

Day 71 Saturday February 27, 2010

ATM Lesson #174 – Diana Razumny

Rolling pelvis and exploring hip joint

CD#15/T01 [68 min] DVD#S08-1 Scene 1 [71 min] Source:

Partners standing as reference movement. One person squats and then switch roles. Try it slowly by dropping your tail bone. Class split in two as half of class squats while rest watch.

On back, pelvic scan: Roll pelvis both ways. Push belly forward and roll pelvis so tail bone goes towards floor. How else can you roll your pelvis by using your belly, back, legs, to change the pressure of the pelvis on the floor? Stand feet, lift lower one foot at a time. Note weight/ease/how. Tilt each knee in/out, compare. Stand feet roll pelvis forward/down. Sit, legs long in front, roll pelvis forward/down. On back, knees bent, hold R knee in front with interlaced hands, roll pelvis forward/down, allow knee to move. Rpt, keep knee stationary so hip joint movement is accentuated/differentiated. Bring knee towards chest when pelvis rolls down, exaggerating the differentiation in the hip joint. Rest, repeat on other side. Sit, lean on hands behind, legs straight out in front, roll pelvis. Repeat with soles of feet together. On back, stand feet, R ankle on L thigh near knee, hands through gap, hold R lower leg w/hands, lift leg, roll pelvis down. Repeat on other side in imagination first. ROB. Sit, legs long, lean on hands behind, roll pelvis forward. Repeat with arms straight out in front. Pause, sit, legs out in front, hold pants or leg and lift straight R leg a little off floor and combine with rolling pelvis forward. Repeat with L leg. On back, feet standing, take each knee in/out separately, compare to beginning. Lift each foot like beginning. Cross R leg over L, tilt legs R. Switch crossing, repeat.

Back to squatting partners to notice if any changes.

Discussion #126 – Diana Razumny

About rolling pelvis ATM lesson

CD#15/T02 [26 min] DVD#S08-1 Scene 2 [27 min]

Steve: The way the lesson progressed intrigued me and I enjoyed it. Ginny: Moving torso/pelvis? so am I doing what I think I am doing. Marian: Experienced the lines changing during imagination. Colleen: Lots of questions of how to move the pelvis. Aware of connection through sternum. Diana: Hope you like the questions and keep adding to them. Csara: Got sense of midline and steering to assist moving. Gail: How lifting the foot pulls me to one side but at the end I wasn't pulled off to side and movement smoother. Noticed how a movement or two can change the tonus of the muscles, how little I have to do. Diana: how to bring in their normal movement without the old habit of working too hard coming back. So noticing what you are doing is the way to not engage same pattern again. This lesson has so little movement going on that you have the chance to notice the small changes and bypass the exercise program. So your job is to bring this new way of moving without all the effort to your students and have them shift their paradigm of exercise. You all enjoy going slow but for your students it is new and very different. So the ATM lessons are the vehicle for having student learn to change their experience of movement and exercise. Colleen: have question about which lessons to teach to the public and also all the metathemes. Diana: big difference in the language used to teach the public compared to teaching in the training. Marian: big differences in sides of body in this lesson. Intro to segment which will focus on breath and voice with Katrin Smithback using the Estell voice work. And Robert Sussuma will join us by Skype. And second week we will have Katrin and myself supervise your ATM practicums.

ATM Lesson #175 – Diana Razumny

Book on foot #1, bending/straightening leg in air, on back

CD#15/T03 [37 min] DVD#S08-1 Scene 3 [38 min] Source: Elizabeth B.

Scan: On back, bend knees, stand feet, sense/listen to floor contact of soles/toes, imagine tracing feet. Size/shape, fluffy/dense, hard/soft, light/dark. Lift/lower slowly, note part that returns to floor. Note ankle angle changing. Lift L foot in air, bend/straighten leg, foot to ceiling, note orientation of sole, imagine book on bottom. Rpt w/book on bottom of foot. Note contact of sole/toes/tracing, bend/straighten knee. Rpt, add R hand behind head, L behind L knee, lift head/straighten knee. Pause, switch hands, rpt. Rpt w/head turned to side. Then interlace hands behind head to lift w/straightening. Note direction of face/chin, back pressing, timing, when/if lengthening is easier. Leave head on floor, do few bend/straighten, note diff. Pause w/feet standing, note contact of L foot with floor, note toes, heel, arch, outer edge. Book on L foot, feel for contact of toes to board. Bring toes towards board, pressing/curling so that ball of foot lifts, then reverse so ball presses, toes lift.

Feet standing, repeat movement of ball/toes lifting/pressing on floor. Pause compare feet. Press/lift ea toe of L foot individually. Compare feet. Book on L foot, take toes away from book then touch book w/toes. Leave toes quiet, bend/straighten ankle while bend/straighten leg. Note if toes stay in contact or lift from book. Intentionally keep toes lifted while bend/straighten ankle/leg. Then repeat keeping toes on book. Leave toes quiet, bend/straighten ankle/leg. Rest w/legs long, compare. Book on L foot, bend/straighten leg, note how. Add lifting/curling toes w/leg bending. Which combo is easy? Do opposite. Which way is easier to straighten leg? Bend/straighten leg at different angles. Think of pushing through heel, like Karate Kick, as leg straightens, different angles. Rest, legs long, compare. Stand feet, compare. Stand, walk, note diff through sides. Imagine OS. Roll R/L little.

Discussion #127 – Robert Sussuma

Introduction to voice work

CD#15/T04 [10 min] DVD#S08-1 Scene 4 [11 min]

Robert talks about how important it is to learn about our voice apparatus, especially for teaching ATMs.

ATM Lesson #176 – Robert Sussuma

Voice scan with clarifying sounds & movement

CD#15/T05 [51 min] DVD#S08-1 Scene 5 [52 min] Source:

Lie on your back. Sense your contact with the floor as well as your overall sense of self. Notice if there is any anxiety about working with your voice? Where do you sense that anxiety throughout your self? Is it present if your breathing? Your face? Your Jaw? Tongue? Belly? thoughts? Or maybe you are excited...where do you sense that? Maybe you're feeling neutral about it. What else do you notice? Bring your awareness to your breathing. How is the air entering your body? Where does the air end and you begin? What is the pathway the air takes from your mouth or nostrils to your lungs?

Close your mouth, gently. (If it wasn't already) How does this change your sense of the airway from you nostrils to your lungs? Focus on the in-breath only. Start with nostrils--trace back and down in your sensory imagination. Nose-->mouth-->throat--> lungs. Which parts of that pathway are most clear, least clear, not present at all? PAUSE. Sense: Nasal Passage (R/L Nostrils, how far back, height, Nasal Turbinates (hair/goo/drag on air), turn downward) Soft Palate Sense back of mouth--complex of muscles below skull, behind tongue. Switch back and forth between breathing through mouth/nose; hung-gee, ng-gee w/ and without sound). Tongue Sense tongue in all dimensions. (slowly and easily move your tongue around in your mouth exploring different textures and shapes; [i, e, a, o, u] notice movement of the tongue from vowel to vowel/bring back of tongue up to meet the upper molars) Diff from Palate (return to hungee and notice tongue)

False Vocal Folds Sense throat: size and space. Airway narrow? Wide? Wheeze, grunt, clear throat: How does that affect airway? Close/Open? Beginning of laugh/cry: How does that affect airway? Close/Open? True Vocal Folds ("uh-oh" with and with out sound. Differentiate from WHEEZE! Back to just scanning. How now? Switch between breathing between mouth and nose tracing the airway from nostrils/mouth to lungs on the in-breath. What stands out with each one. Include exhale. REST. Notice your overall sense of self. Quality of breath.

