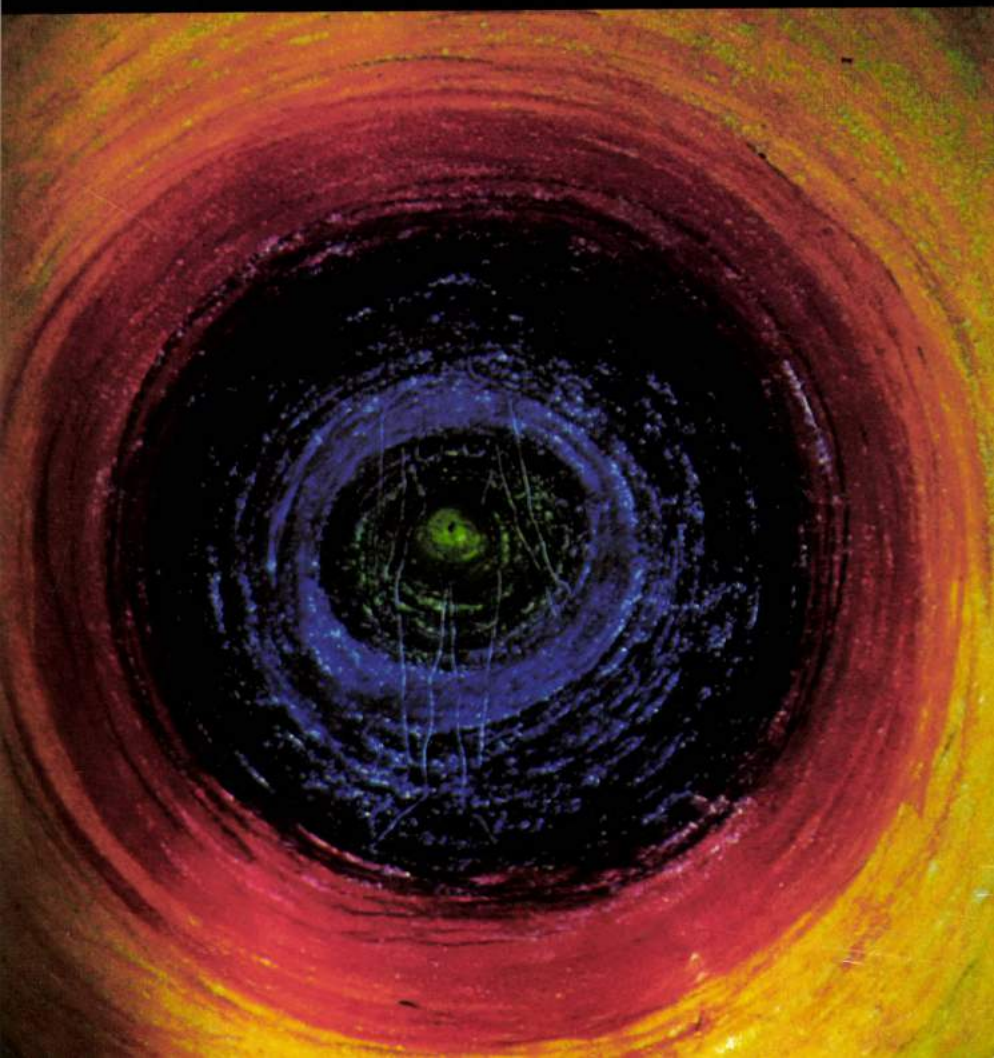


Gerda Alexander

# EUTONY

**The Holistic Discovery of the Total Person**



# Gerda Alexander

# EUTONY

Eutony is a western Way to experience the body-mind-spirit unity of the Person. For over fifty years it has been taught, primarily in Europe, by its creator, Gerda Alexander. Generation after generation of her students, upon completing the four-year course of the Gerda Alexander Schools, have brought this Way to larger and larger numbers of trainees. Eutony is a very personal training for a better physical, mental and spiritual life. It is also an education which belongs in the curriculum of every children's school. It is also a therapy with a long and proven record of healing handicapped persons given up by conventional medicine. It is also an indispensable part of the training of actors, musicians, dancers and singers in artistic expression. Here, in this book, is Gerda Alexander's own account of all these various aspects of Eutony and of how they came to be. This account is based on the author's book in its German and French versions but this also includes much new and current material. Gerda Alexander was born in 1908.

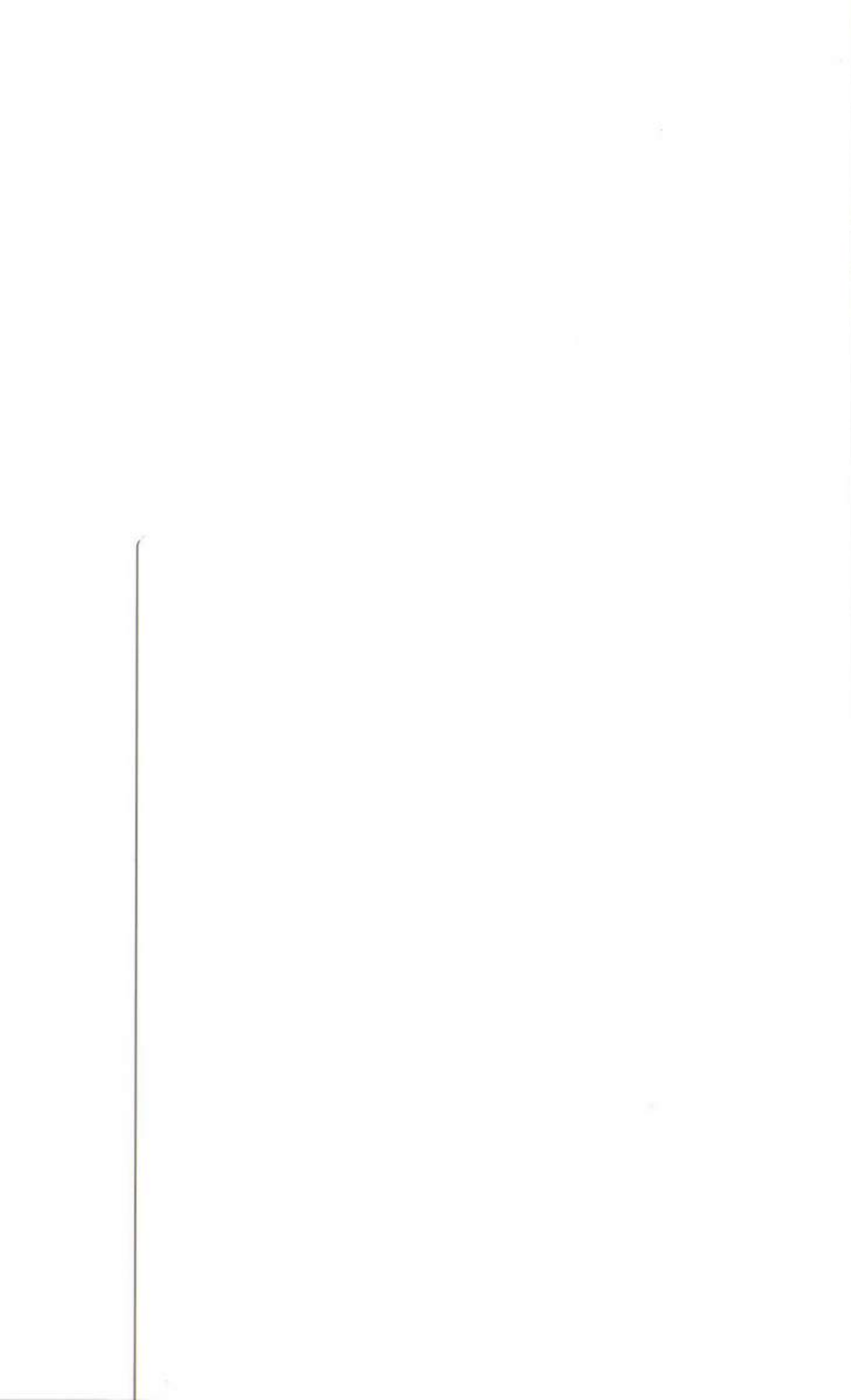
*See Inside Back Cover*







EUTONY



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The Holistic Discovery  
of the Total Person

