

EXCHANGE

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The Dual Members

Carol Levin
Alexander Technique trainee

Why do some Alexander teachers belong to two Alexander Technique societies? That question popped up spontaneously during an ATI board meeting. Immediately we realized it was an important and interesting question to explore. I designed the questionnaire below and sent it to some members who belong to another organization as well as ATI. I dubbed the interviewees "Dual Members."

1. How did it come to pass that you made the decision to join ATI?
2. Will you mention what aspects you find attractive in each Society you belong to.
3. How are they different from each other?
4. Will you mention which aspects you would like to see changed or added.
5. After you joined ATI did you find membership to be what you had expected it to be? How was it different?
6. What is your "wish list" for ATI?
7. Are your dues paid up-to-date?

Please let me know if you are willing to be quoted by name or if you prefer to keep this information confidential.



ATI Vision and Mission

To establish an open means of global communication for people to discuss, apply, research, and experiment with the discoveries of F.M. Alexander.

To foster the use of the F.M. Alexander Technique in social and environmental interrelationships.

To create a vital organization whose structure and means of operation are consistent with the principles of the F.M. Alexander Technique.

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Editor's Page: "They' Are Us"

Andrea Matthews
Editor, ExChange

I was fascinated to read of Carol Levin's polling of our "dual members"—those who belong to ATI along with another AT organization. In particular, I was struck by two contrasting attitudes reflected by her study.

The first, embedded in some of the comments of her interviewees, is the sense that organizations are something other than the sum of their members, that ATI is somehow a "they." One interviewee commented, "As organizations go, I cannot profess to having huge confidence that ATI won't go the way of all other institutions and organizations that try to endure a long time—be they Theatre Companies, Universities or Governments. It takes an individual to breath life back in, so ATI needs that kind of leadership and there's a good chance of that happening for a while into the future. But any institution is always a challenge because, as Alexander said, "they cannot stand truth."

This sentiment hardly seems confined to dual members, and it is even understandable in relation to very large organizations, where day-to-day operations become routinized and are carried out by paid, disinterested employees. I think it is extremely important for us to remember that ATI is a worldwide organization of some 300 people. We have one paid part-time employee, a new teacher just graduated from her training course, who handles the emails, phone calls, mailings, updates the database, and coordinates the production of the Directory. All the other work of the organization is handled by volunteers who step forward month after month to keep ATI and its vision alive, from our Chair to our committee members. It doesn't just take "an individual to breathe life back in"—it takes all of us individuals.

The second attitude is embodied in the intrepid interviewer herself: Carol saw a need and stepped forward to act on it. She acted in accordance with her interests and abilities, and accomplished something of benefit to us all. And she took the time to share her results with the rest of us in this issue. I depend on contributors to produce the *ExChange*, and she came through. As members of ATI, we depend on each other to further the growth of our organization and our profession. Without our time and labor, there is no ATI. *We* are "they." ☺

EXCHANGE

ExChange is published three times per year by Alexander Technique International (ATI), the purpose of which is to promote and advance the F. Matthias Alexander Technique. *ExChange* is designed to disseminate information regarding the Technique to ATI members and the public.

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From the Chair: Zucchini Time

Cathy Madden
Chair, Alexander Technique International

Last year at this time I was talking about cauliflower. “*Be patient, stick to principle, and it will all open up like a great cauliflower.*” If you have looked at your latest Communiqué, or E-Communiqué, you will see that the ATI cauliflower is indeed opening up. The Board, and many of the committees of ATI, have been patiently sticking to principle this year and the result is that we not only have a full and exciting AGM workshop schedule, we also have a full and exciting business meeting schedule.

That is what reminded me of the Great Zucchini. I am not a gardener myself, but I have noticed that at this time of the year, people who are gardeners are often giving away zucchini. Once zucchini matures, it seems to produce faster and faster and faster. Vast quantities of zucchini are being offered to anyone who will take them.

So our cauliflower of last year has transformed to many zucchini.

We are inviting all of you to take some zucchini. Please read the Communiqué carefully. Send your thoughts to the committee chairs and the board. There are many proposals under consideration—considerations about our Sponsors, about a new membership for Countries, and continuing development of our Ethics guidelines. We hope to see you in Ireland in October, but even if you are not able to join us, please join the discussions on the Interchange now. Each member’s voice helps all of us.

It takes many people to handle a full zucchini harvest.

(Note: Thanks to my student, Lucia Neare, for her vegetable inspiration.) ☺

Alexander Technique International

For membership information, please contact Bérengère Cusin at the address below or by email at ati-usa@ati-net.com.

ATI membership: \$55 (\$30 for trainees) per year. Teaching membership: \$120 per year. Membership includes a subscription to *ExChange*. Subscription to *ExChange* alone, \$35 per year. Please send check or money order in US funds to:

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The Dual Members

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I thank each person who generously completed the interview. I had a teacher once who said the definition of sociology is the Study of People in Groups. I view the results of this Dual Member Interview as a fascinating sociological study.

The most eye-catching responses when describing reasons to belong to ATI were along this line:

“ATI stood for something that I feel strongly about—the stated intention to embrace the diversity of international Alexander teaching.”
 “... an inclusive organization worthwhile to belong to as it seemed to be moving in a positive direction...”
 “...[ATI’s] emphasis is on a person’s knowledge and skill as teacher...”
 “Acceptance based on qualitative assessment for new members instead of quantitative...”
 “...wanted an organization that is open and inclusive.”

I noticed the word “inclusive” popping up often.

“ATI is nurturing, growing, friendly, and inclusive.”

Here is another reason cited for joining:

“...joined ATI because negotiating in groups by Formal Consensus is more in harmony with Alexander Technique values, i.e., more focus on change and new possibilities.”
 “I love Formal Consensus discussions by e-mail; how, in ATI one just experiments with new ideas”
 “Formal Consensus allows members to own what happens, congenial—agreeable.”

One was attracted because:

“Formal Consensus is less confrontational than other systems of negotiating in groups.”

But people don’t always think alike.

“I would like to see ATI go back to Robert’s Rules for decision-making.”

Wish list:

“Roberts Rules”
 “I am entirely uninterested in consensus governance.”

We will get around to the “don’t likes” in a minute, but here are some other statements about what members do like about ATI.

“The work in progress and progress is what I like the most.”
“ATI so far does not want to dictate who or how training is done.”
“The quality of ATI publications is superior.”
“... it’s always a pleasure to come to the AGMs to meet everybody and enjoy the high quality of business meetings and workshops.”

Now here are some descriptions of what the Dual Members like about their other organization:

“My other organization has better relations to the other AT societies and provides far better professional service, is more active in representing AT to the outer world, legislative bodies, etc.”

“The other organization has ‘credibility.’”

“Many of my students find me through my other organization’s list of teachers—as far as I am aware no one has ever come to me from the ATI list”

“My other organization was our prime AT professional body with whom we trained. Is established, has produced many outstanding teachers, and has been a major influence in promoting the work and setting standards.”

