What is Eccentricity?

Dr. Ida P. Rolf did not invent the idea that bodies should lengthen and broaden as they inhabit space. She also didn’t invent the idea that bodies can lengthen and broaden under challenge. Nevertheless, these are smart ideas worth learning about. Though many traditions might lay claim to their origin, the simple fact is that it is what our bodies like to do. The human form, its architecture, and its motor patterns for walking, running, twisting, pushing, and reaching are the product of nature’s laboratory. Eccentricity follows from the human form itself. What Rolf did is make a ‘recipe’ that reveals it. She packaged restoration of human posture in an accessible format, and made it possible for plain folks to do what formerly was the province (on a good day) of yogis and other adepts. She established a way to discover/rediscover how to meet demand and get bigger rather than smaller. People like this feeling, once they stumble on to it.

Rolf called her work ‘structural integration’ (SI) before the service mark – Rolfing® SI – came along. The ‘structure’, or rather the structures – the shape, the parts, and motor patterns of the body – are integrated, differentiated, and linked with each other. She established a field of inquiry that involved fascial mobilization; she also, out of necessity, included the art of coaxing forth body awareness and discovery. She precipitated unusual experiences and helped people anchor these experiences so they might get some use out of them.

Whatever strategy begets it, eccentricity of function is a hallmark of integration – what we like to see as our ‘product’. Eccentricity means ‘away from the center’. It is the opposite of concentricity, which means ‘toward the center’. Those of us who work to find concentrated power in the center of the body, or concentrate to improve performance, might not like this idea. That’s not a problem. We tell people to choose what works for them, and consider adding eccentricity to their tool bag. Then they can compare the results. Rolfers aren’t the only ones who know the blessing of eccentricity, but we are, perhaps, in one of the best positions to teach it and market it.1

How Do We Arouse Eccentricity?

Eccentricity of function follows from eccentricity in perception – which is to say, we imagine it, feel it, and then we do it. Our body has the bundled software, so to speak, to do it. How does this aspect of body come alive? If we arouse a spark of interest and introduce easy imagination based on support and weight; if we entice the client to explore distance and directional; if we offer these invitations while watching carefully for effort or overwhelm, while exploring playful investigation with the client, most bodies are interested and take the bait. Now and then, to suit the client, we have to slow the process way down, so it might take weeks or months for one client, whereas another would do the same discovery/integration in an hour. There’s no hurry. When in doubt, do far less – find an easier way.

Feet and Eyes

An obvious first step in inviting forth eccentricity of orientation is to rekindle the relationship between feet and eyes . . . or rather gaze, since eyes aren’t really the point. The eyes are anatomy: ‘Gaze’ means the range of ways we engage vision to embrace, receive, analyze, recognize, feel, and be touched by the world. Gaze is an activity.

Often in a first session, I introduce this relationship of feet and gaze and invite the client to feel how the front line of orientation, and therefore the front line of the body, can more easily open/lengthen. One feels this ease by feeling eccentricity of activity between the toes (pressing softly against a wall surface) while the gaze opens to the space (frequently the space that exists beyond the top of the head). Each session provides creative use of the feet and gaze. Linking feet and gaze to every session isn’t part of the Recipe, yet it belongs in a revised edition. Why? Orientation is the pillar on which Rolf’s whole argument rests. Eccentricity of orientation sits squarely atop that pillar.

Rolf’s ‘Normal’ Versus the Medical Model (Where’s the Orientation?)

Sometimes clinical practice yields a client who concisely illustrates differences between the field of SI and more conventional/medical forms of body therapy/rehabilitation. The following example shows how the ‘body as parts’ paradigm differs from the ‘body as movement system’ paradigm – the latter inseparably linked with body orientation and eccentricity.

The Referral

Recently, a physical therapist (PT) referred one of her patients to me – she had worked with him intensively for three years. Five years previously, he had a snowboarding accident and sustained multiple fractures in one ilium. After some rehabilitation, he was able to start snowboarding again. Then, however, he immediately suffered a relapse with new pains and restrictions. Surgery in the opposite hip putatively repaired a torn labrum but offered no relief from pain and restriction. Now, five years later, after seeing practitioners of different stripes, the PT sent him to me. I truly wondered, “Would I be of any use? Is there something a Roler can do that she hasn’t done?” I figured my PT colleague had, over three years’ time, pressed and pulled on every square centimeter of her patient’s body. This particular PT does standard manipulations and exercises plus myofascial work and postural work, and is a very successful and gracious practitioner. You never know – or, I should say, I never know.

The Client Presents . . .