Discussion #128 – Robert Sussuma

About ATM Lesson

CD#15/T06 [25 min] DVD#S08-1 Scene 6 [26 min]

Feedback about ATM. Ginny: Question about apnea. Steve: took lots of energy to stay focused throughout the lesson. Christy: Enjoyed verbal cues of making sounds. Robert: this lesson helps self image of this area. Gail: enjoyed lesson and felt very playful and also emotional when making some of the sounds. Monica: I keep burping, which is not a problem. Curious about the relationship to these movements. Robert: Larynx is tube in front and esophagus is tube in back where food goes down. So opening to food way is right behind larynx. Diana shows picture of upper body. Monica: difficult because how to balance tracking of breath and also exploring other parts. Robert: different positions will have different breathing pattern, so orientation is important. Robert: start with most people in seated position.

Movement Exercise #1 – Robert Sussuma

Speaking and noticing larynx movements, sitting

CD#15/T07 [24 min] DVD#S08-1 Scene 7 [24 min]

Bring one hand gently and softly to the front of your neck starting with a "Bell Hand" movement. Feel skin, muscle, cartilage/bone. Explore the Larynx. (Larynx is the whole thing--not just the 'adam's apple', where does Larynx meet root of tongue?!? Place finger gently along the lx. Just breathe/Swallow. Yawn. Count from 1-10--with hand on front of neck. Do you notice your larynx moving up or down as you speak? Notice volume. Vary volume: very soft, loud. Does your larynx move differently with each? On purpose speak with low, mid, high. volume can vary. (notice tongue!) WHAT'S EASIEST. WHERE IS NEUTRAL?

ATM Lesson #177 - Robert Sussuma

Jumping larynx #1, finding neutral

CD#15/T08 [41 min] DVD#S08-1 Scene 8 [41 min]

LOB. Turn you head L/R a few times. Return to Voice Scan. How now, after larynx exploration? Focus on that place where you tongue meets your larynx. You can place your hand there if it helps. Open and close your mouth several times. Notice ease, weight, direction. Make soft fists while you close your mouth, release when opening mouth. Leave open with your tongue just resting easily in your mouth. Where is it resting? Begin to move your whole tongue forward so that the bottom/root of your tongue begins to move over the top of your bottom lip. Many times easily and gently only as far as is comfortable sensing your whole tongue as you do it. As you do so, do you notice any work in the root of your tongue? How can you minimize the work there as your bring the tongue forward? How would you do that? Rest. (The Tongue is a complex of many muscles...) Try reaching with the tip of your tongue so that the tip narrows and 'points' (Hydrostat). Notice the back of your tongue when you do that. Now try leaving the tip soft and rounded while bringing the whole tongue forward. Notice the back of the tongue here. Try to keep the root as quiet as possible here so that the whole tongue is moving as a unit remaining soft and full. REST. Return to the movement. Explore both ways sticking the tip far out by tensing in the back of the tongue vs. bring the whole tongue forward in a fuller, gentler way. Notice what happens with your lx/tongue juncture with both. One fixed? One moves? Pause. For this lesson we are going to focus on the tongue moving as a unit. Return to the movement of bringing the whole tongue forward and out. See if you can clarify, soften the movement of the whole tongue forward and allow your larynx to move upward (toward the crown of your head) while your do. How do you do that? Is it possible? Rest. Swallow a few times and notice what your lx and tongue do. Notice the organization, timing. Stick your tongue out an make a gagging/choking noise a few times notice your lx. Come back to the movement and begin to increase the range and speed of the movement. As the whole tongue comes farther forward the larynx moves farther upward. This is the movement of gagging or choking. Like the whole structure is jumping out of your throat. Keep the tongue full and soft as the movement gets faster and faster. REST. Slowly, Add the downward mvt. Passing through neutral/middle. Where is the middle point? This is like a yawn. GRADUALLY SPEED IT UP to find a sliding movement of the larynx and tongue up and down. Structures around remain still. Jaw remains softly open. You can still breathe! Rest. Return to the mvt. of turning/rolling the head R and L. Add the Tongue/Lx mvt. Do you synchronize? Do you loose the ease in turning your head? Eyes? Quick with Tongue/lx. Slow and smooth with head. Pause. Tilt Knees with and opposite. Just middle. How now? Return to the Jumping Larynx and Tongue movement with the head in the middle. How now? Sit. Stand. Movements in Standing. Speak. Notice movement of LX/Tongue. Walk around.

Day 72 Sunday February 28, 2010

Discussion #129 – Robert Sussuma

Exploring anatomy of throat

CD#15/T09 [17 min] DVD#S08-2 Scene 1 [25 min]

Anatomy Handout/Partner Palpations: Finding Hyoid Bone, Thyroid Cartilage, Cricoid Cartilage first your own then a partner's

ATM Lesson #178 – Robert Sussuma

Jumping larynx #2

CD#15/T10 [43 min] DVD#S08-2 Scene 2 [43 min]

Sit (symmetrically on floor or at edge of chair). Scan your contact with the chair/floor. Shape of Breathing. Respiratory System from nostrils to lungs. Turn Head L/R. Very slowly, come back to the Jumping Larynx movement after thinking and remembering. How today? Put a hand on your chest and belly. Notice your breathing as you do. Pause. This time, as you bring your T/L Down Breathe IN and just release for the exhale. Notice any extra work in your face/breathing. Which is leading your T/L? or your Breath? Try it both ways. Neither leading? Synchronize. Leave your LX down and breathe IN/OUT. Play with both. Pause. Now focus on the UP movement (gag) and breathe OUT as you do. Notice: Face, shoulders, head and neck. Breathing. UP vs. DOWN. Just release work in the LX/Belly for the inhale. More like actual "gagging." Keep it easy and slow. Where are you initiating the movement from? Belly or L/T? Try different ways. Any Wheezing/False Folds? Leave your T/L UP and breathe IN/OUT several times. Pause. Put the two together. Inhale/T/L Down. Exhale/T/L UP: Let breath rhythm be natural and dictate speed. Rest. Walk around. Lower T/L and breathe out many times. Release for inhale. (Let breath dictate rhythm) Pause. Raise T/L and breathe IN many times. Wheezing? Can it be silent? Release for exhale. Pause. Put the two together. Exhale/T/L Down. Inhale/T/L UP. Be slow. Gentle. Pause. Turn head L/R REST. Walk. Gently hold your breath by closing TVFs (silent 'uh-oh') And begin the Jumping Lx movement. Begin to speed it up. Breathe when you need to then come back to it. See if you can make it light and bouncy. You can bring a hand to LX to make sure it's hopping. When it's comfortable turn head L/R as you do. Pause. Now Return to the quick light Jumping Larynx movement but this time with your breath slow and easy--unrelated to the jumping movement. How can you organize this? You can start by holding your breath and when you need to breath keep the jumping movement going and continue breathing... Pause. Turn your head L/R With the Jumping LX Mvt. Easy breathing. Rest. Scan: breath, mouth, respiratory system. Walk around.

