Movement lesson

Angela 2 — Week 7, Day 3, Session 3 — 33 minutes

Summary: Russell guides a movement lesson on differentiating the hip joints from the lower back. Sitting long, then lying down, students practice a non-habitual pattern: the knee comes toward the chest as the lumbar spine moves forward. They explore angles of the hip joint, watch a skeleton demonstration, compare sides, and finish by standing and walking.

Sitting long

[Russell:] You just sit comfortably, and feel how you can locate your sit bones, how you can really sit on your sit bones.

The knees are a little bent out to the side. There are two main movements we want to get in touch with. One is where you're not beginning with a bend — with a curling, with a getting shorter. You're staying tall and coming back, and you're feeling how deep in your pelvis and the top of your thighs you need to get active.

You're staying long without getting stiff. Your head is free. And in fact, you could freely turn your head like this. Your jaws at ease.

And even if you go back just a little bit, your eyes are staying towards the horizon. Straight on towards the horizon.

And even if you go back just an inch, the thing is you're not curling your back. You're not rounding here. You're coming back long, but your eyes are not towards the ceiling. Your eyes are on the horizon. So your chin is not lifting. Your eyes are towards the horizon.

Okay, put your hands behind you and let your eyes in. Your neck stays long. Your eyes are on the horizon. Your knees are soft. Your ankles are even. You can breathe comfortably.

And you can feel it slowing down and coming up, and that will gradually get easier.

Notice if you're putting a lot of weight in your hands. The hands are more like guides. You're kind of going over them. It's like you wouldn't — let me just think. You might not crush an egg. You're kind of very close to maybe, but you clearly wouldn't crush an egg.

So your hands are kind of guides. You're going over them, because you're getting the support way down in here, and you're staying long, and you could kind of hang out here. Because we're activating deep inside.

Now, one of the things that's going to be very helpful is if we can differentiate the hip joints and the lower back. Where we actually can arch the back, separate from the hip joint.

But let's go back to a lesson that we've done that I think is very powerful, and we'll apply it to this series. So lie on your back.

On your back

And bend your legs. Stand your legs. Stand your feet.

And just lightly roll your pelvis a bit forward and back. Forward is the lumbar spine going forward. And back is the flattening. And just kind of feel that a number of times.

And pause, and put your hands, one on top of the other, under your lower back, and let your pelvis just drop forward. So your hands are pushing the lumbar spine forward.

One palm is on the floor, the other palm is on the other hand, so the back of one hand is touching your lower back. And you just kind of roll a bit forward, and then move your pelvis a little bit to take the pressure off the hands a bit, so you kind of lengthen the lower back, and then lower the pelvis, and the hands will push the lower back forward a bit.

So do that a number of times. And as you do that, get some kind of picture of your hip joints. Some kind of picture of your sacrum. So your hands are not on your sacrum. They're above your sacrum. They're in your lower back.

And let your hands come out, and interlace your hands around your left knee. Let your left foot come off the floor, and slowly bring the knee towards your chest a little bit, and feel how the lumbar spine flattens to the floor, how there's a lengthening in the lower back.

And the whole concept of this lesson is the non-habitual movement of bringing your lumbar spine forward as you bring the knee towards your chest. It's a small movement. Go slowly, otherwise you'll skip it.

Yes. I mean, as opposed to the lumbar spine flattening to the floor like it wants to do, you find a way for the lumbar spine to come away from the floor.

So you're experiencing, maybe, hopefully, that there's a little bit of differentiation between the hip joint and the movement of your pelvis. The lumbar spine going forward doesn't have to take the leg forward, but there's a little bit of play in there. And we want to grow that play, and your awareness of that play.

Okay, so the knee is going towards your chest as the lumbar spine is coming forward. Now, it might be about an inch of movement. Okay, so it's non-habitual. You're not flattening your back.

That's right. So it will feel weird. If it's not feeling a little weird, you're probably not feeling.

Huh?

[Student:] Or are you still weird?

[Russell:] Right. That's true. That'll allow that, possibly.

Okay. Leave it for a moment. Pause.

