

## **Tova – "be gentle": An ongoing quest to the self**

**Dorit Dinur.**

Tova (56) is a big woman who talks loudly; has abrupt, large movements; difficulties in breathing, in bending over her knees, in putting on her shoes and in walking. When she first came to see me for Feldenkrais lessons it took her one hour to get from her apartment, which is located in the next block to my studio.

Tova came to my ATM classes for about two months. At first, she could not lie on her stomach, or even on her side. It was only possible for her to lie on her back, and then only while breathing heavily and loudly. She had difficulties following my instructions and she complained about not being able to concentrate for more than a few moments. Therefore she only followed small parts of the lesson, and she used big jumpy movements. When there was an ATM on the stomach she angrily left the room, but still she returned to the next lesson.

After a while I found out that Tova has been taking psychiatric drugs for many years, drugs whose side effects are known to affect the ability to sense and be aware of the body. She herself reported, that one of the worst side effects was, that her breathing became heavy, and she didn't have enough air.

*Her inability to follow instructions may have two possible origins. One is her difficulty in concentrating and being quiet. The other is her partial lack of body awareness, especially difficulty in knowing and naming certain body parts and weak spatial/directional acuity.*

After two months of ATMs, Tova realized that group participation was not working for her and she started to take FI lessons with me twice a week. She has continued to do so for almost three years now. "To be gentle is what I dream about," she said after her first FI, "only I don't know how." Tova was impressed with my demeanor-- ,the way I talk, the way I move, the way I listen--and she desired "to be like that: more feminine, gentler."

Tova has lower back pain, constant pain in her left foot and knee and a significant difficulty in breathing. She is also an overeater. She constantly looks

for help from both traditional medical and alternative methods. That is what I have learned from her during our lessons.

At our first FI, and in subsequent sessions, she lay heavy as a stone; I found myself straining to move her. Each part and every direction was difficult for me and impossible for her. Although I did very little, I ended the lessons with pain in my shoulders and felt in despair. However, Tova was happy with the outcome of the FI lessons and she kept coming to the sessions.

*I think that more than the relief of pain, she enjoyed the nonjudgmental atmosphere and my listening to her.*

It took me several lessons to discover that if I let go of my ambition to move her, I may end the lesson without pain and despair. That is how I decided to assist Tova in achieving a more comfortable position while lying on her back. I tried different ways of support, including using pillows, towels, rollers and mattresses.

*Being comfortable was a new sensation for her. Her daily being was painful, stressful, and uncomfortable in ways that we had just begun to explore. The idea of exploring and finding comfort was challenging to her.*

I further on focused on making very small and slow movements together with her. I used alternate ways of touching Tova in order to give her a clear sense of herself.

Today, Tova can easily bend over to put her shoes on. She noticed this change all by herself and proudly told me so. It is much easier for her to get to my studio and she walks around the neighborhood with pleasure.

*When I realized that we were going to have a long-term relationship, I asked myself how to work so that I can listen to her requests, still repeating themes but not to the point of boredom for both of us. I want to stay interested and fresh every time. So I allow myself to be more creative with the lessons, and apply the method to her needs.*

We had a lesson about eating and another one about singing and dancing. I also taught her how to hug gently and not squeeze, since she is hugging me after every lesson.

I have learned that two issues are of great interest to Tova. One is acquiring knowledge of her own skeleton by touching. The second issue centers around the pace of movement.

She was very enthusiastic and curious when I drew her attention to her body by alternating between showing her my "little plastic skeleton" and touching through her bones. With the aid of the "little skeleton" I pointed to her body parts and named them: scapula, pelvis, spine, etc. in accordance with the movement and the lesson. It came as a great revelation to her that she has all those parts and even more, and that there is a complex relationship between movement and the bones of her body. Soon she started to move those skeletal parts consciously, and took great pleasure in it.

*Touching is most important to Tova. She needs touch to feel and sense herself. In many psychiatric illnesses, patients don't feel themselves.*

*According to my understanding the slow and gradual pace (velocity) of movement is one component of gentleness, a quality that Tova admires and seeks to develop in herself.*

In order to teach Tova to slow down and control her speed, I have encouraged her to attend to her breathing while moving.

I started by exploring the breathing with her, using parts of ATM lessons that deal with respiration.

For example, I asked her to breathe through her nose, through her mouth and through both. After this experiment she realized that she could use both. We experimented on holding the breath, coughing, shouting, and expanding the belly or chest. All these experiments, accompanied by explanations of the breathing mechanism, were very interesting to her. In the breathing exercises, I encouraged her to use her hands to feel herself, and I also put my hands on her sternum, ribs, scapulae, etc. to help her feel the movements involved in breathing.

