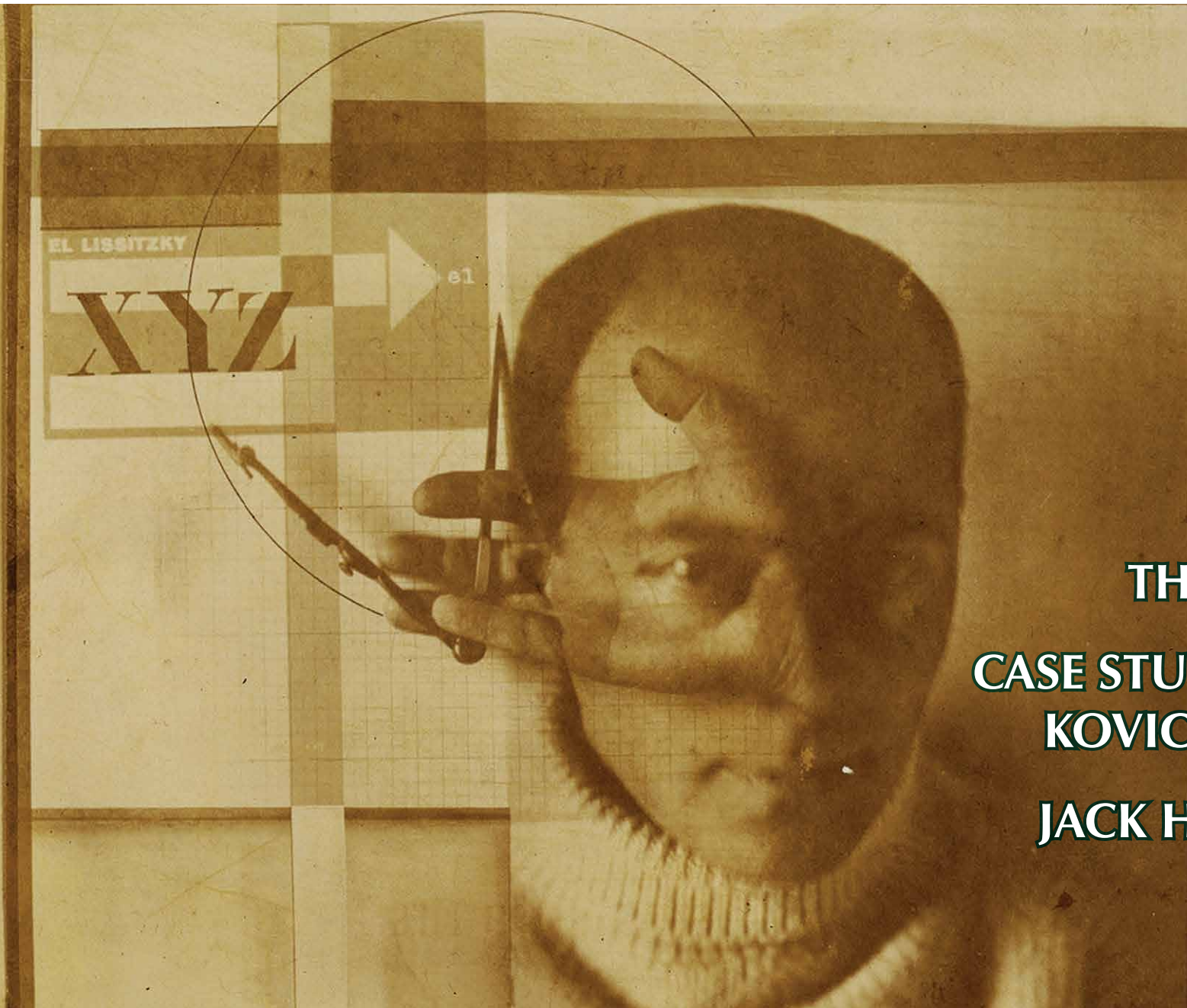


FELDENKRAIS AUSTRALIA

Journal of the Australian Feldenkrais Guild Inc.

December 2013

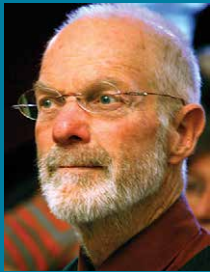


THE VISION ISSUE:

**CASE STUDIES BY ZORAN
KOVICH, FRAN WHITE**

JACK HEGGIE ON EYES

ATMs FOR EYES



EDITORIAL

By Ralph A Hadden

Welcome to this "Vision" edition of our journal. Thanks to all the contributors we have a good range of writing on vision and on other topics too. I plan to continue to produce themed issues- do you have any suggestions for themes for future issues? Let me know (via feldenkrais.org.au or post on Facebook in Feldenkrais Australia, <https://www.facebook.com/FeldenkraisAustralia>)

To get myself thinking "Vision" I have been doing and teaching Eyes / Vision ATMs, particularly ones from Jack Heggie's *The Use of the Eyes in Movement* (see my review on page 14). It's been a fascinating and useful exploration, for my own wellbeing and for my classes. I don't teach Eye ATMs often, they require very focused attention from the students. No pun intended - they must *mentally* focus while exploring the focusing of their eyes. So, for example in my weekly classes, I don't give my students an eye lesson every week for many weeks in a row, it would be too much. Just one every now and then, and if they can stay with it, it makes for a very powerful lesson.

What I've been reading: one of my favourite popular science writers is Malcolm Gladwell, a regular contributor to the *New Yorker*. His latest is *David and Goliath* (Allen Lane 2013), exploring the theme of the little underdog taking on the giant. The little guy- mobile, adaptable, innovative- can, unexpectedly, have an advantage over the big and powerful who can be slow, clumsy and rigid.

And for entertainment, I was delightfully diverted by *The Cuckoo's Calling* (Sphere 2013) by a crime writer new to the scene, Robert Galbraith. Well, actually no, it's really J K Rowling writing undercover (or should I say under an invisibility cloak) in a style completely different to the Harry Potters. But the success of Harry Potter was no fluke (though the later books became a bit formulaic) - she is simply a great storyteller.

All the best,
Ralph

THE EDITOR

Ralph Hadden (Sydney 1990), Assistant Trainer (2012), practises in Melbourne. He is on the committee of the AFG(Vic) division and is the Victorian delegate to the National Council.

Cover: *The Constructor* (self portrait) by El Lissitzky, 1924

ABOUT FELDENKRAIS AUSTRALIA

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The theme for the next issue is The Voice. Contributions are invited on this or any other topic.

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GOINGS ON

AFG NATIONAL AGM

The Victorian Division will be hosting the Annual General Meeting this time. Place, time and format will be advised.

When: Saturday 22 March 2014

GALEN CRANZ IN MELBOURNE

Galen Cranz, author of *The Chair: Rethinking Culture, Body and Design* presented at the Feldenkrais Symposium in Brisbane in 2011. She also gave an excellent workshop on Scoliosis in Melbourne at the School for FM Alexander Studies in the same year. Galen is an Alexander teacher and Professor of Architecture at the University of California, Berkeley. She will be the guest teacher at the Residential Course of the School for F.M. Alexander Studies which will be held near Healesville in Victoria.

When: Thursday-Monday, 30 January-3 February 2014

Contact: info@alexanderschool.edu.au, 03 9486 5900

AUSTAB NEWS

There are two new Assistant Trainers in Australia: Jenni Evans (Melbourne 2001) and Bronwyn Fewster (Perth 1999). Congratulations Jenni and Bronwyn!

SKELETONS ALIVE, NEW ZEALAND

An advanced training with Stephanie Spink and Chris Lambert presented by the NZ Feldenkrais Guild. Stephanie (Melbourne 1991) is a Trainer and Chris (Sydney 1990) is an Assistant Trainer. They are also both physiotherapists and have extensive experience teaching in Feldenkrais programs in Australia and around the world. To register go to: <http://fluidsurveys.com/surveys/feldenkrais/skeletons-alive-registration/>

When: Friday-Monday, 21-24 February 2014

Where: Porirua Club, Wellington

Contact: Caryn Truppman,
carynb@xtra.co.nz or
caryn@feldenkrais-auckland.co.nz

FEATURES : VISION



ADDRESSING THE EYES IN THE ACT OF SEEING: CASE STUDY 1

By Zoran Kovich, MSc

Zoran Kovich (Melbourne 1991) completed a masters degree in cognitive science in 1995. Zoran began working in trainings in 2000 and became an assistant trainer in 2004. From 1990 to 2009 he taught Feldenkrais-based courses in university performing arts programs. Zoran maintains a practice in Sydney and last year submitted his Trainer Candidacy application to AusTAB. RAH.

Paul telephoned me about getting lessons to relieve the pain he was experiencing in his lower back. As I spoke with him it became obvious he really wanted to do Feldenkrais lessons. He explained how his family insisted he keep getting physiotherapy instead of “seeing a quack”. I was impressed by his resolve.

Paul arrived on time. As soon as he walked through the door I could see that the whole of the right side of his torso was bowed and shortened. I invited him to sit down, and we talked for a while. As we spoke I noticed the persistence of his postural pattern.

Irrespective of where I sat in relation to him, and how he gestured, Paul kept the right side of his torso bowed and shortened.

Paul worked in the building industry. He liked his job and even though it was hard, laborious work he enjoyed what he did and wanted to keep doing it. We kept talking while I continued observing him standing from different perspectives. His main construction site duties involved carrying long steel rods used for reinforcing concrete. Based on my observations I asked him if he carried these bars on his right shoulder. He said yes, and proceeded to tell me how fast he was expected to work, and how he would load himself up with as many rods as he could carry so as to get the job done quicker.

