

# BALANCE

## What we know...what others don't know...and what we can do about it.

By Alan S. Questel

Balance is fascinating...its up there with gravity...self-image...creativity...self-organization. All are explanatory principles. They describe phenomena but are actually intangible. We can't place our hands on them yet we know they exist. One of Feldenkrais' biggest claims to fame was how he could make the abstract, concrete. By helping someone improve his or her balance we are making the abstract concrete. Our work is based in action. We look to explore something that is intangible (like an explanatory principle) in a physical way. While we include thinking, sensing and feeling, it is in movement where we mostly reside. *Reversibility* and *increasing the level of challenge* are two significant ideas we employ that directly affect balance. Our understanding of how these ideas can be utilized as tools can help us inform others and assist them to improve their balance.

### Is it about balance or about feeling unbalanced?

There are different ways, and different degrees, loss of balance can present itself. At its most extreme we would see something like what Norman Doidge writes about in *The Brain That Changes Itself*<sup>1</sup>, Cheryl, a woman who feels she is perpetually falling all the way to the other end, where someone may simply feel ungrounded.

How do we know we have balance? The answer (almost always) is; 'we don't...until we lose it!

People are not coming for a lesson because of their balance. It's their *difficulties around balance* they are interested in working with. For the vast majority of the people we see, balance isn't even an issue; at least not one they are aware of. Unless they are in a profession or have a hobby where balance is essential, like a circus performer, gymnast, skier, roller blader, it is something that is only really considered when it becomes compromised. When someone experiences a diminished sense of balance they feel unsure, become more fearful, raise their center of gravity, usually by attempting in some way to move further away from the ground (which of course, only makes their balance worse). They don't trust themselves, refrain from certain activities, become more dependent on others, look down more, stumble or fall, hold onto things, feel old, have a loss of control, and other things as well. Loss or diminishment of balance can be experienced in many different ways.

Balance is influenced by and can be understood through a number of things, our intention, the environment and our structure. When we lose or regain our balance it is mostly recognized through how we move. We move as a result of our intentions. When we are unable to fulfill our intentions, it may show up in relation to or as a loss of balance. Negotiating an environment is part of our experience of balance. The environment we are in determines how we act in the world. How someone uses themselves in relation to their own structure and what they are doing can be seen in how they maintain or lose their balance. To understand how and what each individual would need to utilize to improve their balance we need to consider all these points of view. What a person wants to be able to do, what their unique structure allows, the environment they might do it in and how they finally are able to do it are part of the complexity we are faced with.

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<sup>1</sup> Doidge, N., *The Brain that Changes itself*, Penguin Books 2007.

This all relates directly to one's self image, a person's sense of his or her self in the world. In our model of thinking, feeling, sensing and moving we can sometimes see the 'loss of balance' reflected in one's emotional or psychological state. If a change in one of these aspects of the self, potentiates a change in the others, then we access, influence and affect more of the whole person who we are working with, not only their ability to move.

In Hubert L. Dreyfus' article, *The Current Relevance of Merleau-Ponty's Phenomenology of Embodiment*<sup>2</sup>, he says, "*As an account of skillful action, maximum grip [i.e. finding the best way to fulfill our intention through perception and manipulation –AQ] means that we always tend to reduce a sense of disequilibrium. What is experienced as disequilibrium and equilibrium depends, of course, on what skills have been acquired.*" This is a description of skill acquisition yet we can see how well it describes a relationship to feeling balanced. If someone is able to do something well then he or she may feel more in balance with themselves and the world. When learning something new one often feels clumsy, again a description that is somewhere on the continuum between balanced and unbalanced.

### **Approaching balance challenges**

Generally we are faced with two considerations. One, likely more obvious, is how can balance be regained once it is lost or compromised? And two, can something be done about it before it becomes a problem? Both are on the same continuum, it just depends where the exploration begins. It is important to see both considerations in the same field as it can give us greater flexibility in our approaches.