Discussion #130 – Robert Sussuma

About ATM lesson & questions

CD#15/T11 [25 min] DVD#S08-2 Scene 3 [25 min]

Marie: About asthma and grinding teeth. Robert: About hyoid muscles and balancing their use. Steve: a lot of freedom of movement and a lot more comfort. Yesterday was challenging and today it is becoming more easy. Dani: have the experience of having my tongue connected to my solar plexus. Csara: feeling it deep down like Dani and experimented with doing it "wrong" which would cause my body to overheat which caused nausea or dizziness. How would you take care of new people to this work? Robert: mostly work individually so take care of that person. Interesting to bring this work into other lessons and still inventing. Devon: Who do you work with? Robert: with voice users, professional or others. Devon: This helped me open these areas, which other voice coaches have not been successful with me. Robert: What you need is freedom and mobility in the larynx because that is where power comes from for singing. How to access movement of larynx without swallowing or yawning. Diana: about connection of hyoid with occiput. Dianne: had voice instruction where I was told to hold the throat still because tone came from vocal chords only. Robert: That is old school of keeping everything still. Monica: play violin and these lessons bring up a lot of emotion. Notice my fingers turning purple during these lessons. So interested about connections between hand and mouth and tongue. Robert: hand and tongue come from the same bud in development. So using bell hand great for tongue.

Movement Exercise #2 – Robert Sussuma

Thyroid exploration, sitting

CD#15/T12 [32 min] DVD#S08-2 Scene 4 [41 min]

Speech: True Vocal Folds. Glottals: i,e,a,o,u. Aspirate: hi, he, ha, ho, hu. Glottal onsets speaking #s with a Speech Quality. Aspirate onsets speaking #s with a Breathy Quality. Reverse: Glottal-->Breathy. Aspirate-->Speech. Get in Pairs and give

some ATM directions. Give direction in Speech quality, then in a breathy quality, then back to a Speech Quality again. Switch. Discuss.

FI Exploration #65 – Diana Razumny

Exploring throat in FI

CD#15/T13 [33 min] DVD#S08-2 Scene 5 [70 min]

Demo with Marie. Palpating clavicle with Marie sitting and Diana behind her on table. On back, lifting head helping define ridge at back of skull. Movement of tongue with head. Don't do too much so as to not create dizziness. Move sternum in relation to clavicles. moving clavicles towards head which invites neck to lengthen. Worked with eyes in combination with jaw. Other combinations of movement with head/jaw/eyes. In pairs practice find the clavicles and find a way to hook on the lower side of them to lift them very carefully, keeping the movement small and quiet. Second, slip under skull bone and hug it and have student stick out tongue and notice all the connections including the eyes.

Discussion #131 – Diana Razumny

About FI Exploration & questions

CD#15/T14 [17 min] DVD#S08-2 Scene 6 [18 min]

Steve: overheating. Csara: the work we have been doing with mouth, eyes, clavicles can be very intimate and emotional. In Feldenkrais we don't do anything about emotions coming up but just to be aware of it and watch for cues about whether a student is uncomfortable. The more different kinds of things, modalities, that you have done, the more you can handle with students. We can all keep growing where things get catch in us so continuing your own personal work makes it easier to work with a greater variety of students. Good to have referral system if you can't work with a certain issue and need to send a student to a different modality.

ATM Lesson #179 – Diana Razumny

Book on foot #2, twisting arm/leg in air, on side

CD#15/T15 [59 min] DVD#S08-2 Scene 7 [59 min] Source: Elizabeth B

On back, stand feet, both legs in the air, book on one of them, straighten/bend. Rpt, roll away from leg that has book. Switch to other foot. R side, head on R arm, L arm straight out to L. Twist arm around itself, note palm starts facing forward. Chg direction. Clock on ceiling ref. Rpt, twist only clockwise, rtrn to starting point. Cont, add head movement. Pause. Twist counter, rtrn to start point, include head. Both directions, expand, note shoulder blade towards spine/floor behind. Rtrn to twisting clockwise, take head opp. Rtrn to head going with. Pause, Twist counter, head opp. Rtrn to going with. Arm out to side, twist clockwise/neutral. Pause, counter/neutral. Full range of twist allow head to follow, shoulder blade towards floor in back, nose to floor in front. Full range using whole self. Rpt OS. On back, book on L foot, take book to/away, gradually start to roll R. On R side, stand L hand, think of arm mvt/homologous leg mvt. L leg out to side, twist leg, feel rolling for/back. Note ribs if shoulder doesn't go forward. On R side, L arm/leg out to side, twist both clockwise, roll towards front, twist other way, roll towards back. Rpt but twist arm/leg in opp directions to each other. Just twist arm, w/o pelvis moving, note ribs. Switch to only leg twisting, shldr quiet, ribs twist. Rolling forward/back. ROB, compare sides. On R side, book on L foot, bend/straighten knee, roll towards back, sense foot on book, foot in space. Roll for/back. Rpt, roll towards front, return to side, pause, roll to back, return to side. On side, roll comfortable range. On back, feet up, book on L, take book to/away from you, start to roll R, onto side, rtrn to back. Rpt on L side – R arm out to side, imagine twisting/rolling. Pause, leg up, imagine twist/roll. Book on foot, twist/roll.

Day 73 Monday March 1, 2010

Discussion #132 – Katrin Smithback

Introduction

CD#15/T16 [5 min] DVD#S08-3 Scene 1 [5 min]

ATM Lesson #180 – Katrin Smithback

Equalizing nostrils #1, variations

CD#15/T17 [47 min] DVD#S08-3 Scene 2 [48 min] Source: AY#5 and Amherst

Lying scan of space or volume in your head.

Note: When hum (do tone thru nose) do "siren"- "ng" sound, back of tongue against soft palate.

SIT: Put your tongue out- how far can it go? W/ your tongue out, mouth slightly open, say "AH". Do "ng" (back of tongue touching soft palate) & continue tongue out AH (now a hum). Low AH. Do with mouth open. Do thru nose (use "ng" to make hum). Hum thru R nostril, then L – compare. Hum with "weak" side- see if can equalize. Do with mouth open and compare. Do all above using high tone. Low tone: Do thru mouth, then nose. Hum, alternate L then R nostril with finger. Close one nostril & hum. w/ head lowered forward-note changes in quality of sound. w/ head tilted back. w/ head turned to one side, other Do other nostril. Do w/ high hum. Close one nostril and do low, then high hum. Do other nostril.

LIE ON BACK: Lift head w/ one hand & do. Roll head L/R w/ hand & do.

SIT: Close one nostril. Start with high tone hum, slowly slide down to low tone. Do other nostril. Where do you feel it? Sinuses, mouth, teeth, chest. When do lips vibrate? Open mouth, go from high to low.

Discussion #133 – Katrin Smithback

About ATM lesson

CD#15/T18 [18 min] DVD#S08-3 Scene 3 [18 min]

Dianne: information about sinuses would be helpful. Also, air switches from nostril to nostril every 20 minutes. Katrin: Yes, we will find pictures of sinuses this segment and as air switches between nostrils the brain dominance switches. In this ATM you noticed that one nostril is easier to breathe through. Monica: Fun to track changes in sounds. Christy: about breaks or gaps in siren. Gail: good experience finding my left brain. More clarity. Nice to have other voices supported the sounds. Katrin: Doing these sounds wakes up the sense of our head, where it is in space. The ability to move your head and neck.