I knew concrete reinforcement rods were quite long, and began to imagine what it would be like to carry a stack of these rods on my right shoulder through a construction site. A felt impression came to me -- my

right visual field was partially blocked. I really needed to see where I was stepping and going, but could not see the ground properly through my right eye so had to organise myself to navigate using my left eye. My left side felt stronger and more present, my right weaker and more absent.

As Paul remained standing, I asked him to look at a picture on the wall in front of him and tell me which side of the room he was most aware of. Paul reported the room to his right seemed small and hardly there at all, while the room to his left seemed big and bright. Perception is an action. Paul's duties required he visually navigate irregular terrain, carrying an awkward load, with an asymmetrical visual field. The pattern of action he had developed to accomplish this task had proven to be unsustainable, as evidenced by Paul's experience of pain when walking. I needed to address how Paul organised himself to see. I asked Paul if he would be interested in exploring how he used his eyes, briefly explaining how I thought the way he used his eyes was related to the pain he was experiencing in his back. Paul seemed a little unsure, but he agreed. The first 30 minutes of the lesson had elapsed.

We did an FI together using a simple ATM structure -- directing eye gaze around an imaginary clock face. I asked Paul to lie down on his back and made him comfortable using rollers under his legs and padding underneath his head. I did not want Paul to experience effort keeping his eyes closed so I folded up a towel and placed it over both his eyes, arranging the folds so that no light would reach either eye. We started with Paul's left eye. I moved his left arm until his hand hovered directly above his left eye. Asking Paul to track the movements of his hand with his left eye, I began to slowly and systematically move his hand around an imaginary clock face, first in one direction, and then the opposite. Paul's breathing remained steady and even. When asked, he reported it was easy to track his hand. I then repeated the process with Paul's right hand over his left eye.

We then repeated the whole thing on the other side. Paul reported quite different experiences using his right eye to track his hands. He consistently reported being less able to track his hand through the 12-to-6 side of the clock face. This seemed consistent with what I had imagined about the steel rods partially blocking his right eye visual field.

We proceeded more slowly. I moved his hands to locations on the clock he could easily track, sneaking in small movements in the hourly directions he had found difficult to track. Gradually his ability expanded. He reported having a clear perception of both his right and left hand as each in turn moved around the circumference of the clock located in front of his right eye.

I encouraged Paul to lie quietly for a while. After a time I very slowly removed the towel from over his eyes, not wanting to startle his system with a sudden burst of light. I assisted Paul to sit then, after a few moments, asked him to close his eyes and we repeated, in abbreviated form, some of the hand-eye coordinations we had explored lying down. When we had completed both sides I asked Paul to gradually open both his eyes, stand up and walk a little bit.

He looked different! The right side of his torso was noticeably more erect and longer. He also had a big smile on his face. "There's no pain" he said. I watched Paul stride around the room with confidence, still smiling. He continued feeling really good and pain free throughout the whole week.

MOSHE ON EYES

Along with his case study, above, Zoran Kovich supplied this extract from Moshe Feldenkrais' Body and Mature Behaviour (International Universities Press, Madison, 1949) pp. 9-14. RAH.

Chapter 1. Degeneration and ignorance.

...we ... tolerate certain limitations, physical and mental, just because we do not know that they are amenable to our influence. The results of faulty habits are called character or chronic diseases which ... are incurable. And improper use of oneself is explained as unfortunate inheritance or permanent deformation. ...

We blame civilisation, the strain of modern life, the complexity of it and so forth for the loss of many ... physiological qualities...

...high brain development and complexity of life go together. ... We have a complex nervous system which is just as much the reason of our complexity as its product. Our nervous system enables us to make complex adaptations... ... The complexity of our life and the complexity of our nervous system are one. ...

...at the present state of civilisation our shortcomings are glaring... ... We seem to know so much, yet are unable to use our knowledge to live a fuller and more satisfying life. ...

...the real reason underlying peoples' complaints of their state of strain, anxiety, etc., is ... ignorance. ... We know ... very little about what life is, what is important and what is not. ... Our knowledge of what is biologically important is ... scanty...

...rigidity, whether physical or mental -- i.e., the adherence to a principle to the utter exclusion of its opposite -- is contrary to the laws of life. For rigidity in man cannot be obtained without suppressing some activity for which he has the capacity. Thus, continuous and unreserved adherence to any principle, good or bad, means suppressing some function continuously. This suppression cannot be practised with impunity for any length of time.

...the real trouble lies in the fact that we forget in the process of learning, that the principles we learn are themselves ... not absolute.



*Moshe Feldenkrais, San Francisco training 1977,
photo by Bob Knighton*

USE OF THE EYES

... Specialisation in a limited range of acts for long periods is the most difficult adjustment for man to make.... If a man uses his eyes as people in the past did -- i.e., to look at the horizon, at the sky, at his body and at his work -- the eye goes through the complete range of its capacity, and ignorance of the proper use of the eyes has no chance to cause real harm. But when the scholar, or composer, or draughtsman has to use his eyes to focus at ten inches for hours on end, day after day, it is essential for him to know how to use the eyes properly. For he puts on them an extreme demand by excluding all functioning in favour of a particular act. Some muscles, nerves and cells in the higher centres are overworked, while others must be constantly inhibited. Only a few who thus use their eyes will succeed in preserving good use of them.

We often hear people say that their special incapacity is due to lack of exercise. Here we see that any training may be worse than no training at all; for the eyes of none of these people lack exercise, yet their eyesight deteriorates steadily. The use they make of their eyes adapts them most perfectly to that particular use only, but renders them almost useless for other purposes. ...

emotional disturbance ... leads to faulty use of oneself.

In short, ...greater complexity and specialisation need more perfect adjustments. This alone is the reason why we discover in ourselves so many shortcomings. While the use we make of our faculties is far below their ultimate capacity any method of use may be good

enough. But when we want the potentially best use of our faculties, our failure to obtain it is due to lack of knowledge... ... Civilisation makes it necessary to adopt better methods ... in all ... uses of self. ■





THE WRITER WITH THE TURNED EYE: CASE STUDY 2

By Francesca White

Francesca (Melbourne 1991) is an Assistant Trainer (1997) and has a busy practice in Fitzroy North, Melbourne. She travels worldwide to assist in trainings and teach her own advanced trainings. RAH.

This is the story of Jennifer, a 61-year-old writer who was born with Duane's syndrome. Duane's Syndrome (DS) is a rare, congenital eye movement disorder similar to strabismus, which is an eye condition characterized by eyes being misaligned and/or pointing in different directions (such as wall-eye or cross-eye, lazy eye).

It is a mis-wiring of the eye muscles, causing some eye muscles to contract when they shouldn't and other eye muscles not to contract when they should. People with DS have a limited (and sometimes absent) ability to move the eye outward toward the ear (abduction) and, in most cases, a limited ability to move the eye inward toward the nose (adduction).

In Jennifer's case, her left eye was permanently turned outward towards her left ear. Her eyesight was perfect and the correction spectacles she had worn as a child in post war Britain were no longer needed after age 10. Her mother had taken her to a doctor when Jennifer was about three years old, only to be told it was too late to operate on the eye and it was something she would have to "learn to live with".

She was referred to me by her Yoga teacher, who felt that Feldenkrais may help her with acute neck pain caused by a lifetime of twisting her neck to the right in order to be able to look at her computer or attempting to look at someone straight in the eyes. In order to do this she needed to, firstly, turn her head to the right steering her right eye to the left. Thus, both eyes could look in the same direction. Her request during our initial consultation was more about relieving her neck pain.

As I listened to her story I could sense the pain created by her childhood memories: being bullied at school

due to the very thick spectacles she needed to wear at the time, and being nick-named "the monster". She talked about feeling deformed by the insult. I thought about it afterwards: here is a woman who makes her living as a writer and a newspaper journalist, who has probably needed to sit opposite publishers and agents, trying to look them in the eye whilst possibly enduring considerable neck discomfort and embarrassment in having to do so. I imagined that she might have come across as "shifty" – unable to face people square-on.

As I listened, my mind was simultaneously, and not without trepidation, wondering how I could begin this lesson.

My immediate feeling was to draw upon Moshe's eye lessons. I have to confess I had struggled with these ATMs in my Feldenkrais training program and have avoided teaching them where possible. They brought on feelings of nausea, disorientation and discomfort in my head. I felt deep compassion towards this woman and caught myself wanting to find a way to teach her how to move her left eye. My attention returned to her request to improve neck pain. I thought it might be possible to teach her to differentiate movements of her head from movements of her eyes and thus not only

address both issues but also make connections she might feel between her eye and neck movements.

I started her lesson with her in a supine position, with her neck supported. I asked her to roll her head a little in both directions, then placed my hands behind her neck. The configuration of her neck and neck muscles reminded me of clients who have come with whiplash injuries. What I could feel was the familiar protective flinching action in preparation for pain. The muscles on the right side of her neck felt stronger, thicker. I felt her spine was in a C-shape curvature to the left. Her neck felt “pinched”, as though she was holding everything in place.

She then told me about recent X-rays that showed disc damage on the right between C-3 and C-4. In my exploration I found myself wondering about mobility in C-7, as there seemed to be so much work being done in the vertebrae above. As she rolled her head to the right, which was the easier direction, I tracked the movement of C-7 to the left. With my fingers on the right side of her spine I coaxed it gently a little further to the left, facilitating lateral flexion with rotation.

When she rolled her head to the left, it could only go to the middle as C-7 more or less stayed in the same

position – to the left of the axis. She grimaced and stopped breathing. I paused and observed her recovery.

