plant into the floor.
- and finally bring the toes down, extending them wide and long.
- explore this movement two or three times and be curious about how the other foot / leg respond.

Awareness questions:
- all of the awareness questions for “Toes and Ankle Flexion”, plus:
- does your knee respond to these movements?
- does your knee want to abduct (go out) as you explore toes / ankle movements?
- or does it want to adduct (go in)?
- does the back of your knee stay relaxed and open?
- is there a lot of force in your gastrocs?
- in your thighs?
- in the back of your knee?
- as your foot hinges back at the ankle, are you aware of the response in the groin?
- do you feel your lumbars also responding by pressing stronger into the wall?
- are you breathing?
- are you doing the whole movement with the least possible amount of force?
- is the belly relaxed?
- is the pelvic floor relaxed?
- is your jaw relaxed?
POSITION 3

**Preparation:** sitting with your back against the wall, the sacrum as close as possible to the wall and both legs extended.

![Image of leg position](image.png)

**Movement:**
- start to allow your toes to “float” up, then back, in an arc.
- at the same time as the toes arc back, allow your ankle to open and hinge back.
- at the same time as the ankle hinges back, allow your knee to “float” up, keeping the heel on the floor.
- to reverse: allow the knee to sink down at the same time as the ankle and toes let go, extending the leg through the EOF.

**Awareness questions:**
- all of the previous questions for the 1st and 2nd positions plus:
- in this “grasshopper” movement are the toes, ankle, knee and hip joint working at the same time?
- does the movement flow through all the joints?
- as you extend your legs, is there more space in the hip joint? in the knee? in the ankle? in the toe hinge?
- do these joints show horizontals as they move?
- if you are doing the movement with the least possible amount of effort, or force, do you feel the movement flowing through the whole leg, from LDH to EOF and back to LDH?
- does something move inside, around the LDH? (if so, you are feeling the origin of the psoas muscle)
- does your leg move from the LDH through your pelvic floor?

**Now the sequence reverses itself**
You can explore the movement in this “Grasshopper” position again, or after having experienced it two or three times, go back to position 2, then position 1.
Closure awareness questions:
as you get up and walk :
• what are the sensations in the hinges you have worked?
• are the toes, ankles, knee, and hip joint congruent?
• as your leg swings forward into the next step, do you feel it coming from the LDH? through the pelvic floor?

Positional Variations: We did the “Grasshopper” in the sitting position, which is probably the best position when first teaching this to your client. However, if he/she has a more sophisticated body, you may explore this same modality with a client:

a) lying on the floor, with the ischial tuberosities touching the wall and the sacrum heavy on the floor. This position allows more rest for the whole back and also helps differentiate the leg from the pelvis, besides helping to drain swollen and tired legs or varicose veins.

b) lying on the table (or on the floor). When using this position make sure your client has learned the whole sequence first in the sitting position. It is also a good idea to always have the leg that is not working bent to help stabilize the pelvis while you work with the other leg. The “Grasshopper” in the supine position can be excellent in a P.G. integration session (“lower” 8 or 9) while you do tracking.

Movement variations: In the 3rd position with the legs extended, after you have explored the movement with the toes flexed back two or three times, you can explore the same movement with the toes back but the foot down:
- allow the toes to float up, then back in an arc.
- at the same time allow the ankle to “open” in the front, pointing your foot while keeping the toes back.
- at this time your knee will want to hyperextend: invite it to float up. This movement variation is especially interesting for those people who do not use their toes (especially the big toe), in the push-off phase of the gait.

Awareness questions:
• as you point your foot with the toes back are you keeping your plantar fascia open?
• is your thigh relaxed?
• as you do this movement, do you feel a different quality of movement in the lower leg? (as compared to when you flex the foot.)
6) **PELVIC ROLL**

**Goals:**
- differentiate, open and lubricate hip joints
- differentiate, open and lubricate sacral-lumbar joint
- evoke mobility in blocked areas
- evoke mobility from pelvis up through spine
- improve mobility in whole spine
- relax whole spine
- teach lines of transmission from pelvis into feet and vice-versa
- “open” front and back of pelvis
- awaken core awareness
- encourage pelvic floor awareness

**Preparation:** lie on your back, bend your knees, feet flat on the table about three inches apart (or approximately the distance between your sit-bones), knees away from each other at the same distance, arms along the body, and palms down.

**Movement:** tilt your pelvis back allowing its weight to transfer into the feet. Hold the tilted position for a while and then let go. Repeat this movement in a rhythmic, slow motion allowing your pelvis to rock back and forth.
Awareness questions:

1. As you are in the preparatory position:
   - do you feel your feet on the table?
   - does your pelvis (sacrum) feel the table?
   - does your pelvis surrender its weight into the table?
   - is the lumbar area relaxed towards the table?
   - does the pelvic floor breathe?

2. As you allow your pelvis to rock back transferring its weight into the feet:
   - do your belly contents gently fall back?
   - does your navel gently fall back towards the spine?
   - do your knees move towards the feet?
   - do your feet press into the table stronger?
   - do your hip joints “open” or lengthen?
   - do both the front and the back of your pelvis open?
   - does the back of your waistline surrender itself to the table?
   - do your abdominal organs follow the movement or do they want to be forced out of the navel?
   - do your gluteals just follow the movement, or do they want to participate in the movement, squeezing themselves towards each other? Usually people with a posterior tilted pelvis will tense their gluteus in the pelvic roll.
   - do your thighs (quadriceps) remain relaxed throughout movement, or do they tense up?
   - do you feel your ischial tuberosities sliding down, towards your feet as the pubic bone rolls up towards your head?
   - do you feel the roundness of the pelvis?
   - do you feel the movement coming through the pelvic floor?
   - do you feel the movement flowing through the inner aspect of the legs?
   - do you feel the movement flowing through the middle of the joints (hip, knee, ankles)?
   - does the rocking motion flow up through the spine?
   - does your neck move?
• does your head respond to the movement?
• does your chin move up and down?
• do you feel the connection from the pelvis into the feet?
• do you feel the connection from the pelvis into the thorax and head?
• do you lengthen “inside”, through the front of your spine?

3. As you rock back and forth:
• are you allowing this rocking motion to loosen your hip joint?
• your sacral-lumbar joint?
• all other spinal joints?
• do you feel the fluidity of this movement along the spine?
• are you allowing this rocking motion to loosen all your tissues?

Note: The “Pelvic Roll” can be extremely difficult for some people. In this case it can be easier to first teach them the “Feet to Pelvis Roll.”

Note: You can combine the Pelvic Roll with the “Arm Drops” to access the axial complex.
7) SACRAL ROLL

Goals:
• refine most of the goals of the pelvic roll
• evoke awareness and functioning of deep internal pelvic muscles
• free the external muscles around the hip
• awaken the pelvic diaphragm

Preparation: the same as for the “Pelvic Roll”.

Movement: as you exhale, let your pelvis tilt back allowing the tip of your coccyx to gently go up towards the back of your knees. The movement goes only to the top of the sacrum. Inhale as the sacrum reverses the motion. The movement goes only to the base of the sacrum (not the coccyx). Then allow your sacrum to come to a neutral position, where it is neither flexed nor extended. Rest in this neutral position, breathing gently into the pelvic floor. Repeat the movement several times.

Awareness questions:
(many of the “Pelvic Roll” awareness questions are applicable here)
• do you have a sense of the front of your sacrum?
• do you have a sense of the back of your sacrum?
• from where do you initiate this movement?

• are your gluteals relaxed as you roll your sacrum?
• are your thighs relaxed as you roll your sacrum?
• are your legs relaxed as you roll your sacrum?
• are the back of your knees relaxed as you roll your sacrum?
• from where do you initiate this movement?
• does something happen in your pelvic floor?
• does something happen in the floor of your mouth?
• does something happen in the roof of your mouth?
• does something happen in the top of your head?
8) FEET TO PELVIS

(“1,000 Dots Foot Stamp”)

Goals:
- introduce the “Pelvic Roll”
- connect the feet into the pelvis and vice-versa
- teach the pelvic floor to connect with the EOF
- connect feet to lumbars
- improve the lines of transmission from the pelvis into the feet and vice-versa
- differentiate the vertebrae from each other
- explore asymmetrical patterns in the legs

Preparation: the same as for the “Pelvic Roll”.

Movement: instead of tilting your pelvis back allowing its weight to go into the feet through the pelvic floor and knees, tilt your pelvis back from your feet: feel the whole surface of both feet in contact with the table. Imagine each foot has 1000 dots that go from the toes to the heels. Slowly and evenly press the 1000 dots into the table and let your pelvis roll back. Then slowly release the pressure. Repeat this movement a couple of times. The slower you move, the more movement you will feel.

Awareness questions:
As you are in the preparation position: the same awareness questions as those for the “Pelvic Roll” can be used.
1. As you're pressing your feet into the table:
   - are you pressing the whole surface of the feet evenly? or is there more pressure on the heels?
   - are the toes also pressing?
   - can they lengthen as they press?
• do you feel the push pattern traveling up through the bones of your lower legs and thighs into your sacrum and lower back?
• from the lower back up along the spine to the head?
• do you feel the push pattern traveling up through the ankles, knees and hip joints?

• do you feel your lower back pressing into the table?
• do you feel each vertebra pressing into the table?
• do you feel each vertebra widening, as it presses into the table?
• do you feel the curves of your spine smoothing out?

• as you press both feet with equal strength, do you feel one leg stronger than the other? if so, press again and reverse the asymmetrical pressure. Repeat this movement a couple times.
• do you feel both sides of your pelvis rolling back, with the same quality?
• do you feel your extrinsic lower back muscles lengthening as you press your feet into the table?
• the deep, intrinsic muscles also?

2. As you are releasing the push :
• do you feel your feet evenly releasing the pressure?
• do you feel your lower back slowly unrolling?
• do you feel the unrolling “sliding” down through the sacrum? through the sit-bones? and finally through the coccyx?
• do you feel the curves of your spine increasing?

3. As you rock back and forth :
• do you feel the deep massage this movement causes in your core?
• do you feel fluidity in your core?
• do you feel the movement reverberating through your body?

**Positional Variation:**

**Goal:** this position is especially useful when dealing with asymmetrical patterns.

**Preparation:** lie on the floor and press your feet into the wall, keeping the thigh at a right angle with the pelvis.
Movement Variation: press one foot at a time either against the table or the wall.

Goals:
• to deal with asymmetrical patterns
• help differentiate cylinders
• establish length along the sides of the body

Awareness questions:
• do you feel the push pattern only traveling up along the side of the body from where your foot is pushing?
• does the other side remain relaxed?
• do you feel one cylinder “sliding up”?