All of these ideas are taken from Alexander Yanai ATM lessons.

After exploring the breathing with her, I encouraged her to pay attention to her breathing while moving.

While she lies on her back with both legs standing, I ask her to move her right knee to the right. Initially, she jumped her knee to the right stopping her breathing. I guided her knee while attending to her breathing, and I described her breathing to her. Then I asked her to do the movement as quickly as possible. I asked her to move slowly to the right and quickly back to the middle. Finally, I asked her to pay attention to her breathing while guiding the movement with her knee.

To symbolize how to pace movement, I showed her ways of opening a door.

*This image emphasizes the gradual movements of things external to her. Also I wanted to show her that opening the door slightly also creates an opening. I mean that there is no need to open wide. This example showed her that she doesn't need to use big movements. I demonstrated these variations and gradations of movement to show Tova possibilities and clarify ways to control her bodily movements.*

She was astonished to discover that she can control the speed of her movements that she can gradually start and stop a movement. It is a new experience for her, which she has since applied to her breathing and to her speaking. Tova has recognized that this quality of gradual change and her ability to slow down are enabling her to become gentler.

The process of learning to control the speed of her movements also applies to Tova's eating habits. Because she is an overeater we are addressing her eating habits in our FI lessons. I asked her to bring food to one lesson. Then I had her set the table. While she ate, I posed questions about her way of eating. I suggested she take bites of different sizes, use her other hand to put the food in her mouth, put the food next to her lips and remove it, and smell the food. I asked her to keep the food in her mouth and refrain from biting and swallowing. I instructed her to move her food to different places in her mouth. As she experimented, she chewed slowly, lightly, and hardly at all. These options were

all new to her and the lesson provided her with a playful and interesting experience. Later she told me that this lesson changed the way she eats.

*Many times, when the change is gradual and slow, people tend to forget how it has been and they don't notice it. Tova has not forgotten.*

Tova's FI lessons have also greatly benefited her emotional state. She told me that our lessons help her to be content and positive about her life, her body and her ability to solve problems. The lessons help her think better. She says that she receives a "brain massage".

We have acquired some habits in our FI lessons. Our typical lesson begins with her telling me what is new in her daily life. She says that my studio is the only place where she is heard patiently and treated with no judgment. Tova says that she can be herself without fear of being ridiculed. Her experience with other caretakers has been different. She has a good sense of time, and she does it for no more than 10 minutes. I am very interested in what she tells me, and spare the time to listen and talk to her. At the beginning, she got excited while telling her weekly stories, and I would remind her to breathe, to pause, and to slow down. Now I don't have to remind her anymore. She talks more calmly and she breathes more freely. Tova can lie on her side and occasionally on her stomach and even laughs about this, reminding me that it was once impossible for her to assume these positions.

At present, we work on separation of the jaw movements from the lip muscles, neck, and head. What was impossible for Tova a year ago is now almost easy.

*Since Tova has been coming in every week for 3 years now, I frequently ask myself what can I show her that is not mere repetition, how to make the FI lessons fresh and interesting to me and to her. I see changes in the way she moves, walks, bends over, climbs the stairs to my studio, speaks, moves her ribs, spine, and pelvis..,*

I am always looking for new issues as they arise. Tova loves to sing and attends a singing club. Recognizing her love of music, I asked her to choose a favorite

song so we could sing it together in a lesson. When we sang, I realized that Tova has no sense of low and high tones; in other words, she can't sing. She doesn't differentiate between high and loud, between low and quiet. We began a lesson based on Feldenkrais AY #5, "Equalizing the nostrils". In this lesson Tova had to produce low and high tunes through her mouth, her nose and each nostril. At the beginning of the lesson she could not clearly differentiate high and low tones. However, at the end of the lesson, a combination of ATM and FI, she realized what singing is for the first time in her life.

One time Tova was deeply depressed. She came to my studio crying and expecting me to help her. I responded by saying I would teach her ways to help herself. We then focused on her ability to feel differences in her body. Because she felt despair, I called her attention to the differences in her two sides, left and right, up and down, front and back. I emphasized bilateral awareness as a tool and gave her home assignments to find differences in her daily feelings, and describe them. This practical way of sensing herself conveys the idea that her emotional state isn't always the same. No medical or mental doctor has ever given her such an insight. After the lesson she was eager to go home and begin monitoring the changes in her emotions.

*My ideas arose according to Tova's needs. My choice here is to share some of my approaches and focus not only on movement but also on Tova's feeling state. I realize that the way I work with Tova is taken directly from Dr. Feldenkrais ideas, while I only make connections to her situation.*

Tova continues to take lessons.

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