To further acknowledge the easier movement I positioned myself opposite her right shoulder and supported her right hand and arm above the elbow – lengthening the arm a little out to the right. Then I guided it further to the right at different angles and lengthened different fingers, so she could feel the relationship between turning her head right and feeling how her spine, clavicle and sternum in the ribcage were involved. This seemed to help with her bending her head to the left and turning to the right. She described this as a “brand new feeling”.

Then I got a spark of inspiration. We needed a reference point on the ceiling for her to focus on with her eyes. The ceiling is white. There was not even a fly-speck or light globe to look at. I remembered the little round red stickers I had in my desk: the kind you put on a sold painting in exhibitions. I put one on the top of my longest foam roller and thwacked it onto the ceiling. Success! I could begin a version of an eye lesson.

We began proximally, with both eyes following her right arm that was extended towards the ceiling. The

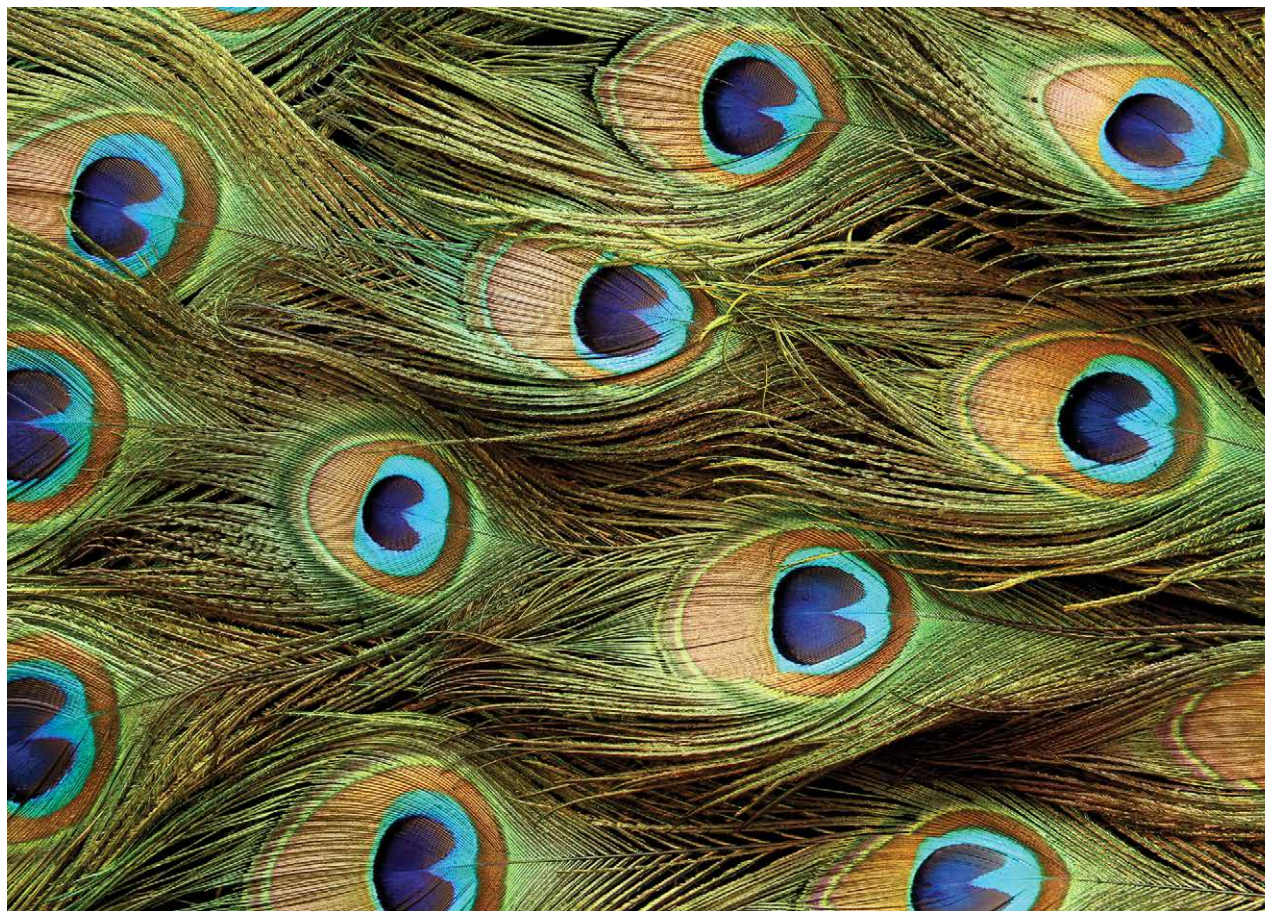
instruction was to keep her head fixed in the middle. I held her head gently around the temples to remind her to stay in the one position while her eyes moved. She slowly took her right arm to the left, then the midline, then as far right as she could comfortably manage without engaging her neck muscles. She could really feel how and when they wanted to engage. Being accustomed to pushing beyond her limits in other domains, we spent some time on feeling how and when she began to effort. She could also feel how she held her breath and clenched her jaw as accompanying actions. She had a good sense of humour and we could make light of this observation.

Then I asked her to cover her left eye. She repeated the exercise of taking her extended right arm slowly to the left, then to the right. After resting she re-covered her left eye and only went as far as she could still see her thumb. Many rests were required and I continually needed to remind her to breathe. Then she held a tennis ball in one hand, again extended towards the ceiling, and took the ball in opposition to the eyes with her head fixed in one position. Then I changed the instruction to moving her eyes in the same direction as the tennis ball. She changed the ball to the opposite hand and repeated the exercise. During these

eye movements her head stayed fixed in the middle. I could sense her exhaustion.

The red dot on the ceiling then became the distal focus point. One eye and then the other focused on the dot as she rolled her head left and right around the fixed reference point. I asked her to put her own hand on her forehead in order to help her feel completely safe in her neck. Later I asked her to imagine a tiny clock around the dot, and to start taking her eyes, one at a time whilst keeping the other one covered, towards 12 and 6.

At first she rolled her head with the eyes, then I asked if I could hold her head in a gentle constraint while she attempted rolling the eyes alone. This was very difficult for her and we took as many rests as she needed. There were visible signs of agitation and frustration. At the same time she was becoming very excited, as she felt her left eye move slightly for the first time in her life. The left eye gradually moved a bit towards the right, without the assistance of her neck. She could hardly believe what was happening. She understood the relationship between eyestrain and neck pain. She asked herself why it was that all the eye surgeons and specialists she had seen since the age of 3 had told her that this eye would never move: that she needed to



Fran suggested including a Peacock feather in our Vision issue. She comments: The ancient Greeks believed that the peacock was given extra eyes in their feathers. It is the patron bird of the goddess Hera and the "eyes" symbolise all-seeing knowledge and the wisdom of the heavens.

THE WRITER WITH THE TURNED EYE: CASE STUDY 2 *By Francesca White*

“live with it”. In later years she’d been offered surgery, but she had not been keen to go down that path.

As she experimented with many tiny movements in her eyes, and new movements feeling possible, she began to comment on the increasing ease in her neck.

When she sat up I explained that to maintain ease in her neck I could teach her how to do something at home, just by looking at something that was on her wall, like a door handle or something at eye level. In this position I introduced her to the idea that she could include movement in her pelvis and hips to begin a movement of looking behind to either side such as reversing her car, which she claimed had always felt so difficult and painful. Shoulder and sternum movements were gradually added to the rotation from the pelvis as well as opposition movements so she could feel that her neck did not have to bear all the responsibility for the movement of her eyes.

Using the clock image again, she covered her right eye, and fixed the left eye on 12, then guided her nose around the clock face without moving her eye. This caused some strain in her neck, so we made the clock smaller and smaller. Movements could be reversed,

eyes fixed, then not fixed. She seemed pleased to be able to do something at home to maintain the learning.

I have to confess I was surprised at how little we had to do to get such a huge and immediate change. Tears of joy and tears of anger welled up as the lesson came to an end. She spoke again about the merciless teasing and the humiliation of being stared at most of her life.

As she was a writer, I asked if it might be helpful to write something about her experience. She was most enthusiastic and left in a mood of excitement and astonishment that she could feel such a huge change.

We spoke on the phone a few days later, and I asked her if anyone close to her had noticed the change. To my surprise she said her daughter looked at her and commented on her new hairstyle, but said nothing about the changes in her face.

She could only afford one more lesson after this, and then I never saw her again. In our second lesson, I noted that she had changed her image considerably: she looked taller, and had gone to get a new hair do (never having been able to see herself front-on whilst brushing her hair) and her clothes were very different.

She wore make up, a red sweater, a leather mini skirt, Doc Marten boots and black fishnet stockings. She stood taller, and it felt to me like her self-image had dramatically changed.

One day recently at our local park I was on my morning walk and there she was, walking towards me, her face straight ahead, still a little strained to bring her eyes in line with her chest, looking happy, younger, slimmer, walking with a spring in her step, well dressed. A light-hearted “I must come and see you again one day” wafted between us, as we passed and waved goodbye.

I was reminded of final chapter in The Case of Nora:

A year later I met Nora strolling on the Bahnhofstrasse in Zurich, just outside the railway station. She had arrived from a small town after an hour-and-a-half train journey. She told me she came to town every Friday to do some shopping from a richer and more elegant selection as well as to visit close friends. Our meeting was that of two friends bumping into each other. A pleasant surprise and no questions asked. The usual commonplace greeting, “Ah, nice to see you,” concluded our common/uncommon adventure. ■



IMPROVING EYESIGHT

By Tamara Diner

Tamara (Melbourne 1991) offers ATM and FI in Elwood, Melbourne and has also for many years performed a great service

for our members by running the AFG(Vic) library (though she would now really like it if someone else took over that job for a change). RAH.