Note: The “1,000 Dots Foot Stamp” pressing one foot at a time, be it against the table or the wall, is a rather sophisticated modality. Not for beginners.
9) PELVIC CLOCK

Goals:
- evoke fluidity of movement in the pelvis
- evoke pelvic core awareness
- awake pelvic core space
- lubricate the hip joints
- differentiate the pelvis from the legs and spine
- lubricate lumbo-sacral joint
- enhance lines of transmission from the pelvis into the feet and vice-versa
- evoke functioning of intrinsic abdominal muscles

Preparation: lie on your back, with both knees up and supported by the feet (two or four inches apart), arms along the body, palms down, elbows soft and slightly bent to the sides. Gently tilt your pelvis back allowing its weight to transfer into the feet (if necessary briefly review the “Pelvic Roll”). Right there, in the back of your waist line, is 6 o’clock and 12 o’clock is down towards your coccyx. To the left and right sides of your pelvis are the 9 o’clock and 3 o’clock positions, respectively.

Movement: gently and doing the softest possible movement, roll your pelvis to 9 o’clock, then 12 o’clock, 3 o’clock and back to 6 o’clock. Explore the pelvic-clock in this direction two or three more times and then rest before reversing direction.

Awareness questions:
- are you allowing the weight of your pelvis to drop into the floor?
- are you allowing this movement to happen with the least possible effort?
• are you breathing?
• are you allowing your abdominal muscles to remain quiet and relaxed?
• are you allowing your quads to remain quiet and relaxed?
• are you allowing your gluteals to remain quiet and relaxed?
• are you allowing your lower back muscles to remain quiet and relaxed?

• are you aware of where your pelvis movement is fluid?
• are you aware of where your pelvis movement is not fluid?
• are you allowing your pelvic floor to remain relaxed?
• are you allowing your spine to respond to the movements?
• are you aware of the different qualities of contact of your feet with the table as your pelvis rolls around the clock?
• are you aware of the two acetabulae rolling around the head of the femurs as your pelvis rolls around the clock?

• from where in your body are you initiating the pelvic clock? the more superficial layers? the more deep layers?
• what is it you feel inside your belly when you allow this movement to be as small as possible?
• what is it you feel in the back and in the front of your abdominal core space when you allow this movement to be as subtle as possible?
• are you breathing while doing the smallest and most subtle movement possible?
10) SELF PELVIC-LIFT

**Goal:** to give yourself a nice pelvic-lift whenever you need one and your Rolfer is not around!

**Preparation:** lie down, as if you were going to get a pelvic lift from your Rolfer. Place your hands under your pelvis, palms down, towards the table, the tips of the thumbs touching each other and the tips of the index fingers also touching each other, thus drawing a triangle with your fingers. The tips of the index fingers under the coccyx and the thumbs under the base of the sacrum, forming sort of a little bed for your sacrum.

Movement: allow your sacrum to “sink down” towards this little bed made by your thumbs and index fingers. Allow your awareness to go with your breath to the front of your sacrum and gently help it let go from the inside out. Allow yourself time... Subtly invite your sacrum to do some micro-movements as if you were sifting flour so that it “frees itself” from the two iliac bones. Then rest, allowing your whole body to breathe. Listen to the inner silence... Feel your inner movements... When you are ready, with an exhalation, drag the palms of your hands down along the table towards your feet and to the sides, as if you were “opening dough”. As your hands go down and towards the sides allow your sacrum to lengthen down and open to the sides. At the same time allow your lumbars to let go, open and fall back towards the table.
11) REVERSED PELVIC ROLL

Goals:
- evoke awareness and functioning of the LDH
- evoke length in the lumbers
- open and lubricate the hip hinges
- lengthen the psoas

Preparation: lie on your stomach, feet off the table, arms along your body, palms down, legs straight approximately two to four inches apart (or the distance between your sit-bones), and head to either side.

Movement: as you exhale, slowly allow your pelvis to tilt back, “sliding” it towards your feet. Hold a while, then let go. Repeat a couple of times.
Awareness questions:
• are you doing this movement with the least amount of effort possible?
• do you feel the LDH moving?
• are you initiating this movement from the LDH?
• is your lower back sliding and lengthening towards the feet?
• do you feel the ischial tuberosities “pointing “ down towards the feet?
• do you feel the space between the lower back vertebrae opening?
• are you allowing length in the front of the thighs?
• are you feeling your ASIS and pubic bone “rolling”?
• do you feel your pelvis rolling in the hip hinge?
• do you feel the space between the pubic bone below and the sacrum above?
12) DOWN TO THE FEET
(Reversed Pelvic Roll Variation)

Goals:
• access and deal with pelvic asymmetries
• access and deal with spinal asymmetries
• lengthen the psoas
• bring awareness and length into the 6th structural hour territory
• evoke front to back balance
• evoke cylinders differentiation (especially in movement 2)
• evoke length in the quads
• evoke lateral inclination movements of the pelvis (especially in movement 2)

Preparation: the same as in the “Reversed Pelvic Roll”.

Movement 1: after exploring the “Reversed Pelvic Roll” do the movement again flexing both the ankles and toes (as in the “Toes and Ankle Flexion”). Hold a while, then let go. Repeat a couple of times.

Awareness questions:
• are you allowing length in the front of your body?
• are you allowing length in the back of your body?
• are you allowing length from the LDH all the way down to the heels?
• are you allowing length in your plantar fascia?
• are you allowing the gluteals to remain relaxed as you tilt your pelvis back and flex your ankles and toes?
• do you feel the connection from the front of your spine, in the LDH area, through your pelvic floor, through the medial lines of your legs to the EOF?
• does one side of your pelvis seem to roll easier in the hip socket than the other?
• does one side of your lumbar seem to lengthen more and/or easier than the other?

Movement 2: after you have explored the “Down-to-the-Feet-Reversed Pelvic Roll“ with both feet at the same time, explore it with one foot at a time. This movement resembles the same movements you make when you walk downstairs.

Awareness questions:
• are you allowing length in the quadriceps of the leg you are working?
• are you allowing length in the hamstrings of the leg you are working?
• do you feel the external lateral inclination of the pelvis in the side of the leg you’re working?
• do you feel the internal lateral inclination of the pelvis in the side of the leg you are not working?
• does your pelvis incline easier to one side?
• is it different to initiate this movement from the toes up rather than LDH down? What changes?
• are you allowing the “shorter” lumbar side to let go and lengthen?
• do you feel the left and right cylinders differentiating from each other through the middle line?
13) ADVANCED PELVIC ROLL
(Reversed Pelvic Roll With Knee Flexion)

This movement technique is very sophisticated and requires a previous exploration of “Reversed Pelvic Roll” for the person to get the most out of it. It also helps if the person monitors lower back and gluteals action with his hands.

Goals:
- evoke length in the hamstrings
- evoke length in the quads
- balance psoas / hamstrings
- differentiate knees from the upper and lower leg
- open and lubricate the knee joints
- release tension in the lower back

Preparation: the same as in the “Reversed Pelvic Roll”.

Movement: As you exhale, slowly allow your pelvis to tilt back, sliding the pelvis down towards your feet. Then allow the quads and hamstrings to lengthen and let the knee flex while the lower leg floats up.

Awareness questions:
- are you allowing your lower back to remain relaxed?
- are you allowing your gluteal to remain relaxed?
- are you allowing the front of your body to lengthen?
- are you allowing length in the quads?
- are you doing this movement with the least amount of effort possible?
• are you allowing space between the femur and tibia as your lower leg comes up?
• are you allowing your ankle and toes to remain neutral during this movement?
• are you breathing?
• are you allowing length in front of your spine, from the LDH through the pelvic floor?
• do you have a sense of length and space between the MDH and LDH?

Closure awareness questions:
• as you walk, do you feel your legs extending from the LDH through the pelvic floor?
• do the knees “open” and respond?
14) HEEL DRAG

(Leg Drag)

Note: Traditionally this movement technique is called “Leg Drags”, but I feel that “Heel Drags” is a name that describes it better.

Goals:
- evoke psoas function
- evoke mobility in the back of the core
- balance rectus/psoas function
- lengthen lower back muscles
- lengthen medial lines of transmissions in legs
- help differentiate cylinders (see Positional Variation)

Preparation: lie on your back, legs straight, feet two to four inches apart, arms along your body, palms down. Briefly review “Active Lying Down”.

Movement 1: as you exhale, allow one of your knees to “float up”, dragging the heel along the table. Keep lifting the knee as if there was a string attached to the knee cap, pulling the knee straight up towards the ceiling. Meanwhile, allow your heel to pivot (plantar
flexion), letting the foot slowly come to the table. Keep lifting the knee until the foot completely touches the table. Rest a while and then perform Movement 2.

**Movement 2:** with an exhale allow your knee to float down, sliding your heel down. When the leg is straight again, then elongate the leg, extending through the heel, through the EOF. Explore the whole sequence 4 or 5 times, then explore with the other leg.

**Awareness questions for movement 1:**
- are you keeping your lower back long and relaxed?
- are you keeping your abdominal muscles (rectus) relaxed?
- are you allowing your quads to remain relaxed?
- are you allowing your groin to stay open as your knee floats up?
- if so, do you feel the psoas muscle working (flexing) as your knee floats up?
- are you allowing your pelvis to slightly tilt back as your knee floats up?
- are you doing this movement with the least amount of effort possible?
- are you keeping the back of your knee relaxed?
- are you keeping your ankle soft and relaxed?
- are you aware of the moment when your foot completely touches the table?
- do you feel the small adjustments your ankles make as your foot touches the table?
- do you feel these adjustments progressing up to and through the knees?
- from the knees up to and through the groin?
- from the groin up to the LDH?

**Awareness questions for movement 2:**
- as your knee is floating down, are you keeping your lower back long and relaxed?
- as your knee is floating down, are you keeping your abdominal muscles relaxed?
- are you allowing your quads to remain relaxed?
- do you feel your psoas muscles working (extending)?
- are you allowing your ankle to hinge?
- as you elongate the leg through the heel, does the lower back remain long and relaxed?
- as you elongate the leg through the heel, do the abdominal muscles remain relaxed?
- does the groin remain relaxed?
- do the quads remain relaxed?
• do you feel the connection from the LDH to the EOF through the pelvis, via the psoas?
• do you feel the medial lies of transmission in the lengthening?

Positional Variation: Have one leg already bent while you explore the “Heel Drag” with the other one. In this case briefly review the “Feet to Pelvis” roll. This bent leg position favors people with an anterior tilted pelvis, as it helps to stabilize the pelvis. It also makes the “Heel Drag” exploration easier for the client to monitor the movement. It also makes it possible to differentiate cylinders as you extend through heel and EOF.

Movement Variation: after one of the knees come up, let the other one also float up. Rest for a while and only then allow the first leg to extend, and then extend the other one. Rest again before alternating legs. This movement variation for the “Heel Drags” makes it easier to perceive psoas function asymmetries, and in a way is a combination of “Heel Drags” and “Pelvic Roll“.
15) KNEE OVER

(Leg Over With Knee Drops)

Note I: Traditionally this movement technique is called “Leg Over”, but I feel that “Knee Over” is a name that describes it better.

Note II: The last part of this movement technique can be a technique in itself.