ATM Teaching #35– Katrin Smithback

Scans #1

CD#15/T19 [62 min] DVD#S08-3 Scene 4 [16 min, group disc not video] & Scene 5 [64 min]

Groups of 4 and come up with a list of things having to do with scans. What makes a scan a scan? Why do we do them? Group discussion defining a list: relationship to lesson, sense differences, return to reference. At beginning of lesson, internal/external references. An opportunity and tools to sense yourself. Inviting people into place of non-judgement. It is interesting to check in and sense, which is essential in all lessons. Highlight physical, emotional, theme. Whatever they feel is okay. Scan is systematic. Lunch. Groups of 4 teaching 7-minute scan to each other, 1 to 3 students and then rotate roles. Can experiment, use general scan, use scan from a specific lesson, etc. Group discussion: 7 minutes can seem very short or very long. Systematic doesn't necessarily mean predictable. Choice of language interesting. How different all 4 scans were due to different personalities and thought processes. Other group like a relay team passing the baton. So can use voice to emphasize different things for different types of lessons. Some lessons are like a scan in themselves so they don't need an initial scan. Using images, how much and what type. How much direction do you need to give, how much time in between instructions.

FI Exploration #66 – Katrin Smithback

Head #1, lifting to find neutral

CD#15/T20 [61 min] DVD#S08-3 Scene 6 [61 min]

Demo with Barb. On back sitting at head. Lift head. Build trust with new person. Feel weight. Where to position hands on back of head. Skeleton demo to show movement of head on atlas, up to 35 degrees extension and up to 25 degrees in flexion. Then movement of atlas on axis. The axis can only cause rotation of head with atlas. Together allow the freedom of

the head. The more we can do what we are actually want to do, the less problems. Once something is part of your image, it becomes available to you. Go back to practice and think about the skeleton as you lift the head to find neutral. Demo with Harald.

ATM Lesson #181 - Katrin Smithback

Jaw

CD#15/T21 [42 min] DVD#S08-3 Scene 7 [42 min] Source:

LOB: Close jaw, clench teeth. Which teeth are in contact? Are you holding breath. Can you clench and not hold breath? Find base of tongue. Is it soft, hard? Find TMJ, near ears. Open jaw, what happens.

SIT: Feel base of tongue. Is it different than when lying? Open jaw, can you do it without tensing tongue? Find TMJ. Open jaw, what happens there? Feeling TMJ, Move jaw forward and return. Put thumb on upper teeth. Slide lower teeth forward on nail.

LOB: Put thumb on upper teeth, mover lower jaw R and L. Roll head to R as slide teeth to R-then L.. Do the other way.

SIT: Hold lower jaw. Move lower jaw forward. Tilt head back as jaw moves forward. Look R & turn head R as jaw goes forward. Do L.

LOB: Hold lower jaw. Move lower jaw forward. Tilt head back as jaw moves forward. Look R & turn head R as jaw goes forward. Do L.

Day 74 Tuesday March 2, 2010

ATM Lesson #182 – Katrin Smithback

Equalizing the nostrils #2, on back

CD#15/T22 [44 min] DVD#S08-4 Scene 1 [45 min] Source:

Review Equalizing Nostrils #1. With Partner, sitting: Close mouth– keep lips and teeth touching– only tongue moves. Recite something (a verse, poem, etc.) Do a number of times– make clearer. Do as if speaking to someone far away– louder & louder What do you do in your tongue & palate– tongue flattens, palate lifts. Keep lips closed, let teeth & tongue move. Recite verse. Keep teeth closed. Lips & tongue move. Recite. Lips have to move to have clear diction. Feel teeth vibrate. “Miren” verse– do “ng”, keeping back of tongue against soft palate. Recite with mouth open
Without Partner: Do low tone from mouth, then hum tone, each nostril, alternate nostrils. Do with high tone. Hum low/ high tone. Do with mouth open. Compare to beginning.

Discussion #134 – Katrin Smithback

About ATM lessons & ATM strategies

CD#15/T23 [37 min] DVD#S08-4 Scene 2 [37 min]

Devon: jaw clicking during jaw lesson is problem. Demo on skeleton about location of jaw joint next to ear opening. Listen to differ movement on each side as open jaw. Part of this is to reframe how we look at this, like the clicking in the jaw. So reframe as not a problem but be curious and interested in exploring and see what happens. If you stop trying to find the problem and back off and start asking and exploring about what is happening, it all changes. Dianne: I seem to be overusing muscles when moving jaw. In jaw lesson moved jaw down and also moved head away from jaw. The beauty of the method is that you don't have to know the right way but can explore and clarify possibilities and your nervous system will pick a better way. Csara: teaching this to seniors who can't be on the floor so how do you adapt the lesson to sitting. Marie: surprised that jaw did not open easily and directly down. Gail: bit my lips twice. Katrin: showed movement of atlas and axis on skull. Relates also to sense of balance as move head through vestibular system. These changes in lessons can cause nausea or dizziness. Dani: looking for link between jaw movement and my NIA teaching. What can I say to them to help that link? Katrin: Eye reflexes usually override your neck reflexes. So fix your eyes and turn your head and it is not smooth. Then lead the movement with your eyes and usually much smoother. Diana: try variations of their eyes moving with the movement and differentiated so they can feel the contrast.

FI Exploration #67 – Katrin Smithback

ATM strategies into FI

CD#15/T24 [36 min] DVD#S08-4 Scene 3 [59 min]

Katrin: proximal/distal reversal with jaw and how that strategy is used in ATM and FI. Other strategies in ATM: differentiation/undifferentiation, changing positions for same movement (different orientations), small movements, imagination, constraints, auxiliary movements, bell hand calming of the nervous system. Groups of 4 to take ATM strategies into FI exploration with the following 4 strategies: differentiated/undifferentiated, auxiliary movements, proximal/distal and constraints. Then in groups see if you can find a proximal/distal reversal in activities in daily living. Most daily activities are distal.

FI Exploration #68 – Katrin Smithback

Head #2, pushing through from feet

CD#15/T25 [44 min] DVD#S08-4 Scene 4 [73 min] & Scene 5 [8 min]

Demo with Aaron. Reference lifting the head. Sensing weight of head, which direction the head lifts easier. Rotation movement a little lower. From the feet push through towards the head. Align foot towards standing. Check for hyperextension of knee, if so then add support under knee, Demo with Csara. Looking for good place where I can push through all the way to the head. Different hand holds to push through foot. Different angles of leg to push through. Then go back to head to lift and see if any differences, checking both the atlas and axis movements. How to push through foot. Demo with skeleton. What part of the heel to push through. Have to find the place to push that looks like it is almost not the heel but it still is. Several different ways of holding the foot to push through. Spiral inward to have leg go into hip socket.