By Gerda Alexander

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EUTONY





# Introduction

This book is dedicated to my students. Through their unique personalities and their diverse reactions, they have taught me continually to review my own observations and experiences from different points of view. This is the only way to establish generally accepted principles which can lead people of our cultural background to conscious self-awareness. The difficulties are many in describing such a path to people who have no conscious practical experience of their bodies. Since there is an ever-increasing number of those who teach isolated eutonic exercises without understanding their sense and need of a coherent context, it has become necessary to put in writing the basic elements of Eutony to avoid the consequences of such misuse. In 1976 I published a book of my work in German; it was followed in 1978 by a French version. The present text is based on both, plus new material.

I owe my thanks to Drs. Alfred Bartussek and Alfons Rosenberg for their valuable criticism and sympathetic practical help, as well as to Dr. Christoph Wild for his advice regarding the arrangement of the text of this book.

## *The Principles of Eutony*

Even if it were possible, it is not my intention to describe all aspects of Eutony in this book. Such an attempt would fail because Eutony is in no way a special system to be practiced separately from everyday life. Eutony keeps one in constant contact with all aspects and realities. It concerns the healthy person just as much as the sick one, the sportsman as much as the

dancer, the intellectual as much as the physical worker. I have given particular emphasis to those aspects of my work which I consider to be essential and which at the same time are fundamentally different from and contrary to other systems of individual and body development.

Let us recall briefly some of the principles of Eutony in order to clarify this assertion. First, it should be remembered that release from tension, one aspect of the control of tonus, constitutes in fact only a partial aspect of Eutony. Eutony depends on conscious tactile perceptions and the development of both superficial and deep sensitivities. Eutony avoids any teaching by suggestion. Eutony also avoids active breathing exercises, but works through indirect action on the autonomic nervous system. Eutony's teachings are based on the uncovering of the personal biorhythms of each student by the setting of tasks for which he must find his own solutions without following a set of patterns. Personal awareness in contact with the environment, a vital aspect of Eutony, is developed from the beginning. Physical touch and contact between two persons requires prior regulation and control of the tonus in order not to harm the partner by transferring one's personal way of behaving or any psychological or psychosomatic disturbances. Thus the practice of Eutony helps one to be open and receptive to others without diminishing one's individuality. This is in contrast to other methods which use mental suggestion, regulated control of the breathing process, the setting of patterns to follow, and fixed rhythms of action or directed forms of meditation. In this book, I have, in fact, tried deliberately to present only the principles and not the practice of Eutony.

I have separated the principles from the practice because a presentation of a series of exercises, such as one usually finds in instruction books, teaching breath control, would very probably result in errors or misinterpretation when no teacher is available for expert supervision. Experience shows that the same exercises, apparently carried out in the same manner by a number of people, result for the most part in different kinds of experience. All students naturally react in a different way depending on their personal history and culture, prejudices and unconscious inhibitions.

Action is the result of conscious or unconscious stimulus. It cannot be reduced to a series of independent movements, as if the body were merely being directed by outside factors. Traditional gymnastics do in fact make possible a more-or-less perfect execution of a set of movements. But such exercises have only a limited significance: nothing essential happens within the person. These types of training have nothing in common with Eutony because Eutony depends, on the contrary, on restoring and increasing the capacity for conscious individual awareness.

Sensations and observation are different types of perception—it is necessary for them to interact one with the other. In order to achieve a deep relationship with oneself, with another person, and with the environment, it is necessary to experience one's total person consciously in stillness, in movement, and in contact with the physical environment. My long experience in many countries has taught me that a predominantly abstract training does indeed increase intellectual responsiveness, but at the same time it encourages the trend toward self-centered imagination; the result may be purely intellectual without any reference to physical reality. Such abstract and imaginative concepts are an expression of the inability to remain present within an actual situation and to achieve conscious sensations. The tendency to emphasize intellectual considerations rather than felt experiences frequently places people outside the reality.

The teacher can distinguish easily between a student who is really working in the eutonic manner and is totally present and one who is merely pretending. The constant correlation between the total person and the environment is, from our point of view, the indispensable prerequisite for a conscious awareness of reality which is basic to achieving a healthy state. To learn to feel oneself consciously in relation to the environment, and to be able to cope with the stress and strain of daily life, are benefits obtainable by Eutony.

One should best start along this path with the help of a teacher. If a teacher is not available, then the prerequisite for independent work is the ability to discover by oneself, through one's own authentic bodily experiences, the true sense of conscious sensation which forms the basis of Eutony.



I have emphasized the astonishing significance of the skin as an organ, as a living envelope, with countless nerve-links throughout the whole organism. Contact through the skin, which gives us information about the outer world, makes us aware simultaneously of the essentials about ourselves. What we touch also touches us. This interaction, which influences blood and lymph circulation, breathing and metabolic processes as well as the muscle tonus, is the source of the reassuring sensations of oneness and well-being which the work on "touch" and "contact" taught in Eutony makes possible.

Eutony is a living, individual experience which cannot be transferred in a book. Generally, we are not conscious about our behavior. We intend to make a single movement—take a cup out of the cupboard, remove the cooked potatoes from the oven—and instead of the simple movement necessary, we make many parasite movements, sometimes even working against our intention. Thus, we need a teacher to help us to become aware of our habitual waste of energy and to discover which of our shortened muscles suffer from poor blood circulation. We are not aware of bad habits until our daily functions become insufficient and painful. We get stressed and lose interest in creative work and thus limited in our development.

That my book can awake people's awareness of their behavior was shown by the various letters I received after the first edition in German.

The work of "contact" which we propose produces immediate effects. It develops a sensitivity which reveals a part of ourselves and in so doing helps us to discover our physical, mental and spiritual oneness.

To this end, the basic exercises represent a very favorable starting point for discoveries. One must not, however, try indiscriminately to feel everything which our body touches. When we learn the distinctive qualities of the touch of clothing on the body, or sense surrounding objects in a global perception of the body in its environment, this situation already presents many opportunities for personal discoveries. Whoever is successful in realizing that presence to himself as a reality, soon perceives that "touching" reveals a wealth of working perspectives without endangering the psychosomatic equilibrium.

All these personal discoveries are now supported scientifically by discoveries such as that of the fusimotor nerve system by Granit and Koda (1946) and the work of Barry Wyke, M.D. England (1977), which have provided explanations and scientific proof. History teaches us that many discoveries often receive scientific corroboration long after the empirically discovered facts have become known. Today's knowledge of different disciplines and modern research makes possible new forms of scientific cooperation and the formulation of fundamentally new concepts. Thanks are due to my students for accepting this challenge with courage and a spirit of self-criticism.

Eutony would never have come into existence if we had just waited for scientific corroboration before discovering in ourselves the revolutionary effects of a new approach to a multidimensional reality. In seeking our identity and the comprehensive experience of being alive, we must also consider the opportunities for scientific research.