In our first meeting, during the first ten minutes, some things were surprisingly clear. When the client did a knee bend, his body prepared for the movement by carefully and comprehensively bracing what looked like all the muscles he could think of. His attention was internal; his attention was concentric, meaning towards the center of his body. I made no comment but asked him to try a simple exercise using a handle on an elastic therapy band, something I call ‘shot-put’. When he reached forward, pressing the handles forward against resistance, he showed no evidence that he believed there was space to reach or press
into – his peripersonal space (the space that the body imagines around itself) was missing. It was as though his peripersonal space was not outside his physical body.

Whatever this man had accomplished, through his own diligence to recover, plus all the well-meaning and intelligent sources of therapy he had received, the sum total was expressed in gestures of concentricity and containment – there was no visible evidence of awareness beyond the boundary of his skin. Furthermore, a subtle folded in nature of his body shape and demeanor looked like this strategy (of containment and concentricity) was deliberate and well-rehearsed. One more thing: he had also been working with the PT to try to recover freedom in his breath. He felt he had spent several years never being able to take an easy or full breath. He felt his breath as distress.

**The Practitioner’s Role Reveals Itself**

My role for this man’s journey felt clear and I told him so: I would teach him about pre-movement, teach him about perception, teach him that breath exists first as orientation, and teach him that eccentricity of body will follow from eccentricity of perception. I gave him a concrete demonstration of each so he could see exactly what I meant. In the first session, he learned to do all of these things and in a manner that he could recognize as changed coordination. Upon returning for session two his gait had shifted significantly toward normal. It was an example of paradigm shift. When the issue is no longer primarily in the tissue, how do we define the purpose and efficacy of our work?

How do we recognize – how do we learn – how do we explain – how do we teach – one of the single most potent hallmarks of Rolf’s work? How do we embrace her vision of elongation and spacious response to demand? It is this response to life’s challenges that we wish to impart, that we wish to cultivate in Rolfing students in such a way that they might teach it to others.

**The Recipe as Orientation and Eccentricity of Function**

The work with this man continued. In each session he learned to find support from one direction and imagine movement in a different direction. We did the Recipe. Each step of the Recipe links support to directionality. A few illustrations:

- **Session one** offers the lesson that orientation is our native home. The shape of our body and the shape of our breath reflect an eccentric arc between earth and sky; when the body is inspired, the front line opens. Session one also differentiates the axial skeleton from the appendicular one and each step of the Recipe reiterates this fact of body architecture. The practitioner uses touch certainly, but also gestures toward and touches on the skeletal model at the places the two skeletons join and articulate. The conscious mind sees this. The non-conscious ‘movement brain’ sees it too! Eccentricity is expressed as the body feels the spine and the girdles are separate.

- **Session two** introduces vectors of directionality in the lower limbs and feet. Knees reach forward and heels reach behind. Toes reach forward and rear reach behind. Can one feel these directions in the imagination and then start to feel body reassurance? The client has already begun to feel the front of the spine as an imagined region of potential elongation, one that embraces a spacious world with each inhalation of the breath. The back line can now start occupying space, also, and so the body has the beginnings of a ‘back field’, a peripersonal space behind the body. We need space to back us up and we need space to back into.

- **Session three** reinforces the axis/appendicular articulation introduced in session one. The sidelying client has opportunities for elongation that start with toes against a wall surface, which helps to support the reach of eyes and hands into the space beyond the head in order to open the front line; next, finding elongation of the back line that starts with broad foot support against a wall, which then supports the spine to expand into back space and to allow the shoulder to drop away from the emerging head and neck. The space of the lateral line is defined and breathed into. The body starts to have awareness of a space that supports it on all sides, and a space into which directionality can be imagined in 360° of orientation. The body discovers dimensional ‘internal’ volume that corresponds with volume of the ‘world’.

The Recipe works because the body is set up to revive from orientation. Orientation is the basis for sensorimotor security, and sensorimotor security is the basis for the sense of well-being. The client, in this example, learned things: he learned to use spatial awareness, directionality, and eccentricity. He gained a critical level of conviction that his body was not a collection of parts, but rather a movement system hungry for information about space and weight. He resumed his work and life. He knew how to restore less-efforted posture and movement in daily practice.

**Clarifying Our Purpose**

Each session evokes a synergy between support and spatial dynamic. We know this; we do this work with clients. It is fundamental to the field of SI – to Rolf’s vision. And, despite the proliferation of myofascial paradigms, a simple message of the work – eccentric orientation – has not been broadly imitated outside our field (of SI). Yes, we do fascial mobilization in a particular manner with particular attention to details of touch and details of client experience. Yes, we have a sequence. Beyond fascia and Recipe, the larger point of our sequence can be distilled:

Does the body express a birthright of security in verticality? Does security express two-directionality in posture and movement? Does the body express elongation and eccentricity as it meets challenge, as it meets demand?