ATM Lesson #183 – Katrin Smithback

Abdominal control #1

CD#15/T26 [46 min] DVD#S08-4 Scene 5 [55 min] Source: Potent Self, P. 189-214

Lie on back. Put hands on abdomen: (1) thumbs on point lying about an inch below the navel, and (2) fingers on the two points above the pubis on either side of the abdomen where one can dig in the fingers on both sides of the strong abdominal muscles in the axis of the body. Push belly out so 1st point raises fingers as high as possible- do til can do w/out stiffening chest, shldrs, etc. Try coughing, clearing throat, laughing- will automatically push belly forward on exhale. Push belly forward sharply so mvmt expels air from lungs. Push belly out slowly so fingers near pubic bone raise same amount as thumbs near navel. Push lower abdomen out so lower fingers raise, but not thumbs. Let your spine touch the floor from the pelvis to the shoulders without a break as push lower belly forward - the abdomen feels as if the balloon is rolling gently toward your face every time the spine touches the floor. - you will find that you have no difficulty at all in pushing the lower two points forward without making any change in the state of tension in the region below the navel. Expel air every time you push belly forward. Make a deep grunt (a vowel-less "hrmmm") as expel air. Push the lower points forward w/ out the mvmt of the pelvis. Continue these movements for a few days until you can differentiate between them and produce any one of them unerringly on the first try.

Day 75 Wednesday March 3, 2010

ATM Lesson #184 – Katrin Smithback

Tongue with soft palate exploration

CD#15/T27 [53 min] DVD#S08-5 Scene 1 [54 min] Source: Esalen #41

Lie on back. Push out your tongue. Push out to touch below your lower lip. Push your tongue out to touch your chin. If you strain, you will tighten the jaw and muscles and will shorten your tongue. Move the tongue out to lick the lower lip from R to L corner. Move tongue lower to lick across the chin. Lick the outside of your upper lip. Move your tongue R & L, moving upward toward your nose. (Try finger if difficult) Touch once the outside of the lower lip, then the upper. Do quickly- make sure you touch the lips. Do without moving the jaw. Hold jaw from below chin & do small mvmt of tongue, flipping it up & down. Lick the upper lip with the tongue again. Sit, in a comfortable position. Lick your upper lip & nose. Touch your chin without moving your lower jaw. Put your tongue in front of your upper teeth & move it R/L. Can you feel the shape of your teeth, are there places the tongue goes faster, skips? Do on lower teeth. Explore the palate: from front to back, from side to side. Find soft palate w/ tongue: Use tongue to explore palate: close to teeth, feel hardness/ridge. As move away from teeth, feel texture change. Feel w/ tongue down center of palate and back- as get to back of mouth (soft palate) how does texture change? Say sing. Make ng last longer than vowel. Back of tongue will be touching soft palate. Say ing-ing- ing... Don't move mouth & hardly move tongue. Say consonant K w/ med./hard pressure- breath will be held, then released. Focus on moment that breath is released- palate stays up against the back wall of your vocal tract and the tongue drops away. Say ing - ing - ing... again, focus on soft palate. Make P sound w/ lips. Hold the build-up to the P without releasing lips. Keep lips closed & breathe out thru nose - soft palate has to lower to open nasal port. Alternately do P build-up, then breathe thru nose. Feel soft palate lifting & lowering. Hum on ng (sirening)- mouth open or closed- Do ng hum & pinch nostrils closed- sound will stop. Repeat & immediately after pinching nostrils, sing gEE (hard g)- pressure in nose releases & sound comes out mouth. (Tongue drops away from palate & palate stays back against wall of pharynx) To check if nasal port is closed- pinch nose while singing EE- any change in quality of sound indicates nasal port partly open. Play w/ going from ng w/ nostrils pinched to preparing for g- (at ng palate is down against tongue. As prepare for g, tongue & soft palate move tog. to touch back wall of pharynx.) Say string of ng-gEE-ng-gEE-ng-gEE.... Jaw doesn't move at all & base of tongue (floor of mouth under chin) stays soft.

ATM Teaching #36– Katrin Smithback

Scans #2, with vocal qualities

CD#15/T28 [25 min] DVD#S08-5 Scene 2 [44 min]

Groups of 4, each person is A, B, C or D. Groups are given cards with 2 vocal sounds to make. Then groups mix to have an A, B, C and D. Then A will do scan from card with 2 vocal qualities and then B, etc. The 2 minute scan topics were as follows: 1) Smile the entire time (bright voice), pause in the middle of sentences - use a lot of um, ah, uh.... 2) Talk with your voice lower than normal, run 2 or 3 sentences together, 3) Talk in a monotone, talk fast (say sentences quickly, but pause between sentences), 4) Start each sentence the same way: "And feel how...", Let the end of each sentence peter out. Then group discussion about experience.

FI Exploration #69 – Katrin Smithback

Head #3, moving head in sitting

CD#15/T29 [37 min] DVD#S08-5 Scene 3 [52 min] & Scene 4 [62 min]

Groups of 3. Look at student doing movement of looking up and then looking down in sitting. Practitioner and observer notice: Where does the student know where to move. What happens with head, neck, pelvis, etc.? Practitioner then moves head to slide on atlas, very small movement. Careful not to press their face too much. Student sits at front end of table so they can move more easily. Practitioner stands in front of sitting student and holds head on each side and does very small movement back and forth so students looks up or down. Then invite more of student to participate. So practitioner searches for way to gently direct student into flexion and extension through the whole torso. Observer checks on practitioner and student about how they are moving. Groups practice. Discussion after lunch. About experience. About Nicolai Bernstein's book, "Dexterity and its Development." Groups practice again with new threesome.

ATM Lesson #185 – Katrin Smithback

Buttocks

CD#15/T30 [min] DVD#S08-5 Scene 4 [min] Source:

Sit, legs forward, knees soft, hands on knees, contract buttocks, note whole body elevates a little, heels shorten. Quickly. Rest on back. On back, legs long, spread, contract buttocks. Which contracts more? Contract only right buttock. Note contact point of buttock when contracted, note lumbar and chest. Contract only left buttock. Note knees, foot, turning in/out? R buttock only then L only, note knee/foot on contracting side. Both buttock again, sense legs open sideways Contract both quickly, note belly w/increased speed, now pelvis tilts. On belly, hands on buttocks, contract both, note if equal. Heels together/apart? Knees? Which leg responds faster? Contract the side that does better, switch to other. Do both and hold. Rest on back. Stand on knees, feet close, toes extended, hands on buttocks, contract and hold both. Release, contract and hold. Feel what happens to tilt of pelvis, lumbar, belly, navel, pubic bone. Contract both quickly. Contract and hold. , not breath. On knees, right foot standing, hand on butt, contract both. Note right buttock doesn't contract. Note pelvis and right knee moving forward. Change legs, repeat, note differences on this side. Stand on both knees, knees together, hands on buttocks, contract both quickly. Compare knees, heels. Rest on back. On knees, spread, big toes together, hands on buttocks, contract both, hold, release. Note pelvis, lumbar, pubic bone, navel, belly. Which knee takes more weight? Does weight shift during contraction? Contract both quickly. Stand, weight on R leg/foot, L leg limp, just toes touching for balance, contract R buttock several times. Note knee turns out, arch of foot lifts, weight to heel and outer border of foot, no weight on big toe. Lift arch intentionally if doesn't happen spontaneously. Contract R buttock quickly. Rest, repeat everything on other side. Stand on both feet, toes pointing out, legs spread, contract both buttocks, feel weight shift to outer edge of feet. Knees turn outward. Note pelvis, belly, pubic bone. Intentionally lift arches so weight shifts to outer edge of feet. Intentionally lift belly so pubic bone moves forward as you contract buttocks and lift arches. Knees straighten. Rest on back. Sit, feet together, hands on feet, contract both buttocks, note body lifting. Both hands on floor behind, spread legs, bend knees out to sides, contract both buttocks. Contract only R buttock several times. Quickly. Contract and hold. Switch to L buttock. Sit, hands on floor behind, knees bent to sides, lift both legs into air, balance on butt. Shift weight onto R butt, step forward with L. Repeat with R butt and continue to walk forward then back. Balance on butt again, walk forward in large steps, reverse Rest on back. Sit, R hand on floor behind, shift to R side, lift L leg into air, move left hip forward/bac while in air. Quickly. Think of lengthening through heel. Repeat on other side. Sit, knees bent open, hands on floor behind, walk forward/back in large steps. Quickly. Hands at shoulder height in front with elbows bend, arms form circle, lift both legs, butt walk. Repeat walking with arms and legs up in front, make it beautiful and simple, everything soft except the pelvic muscles and butt. Sit, contract butt to hop back/forward. Stand on knees, wide, big toes together, contract both butts, note pelvis, belly, lumbar. Quickly. Stand on feet, legs spread, contract both butts, lift arches of feet, belly lifts, pubic bone goes forward. Walk.