Sometimes comments came as a comparison between the organizations. These references began like this and went on:

“I like my other organization’s decision-making process and I like the ATI openness.”

“My other organization appears to have an us against them mentality toward non-society trained teachers and trainers.”

“The other organization is protectionist, trying to protect their own turf, combative.”

“What do I get from ATI that I couldn’t get from my other organization—a sense of openness and community and an acceptance of diversity.”

“ATI is more experimental, more open minded.”

“...liked the premise and attitude of ATI, the other organization had been a nightmare for me when I was a trainee, I witnessed philosophy counter to the technique itself.”

“What a different atmosphere. My other organization’s AGMs are pretty grim affairs, generally ATI’s are a lot more fun.”

“I would like to see my other organization find other training models than the three year.”

“Each is a product of its history. The other organization is more formal and bureaucratic, so consequently less flexible. Gets quite rigid and academic at times which doesn’t resolve disagreements. Is the de facto lead body in many situations and acts accordingly. ATI is freer,

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smaller and hasn't had to face up to some of the challenges of the older body..."

Now on to the "Don't Like" answers when evaluating ATI. Actually there was only one, and it was mentioned twice.

"It's more new-agey than I thought it would be and I don't like that aspect at all."

I believe the cautionary references regarding ATI and the wishes for ATI are the nugget of this review. For instance:

"The best thing ATI can do to keep moving ahead is maintain the best website for Alexander Technique which attracts people and directs them to member teachers. Equally important is development of effective promotional material and programs to be used by member teachers."

"Continue to stay away from negative rhetoric or actions towards other Alexander organizations."

"ATI's openness leads it to be easily led in directions which are peripheral to the work...But my other organization too goes off in different directions. People can get carried away with side issues...which take attention away from the main work."

"And even in ATI there can be feelings that our way of training or doing things is better than the other society's. But broadly ATI goes in a good direction for me and will I hope continue as a healing influence..."

"ATI remains and develops as a multi-cultural organization, keeping a weather eye out for too much influence from any one quarter, including the great Marjorie Barstow!"

And on a more cautionary note:

"As organizations go, I cannot profess to having huge confidence that ATI won't go the way of all other institutions and organizations that try to endure a long time—be they Theatre Companies, Universities or Governments. It takes an individual to breath life back in, so ATI needs that kind of leadership and there's a good chance of that happening for a while into the future. But any institution is always a challenge because, as Alexander said, "they can not stand truth."

"Very important for ATI to keep opening their arms to other organizations regardless of the other organization's attitude—relationship."

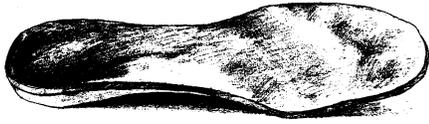
"I foresee the time when the animosity between organizations will be forgotten—as a new generation arrives."

To close, I go back to what I left out at the beginning. This is sooo important. Many people said they joined ATI because they met a member of ATI who was influential by being enthusiastic and passionate. Each ATI member, at all times, serves as an international ambassador.

(If you belong to another Alexander organization as well as ATI, you are invited to respond to the questionnaire; please send your response to clewin@televar.com. Gathering these points of view is valuable in evaluating and guiding our objectives.)

Carol Levin was elected to the ATI Executive Board in 2003. ☺

Body and Sole: On Orthotic Insoles as a Remedy for Poor Posture



Kri Ackers

former ATI Teaching Member, Australia

Putting remedial arch supports in children's shoes as a means of correcting common postural defects, such as flat feet or hyper-extended knees, is both inappropriate and harmful. The inserts appear to be effective; but meaningful orthosis is not achieved, and the price paid for the apparent remedying of the problem has far-reaching destructive consequences.

Body shape is organized as a whole; so when it has become distorted—usually through bad habits of use—it can only therefore be restored as a whole, by changing those bad habits into good habits. Dropped arches, sore knees, or round shoulders cannot occur in isolation, but are merely the more readily observable features of overall poor shape and malcoordination.

Posture as such cannot be corrected. The character of a posture can be changed. The character of a posture is created by the person's manner of use—the way the body parts are held in relation to one another, and the muscular arrangement in which the whole self musters force for action. Sitting is a posture. The way you sit—whether in a collapsed over-relaxed shape; or in a tightened-down shape; or in an opened-out, lengthened, and widened shape; or in an over-lengthened and narrowed and stiffened shape—gives the character of your sitting posture.

Good Use

As two-year-old Roger Chen investigates his environment he adopts several postures (*see Figure 1*). He reaches up, leans forward and around, reaches out, turns to look at Mum, holds his toy in his lap—and in each posture the lengthened-out shape of his trunk is maintained as a constant. The parts of his body not required for a particular action remain free: his legs while he's sitting, his arms while his mother holds the bottle for him to suck. His legs don't need to be crossed over one another to help him stay balanced in sitting; his arms are not being held tensely while he's not using them. His overall shape is kept open throughout the flow of movements, so that in whatever he does the safety and well-being of his whole body is being taken care of. His manner of use is good, giving good shapes or what we perceive as "good posture."

Good shapes promote good function, that is: a gentle action of the parts on one another, a sharing of loads over the larger muscles and bones that are designed for weight bearing, no excessive stressing of the joints, and—in accordance with the principle of energy efficiency—a state of maximum

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lightness achieved with minimal effort. We see that Roger inhabits his body lightly and comfortably. He enjoys being alive.

Some Activities Put Greater Demand on Coordinational Mechanisms

The body coordinates as a whole. The exacting degree of individuation needed for fingers to manipulate a dental drill in another person's mouth is dependent upon the integration and stability of the dentist's whole body, and especially on his ability to prevent activity in parts not directly engaged in the procedure. He needs to bring his eyes and hands close enough for fine work at a variety of angles, often maintaining a particular posture for some time. His arms and head need to support hands and eyes in a way that ensures that there is no wobbling, no missing the mark. Part of this intricate operation of balance and coordination entails preventing his legs from jumping about while this is going on. His breathing needs to continue throughout painstaking detailed work without allowing the movements of his ribcage to throw his fingers off track. This complex coordination, requiring constant miniscule adjustment of the masses and weights of innervated body parts, takes place automatically, outside of his awareness. However, the quality—or character—of this process can be influenced consciously by his paying attention to his manner of use in the situation. Clumsiness is less likely to occur in a person who is neither too tense nor too slack.

Coordinational Disadvantage

As a normal baby grows, his nervous system gets better at individuating parts from the whole, better at moving one part at a time, and leaving the parts that are not being used acting minimally in support of the specific movement so that energy is not wasted. At three months when he smiles at you he flaps his arms and kicks his legs at the same time. It's delightful to see. When we see the expression of such wholesome pleasure in a twelve-year-old we recognize at once that there is something different going on. We do not expect a more mature body to have difficulty in keeping some parts still. It means that the person's mechanisms are not working optimally; they are energy inefficient. For that person, coordination is a struggle, hard work. He needs help to get the best out of his body.