This is not surprising when we know that these psychological phenomena have their origin in the subcortical region. It is precisely in this area that manipulative and conditioning methods have their effects on our society. It is of vital importance that we do not succumb to the danger they represent.

Not everyone has the same facility to increase body consciousness. It seldom happens that a first experience has as positive and spectacular an effect as that I observed in the case of a great violinist and famous conductor whose playing and physical movements changed fundamentally after only a single session. Generally, one needs patience and time in order to achieve that presence because we are held back from it by our upbringing and our way of life.

In writing this book I have constantly tried to express my ideas as simply as possible, and to place the accent on a way of working, and an attitude, which everyone can incorporate into everyday life. To express oneself simply does not mean to simplify. The primary is often of the greatest importance, as in making every sense organ feel as vividly as it did in the first contacts a child has with the world.

Gradually the physiological sciences are discovering interactions which explain the extraordinary effectiveness of Eutony

pedagogy and therapy. Certain discoveries with respect to the structure and function of the nervous system have provided Eutony with scientific support of which it has made extensive use. Twenty-five years ago, it was not clear how we could succeed in restoring to some paralyzed patients, whose motor nerve paths were destroyed (considered indispensable for locomotion) their ability to walk through making them conscious of their reflex mechanisms. There remained nothing more for us to say than to paraphrase irreverently the words of the great Galileo: "And yet it moves." Eutony helps the individual to discover the possibilities contained within his biological reality and to adapt himself in a continuous constant, dynamic and creative process to the wholeness of life.

The effects of a responsiveness reduced by tensions and restraints are well known today. When a situation requires a response which exceeds our capabilities, a kind of panic takes over and we behave like a kicked dog which does not know whether to bite or run away. In the last analysis, certain forms of opposition are only an admission of importance and are not a sign of greater freedom. Henri Wallon\* showed brilliantly that the emotions and muscular tonus influence each other. That explains the importance of the ability to react to life and other people in full possession of a total adaptability of the muscle tonus and not to overreact or not react; it must also be said that not only hypotonic and hypertonic persons are restricted in their emotional life. Anyone who is fixed in an intermediate muscle tonus is equally limited. We have sometimes described responsiveness, which is made possible by the maximum adaptability of the tonus, by the expression "to be in order." This does not mean being subjugated to an external order but, on the contrary, having control over a maximum of possible responses, both in social as well as in personal areas. In this way a latitude of freedom is attained without which neither potential for expression or creativity are possible. We also know that the limits set by a rigid structure are among the main causes of our difficulties in communicating with our fellow men. Since Eutony depends on permanent contact with the en-

\* Henri Wallon, *De l'acte à la pensée* (Paris; Flammarion, 1978).



vironment, it enables the individual not only to discover himself but it also contributes at the same time to break down the barriers of his natural isolation.

After the first working steps, the essential components of Eutony—the training, the rehabilitation, and even the therapy embedded in the interpersonal and general dynamics between the individual and his environment—may not be immediately obvious to an outside observer or a beginner. However, careful observation of group processes shows the vital importance of these first steps. To give only one example: is it not of fundamental importance for a student to discover, after his first session of Eutony, that his sense of perception and his experience of the world and himself are frequently quite different from those of his neighbor and can even be in conflict? This reaction is neither right nor wrong and contains no element of judgment, but is a step toward personal independence and to the recognition of basic differences between people.

It is of equal importance to a person working in a group to discover by means of a simple object, such as a bamboo rod, that it is also possible to relate to ever-new situations by a continuous mutual adjustment in group action without guidance.

What the students experience during their session of movements and what they express verbally at the end of their work often reveals unexpected depths. Even their words seem to take on an expressive and communicative force. What they previously expressed as a form of mimicry and preconceived attitudes is thus conveyed clearly across all linguistic boundaries.

This relationship between body expression and speech, a sign of a subtle encounter between the manifestations of consciousness and unconsciousness, happens all too seldom in daily life; such encounters are all the more important as a preparation for achieving a unity of the total person. Eutony originated in Western Europe and opened up to people—particularly the sick—the possibility of experiencing the present consciously and meaningfully. It allows people to detect unnatural methods and limitations. This is essential if people want to preserve that force which enables them to work toward spiritual development and future progress. Eutony is relevant to the problems and needs of our time.

As to the spiritual movement to which Eutony belongs, it is a part of the great flow of ideas and research which has distinguished the twentieth century. Another book would, however, be required to demonstrate this relationship precisely. Were I to try to describe the ideas which guided me, I would draw attention to the relationship between Eutony and the creativity which developed in Europe and the United States of America after the First World War toward a new pedagogy and whose representatives joined together in the New Education Fellowship. I came into contact with leading exponents of these new educational ideas through studying at the Dalcroze Rhythmics School of Otto Blensdorf, one of the first followers of Emile Jaques-Dalcroze, and his daughter Charlotte Blensdorf-MacJannet. I was especially inspired by my working experiences at the first Science of Education Institute at the University of Jena, under the direction of Professor Peter Petersen, and also by my experiences in the first free schools and kindergartens in Denmark.

Although I pursued the ideas and research of the times with inward sympathy, I always kept myself free from dependence on any fixed theory or established school. This striving after spiritual and professional independence is in fact a part of my personal history. I had an inner urge to find new paths and forms of expression. My state of health on entering professional life—heart troubles resulting from rheumatic fever—supplied me with the necessary motivation. My natural way of being kept me from being completely involved in the spiritual movements of that time. It was only in this way that I succeeded, over the course of the years, in creating and developing a new conception of work.

I hesitated to write this book, whether from an apprehension that what should be a discovery made anew each day could become rigidly structured, or because of the difficulties of expressing in words the nature of inner experiences, which are our basic tools in Eutony pedagogy, and the danger that this living, unique and changing process would get deformed into a mechanical technique.

For it is characteristic of the practice of Eutony, that everyone experiences it differently, as a path by which life reveals

itself. The unity for which it strives is brought into being through the interplay of countless internal and external forces which allow each of us to achieve a dynamic equilibrium in continuously new ways. It is an illusion to believe that one can, for example, train individual capacities in isolation by movement education and then afterward unite the individual parts into a whole without losing the body-soul unity which is the object of movement. This insight came to me early, when I discovered the barriers great artists had erected for themselves as a result of strictly stereotyped training.

Can one help man find again the source of his spontaneity, can one awake in him the desire to create in the various artistic areas, in drawing, in painting, in music, and in movement? Valuable aid in discovering oneself and acquiring self-knowledge is available to us through free movement improvisations which lead to the creation of one's own style of movement within the framework of established forms and so release spontaneity. In cooperation with a partner and a group, we experience social behavior. We learn to accept the other person in his uniqueness of feeling and to adjust to him without loss of our individuality. It would be valuable if many adolescents could make use of such opportunities, to the investigation of which I have devoted a lifetime of work. In this area, a constant reference to reality is of paramount importance as the main source of personal spontaneity and its objectification.

The way in which you realize yourself is unique. If you do not undertake the quest of finding your own way, you run the risk of losing yourself. One of the essential elements in the shaping of our destiny is developing the capacity of managing ordinary life situations. It is the fundamental outlook of Eutony that relates it to the great spiritual movements of the twentieth century, leading to a new culture.

The attempt to experience being in one's wholeness, starting from a living contact and from experiencing the environment, stands in relationship to the fundamental thinking of the new pedagogy, as the path to self-awareness through complete trust or confidence toward men and all the phenomena of life. Yet another thing becomes clear from this parallel between Eutony and the new pedagogy: the respect for the individual. The



similarity between Eutony and the new pedagogy results from their rejection of any standardization and any ritualized pattern of gestures or mechanization of movements or of any coercive aims.

