

Energy Work

Re-conceptualizing an Inclusive Spectrum of Interventions within an Informational Model of SI

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Preamble: Two Interventions Looking for a Home

Personal history: In 1979, a friend who practiced homeopathy did an experiment to see if he might affect elevated blood pressure using his newly acquired acupuncture doll – a two-foot-high model of the body with labeled acupuncture points. He placed a needle in a point near the right elbow of the doll. A few minutes later, I noticed my hand was rubbing the equivalent point on my elbow; there was a vague quality of irritation there. I went home and, that night, had sudden fever and chills, with accompanying nausea and vomiting. The next day I was fine – I never checked to see if my blood pressure changed, but it felt like a useful, as well as surprising, treatment. I reported the experience to my friend and he didn't appear very surprised. His form of homeopathy involves placing plain sugar pills in a metal container that's part of a device into which are placed cards, each card printed with the geometric patterns associated with the various homeopathic remedies. The pills, thus 'potentized', are ingested by the patient to receive the treatment.

What can we say about this form of treatment? How would the world label such interventions: Energy medicine? Placebo? Intersubjective relational dynamic? Hypnotic suggestion?

Here's another intervention, one widely reported in books and articles.

In 1996, V.S. Ramachandran used a mirror box to create the illusion that an arm amputee could watch his missing limb move. After several 'treatments' in which the amputee watched his intact limb provide an illusion of his missing limb moving in precise and controlled ways, the subject's phantom-limb pain disappeared (Doig 2007, 177-190). Was Ramachandran's creative and effective approach to phantom-limb pain an example of energy medicine? Placebo? Intersubjective relational dynamic? Hypnotic suggestion? Are these useful questions? How do we choose names for interventional strategies? What consequences derive from these choices?

Domain Identity

This article suggests that what has been described as energy work has a place at the 'table' of Roling® Structural Integration (SI), an important place. When people call it energy work, it's possible that it's been helpful to place that type of work in a special category, in part to hold a space for human activity not ready for 'prime time'. Isolation can be a strategy to preserve those crafts that assimilation might dilute or weaken, or that skepticism might eliminate.

An historical note: Ida Rolf declined invitations to make her work part of the osteopathic or chiropractic curricula, she is reported to have said, to preserve her work from assimilation into the domain of osteopathy (Rolf 1978, 12-13; Frank 1987). At some point, integration (rather than assimilation) starts to appear possible.

When integration between two domains – energy work and bodywork – is formally considered, there may emerge a need to re-examine the premises behind the larger domain (SI) in which both subdomains (bodywork and energy work) live. This article suggests a conceptual basis to move that process along.

Unhelpful Dualities

The terms 'energy work' and 'bodywork' (or SI), when used comparatively, produce a duality at cross purposes to both interventions. Energy work, as a term, represents earnest efforts to give credence to dimensions of human relationship that are not evoked through mechanical means. Bodywork, as a term, represents a parallel assertion that human touch in soft tissue is intrinsically useful to shifting behavior. The difficulty for this duality, as with many conceptual dualities, is that, upon examination, it is revealed to be unnecessary. The field of SI benefits as it acknowledges therapeutic/educational phenomena that fall outside of Newtonian physics and biomechanical models of human health. (Forward-thinking physicians – people like Dan Siegel – have taken this step.) Examining how the 'non-mechanical'

operates is critical to moving the SI field forward in a world where models of physical and mental processes are rapidly changing. Unhelpful duality holds us back.

What is needed to resolve what might turn out to be an artificial duality? The evidence urges us to consider that it's time for a holistic *meta* model – a model that naturally and satisfyingly embraces bodywork and energy work as two parts of one thing.

There already exist words and concepts that unify the domain of bodywork, and the domain of energy work – so called. There is a path that lets us step out of a mechanical view of bodywork – a vestige of the classical approaches to biologic modeling. We replace it with what can be called an information-based or *systems* view of our various interventions. Rolf was not far away from this point of view. What are systems models?

The Arrival of Systems Models

The twentieth century produced new models to describe complex, nonlinear phenomena – systems models that advanced science in to new areas of study. Two of these systems approaches are likely to have influenced Rolf: they are *general semantics* (Korzybski 1933) and *general system theory* (von Bertalanffy 1976). It is this latter systems-thinking approach that is most relevant to our present discussion of energy work and its appropriate relationship to bodywork/SI. General semantics and its vibrant derivative, epistemics (Bois 1996), are, however, germane to the topic as well. However, general semantics has already received recent attention (Frank 2015, Agneensens 2015, Murray 2010).