Day 76 Sunday March 7, 2010

ATM Lesson #186 – Katrin Smithback

Rolling by shortening and lengthening with changes of attention

CD#16/T01 [54 min] DVD#S08-6 Scene 1 [54 min] Source: Amherst based

On right side, arms and legs bent in front. Lengthen left arm, left leg to roll to back. From back, arms and legs extended, shorten right side by bringing right elbow and knee together to roll to right side and then bring left knee and elbow together so you return to original position. Variations: body parts, flexion/extension, leading with the eyes, leading with the pelvis, initiation and sequencing, breathing, vocalizing, ring muscles, etc.

Discussion #135 – Katrin Smithback

ATM practicums & about ATM lesson

CD#16/T02 [27 min] DVD#S08-6 Scene 2 [28 min]

Diana and Katrin gave instructions for ATM practicums for Monday-Wednesday in the mornings at beginning of class. ATM lesson have different structures and strategies. Devon: About moving before instruction is finished. Katrin: So this can occur in many ATMs where you feel you are not following directions, etc. Christy: how class reacted to Katrin asking students not to move before instructions. Dani: happens in NIA and learning to listen first. Csara: Liked Katrin asking students to wait for full instruction. Katrin: sometimes you can have a strong reaction during an ATM and useful to look at it, as students will have all kinds of experiences and emotions. Dani: use of eyes and breath are two places where I was taken out of movement because of what it brought up. Monica: Movement felt comfortable and then it felt so different. Csara: Question about teaching style when closing and opening and how Katrin instructed group. Katrin: It is endless how you want to organize people's perception and attention. Marian: When using sound lost awareness of movement. Is this common.

FI Exploration #70 – Katrin Smithback

Head #4, on back, coordinating head movement with spine & pelvis

CD#16/T03 [36 min] DVD#S08-6 Scene 3 [71 min]

Demo with Robin. Have person be an active participant. First lift head and see if I can find movement in atlas. Give person time to respond to your suggestion. If the spine allows it you can move head quite high, or not. Have Robin roll pelvis and notice movement through spine, neck and head. Make clear distinction between contact and moving the person. The contact is the hello and then the question is the movement. Then check neck movement again. Observations to get information without necessarily making sense of any of the movements. Then Robin roll pelvis as Katrin holds head and follows along. Students practice. Group discussion. Katrin read Moshe quotes from Amherst training.

FI Exploration #71 – Katrin Smithback

Head #5, head to pelvis, sit to stand

CD#16/T04 [41 min] DVD#S08-6 Scene 4 [69 min]

Groups of 3. Demo with Colleen. Front edge of chair/table as a better position for movement. Put feet in position to stand. Looking for: spacing of legs. Stand in front, hold hands around head that connects with pelvis to bring her to standing. Stand in way that there is space to back up as you bring person to standing. Provide direction, not force, for as they get weight over feet they will stand by unfolding. Timing is important to get weight over legs. Important transition into daily life. Very important for the elderly, who can't muscle themselves up to standing. Practice. Demo with Christy. Find neutral to not do work as you move person to standing and more available to sense what is going on with person. Take your time and this can be part of many lessons.

ATM Lesson #187 – Diana Razumny

Book on foot #3, lift/lower edges of foot

CD#16/T05 [56 min] DVD#S08-6 Scene 5 [56 min] Source: Elizabeth B

On back-Explore book on each foot, discover easy foot, roll side/side w/in/out rotation. Lie on opp. side of easy leg, leg out to side, bend/straighten. Expand to roll little to belly/back, rpt w/book on foot. Sit, stand "easy" foot/leg, tilt knee in/out, note rolling pressure on foot. Hold knee in mid, cont rolling foot by lift/lower in/outside edges of foot. On front, bend "easy" knee, sole to ceiling, lift/lower inside/outside edges of foot. Look at foot. Pause, same sole to ceiling, tilt lower leg side/side, add lifting edge that keeps sole parallel with ceiling. Pause, lift/lower bent leg, imagine book and pressing inside/outside

edges of book alternately. Sit, stand foot, slide foot away, lift inner edge, slide towards, lift outer edge. Pause, switch combo. Rtrn to 1st combo, think press instead of lift. On back, book on easy foot, lift/lower edges, combine w/bending/straightening leg. Note if 1 combo easier than other, explore both. With book, think pressing alt edges into book. Rpt while lying on side. Cont, add rolling R/L. Return to side, top foot to ceiling, book on foot, bend/straighten, roll forward/back.

Day 77 Monday March 8, 2010

ATM Practicums #1

2 groups teach lesson

[not recorded]

Discussion #136 – Diana Razumny

About ATM practicum #1

CD#16/T06 [70 min] DVD#S08-7 Scene 1 [71 min]

Group of 8 meet with Diana to evaluate experience of teaching and receiving lessons. Other group not recorded.

FI Exploration #72 – Katrin Smithback

Head #6, lying to standing

CD#16/T07 [28 min] DVD#S08-7 Scene 2 [36 min]

Demo with Diana. Katrin brings Diana up to standing from lying by holding her head and backing up, without pulling and without Diana doing anything. Demos with students. Dyads practice.

Discussion #137 – Staff

About ATM practicum & teaching to the public

CD#16/T08 [50 min] DVD#S08-7 Scene 3 [50 min]

About teaching ATM to the public and joining the guild. About marketing ATM classes: flyers, free newspaper ads, mailing lists, promotional articles, free talks. Initially all the free things you do gives you experience and exposure. About series of classes, topics.