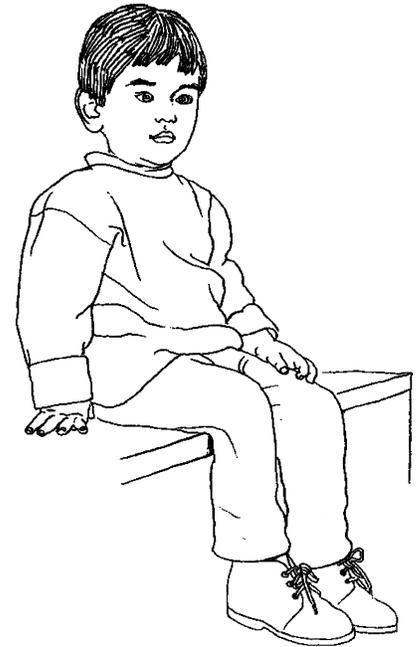


Figure 1. Four views of Roger.



Exercise Can Be Harmful

When instead of sticking a hypodermic in someone's mouth, you decide to go for a game of squash, you are not caring for the other person now, but it is still important for you to ensure the safe integration of all the parts of yourself. If every time you thwack the ball you jam your skull down obliquely on your atlanto-occipital joint, you are not doing yourself as much good as the frequently recommended taking of exercise would lead you to believe. There is more to exercising than simply contracting as many muscles as possible as hard as possible. You need to ensure that appropriate muscle groups are being exercised. You need to be well coordinated if the game is going to be good for you and not do you harm. You need to know what you are doing.

Everyday Activity Can Be Harmful

A person's musculature can be so badly organized that each time she rises from a chair she thumps herself in the stomach and in the lumbar spine. Every click on a mouse may simultaneously be a violent attack on the delicate structure of her neck. It makes sense for her to be skilled in using an individuated finger on the end of a well-sprung arm and shoulder, and to be accomplished in leaving her neck out of it. She needs to be able to respond with appropriate strength and mechanical advantage for the economical requirements of an action, and to return from various positions and postures to an easy poise, relaxed and alert, ready for the next action.



When she uses herself inefficiently, there is no return to an opened-out shape after a specific movement. A milder version of the poor shape she adopted remains after the action is finished. Gradually the normal shape of a person becomes molded by her habitual patterns of use. If every time she sits down she flexes too much—that is, she tightens herself down in front; drags her cervical spine forward, jamming her head back on her neck; her thigh muscles overcontract in taking too much of the responsibility for seeing her safely into the chair; and her knees pull together, putting extra strain on her lumbar spine—then this particular arrangement of body parts that she habitually employs will determine the character of her posture. When it occurs in children we call it “bad posture,” because its more obvious features will include flat feet, round or raised shoulders, and sway back. In adults it will be associated with a variety of spinal and limb injuries and ailments ranging from neck to lumbar spine, shoulders, knees, elbows, hands, feet, and temporomandibular joints. Yet we fail to make the connection with her “bad posture” because those shapes we associate with the adult form are “normal”! Adult bodies look strange to us when the character of their

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posture gives them an opened-out shape. Yet most of us used to have bodies like Roger's. I hope his father and mother will help him to keep his good use for life.

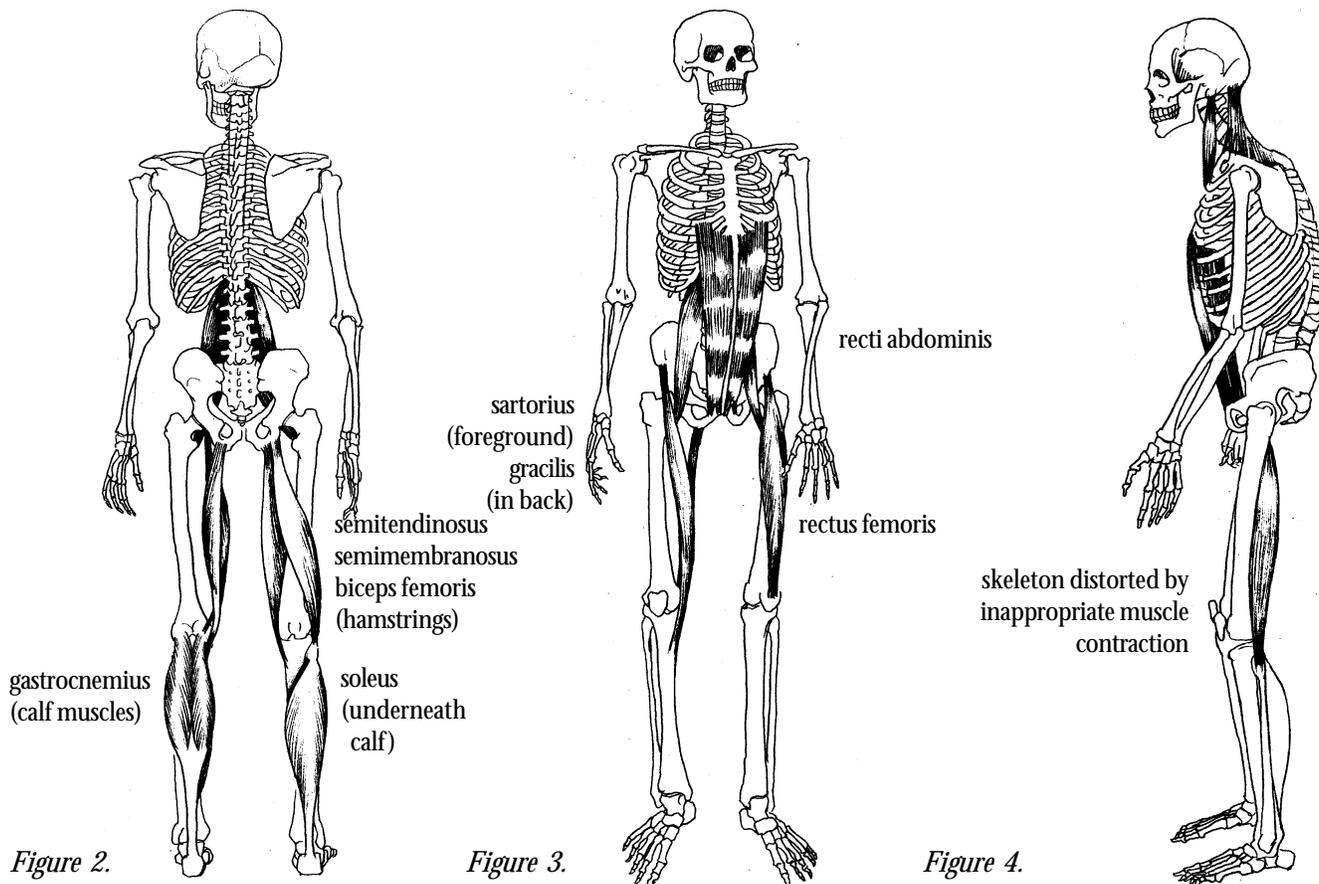
Seeking Solutions

Some parents do notice their children have bad posture before the onset of painful knees or random neck spasm. They may be recommended remedial shoe implants. This appears to answer the problem initially, but the habits of use that are cultivated by means of these prosthetics will only supplant one set of damaging postural habits with another.