Goals:
• bring awareness to the hip socket
• further evoke psoas function
• further balance rectus / psoas function
• release tension in lower back
• evoke mobility in the upper back
• differentiate leg from pelvis (especially with movement 2)
• teach the leg to drop through the hip socket (especially with movement 3)
• differentiate upper and lower legs

Preparation: lie on your back, feet flat on the table, with your knees up and two to three inches apart, arms along the body, and palms down.
Movement 1: as you exhale, allow one of your knees to “float up” and toward the head creating an arc, until the thigh is perpendicular to the pelvis in the hip socket. Rest a little in this position, (Refer to the Awareness questions for movement 1), then go to movement 2:

Movement 2: from the perpendicular position, let your knee go further back until it is above the navel. Rest a little in this position (refer to the Awareness questions for movement 2) then go to movement 3:

Movement 3 (or Knee Drops): allow your knee to drop back down to the starting position, letting the foot fall flat on the table.

Awareness questions for movement 1:
• are you allowing your lower back to remain relaxed as your knee comes up?
• are you allowing your abdominal muscles to remain relaxed as your knee comes up?
• are you allowing the weight of your thigh to sink into the hip socket?
• are you allowing the weight of your lower back towards the foot?
• are you allowing this movement to initiate with the psoas muscle?
• are you allowing the upper back to widen?

Awareness questions for movement 2:
• are you allowing the weight of your thigh to sink into the hip socket?
• are you allowing the weight of your lower leg into the foot?
• do you feel your lower back muscles lengthening?
• are you allowing your abdominal muscles to remain relaxed?
• are you allowing your organs to relax and rest back against your spine?
• are you allowing your hamstrings to lengthen?
• are you allowing your quads at the ASIS to remain relaxed? (You can monitor this with your hands.)
• are you allowing your ischial tuberosities to lengthen towards the feet?
• do you feel the thighs differentiating from the pelvis at the ischial tuberosities?
• is there a tendency for your knee to go in medially or out laterally?
• do you feel the massage this movement does in your belly?

Awareness questions for movement 3:
• are you allowing your knee to drop as heavily as possible, or are you “controlling” its fall?
• are you allowing tension around your hip socket to release as you let your knee drop?
• are you allowing your lower back muscles to remain long and relaxed?
• are you allowing your abdominal muscles to remain relaxed?
• are you allowing the hamstrings to let go in order to initiate this movement?
• do you feel your leg dropping through the hip socket?
• do you feel your groin opening and lengthening?
• does your foot fall flat on the table?
16) LEG CIRCLE

Movement Variation I: after movement 1 for “Knee Over”, when the thigh is perpendicular to the pelvis in the hip socket, allow the leg to do some very small circles in the hip socket. Explore the “Leg Circles” in both directions. Finish with the “Knee Drop.”

Goals:
- lubricate and release tension in the hip socket
- restore mobility in the hip socket

Awareness questions:
- do you feel holding anywhere around the hip socket?
- are you allowing this movement to initiate from the hip socket or from the knee?
- what changes if your knee does the circles and the femur follows at the hip socket?

Movement Variation II: after movement 2 for the “Knee Over”, before letting the knee drop down, do a small and repetitive movement with the bent leg, taking the knee further over and back towards the perpendicular position.

Goals:
- further lubricate the hip joint
- further release tension in the lower back
- further massage the abdominals
- evoke awareness of the psoas origin at the LDH
- evoke mobility at the LDH
- evoke awareness to the back of the core space, in front of the spine

Awareness questions:
• do you feel this repetitive movement “pumping” into the front of the LDH?
• do you feel the femur rolling in the hip socket?
• do you feel the massage this movement does to the lower back?
• do you feel the massage this movement does to your abdomen?
• does the lower back and abdomen accept this massage?

“Knee Drop” Variations or “Leg Extensions“: instead of allowing the knee to drop back down to the starting position, quickly extend the leg, “throwing” the heel as far as possible.

![Image of a person lying on the floor with their leg extended]

Goals:
• further release tension around the hip socket
• further teach the leg to drop through the hip socket
• teach the leg to extend through the pelvis, rather than from the pelvis

Awareness questions:
• are you keeping your lower back long and relaxed as you extend the leg?
• are you allowing any tension around the hip socket to let go with the movement?
• are you allowing your leg to lengthen down and away, or are you controlling the movement?
17) LEG ROTATION

Note I: The “Leg Rotations” can be done with different levels of complexity. They can be more powerful if the client has explored the “Grasshopper” (Toes / Ankle / Knee Flexion) before.

Note II: This movement technique is very useful after the P.G. integration session as it so nicely integrates movement into the LDH.

Goals:
- open front and back of the LDH
- open and lubricate the hip joints
- open and lubricate the sacro-iliac joints
- release tension in the thighs
- release tension in the gluteals
- evoke cylinder awareness
- release and lengthen the hamstrings
- lengthen the gastrocs
- lengthen the psoas
- reinforce horizontals in toes / ankles
- reinforce lines of transmission in the whole leg

Preparation: lie on your back, one leg straight, the other leg bent with the foot flat on the table, the knee aligned with the ischial tuberosities, arms along your body, palms down.

Movement 1: work with the extended leg, changing the position of the foot in the following order:
- foot and toes in neutral position
- foot and toes pointed
- foot pointed and toes flexed
- foot and toes flexed
The Reverse:
- foot and toes flexed
- foot pointed and toes flexed
- foot and toes pointed
- foot in neutral position

- when the above sequence is complete you’ll be ready to go to the other leg.

Movement 2: always allowing the toe, ankle and knee joints to stay as aligned as possible, and going for horizontals in the joints (refer to “Grasshopper”), let the leg do an external rotation first, as far as possible. Then initiate an internal rotation, also going as far as possible. These movements should be explored very slowly from the deep rotators at the hip socket and not the adductors.

Awareness questions:

1. Awareness questions to check frequently during this movement technique:
   - are you pressing all of the “1000 Dots” of the foot of the bent leg against the table with equal pressure? (Refer to the “Feet to Pelvis”)
   - are you allowing the groin of the extended leg to remain relaxed and long?

2. Awareness questions to explore with any of the foot and toe positions:
   - where are you initiating the external leg rotations from? the femur in the socket? the lateral aspect of the knee? the lateral malleolus?
   - what becomes different in each possibility?
   - where are you initiating the internal leg rotation from? the femur in the socket? The medial aspect of the knee? the medial malleolus?
   - what becomes different in each possibility?
   - is it easier to initiate the movements from the femur, in the socket? You can better monitor this by having one hand on your adductors.

3. Awareness questions to explore with any of the foot positions:
   - do you feel the head of the femur rolling in the socket?
   - are you aware of the back of your pelvis getting wider and heavier as your leg rotates medially?
   - do you feel your sacro-illiac joint “opening“ as your leg rotates medially?
• are your quads (thighs) doing a lot of work? If so, allow your legs to roll in and out with the least effort possible.
• are you allowing the rotators to let go (lengthen) as your leg rotates medially?
• are you allowing your gluteals to remain relaxed?
• as your leg rotates laterally, are you allowing the inner line of the leg to lengthen?
• as your leg rotates medially, are you allowing the lateral line of the leg to lengthen?
• are you aware of the connection of the leg, through the pelvis, to the front of the spine?
• how far up, along the front of your spine, do you feel your leg “rolling” out and in?
• what do you feel in the area in front of the spine?
• what do you feel in the area in back of the spine?
• do you feel the unscrewing of the hip socket?
• where do you need to let go the most? in front of the hip socket (especially for internal legs)? or in the back of the hip socket (especially for external legs)?
• are you breathing?

4. Awareness questions to explore with specific foot and toe positions:

  **with foot and toes in neutral position**
  • are you allowing the EOF to remain open?
  • are you allowing the ankle to remain relaxed?

  **with foot and toes pointed**:
  • are you allowing the plantar fascia to remain open, or are you crunching it?
  • are you allowing the EOF to remain wide?
  • are you maintaining the foot position with a lot of effort in the ankle? or are you doing it with the least amount of effort possible?
  • likewise with the gastrocs?
  • likewise with the back of the knees?
  • likewise with the hamstrings?
  • likewise with the quads?
  • are you aware of your heel being pushed forward by the lower leg muscles?

  **with foot pointed and toes flexed**:
  • are you allowing the plantar fascia to remain open, or are you crunching it?
  • are you allowing the EOF to remain wide?
  • are you maintaining the foot position with a lot of effort in the ankle? or are you doing it with the least amount of effort possible?
• likewise with the gastrocs?
• likewise with the back of the knees?
• likewise with the hamstrings?
• likewise with the quads?
• are you aware of your heel being pushed forward by the lower leg muscles?

with foot pointed and toes flexed:
• are you allowing the front of your lower leg and ankle to lengthen?
• are you allowing your plantar fascia to lengthen?
• are you allowing your gastrocs to remain as relaxed as possible?
• are you allowing your quads to remain relaxed?

with foot and toes flexed:
• are you allowing the whole leg to lengthen down and away from the pelvis?
• are you doing this movement with the least possible effort?
• do you feel the letting go and lengthening of the hamstrings?
• do you feel the letting go and lengthening of the gastrocs?
• are you aware of your heel being pushed back by the lower leg muscles?

Positional Variations:

Variation I:

Goals: in this position the “Leg Rotations” will also evoke the differentiation of the legs and pelvis and will release the hamstrings and gastrocs even more. Many times it is easier to teach “Leg Rotation” in the sitting position because the client can see their feet better.

Preparation: sit on the floor, with the whole back flat against the wall, the sacrum as close as possible to the wall (this can be very difficult for those people who have short hamstrings), and the legs extended in front of you. Allow weight to sink into the back of the legs and keep them aligned with the ischial tuberosities. Go through the whole sequence first with one leg then the other.
Variation II:

**Goals:** this position helps the client to relax the lower back, release and lengthen the gastroc, and differentiate the legs from the pelvis. It is excellent for when legs are tired. A nice sequence for this is the “Feet to Pelvis” with feet on the wall.

**Preparation:** sit on the floor and put your legs up on the wall, with your ischial tuberosities as close as possible to the wall, arms along the body, and palms flat down.
Standing is one of the activities that more than any other distinguishes man from animals. However, our culture does not recognize it as an activity. Yet, as living creatures with alive, pulsating bodies, we must constantly find our balance. When we understand and feel that there is life with movement and rhythm in quiet standing, we will find it an exciting and never boring exploration. Sensitive standing can become a form of body meditation that can connect us to our center and thus integrate our Whole Being. Explore Sensitive Standing at the end of your structural sessions as a transition from movement sessions into daily life, or as a big piece of work or even as a whole session.

Start with and use the questions you feel are most appropriate for your goals.