Balance can become disrupted from a variety of causes. Musculo-skeletal injuries, neurological diseases or disruptions, vertigo, surgeries, fear and aging all can be represented in someone's diminishment of balance even though the underlying causes may vary. While a specific diagnosis may be interesting and sometimes useful, it is what the person is actually doing or not doing that determines what we do and how we work. Many years ago, in the very first year of my practice a woman came to see me for lessons with all kinds of strange symptoms. She was a silk-screen artist and worked with a variety of toxic materials. To me her symptoms seemed to represent classic symptoms for Multiple Sclerosis. Should I tell her this? As a Feldenkrais practitioner I do not make diagnoses. I decided not to say anything at the time; however, if nothing changed in the course of our work together I would recommend that she visit her doctor to see if a medical diagnosis might indicate another way to proceed. My focus with her was, as is in most of my lessons, transmission of force skeletally, deconstructing muscular habits, creating new and more efficient connections throughout her. Within 10 lessons all of her symptoms disappeared. I felt I made the right choice in working with what showed up rather than a diagnosis.

The same can be true when we get overly focused on improving someone's balance: it could almost be the equivalent of treating a diagnosis. We can become trapped in a kind of thinking that probably already has not worked for our client. When balance is taken out of the equation our attention is broader. We consider a wider perspective of how we might approach a person with these considerations; it is not that different than how a 'diagnosis' can influence our thinking when someone comes for lessons. The person's need for better balance has to be someplace in the background, but putting it in the foreground often can take us off balance in what we do.

In Amherst (June 16, 1980) Feldenkrais said, "We do never destroy the old pattern and the old habit. We only learn one, which in the long run becomes...begins to feel safer, easier, more comfortable, so that we use this one and relegate the old one, just like the sucking we did, into the memory which when necessary we will need it again...we use it again. But we don't destroy the old pattern at all. We learn a new one which will feel so much safer, so much better, so much an expression of our own desire of what we are, will fit our self so nicely that

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<sup>2</sup>. *The Electronic Journal of Analytic Philosophy*, 4 (Spring 1996)

it will affect our action outside and inside for a better connection with the outside world and ourselves—our action on it and reaction. Otherwise it's futile. It's not worth having, and the entire learning that we do, if we weren't like that..." We need to provide someone with a new habit that feels more dependable than his or her existing one.

## Observing balance

Going up and down stairs can be quite revealing for observing a balance-challenged person's habits. In both directions there is the inclination to look down and round oneself. It makes going up stairs difficult and going down, downright perilous. To do something other than this feels undeniably unnatural. Unless of course we can help someone feel that it is safer to act in a new way.

While going up stairs most people tend to pull themselves up with the forward leg. Think about that...it means the leg in front has to pull the mass of the rest of the self, both forward and upward, quite a demand. But if one simply places the front leg on the next step and then pushes themselves up through the back leg (kind of like ice skating) the whole action feels lighter and easier. Their head becomes free to orient around them and by moving more through their skeleton they use themselves more efficiently muscularly. Most people can find this and can easily appreciate the differences.

Going down stairs is not so easy. Rounding and looking down is almost inviting a fall, but then what does one need to do different that is safer? To go down the stairs more safely one needs to lean back and let the forward leg's hip joint open in front, actually lengthen the whole front of ourselves, to ease our way down. Of course holding onto the banister helps tremendously with this. And then one also needs to learn to differentiate their eyes in relation to their head so as to not bend their neck as much to look down. When someone finally finds it they gain a sense of security they hadn't known before.

## Reversibility

I have had an interest in falling for a long time and in my investigations I could only find one thing that made falling different from moving: falling is irreversible. Most people think of reversibility as moving back and forth through the same trajectory. They get up from a chair and return to the chair in the exact same path. It's true, this is the most literal sense of understanding this, but it is useful to look at reversibility as Feldenkrais refers to it. During an ATM in the Amherst training (June 30, 1980) Feldenkrais said "And if it is properly done, it's reversible. You can stop at any moment and change." Later on in the lesson he says, "There are already a large number of people who roll on the side with that peculiar reversible human way where they could stop anywhere..." And on June 15, 1981 he said, "You see it's absolutely reversible. That means it's a voluntary, consciously controlled movement. You can stop at any place on the way, continue, go back, or change it into something else..." When a movement is reversible it is a demonstration of how well we actually *know what we are doing*. Reversibility is amazingly significant to all of our actions.