General system theory provided a fresh way to view living systems in a manner that appreciated the complexity of what was being modeled. This approach is in contrast with the more deterministic models of what Bertalanffy calls 'classical science'. Scientific models evolve. As the limits of one model reveal themselves sufficiently, new models must be proposed. The modern study of living systems turned out to not fit within the science of olden times.

A familiar example of revolution in scientific models starts with the historical notion that the sun revolves around the Earth. At some point, Copernicus, and then Kepler, noticed the math didn't work. The old model produced flawed predictions. Revised examination of the data led to a model in which the Earth revolves around the sun.

Rolf had a model of human posture based on plasticity of fascia, in which readjusted fascia changed body shape. This model was intuitively obvious. It's like looking at the sky and seeing that the sun comes up, crosses the sky, and then goes down on the opposite side and returns again the next day. It's natural to conclude that the sun is the thing going around. When one checks the bigger field of observation, the easy answer turns out to include inconveniently false results. The 'math' doesn't work.

Rolf's view that posture is restored through activation of ground substance in fascia *feels* true to one's hands, especially if one hears the oft-repeated explanation. But the putative obvious can fail under scrutiny. New data emerge about motor control and brain plasticity for example, which engenders new, more satisfying models. Like the idea that the sun goes around the Earth, we learn that fascia as mechanical governor of posture is an attractive idea that limits the consideration of smarter ideas – and other dimensions of work.

Rolf, it must be pointed out, did not launch a deterministic approach to the *practice* of SI. The work itself transcends the premises of the theory. The theory, however, is on thin ice. That's where we find ourselves in 2017. Rolf's 'systems approach', clearly visible in her interaction with clients, enables us to now, in the twenty-first century, evaluate if the old model (a biomechanical one) is wholly appropriate. There are many bases on which to look critically at the old model. This author has written about how a movement system model offers advantages (Frank 2008, 2012). In the present discussion, the energy work topic provides another example of how a *systems model* solves many troubling theoretical, educational, and scope-of-practice impediments.

A Systems View of Intervention: The Principles

The Constitutive Principles of Rolfing Structural Integration (aka Principles of Intervention) – Maitland's groundbreaking schema for defining what constitutes Rolfing SI – posits that *holism, support, adaptability, palintonicity, continuity, and closure* are the necessary and sufficient elements to appropriate intervention for SI – intervention that is in accord with the inherent order that living systems represent. Maitland states, "The principles of intervention must reflect the nature of biological order, not the way machines are ordered. Living bodies are not

soft machines created from pre-shaped parts. Rather, they are developmental wholes. They are self-shaping, self-organizing, self-sensing, seamless unified wholes in which no one aspect of relation is more important to the organization of the whole than the whole of itself" (Maitland 2016, 41).

Nowhere do these principles posit a mechanical priority. Nowhere are the *mechanism* or tools of intervention suggested. What are described are qualities one identifies as present or in need of further evocation. View the principles as implying: the system will organize itself to manifest the named principles (qualities) as one communicates with the system to offer useful information in an acceptable format. A practitioner doesn't *make* support or adaptability or continuity or palintonicity happen, in the way one makes a house stand up straighter using a hydraulic jack. In living systems, information, offered by a practitioner, becomes *useful* only when it manifests through system receptivity, and subsequent integration as changed behavior.

Further, whatever value any SI intervention has, for the results to express in posture and movement – in the client's behavior – the process requires a self-organizational integration of new data. Self-organizational activity is the point of the Principles. Self-organizational activity is a measure of useful intervention – conjecture about the explanation behind the mode of delivery remains just that, a guess about complex interactions between two or more human beings, phenomena that are not entirely explainable in many cases.

Let's further examine how the Principles of Intervention suggest a *systems* approach. First of all, holism is, in Maitland's latest iteration, mentioned first. Holism says that you are never intervening but that all elements of a system are in play and no element can be influenced without consideration that all other elements are influenced and are influencing what you do. That's an approach that echoes the work of Bertalanffy. It can be overwhelming, at first, if we try to just 'think it'. It's refreshingly transformative to feel, when a practitioner works this way.

Principles and Integration

Take support. Support is something we can observe in a person's behavior. It's the same with all the other principles – we look for whether the system is capable of organizing to a level of behavior such that we can assess the expression of one of

these factors. Assessing these behavioral milestones is the best way to know if the system has integrated. [This is the subject of an article on the processes by which we assess integration (Frank and McCall 2016)]. To work from the Principles, we need to ask, "What does support look like?" and then, "What elements might likely be interpreted by this particular system as support, at this particular time?" These questions reflect *systems approach* modes to intervention.