Is there a way to improve our eyesight, using either the Feldenkrais Method, or other modalities?

This is a question that has plagued me for many years - in fact the idea that it could help to improve my eyesight was one of the things that convinced me to do the Feldenkrais training in the first place. And I would like to be able to say that yes, I have found a way to use the Feldenkrais Method as well as perhaps the Bates method, to improve my sight. But even though I think I have improved a lot of things, my eyesight seems to be as elusive as ever.

This article is a personal account of my journey in this quest - one that is far from over, though its success is by no means assured.

Moshe Feldenkrais said, in the Amherst Training, that it is important to “exercise” (for want of a better word), eyes that are good, to keep them good - once they spoil, it is very difficult to get them back.

I have indeed found this to be the case. My own eyes have been “spoiled” since about the age of 1, when I became cross-eyed and finally ended up with a lazy eye. This basically means that now I don’t use my right eye to see, only my left. As we need binocular vision to have depth perception, it must mean that I do not see the world really in 3D. I don’t know – I only know what is normal for me. It was not such an issue for me for many years as my good eye was strong enough to see adequately, but over the last fifteen years or so the vision even in that eye has deteriorated.

So, to begin with, let us look at the Bates Method. William Bates, an American ophthalmologist from the 1920s, found a way to improve people’s eyesight. His main tenet was that our eyes function best when they are relaxed and free to move and many vision problems can be “fixed” if we can eliminate the “strain to see”.

Bates devised many ways to relax the eyes, as this is perhaps the single most important requirement to improve vision. There is a high degree of correlation between the tension of the muscles of the eyes and our ability to see. Perhaps this can explain why our eyesight tends to improve after doing ATM lessons – even if they are not specifically for the eyes. And I have found this to be particularly true after doing some of the more spacey lessons such as, hand movements – dominant hand, bell hand, tooth trip.

One of the best ways of reducing stress and eye strain is “palming”. This basically means to cover the eyes with the palms of the hands in such a way as to shut out all light, while at the same time not putting any pressure on the eyes. One can then imagine or see black, which also helps the eyes to relax.

This is a technique that is quite easily incorporated into Feldenkrais lessons. Feldenkrais himself uses it in his Alexander Yanai lesson number 10, “Covering the Eyes”.

And many other Feldenkrais practitioners have used it in work on the eyes, including Jack Heggie and David Weber.

Another of Bates' techniques is "swinging", where you turn the whole torso left and right. Again, Feldenkrais uses this -in ATM book, lesson 10, *The Movement of the Eyes Organises the Movement of the Body* (often called "Dead Bird"). What I have found interesting with this is the idea that as you swing, you allow the world to look as though it is moving in the opposite direction, and that is what allows us to see clearly. Bates talks about this a lot, the idea of oppositional movement, that is, seeing the world as though it is moving in the opposite direction to one's own movement. I know that when I can experience this, my vision is very different. It is almost as though I have more depth in my perception.

Many Feldenkrais lessons involve moving the eyes up, down, left, right or in a circle, in order to be able to make the movement smooth and continuous. With fine gradations of the movement being possible, this is a way of using the eyes so that they do not "jump", or skip over parts of the horizon or visual field. I have often experienced much improved eyesight after this kind of lesson.

But it is not just a matter of relaxation but also of how to use the eyes to see. That is, it is not just a matter of relaxing the eyes, but of finding a way to use them in a relaxed way, or, as Bates may have put it, not straining to see.

In reality, it is not so simple – at least not in my particular case where one eye is doing all the work. However, not only is it doing the work of looking but also of shutting out the vision of the other eye, which is in reality a nuisance. I have often noticed after a lesson how my eyes can feel quite relaxed. Frequently, I even notice a 'visual field' with my right weak eye but as soon as I want to look at something the left eye takes over.

I have taught eye lessons often and many participants have noticed significant improvement in their vision. For me the journey continues. ■

MELBOURNE 4 GRADUATION

Congratulations to the trainees in Melbourne 4 who graduated this September. The National Council passed on a message of welcome to our new colleagues. Here is an extract:

"We welcome you as colleagues and would like to congratulate you on choosing this profession. It is, as you know, a profession that can make a real difference in peoples lives.

It is a profession that can enable you to affect not only the people you work with as clients but also the people around you. Through enabling you to 'live more fully your avowed and unavowed dreams free from compulsive habit or coercive reaction', I feel it makes us happier and nicer to be around. Not to mention all the swooning at the unforced beauty of the way you walk through challenges and opportunities of your life." ■



CLIENT TELLS HER OWN STORY: CASE STUDY 3

By Madeleine Edgar

*Madeleine (Brisbane 1993)
physiotherapist, Certified*

*Feldenkrais Practitioner and Fellow of the AFG Inc,
practises in Coombabah, QLD and has published 2
simple introductory workbooks about the Feldenkrais
Method® plus an e-book available on CD. RAH.*

This is an article my client wrote back in 2005. I was astonished that her Nystagmus vanished in 1 lesson after all those years! I guess she didn't need her eyes to stabilize her when she woke up the proprioceptors in the rest of her body! And she did have several subsequent lessons.

"In 1995 I was stopped at traffic lights in my car when the car behind me failed to stop. I sustained whiplash and concussion as a result of this accident. I had soft tissue damage from C1-C3 and C6-C7.

My left rotator-cuff was torn and pressure from the muscle spasms in my back and shoulders resulted in numbness in my middle to little fingers on my left side.

Ten years post the accident I began a whiplash rehabilitation program when the resultant migraines, loss of movement and quality of life became overwhelming. I slowly began to regain movement and discovered that many of my learned behaviours to protect myself from further injury were causing other debilitating symptoms. I was experiencing extreme visual disturbance (nystagmus, nausea & dizziness) that was affecting my life more than I realised.

After several months of the rehab program my physiotherapist found that I needed something more than her training could offer and thus I was referred to Madeleine Edgar for lessons in the Feldenkrais Method. After the first session I regained almost full movement

in my neck, something I had not experienced in more than 10 years. My nystagmus disappeared & I did not experience nausea or dizziness. The numbness in my left arm ceased. My ability to move my neck has not regressed to the former state at any time.

My pain levels have decreased significantly, to the point where medication is rare, rather than at the maximum daily allowance that I was taking prior to commencing Feldenkrais lessons. Until I thought about how I was moving, I did not realise quite how much my body had changed to cater for various injuries, not just my whiplash.

The pain relief and regaining basic movement of all of my body has changed the way I do everything in my daily life now. For 10 years, throughout the majority of my 20's and early 30's I struggled with chronic pain. I believed that this was the way I was always going to be. My only regret is that I did not commence rehabilitating my body/mind sooner."

Jennifer Storey, Parkwood, Qld. ■



PINHOLE GLASSES, VISION TRAINING

By Stephanie Stone

Stephanie graduated this year from the Melbourne 4 training- congratulations Stephanie! She lives and practises Feldenkrais in the tiny seaside town of Brunswick Heads, 15 minutes north of Byron Bay. She describes herself thus: "I love the beauty of the ocean, river and hills behind, I enjoy the simple pleasures of creativity, and long for personal peace to become reality in everyone's life." Stephanie has emailed in these interesting links. RAH.

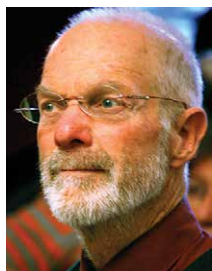
I purchased a pair of pinhole glasses (squarish frame) many years ago and didn't really understand what they could do for me. After wearing mine consistently for about 4 weeks now, my vision has improved enormously to the point where I can read without glasses in poorer light, something that was too difficult previously. I use the pinhole glasses for the computer now too, and for reading at night in bed. Today I decided to check out the facts and found this website which explains what glasses do to our eyes and what

pinhole glasses can do for us. You may find it worth while investigating:
http://www.naturalvisiontherapy.com/pinhole_glasses.html

[And from an earlier email] There is a guy who advertises in Living Now magazine, Leo Angart. He has on YouTube part of a training he presented:
<http://www.youtube.com/watch?v=sDmlNbztidk>

I discovered from watching and doing the suggested exercises that I had a problem focusing into the top left corner. After the exercise specifically for this problem, I found my focus had improved and now I have stopped wearing glasses most of the day. He explains a lot about what is mostly behind poor eyesight - poor muscle coordination - and goes through a number of problems and offers exercises to improve. I found it useful, informative, and confidence building. ■





REVIEW: JACK HEGGIE

The use of the eyes in movement and other vision explorations

By Ralph Hadden

Also mentioned:

The Art of Seeing by Aldous Huxley
(Harper & Brothers, 1942)

Natural Vision Improvement by Janet Goodrich
(1987 Celestial Arts, 1995)

Eyeboddy by Peter Grunwald
(2004 Condevis, 2008)

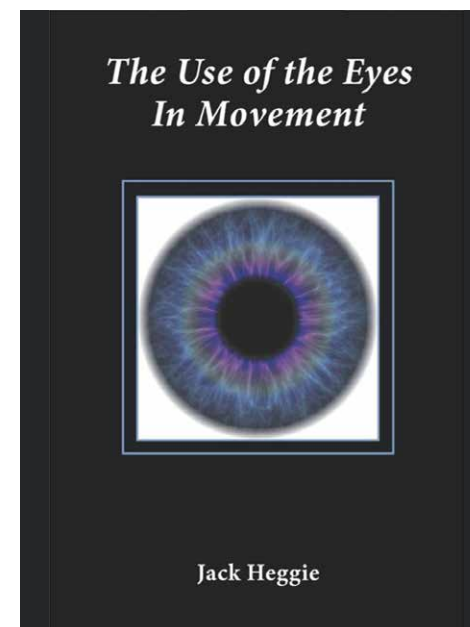
Improving Your Game by Donna Ray, CD set
(AchievingExcellence.com 2004)

Seeing Clearly by David Webber, CD set
(Feldenkrais Institute 2009)

The silly things we do as kids. When I was about 12 or 13 years old, a kid in my class came to school one day wearing glasses. I thought this was pretty cool, and conceived a desire to wear glasses too. At home I made a show of holding books very close to my face

as if very short sighted till my mother, exasperated, said "Let's get your eyes checked!" The eye test did indeed show I was mildly short-sighted and glasses were an option (which I eagerly took up). I had been spending many hours of my life absorbed in reading, so I had probably developed, as a result, some short-sightedness. The test therefore was presumably correct but I wonder if I really should have started wearing glasses at that age? And once you start relying on glasses, you become dependent on them and over the 50 years of wearing glasses since then I have slowly, steadily progressed to a stronger prescription.