Wholeness and Complexity and Special Posture Senses

Posture is dynamic, an activity of nerve and muscle organized in the brain to be in constant process while we are alive, even while we hold very still for having a photo taken or for balancing on one toe. We know that ordinary activities like feeding and walking are organized in specific brain centers and are carried out by multiple reflexes and other neurological processes operating muscle which acts on the skeleton. The information flowing betwixt and between and to and from ourselves—ourselves in action, ourselves at rest, our inner selves, ourselves and our environment—is enormous. Not least of the constantly active reflex activities are the postural maintenance mechanisms that keep us upright. As well as depending on a certain relationing of the parts for the activation of some of these reflexes, the process also involves using information from our senses. The vestibular apparatus of the inner ear and the specialized function of the soleus muscles, that lie directly beneath the calf muscles, keep the brain informed from instant to instant about our state of balance. Toes help, too, as they are sensitive to weight distribution and they are individuated, separated so they can make tiny individual adjustments.

If you close your eyes while standing, you can feel your soleus muscles and your toes twiddling and twitching as you sway slightly (*see Figures 2-4*). Swaying is a component of balance as balance must continually be adjusted. If it is not being lost and regained it is not a state of balance, it is a fixed state. If your legs are tightly gripped, you will not be able to feel so much of this balancing process. Some of the activity will not be going on because muscle that is held constantly too tense loses its sensitivity. Feedback from specialized fibers within the muscle mass falls silent when the muscle is over-contracted. The further our use deteriorates, the less information we receive about our state of muscular wellness. We become



less aware of the compensatory wrong muscle activity that is engaged when there is a shortfall of muscle tone where it is needed. If the erector spinae—the muscles that straighten the spine—are not working adequately, other muscle groups will be dragooned from their proper function into helping hold us upright. They will have to contract harder than is appropriate to their design in order to accomplish what has to be done, whether that is to run us rapidly out of the way of a heavy moving object, or to keep our eyes glued to a screen. When our toes and legs are gripped, the delicate responsiveness of the soleus muscle is diminished and the recti abdominis muscles are improperly deployed in helping to stop us from falling over. When a person's overall use has deteriorated, when she is flexing too much and tightening down in front, her shape is distorted and becomes harder to balance. Her toes are bound to stiffen as part of the overall need to stop her from toppling over. Toes are sense organs, they are supposed to remain soft and feeling. When they are subjected to constant excessive tension they lose their responsiveness, so that parts normally acting in relationship with them are deprived of important information. Problems also develop in the feet because gripping toes distort the natural lie of the foot. Feet are also sense organs, equipped to interpret the texture, cant, and stability of what they are treading on. To function well, feet and toes need gentle stimulation from the continual performance of their sensing job. Under well-

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sprung, lengthened-out legs and torso, they are able to respond with delicate precision to the toppling and swaying above. They help keep the head balanced and free.

The Body's Response to Orthotic Devices Worn in Shoes

Gripped toes twist and tilt the feet; feet that are tilted and turned make the toes grip. This is going on all the time as an appropriate response to our stepping on variously angled and textured surfaces. But it is a response to a temporary situation, and a frequent return to standing on the whole foot on an even surface is a normal part of that response. When an orthotic appliance is placed in the shoe we are held off balance permanently, forcing the toes into perpetual crisis mode (*see Figure 5*). They try to counteract the legs' being thrust out from under the hip sockets by putting a lock on the feet. A state of simulated bandy-leggedness is induced, which the body tries to deal with by making corrective adjustments all the way up through the pelvis and trunk to the neck and head. It is an unavoidable syndrome of compensatory tightening because the ankle joint can only flex the foot into positions of plantar-flexion or dorsi-flexion. It can only move the foot up and down to point the toes or to pull the toes upwards to stretch the back of the leg. It cannot move sideways; so when the foot is inverted and supinated, that is when the soles are turned to face one another by means of objects placed underneath their inner edges, the leg bone at the top end of the ankle joint is pushed over sideways and is forced to rotate at the knee and in the hip joint, making adjustments of muscle contraction imperative all the way up the body. As the knee is flexed slightly and rotated outwards the hamstring muscles are tugged so they stiffen. As the hamstrings contract, they pull on the pelvis where they are attached to the sitting bones at the bottom of the pelvis. This

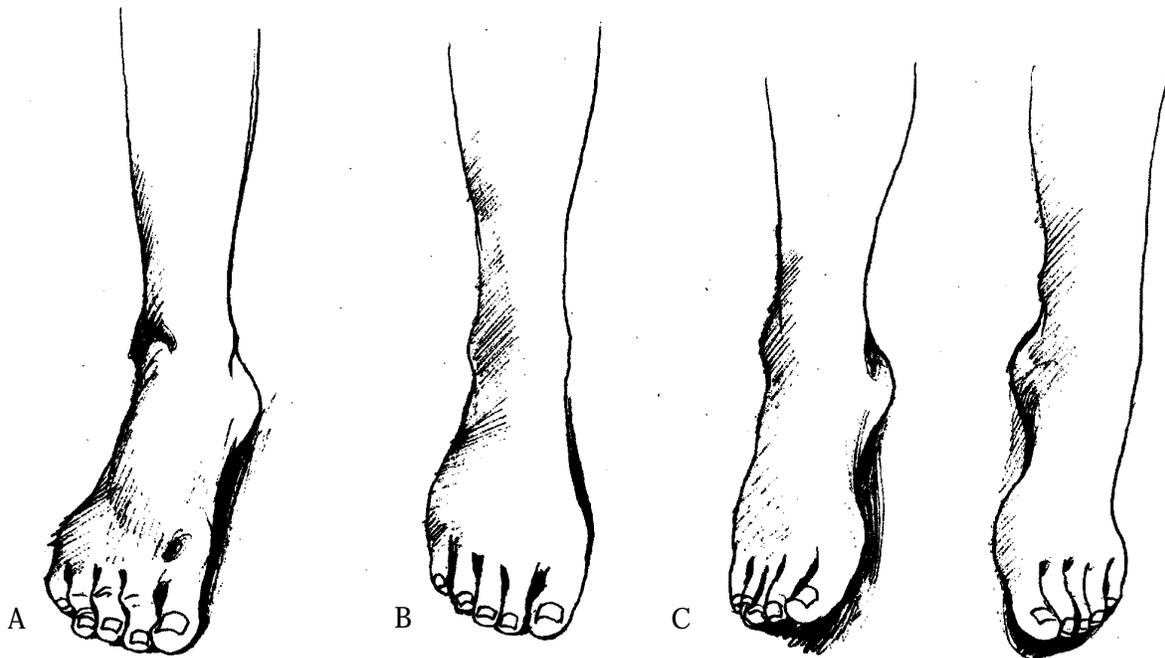


Figure 5. (A) Foot inverted and supinated by prosthetic arch. (B) Healthy planted foot. (C) Inverted feet.

pulls the pelvis back and down which makes the abdominal muscles which are attached to the front of the pelvis at the pubic bone, contract also—partly in reflex response to the movement of the pelvis and partly in response to the need to restore overall balance.