To ground these ideas let's consider an example: We suppose that support is important and that it will improve adaptability, but what constitutes support? A practitioner could decide that helping the client experience differentiation of tarsal and metatarsal bones will improve support. The practitioner performs some fascial mobilization of the feet, the aim being to provide enhanced support. The client walks and, in outcome A, we see a shift toward improved movement of the foot, derived from a more differentiated map of foot articulations – differentiated information. More movement in the feet appears to offer improved adaptability in other places in the body.

On the other hand, in a case B, we can imagine little to no change in what the practitioner perceives as better movement and more support in the system. What then?

The practitioner has options. One option, to make a point, would be to learn more about the client's experience. One might ask the client, for example, about his relationship to the feeling of ground, the floor, the feeling of the floor surface. Through dialogue, back and forth, the practitioner is fortunate to discover that the client lives with an inhibition to allowing weight into the floor, that there is a held pattern of association to the meaning of, say, heavy footsteps. The client can now renegotiate his behavior – new options start to be available.

Support is only meaningful when recognized as such through the lens of the *client's* system.

The support the system recognizes in the second example manifests in at least two different forms. In both forms, there is new information: first there is the revelation that one is able to imagine one can allow louder footsteps; second, there is the revelation that one is being spoken and listened to in a supportive manner. Support isn't a mechanical thing. It's in the experience of the organism. In

building a house, support is a mechanical thing – you can insert a beam and fasten it in place. In living creatures, support can't be reduced to mechanics, except, expediently, if one isolates a mechanical issue and chooses to use a device or surgery to resolve it. Information also, as illustrated, is something that passes in both directions – from client to practitioner and from practitioner to client. Listening is an intersubjective activity.

Information Model

Once we affirm the value of the Principles of Intervention, we can reflect on the revolution that has taken place. We no longer have to consider biological phenomena only within the domain of mechanical science. We move to a model that matches the integrity of the Principles. That new model must be based on how one makes a difference within a holistic system. The new model must say that only if an intervention has value to the system of the client or student – such that it contributes to that person's organizational evolution – can we claim that it is successful. Useful inputs to the system constitute what could be termed *significant information* – information that the *system* determines is valuable. An information model is a humble model. We can only claim the intervention is valuable because the system tells us so through changes in *behavior*, the word Rolf used to define structure in systems (Rolf 1977, 31).

This author suggests that an appropriate name for a holistic meta model is this: Information Model for Structural Integration. In such a model, information in any of the of Principles of Intervention categories becomes *significant information* when the holistic social/biological system informs you so.

The Informational Model Idea Applied to the Bodywork vs. Energy Work Question

We come back to the topic of energy work and bodywork. These two domains are separate as long as one insists on a biomechanical model. How can 'energy work' and 'bodywork' be reconciled to coexist in a biomechanical model? All bodywork involves energy. How do we give the important contributions that 'energy work' stands for a place in a model in which it's *all* energy work in the standard definition of energy? And if we mean something that is not the standard

definition of energy, why are we using the word 'energy' to represent it?

The duality between energy work and bodywork is fraught because energy is "the capacity to do work" – that's the definition. But that's not what we typically mean when we use the term for body health. The author asked a proponent for energy work fitting into Rolfing education, "What aspects of your practice don't involve energy work?" His reply was that all of his work included it.

The author submits that all the interventions done by practitioners of SI involve energy in the classic physics sense; and all of it involves energy in the other, less-defined, meanings that energy workers posit as well. We need to ask, what is that "other, less-defined" meaning?

But, first, how useful is a term in which the definition fails to offer meaningful distinction? Hands-off work – does that make it energy work? Mental imagery – does that make it energy work? Work done remotely – does that make it energy work? Work done with high energetic force – does that make it energy work? These questions point to a fruitless attempt to substitute an ambiguous term, at best, for the essential point of the intervention.

'Energy work' is a term that remains, at the current juncture, too vague to do justice to the phenomena it represents – the important integrative outcomes that occur. Better terms for both bodywork and energy work can derive from a systems model. Such a model holds a container for fascial mobilization; evocation of shifted orientation; evocation of perceptual awareness; evocation of shifts in pre-movement; eliciting awareness to how context and meaning are interwoven; the power of intersubjective experience; the power of embodied non-reactivity; the power within the vastness of somatic imagination – inputs that assist human biological systems to achieve self-organization. To extend this approach to include what has been termed 'energy work' now becomes easier. We gain an avenue to describe the type of information that is offered to the system via embodied relationship – the realm of what Siegel (2010) calls 'interpersonal neurobiology', for example.