Each session of Rolf’s Recipe is a chance to illustrate/demonstrate this possibility, and a chance to teach some element of what this vision means – a grounded moment of appropriate preparation to move; a moment of reduced effort in execution; a contrast between efforted and less-efforted execution. We have the opportunity to rehearse a movement on the table, while the client is lying down; to rehearse it again seated, and again standing, and then see what occurs in walking. We have the chance to find some detail that the client believes she/he can try out in daily life, at least once in a while. We also can offer a small self-care exercise that is mostly about preparation to move rather than repetitions to build muscle. I tell clients that the exercises I offer them are for the ‘software’ (motor system refinement) rather than the ‘hardware’ (muscles).
We Are Part of Nature and Nature Is Part of Us

Our field of inquiry considers eccentricity a birthright – Rolf called it ‘normal’. Other styles of function are necessary impositions and interruptions to the norm. We see eccentricity in nature: the bloom of the flower, the billowing clouds, and the lengthening neck of the cheetah as she spots her prey. It is a simple message. What gives us the authority to teach it? No external authority can do so. We have the chance, however, to verify this work in our own bodies every day. Might we find a moment of daily practice that reminds us that this birthright is true, clear, and still present; that the nature of the universe is – like the mass of the earth and the vastness of the sky and reliability of the rising sun – still here?

Body Intelligence and Philosophical Intelligence

Eccentricity of function has a philosophical parallel. Concentricity rehearsesthe notion that we must exert and practice ever-greater personal effort. No one can argue that such a strategy is often rewarded with tangible results. But is that the point of Rolf’s inquiry? Is that what it means to stand and walk on this earth? Is it about perfection of personal effort? Or does our inquiry include the question, “Can we find some quality of stability and security that does not feel derived from effort and does not feel personal, such that we might be relieved of what feels like smallness and aloneness of being?” Rolf encourages us to find out.

ENDNOTES

1. One of the Principles of Rolfing SI, along with support, holism, adaptability, and closure, is ‘palintonicity’ – which means a quality of two opposite directions. It is a more recent name quality to describe what Rolf was looking for in body function. Formerly, Rolf had used the term spannung, which means roughly ‘span’, again evoking a sense of eccentricity. All these terms have value for speaking about the Rolfing ideal. Eccentricity is chosen here because: a) it is an English word; b) it is in contrast to concentricity, which can be demonstrated clearly to students and clients; and c) it has a more omnidirectional connotation, not limited to the sense of getting longer, but also including the sense of greater volume and greater spaciousness. Bi-directionality, practiced over time, yields a native body sense of omnidirectional spaciousness.

Structural Aging Part 1 – Finding Grace in Gravity

Spirals in All Spaces: Lower Body

By Valerie Berg, Rolfing® Instructor, Rolf Movement® Practitioner

Introduction

The client walks in. He is bent over, his head leans out in front of his hips. He walks stiff-legged. His hips hurt. His back hurts. His feet hurt. Question: Is he seventy-eight or thirty-eight – or twenty-eight? Another client’s spine has lost its curves, her toes don’t bend anymore, and walking hurts her hips. Is she forty or eighty? We see this every day in our practices, regardless of our favorite lens for body readings – whether front/back balance or support or lift or core support. No matter the lens chosen, we are always looking at real or potential ‘structural aging’.

I created the term ‘structural aging’ to describe (for our profession) what we see over and over again: the breakdown of structural elements in the human body’s relationship to gravity that creates a look and feel of expression when they have lost their grace in gravity when there is little or none, grace in locomotion and gestures of expression when they have lost their variability and finesse.

Figure 1: An example of a spiral in nature, Photo used with permission of www.StarwindWonderfulThings.com

Looking around, we see a booming industry of looking for a way to slow the process of aging. As potential for mobility is reduced, the fear of anticipation of falling changes nervous system tone and response to the gravity throughout the body. Structural aging is not necessarily age-related, and yet it feels like aging. It can occur in twenty, fifty, or seventy. It can occur in twenty, fifty, or seventy.

The elements of structural aging are all things that we can intercept and change in the Ten Series or later, hopefully creating grace in gravity when there is little or none, grace in locomotion and gestures of expression when they have lost their variability and finesse.

Structural aging occurs in minute steps; it sneaks in and around the connective-tissue sheath without us knowing how it will change our posture, our appearance, our movements and general well-being until the entire orchestra of fascial connections hits a crescendo of pain or strained expression in movement. We may feel it as sudden grief...