Structural, Sensory, and Functional Requirements for Good Use

Try supinating your feet (standing on their outer edges) and leaving your stomach muscles relaxed. It's hard to balance. As the pelvis is drawn back and down, the lumbar spine flattens, which subdues the responsiveness of the multifidus muscles. The tiny multifidus muscles straddle the vertebral joints obliquely so that as they contract they pull each vertebra into line, straightening out the spinal curves a bit. They form part of the erector spinae group, and their job is to maintain posture and keep us upright. They need constant gentle stimulation to retain their responsiveness. The spinal curves need to be maintained through good use at degrees of intensity that are somewhere in the middle of too little or too much. "Somewhere-in-the-middle" is a place that is difficult for the laboratory technician to get a hold of. However, it is easily recognizable to an Alexander Technique teacher by the feel of the whole body he has his hands on, because, when the multifidus muscles are doing their job, the whole body responds with an increase in stature. It visibly and palpably lengthens and widens. When there is either too much or too little curvature in the lumbar spine this opening out and enlarging will not be happening. The person will be slumped down and will have a lifeless feel, a lack of springing, a lack of muscle tone, or—as is the case when her feet are supinated—she will be fixed and not springy, from making too much muscle contraction. Within the same scenario, the shortened recti abdominis also pull the front of the chest down, diminishing the breathing capacity and increasing the curvature of the thoracic spine; the cervical spine is drawn forward so that balance of the head on the neck is made impossible.

Quadrupeds and Bipedes

A four-legged creature is more stable than we bipeds but he still needs to hold himself off the ground. He has shorter legs positioned under four corners of his trunk giving him a broader base than ours is, relative to height, making balance easier. But he still needs to hold himself up to move along the ground. Living in air requires this, unless you pull along the ground by contracting along one side and then the other as snakes do, or you invest in mechanisms that make leaping or jumping the energy-

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efficient option. Fish don't have a problem with holding themselves up, as they are supported by their medium. We have special problems because we stand particularly tall on our narrow base, precariously balanced on only two of our limbs. Long and thin, we must hold ourselves erect without becoming exhausted in the process. Fortunately we are designed so that this holding upright takes place with least expenditure of energy—*provided that we don't spoil the delicate mechanisms that subtly effect it for us.*

Relaxation Is an Oversimplification of Our Needs

Although the holding upright does itself, i.e., is automatic, it nevertheless requires a great deal of muscle contraction. An unconscious person lying on the ground is arbitrarily shaped, just prevented from falling apart by the ligament and connective tissue and muscle wrapped around her bones. When she wakes and begins to get up, she'll need to gather some tonus, perhaps by stretching out. She doesn't need to know which muscles to contract because that's taken care of by coordination-programming centers in her brain. As she gets to her feet, it doesn't make sense to exhort her at this moment to "Relax!" It would be more helpful to suggest she draw herself up to her fullest stature. We can also urge her to guard against fixing down into her hips, locking herself down. We can help her to stand up and ensure that only the postural maintenance musculature is engaged, the least and best that she needs for standing. She hasn't decided yet what she's going to do. She's in a state of suspended action, she's remaining free, inhibiting unnecessary muscle contraction while remaining ready to move quickly once she's decided where to go.

But Making Too Much Tension Is Not Quite It Either

Try getting up from the floor without contracting muscle. You'll discover it's not possible. Once you are upright, grip yourself tightly, make too much tension, make your legs rigid and try to take a step. You'll notice that you have to *release* something to move. You won't know exactly what you had to release; that will be taken care of by your brain. Our nervous system operates a rippling mix of contraction and release. Sometimes there's a less than optimal balance of ingredients in the mixture: we may be contracting or releasing some parts too much, or other parts may be contracting and releasing too little. We can help the organizing centers produce the best mix by consciously intervening, by inhibiting our harmful habits of use so the centers are free to arrange best coordination

for us. Prevention of the wrong thing from happening is fundamental to the process of learning how to use ourselves well.

Education in Use of the Self is Needed

Prevention is the *sine qua non* of postural re-education. Getting our bodies to do this thing or that from commonplace exhortations to “sit up straight,” “push your shoulders back,” “tuck your tail down,” or “pull your tummy in,” to the more insidious inducements of harnesses, braces, orthotics and ergonomic furniture only damages the apparatus further, making the restoration of poise ever more elusive.

Illusory Benefits of Wearing Orthotics

Orthotics induce a tightened-down holding pattern on the body which appears to improve posture. A person who has developed bad habits of use, shows a postural syndrome of pulling or collapsing down which will include pushing the knees too far back and flattening the arches of the feet. We see that what is required is that the knees must not be hyper-extended, because this means the weight they are carrying will be falling on the wrong part of the joint; and Nature lets us know this is not satisfactory because the joints start to hurt. The foot has spread out, and is no longer forming a springy arch to help distribute weight and protect bones and joints from stress. So it would seem logical to recreate an arch by raising the collapsed part with a prosthesis. We observe that muscle contracts when the orthotic is in place, and since we know that one of the features a foot with dropped arches lacks is tone in the muscle

Prevention of the wrong thing from happening is fundamental to the process of learning how to use ourselves well.

and strength in the ligaments, it would seem to be a good thing to induce the foot to use more muscle contraction. At the same time we observe that the tug on the pelvis from the hamstrings flexing the knees, gets rid of the sway back and the slack tummy all in one.