In adult life I quickly realized I didn't like having to wear glasses, in fact they were a damn nuisance. As I explored various alternative therapies and personal development I also sought ways to improve my eyesight. Naturopathy offered the herbs Eyebright and Golden Seal, supposedly to soothe and heal the eyes, and there were Reichian and Radix body



The Use of the Eyes in Movement by Jack Heggie
(1985 Feldenkrais Resources 2011)

psychotherapies, exploring the expression of emotions through the eyes. Traditional Chinese Medicine taught acupressure self-massage around the eyes and acupuncture treatments. Interesting experiences but there was no improvement to my optical prescription. The Bates method and Aldous Huxley's *The Art of Seeing* (1942) taught me sunning and palming and some eye exercises that at least seemed to keep my eyes mobile.

Janet Goodrich came to Melbourne first, from America, before settling in QLD, and I had some sessions with her. Once again, my prescription did not improve but I

feel she taught me to see. She had me looking at trees and clouds, creating pictures of animals and beings in their shapes, implying I was seeing nature spirits. I learnt to really look at things, appreciating shape, colour, dimension whereas previously I had just seen without really noticing the richness of vision. Janet wrote a lovely book, *Natural Vision Improvement*, which was a sort of new age, compassionate updating of the Bates method.

Then came segment 1 of my Feldenkrais practitioner training, September 1986 in Sydney. It was, of course, a powerful and transforming experience. But I felt particularly that the many lessons involving the eyes must have had a significant effect on my eyesight. So, on returning to Melbourne I went to my optometrist and had my eyes tested again. To my disappointment my optical prescription had not changed at all!

Vision and movement

Jack Heggie in the introduction to his book, *The Use of the Eyes in Movement* points out that an optometrist (or, as he says it, *orthodox eye care professional*) tests your eyesight by asking you to read an eye chart. Your optical prescription is designed to correct your vision so you can see clearly to read the eye chart. But, says Heggie, *reading- that is, recognising previously*



memorised shapes- is only a small part of what the visual system does. In fact, he argues, there is another, vitally important aspect of vision which is completely disregarded in the eye test, the aspect of human movement:

...from the standpoint of good overall use of the body and mind, reading is of lesser importance than the other functions of the visual system. These other functions of the visual system are chiefly concerned with movement. In fact, organising the body for movement is the chief function of the visual system.

(This reminds of the story of the great Australian batsman, Neil Harvey, who played Test cricket in the years 1948-1963. He had his eyes tested by an eye specialist who told him he had defective eyesight. As Harvey tells it: *I could never read the scores on the board. The specialist said to me "Who leads you out to bat?"* Yet he was successful as a batsman at the highest level! Perhaps the visual ability to read letters



Neil Harvey, cricketer with 'defective' eyesight

on an eye chart is different to that needed to track a fast moving ball and move the body and bat into position to hit the ball.)

For more of Jack Heggie's writing on eyes see the extract from an article by him that follows this review.

I believe that all the Feldenkrais movement I have done has made for a mostly very healthy visual system, apart from my distance vision. By the way, I think it's interesting that one aspect of my "optical prescription" is healthier when compared to most people of a similar age- I still don't need glasses to read. I wear glasses or contact lenses to correct my short-sightedness, but I don't need reading glasses. I am about the only person I know of over 60 who takes off his glasses to read,

rather than puts on a pair. (The only other middle-aged person I've noticed with this ability is Galen Cranz, author of *The Chair*, who has done extensive work with Peter Grunwald.)

However it is impossible to measure the effects of all the eye explorations I have done. There is not a "Control" Ralph, who has done no exercises that can be compared with the Ralph who has done the exercises. This, of course, is a major problem we have in devising research to prove (or not) the benefits of Feldenkrais.

Jack's book

I have been working through the ATMs in Jack Heggie's book and I believe they are the best set of Eye ATMs I have ever experienced. He begins with a discussion of eyes, movement and our organisation and then explains the basic Bates tools "Sunning" and "Palming". Sunning is the looking directly at the sun, *with the eyes closed* (this is important! Do not look directly at the sun with open eyes!) And with a side to side sweeping movement, so the closed eyes are not fixed but keep moving, and the whole body moves as well. (Jack does say, as Bates did, that you can train your eyes eventually to be able to look at the sun directly, but only very briefly with the open

eyes sweeping quickly across the sun as you turn side to side. I'm not convinced of the safety or benefit of doing this.) Palming is resting with the palms of the hands covering the eyes. I have used these techniques regularly for many years. Once again I cannot measure the effects of doing them, but I do know I find them comforting and relaxing for my eyes.

He then explains how to identify your dominant eye-just as most people are left or right handed, most also have a dominant eye, the one they would use to aim a rifle or look through a telescope. He asks you to identify your dominant eye as this knowledge is used in most of the ATMs that follow.

And then there are eleven ATMs making for a fascinating and varied exploration of eye and whole body movement. He makes use of several props for most of the lessons: an eye-patch, a drawing pin, coloured dots (to stick on the wall) and a yardstick. The eye patch is used to cover one eye, so only one eye at a time is doing the actions. Well, the other eye is also, inevitably, doing the same movements. But your attention is focussed on the eye that is seeing. And certainly after doing one side the seeing eye felt better-relaxed, mobile, colours seeming brighter. You then swap the eye patch to the other eye, and do the same movements on the other side, in the familiar ATM way.

The drawing pin is used to mark a spot at the end of the yardstick. The yardstick is waved side to side, or up and down, with the eye following the pin on the end, or you explore looking near and far with your eye travelling along the stick and beyond. Or the stick stands at a distance while you look at the top of it, lining it up with a spot on the wall beyond, and you do some shifting side to side.

Various positions are used: standing, sitting in a chair, supine on the floor. And various eye movements are explored and integrated with / differentiated from the head, torso, pelvis and standing position: side to side turn, up/down, near/far, squeeze/relax.

I thought the lessons were skilfully and elegantly designed making for a satisfying experience-somatically and intellectually. I also explored teaching some of the lessons to my students. Some worked quite well, such as "Eyes, Neck and Pelvis" (see my summary, page 24), while others requiring a more complicated relationship with the props, not so well.

There is also an audio version of the book, Total Body Vision. I haven't experienced it so cannot comment. If you have, please send in your comments.

Jack Heggie

I met Jack Heggie when he was an assistant trainer in the first Melbourne training. We became friendly, sharing an interest in comic strips (such as Doonesbury) and he introduced me to the delightful Calvin and Hobbes comic strip.

He presented a successful workshop at my massage school, "Running With the Whole Body", based on his book of the same name. We also arranged for my school to re-print 2 of his books: *25 Lessons* ("translations" into English of Moshe's lessons published in Eshkol-Wachman movement notation) and *The Use of the Eyes in Movement* (Melbourne School of Tactile Therapies 1988).

I was saddened to hear, years later, that he had taken his own life in 2002. An unhappy end but he did leave behind an admirable range of books and recordings. I recommend them. You can purchase his work from Feldenkrais Resources, <http://www.feldenkraisresources.com> or The Feldenkrais Store, <http://www.achievingexcellence.com>

Other explorations

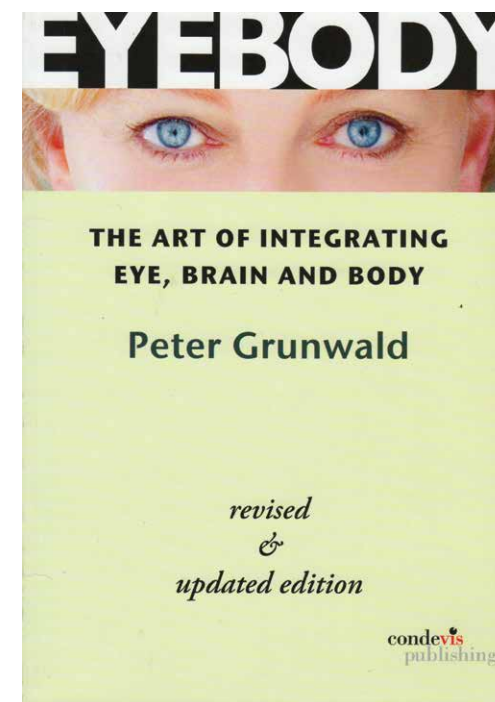
I have had a fascinating and enjoyable time, playing with and exercising my vision. Here are some of my

other eye explorations:

Bates and Alexander: I had a consultation with an Alexander teacher who also taught Bates vision improvement. No significant change noticed, though it was an enjoyable and relaxing session. She did suggest to me that I take off my glasses while giving FI- I do this some of the time now and find I feel more relaxed and flowing as I work, although all looks a little blurry.