- walk around a little, just to move some.
- walk a little bit more until you find a place in the room that you feel to be your place, a place that feels right to you.
- feel how you stand.
- what happens if you close your eyes while standing?
- do you loose your balance?
- do you feel insecure?
- do you experience anxiety?
• are your eyes still active behind the eyes lids?
• are your eyelids resting or are they working hard to remain closed?
• if you want or need, allow your eyes to open a little to find relief from the urge to see.
• or, if this is the case, allow the urge to see to let go. Do you notice with this letting go an immediate tension release in the eyes and eyelids?
• do you feel that in freeing these energies that you have also freed energies for coming to a fuller and more balanced standing?

now, as you are standing, do you perceive yourself thinking?
• what happens if you allow your mind to rest, your thoughts to quiet down? Do any new sensation come into your consciousness?
• or are you fixing your attention on difficulties and trying to correct them?
• what happens if you allow your awareness to be open to whatever inner changes that may happen spontaneously?

as you stand, do you feel the surface you are on?
• its texture?
• its temperature?
• the softness of the carpet?
• the hardness of the floor below the softness of the carpet?
• do you feel the support that the floor offers you?
• do you accept this support?
• do you trust it?
• if you feel and accept this support, how are you relating to it?

• are you standing with the whole soles of your feet?
• or are you allowing more weight into your heel? or into the front of your feet? or in the lateral borders? or in the medial borders?
• what if you allow more weight into the EOF?
• how far apart are your feet?
• how does it feel to allow your feet to be a little closer to each other? or a little more distant from each other?
• do you identify your feet as yours?

• are you aware of your connection to the floor?
• how do you relate to the floor through your feet?
• do you allow the connection with the floor to penetrate through your ankles to your lower legs?
• do you allow it to penetrate through your knees to your thighs?

• do you keep your knees locked? if so, when you unlock your knees do you notice small adjustments in your ankles? in your pelvis? in your trunk?
- are you squeezing your thighs?
- what happens if you allow this holding to let go?
- are you tightening up your gluteals?
- what happens if you allow this holding to let go?
- are you tightening up your pelvic floor?
- what happens if you allow this holding to let go?
- are you tightening up your belly?
- are you tightening up your jaw?
- are you tightening up your face?
- are you tightening up your eyes?
- are you tightening up your scalp?

- what happens if you shift your pelvis all the way forward? backward?
- where, in this direction, is "home" for your pelvis?
- what happens if you tilt your pelvis anteriorly? posteriorly?
- where in this tilting is "home" for your pelvis?

- is your chest sunken in or projected up?
- what happens to the quality of your breathing if your chest sinks in? if you raise your chest up?
- what do you feel if your thorax stays behind your pelvis? in the front of your pelvis? above your pelvis?
- are your shoulders in front or behind your thorax?
- are your arms in front or behind your thorax?
- what happens if you allow your shoulders and arms to be along the middle of your body?
- do you feel the weight of your arms hanging down or do you hold them up?

- do you allow space in the shoulders joints?
- do you allow space in the elbow joints?
- do you allow space in the wrists?
- do you feel your arms are part of you?
- do you feel present to the tip of your fingers?

- does your rib cage support your arms?
- does your pelvis support your thorax? and your arms?
- is your head projected to the front of your thorax?
- what do you feel if you allow your head to rest on the top of your thorax, between your shoulders?

- what happens to your neck and head if you allow your spine to stay long and your arms to reach down a little?
- what do you feel if you tuck your chin into your chest?
• what do you feel if you take your chin up, shortening the nape of your neck?
• what happens if you allow the back of your neck to lengthen and your throat to open?
• what happens if you allow the weight of your body into the EOF?
• what happens if you allow the weight of your pelvis to be above your feet?
• what happens if you allow the weight of your thorax to be above your pelvis?
• what happens if you allow the weight of your head to be above your thorax?

• feel the line that comes all way up:
  • from the EOF
  • through your pelvic floor
  • through the AOJ
  • through the back of the roof of your mouth, and
  • out through the top of your head

• now gently touch the top of your head with the palms of your hands and fingers. (Your intention is to feel through your body. If you are present and sensitive you will feel not only your hair, but also the temperature of your body and the life processes and movements below.)
• if you get tired allow your arms to come down.
• what is alive between the floor and your hands?
• is there a sense of your existence between the contact of your feet with the floor and the contact of your head with your hands?

• how much space does your body want to occupy now?
• how much length?
• does your internal space give support to your body? to your standing?

• do you feel the internal movements that make your body sway?
• do you feel this gentle swaying shifting your balance around and through your vertical axis?

• now, slowly flex your knees just a little bit, but still keeping your line. Feel how your knees, ankles and feet adapt to this movement.
• allow the weight of your body to flow down through the joints, through the EOF, and to the floor.
• when you feel like coming up again, gently press your feet against the floor, feeling the support it offers you
• feel the force of gravity penetrating your feet, through your ankles, lower legs, knees, thighs etc.
• explore this "surrendering down" to the force of gravity and "surrendering up" to the same force (of gravity) a couple of times (if you are present and sensitive enough you will actually feel it, in an almost palpable way)
• expand this exploration of the force of gravity up through your body (it has been said that the force of gravity is the physical expression of the love Mother Earth has for us.)
• what happens if now you slowly open your eyes and allow them to look at the horizon? what do you feel?
• allow your discoveries and sensations to remain present with you as you take another walk.
• what is new?
19) SITTING

Although we are basically a sedentary culture and spend most of our time sitting, most of us are not comfortable in this position and actually do not know how to sit! Therefore, sitting education is always valuable either in the private structural sessions or in the one-to-one or group movement sessions. You can even create one (or more) sitting education sessions for a group.

Some suggestions for you to explore:

- are you aware of the chair?
- how much weight do you give to the back of the chair?
- do you press into the back of the chair?
- how much weight do you give to the sitting itself?
- how much weight do your feet give to the floor?
- what is the quality of your breathing?
- how much space do your organs have inside your belly?
- how much space do your lungs have to expand?
- are you aware of the floor?
- what happens if you allow more space in your pelvis and openness in your legs? do you then, really come down to the floor?

- slightly raise and lower your knees, and feel the connection of the feet with the pelvis; and the connection of the legs with the trunk.
- allow your feet to remain where they are, bring your knees together and then away from each other and feel what happens with the muscles that connect your legs to the trunk.
- feel what happens in your lumbar.
- feel what happens to the support for your head in the heart chakra.

- now, leave the back of the chair and feel how you come more to the vertical; reaching down to the seat of the chair and the floor
while at the same time rising up from them. Explore this a couple of times. If you are awake and sensitive you will feel the force of gravity flowing through your structure. As you explore this, also allow your awareness to be present and sense the readjustments that happen through your whole structure.

- with your eyes closed, raise a little bit from the seat, pause, and then without opening your eyes or using your hands, sit back again feeling the moment you touch the chair. Explore this a couple of times to become more aware of the area where your sitting originates.
- sway your pelvis from one side to the other, and feel your sit-bones, the ischii.
- feel the sit-bones' hardness through the softness of the muscles against the hardness of the chair.
- then, raise one buttock and put your hand underneath. Again feel the bone.
- allow this bone to initiate some micro-movements from side-to-side.
- allow this bone to initiate some micro-movements from front to back.
- allow this bone to make some tiny circles in one direction.
- then in the other direction.
- then, without raising your buttock bring your hand out dragging your sit-bone to the side.
- feel the difference between both sides of your pelvis.
- is something more alive? more present? softer? how does your face feel in the side that you have worked?
- now, raise the other buttock, put your hand underneath and work this side (repeat the sequence above).
- after having worked both sides, do your sit-bones feel firmer and at the same time softer?
- do you divide the weight of your pelvis equally between both ischii?
- do you feel space between them?
- do you feel the tissues between them?
- are your whole feet touching the floor?
- are your knees above your feet? what changes if you move your feet to the front or to the back of your knees?

- now, roll your pelvis back, slumping probably to what is familiar.
- what happens to your breathing?
- what happens to your belly? to its contents?
- what happens to the contact of the feet with the floor?
- what changes would be needed to create more space for everything that lives inside you?
• do not change automatically, but sense what you do to create more space for yourself.
• do you maybe roll your pelvis from your sit-bones either forward or backward?
• do you feel the round-shape of the sit-bones?
• feel the various possibilities: from sitting far to the back of the sit-bones, slumping, and far to their front
• gently place your hands on your lower back.
• are your hands imposing their shape to the back below, or are they feeling for the muscles below?
• as you roll your pelvis both ways, what do your hands feel the muscles and spine are doing?
• do you slump only from the sit-bones or from both the sit-bones and the lumbers?
• likewise, do you hold yourself erect, in one block from the sit-bones up, or do you hold yourself erect from the lumbers?
• do a micro pelvic roll several times and feel your femurs in the acetabulae. Are there any holdings?
• are the hip joints independent from the LDH while sitting?

• now, sit up straight really holding yourself erect until you begin to tire. Feel what needs to change for more ease (not what you think, or what someone told you that you should do, but what you feel your body would like to do).
• then, very slowly, feeling what you are doing, sense what needs to be done to allow more space for everything that lives inside you.
• did you need to roll your pelvis a little back at the hip joints?
• did you have to let go a little bit in your lumbers?
• did you have to allow more internal movement in the front of your spine as you breathe?
• did you have to let go in front of your spine at the LDH?
• did you have to let go in front of your spine at the MDH?
• did you have to let go in your AOJ?
• did you have to let go of your jaw?
• did you have to allow more space between your shoulder blades?
• did you have to allow your arms to hang down?

• now, gently place your hands on the top of your head, allowing them to rest lightly on your head without pressing:
• how long does your body want to be from your sit-bones to the top of your head?
• how wide are you now in your thorax?
• how wide are you now in your pelvis?
• how wide are you now in between your sit-bones?
• how much space do you have from front to back in your belly?
• how much space do you have from front to back in your thorax?
• do you have a sense of life in your back?
• do you have a sense of life inside your pelvis?
• how deep inside your pelvis do you allow yourself to be? to feel?
• are you present from inside your pelvis down to the floor?
• are you present from inside your pelvis all way up through your throat to the top of your head?

• now, allow your hands to rest gently on top of your thighs:
• do they press the thighs or do they rest on top of them?
• do you hold your shoulders up, or is their weight supported by the thorax while the weight of the thorax is supported by the pelvis?
• does the weight of the thorax and arms fall in the back of your pelvis? in the front? in the middle? In other words, is your thorax behind your pelvis, to the front of it, or on top of it?
• are the neck and head "floating" above the shoulders and thorax, or are they projecting forward?
• is your head breathing?
• if you roll your pelvis from the back to the front and vice-versa, what happens to your AOJ?
• to your eyes?
• to your vision?
• to your sense of alertness?
• do you feel horizontal axis of movement in the hip joints, SLH, LDH, MDH, AOJ, and verticals up through your head, and down through your pelvic floor, to your feet in the floor?
• do you experience yourself as a unique being between the chair and the floor, the chair and the top of your head?
• are you alive in this position?
20) FROM SITTING TO STANDING

After you have explored "sitting" with your client and have done a good piece of education with them, it is a good idea to explore standing up and down as most of us do not know how to do it in a way that gravity assists the movement.

Ask your client to stand up and sit down three or four times. Next, ask the client to repeat this movement sensing what they are doing. There are a number of different ways the client can stand up. To bring out their awareness, observe what the client is doing and ask questions, such as:
• where do you initiate the movement to stand up? in the feet? with the head?
• in which direction does this movement go?
• does the whole body move in the same direction? or do different body parts move into different directions?
• do you move your feet back and then stand up?
• do you bring your knees together as you get up?
• do you use your arms to push against the chair to assist you in getting up?
• do you tilt your pelvis forward and your chin up as you get up, hyper extending your back?
• what is it like for you if you allow both your feet on the floor, right under your knees as you get up?
• or one foot slightly in front of the other?