A Short View Is Unsatisfactory

But we do not see far enough. The design of the human body is not as straightforward as that. The apparent improvements will have been arrived at by forcing and fixing, and in the process one of the vital features of our structure will have been sacrificed, that is, its springing. We will

Body and Sole

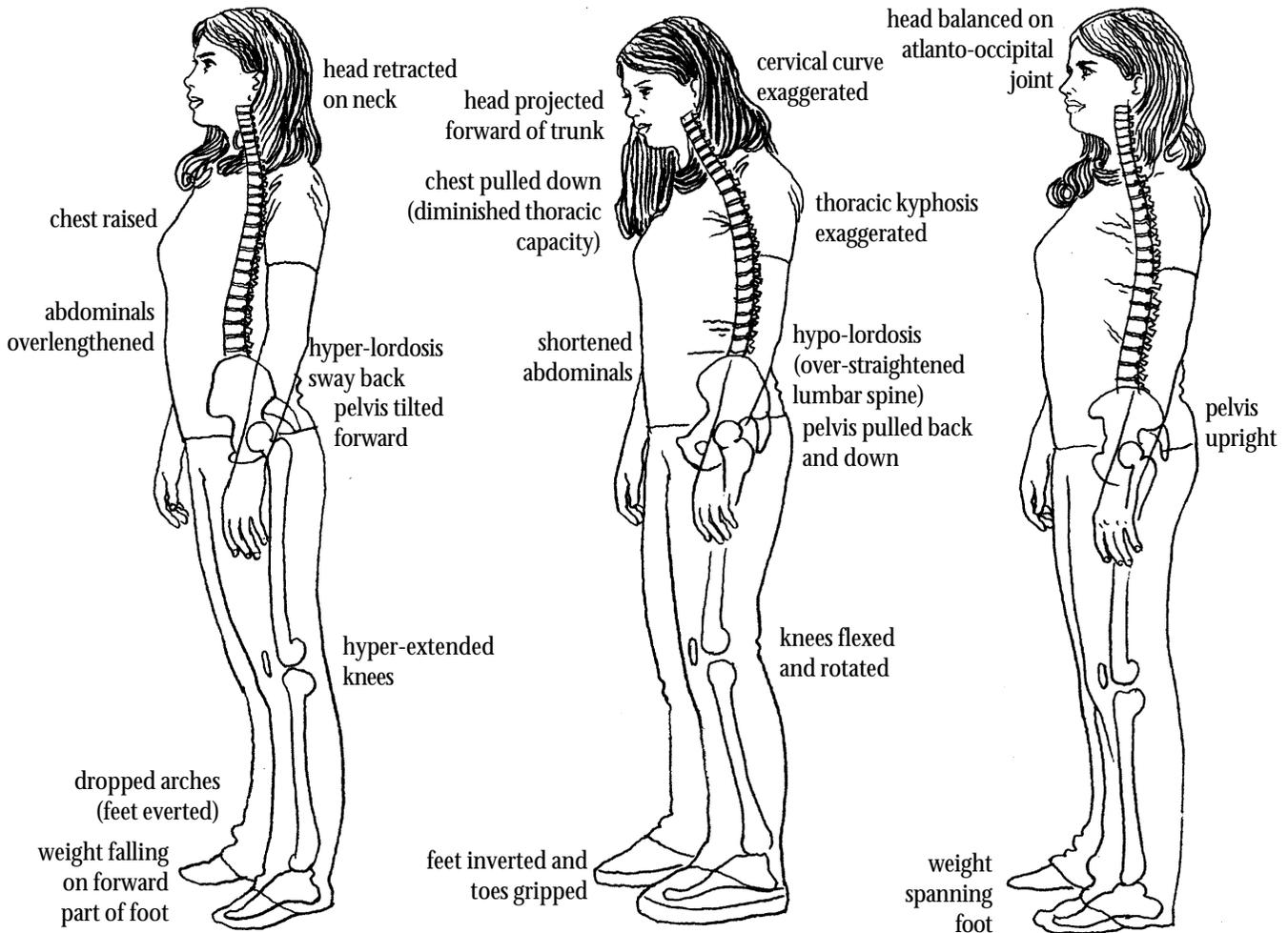


Figure 6. Without orthotics.

Figure 7. Wearing orthotics.

Figure 8. After re-education.

have cancelled out components of lightness and balance, and find ourselves even further from the attainment of true poise. Springing is energy saving; it lends lightness and mobility. When we tighten ourselves down, we lose it. The ecology of the operation has not been brought into the equation.

The Actual Result of Wearing Orthotics

When remedial appliances are worn in shoes, the body weight is no longer distributed on the proper six points of the feet but is thrown onto the fleshy sides of the feet and onto the heels at an angle (see Figures 6-8). Re-creation of the arches is achieved by inverting and supinating the feet, forcing the heels to tilt and twist away from one another, and making the toes hold on tight. The knees are put under even greater strain by being rotated and adducted too far as they are drawn into the conflict of over-contracting musculature.

Learning Takes Time

If body shaping is to be improved, the long axis of the body must remain free to respond economically and ecologically to the requirements of movement and balance. It must not be fixed, but must be capable of safely deploying strength, speed, and agility when called on. Piecemeal intervention without reference to the relationing of the parts and their coordinating functions damages the whole. Once you stand a child on a permanently distorted surface, habits of gripping and pulling down will become entrenched. Further deterioration of her sensory and proprioceptive apparatus will follow.

The solution to common aches, pains, and malfunctions such as the inability to sit upright or stand without hurting, lies in re-education of the person's manner of use. We must take the time that learning takes to address this problem of epidemic proportions.

The Need for Lessons in the Alexander Technique

The study of structure and function in human movement demands more than the skillful assemblage of esoteric nomenclature and the regurgitation of established views and procedures for the purpose of passing exams. The larger part of knowledge derives from familiarity with the material gained through plenty of hands-on work. The more-or-less, somewhere-in-the-middle nature of ourselves does not lend itself to the kind of experiment that is readily set up in a lab. But as our findings are repeated through experience, our resource of knowledge grows significantly and should not be discounted.

The assessment of a person's use is made by a teacher of the Alexander Technique largely with his hands, in the same way as a judgment of musicality in a pianist is made with a musician's ear. Hands and ears are instruments of our sensory apparatus whose potentiality can be developed by training.

Acknowledgements

These comments are made from my 35 years' experience as a teacher of the Alexander Technique. Thanks to the late David Garlick for editorial advice, and to Bradley Newman, who wore orthotics for a week as an aid to our research. Drawings by Jing Sheng Wang (02)9872-7958. Copyright Christine Ackers 1999. ☺



IMPORTANT REMINDER

Due to trouble with spam, all ATI email addresses have been changed. Just add "ati-" in front of the old address. For example, send articles to ati-exchange@ati-net.com! The ATI Office can be reached at ati-usa@ati-net.com, if you have any questions.

I Have a Universe

by Abigail Liddell

I used to live in a world
 Now I have a universe
 Where my arms reach Neptune and Mars
 My legs stretch to reach the bottom of the Red Sea
 My neck lengthens and my head now reaches the cloud that's shaped
 Like Mickey Mouse
 Yeah
 I used to live in a world
 But now, man, I have a universe

Now I'm able to see what I couldn't see in my world
 I'm able to take deep, cleansing breaths
 That open my ribs, my lungs, my back
 My eyes
 Because now I can see
 What I couldn't see in my world
 I have a universe

My head leads my torso into space
 It's up and forward
 Neck is free
 Not relaxed or collapsed
 I'm thinking in activity—the first step toward change
 Real change, yeah, I've changed
 I'm aware
 Incorporating to mentally and physically move
 In my universe
 Harmonizing orbits to prepare me for
 Action, reaction, interaction
 Evolving, yes this is an evolution of a universe
 My universe
 Because I used to live in a world
 Now, now I have a universe

Ms. Liddell is an actor and BFA student in the Theater Department of CUNY/Brooklyn College, where she studied the Alexander Technique with Belinda Mello. ☺



Book Reviews

The Ethics of Touch

by Ben E. Benjamin, Ph.D., and Cherie Sohnen-Moe

Tucson, AZ: Sohnen-Moe Associates, Inc., 2003. ISBN 1-882908-40-6. Paperback, 308pp., \$28

reviewed by Andrea Matthews

The authors of this book have tackled the complexities of professional and personal ethics in great detail, in an effort to supply a comprehensive textbook for somatic practitioners and trainees. They also credit 15 contributing authors from fields including bodywork (with a heavy emphasis on massage), psychotherapy, nursing, law, and corporate human relations consulting, whose writings were adapted for various chapters of the book.