Donna Ray's *Improve Your Game*: 5 good, basic ATMs, suitable for beginners but nothing especially new for me as an experienced practitioner.

Peter Grunwald: Author of *Eyeboddy*, Peter is originally from Germany and now lives in New Zealand. He makes regular visits to Australia, mainly to the School of FM Alexander Studies in Melbourne, to run workshops and give consultations. He is a lively, enthusiastic teacher with his own story (like Janet Goodrich and Aldous Huxley) of recovery from severe vision dysfunction. He works with a combination of Bates, Alexander and his own methods. I've read his book, been to a workshop and had a one-to-one. I think he's on to something but I'm not sure what- I've spoken to several people, including Galen Cranz, Alexander teachers and a Feldenkrais practitioner



who are full of praise for his work. However I find it mysterious and puzzling, even though I have felt relaxed and 'in tune' after experiencing his work.

Pinhole glasses: recently I purchased a pair of Pinhole glasses (from Peter Grunwald, on his recommendation) but it's too early to assess their benefit. (See Stephanie Stone's comments on pinhole glasses.)

Seeing Clearly by David Webber. I haven't tried this one yet, but colleague Sally Low says she enjoyed it: "a nice series of basic ATMs". The CD set is in the Victorian Division library. ■

THE RELATIONSHIP BETWEEN VISION, PROPRIOCEPTION & KINESTHETICS

By Jack Heggie

This extract from Jack's article is reprinted (permission kindly given by Al Wadleigh) from the website of The Feldenkrais Store, (<https://www.achievingexcellence.com>) where you can also purchase books and recordings by Jack Heggie. Jack Heggie earned a degree in physics and worked as a digital computer design engineer before becoming a Feldenkrais practitioner. He wrote/produced several Feldenkrais books and audio sets, including Running with the Whole Body, Skiing with the Whole Body, Total Body Golf and Total Body Vision. RAH.

Visual Systems

Studies of the visual system in humans and animals up to the early and middle part of this century concentrated on the eyes, the visual cortex, and the neural structures between them. It is this part of the visual system that allows the brain to receive photic information from the environment and to enable us to "see," in the usual sense. More recent research has uncovered a second visual pathway that leads to a sub-cortical area of the brain. The visual cortex is primarily concerned with what might be called the

cognitive aspects of vision. It is this part of the brain that allows us to name and talk about objects that we perceive visually. If enough of this area, or the nervous paths leading to it, is damaged, blindness results. The sub-cortical visual area, on the other hand, appears to be concerned more with visual control of movement. If we consider vision from an evolutionary standpoint, we can get some idea of the importance of vision in relationship to movement. For millions of years our animal and human ancestors depended on effective vision for survival. The fox chasing the rabbit, or the cheetah the gazelle, must be able to translate visual cues instantly into proper movement to obtain food. Conversely, the rabbit or gazelle needs to do the same to survive. Tree-dwelling primates must be able to judge the exact location and position of a branch to avoid falling during a jump. How does the brain translate visual cues into movement? Experiments performed on those with damage to the visual cortex suggest that there is a subsystem within the visual system that works to organize movement, and that it functions outside of our usual, conscious awareness. Subjects with damage to the visual

cortex were presented with a target outside of their functioning visual area. Unable to "see" the target, and thus to describe or name it, they were nevertheless able to point at it with considerable accuracy. This phenomenon was originally called "blindsight," and the direct visual/motor link has been called "instrumental vision" or "ambient vision." The neural pathways that are thought to mediate this instrumental or ambient vision in man lead from the retina to the superior colliculus. Numbers of investigators have noted that connection between vision, movement and posture, and optometric contributions to this field have been described in such books as *Total Vision* and *Eye Power*. In the early 1980s I developed a series of techniques that are intended to improve the functioning of this second visual system. In initial experiments, first with myself and later with small groups of people, I found that the techniques could enhance the judgment of distance, posture, eye-body coordination, and the overall quality of vision. Also, excess muscular tension and pain associated with it, especially in the neck and shoulders, would often be reduced.

Principles

In constructing my techniques to improve visual functioning, I found four ideas useful as guiding principles.

The first principle is that there is an ongoing relationship between vision, kinesthesia and proprioception. To this end, I continuously remind the trainee to attend to what he sees, and at the same time to attend to his body. Improvement is produced by simultaneously paying attention to what is felt and to what is seen. I usually ask the trainee to move his attention through his body, feeling, for example, how the pressure on the soles of his feet changes, what he can feel in his ankles, then knees, hips, shoulders, or neck. This heightened proprioceptive awareness improves both vision and movement.

The second principle is that as we see, we construct an internal visual/kinesthetic map of the environment and we then act on this map. Thus, while the trainee is performing a technique, I ask him to consciously pay attention to an external target, then to close his eyes and visualize the target's position, and then finally to open his eyes and compare the position of the imaginary target with the position of the real target.

Learning, or improvement, occurs when the trainee discerns a discrepancy between the two.

The third principle is that vision is maximized when we are aware of the total visual field. To accomplish this, I ask the trainee to direct his eyes toward the target and also to pay attention to his peripheral vision while he is moving.

The fourth principle is that to enhance vision we should differentiate the movements of the eyes and the body. This differentiation, or the ability to move parts of the body independently of each other, is an application of a human developmental process.

The first principle, the visual/kinesthetic connection, has been verified by experimenters. Human volunteers, wearing inverting prisms, manage to right their perceptual world fairly quickly if given the chance to actively move in and through the environment. Experiments with young animals have shown that functional blindness can result if they are deprived of the chance to manipulate or actively explore the environment. Moshe Feldenkrais, who originated the system of psychophysical education that bears his name, propounded the second principle, the

importance of proper internal visual/kinesthetic maps for good action. In constructing his system of psychophysical education, he stated that we direct ourselves to move in accordance with our physical self-image, which is a map of the physical body stored in the brain. This map is learned, as we grow from infant to adult, through exploring the environment and gaining greater experiential knowledge about our own bodies. Feldenkrais stated that this internal map frequently does not match reality, and that actions taken on the basis of it will often go awry, just as a person using an inaccurate road map may end up at some place other than his intended destination. I have extended this idea to include not only proprioception but also exteroception. Experimenters have also come to the conclusion that visual perception may consist, at least partly, of constructing an internal map of the environment. The third principle, that we should be aware of our whole visual field as we move, comes from the idea that peripheral vision, as opposed to central vision, is the seat of visual control of movement. The fourth principle, of differentiating the movement of the eyes from that of other parts of the body, is a general principle describing developmental learning. A newborn child has almost completely

THE RELATIONSHIP BETWEEN VISION, PROPRIOCEPTION & KINESTHETICS *By Jack Heggie*

undifferentiated movements, being able to either contract all of his flexor muscles, and so roll up into a ball, or to contract his extensor muscles in the opposite movement. Learning to sit, crawl, roll over, walk and run, then, are accomplished by increasingly finer differentiations of the various muscles.

ATM

The technique that follows, taken from my workbook, *The Use of the Eyes in Movement*, (which is now available in the audio set *Total Body Vision*) is a practical demonstration of the application of these principles. It is one of 11 techniques in the book. To do the technique you will need an eye patch and a yardstick. For good action, the visual system must be able to locate an object in space in relation to the body. In order to do this, the brain utilizes information not only from the eyes but also from the kinesthetic sense - that is, from the sensations of movement of the body. Thus, to a certain degree, we see with our whole body and not just with our eyes. In the following technique, we will explore and improve this function of the self...

Editor's note: What follows is a detailed set of instructions for an ATM, Standing and Shifting, from chapter 10 of his book. To save space I'm not reprinting the instructions here. But you can read the full text of the article and the complete ATM by going to the Achieving Excellence website. Personally I recommend getting the book, or the audio version, and starting at lesson 1. RAH. ■

NATIONAL PAIN WEEK 22-28 JULY 2014

Mark this in your diaries and prepare to participate: pain management themes in your ATM classes and workshops, presentations on pain in your location and involvement with Pain Week events. The formal participation of AFG Inc. is not yet confirmed but we hope there will be some promoting of the valuable Feldenkrais approach to pain. ■

REPORTS



DAVID HALL: TOUCH IN ATM AND FI

By Brent Shaub

Brent recently graduated from the Melbourne 4 training-congratulations Brent! Originally from Pennsylvania, USA, Brent completed 2 years of training in the New York program then deferred, moved to Tasmania and joined the Melbourne training. He now lives and has a practice in Sydney. RAH.

David Hall's recent Advanced Training in Kings Cross, Sydney, *Touch in ATM and FI*, contained a great deal of useful information. There were three areas to note: partner ATM, in FI having the student use their hands as part of the position, and having a small touch with a large intent. David taught a few ATMs, group discussions and FI sequences.

David started with part ATM, part discussion about finding one's self in three dimensions. During this time, we spent a few moments tracing our visual field with our hands. We then slowly moved our hands behind our sight and gently back into being visible. Combined with some seated hands-on experiences to map the fronts and backs of our legs, my ability to know where I

was, to map the entire room and how to navigate space were improved.