• explore getting up by initiating the movement in the hip joint. Allow your sternum to move towards the thighs, at the same time allowing your sit-bones to "slide" back and raise from the chair a couple of inches, and keeping your head in the prolongation of your spine.
• are you allowing the arms to hang down freely? what happens if you hold the arms back?
• as you explore the above suggestions, feel the transfer of the base of support from the pelvis and feet to the feet only.
• as you explore this transfer of the base of support, feel the movement flowing through the pelvis, through the pelvic floor.
• explore returning to the sitting position from this half-standing position. Feel the support the floor offers your body through your feet and then feel the support the chair offers your body through your sit-bones.

• explore fully getting up from the half-standing position:
  • a) as if you were pressing your feet through the EOF into the floor.
  • b) first allowing yours knees to extend back, then extending the trunk from the hip joints.
  • c) both of the above at the same time.

• do you feel the push the back foot is offering you to start walking?
• as you sit down again, feel your joints working together: the ankles, the knees, the hip-joints and the AOJ.

• what do you need to do in order to keep the whole back congruent (relatively straight) and yet relaxed as you sit down and stand up?
• which adjustments are needed at the AOJ?
• how do these adjustments relate to the eyes?
• does anything change when getting up if you initiate the movement by arcing the lumbar bars forward and also dropping the head forward?
• which way feels better for you: initiating the movement at the hip joint and keeping the spine "straight but relaxed", or initiating the movement at the lumbar bars and allowing the head to drop down?
• in the latter case, as you get up and then sit down, do you feel the flexion and the extension of the spine, respectively?
• which movements happen at the AOJ when you explore this possible way of standing up and down?
• how do these adjustments relate to line of vision?

• suppose you are sitting at a desk (a dining table, etc..) and you want to reach for something:

• do you allow your whole body to participate in the movement?
• from the feet to the pelvis?
• through the ankles, knees and hip joints?
• from the pelvis to the arm?
• through the core?
• do your eyes assist you in this movement?
• does your vision come from the core?
• as you reach forward in order to get an imaginary object, do you feel part of the weight of your trunk being transferred down through your pelvis and legs, to the feet?
• do you give in, into the floor?
• once you have the object in your hand, how do you initiate the movement back to your original sitting?
• pushing your feet against the floor and extending at the hip joint?
• extending at the hip joint only?
which adjustments do you need to make at the hips, LSH, LDH and AOJ as you go back?

Note: When you explore standing up and sitting down with your clients be careful not to overwork them. They will be using their thighs and back a lot and they could end up very sore the next day. Therefore, be as brief as possible and remember: "More is not always better!"
21) WALKING

If you are working with a group and doing “Walking Awareness” with them, you may use any piece of the following material in one or several sessions. This exercise can deepen the client’s awareness, assist in the process of self exploration, and introduce new options.

**Preparation:** ask your client to walk and feel the quality of their "walk about." Guide your client to a better awareness of their walking pattern. Next, briefly review the aspects of “Sensitive Standing” that are most relevant for your client or the group.

**Awareness questions:**

- while standing, ask the client to:
- slowly start shifting the weight of your body from side to side, slowly enough to perceive how it is received and how it is allowed to flow through your whole structure to the floor.
- do your feet actively participate in the delivering of body weight to the support bellow? or do they remain passive as the weight flows through them?
- do your knees actively participate together with all the muscles related to them, or do they receive and transfer the weight of the body as if they were static chairs?
- do the hip joints actively participate in these movements?
- what happens to the leg during the brief moment when it is free of most of the weight transmission? does it allow itself to rest and refresh or does it remain in a working attitude?

- still standing, but now with a foot in front of the other, shifting your weight from front to back and vice-versa:
• how is the weight of your body allowed to flow through your whole structure to the floor?
• do you feel you hold your bodyweight in any joint?
• are your feet actively participating in this movement?
• how are your ankles participating in this movement?
• if you put the other foot forward and explore the same movement, what do you notice?
• how do the adaptations progress up the body? is it the same on both sides?
• how are your knees participating?
• how does the knee participation in this movement relate to the adaptations of the pelvis to this movement?
• how do both hip joints participate in the movement?
• does the lumbar area respond to the swing of this movement?
• place both your hands on the lumbars and feel what moves there.
• feel how the movement progresses up through the trunk.
• explore from the knees up with the other foot forward.
• let go of your arms and keep exploring the same movement.
• does the movement flow up and through the shoulders?
• from the shoulders to the arms?
• from the arms through the elbows to the forearms?
• do the wrists allow the movement to flow to the hands?
• do you identify your hands as belonging to you?
• are you conscious of the tips of your fingers?

• explore the same movement, but now allowing the focus of your attention to go up to your neck and head:
• how does the neck respond to the swing?
• how does the head respond to the movement of the neck?
• how does the throat respond to the movement of the neck?
• how does the jaw respond to the movement of the neck?
• how does the AOS respond to the movement of the neck?
• and slowly allow this movement to quiet down.
• briefly review for yourself, the most relevant findings that happened during this piece of work.

• briefly review “Sensitive Standing.” With your feet comfortably apart, place one hand above your pubes and the other on your sacrum.
• are your hands just holding this space, the belly, or do they open themselves for this space?
• are your hands, wrists, and fingers imposing their shape to the belly, or do they look for the belly's shape?
• what are the muscles of the abdomen doing?
• if you start transferring the weight of your body from side to side through the legs, what do the belly muscles do?
• and what do the muscles under the hand on the back do?
• moving your hands up and down, very slowly, explore how far up and how far down along the spine you feel this movement.
• now allow this movement to come to a closure and let your arms rest hanging down.
• then place your wrists on the iliac crest with the palms down, towards the legs.
• as you roll your pelvis to the back and to the front what are the muscles under your hands doing?
• how do the muscles of the thighs adapt to these movements?
• how do the hamstrings adapt to these movements?

• when you are ready, place your hands on the lower abdomen and sacrum and slowly start tilting your pelvis to the front and then to the back.
• what do the muscles in the lower back do during this movement? what about the muscles in the belly?
• how does your spine adjust itself to this movement?
• how far up in your spine does it go?
• or how far up in your spine does it initiate?
• how does it affect your breathing?
• how does it affect the contents of your belly?
• how does it affect the support and comfort of your head?
• is something more alive inside?
• what is different? stay with it and take it into your walking.

as your client walk you can ask them all of the previous questions and feel what changed in the quality of their gait.
22) INTEGRATED STEP *

(Standing Closure)

• Standing, put one foot in front of the other, as if you were about to take another step. With the leg that is behind slowly initiate a step, allowing the knee to come forward and the sole of the foot to come off the floor while keeping the toes on the floor. Do you recognize this position? Allow the heel of the back foot to touch the floor and then repeat this a couple of times back and forth to get a sense of what you did in the sitting position, but this time in gravity. I call this “The Integrated Step”.

Awareness questions:
• do you feel your toes, especially the big toe helping propel you off the floor?
• do you feel your foot absorbing the impact of your weight on the floor and then helping it up again? acting as a spring?

Note: for some clients it can be interesting to explore “The Integrated Step” in front of the mirror after, and only after, they have explored the “Grasshopper” and the “Integrated step” with no mirror.
23) THE PLIÉ *
(Standing Closure)

Preparation: stand with your feet parallel approximately two inches apart. Bend your knees, flexing evenly at your hip, knees and ankles, while keeping your spine vertical.

Movement: while coming up, feel the contact of your feet with the floor, and extend your knees until the femur balances vertically on the tibia.

Awareness questions:
- do you feel your joints (hip, knees, ankles) working evenly? Congruently?
- as you do the plié, do your feet lengthen forward?
- do they adapt to both the floor and your body above?
- do you feel the EOF “opening”? 
- do you feel movement in the interosseous membrane?

Note: for some clients it can be a good idea to explore “The Plié” profile in a mirror: it will help them get a sense of the alignment of the two major body segments - the pelvis and the thorax - and how to keep them aligned in movement (as they plié).
24) ARM DROP & ARM CIRCLE

**Goals:**
- teach the tip of the elbow to come out of the middle layer
- open and lubricate the arm socket
- differentiate the arm from the shoulder
- differentiate the arm from the neck
- evoke arm/scapula balance
- release tension in upper back
- release tension in shoulder (levator scapula)
- teach letting go of control in the arms
- teach support for the arm from the pelvis
- teach support for the arm from the center

**Preparation:** lie on your back, knees up and supported by feet (two to four inches away from each other), arms along the body, palms down, elbows soft and slightly bent to the sides. Briefly explore breathing into your rib cage, lungs and arms and hands. Slightly tilt your pelvis back and maintain it stabilized like this throughout the exploration.

**Movement I (Arm Drop):** Perform this movement one arm at a time. Lying on your back with arms at your side, palms down and elbows not locked. Imagine the back of your humerus lengthening. Slowly begin lifting your arm toward the ceiling (movement should begin at the elbow, not the wrist. The wrist and lower arm remain relatively passive.) Keep lifting until the arm is perpendicular to the body. Think of this movement as the humerus going from horizontal to vertical. Find a balanced place where the weight of the arm is resting through the humerus into the table. The arm should feel as though it makes no effort to stay vertical. The muscles of the shoulder should feel relaxed.
Movement II (Arm Circles): when your arm feels like it is in an effortless vertical position in the line of gravity, draw some circles with your hand in the air, but initiate the movement from the humerus in the socket. Allow the arm to sink deeper into the socket and the shoulder into the table. Explore the “Arm Circles” in both directions.

Movement III: after exploring the “Arm Circles”, let your elbow bend as it relaxes into gravity and drop the arm into the table without controlling the movement.
Note: Rest for a while before repeating the whole sequence and before going to the other side.

Awareness questions for Movement I:
- are your fingers relaxed?
- is your wrist relaxed?
- is your elbow relaxed?
- are you doing this movement with the least possible amount of effort?
- are you allowing your elbows to lengthen down and to the side to move out on a horizontal line that goes through the diaphragm?
- with your elbow, do you feel “something” reverberating in the back of the iliac crest? (if not, explore the “back line of upper arm” lengthening a couple of times.)
- as your elbow helps to lengthen your upper arm down are you aware of the lengthening of the line that goes from the mastoid process to the tip of the shoulder (acromion)?
- as your elbow helps to lengthen your upper arm down do you feel your MDH engaging?
- as your elbow helps to lengthen your upper arm down, do you feel space opening in the arm socket (gleno-humeral joint)?
- as your elbow helps to lengthen your upper arm down, do you feel the connection of the arm to both the front and back of the shoulder? (if not, explore the “back line of upper-arm lengthening” a couple of times.)
- as your elbow describes an arc up, are you allowing the shoulder to remain relaxed on the table?
- as your elbow describes an arc up, do you feel your shoulder blade sliding down towards your feet, counterbalancing the arm movement?
- are you breathing?
- as your arm is up, are you allowing it to fully sink back into the glenoid fossa?
- as your arm is up, does it feel almost weightless or does it require any effort?
- are you allowing the arm to “float” up from the arm socket with “soft” elbow and “soft” wrist?
- is there some other tension in the arm you can let go?