Certain movements are sometimes considered to be exceptions to this idea. When one jumps or spins or sometimes in running they will likely find that their movement is irreversible. But because the initial action is usually something that one does out of choice, one doesn't consider the irreversible aspect of it. This is why we don't call jumping, falling, even though I fall through space when I jump down. And while running (or walking for that matter) is sometimes referred to as a 'controlled falling', we generally don't think of it that way. We recognize the act of *falling* in the moment when we realize we cannot reverse it. It is also important to understand that when one really reverses an action they need to *stop* to change the direction. But it is possible to alter our path without needing to stop. We can do this through more circular movements, redirecting ourselves in another direction. This can become the moment where we regain control over our actions. Our stumble or fall becomes a skip or a roll. To do this one has to be able move in the direction they are already moving in

and shift it. This feels counter-intuitive to most people. In martial arts one needs to override some of the spontaneous impulses when falling in order for an action to remain within their control. Feldenkrais' description of a well-organized action, to be able to move in at least the six cardinal directions without any prior reorganization, speaks to this idea. If at any moment I can change directions, without any extra work, it may be a change in the exact opposite direction (really reversing it) or it might be in another direction, which is still related to reversibility.

## **Improving Falling**

Of the nine different workshops I have recorded for the public, a third of them (*Falling...*, *Reversibility...yilibisreveR* and *Balance*) revolve around this issue. In *Falling...* I am not teaching people how to fall, to the contrary, I am showing them how not to fall by learning to increase the range of reversibility in an action. All of us have the ability to do this. If creating more reversibility is our intention in a lesson it gives us an entirely different focus than 'improving someone's balance'. Increasing someone's range of reversibility is something that they can appreciate as well and provide him or her with an understanding and ability that they can pursue on their own.

I had a client at one time who had severe ataxia. No one knew the cause and he even had surgery on his cervical spine but nothing seemed to make any difference. He was able to walk in a fashion, but he would reel around the room clearly looking, and feeling, out of control. I tried different strategies; giving him a more skeletal sense of himself...it didn't help; working with the relationship of his eyes and head in space...nothing changed; smaller and slower movements...to no avail. One day as I watched him stagger into my office I realized he looked drunk in how he moved. I asked him if it felt like this to him as well. He replied that it did, but without any of the pleasure he had previously experienced while under the influence. He also told me that people often thought he was drunk and would move out of his way. Now I have a background in acting and one of the things I learned was for a character to appear drunk, he doesn't just stagger around, that's what most people think and it doesn't work. To really appear drunk one has to show that they are *inhibiting* their stumbling and weaving, that's when someone really appears to look drunk. In my conversations with my client, I asked him if he was also trying to inhibit his movement so as to not appear drunk and, of course, he was. This led us into a whole different realm of movement. At first it felt scary to him, as he was afraid he would fall. But we know that when drunks fall they have fewer injuries since they go with and relax into the fall (mostly...not always).

We began with small movements in side lying, rolling and gradually increasing the range until he felt the moment where he wanted to hold on and inhibit what was happening. Understanding how he might *inhibit his inhibition* was a major theme for quite a while. We worked very slowly and gently. I would evoke more of a sense of connection throughout him in the action of rolling. If he felt his head beginning to drop, I helped him distribute his attention to his head's relationship to his neck...to his chest...to his pelvis, eventually developing his ability to sense this in relation to the table. We explored the movements he had control over and practiced 'reversing' them so the feeling of reversibility became more and more familiar. Over time, in the safety of my office, we looked for this feeling in movements where he felt more 'out of control'; again seeking a sense of connection and relationship with the ground. His movements became more circular; more spiraling until he could more intentionally *allow* his movements to just happen and regain volition over them.

It started to look more like some odd dance as he moved in this fashion. One could tell that something was a bit strange in how he moved, but not so odd that people would cross the street when seeing him. He was just fine with that because now when he moved he felt less fearful, worried and concerned. It gave him a freedom in movement that he had not experienced for a long, long time.

Obviously this strategy doesn't work with everyone. For many it is too difficult to *go with* what they are doing and for some it is even unsafe. Still, working with inhibiting some of

their inhibitions gives them a more neutral starting place to learn to move from. It's not all that different than the pattern of protection someone may engage in around pain. By protecting themselves they frequently stay connected to their pain. Often, to not have pain, they need to disengage from something before they can learn to something new. As I stated earlier, there needs to be a more dependable use of oneself before we can let go of our old ways of doing something.