What's the System Hungry For?

What type of information is the system hungry for? How do we perceive opportunities to deliver it? Do we deliver

information with touch; with embodied presence; with practitioner visualization; with perceptual embodiment; with listening for and with, or non-reactive observation of, inherent motion so that the organism is better able to organize? Do we listen to the sensory experience? Listening is a deep act. Quantum physics posits that observation is already an intervention with a system. What are the various means to receive and offer significant information to the system we are working with?

An information model steps out of the trap imposed by definitions based on method of delivery. We don't have to define an intervention only in terms of what tools we use. It's less important. Rather we can describe an intervention on the basis of what type of information is intended and how we assess the observed value of that information within the framework for the Principles of Intervention. The vehicle of communication ceases to be the central feature for evaluating what falls inside the scope of practice.

'Energy Interventions' Defined in Terms of Subtle but Significant Information

Deliberately simple examples of interventions subsumed under the 'energy work' category – when looked at through the lens of an information model:

- Listening to and observation of the 'spatial territory' of the client's system, within the body matrix itself and/or surrounding the body in the matrix of space.
- Evocation of orientation to the vectorized space around one/inside one, including a space inhabited by nonmaterial geometric relationships – information that assists the system to reorganize via missing geometric elements, missing places in the dimensions of action space. One asks questions like: "How might practitioners perceive value in this form of information to this particular person at this particular time?" and, "How might one assess shifts in behavior such that the system indicates that it has been useful?" (Spatial matrix geometry is a central mechanism to how the brain predicts movement and conceives of movement. It's, effectively, 'bundled software'.)
- Listening to, and observation of, inherent motion. What's moving at a gross, subtle, and very subtle level? How do we

perceive motions in the space around us, in the body, in the interaction of body and space, in the gravity response system, in the mind? How does such listening and observation shift autonomic nervous system activity?

- Evocation of awareness (cortical or subcortical) to subtle or non-conscious kinetic information such as wave forms and rhythms within the body, or connected to wave forms perceived outside the body – what have been termed inherent motion (the tides). Might it be proposed that practitioner observation of these rhythms supplies useful information to the system? How do we observe shifts in the behavior of the organism to indicate it was useful?

Bony Articulation Intervention Defined in Terms of Information

If we place the previous examples next to, for example, evocation of information related to bony articulations, what happens? One can posit that a 'structural' fixation of bony articulation is mechanically resolved with manual skills. One could also consider that, without changing anything about the application of manual pressure and timing, we can reframe that intervention. Instead of a mechanical resolution of fixation, consider that we see/feel how the system is interested in highly specific information – information about mobility/motility of joint function – and that we observe the holistic value of doing so by virtue of how other articulations, and motor patterns, respond – that the system indicates interest when there is an improvement in adaptability, palintonicity, and continuity in the response?

When the information is subtle, we can label it as subtle. Forms of information that we could call *significant subtle information* (SSI), can then find relationship to how they serve to satisfy the Principles of Intervention. SSI becomes an obvious supplement to information conveyed via fascial mobilization, perceptual and coordinative education, and psychobiological education/nervous-system regulation. Perhaps subtle and not-so-subtle are also an unnecessary distinction since the subtle can have large impact and the not-so-subtle can have limited impact. The impact on the system, the breadth and scope of the integration, is the arbiter of relevance.

All 'structural body interventions' can be described in terms of types of information organized within the Principles of Intervention. The catalog extends from imagined/perceived invisible geometry to vectorized fascial mobilization. There's a spectrum of informational options to assist a system in finding holism, support, adaptability, palintonicity, continuity, and closure. It remains for each practitioner or instructor of the various elements of our work to better define what information, and for which aspects of the Principles, their specialization applies. The energy domain examples, invented by the author for illustration purposes, aren't claimed to fairly or fully represent how practitioners who offer SSI might wish to represent their work. But, it behooves those who practice or teach dimensions of subtle information within the SI field to confront the self-limiting consequences for failing to provide definitions in which the work is adequately conceptualized, named, and related to the Principles. And if a new principle is perceived as worthy of consideration by energy practitioners, perhaps the SI community will listen with curiosity to what is proposed. The moment calls for integration rather than self-imposed isolation.

Rolfing SI, or SI of any brand, has the opportunity to better assure its relevance in the coming decades when it embraces an information model as an overview to the range of interventions that fit within it. SI is best represented as education, education about and within a field of significant information – information that, when integrated, leads to restored posture and adaptive capacity to meet demand.

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