This presupposes that the main role in eutonic training devolves upon the students. They must make their own discoveries and work toward their own development. Training and reintegration into everyday life are therefore, above all, the concern of the students and not of the teacher, whose role consists mainly in orientating their work.

Eutony is by no means a method in the traditional sense of the word but offers man a new approach toward life. The specific ways which Eutony offers and which today form a coherent plan, are a new holistic way for an integral education and further development.

Charlotte MacJannet, Kay M. Vergin, Joyce Riveros-Olivares, and Felix Morrow have assisted me in establishing the English text.

*Copenhagen, June 1985*

Gerda Alexander

Part I

*The*

*Principles*

*of*

*Eutony*



# 1 WHAT IS EUTONY?

The word Eutony, from the Greek prefix *eu* meaning good, well, harmonious, and the Latin *tonus*, meaning tension, was adopted for my work for the first time in 1957. Tonus is the level of tension of all striated and smooth muscle fibers in the body. Such fibers are controlled by the peripheral nervous system and other physiological regulators such as the limbic system and the reticular formation, all of which can be affected by a person's psychological condition.

Eutony is a Western way of experiencing the unity of the total person. This feeling of unity and integrity liberates the creative forces and develops the capacity of contact with others without losing your own individuality. This totality manifests itself through the body's autonomic and motor nervous system. The autonomic nervous system creates a balance between the sympathetic and the parasympathetic nervous systems, establishes stimulus and regeneration in the organs, and influences physical functions such as circulation, the basic metabolism and breathing. The motor nervous system controls voluntary movements throughout the spinothalamic and dorsal column. Through these two functional systems, both the conscious and unconscious parts of the body are made manifest. Our posture and movements, the way we breathe and speak, are all expressions of our physical, emotional and mental states and are in turn influenced by them. A change in our awareness can influence these life manifestations and functions, and a malfunction in any of them can affect our physical conditions, emotions and our awareness—that is to say, our whole behavior.

The different functional systems in the living organism cannot be separated from each other. They interlock and influence each other without our being aware of it. Just as in music where



the elements of melody, harmony, rhythm, dynamics and form can be perceived separately, leading to a deepened appreciation of music, so can our distinguishing between the individual parts of the body lead to a deepened awareness of the whole person.

In Eutony, the general involuntary tonus regulation and the autonomic balance can be consciously influenced. In the beginning we develop awareness and sensation of the body surface, then of the inner space, including bone structure, internal organs, breathing and circulation.

Dysfunctioning can be eliminated and an optimal tension balance can be achieved leading to the Eutony of the total self. Such training requires a particularly acute ability to observe. Awareness itself can become the object of observation, while tracing at the same time the effects of this observation on the whole organism and registering any change in tonus, circulation and breathing, whether the body is still or moving, and the manner in which these functions are affected by emotions and thoughts. We call this state of awareness "presence." It calls for a deliberately "neutral" attitude so that the observations are not affected by the expectation of any particular results. Being "neutral" is a chief prerequisite for the successful practice of Eutony. Encephalographic readings have shown that "presence" occurs in a fully conscious state and thus differs considerably from the levels of awareness obtained with the Autogenic Training of Professor Schulz and through yoga.

The degree of sensibility that the students possess at the beginning of their training can be ascertained by the models and sketches they make of the human body. It is alarming to see how stunted this sensibility has become today although its role is so important in our overall body development and in experiencing our own individuality. Thus, more often than not, these modeling and drawing tests show that students rarely have an image of their body corresponding to its actual form. This is so even in the case of gymnasts and dancers, physiotherapists and doctors: people who have a professional concern with the human body. This is indicative of the general alienation from the body, the lack of real contact, and the isolation to be found in our society.

The first step is to develop sensibility over the whole skin surface and so normalize the student's image of his body. Only then can we induce that total person awareness which includes muscles, organs, joints and bone structure, as well as the radiation of the electrical field of the body so essential to Eutony. "Control positions" are used as a test for the optimal muscle length at rest (see Part II, Chapter 3). Like the modeling, they can be carried out by the students themselves. They show whether there is any shortening of the normal muscle length through chronic muscular tension. The students may find it difficult or impossible to maintain the "control positions." Muscle shortening impairs the optimal suppleness of the joints and the natural, unconscious upright position of the body becomes hard to achieve. To remedy this, in addition to a regularization of the general tonus, students need eutonic techniques to stimulate metabolic processes and to facilitate lymphatic and blood circulation.

## *Tonus*

By tonus we mean the state of tension in the striated and smooth muscles of the living organism. Tonus is heightened by any movement or excitement and lowered during sleep. Anyone who has lifted a sleeping child from its cot knows that it appears to be heavier than when it is awake. Its actual body weight is the same in both cases, but its body elasticity changes with any alteration in tonicity. It takes more energy to move a relaxed and therefore flaccid body than one that is braced and rightly tensed.

Tonus can also be affected by emotional changes such as fear and joy (psychotonus), by all states of excitation, by over-fatigue of the body or the mind. Everyone experiences changes of this kind. A stairway which we find easy enough to climb when there is something pleasant awaiting us at the top will seem to go on forever if we are depressed and our body feels heavy.

Tonus may be influenced by other people's behavior and

attitudes. A gentle, relaxed personality can have a beneficial effect on a whole group whereas a nervous one will set others on edge. Young children and animals are particularly sensitive to such influences; their ability to communicate lies essentially in their capacity for picking up and imitating the tonus of others.

All adults too, whether watching a football match, entranced by a play or film, or listening to stimulating or soothing music, react with tonus imitation. Wallon refers to this in his work, particularly in "*De l'acte à la pensée.*"\* The results obtained through music therapy and the catharsis produced by Greek drama, are, in large measure, due to this phenomenon.

All fluctuations in the range of human feelings, from ecstasy to apathy, are followed by changes in the tonus which, after extremes of tension have died down, reverts to an intermediate position. This may be too high or too low—hypertonia or hypotonia, depending largely on individual constitution and temperament. Remaining at an intermediate level with no ability to move up or down under emotional influences constitutes a pathological condition.

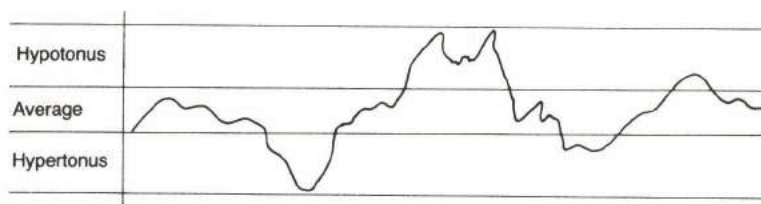
In its concern with tonus adaptability, Eutony is aware of the importance of keeping the tonal balance. This is done through:

Tonus regulation, which changes the fixed positions of certain groups of muscles and gives them back their tonus-flexibility.

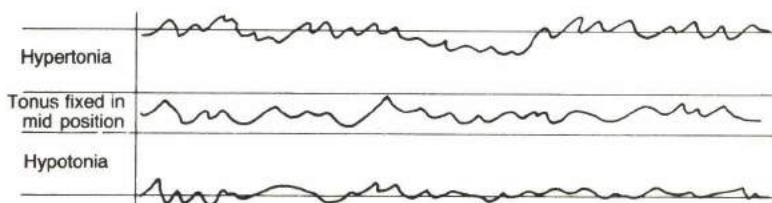
Tonus equilization, when fixations in muscle fibers are removed. Such action on the tonus is taken by directing attention to specific parts of the body; to its volume, inner space, to the skin, the tissues, the organs, the outer form of the bones and periosteal.