Awareness questions for Movement II:
- are you allowing the weight of the forearm to find support from the upper arm?
- are you allowing all the weight of the arm into the arm socket?
- are you allowing your shoulder to rest back on the table?
- do you feel the head of the humerus rotating in the glenoid fossa?
- does it rotate in the socket independently from the shoulder?
• are you breathing into the axilae?
• are you keeping your upper back wide and relaxed?
• are you keeping your pectoral muscles relaxed?
• is there a difference in the quality of movement from one direction to the other?

Awareness questions for Movement III:
• as your elbow relaxes into gravity, are you allowing the weight of the lower arm to come freely to the table? without control?
• what is the sensation of letting go of control?
• what is the sensation of the arm falling into the table?
• are you allowing stress and tiredness to leave the arm as it falls into the table?

Positional Variations:
I. support the client’s knees by pillows. This position helps the client keep more focus on the arm work itself, rather than dividing it with the feet/pelvis.
II. position the client’s legs straight forward. This position encourages a lumbar curvature in people with a posterior tilted pelvis.

Movement Variation:
- explore the whole sequence (arm up, arm circles and arm drops) with both arms at the same time.

Goal: to find and explore inherent movement of each arm.

Awareness questions:
• what is the quality of movement of each of the arms?
• do the arms do micro-adjustments at the gleno-humeral joint?
• do the elbows allow the movements to flow to the lower arms?
• do the wrists allow the movements to flow to the hands?
• do you feel your arms as a property of yours, that you need to guide and regulate, or are they you?

Note: you can combine the “Pelvic Roll” with the “Arm Drops” (skip the “Arm Circles”) to access the axial complex.
25) BEACH BALL

Note: this technique can be employed as a closure for the “Arm Drops, Arm Circles”, or it can be used as a technique all by itself for specific arm use education.

Goals:
• bring the “Arm Drops” into gravity
• find support for the arms in the pelvis
• differentiate the arms from neck and shoulders
• teach arm connection to “middle layer”
• explore arm use in sitting position
• deepen the awareness of the arm connection to pelvis

Preparation: sitting slightly to the front of your ischial tuberosities, arms hanging down along the body, (if necessary briefly review “Sitting”), feet flat on the floor, and lower legs at a right angle with the thighs.

Movement: reach as far down with your arms as it feels comfortable, then as if you were holding a big round beach ball, allow your arms to come up to the front of you until they are parallel to the floor. Next, let your elbows into gravity, and lower your arms down. Explore the whole sequence of movement two or three more times.

Awareness questions:
As you reach down with your arms:
• do you feel your feet pressing the floor a little stronger?
• do you also feel this pressure traveling up your legs into your pelvis and trunk?
• do you also feel your spine lengthening up?
• are you breathing?
• do you feel space being opened in the gleno-humeral joint?

As you start to bring the “beach ball” up in front of you:
• are you initiating the movement from the elbow?
• are you allowing the gleno-humeral joint to remain open?
• are you allowing your elbows and wrists to remain soft, so that the arms can “feel and follow” the shape of the ball?
• do you feel different muscles lengthening?
• are you allowing tension in these muscles to let go?
• are you allowing the scapulae to slide down as the arms come up?
• are you allowing your shoulders to stay long and open?
• are you allowing your clavicles to remain down as close as possible to a horizontal?

• are you maintaining the distance between the ears and shoulders and the same length along the sides of the neck throughout the movement?
• are you allowing the front of your chest to stay wide and open?
• are you allowing the space between your shoulder blades to stay wide and open?
• are you allowing your axilae to stay relaxed?
• are you breathing?

• do you feel your lungs/rib-cage offering support for your arms? You can feel this more easily if, when your arms are almost parallel to the floor, you explore a repetitive and small (about two inches) up and down movement. If not:
• do you feel the connection of your arms to your pelvis? (if not, explore the same repetitive movement described above.)
• as you bring the ”Beach-Ball” up, do you have to lean your trunk back or do you maintain the pelvis/S.G. alignment? (if doing this alone, sit with your profile towards a mirror to check your alignment.)

As you relax your elbows into gravity and let your arms down:
• are you allowing your shoulder blades to remain down?
• are you allowing your chest to keep its volume?
• are you allowing the space between your shoulder blades to stay wide and relaxed?
• are you aware of the upward thrust of the pelvic girdle/trunk supporting the shoulder girdle?
26) SHOULDER DROP

**Note:** this technique can be employed as a closure for the “Arm Drops/Arm Circles”, or it can be used as a technique all by itself for specific arm use education and front to back balance of P.G. and S.G.

**Goals:**
- evoke support for the S.G. from the P.G.
- teach P.G./S.G. alignment
- teach letting go of the arms into the pelvis (ischial tuberosities)
- release tension in the shoulders
- open and lubricate sub-scapular surface

**Preparation:** the same as for “The Beach Ball”.

**Movement:** allow your shoulders to move up, hold for a while and then let them relax into gravity while you let the weight of the shoulder girdle fall into the pelvis.
Awareness questions:

- are you allowing your shoulders and arms to fall down with as dead a weight as possible?
- are you allowing the impact of this weight falling on the rib cage to help some of the air out of your lungs?
- are you aware of your shoulder blades sliding up and down as the shoulders go up and fall back down?
- as the shoulders and arms fall down, are you aware of their weight reverberating all the way down into your pelvis?
- is this weight falling on top of the ischial tuberosities? (if not, explore leaning your trunk a little forward or backward (usually forward will do it).
- are you aware of the pelvic floor also receiving this weight?
- are you allowing your elbows to relax into gravity?
27) SIDELYING ARM CIRCLE

(In Classical 3rd Hour Position)

Goals:
• teach arm connection to thoracic core
• decompress peripheral tension in S.G.
• open palmar fascia
• release and lengthen intrinsic muscles of the arm
• open and lubricate the arm socket
• differentiate the arm from the shoulder
• find support for the arm in the glenoid fossa
• teach mid-line to the arms
• release tension under the scapula
• teach letting go of control in the arms

Preparation: lie in the Classical 3rd hour position, with a pillow under your head, its height the same as your shoulder length. Let the top arm rest along the body, palm down and keep the spine straight.

Movement I: reach with your arm down toward your feet, starting with the fingers along the lateral line, then allow the arm up in an arc, towards the ceiling, perpendicular to the body. Let the humerus find “home”, dropping into the glenoid fossa.
Movement II: reach with the arm up towards the ceiling, then let it rest back into the scapula and the glenoid fossa. Explore this movement a couple of times and with different amplitudes.

Movement III: with the arm resting back into the glenoid fossa, start “drawing” some tiny circles with the hand and gradually allow the circles to get a little bigger. After a while change the direction and slowly allow the circles to become as small as in the beginning, until you “draw” the smallest possible circle.

Movement IV: progressively relax the fingers, wrist and elbow into gravity, and let the arm return to the starting position. Rest a little and explore the whole sequence once more, or go to the other side.

Awareness questions for Movement I:
• how present are you to the tip of your fingers?
• are you allowing the palmar fascia to open?
• are allowing your wrist to stay relaxed and open?
• do you feel some of your lower arm muscles lengthening?
• are you leading with the 2nd and 3rd fingers? What do you feel if you lead with your other fingers?
• do you feel your humerus first sliding down, and then, as your hand describes an arc in space, do you feel it dropping into the scapula?
• are you breathing?

Awareness questions for Movement II:
• is your arm really perpendicular to the body? (very often it will be a little to the front of the lateral line in people with an internally rotated S.G. and a little to the back of the line in people with an externally rotated S.G.)
• as you reach up and down, do you feel your scapula sliding up and down?
• are you allowing your scapula to let go and relax?
• does your arm feel like a wing, coming from the front of the chest, right above the solar plexus, and the corresponding area in the back?
• do you feel the internal space between front and back?
• are you breathing into this space?
• are you breathing into your axilae?

Awareness questions for Movement III:
• are you using the least possible amount of force?
• do you feel the head of the humerus rolling in the glenoid fossa?
• are you initiating the movement from the head of the humerus?
• what changes if you initiate the movement from the elbow or from the fingers?
• as you draw the circles, are they always being drawn around the vertical axis?
• as you come back to the smallest possible circle, are you aware of the vertical axis?

Awareness questions for Movement IV:
• does anything change in the arm socket when you relax your fingers into gravity?
• does the weight of the fingers flow through the wrist into the lower arm?
• do the fingers relax independently from the wrist?
• what changes as you relax your wrist into gravity?
• do you feel the weight of the lower arm flowing through the elbow into the upper arm?
• as your arm goes back to the starting position, are you allowing it to rest on top of your body, along the lateral line?
• as you breathe, does your rib cage expand to the sides? if yes, does this movement “nudge” the whole arm up towards the ceiling?
• do you feel your arm as an extension of your lungs?

Sitting Integration: sit as for “The Beach Ball” movement. Slowly allow one arm, or both at the same time, first to reach down, then to open to the sides, the tip of the elbows coming out of the middle layer on a horizontal line that goes through the diaphragm until they are parallel to the floor. VERY IMPORTANT: are the arms working in the frontal plane (lateral line)? Very often the arms will go behind the lateral line, especially the elbows, in the sitting or standing positions.

Movement Variation: Either sitting or standing explore raising your arms to the sides, the elbows coming out of the middle layer. When the elbows are parallel to the floor start bringing them up above your head, leading with the thumbs, then the 2nd and 3rd fingers, and finally with the 4th and 5th fingers. Notice what happens to the distance between your ears and shoulders, the length along the sides of your neck, and your thoracic core space with each of these options. Important: check at all times if your arms are working in the frontal line plane and if your elbows are coming out of the middle layer on a horizontal line that goes through the diaphragm.
28) ARM ROTATION

(Arm Gestures)

Goals:
• access and explore the gestures indicated by each position
• evoke movement of elbows coming out of the middle layer
• connect the arms to the LDH
• open and lubricate the gleno-humeral joints
• lengthen intrinsic musculature in the arms
• differentiate the arms from the shoulder blades
• differentiate the neck from the shoulder blades
• release tension between the scapulas
• de-rotate internally rotated shoulders

Preparation: lie on your back, with both knees up and supported by the feet (two to four inches apart), arms along the body, palms down, elbows soft and slightly bent to the sides. Slightly tilt your pelvis back and maintain it stabilized like this throughout this exploration. Briefly explore breathing into your ribcage, lungs, arms and hands.

Movement I: feel the back of your upper arms in contact with the table. Allow the arms to lengthen down through these surfaces, the elbows leading the movement and coming out of the middle layer, (through a horizontal line that goes through the diaphragm). When your arms have reached as far down as comfortable, allow them then to open to the sides, palms still down, until the hands are at a horizontal line that goes through the diaphragm.
Movement II: with the palms down, while you exhale allow the arms to go straight up, bringing the back of the hand’s towards each other until they are about four inches apart, right above your solar plexus. Relax and breath in this position for a while. Then on an inhale allow your arms to return down to the beginning position, without resting them on the table.