The book's design is both attractive and functional, aiding the reader in digesting the material, with adequate white space and readable type, with a nice balance between unity and variety of elements. The illustrations, though extremely sparse, are to the point. More would perhaps be distracting; instead, supporting quotations in the margins offer moments of rest and reflection for the reader along the way.

The authors' style of writing deftly avoids the density and dryness that might plague the discussion of such a topic, without lapsing into superficiality or cuteness. The organization of the materials is clear and straightforward, and the authors take the time to define and differentiate potentially vague terms such as ethics, values, and principles. They offer numerous "interactive" tools for the reader, such as a checklist of ethical issues, a questionnaire for assessing core values, and a six-step model for resolving ethical dilemmas. Each chapter closes with a bullet list of main points covered, for easy review, along with suggested activities and questions for discussion.

Other plusses of the book include a summary of psychological issues in practitioner-client relations, such as transference and countertransference and power differentials, that are critical to understanding the full ethical responsibilities of the practitioner. Among the many topics covered are: boundaries; effective communication; dual relationships (relationships in which personal and professional interactions overlap); sex, touch, and intimacy; ethical practice management; business ethics; trauma; and supervision. The appendices offer sample materials such as a "client bill of rights," informed consent forms, a protocol for working with trauma survivors, and codes of ethics from several organizations such as the American Massage Therapy Association, the American Chiropractic Association, and the Feldenkrais Guild of North America.

One interesting inclusion, a "Model of Cult Mind Control," serves both as a caution against hijacking a student's autonomy, and a primer for recognizing the destructive effects of cults in clients. As the authors point out, "Mind control techniques [such as hypnosis and thought-stopping] can be beneficial if they are used to empower an individual to have more choice, and authority for his life remains within himself....Mind control becomes destructive when the locus of control is external and it's used to undermine a person's ability to think and act independently....The BITE [for cults' control of an individual's Behavior, Intellect, Thoughts, and Emotions] model helps people determine whether a group is practicing destructive mind control and assists people to understand how cults suppress individual members' uniqueness and creativity."

The potential uses of this book for ATI (and the Alexander Technique in general) are many: as a textbook for trainees and teachers on a subject that is usually not so formally or exhaustively addressed in training, its relevance is undeniable. For our efforts to define and establish ourselves as a profession, this book offers a

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veritable checklist of issues for us to take into account: client privacy, working with clients of various ages or disabilities, involvement in promoting appropriate legislation, scope and standards of practice, finances, and legal issues. Although we stress students' responsibility for themselves and their experience to a greater extent than probably any other somatic modality, we too need to be aware of transference and power issues that naturally arise in teaching, especially teaching that requires such vulnerability and willingness "not to know" on the part of the student. The authors provide an excellent and succinct section on such issues. As noted above, the codes of ethics are also useful for comparison purposes, as we continue to refine our own. I was rather charmed that the AMTA's and Feldenkrais Guild's codes were so simple (yet not simplistic); I hope we can emulate their conciseness. While the book's understandably heavy orientation toward the "practitioner/client," rather than "teacher/student," model of practice needs to be taken into account and further reflection on issues particular to the Alexander Technique is advisable, *The Ethics of Touch* makes a fine jumping-off point.

I could not find a specific reference to the Alexander Technique in the book; Tommy Thompson tells me that Ben Benjamin requested a copy of ATI's code of ethics for inclusion in the appendix, but at the time we hadn't finalized our code and so it is absent. Tommy hopes it will appear in subsequent editions. Personally, I have concerns about being included in a book that would naturally associate us even more strongly with massage in the public's mind (as well as in those practitioners' minds!), and after some reflection, I decided I was happier without our being specifically mentioned. Considering our recent struggles in New York and elsewhere to avoid being lumped together with and licensed as therapeutic massage, it seems preferable not to be.

Nonetheless, I think the book can be of great use to us, not only in clarifying and addressing ethical issues in our own practices, but also in helping us to see just how we differ from almost all other "touch" modalities. It is important that we keep those differences alive in our own minds, as well as in the awareness of the public. ☺

The Actor and the Alexander Technique

by Kelly McEvenue; foreword by Patsy Rodenburg

NY: Palgrave MacMillan, 2002. ISBN 0-312-29515-4. Illustrated paperback, 148pp., \$15.95

reviewed by Andrea Matthews

Acting, like singing and athletics, is a wonderful "laboratory" for exploring the potential of the Alexander Technique to enhance performance. In this compact but thorough "introduction to how and why we are using the Technique in the theatre world today," as Ms. McEvenue characterizes her book, we are treated to insights of a teacher with two-plus decades' experience in assisting actors to embody their craft more joyfully, efficiently, and expressively. The enthusiastic foreword by her renowned colleague Patsy Rodenburg (author, voice and acting coach, and Director of Voice at London's National Theatre and the Guildhall School of Music and Drama) underscores the reader's impression of Ms. McEvenue as a gifted teacher and communicator of the Technique.

Along with "the Australian story" which opens her book, the author offers her personal history with the work, including her training with Frank Ottiwell in San Francisco; a description of the role of an Alexander teacher in a theatrical production (based on her work with the Stratford Festival Theatre in Canada, as well as numerous other companies and schools); a concise discussion of the principles of the Technique; an anatomy lesson (illustrated with David Gorman's drawings); and a sequence of warm-up and exploratory exercises based in the

Technique as applied to general challenges of acting. Relating stories from her own teaching, she touches briefly on the relevance of tablework for actors, and on issues in voice work and even singing in opera and music theater. This excellent book closes with a fascinating look at coping with some of the more specific psychophysical challenges for actors, such physical fitness, character work, playing another gender, kissing (!), nudity, period costume and movement, fainting, falling, playing drunk, injuries, and playing on a raked stage or theater-in-the-round. These discussions, while brief, are thought-provoking for teachers as well as students. It would behoove directors as well to read this book, to bring mindfulness and support for the well-being and effortless fluency of their actors into their approach to direction.

This coming January I'll be leading my first opera workshop with college-age singers, and this book will definitely be on my assigned reading list. As an introduction for Alexander teachers working with actors and for actors (and singer-actors, especially) new to the Technique, I think it would be hard to find a peer for this slim volume. ☺

Own Your Health

by Roanne Weisman, with Brian Berman M.D.