A normal, flexible tonus enables a person to adapt to all life situations and to have a whole range of feelings and not to be fixed in one state. The following diagram shows a normal range of variations of tonus level:

\* Henri Wallon, *De l'acte à la pensée* (Paris; Flammarion, 1978).



Fixed tonus, incapable of conscious or unconscious adaptation, is shown in the diagram below:



A voluntary and immediate change in tonus can be achieved in practice. It is experienced subjectively as a feeling of heaviness or of lightness. Objectively, it is verified by controlling the myotatic reflex, that is by voluntary suppression or, on the contrary, by the reinforcement of the patellar reflex. Daily practice demonstrates that a high tonus strengthens the patellar reflex and a low tonus can eliminate it. The proof of the capacity of tonus regulation is to lower the tonus of the thigh in such a way that even a strong electric current cannot contract these muscles.\*

While manipulating a subject who is immobile but can alter his tonus at will, the teacher can note easily the variations in tonus from the weight differences in his body. This enables us to understand better why Eutony is not only a method of relaxation, though it enables the pupil to gain control over his tonus at all levels down to deep relaxation and sleep, but also gives him the ability to find the correct tonus in all circumstances.

\*Research done in C.N.R.S., Paris (Centre National de Recherches Scientifiques), 1979, Prof. J. G. Henrotte.



When all fixations of muscle tone are eliminated, voluntary change of tonus is achieved as follows:

Hypertonus Lightness	By the awareness of three dimensional bone form. Awareness of bone structure. Inner body space.
Normal tonus	Through touch of the skin.
Hypotonus Heaviness	By contact with the ground. Mass of the body. Mass of muscles and bones.

In Eutony training, the teacher constantly watches the pupil's breathing, its rhythm, and the duration or near-absence of the respiratory pause. Any rapid change in tension can cause an emotional upset or lead to an anxiety situation.

Action on breathing is not carried out through direct breathing exercises, but indirectly by releasing those tensions which prevent the fullness of a normal, free, unobstructed respiration. This is obstructed by tensions which may be found in the pelvic musculature, perineum, diaphragm, intercostal muscles, shoulders, neck, hands, feet, the digestive and intestinal apparatus. If these tensions can be eliminated, breathing becomes normal by itself. If, however, voluntary breathing exercises were performed, these obstructions are apparently overcome but they reappear as soon as the exercises are discontinued. Confirmation of this observation is to be found frequently among pupils who have done breathing exercises, such as physiotherapists, actors and athletes. In general, it takes longer with such pupils to normalize tensions since their muscular and organic fixations resist more.

In spite of the great importance we attach to breathing, we avoid mentioning it—especially in the beginning. In a group, when the word *breathing* is mentioned, the breathing of everyone changes. It becomes voluntary, loses its individual nuances and is then less adapted to the real and constantly changing

needs of the person. For the teacher, too, it loses its value as a source of information about the psychosomatic state of the pupil.

We are aware that it is extremely difficult to observe our own breathing without exercising any influence on it, even if body consciousness has become relatively well developed. Since the act of breathing is unconscious most of the time (except when speaking or singing) the normalization of this involuntary breathing is very important. It is through breathing that the unity of the total personality is observed and influenced easily. Once an equilibrium of tonus has been attained, no special exercises are necessary to adapt breathing to the needs of the moment, whatever they may be.

There are other methods through which this kind of breathing can be attained. The Schlaffhorst-Andersen School in the Federal Republic of Germany, to which I am indebted for a number of original ideas, and the practical and scientific work of Professor Horst Coblenzer and Professor Franz Muhar, Vienna, are in this respect related closely to Eutony. Eminent teachers have obtained good results through totally different approaches. But without competent guidance, mistakes are made which can lead quickly to the kind of mechanical exercises too often seen in sports, physiotherapy and other disciplines.

Many of the respiratory techniques taught today are from cultures other than our own. Their exercises, developed over thousands of years, are based on psychosomatic effects suited to a certain time and a particular culture, and they were taught by masters working with their disciples under special conditions. Our situation is very different. We have to find methods that correspond to our culture, that can liberate the breathing process. People should be capable of understanding the physiological and mental influences of breathing with the help of the latest scientific findings.

## *Circulation*

It is well known empirically that the temperature in the different parts of the organism rises when attention is given to that

area. From the beginning of Eutony work this fact has been used to improve the circulation in various parts of the body, in the outer and deeper skin, the outer and deeper layers of muscles, the inner organs and the bone structure. The modern electronic skin thermometers show that this change of temperature begins at the moment that attention is focused. Research made at the University of Louvain-la-Neuve in Belgium with three groups of physiotherapist students shows clearly that the group which had followed 90 Eutony lessons during a year had developed a greater capacity to raise the temperature than the two control groups without knowledge and practice of Eutony.\*

## *Touch and Contact*

In Eutony, a distinction is made between "touching" and "contact." In touching, we experience the boundaries of our organism and our external body form. Touching also gives us essential information about the surrounding world, its shapes, temperature, consistency and the numerous sensations coming from outside.

In touching we do not reach beyond the surface. In eutonic "contact" we move consciously beyond the visible boundaries of the body. Through this "contact" we can include also the surrounding space in our awareness. Thus, without touching, we are able to make real contact with other human beings, animals, plants and objects, passing through external boundaries.

This conscious "contact" has greater influence than "touch" with regard to changes in the tonus and the circulation. Eutonic "contact" of the feet with the ground or of the hands with tools or materials, during modeling for example, produces a

\* Research conducted by Pierre Debelle, licenciante, for a thesis of Mme. Paulette Friedman. Supervisor: Dr. Georges Marechal, Professor of the Medical Faculty. Measurements taken with Digitec Datalogger manufactured by DIGITEC, 918 Woodley Road, Dayton, Ohio, 45403.



harmonization not only of the tonus but also of emotional tensions.

A conscious influence on the equilibrium between the orthosympathic and parasympathic systems, its effect on the circulation and hormonal equilibrium, is attained by the technique of "contact." This technique permits stimulation or inhibition of the autonomic functions and reestablishment of the equilibrium of the autonomic system.

"Contact" is also used in life situations. Good craftsmen contact objects through their tools; good musicians become one with their instruments. The Swiss psychiatrist J. de Ajuriaguerra calls this expanded consciousness "the delegated function," and this consciousness can be developed and strengthened with training.\*

With eutonic movement, which incorporates total body awareness, we widen our "presence" through space by means of "contact." We include also the other person's space or that of the group, plus the three-dimensional space underneath the feet.

Aside from its effects on breathing and circulation, this multidirectional contact with the ground has a clearly perceptible and specific influence on movement. The use of ground contact has particularly impressive results with movements and actions demanding great efforts. These can be performed with the minimum expenditure of energy by a very precise use of direction and angle of the lines of forces.

The unconscious ability to make contact is innate. It is first manifested in the mother-child relationship. The faculty of becoming one with another person, like the baby with its mother, can be learnt and experienced through the eutonic "contact." But this is only the first level of work in Eutony.

The conscious contact with a partner whose personality one respects, and the space around him in which one does not lose oneself in spite of a total opening toward him, is another stage which can be attained through the development of this capacity.