ATM Lesson #188 – Katrin Smithback

Abdominal control #2

CD#16/T09 [62 min] DVD-not recorded Source: Potent Self, P. 189-214

Stand, feet wide apart, knees above feet. Have your knees slightly bent, hip joint back. Fill the lower abdomen, pushing it forward & down so lumbar curve is fully formed – chest is free of contraction.–Bring the head up until your nose projects vertically above the lower abdomen. To bring head to right alignment : bend head back on its articulation on the atlas until the back of the cranium is stopped by the muscles of the neck. Open your mouth, and let your tongue out to touch the chin–the lower jaw is fully let down and forward and the throat is freed from tension, with the breathing left to itself. With the tongue out, free your neck from tension and let the head tilt forward –nose will vertically positioned above abdomen. Put your hands under your abdomen & lift the whole mass by rotating it until you can shift your eyes downward and see your third finger. Do the mvmt so that the rolling upward of the abdomen expels air. Do so that rolling it downward to the original position expels air. Alternately roll abdomen upward, then downward, each time expelling air–don't need to do anything to inhale– will happen automatically, almost w/out awareness. Do rolling up/down of abdomen without hands. Rest of body is motionless, no contractions of chest, shldrs, etc. Hold abdomen in extreme upward position for 30 seconds, letting breathing continue. Put hands on abdomen and push the abdomen down with your hands as you fill and roll it upward. If tense arms, shldrs, etc. tie a wide piece of cloth (like a cummerbund) tightly around waist and roll abdomen upward against opposition of the cloth. Stand in front of chair, as if to sit. Adjust yourself as before: spine will be vertical from atlas to sacrum. Fill and round the lower abdomen, lift it w/ your hands as before and sit down slowly– lower body by bending knees, taking hip joints/pelvis back into chair. Don't hold breath or tense. Stand. W/ an imaginary axe in your hands, swing the axe overhead with both hands– just at the moment when the axe changes direction and begins to move on its downward path, your abdomen is in the right state of contraction – arms are not consciously contracted – do mvmt so chest is held so that the swing forward expels air freely from the lungs. Do the movement without an axe a number of times, and then stop at the instant described, with both hands above the head. Observe the state of contraction of the lower abdomen. The position of the pelvis and the state of the lower abdomen are as near as possible to what we have in mind. Stand at the side of a chair. Put the L hand on the back of the chair and your R foot on the chair. Draw your abdomen in flat and try to stand up on the chair. You will find your breath halting and will feel a clear sense of strain in the leg. Do again, this time putting your lower abdomen in the same state as when the axe changes direction and begins to come down or as in the final state of the sitting attitude. You can now stand up on the chair without any change in

breathing and without any sensation of effort. Try to get up on the chair in all the ways you can imagine. Establish the fullness of the lower abdomen so that the whole body can bend forward without the slightest relative change of the head and the whole trunk all along the spine –the bending is performed in the hip joints, knees & ankles only. If you move the pelvis through space so as to continuously compress the spine against the head, you can get up on the chair without any sensation of effort, and without any change in breathing. Try to perform the movement so that at any instant you can reverse the movement of the body without delay or effort or break in the breathing rhythm. This will happen when you have learned to act so that the work is being done by the muscles capable of moving the body; that is, by the muscles having one end attached to the pelvis, so that the muscles of the limbs perform only the directing and guiding functions. The fullness of the lower abdomen, which is felt when all parasitic contraction is eliminated, is the best reference by which one can reinstate the correct posture without having to keep in mind the innumerable, detailed, relative alignments of all the body segments.

Day 78 Tuesday March 9, 2010

ATM Practicums #2

2 groups teach lesson

[not recorded]

Discussion #138 – Katrin Smithback

About ATM practicum #2

CD#16/T10 [90 min] DVD#S08-8 Scene 1 [90 min]

Group of 8 meet with Katrin to evaluate experience of teaching and receiving lessons. Other group not recorded.

FI Exploration #73 – Katrin Smithback

Head #7, bending in hip joints in service of sit to stand

CD#16/T11 [82 min] DVD#S08-8 Scene 2 [83 min]

Standing and move with only movement in your ankles. This brings up the of/in question. "In" is the joint. Then next movement of me only in the knees. Then in hip joints. Then in spine. Then combine movements. i.e. bend in hip joints while extending in back. Then back up against wall, with rules that you can't fall and heels have to touch wall while you reach out in front of you 3 feet to floor. Then step 1 foot forward and now you can bend forward because your butt can move backwards to counterbalance. Then bend over without bending spine where pelvis moves back and a little up. All aimed at bending in hip joints clearly. Then find sit bones and bring them back and up as you bend forward. Then again with head moving forward as butt moves back with no movement in spine. Next, everyone standing around the table facing the table, with knees touching the table and bend at hip joints and knees. Do again and imagine there is a chair behind you on sit on as you lower yourself. Main movement is in hip joints. Then duos with one sitting on table and one standing. Movements of rolling pelvis forward with variations. Then dyads with one in front of other holding head while other sit to stand. To start while holding head you are feeling their pelvis.

ATM Lesson #189 – Diana Razumny

Book on foot #4, side bending

CD#16/T12 [49 min] DVD#S08-8 Scene 3 [49 min] Source: Elizabeth B

On back, lift easy leg, foot to ceiling, bend/straighten knee. Pause, lift leg again, hold behind knee/thigh w/same-side hand, other hand behind head, lift head while straightening leg, head/sole go towards ceiling. Pause. Leave head/sole towards ceiling, internally rotate straightened leg, heel out, hip/knee in, roll towards side away from lifted leg. Lie on side opp easy leg, lift lower foot, keep knees tog. Pause, add top knee sliding off bottom knee, to floor. Keep foot lifted, slide top knee to floor above bottom knee, thinking sole to ceiling. Leave knee on floor, sole to ceiling, slide knee away/towards. Top arm over top of head, hold ear/temple, lift/lower head, add lift/lower foot. Stay propped up on bottom elbow, lift/lower foot. Leave foot lifted, slide to floor above bottom knee then away, thinking sole to ceiling, rvrs mvt of leg. Propped on bottom elbow, lift top leg into air, hold behind leg w/hand, bend/straighten leg. Pause, rpt, rotate leg in/out. Cont internal rotation, bend/bring knee towards floor above other knee, use "top" hand on floor for support/balance, direct sole towards ceiling. On back, easy foot up to ceiling, bend/straighten, lengthen through heel, internally rotate, roll to side away from leg, return to back, bending knee, taking knee to floor on same side as leg. Cont so roll from back to side to back again.

Day 79 Wednesday March 10, 2010

ATM Practicums #3

2 groups teach lesson

[not recorded]

Discussion #139 – Diana Razumny

About ATM practicum

CD#16/T13 [45 min] DVD#S08-9 Scene 1 [41 min] & Scene 2 [4 min]

ATM Teaching #37 – Katrin Smithback

Sound mirrors

CD#16/T14 [15 min] DVD#S08-9 Scene 3 [29 min]

In duos. One person makes a sound and other person makes the same sound. So you listen to sound and look at their face. You go slow so person can follow you. Then switch and back and forth. Change vowels, tones, rhythms. Next get in foursome with different students. Go around circle: one person starts and rest chime in so all four make sound. Then groups of 8 and same game. Then full group.

