

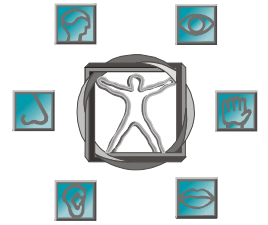
Feldenkrais- Ausbildung

— BEWEGLICHKEIT FÜR GEIST UND KÖRPER —

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Felden-WHAT?

Lawrence Wm. Goldfarb, Ph.D. (Amherst '83) is a Feldenkrais trainer and a kinesiologist known for articulating the thinking behind the work. Besides directing and teaching in professional training programs in Europe, Australia, and North America, he teaches public workshops, professional seminars, and post-graduate courses the world over. Having written extensively about the method, Larry is committed to developing explicit frameworks for understanding the method and to making the method relevant to everyday life. His current focus is on offering supervision and mentor training programs for Feldenkrais practitioners. He maintains a private practice in Santa Cruz, CA. You can find his website at: <http://www.mindinmotion-online.com>

It was about to happen, that moment, that dreaded moment. I was at my friend Marcello's birthday party; I had been enjoying the Brazilian music when one of the other guests engaged me in a friendly conversation. We discussed the usual things, such as the weather and how we each knew the guest of honor. Peter had just finished telling me about his research in engineering when it happened:

"What do you do for a living?"

"I'm a Feldenkrais teacher."

"Felden-what?"

"Feldenkrais. It is a method of movement re-education, named after the man who developed it, Moshe Feldenkrais."

"Felden-Christ?"

"Close, but not quite. It's Feldenkrais:

F -- E -- L -- D -- E -- N -- K -- R -- A -- I -- S.

It rhymes with rice."

"Feldenkrais?"



"Exactly. Feldenkrais is a way to teach movement. I work with people who have physical limitations, such as chronic pain or neurological problems, or with people who want to improve their performance, like actors, musicians, or athletes. I also teach classes in the physical education program at the University."

"What do you teach?"

"Usually my students come to me because they are experiencing some kind of limitation, something that is interfering with daily life or obstructing progress or performance. My job is to figure out how they are moving, how that relates to the problem that they are experiencing, and how they could move differently enough so that problem wouldn't continue."

"Sounds interesting. Is it some kind of exercise? Or do you show people how to correct their posture?"

"Well, it's not that easy to answer, mostly because what I teach, and how I teach, is pretty different than exercise or posture. Both of these are based on similar assumptions: If you are weak, then you should exercise to strengthen your muscles. If, on the other hand you think bad posture causes your problem, then you should correct it and stand up straight. Both assume that the body is something that must be molded, should be reshaped, put in its proper place. Neither gives you the chance to see that what you are doing might contribute to the problem you face. Neither approach looks at how you move and how that could relate to the problem you are experiencing."

"Are you saying that people shouldn't exercise?"

"No. I'm not saying that. I am saying that exercise alone isn't enough. The idea behind exercise is that you are not strong enough, that your muscles need to be in better condition. So an exercise program is designed to increase the ability of muscles to work. I think this is often a mistaken view, because the problems that I deal with--chronic pain, neurological difficulties, obstacles to performance--do not have to do with how strong the person is, they all have to do with the way someone moves overall. I guess you could say, I am interested in people moving smarter, not stronger."

"Are you saying that movement can cause problems?"

"Yes, I am. The way that you move can cause problems. What's more interesting is that you can be unaware that the movement is at the root of the problem."

"What do you mean by being unaware of movement being the cause of the problem?"

"Most of us are unaware of how we move. We pay attention to where we are going or what we are doing, not to how we move. For example, think about how you stand up from sitting. How do you do it? What happens? What moves when?"

Peter stands up and sits back down a few times, saying, "I see what you mean. It is more complex than I expected. Usually, I think of standing up and then, next thing I know, I am standing. I guess I have never thought much about it before."

"That's what I mean. Most of us don't think about our bodies until we experience pain or some kind of problem. But that means that we could have been moving in an inefficient or dangerous way for

a long time by the time we notice something is wrong. This is one place where the saying 'If it works, don't fix it' doesn't apply."

"But why is that? Why don't we notice?"

"Because our movements become habitual, automatic. We repeat the same movements over and over, without thinking or noticing. When something happens repeatedly, it drops from our consciousness. This isn't necessarily bad, it is a part of the process of learning."

"Does that mean we learn to move in inefficient ways?"

"Yes."

"Why?"

"Well, because we move only as well as we've learned to move and our learning to move is very haphazard. There are many things that influence how we move: childhood development, accommodations to previous injuries, the requirements of specialized activities we engage in (such as sports, musical instruments, or work motions). Finally, since we don't really understand how our bodies move, we often move in ways that don't fit with the way we are put together."