The next step, which involves the ability to contact two

\*J. de Ajuriaguerra: *"Méconnaissance et hallucinations corporelles"* (Corporeal Misperceptions and Hallucinations), (Paris; Masson & Cie., 1942).

other persons simultaneously, without losing the awareness of oneself, is more difficult. Another simple example of the difficulties of contact is, when people do not like to be invited together, because they cannot deal with different people simultaneously. This kind of difficulty may become a serious problem for couples when they have their first baby; the mother is not able to have contact with both. Either the father feels left out, or the baby lacks a real contact.

Lack of contact is clearly to be seen during movement in space. Once the ability to make contact is acquired, the widening of it to include two, three, four or five persons does not raise any problems, if each has been able to reach the same degree of maturity and understanding.

If we have two persons or a group walking together in "contact," even if they are separate in space, and the dynamic and the rhythm are changed, the contact can be kept, and in fact it opens the way to a dynamic expansion of each individual member of a group toward a genuine togetherness. So to be three persons, and not simply two plus one, capable of a simultaneous opening and each toward each other, is a sign of developing maturity.

Such togetherness should not be confused with that which can be obtained through a musical accompaniment or drum-beat. In that case, it is the domination of the music or rhythm which creates pseudo-liberation and group feeling, while the real contact between individuals is weakened. Movement groups of this latter kind are far easier to set up. They are used in ballet, theater, Dalcroze eurhythmics, and other performing arts. Used in therapy, they are valuable as a first step toward group experiences. But even if there is a certain feeling of unity in these groups, the dynamic exchange between each member of the group with the others is missing.

A certain impression of togetherness also appears in social gatherings where the consciousness of the group members is lowered by socially accepted drugs. But the aim of eutonic movement and "contact" is to increase and expand individual dynamics into a conscious contact interchange between each member of the group.

Conscious contact with another person has also a therapeu-

tic application. Once you have acquired the capacity of balancing your own tonus, you are in a condition to observe and to influence others, feeling their disorders and blocks in your own body by making eutonic contact with them.

## 2 EUTONY EDUCATION

Eutonic movement and eutonic forms need a conscious presence—in both pupil and teacher—similar to that in meditation. A Eutony teacher and therapist must learn much more than the intellectual and technical aspects of this art: he must learn to experience Eutony in his own body. For the pupil, this means at least four years of study as a rule in order to develop the sensibility essential in Eutony. The development of this faculty is primordial, and the pupil must be able to exercise it in all circumstances, not only in sheltered isolation, but in any external conditions found among the distracting influences of urban life.

One of the most important tasks in Eutony teaching is to develop in the pupil the capacity to observe objectively and nonjudgmentally the reactions of his own body. He must be able to distinguish between imagined and real sensation and not be deluded by fantasies which are as harmful for the body as for the mind.

The experience that all thought, however abstract, has a real effect on the entire organism is basic to Eutony work. Geometric forms such as straight lines, waves, zigzags, circles or triangles, which are all forms habitually conceived of as having no effect on the body, actually do produce palpable and measurable changes in the muscular tonus and the circulation. Our understanding of this phenomenon is confirmed in our daily observations in the school.

Similarly, it is known that negative feelings such as distress, hatred and jealousy are accompanied by body changes. Distress is often accompanied by hypertension in the lower pelvic muscles, the muscles of the stomach and the diaphragm. For most pupils, the objective observation of body sensation is a



very impressive first experience, especially if it is intensified by teaching giving rise to changes which can be measured: pulse, temperature, tonus. It is necessary only to direct the attention to a foot and its various parts: toes, metatarsus, instep, sole, joints, to produce, even among the noninitiated, perceptible and measurable changes in the circulation and muscular tonus. In making slight movements with one foot only, pupils notice a distinct difference in sensation from that of the other foot.

With the same exercise, sensation can vary considerably according to the state of the individual. The hypotonic person will feel his foot lighter and more alive, whereas the hypertonic will feel some heaviness; another will feel a tingling heat and a fourth will feel cold. In any group, only a few pupils will report the same sensation. Eutony avoids suggestion as much as possible. Methods based on suggestion rely on a weakening of the consciousness and therefore prevent an accurate observation of processes manifested by the organism at any given moment. For this reason, during the period of learning, Eutony is incompatible with other body-work techniques.

A similar exercise may also lead to different or contradictory reactions in the same person at different times. The reaction must therefore be noted in relation to the existing situation which depends on the psychological state and the various conditions of the environment, such as atmospheric pressure, or radioactivity. These experiences condition the whole pedagogical and therapeutic method of work. They show teachers and pupils that there is no permanently valid solution. One cannot forever rely on formulas which once gave good results; it is important to reexamine them constantly in accordance with the reality of the moment.

The teacher must develop the capacity to observe the pupil's behavior, posture, movements, tonus, breathing rate and quality of voice, circulation—i.e. all the nonverbal manifestations which indicate his physical and psychic state. The teacher must also feel in himself the pupil's tonus condition.

All these observations and the teacher's subjective impressions can be confirmed objectively by the tests referred to in the preceding chapter. Among these, the "control positions" make

it possible to observe the condition of the joints and of the muscular elasticity, whereas the "passive movements" show the subject's capacity to master the motor innervation and myotatic reflexes.

The group training and individual lessons are drawn up on the basis of this information.

In the process of speaking, the teacher experiences each set task in his own body. Each time, therefore, his indications are based on his actual feeling and personal experience and are not just mechanical repetition. He rarely demonstrates what is required since it is not a question of imitating, but of allowing the pupil to make his own experience. The pupil must feel in himself the laws of tonus change and good posture reflex or the consequences of a consciously directed effort. In proposing a new task, the teacher allows the pupil to discover these laws and to reexamine them in ever new situations so that in each one the pupil becomes conscious of his psychosomatic unity.

The teacher should give indications in clear terms with no suggestive overtones, enabling each pupil to experience his own reality. Reference may be made to a change in temperature but not to heat or cold. The pupil is asked to feel his body with no suggestion of the quality of the feeling.

In any case, the departure point of the practical work must differ according to whether it is a matter of professional training in Eutony, of people having difficulty in exercising their professions (musicians with technical or rhythmical problems, actors suffering from stage fright, dancers or athletes with overworked muscles and joints), people who are ill and have tried many other treatments before coming to Eutony, and those who are trying to develop and grow harmoniously as integrated, creative persons.

## *Group Work*

There are great advantages to be found in group work. A group is enhanced by the diversity of the personalities which compose it. For this reason it should consist preferably of not

less than eight participants, provided that the teacher has enough experience to perceive and understand each member's personality. Group teaching can be supplemented if necessary by individual lessons and treatments. But although the profound and manifold possibilities of individual therapy can rapidly produce results through Eutony, the beginner is rarely capable of consciously integrating the transformations of his body image and body gestalt, which is a primary condition for acquiring long-lasting results from the treatment. Instead of becoming independent, the pupil runs the risk of becoming dependent on the teacher. It is only at a later stage, when the pupil has developed the ability to observe his own reactions that treatment, carried out by the teacher, will greatly improve the pupil's body image. Over the past fifteen years, however, group lessons have achieved results for sick pupils who formerly needed individual treatment.

In a group, the pupil has less feeling of being watched. He has time to develop his own working method which will prepare him for working alone later. The teacher observes the pupil's reactions and adapts the work proposed until the pupils themselves become conscious of their reactions and that of the other members of the group. The varying individual ways of reaching the same goal are an enrichment to everybody in the group. This result cannot be obtained to the same extent through individual treatment. Group work is most important in the training of a eutonist. The whole range of possibilities of mutual observation within the group, close contact with the other group members, whose development is assisted by the trainee's own development, deepens the understanding of differing personalities and prepares for an essential quality in future teachers, i.e. the capacity to observe the person as a whole through body expression and behavior. The observation of movement in a group provides unsuspected richness and opens up possibilities which the individual cannot find alone. This improvement comes from the need to adjust one's own tonus, tempo and rhythm to that of the group without losing one's identity. We shall go further into this concept when we study movement.