Does anybody feel like they don't understand what I'm asking for?

Just take a moment.

The knee and the pelvis

Bend your legs. Interlace your hands around your left knee once again. Left knee.

And bring your lumbar spine forward, letting the knee go away from your chest. And now keep the lumbar spine forward and see if you can bring the knee a little bit towards you without moving your pelvis.

And so move the knee back and forth, but let your pelvis stay in that flexed position — in that extended position. So the lumbar spine stays forward and you're moving the knee.

Good. And then flatten your lower back. Bring the knee towards your chest, let the back stop, let the pelvis do what it wants to do, flatten, and then keep the lumbar spine flattened, but move the knee away from your chest. That's something you'll probably be able to do, so that's easier than the other one.

You keep the lumbar spine in contact with the floor, and the knee is going away.

Okay, have the knee away and the lumbar spine close to the floor, and then as you bring the knee towards the chest, extend in your lower back. As you bring the knee towards your chest, once again, extend in your lower back.

Feel how weird it feels, and find it. Sense what's happening in your hip joint when you're breathing.

Good. Leave it. Lower down. Lengthen your leg. Okay.

Notice how the two sides are a little different.

Inside the hip joint

Left knee, rotate outward, slide the foot up to standing. So the knee opens out, and then open the knee again and slide it down. So you're opening that hip joint. You're sensing the relationship of the leg opening, how the pelvis changes weight. So the knee opens in both directions.

And then stand both legs. Interlace your fingers around your left knee, and let the knee open out to the side as you're holding it. And experiment out here. As you pull the knee towards your chest, you're extending in your back.

You can move like a tenth of an inch each time. Move the knee a tenth of an inch, a little more out, a little more in, so that it's as if you're going to each section of your hip joint and seeing, could I differentiate the pelvis around this part of the hip joint?

So go slow. Make sure you're breathing. And each time you bring the knee towards your chest at a different angle — it might be a very small movement — you're moving the pelvis forward towards the hip joint.

And you're listening to that angle of the head of the femur and the acetabulum, and how you can sense that. There'll be some places where you'll sense the bone.

And you're gradually going to move the knee also to the right of center, and you'll feel that inner aspect of the hip joint, where the bone — when you really start feeling the bone, and there's rather little movement of the leg — but you'll be moving the pelvis at that same diagonal you were working with in sitting with Lindy.

When the knee goes towards the right shoulder, and your pelvis goes down towards the left, then you really need to be inside your hip joint.

Actually, I want to give you a visual on that. Not so simple. So take a pause. I personally find this very revelatory, so I want you to make sure it's not getting too confusing. So come on, see this stuff.

I'm going to be right here, okay? Thanks.

A visual

Okay, so the basic movement we're working with, right — the pelvis is doing this, while the leg is doing this. That clear? Right?

And when we're now on the outside, we're bringing it in here, and we're saying, okay, can we still rotate the pelvis like this? When I do this with my pelvis, my leg wants to go this way. When I do this with my leg, the pelvis wants to go this way. And here we're going, can you differentiate?

Again, this is where you see Moshe as a mechanical engineer, taking non-habitual movements and saying, well, what would happen if you move these in opposite ways? Well, you would have to get greater differentiation in that joint if it's going to move at all.

It's a brilliant concept. It's not a biological concept. It's a more mechanical concept. And it's so important.

Now, I'm inviting you to find that inner aspect here. And you see this lip right here — difficult to move around, and there's often a lot of bony growth under here — and we're saying, could we come this way and move the pelvis on this diagonal? Can you get how that's like the diagonal you were doing in sitting yesterday?

And for those who think of pelvic clock, it's like maybe seven or eight o'clock on a pelvic clock, and we're saying, could we come this way, and this way, even a little bit?

And if we can, then you'll be maximizing the differentiated potential of your hip joint as it is right now.

And then we'll also do some work where we're going away, and this, surprisingly, it's easier. To differentiate the hip joint and the stirrup — maybe that's not surprising, because there's less bony obstruction. But we'll do that as well. We'll do this on both sides, and this will help the other movement.