"Can you give me an example?"

"Certainly. People think that the body hinges at the waist and they move as if that were so. Unfortunately, the lower back does not allow for that kind of motion; the design of hip joints is what allows the torso to do that. The muscles of the back are not designed for that movement."

"I see. Moving as if your back were made to hinge at the waist can lead to back strain and pain."

"That's it, you understand. But, anyway, I have taken enough of your time with this. Sorry, I can get carried away talking about my work."

"Not at all, this is very interesting. It sure beats the normal party chatter. My mom has had chronic back pain for years, so I'm curious about your work. I was going to ask you how you could do for her."

"It's not easy to say because I would have to see how she moves."

"Can you say generally what you would do when you start working with someone?"

"Yes, I can describe what would happen if she were to come to see me. I would begin by looking at her move, asking her to turn right and left, bend forward, back and to each side. I would put my hands on her to feel which muscles were working, which muscles weren't engaging, and which ones weren't letting go. I would look for some kind of habit or pattern that interferes with other movements."

"You lost me there. What do you mean when you say 'a pattern that interferes with other movements'?"

"What I mean by that is that it often seems as if people have gotten stuck doing a movement or holding themselves, unconsciously, in certain way. For instance, if you injure your leg, you change

how you walk and you begin to limp. The limp may be appropriate immediately after an injury, but it can last much longer than the injury. If it continues longer than it's needed, it can lead directly to pain, stiffness, and other problems. But that's just one example; you can limp with your shoulder, your neck, or your back. Indeed, you don't have to injure yourself to develop this kind of movement. You can acquire a similar habit playing a musical instrument, repeating work movements day in and day out, playing certain kinds of sports, and so on. The key is that you develop a movement pattern that you get stuck with, a pattern that underlies every movement, interferes with any activity that runs counter to it."

"Go on."

"For instance, I was recently working with a bus driver who had recurring back pain. When I looked at her movement, it became quite clear that the muscles of the lower trunk were chronically contracted and that her back was locked stiff. Even when she tried to stretch, she could not get her lower back to let go. It was as if she had lost control of those muscles. She thought her back was supposed to be straight, so after her first bout of back pain, many years earlier, she had taught herself to keep her back flat. When she moved her trunk, she overused the muscles of her upper back, so they had begun to hurt constantly. Though the doctor could find no disease, the bus driver still thought something was wrong with her spine. I could help see that it was her movement that was causing the problem."

"Once she saw that, could she change what she was doing?"

"Not immediately. You see, over the years, she had lost touch with what those muscles were doing. It was as if she was on automatic pilot and she had forgotten how to regain manual control."

"So what do you do about that? I think it would be incredibly frustrating to understand the cause of the problem and not be able to do anything about it."

"That's where the method comes into play. There are two ways in which I work with people: in hands-on individual lessons and in group lessons. Both ways of working are based on the idea of teaching people to be aware of how they are moving, how they can move, and to increase their options and comfort. During the group lessons, I talk people through a sequence of gentle movements; during the individual lessons, I use my hands to move the student."

"Does it hurt?"

"Not at all. Feldenkrais is gentle. The idea is that you will change most easily if the new movements are more comfortable than the old ones. I like to say that our motto is 'No pain, MORE gain.'"

"Is this like massage or chiropractic?"

"Not exactly. The similarity is that we touch people, but beyond that it is very different. In massage, the practitioner is working directly with the muscles, in chiropractic, with the bones. Feldenkrais is about working with your ability to regulate and coordinate your movement; that means that Feldenkrais is about working with the nervous system."

"What do you mean?"

"Well, remember the bus driver I mentioned. Her muscles were tight because her nervous system told them to contract. They didn't decide to tighten on their own, muscles don't think for themselves. The brain tells them what to do. So my job is to help the person learn to control her or his muscles again. I do that using very gentle guided movements, staying in the range of ease at all times."

"Pretty amazing. You really think people can change without hurting?"

"Absolutely. That's one of the reason I love what I do."

"But wait, my mom has some kind of problem with her discs. Would Feldenkrais cure her?"

"Feldenkrais isn't about curing or fixing people. It isn't a medical treatment, it's an educational approach. It's about helping people get control back into their lives by understanding why they feel the way they do and by learning how to move differently so that they don't have to keep feeling that way. Even when someone has an organic problem or disease, I can help them. For instance, when I work with people who have arthritis, my job isn't to get rid of the disease, my job is to help them move so that they don't stress the effected joints and so that they can find more comfortable, safer, ways to do what they want to do. Same thing applies to disc problems--even when there is a structural problem, the question is how can the person move in a better way, so that they increase their comfort and avoid future problems."

"Oh, oh. They are lighting the candles. Can we talk more after the festivities. . ."

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