## *Control Positions*

### *Test for Muscle Tensions*

In order to avoid any confusion, it must be understood clearly that the "control positions" in Eutony have a totally different purpose from those used in the postural practice of certain methods such as yoga. The control positions enable us to see if our muscles have the correct elasticity and length which are the primary conditions for the optimal movement of the joints and for the functional posture and movement. If the muscles are normal length, these "control positions" can be assumed automatically and without difficulty by children or by adults of any age as positions of repose. However, if the muscles are shortened due to a tension, whatever its origin, the control positions will be uncomfortable, painful, or even impracticable.

This is why the "control positions" enable a person, alone and within a few minutes, to become aware of the points of tension in his body.

Furthermore, after a certain practice in Eutony, the control positions may lead to other possibilities. It is possible to link various "control positions" together in a series by adding "touch," "contact" with the environment, feeling of "inner space," awareness of bones, and similar sensations.

Only when the pupils have acquired the capacity for continued "presence" in their work are they ready to participate in group work joining the tonus of the group. Whether in a group or in individual work, the pupil must learn to let these control positions flow into one another in a continuous movement.



1. Kneeling, seated on the heels, the toes pointed forward. Keep feet parallel. All the toes, including the little ones, are in contact with the ground. The weight rests on toes, heels and knees. Control of the toes and feet joints.





2. Kneeling, seated on the heels, but this time the feet are extended, the toes pointing backward. Keep feet parallel. The weight rests on the whole lower legs and feet. Control of ankle joints.



3a. Seated on the buttocks between slightly spread, bent legs. The sit-bones must touch the ground. Control of the knee joints and the anterior thigh muscles.

3b. The same as 3a. Now bend forward from hip joints only.



4. On hands and lower legs. Cross one leg over the other. Sit back between the crossed, separated lower legs. Then bend forward from the hip joints only. Change legs and bend again, only from hip joints. The sit-bones must touch the ground. Control of the posterior muscles of the thighs.



5. Seated with crossed legs. Place one foot on the opposite thigh, the other *beneath* the opposite thigh—or also *on top* of it if possible. Bend forward from the hip joints only, the back remaining straight and without lifting the sit-bones from the ground. Control of the hip, the knee and foot joints.

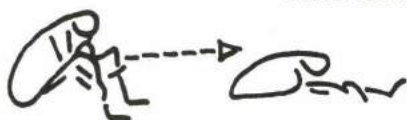
6. Seated with crossed legs, but instead of being overlapped, the legs are bent with one foot in front of the other. Bend forward from the hip joint, back straight. Control of the adductors and hip joints muscles.



7. Seated on the heel of one bent leg, extend the other leg laterally(a), then sit in between the legs, keeping both legs in their original position(b), rotate the trunk slightly to one side, bending from the hip joints forward over the extended leg. Control of the adductors and hip muscles. Change legs.



8. Seated, legs bent, hands placed on the lower half of the shins, arms between the legs. Stretch the legs forward slowly. The forehead remains on the knees. Control of the muscles and joints of the neck, back and legs.



9. On the back, swinging legs back and over until the knees are beside the ears. Control of back, neck and spinal-column muscles.

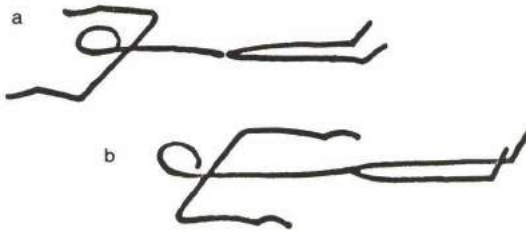


10. Lying on the back, hands under the head—feet flat on the ground. The two knees fall to left and right without separating the shoulder blades from the floor.





11. Lying on the side (a): Both knees remain in contact with the ground, while turning the upper shoulder blade behind toward the floor and continue with the arm until the diagonal position corresponding to this knee should normally touch the ground in position (b). Then come back with the arm, rotating over your head from the tip of the fingers, touching the floor until you come to the starting position. Control of spinal column and back, shoulders, arms, hips, thighs.



12. Lying on back (a) hands-up first, then (b) forearms rotate into a downward position, then into backward position. Shoulders, elbows, wrists and fingers must (without effort) remain in contact with the ground. Control of shoulders, arms and hand joints and muscles.

### *Awareness of Joint and Bone Structure*

In "control positions" we try to achieve maximum freedom of joint movements and appropriate length of muscles for our

movement in the outer space. The attention towards our "inner space" leads us to become aware of circulation, breathing, tonus and our bone structure. In the early days of Eutony, the training ended with the development of awareness of the skeletal system. Today we consider it important to begin this study as early as possible to diminish the effect of the ever-growing tendency toward physical degeneration and all its consequences. Disc degeneration, spondylosis and osteoporosis are some examples.

Experience has shown that awareness of bone structures also gives an inner security in cases of psychological disturbances. This new approach is essential not only for the general movement training in gymnastics, dance and sports, but even more in daily life and work movements and in therapy. We can become aware of the effect of postural reflexes by following them from the arch of the foot, passing along the tibia, through the knee joint, the femur and its neck and head, then through the hip joint to the small pelvic girdle and to the upper part of the sacrum toward the vertebra bodies up to the "atlas" post-cervical vertebra. This can be done practically by starting not only from the feet but from any other part of the body against a support, such as the hands and shoulders, ribs or in the sitting position, beginning with the ischial tuberosities (the pelvis "sit" bones) through to the head. But we can also stimulate the postural reflex from nearly all parts of the body by pushing legs, hips, the trunk, shoulders, arms or hands against a resisting body: such as the floor, a wall or a person—or a heavy object like a piano, which gives resistance to our bone structure through the surrounding muscles. The awareness of bone structure releases the tension of all muscles connected with these bones, and liberates breathing and circulation. In consequence, the body feels light even when using maximal strength.

Trying to find a way to work with fractured vertebrae and osteoporosis, I discovered the possibility of making the "micro-stretch" and even of working only with the "intention of making a stretch movement" in a localized place. By working with only the intention of making a movement, and not actually doing it, we get all the benefits of small muscle tonus change with increased circulation. This work, after some practice, is still more



effective if you ask the person in a lying position to release the whole envelope of muscles around the bones and then to try to have the "intention of gliding" the bone only towards the periphery without moving outer muscles and skin.

Although there is no activity to palpate from the outside, the person feels a stretch in all muscle attachments to the periosteum, in ligaments and in joint capsules. There exists a feeling of change of pressure against the floor, for example in the touch of calcaneum, sacrum, shoulder blades, and other bones. Myographic measurements made at the Panum Institute, Copenhagen (November 1983) do not show any muscle innervation.

This experience can be developed in total quadriplegics, by lifting their legs before the eutonic work and after; you can observe a great lightening of weight.

The therapeutic results of working with "micro-stretch" and intention of movement like the "gliding bones" are:

- (1) Release of deep muscle tonus fixations
- (2) Increasing circulation

(3) Equalization of muscle tonus also in deep-lying muscles (similar to the effects obtained in doing eutonic movements starting from the periphery, or working with the eutonic elongation).