Movement III: next, laterally rotate both arms from the gleno-humeral joint a fourth of a turn so your thumbs are up towards the ceiling. Repeat the raising of your arms above your solar plexus as you exhale, this time thumbs towards each other (they do not have to touch each other). Relax and breath in this position for a while. Then on an inhale, allow your arms to slowly return down to the beginning position for this movement, without resting them on the table.
Movement IV: again, laterally rotate both arms from the shoulders a fourth of a turn so that now your palms will be up. As you exhale, raise your arms above your solar plexus bringing the palms towards each other (about four inches apart). Relax momentarily, breathing in that position, and allow your arms to slowly return down to the beginning position for this movement, without letting them rest on the table.

Movement V: once more laterally rotate both arms from the shoulders a fourth of a turn so that now you baby fingers are up. As you exhale, allow your arms to move up, hands above your solar plexus, relax while breathing. Then as you inhale, allow your arms to move back down, without letting them rest on the table.
Movement VI: Now you reverse the sequence. Start exploring the previous movements again.

Movement VII: this time, allow your shoulders and upper arms to remain where they are and medially rotate your lower arms from the elbow a fourth of a turn so that the palms are up. Again allow your arms to move up and down.

Movement VIII: again medially rotate your lower arms from the elbows a fourth of a turn. Now the thumbs are up. Allow your arms to move up and down above solar plexus.

Movement IX: the last rotation is again initiated from the elbows to rotate the palms down. Then allow arms to move up and down above the solar plexus. Finally allow the arms to come down, resting alongside your body.

Awareness questions:

For Movement I:
- are you present all the way to the tip of your fingers?
- are you allowing the eye of the hands (palmar fascia to open)?
- are your elbows coming out from the middle layer?

As your arms open to the sides:
- are you aware of the arm’s deep muscles lengthening?
- are you letting them go?
- are you breathing?
- are you aware of your thoracic core space?
- do you feel your arms as an extension of that space?
- are you allowing the line that goes from your mastoid processes to the tip of your shoulders to stay long and relaxed?

For Movement II:
As you bring your arms up and down:
- are you allowing your shoulders to stay relaxed back towards the table?
- are you allowing your arms to float up (and down) from the gleno-humeral joints?
- are you allowing space in the back between the shoulder blades?
- are you allowing the front of your thorax to remain wide and open?
- are you doing this movement with the least effort possible?
- are your elbows soft?
• are your hands soft?
• are you breathing?
• are you allowing the line between your mastoid process and tip of shoulders to remain long?
• are you allowing the sides of your neck to remain long?

When your arms are up:
• are you allowing the arms to stay as close as possible to the vertical axis?
• are you allowing the arms to rest back into the arm socket?
• are you breathing?
• are you allowing space in the front and in the back of your upper thorax?
• are you using force?

When your arms are back to the original position, before you rotate them:
• are you aware of the span of your arms, from hand to hand?
• are you allowing this space to open and lengthen?
• both in the front and in the back?

For Movement III:
As you rotate the arms from the shoulders:
• are you aware of the head of each humerus rotating in its arm socket?
• are you aware of the space that opens in the upper thorax right below the clavicles (in the pectorals)?
• are you aware of the space that opens in the middle of the chest?
• are you aware of the scapulas sliding down?
• are you aware of different lines of lengthening and letting go in the arms?

As you move your arms up and down, and as they are up, you can ask the same questions for these activities that were asked for Movement II.

For Movement IV:
As you rotate the arms from the shoulders:
• are you aware of the head of each humerus rotating in its arm socket?
• are you aware of the scapulas sliding further down?
• are you allowing the space between the shoulder blades to stay open and relaxed?
• are you aware of different lines of lengthening and letting go in the arms?
As you move your arms up and down, and when your arms are up, you can ask the same questions for these activities that were asked in movement II.

For Movement V and VI:
As you rotate the arms from the shoulders:
• are you aware of the scapulas sliding further down?
• do you feel your arms as if they are wings spreading?
• are you maintaining an open and relaxed space between the shoulder blades?
• are you aware of different lines of lengthening and letting go in the arms?

As you move your arms up and down, and when your arms are up, you can ask the same questions for these activities that were asked in movement II.

For Movement VII to IX:
As you rotate the arms from the elbows:
• are you allowing the scapulas to stay relaxed on the table at all times?
• are you aware of the lower arms progressively pronating?
• are you aware of a different quality in the movements as you are reversing?
• Plus all other above questions.

Movements II - VI = rotation from the shoulders
Movements VII - IX = rotation from the elbows
Goals:
- evoke mobility in gleno-humeral joint
- release tension in the shoulder joint
- open and lubricate the arm sockets
- differentiate the arm from the shoulder
- release tension in the upper arms
- lengthen the upper arms
- teach the tip of the elbow to come out of the middle-layer
- evoke a lateral line from the lateral iliac crest to the elbow
- open the thoracic core space
- teach support for the arm from the rib cage
- teach support for the arm from the center

Preparation: lie on your back, with both knees up and supported by the feet (two to four inches apart), arms along the body, palms down, elbows soft and slightly bent to the sides. Slightly tilt your pelvis back and maintain it stabilized like this throughout this exploration. Briefly explore breathing into your rib cage, lungs, arms and hands.

Movement I: feel the back of your upper arms touching the table. Allow the arms to lengthen down through these surfaces, the elbows leading the movement and coming out of the middle layer through a horizontal line that goes through the diaphragm. When your arms have reached as far down as comfortable, allow the arms to describe an arc forward and up towards the ceiling until they are on a vertical axis. Allow the humerus to fall back into the gleno-humeral fossa (arm socket). Allow the fingers to spread wide open and let the hands move towards each other until the thumbs touch.
Movement II: next, allow the elbows to move out to the sides until the index fingers touch each other (making a pyramid with your fingers and another one from your hands to the elbows). Allow the arms to straighten up again until only the thumbs are touching. Explore this sequence two or four more times.

Movement III: maintaining the pyramid and on the next exhale, bring your arms over your head towards and as close as possible to the floor. Stay for two or three whole breath cycles in this position and then on an exhale go back to the previous position (making a pyramid with your fingers and another one from your hands to the elbows). Explore this sequence two or four more times.
**Movement IV**: with the pyramid over your solar plexus, lengthen your arms up towards the ceiling until the thumbs touch each other, allowing both arms back to the vertical axis, then let the arms drop down letting your elbows bend as they relax into gravity, and then letting the lower arms drop into the table without controlling the movement.

**Awareness questions for Movement I**: The same questions as for the “Arm Drops” Movement I Awareness questions plus:

- As you bring your thumbs together:
  - are you keeping your chest open?
  - are you allowing weight to sink back into the floor between your scapulas?

**Awareness questions for Movement II**: As your elbows go out:

- are you allowing your chest to stay open and relaxed?
- are you allowing the space between your shoulder blades to stay open and relaxed?
- do you feel this movement going to the MDH?
- are you breathing?
- are you aware of the thoracic core space?
- are you allowing the thoracic core space to open?
- are you breathing into each axilla?
- do you have a sense of your arms being an extension of your lungs?
- are you aware of the support the rib cage offers to your arms?
- are you aware of the letting go of the extensors in your arms?
- are you aware of the space that opens in the back of your elbows?
As you elbows go in:
• are you allowing your upper chest to stay open and relaxed?
• are you allowing your shoulder blades to stay back (or do they have to come forward?)
• do you feel this movement coming from the MDH?
• are you allowing the thoracic core space to remain open?
• are you still allowing space in each axilla?
• are you allowing the whole length of your spine to drop back into the table?

**Awareness questions for Movement III:**
As you bring your arms over the head towards the floor/table:
• are you keeping your pelvis stabilized?
• are you keeping the space between LSH and MDH flat and relaxed on the table?
• are you keeping your thoracic core space relaxed?
• are you aware of the head of each humerus rolling in its arm socket?
• are you aware of the lengthening and letting go of the back of your upper arms (triceps)?
• are you allowing your pectorals to let go and lengthen?
• are you allowing the space between the shoulder blades to stay open and relaxed?
• are you aware of the lengthening and letting go of the lateral line from the pelvis to the elbows?
• are you breathing?
• what changes if you allow your arms to move back towards the floor with an inhalation?

**Closure awareness questions:**
refer to the awareness questions for “Arm Drops” Movement I and Movement III
30) FREEING THE HEAD

Goals:
• evoke spaciousness inside the head
• evoke breath into the face
• evoke letting go of and relaxing the eyes
• evoke letting go of and relaxing the tongue
• teach to look through the eyes rather than from the eyes
• teach pelvic-floor to floor of the mouth connection
• teach balance at the place where the neck is longest in the front of the spine
• teach head hinge
• teach intrinsic movement for the head/neck
• open and lubricate the TMJ
• evoke letting go and relaxation of the masseters
• teach head responsiveness

Preparation: lie on your back, knees bent and supported by the feet, which are two to four inches apart (or have knees supported by pillows), arms along the body. (If a client has a hunchback or a very short neck, it is useful to use a small pillow under the head.)

Awareness questions:
• are you aware of the area in the back of your head in contact with the table?
• are you allowing your head to rest into the table (or the Rolfer’s hand)?
• are you allowing your brain to be heavy inside the skull?
• are you aware of the space inside your head between your ears?
• are you allowing your breath to go into that space?
• are you allowing that space to widen?
• are you allowing more weight into the back of the head?
• allow your breath to go to your face, as if you wanted to smell the aroma of the woods.
• are you allowing your breath into your maxillary sinuses?
• are you allowing your breath into your sphenoid sinuses?
• are you allowing your breath into your frontal sinuses?
• is your whole face breathing?
• does the back of your head offer support for your face?
• does your face accept this support?

• allow your eyes to soften back into that space (the back of the head).
• are your eyes relaxed behind the eyelids, or are they active?
• are your eyelids relaxing on top of your eyes, or do your eyelids require a lot of effort to stay closed?
• are you aware of tension in the tiny muscles around your eyes?

• gently open your eyes and look through them, rather than with them.
• are you allowing your eyes to focus softly?
• what happens to your vision when you focus softly?

• is your mouth allowing enough space for the tongue?
• is your tongue relaxed inside the mouth, or is it pressing against the palate or teeth?
• gently open and close your jaw and allow your awareness into the temporomandibular joint (TMJ). You can monitor these joints by placing your fingers on these joints (located slightly in front of the ears).
• are you allowing your TMJs to let go of their tension?

• allow your mouth to stay slightly open and move your jaw from side to side.
• are you doing this movement with the least possible effort?
• When your jaw goes to the right what happens to your left temporalis and vice-versa?
• are you allowing the floor of your mouth to let go of the tension?
• are you allowing the soft palate to let go of tension and widen?
• as the TMJs and floor of the mouth let go of their tension, are you also aware of tension letting go in the pelvic floor?
• as the space between the left and right TMJs gets wider, does the space between the two ischial tuberosities also feel wider?