There were a few opportunities to work in pairs: the first was improvised dance, the second a partner ATM. The "dancing" was purely spontaneous, both people's hands together with one person leading through, felt easy and was interesting for their partner. Roles were reversed and the dance continued. Later there was the use of hands in an ATM lying supine pressing each other's palms together. This creative lesson steadily grew in complexity until both people were rolling in unison, engaged arm in arm, building communication and cooperation.

Video clips shared the public's awareness of the felt sense. With how ubiquitous video recording has become, daily life is being captured in all walks of life. First was a man who throws twenty-two bricks on his head before walking off a skiff and across a single board pitched up an incline.⁽¹⁾ Next was a series of shorts featuring workers from various countries performing dexterous acts in their workplace. One example a man who throws parotas across the room



Litzi Lemberg and Margo Nichols share the ATM

without looking.(2) Last was a dance performance duo, filled with emotive body language and breath-taking shared balancing.(3)

One ATM from David's most recent set of recorded ATMs, *The Golden Suit*, featured having the student place their own hands under each side of their sacrum, palms of hands to table. This then became a starting position for an FI. With the giver's hands fully under the receiver's scapulae, raising one and then the other, their goal to feel the length of the spine down to their hands. Having the student's hands there created additional sensory input for both. The next steps were to rock their pelvis from the crests left, right, back and forward while sensing their fingers. Lastly going to each leg, rotating them out from the heel. For those

able, bending the knee with one hand underneath it and supporting the foot with the other led to additional movements of the hip joint from the thigh. The use of hands both impeded and augmented movement while universally increasing sensory awareness.

The final FI introduced the smallness of touch, getting into the receiver's inner space with a focused intention throughout their body. In supine, raising a big toe with a thumb or finger through the pads only a fraction of a centimeter is a small movement. To do so with the intent of following the moving up their spine and their head requires precise attention on the subtle changes from this distal manipulon. It was a great lesson in listening. What can they hear in this whispered conversation through touch? How can that be sensed?

I thank David for the variety of information and creative expression of a fundamental essential of life: movement. Much more happened than can be summarized here. Also thanks to the NSW Division for buying *The Golden Suit*; for other divisions interested, go to <http://www.bodylogic.net.au/pages/shopping-cart/australia.php>

References

- <http://www.youtube.com/watch?v=IV-iP1jSMII>
- <http://www.youtube.com/watch?v=SGqBbeXzm2o>
- http://www.ted.com/talks/pilobolus_perform_symbiosis.html





MAGGIE SLATTERY: COR(E)RESPONDENCE

By Jill Taylor

Jill (Sydney 1990) worked for 20 years with children who had difficulty learning in the classroom and co-authored a book on this subject. She now teaches ATM at Macquarie Hospital, East Ryde.

This was a 3 day Advanced Training held in Kings Cross, NSW on 11th, 12th and 13th of May, with approximately 20 participants.

Maggie provided an excellent learning environment, underpinned by transit metaphors. We were travelers on a train - not a fast Euro or Japanese train but a slower Italian or Spanish train that allowed time for chatting and sharing. There was an itinerary but it had flexibility. We reveled in the 9 ATMs, 8 of which were Alexander Yanai lessons. We were all expanding the feeling of how the trunk is involved in movement; a particular interest of mine especially in children. I found that my movement, around the hips, shoulders and ribs expanded beyond belief!

Maggie encouraged the idea of softness and the idea of taking more time, for learning.

Finally the trip was over and we reluctantly alighted.

Course Outline

Day 1 We explored through ATM and FI the 'departure point' - the starting off of a process - focusing on the 'Form': what the person is already doing; asking the question, 'how can that become easier?'

Day 2 We looked closely at the role of the trunk in transmission of movement, using the metaphor of the transit map.

Day 3 We explored 'geographical mapping' - learning to feel accurately; within complexity. We looked at mapping a lesson series.

(ATMs included in the DVD that Zoran Kovich filmed - now available from AFG Inc. (NSW), details at http://www.feldenkrais.org.au/sites/www.feldenkrais.org.au/files/SLATTERY_AV_resources.pdf.)

ATMs in the training:

Extending the arms & twisting the back	AY 121
Shoulder rotation (from Delman/Questel training notes, taught by Chava Shelhav)	
Sitting on Toes next to chair	AY 149
Twist R & L with the Legs Spread	AY 358
Leaning on the hands & twisting	AY 374
Lowering the head #3	AY 46
No Name	AY 550
Twist like in a_O_with differentiation	AY 352
Circles with the hand in sitting	AY 80



JACK HEGGIE EYES, NECK AND PELVIS

By Ralph Hadden

This is from Jack Heggie's book *The Use of the Eyes in Movement* (1985). There are several excellent lessons in this book but this one is particularly accessible, requiring no special equipment (some other lessons in the book use an eyepatch and some also a yardstick). I have taught it several times recently and it has been well received by my students.

1. Stand or sit, look up and down, moving head and whole body, or just eyes.
2. Lie supine, knees bent, feet standing. Look up and down: head with eyes, then eyes only.
3. Roll pelvis up and down, that is towards head/feet, also let head turn up and down with movement.
4. Roll pelvis, head up, hold. Eyes look up and down.
5. Roll pelvis, head down, hold. Eyes up/down.

6. Hold eyes looking up. Head + pelvis up/down.
7. Hold eyes looking down. Head + pelvis up/down.
8. Fix eyes on a point on the ceiling. Head + pelvis up/down.
9. Head + pelvis up/down while eyes move oppositely.
10. Sit/stand, repeat step 1. Any differences?
11. Stand and walk, looking around in various directions, sometimes fixing eyes on a spot. Can you keep moving freely even when eyes are fixed?

By the way, to expand it into a full 45 minute lesson I have, in my classes, added in side to side movement: looking left and right, differentiating head and eyes in a similar way to the differentiating the up/down movements. ■



THE EYES

By Francesca White

Fran says “here’s a favourite eyes ATM, as taught by Carl Ginzberg in Graz, Austria in May 2013.”

Working supine with eyes covered either with both hands or with eye shade.

Taking R eye to R corner several time from centre. Then from centre to L. Work with R eye leading, (of course the L follows, but just think about the R eye.)

The R eye in an arc from R corner to top to L corner. Repeat many times and then go in an arc underneath the eyeball. Which is easier? Eventually take the R eye in a circle many times in one direction then change. Recognize the fact that lying supine eyes are being pulled down towards gravity, but they float in liquid.

Without opening the eyes, nor removing the shade, roll onto belly, still with your hands over your eyes AND over the shade. Elbows out to the side, hands over eyes. Eyes are being pulled down towards gravity now. Can you feel?

Now imagine that you look deep down into the centre of the earth, with xray vision. See a bright small white light, like the head light of a train in the dark coming towards you. It can be the centre between your eyebrows (also known as the 3rd eye).

Then see it go far away from you and so on.

Roll over onto your back (eyes covered). Come to sitting (eyes covered). Then remove slowly your eye shade, your hands, many small flickering movements of the eyes, and open them. Feel what it is that feels different, what changes do you notice? Soft eyes? Walk around with soft eyes. ■

ALEXANDER YANAI AND EYES

By Ralph Hadden

Taking a quick look through Alexander Yanai, I identified the following lessons for eyes:

10. Covering Eyes

15. Eyes 1

26. Pearls and Eyes

165. The Eyeball lesson

453. Eyes and Lines

484. In Standing, Turning with the Eyes

525. Lifting Head and Eyes

Please let me know what you think of these lessons- for your own learning? For teaching to your students? And are there any AY lessons for eyes or vision that I have overlooked? ■

NEWS

RESEARCH: ATM FOR OSTEOARTHRITIS

By Robert Webb

Robert (Sydney 1997) has done a marvelous job, with his collaborators, in running a research project and having the results published. This is exactly what the Feldenkrais community needs in the continuing quest to gain wider acceptance of our work. Well done Robert et al! Here Robert introduces his work and provides links to the paper and a YouTube video. RAH.

The paper, *Moving With Ease: Feldenkrais Method® Classes for People with Osteoarthritis*, by myself, Mary Galea and Eduardo Cofre Lizama has been accepted by the journal *Evidence-Based Complementary and Alternative Medicine*. It is on the journal's website so is now in the public domain. This Journal is an open access journal so the full paper can be obtained free of charge. To our knowledge this is the first time that the effectiveness of the Feldenkrais Method has been evaluated in a gait lab.

It's a small study in terms of number of people but it was a huge and costly undertaking that took three years to complete. The fact that we did complete it is a testament to the commitment of all of us but particularly Mary Galea.

The results are interesting, probably the most interesting, and the one I like, is that there was an across the board reduction in anterior pelvic tilt. This indicates that the participants were walking with a more upright posture. We always talk about improved posture and now we have demonstrated it.

Here is the link to the article:

<http://www.hindawi.com/journals/ecam/2013/479142/>

There is also a short video as part of the paper. You can see it on youtube at: <http://youtu.be/V9tf21itKuE> ■



REVIEW OF THE GOVERNMENT REBATE ON HEALTH INSURANCE FOR NATURAL THERAPIES

By Karol Connors

Karol (Melbourne 2001) uses Feldenkrais in her work with patients with neurological problems. She is currently the physiotherapy manager at Calvary Health Care Bethlehem in Melbourne, as well as conducting a small Feldenkrais practice. Recently there was an Australian Government review of rebates for “alternative” therapies and the various modalities were invited to present their cases to the panel. Karol was our representative, with Susan Hillier providing input by phone. She passed on her impromptu reflections on the day to the AFG Inc. national council and I’ve reproduced them for you here. RAH.