## **Challenge**

What if the challenge to someone's balance is represented in a different way or more severe, what are the circumstances that might help him or her improve? The answer lies in the first sentence here...in the *challenge*. I wrote a case study (In one of the earlier journals, around 2002) called 'But Do You Think You Can Help Me?' About Freda R., a client of mine, who had suffered a stroke some 7 years before she came to see me, who's right side had been affected. Freda's daughter was getting married and Freda wanted to wear high heels to the wedding. I understood her desire but couldn't imagine how she would ever be able to do this. She needed a brace on her right leg and without it she didn't have a great deal of control over her foot and leg. I certainly didn't want to discourage her dream so I described the kind of heel she should get, low and as wide as possible, and we would begin to practice. She came in the next week with two-inch spikes! Later she got another pair but I figured, what the hell, let's start with these. It was impossible. Before this she was unable to stand her leg on its own and now it was simply ridiculous. I worked, or attempted to work for some time and eventually gave up. But that was when something really interesting happened. When I took the shoe off of her foot, her leg stood on its own for the first time! I was amazed. Although I had previously understood the concept of *increasing levels of challenge*, this time it was so clear that by putting a greater demand on her she was compelled towards a higher level of organization. (And a very happy Freda did wear heels to the wedding for a couple of hours and later switched to flats...her own idea!).

This became a constant theme in our work. Because of how much more clearly I understood this idea, I began to explore it in as many ways as I could. In addition to the footboard I used rollers to stimulate Freda's feet in novel ways, eventually using rollers under her feet in standing. I used rollers of various sizes and densities, sometimes using different size rollers under each foot, placing them at different angles. I wanted to create more and more varied challenges to Freda's organization relative to standing as I could imagine. This eventually led to an outcome I couldn't have predicted. As Freda's sense of safety and ability in the world improved, she decided to learn to drive again, so as to be able to return to her job as a realtor. She was now ready to negotiate the world as she had before her stroke.

Ever since then this idea has always been present in me, especially when there is a clear challenge or inability such as balance. This is clearly evident when we work with a person lying supine on a long, large, firm roller, legs bent and feet standing, arms on the table and slowly bringing their head off to one side of the roller and then off of the other side. Eventually letting their pelvis drop off of the roller to the opposite side from their head; lifting a leg or arm; moving on to having one or two rollers under their feet, in either direction, even rollers under their arms, creating more and more instability, necessitating an even greater need to reorganize around it. It almost always results in a greater sense of balance, a more stable mobility and a more mobile stability.

## **Stability and Mobility**

The ideas of *reversibility* and *increasing the level of challenge* can (and maybe even need to) be understood through a larger context of our work. It is in the relationship between *stability* and *mobility* that we can really find the edge we need to explore to improve balance. Too often when balance is challenged one only seeks stability without considering mobility, but these are actually understood, known and operate in relation to each other.

Freda's initial experience, wearing a shoe with high heels during her lesson, was initially experienced as tremendous instability. She had no control over the movement of her leg when the challenge was brought to such a height (literally). Yet we can clearly see how this increased level of challenge created the circumstances that put a demand on her nervous system to reorganize itself. I really did very little in that initial session. Instability became mobility (something we have more control over) and the means to further exploration and learning.

My client with ataxia learned, through inhibiting his inhibitions, he could come to understand what he was doing and eventually do more and more of what he wanted to do. What was initially the place he felt he had to 'stop' became a place he could now move through. What was formerly perceived as an ending point became the beginning or the middle of something else.

Balance exists on a continuum of skill, abilities and activities and needs to be understood and explored within this light. It is not a thing to be learned once and for all and then be finished with. We need to practice balance along the continuum of movement by becoming more reversible in our actions. Mobility needs to replace instability and stability needs to be appreciated in terms of what is still possible in our ability to move. It is between these things that our balance resides.

This is a rich place for exploration. We can clearly see when someone is too stable or too unstable (too mobile). When thinking in these terms it can become more evident what someone is actually doing. We can see where they become irreversible and we can create circumstances that can help them to understand and shift this relationship. Most important is that we work with an individual's specific abilities and actions in relation to their balance. Whether it's walking, going up and down the stairs or in and out of a chair, it is only through an activity that balance will improve and continue to improve.

Adaptability, utilization, resilience and self-reliance are key to being able to make the necessary adjustments to improve. There needs to be a willingness to feel a little unsafe so that we might find greater safety. Regaining one's balance isn't only about becoming more stable; it needs to include an understanding of one's mobility and a sense of one's well being as well.

***May you always stand firmly on your feet...or on one foot...or on your head...or on all fours...and may you always, always, always fall well!***