Yep. Okay. More straightened. Yeah. And you can play with it. You can experiment. Okay?

It is, yeah. And it's a unique way of differentiating. I don't know anything else quite like that.

Yeah, it's great. Okay, go ahead back —

Let's speak a little bit to what we consider the hip flexor, and how that integrates with this. Is that such a strong muscle that will start making this differentiation? Is that an extraneous muscle that just lets go?

Well, your hip flexor will be activated when you're working here, but what will be eliminated are the unnecessary contractions. Because you have to streamline where your hip flexor is overcontracted, or too many fibers are contracted, it won't allow you to move the pelvis forward.

Okay, so you're differentiating. You're going to be using your hip flexor, which will be differentiated.

Okay. Let's see what comes.

[Silence 49 seconds]

The right side

Okay, so let's start with the right one. Bend your legs, and just begin real slow. Don't get aggressive here. Begin slow.

First, just feel how natural it feels when you pull the knee to flatten the back. How that's clear, and you can pull the knee at different angles, a little to the right, a little to the left. First, just do it the way you naturally would do it.

Stay in the feel of that.

Then begin to differentiate the hip joint by rolling the pelvis forward as you roll the knee. It's easier if you have the left leg bent. And take your time.

It's also interesting to feel how you can let the knee go away from your chest and flatten your back. That's actually a little easier differentiation for most people. You can let the knee go away from your chest, and instead of arching your back, you can flatten it.

And get that inner aspect also. Kind of let the knee go in the direction of the left shoulder.

And I'm going to give you a few minutes so you can take a rest and then come back to it. I'm going to let you just kind of explore this on your own, so you can pause if you're feeling a little bit tired, take a 20 or 30 second pause, and go back to it.

[Silence 53 seconds]

Just the next two minutes, see if you can find something different between your right and left hip joint. Something different about how this movement is, where everything's going.

And if you already know something about that, see if you can find something more that's different. You know, Feldenkrais had this idea that even an orthopedic obstacle — that your nervous system can learn from the side that does the movement more freely and easily, even when there's a clear difference in the joint — that it's not that your less integrated side will learn to do it just like the other, but it can learn from the other.

He said that your best teacher was your own brain learning from itself.

[Silence 52 seconds]

Both knees

Yeah.

Slow down. Pause for a moment, unless there's something really juicy that requires your further investigation.

Bend both legs, and with these findings, feel your inner picture of your hip joints, your pelvis, and slightly roll your head a little bit.

And with both feet off the floor, put your left hand in front of your left knee, your right hand in front of the right. There can be space between your legs.

And first, just bring the knees towards your chest, feel the flattening of the back, and bring the knees away from your chest, feel what happens in your back. And then begin to feel — and it might be a very small movement.

Very tiny, but see if, simultaneously, you can extend your back and bring the knees a little bit towards your chest. Then let the knees go away from your chest and find a way to flatten.

A small movement is totally great. We just want it simultaneous, so it's not one after the other.

Breathing. Lowering your legs down.

Standing

Well, to yourself, you come to standing. Feel what that's like.

Now, relax. Support, and where you sense your hip joints, walk a little bit.

What empowers the movements of your life?

Is it hanging down the back? Back — not like that.

Now, were you able to get anything about that right hip joint that you were talking about?

[Student:] Yes. It's more — it's something with the —

[Russell:] Something in your spine there, yeah.

[Student:] Yeah. And when I do it with both, it's easier with both things. A balance between the two sides.

[Russell:] Okay. Well, the next step, we will continue on from here.

The lesson this afternoon won't continue this lesson, but it will be related to it, and then we'll actually come back to a more direct next step in this lesson tomorrow morning. Okay?

Dinner crew, lunch crew — the stove is preheated. The kitchens are still warm. I don't know if they need to go in there, but they might.

The greens need you to steam them a bit. And there's a tahini dressing that looks delicious on the stove. I don't think it needs heating. We'll see if it does.

And probably as you serve the food, you can stick a crisp in the oven, because it's already preheated.