ATM Lesson #190 – Katrin Smithback

Breathing and sound

CD#16/T15 [26 min] DVD#S08-9 Scene 3 [32 min] Source:

Lie on back. What's the rhythm of your breath? Inhale, pause, exhale, pause- what's longer, etc. Sense air coming into nostrils- where do you feel it going after it comes into nostrils? Think that you are pulling the air into your nostrils- how do you do that? Put hands on lower abdomen, just above pubic bone- does it move? When- on inhale, exhale? Put hands near navel. Mvmt there? What about behind hands in back? Put hands on upper abdomen, below ribs. Mvmt? Forward, backward, to sides? (No air into belly, Mvmt of Diaphragm, etc.) Put hands on lower floating ribs- in back. Not attached to sternum. Where is mvmt- more on one side? Sternum- moving forward, backward, bottom tilting up/down? Upper ribs, clavicles. Under armpits. Move hands to different areas on chest/ribs- what moves, doesn't? (Bucket handle mvmt of ribs) Imagine ribs expanding in all directions as inhale- forward, back, to sides, like a cylinder in all directions. Imagine diaphragm, moving down w/ inhale, up w/ exhale. Imagine inhale: ribs expanding in all directions, diaphragm dropping down, air being pulled into nose. Hold nose and do- then let go of nose & feel air being pulled into nose/lungs. Open mouth & feel air pulled into mouth. Put hands on lower abdomen just above pubic bone. Do mvmt pushing lower ab forward while thumbs move back (rolling balloon up). Do w/ exhale. W/ hands on lower abdomen: (notice where belly is expanding w/ each sound): Cough, Laugh, Clear throat, Hiss like a snake, Bark like a dog, Moo like a cow, Bray like a donkey, Whinny like a horse, Croak like a frog, Howl like a monkey, Buzz like a bee, Crow like a rooster. Make sounds like any animal you choose. Sit. Put hands on lower abdomen. Say AHHH and feel how belly moves. Say AHHHH and and move belly in and out a number of times on one exhale (independent of breath) Put hands on sides of ribs. Inhale, expand ribs to sides (bucket handle mvmt), then bring ribs in w/ exhale. Do more to R side, L side. Do w/ AHHH. Say a phrase (Lie on your backs and rest) and project it to the other side of the room. Feel what you do in your ribs (often people bring in ribs very intensely- ramming a lot of air pressure thru folds- very fatiguing). Do AHHH and move ribs in/out a number of times on one exhale. Inhale, feel ribs expand- then say AHHH letting ribs move out a little more- no effort, very soft. Say same phrase, projecting voice, but feeling ribs expand as talk. Say AHHH- what do you do at the onset? 3 choices: Glottal (popping noise). H-AHHH- air is moving before sound. AHHH- breath and sound begin at same time. Do with EEE, EHH, OHH, OOOO. Begin w/ breath & voice at same time on AHH- then turn into word: On your side- do w/ other vowels: EEE easy soft mvmts. Expand ribs as start sentences w/ the vowel sounds. Sit on Chair: Do small mvmt of pushing lower ab forward, (rolling belly up)- feel anal sphincter engage a little (which allows larynx to be free), spine lengthen- do with AHHH, EEE, EHH, OHHH,OOO. Feel ribs expand- whole self expand a little as say vowel. Do w/ sentence. Do w/ phrase, for ex: As you lie on your back, sense your spine on the floor. Feel where it is pressing and where it is not. Sing to the tune of Happy Birthday. Miren phrase. Then say again.

Discussion #140 – Katrin Smithback

Moshe Video – Medicine Man #1 On Breathing & Animation of breathing apparatus

CD#16/T16 [63 min] DVD#S08-9 Scene 4 [63 min]

Breathing happens if you don't interfere with it. Your nervous system takes care of it. You honor what you are sensing without interfering with your breath. Your breathing responds to the conditions. Animation about breathing apparatus.

ATM Lesson #190 cont. – Katrin Smithback

Breathing and sound continued

CD#16/T17 [53 min] DVD#S08-9 Scene 5 [51 min] Source:

See above.

Day 80 Thursday March 11, 2010

ATM Lesson #191 – Diana Razumny

Book on foot #5, rolling both ways

CD#16/T18 [47 min] DVD#S08-10 Scene 1 [48 min] Source: Elizabeth B

On back, both feet in the air, bend straighten alternately. Roll little side/side. Cont, keep straightening R foot to ceiling, rolling L and touch bent R knee to floor over on L and reverse. Tap knee to floor and return. Cont with L hand behind head, R hand behind R thigh near knee, rolling L. Cont onto belly, return. Repeat w/o holding leg. Both legs in air, bend/straighten alternately. Cont to roll R, touching bent R knee to floor on R, reverse. Stay w/bent knee on floor, bring L leg across in front/above R leg so can touch L toes to floor over on R. Pause, hold R foot w/R hand from under and around outside of R ankle, wrap hand around outer edge of foot (elbow/knee near ea other). Stay w/knee on floor, reach L leg across, toes touch floor on R, bring L hand to bottom of R foot, remove R hand, slide R knee on floor up/down, take it all the way to lying on belly, reverse. Partners: One person holds board on other persons R foot. Rtrn to back, both legs in air, roll L, go all the way to belly, reverse, roll R all the way to belly. Try w/o partner's help. Switch roles. Partners: 2 boards, 1 on ea foot, partners help. Only roll a little to the L and return. Then R and return. Switch roles.

Discussion #141 – Diana Razumny

Between segments homework

CD#16/T19 [18 min] DVD#S08-10 Scene 2 [18 min]

Using Facebook page to learn between segments. Homework assignment of creating a lesson on belly in relation to book on the foot series.

FI Exploration #74 – Katrin Smithback

Head #8, review of segment

CD#16/T20 [15 min] DVD#S08-10 Scene 3 [57 min] & Scene 4 [35 min]

Review of connecting head and pelvis with spine from segment practices. Demo with Dani.

Discussion #142 – Katrin Smithback

Questions & Closure

CD#16/T21 [43 min] DVD#S08-10 Scene 4 [43 min]

Complete evaluations for segment. Do you have to be a skier to teach skiers, etc? You can teach any group because you have a way of helping them find knowledge in themselves. What are the resources for studying ATMs. Santa Fe 3 Segment 1, Feldenkrais Resources, the Guild.

ATM Lesson #192 – Katrin Smithback

All fours to squat

CD#16/T22 [45 min] DVD#S08-10 Scene 5 [45 min] Source:

First explore the month project of lifting parts away from floor and taking detours of locomotion. Lifting: head; lift tail; (loco) lift head and tail; lift head, arms and bent legs; elbow propped, draw up one/two knees; draw opp knee up to side; slide other knee in front/above opp knee to pelvis over knees; On elbows/knees, flex/extend toes. Lift one knee/other On hands/knees, flex/extend toes, note resonance. Toes flexed: Lift one knee/other; Take one knee for/back, side, circle; Repeat OS; Alternate lifting knees then quickly; Lift one knee then other before replacing first; Return to flex/extend toes/ankles, note resonance. Hands/knees: Flex/extend toes/ankles, note head/spine; Lift/lower spine/belly, head hangs/lift; Flex toes with cat back, extend with belly hanging; Switch combo of toes/spine. Hand/knees: Toes flexed, lift/straighten one knee at a time, alternate; Repeat, leaving knee lifted add other lifted; Lift/straighten both knees/legs; Hands/knees: Shorten side, hip/shoulder together; Add looking around shoulder; Inhibit either hip/shoulder; Repeat full movement. Hands/knees; Slide foot on floor to straighten leg then arc to side; Bring sole of foot to floor and paint; Bring foot to stand by hand;