Well we did it! I think it went OK. It was very hard to tell. There were 6 teleconferences first, of which we were second. These were held in a room with a long table, seating about 15 people.

Susan was on the telephone and I was there in person.

It was great to have Susan with her research credentials presenting on our behalf, and I think it was also good to have me in person - to make our Method more 'real' to the committee. So I think the combination worked well.

The Committee members were still just 'settling down' for the day, so not everyone was attending to our presentation. Some people were reading through papers, sorting out stuff etc, which was a bit disconcerting. Others were very attentive though, leaning forward and nodding etc. They paid most attention whenever 'research' was mentioned - like when I mentioned my article had been published in the UK Physiotherapy journal, I suddenly had all their attention, and it was hard not to talk more about it. I had to be mindful we had such limited time and a lot to cover, so I just mumbled something about it. It's a bit of a blur now. Susan - you spoke very well.

There were two questions asked by the panel - one asking if the research we mentioned was covered in the submission, which it was. The other question was about how much variability of practice there is between practitioners; how much do practitioners from different backgrounds vary what they do and still call it the Feldenkrais Method? (Good question!) Susan answered well by saying that practitioners will vary what they do according to their client group - so turning the question around to being about meeting client needs. I added that the core of the Method is the hundreds of ATMs, and although these may vary a bit in how they are taught from practitioner to practitioner, all practitioners are basically teaching their clients from the same material. Those answers seemed to satisfy them.

Professor Baggeley thanked us for a well organised and well presented contribution. I then had to leave the room for the rest of the teleconferences.

They then moved into more of a lecture hall set up - with the committee lined up across the front row with desks, with glasses and water jugs and papers, in front them. It was all very formal. The schedule was extremely busy and tight. They had another 21 presentations to get through in the rest of the day, so people were limited to their total of 15 minutes for presentation and questions. Other presenters were able to be in the room to watch. I was able to stay for the Pilates and Tai Chi, then I had to leave to catch the plane.

The Pilates representatives, as part of their presentation, said they had gathered 700 testimonials. They tried to read out a few, but the panel told them not to waste time, as of course they would be good testimonials. Shows the value of testimonials in this context!

The Tai Chi presentation was excellent. It was by Paul Lam - the Tai Chi guy from Sydney. Tai Chi have got so much research on the benefits of Tai Chi for arthritis, for balance, for sleep, for blood pressure, etc etc. They also have endorsement from major health bodies such as the American Complementary Medicine organisation because of all their research.

He also quoted a recent NZ project undertaken by the NZ Accident Compensation Corporation (like our workcover, transport accident etc all rolled in together). They trained 700 Tai Chi teachers to teach 40,000 participants Tai Chi, and found their medical costs dropped by 40% (these figures are all approximate - I didn't write it down at the time, but it was something like this). You could tell the panel was very impressed.

The presenters to follow included the Complementary Medicine Association, Shiatsu, Remedial masseurs, myotherapy, acupuncture, reflexology, naturopathy, Bowen and Alexander. In hindsight, it would have been good to have stayed for more, but it would have cost the Guild \$100 - \$200 more, as the flights got dearer the later into the afternoon the flight.

Anyway, I think we did our best. Now we'll just have to wait for the outcome!

Regards, Karol

And some additional comments from Susan Hillier:

Firstly thanks so much to you Karol for giving up a day of your precious life to go to Canberra not to mention your dinner! I think having a physical presence there

must have been very reassuring. I was very interested to hear your impressions. I am glad we went down the reason route because I know how they react to emotion and frustration. I think that with the alternative health practitioners it will be difficult...

I think with that crowd it will be difficult to differentiate ourselves and to differentiate from current allied health practitioners. But that is beyond us. Certainly the team effort was wonderful and I think the guild can be assured we did the best we could.

Thanks to all, Susan. ■

Note: At the time of going to print, we are still waiting for the panel to present its recommendations. RAH



PRESIDENT'S RAVE

By Eric Kiernan

Eric (Melbourne 2008) is national president of the AFG. He practises in Queensland, combining Feldenkrais with Aikido and Voice

Dialogue. RAH.

First of all a big welcome to the new graduates from the Melbourne 4 training. We wish you all the best in your continuing journey. All members of the Guild are looking forward to meeting you and sharing with you as colleagues.

Around the Feldenkrais world there is a lot going on!

The meta-issue in our discourse is always the same: how to free up the administration of the Method to encourage innovation while ensuring continuing high training standards and international coherence. Not an easy task obviously and one that requires all the individual and collective potency we can muster.

In the United States there is an interesting debate on the relationship between graduation from an FPTP and accreditation.

The German Guild (the FVD) is wondering how to free itself up to run its own affairs while maintaining connection with the rest of the Feldenkrais world.

The TABs are having an ongoing discussion about how to streamline the path to trainer. The interesting point has been made that it takes longer to become a trainer than to become a surgeon.

The International Feldenkrais Federation continues to be an enormously important conduit for communication. And if you have just a moment to spare, have a look at the offerings from the IFF Distribution Centre – individual Alexander Yanai lessons, lessons in various languages, and much more.

Closer to home there is a lot going on too.

It's three months since National Pain Week happened and we are talking to Chronic Pain Australia, the organisers, about how we can be involved in next year's event. We have a Pain Team, which coordinates this activity.

We also have teams to get the word out to the performing arts, elite sports and schools. Anna Yen will be presenting at ASPAH conference in Brisbane and we hope this will be the start of an ongoing relationship. Nothing is happening that I know of in term of creating relationships with sporting or schools bodies. The reason is we have no volunteers to do it. If you are ready, willing and able to participate in any of these areas please get in touch.

Lesley McLennan, Julia Broome and I wrote a paper addressing the restructuring of the AFG. Not any response as yet - we had hoped the suggestions might generate some discussion! We have, how shall I put it, a *unique structure*, with 6 incorporated associations for 230 members, making for a heavy administrative load. There must be a way of coordinating that carries less of a load. My personal favourite is a company limited by guarantee.

<http://www.feldenkrais.org.au/forum/afg-restructure/afg-restructure-discussion-paper>

With the festive season galloping towards us National Council wishes everybody a safe and happy time. ■

THE NATIONAL COUNCIL

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Deb Mason, debbiemason@inet.net.au

Council member:

David Hall, comms@feldenkrais.org.au

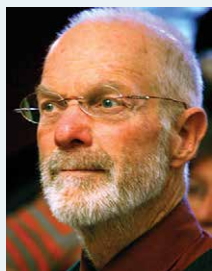
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RESPONSES TO THE NEW IMAGES

By Ralph Hadden

The May edition of Feldenkrais Australia featured the new images and brochures produced by David Hall and the NSW Division.

Members can download the images for their own use from the AFG website, and can purchase brochures from the NSW Division (contact **Jacqueline Farrar**, 02 9460 0524, rfarrar@bigpond.net.au)

Members were invited to give feedback on the new images and brochures but so far there has not been a single response. This is surprising as, from the comments and grumbles I have heard personally I think there have been many strong reactions to the images, both positive and negative. Please make your comments known! How can those who carry out projects like this know if they are meeting members' wishes if no one gives any feedback? Anyway, in the absence of comments, I'm going to give my own.

I was delighted by the new images. I think the "new look" gives an image of the method that is bright, exciting and interesting. I have purchased

the brochures and am happy to display them in my practice. I have used the images from the AFG website in a flier I produced for my classes and plan to also use the images in the next incarnation of my website.

I know that some practitioners were not so happy with the new images. They found them too gaudy and thought they gave a frivolous, silly image of our work. One practitioner felt the Persian rugs were distracting and that ATM students don't dress as if they are going to a hippy party! Another practitioner, who is also a physiotherapist, said she would definitely not display the brochures in her practice. They would convey entirely the wrong image of the work she does. She preferred the old blue brochure.

So how do we represent our work visually? How do we communicate the essence of what we have to offer? How do we find images that represent the breadth of our practice and the diversity of our culture?

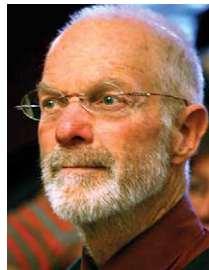
As David Hall has said, this is a step in a continuing process, there will be other photo shoots and other brochures targeting other sections of our clientele,



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e.g. performers, rehabilitation patients, tradespeople and so on. However, this will not happen unless someone is interested! How would you like the work to be represented in media? What type of images or videos would you like to see? Go to the AFG website to comment: <http://www.feldenkrais.org.au/forum/general-discussion/delineation-culture> or to Feldenkrais Australia on Facebook. ■

NEXT ISSUE



THE VOICE : CONTRIBUTIONS INVITED

By Ralph Hadden

I invite you to contribute on this theme: case histories, stories, Moshe anecdotes and whatever you may come up with. There are overlaps with Alexander, singing, public speaking and speech therapy- perhaps Feldies who also work (or play) in these areas will have something interesting to share. What ATMs have you found interesting- for yourself or your clients? I would also be pleased to receive reviews of books and recordings, such as *Singing With Your Whole Self* by S. Nelson and E. Blades-Zeller and *A Soprano on her Head* by E. Ristad. And contributions on topics other than "Voice" are also very welcome.

FUTURE THEMES

What themes would you like to see explored in future issues? Send in your suggestions. You can email me: nationalnewsletter@feldenkrais.org.au or post a comment on: <http://www.feldenkrais.org.au/forum/feldenkrais-australia-journal/comments-december-13-edition>, or post a comment on Facebook: <https://www.facebook.com/FeldenkraisAustralia>

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