• are you aware of the back of your throat?
• are you allowing the back of your throat to let go and open?
• are you allowing weight into the back of your neck?
• are you allowing the cervical vertebrae to weight heavy towards the table?

• with your mouth gently closed, lower and upper teeth touching lightly, and the tongue relaxed inside the oral space, nod “yes” with a small movement to find the place where the front and back of the neck can both be long.

• are you aware of the openness of the throat in this position?

• does your breath flow easier in this position?

• nodding “yes”, with a tiny movement through an axis between the ears:
  • are you aware of the space where your head hinges with the spine?

• still nodding “yes”:
  • do you feel an undulating movement along the front of the spine from the head hinge all the way down?

• nodding “no” with a small movement, allowing it to initiate in the back of the head (at the AOJ):
  • are you allowing your face to go to the right as the back of the head goes to the left and vice-versa?

• as you nod “no” are you allowing your SCM to let go?

• is the “no” movement coming from within?

• as you nod “yes” a couple of times and then “no” again:
  • do you sense the chin and occiput balancing each other in both movements?

• this time as your head (skull) moves back, as if you were to nod “yes,” allow your jaw to move down at the TMJ, and then reverse to the starting position. Explore this movement a couple of times.

  • Do you feel these two joints (the TMJs and AOJ) independent from each other?
  • as you explore the above movements, are you allowing the strong jaw muscles (masseters) to let go and relax?

• now, gently allow a sacral roll to begin:
  • does your head respond to it?
  • are you aware of a movement “inside” your head as you do the sacral roll?
  • what happens if you extend this sacral roll to a pelvic roll?
31) SITTING-HEAD INTEGRATION

Note: the “Sitting Head Integration” is better employed after the “Freeing the Head” exploration.

Goals:
• balance the head over the S.G./ diaphragm/ pelvic floor/ in the sitting position
• evoke awareness of the head hinge in the sitting position
• open and lubricate the head hinge in the sitting position
• teach support for the head hinge in the sitting position
• teach support for the head from MDH
• teach looking through the eyes rather than from the eyes in the sitting position
• explore support for the head coming from the MDH
• explore the relationship between the head hinge and eyesight level
• teach head responsiveness

Preparation: sitting, slightly to the front of the ischial tuberosities, feet flat on the floor, lower legs perpendicular to thighs, arms along the body (if necessary briefly review “Sitting”).
Awareness questions:

- Are you aware of your pelvic floor?
- Is your respiratory diaphragm balanced over your pelvic floor?
- Is your S.G. balanced over the respiratory diaphragm? (if necessary, briefly review or explore the “Shoulder Drop”)
- Are you allowing your chin/occiput to balance over the front and back of the shoulder girdle?

- Are you allowing the weight of the face to find support from the sternum?
- Are you allowing the weight of the back of your head (the occiput) to find support from the spine?

- Gently nod “yes”, doing a small movement:
  - Are you allowing the axis that goes from the chin to the occiput to let go and lengthen?

- Gently nod “yes” and find a place where the chin/occiput are balanced with maximum length in the back and the front of the neck.

- Gently nod “no”:
  - Are you allowing this movement to initiate from the back of your head?
  - Are you allowing the SCMs to let go?
  - Are you allowing this movement to happen without involvement of the shoulders?

- Gently allow your nose to “draw” small circles in the air:
  - Are you initiating the movement from the center of your head?
  - Are you aware of the corresponding area in the back of your head also drawing small circles in the air (as if you had a nose in the back of the head)?

- Do you have a sense of your head hinge?

- Now, collapse and hyperextend from the MDH:
  - Does your head hinge respond to these movements? How?
  - Does your neck hinge (transition from cervical to thoracic) respond to this movement? How?

- What happens to your eyes as you collapse from the MDH and want to look at the horizon? Do they tend to go up?
• what happens to your eyes as you hyperextend from the MDH and want to look at the horizon? Do they tend to look down, over your nose?

• now allow your head to balance over the S.G. again:
  • are you looking from your eyes, or through your eyes?
  • are you allowing a soft focus?

• nod a big “no” with the eyes focusing softly and then contrast with a harder focus:
  • what changes in the quality of your movement?

• balance your head over the S.G., and this time move only your eyes up, as if you wanted to look high above the horizon:
  • what do you feel in your occiput and nape of the neck?

• now allow your eyes to be in line with the horizon:
  • what changes in the occiput and nape of the neck?

• come into standing and observe how your head responds to the movement.

• as you stand: are you allowing your head to be balanced over the feet, pelvis, respiratory diaphragm, and S.G?

• as you walk: are you allowing your head to move and respond to the walking movement?
32) MASK WORK
(Habitual Expression Release)

Goal:
- to release habitual face expression(s)

Preparation: lie down on your back, knees bent and supported by the feet, two to four inches apart (or have knees bent and supported by pillows), and arms along the body. Briefly review “Active Lying Down”.

Exercise I: with your eyes closed, put on a mask that is your habitual smile and feel how it affects:
- the muscles of your face.
- your sense of spaciousness inside your head.
- your sense of presence and weight in the back of your head.
- the head hinge (explore nodding “yes” and “no” with this expression on your face).
- your breathing.
- your core space.
- the quality of energy in your whole body.

Exercise II: next, gently let go of your habitual smile until it disappears and explore other masks (expressions) such as:
- fear
- ugliness
- joy
- provocation
- strength
- interest
- anger
- envy
- beauty
- impatience
- understanding
- tiredness
- shyness
- irritability
- self-confidence
- any expression or emotion of your choice...
- frustration
- rage
- courage
- weariness
- attention
Exercise III: after exploring a couple of masks, repeat the same exercises, but this time, after putting on each mask, walk it! and feel how it affects:
- your walking.
- the response of the head to the walking.
- the quality of your body’s energy.

- To what extent is the way you walk across the room affected by the expression on your face?

Note: consider that all the expressions (masks) that you have explored are emotions that we human beings have. Emotions are not good or bad in themselves, they just are.
Tennis balls are excellent for helping to let go of holdings or tensions built up by everyday life stresses. When working with tennis balls, something has to let go and someone has to let go. The tennis balls will let go only to a very small extent, the floor will not let go at all. Therefore, the letting go will be by you! The effect is better if you work on the floor rather than on a table.

The idea when you use a tennis ball is to “introduce” yourself to the ball and vice-versa. As if you were introducing yourself to someone: feel the tennis ball’s shape, consistency, texture, and temperature. Next, allow the ball to feel your shape, your consistency, etc... Gently, and always allowing your breath to go where the ball is, meeting it from inside yourself. Allow your holdings, tensions, pains, whatever to flow to the ball. “Ask” the ball to receive and contain your holdings, tensions, pains, and gently allow the area being worked to soften, to let go, to come to life again. Also, ask the area being worked to make room for the tennis ball, as if it could enter that space.

Allow time when using the tennis ball. Usually our holdings are old and chronic, therefore, you must be gentle and patient. Force and haste will not do it (so stay at least for five whole breathing cycles in any spot).

Play contrast: after you have worked on a spot and have taken the tennis ball away, allow time to feel how the area is feeling and compare it to the corresponding area on the other side. Only then should you complete your work on the other side.

Usually when you first work with the tennis ball it tends to be quite painful, but if you work with it again and again, you will soon notice that the area in discomfort gets less and less sensitive. However, when you are working on an especially painful area, if the pain or discomfort does not diminish as you stay with your work, you should move the ball a little to either side of the area or lessen the pressure over the ball. Wherever your body positioning allows the tennis ball to be without building tension somewhere else. In other words: find ways to overcome any resistance that you cannot otherwise let go.

When working with tennis balls, especially if you do a whole “Tennis Ball” session or even a mini-session, it is advisable to drink plenty of fresh, plain water afterwards as this work puts a lot of organic waste material on the move. If possible, also take a warm, long shower or bath afterwards.

A WORD OF CAUTION: use your common-sense when working with tennis-balls. DO NOT work with tennis balls over injured, inflamed or otherwise “sick” areas. The tennis-balls can do more harm than good if employed inadequately.
The following is a list of areas where you can use the tennis balls after having explored them in class for details of careful explorations. We are also assuming that you have in mind many of the Awareness questions proposed from the previous movement techniques. The following list was organized along the preparation position rather than around a recipe.

**Standing:**

1. under feet, one foot at a time. You may use the wall to help your balance. In a way, the tennis balls under the feet work like a whole body massage. Explore this whenever you are very tired, when your legs hurt from too much walking or standing, or when they are swollen because of heat (or pregnancy).
   2. under arm-pit, reaching down with arm (avoid compressing nerve).

**Lying on your back:**
(knees bent and supported by the feet, two or four inches apart, arms along the body).

1. along the sacro-coccygeal joint.
2. along the sacro-iliac joint.
3. under the gluteus maximus, at the external superior iliac fossa. After you have let go of a lot of holding or tension here, allow your femur on a vertical and “draw” small circles in the air, in both directions. Or, bring your bent leg over your chest to deepen this work.
4. under the rotators (refer also to the above two variations).
5. along the iliac-crest.
6. from the medial sacral crest, laterally towards the lateral aspect of the iliac (under the gluteus), and back to the medial sacral crest starting along the iliac border and going down towards the ischial tuberosity and then back up again.
7. along the spine under the erectors all way from the sacro-coccygeal joint up to the thoraco-cervical joint (use two tennis balls tied up in a sock).
8. along the scapula (medial and lateral borders).
9. at the superior angle of the scapula, at the insertion of the levator-scapula.
10. under the lateral angle of the scapula, on the teres muscles, (you can reach down with your arm to deepen the process here.)
11. along the superior border of the scapula, on the supra-spinatus and superior trapezius.
12. along the occipital border (hold the tennis ball in place with both hands and move the head).
13. directly under where your head is touching the floor. Explore this area with a nice smooth river-rock: ask your head, your scalp, your being to listen to what the rock has to tell you. What is its secret?

In 3rd Hour Position:

1. along TFL.
2. around the trochanter.
3. along the illio-tibial band.

Sitting:

1. under ischial tuberosities.
2. along the front of ischial tuberosities, on the hamstrings origin.
3. between the two ischial tuberosities (do not do this if you are prone to hemorrhoids).
Monica Caspari was certified as a Rolfer in 1989, completed her Rolf Movement Training in 1992, and the Advanced Training in 1993. Her curiosity is in the interface between structure and function and her work emphasizes the quality of movement as an expression of the many aspects of Being. Before becoming a Rolfer her interest was with pregnant women and with children. Thus she developed an unique approach to body work during pregnancy to promote easy deliveries, and worked with it for 19 years in a full practice. Her interest in structure and touch led her to teach Hatha Yoga and to practice massage therapy. Monica also holds a B.A. in nutrition from Universidade de São Paulo. Other influences have been Therèse Bertherat’s anti-gymnastics, Eutony, Kum-Nye (Tibetan buddhist body work), Continuum, Psychoanalysis and recently the study of Somatic Experiencing and the G.D.S. Muscular Chains method of movement re-education.