Deerfield Beach, FL: Health Communications, Inc. 2003. ISBN 0-7573-0011-1. Paperback, 471 pp., \$16.95

reviewed by Raewyn Haywood

On embarking into *Own Your Health* I was at first a little daunted by the 450-plus pages in this attractive paperback text which addresses the topic of "Choosing the Best from Alternative and Complementary Medicine (CAM)." Roanne's personal story relating her stroke during open-heart surgery and her journey back to full health soon drew me in and had me spellbound. Her experience of Western medicine combined with several CAM modalities is relayed with a clarity and sensitivity that set the tone for the following inspirational stories of people reclaiming their health, often against all odds and the predictions of the experts.

On the first page she writes "This is the book I wish someone had given me the day I woke up with half my body paralyzed. If you or someone you love has ever had a frightening diagnosis, a devastating injury, a debilitating illness or an unrelenting pain, this book is for you."

The total paralysis of her left arm and impaired use of her left leg was devastating to a mother of two, wife, musician, and writer. It was an eerie echo of the injury my own mother suffered at the age of 36 in an accident that caused permanent paralysis in her left arm. She too was a career woman, mother of three, and a gifted homemaker. As I read through the book I couldn't help thinking how different things could have been for Mum and our family had the support of alternative and complementary medicine been available at that time to soften the brutal aftermath of her injury.

The integration of both allopathic and complementary health systems is the topic of exploration in this book and as such it provides a map of sorts for those needing help to navigate the confusion of modern health care. Roanne and Brian create a rich patchwork of personal stories, scientific studies, presentation of evidence, and resource listings that do indeed "guide, inform and inspire," as promised on the cover.

Book Reviews

The range of alternative modalities explored is extensive. From the more “mainstream” such as acupuncture and chiropractic to the less well known such as Trager, Pilates, and the Alexander Technique, the root philosophies, benefits, and methodology are presented in an easy and informative manner.

Not all the advice in the book will have you knocking on a professional’s door. I learned a lot about ways I can take care of my own health and well being at little expense or inconvenience. Bathing in cold water, for example, has been proven to “lower cholesterol levels and blood pressure, reduce chronic pain, improve skin health, and promote hair growth.” A few seconds of cold water at the end of your shower will also “increase antioxidants” and in one study of breast cancer patients “a significantly increased disease fighting cell count in every category examined” (p. 90) was found in patients who had undergone Hydrotherapy. Other easy-to-implement ways of benefiting health discussed in the book include developing our sense of community, practicing forgiveness, and eating more vegetables. “Fern’s suggestions for mindfulness in everyday life” (p. 136) offer some easy-to-follow ideas to quiet the bustle of our everyday lives.

For a teacher of the Alexander Technique, the book has several gifts to offer. Personally I gained a greater sense of being part of a wide community of support for people wanting to improve their health and well being. I felt the importance of the role the Alexander Technique can play in the healing process. My understanding of the benefits and goals of other modalities deepened, which will allow my referring to be more accurate and informed. I was inspired by the dedication shown by the practitioners featured and by the real difference made in peoples lives when they are acknowledged and addressed as a whole person, not just a broken set of parts.

The role the Alexander Technique played for Roanne in her healing process is described in a delightful and concise way in a description of her work with well-respected Boston teacher and pianist Debi Adams (p. 14). I was impressed by the “Closer Look at the Alexander Technique: Using the Mind to Free the Body” section which appears on p. 92. In this passage, a refreshingly accurate description of the principles of non-doing, primary control, and AT as an educational process is followed by Debi’s personal “Alexander” story. It is always fascinating to hear what brought someone to the Technique. We are invited into Debi’s story, sharing her distress at not being treated as a “whole” during Physical Therapy for a hand injury and her “aha” moments as habitual patterns revealed themselves and were replaced by awareness in her Alexander lessons.

In Roanne’s description of the AT, Debi is awarded the highest accolade: “Watching Debi is itself a lesson in the Alexander Technique. Whether she is rising from a chair, walking across a room, or reaching up to get a book from a shelf, her body seems to move as one fluid whole.” (p. 93)

The book offers further chapters on pain, cancer, women at midlife, children’s issues, aging well, lifestyle, and living with illness. The tone is conversational and personal, and the advice offered grounded in intelligent and thoughtful research. But it is the stories themselves that make this book a compelling and powerful resource: the faces put to disease, the impact on real people’s lives and loved ones. The level of support, relief, and healing that complementary and alternative medicines can provide those in pain is enormous.

The wealth of information presented in this book acts as a cheerleader, guide, and inspiration for all those who choose to “own their health.” I applaud Roanne Weisman for turning her grueling journey back to health into such a gift of empowerment. ☺

*7th International Congress of
the F.M. Alexander Technique*

*16-22 August 2004
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The forms are also available for downloading from the Congress website: www.atcongress.net.

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Alexander Technique International (ATI) is a worldwide organization of teachers, students, and friends of the Alexander Technique created to promote and advance the work begun by F. Matthias Alexander.

ATI embraces the diversity of the international Alexander community and works to promote international dialogue.

About the Alexander Technique

Experience of the Technique has led to praise from George Bernard Shaw, Aldous Huxley, Prof. John Dewey, Sir Charles Sherrington, Julian Bream, John Cleese, Robertson Davies, and many others. It is taught at the Juilliard School of Performing Arts in New York, and the Royal College of Music and the Royal Academy of Dramatic Art in London, the Stratford Shakespeare Festival and the Shaw Festivals in Canada, Boston University, Brandeis University, and many other centers.

Olympic-level athletes have similarly used the Technique to improve their performance, as have leading golfers and business people. Medical studies have shown the Technique to be as effective in lowering blood pressure as the normally prescribed beta-blocking drugs. Other studies have shown significant improvement in respiratory function.

The common factor in all of these aspects of life is that how we are using ourselves—the way we do things—affects the result we get. The Alexander Technique is a means of improving that use. It has been called a “pre-technique” that people can apply to furthering their own special skills and activities. It is also essentially a preventive technique with which we can learn to improve and maintain our health.

The individual is the focus of the Alexander Technique. We are all unique, with different bodies, different experiences, and different problems. We go about the process of change in different ways and at different rates. For these reasons, what happens in an Alexander Technique lesson depends very much on the needs of the student at the time. In the basic sense, though, you will learn an attitude of not trying to gain your ends at any cost, and, at the same time, how to prevent your harmful habits that cause unnecessary stress and restrict your capabilities. Obviously, since what you are changing are patterns built up over many years, a permanent change will not be brought about overnight. However, the person who learns to stop and take time, to think constructively about how he uses himself in everyday life, will find that this simple procedure can have far-reaching results.

Further information about the Alexander Technique can perhaps best be gained from a teacher near you (see list at right for the nearest ATI office for teacher listings, or visit www.ati-net.com), as your changing experiences through lessons are the only real way to understand the nature of the work and what change is possible.

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