Lordosis and fixed pelvis are the main reasons for abnormal postural reflexes, whether they are caused by sick organs, emotional or sexual disturbances or by false ideas in gymnastic training (Olympiad gymnastics). As long as the lumbar region is not normal any posture corrections from the head or dorsal column are only symptomatical, not causal corrections. It is only after "transport" has been studied in all positions, in walking and in pushing and pulling from any part of the body, that the skeleton becomes a living reality to the individual.

Through vibrations we can experience the quality and consistency of bone structure, the difference in stability, elasticity and porosity, and the living energy in bones. After vibrating only one leg, increased stability is perceived, even for people who are not trained. The difference of the support in the two legs is evident not only in the leg bones, but up to the half side of chest, neck and head. By experiencing the bone structure, we arrive through the periosteum at perceiving the three-dimen-



sional form of the bones and their placing in the inner space of the body. Vibrations through the student's bone structure have been an important tool in Eutony pedagogy and therapy for more than fifty years. Vibrations awake awareness and normalize disturbed functions (flabby babies, children with abnormal postural reflexes from the beginning, people paralyzed as a result of traumatic medullar section at various levels, lumbago, displaced vertebrae, as well as dysfunction of inner organs). The students learn how to do vibration on themselves from hands and feet against a resistance (floor or wall) as well as vibration of their vocal cords (by humming), developing the sensation of the inner space of the body from the head to the rib cage, the sternum and all joints of the ribs, vertebrae, to the shoulder girdle, to arms, hands, pelvis and legs and soles of the foot, including all inner organs. Every unnecessary tension in the organism can be detected in the voice. (This fact had already been discovered by Clara Schlaffhorst and Hedwig Andersen in Germany around 1920.)

The vitalizing effect of vibrations can be observed especially in paralysis and in cases of hormonal depression, after severe virus infections in aging people, probably due to the fact that vibrations on the body produce piezoelectricity in the bone crystals. In 1901 the Curie brothers discovered that mechanical energy produces electricity in crystals. This discovery was soon used in the construction of radio detectors and transistors. That a similar process develops electricity in the human skeleton while moving, vibrating and rocking was not paid attention to; not until the beginning of the 1970s, when an article in the *Belgian Physiotherapy Review* dealt with the piezoelectricity in human bone structure. Probably this is one explanation for our good results with revitalizing through vibration.

In order to obtain optimal circulation in deep-lying muscles, especially around the spinal cord, we use the anticipatory innervation through the intention of small stretch movements, without executing the stretch as such. This innervation always exists before any movement in order to prepare the tonus and circulation adequate to the movement in question. By only intending, we avoid the movement itself, which means that we avoid the motor innervation and the metabolic demands of

movement, the lactic acids and waste products, and only tonus and blood circulation are increased. The therapeutic effect of this work is astonishing not only for circulation troubles, hypo- and hypertension and serious heart disease, but also for legs, arms, and back muscles paralyzed for many years after poliomyelitis or accidents. The effect is greater still if, in a lying position, we try to relax deeply the envelope of muscles around the bones, e.g. in one leg, and then intend to glide forward only the bone, parallel to the floor and without displacing the skin or muscles. One arrives at dissociating the outer muscles from the deeper layers, probably only at stimulating the anticipatory innervation of deep muscles, as no muscle tensions are to be felt from the outside.

The results are (1) a profound release of long lasting tension of deep muscles, often followed by psychological reactions; (2) an increase of blood and lymph circulation, and raising of skin temperature; (3) an equalizing of tonus in all muscle fibers of muscles attached to the bone in question. This latter effect of tonus equalization had already been known in Eutony movement education: "designing" moving from the periphery of leg, foot, arm, shoulder, girdle frees tonus fixations in deep and outer muscles and leads to optimal freedom of all joint movements. Subjectively, a stretch in all ligaments and joint capsules and muscles attached to the periosteum is observed; the pressure of the heel bone seems to give variations of pressure forward towards the periphery, although you cannot observe any change in the touch of outer skin and muscles.

The strengthening of the total person, brought about by bone awareness and tonus regulation, is a valuable preparation for the release of deep emotional tensions present in the perineum, the diaphragm, the intercostal and the scapular girdle muscles. It can be noted that the observation of the postural reflex at the different points of the spine, the form of the vertebral bodies, the discs, the direction of the transverse and spinous processes, have a well-determined influence on each segment. Even though we have relatively few sensory receptors in the back, we have mechanoreceptors in all vertebral and rib joints capsules. These receptors give information about movements and postural sensations and direction in space. We have

always noticed that a false body image, either conscious or vaguely perceived, disturbs physical functions. How many inhibited movements, dorsal troubles and arthroses of the hip could be avoided if physical educators had developed at least a correct experience of the position and shape of the hip joint and the function of the spinal column, instead of having only an intellectual knowledge of anatomy. We can see from the body-image test that even doctors and body workers rarely possess a correct image of the living organism. The consciousness of the skeleton as a whole appears mostly after years of work and nearly always unexpectedly. Its complete efficiency and the beauty of its form possess all the possibilities of any style of movement within itself.

### *Movement*

In Eutony teaching, the growth of awareness gained in work on the ground is integrated into movements through various forms of stretching and discovering optimal movements of joints. All movements must maintain contact with the ground and the surrounding space, combined with awareness of the inner space of one's body with the quality of bone support, breathing and circulation.

In this research, the pupil becomes aware of the blocks in—and limitations of—his movements and of his own stereotyped movements. The blocks and limitations could also be the expression of psychological disturbances. Most of the time, however, it is a question of stereotyped movements, expressing past psychological difficulties. The movements and their limitations may also be an imitation of postures or movements of other persons (parents, teachers or models) or the adoption of the style of various dance techniques (classical ballet, jazz, modern dance). The more the individual is influenced by given patterns, the more difficult it is for him to become aware of the fact that his own capacity for expression has not been developed.

I have noticed during my observations that, in gymnastic and dance demonstrations, very few performers express their



own personality in movement, although the liberation of the personality through movement is the aim in all modern dance school programs. On the contrary, everybody follows the style of his school. It is evident that famous dancers put their stamp on their groups, but in the education of a dancer it is important to allow the pupil's personal way of expression to develop.

Even in teaching the natural laws of movement, the pupil must be given time to discover his own rhythm before adjusting to that imposed on the entire group.

I have tried to find means of enabling each pupil to discover his own possibilities of movement and expression and at the same time to develop his artistic and social capacities through conscious regulation and adaptation of his own tonus. Movements intended to explore all articular and muscular possibilities of the body are practiced with a total bodily awareness, but without emphasizing any particular expression.

Each pupil experiments with his various possibilities without demonstration from the teacher, and with no indication either of rhythm or form and with no musical stimulation. Even at this stage such exercises reveal unsuspected forms of expression to some of the pupils, while for others months of work and research are necessary before they can free themselves from traditional patterns and find the desire and strength to discover their own form of movement.

Through mutual observation, the group recognizes spontaneously that each pupil reveals a clear image of his psychological state. Each one learns during the studies to develop the capacity to experience the movements of the others in his own body, whatever the degree of body awareness the participants may have reached. Such participation in the movement of a particular member of the group during the sessions creates a special atmosphere: a group presence, or a dynamic unity between performer and observer. When a pupil has developed the theme of a movement in all its possibilities of improvisation, he selects the elements of the movement which seem best to him for creating a form suitable for repetition.

## *Inner Space*

### *The conscious awareness of the three-dimensional body*

The "inner space" including bone structure, muscles, tendons, ligaments, inner organs, circulation and breathing begins with the development of the clear sensation of the distance between the sides of the outer body form: from right to left, from front to backside, from feet to head, avoiding any unclear, mystical sensations of the "inner space." Everybody should be aware of how much space his own body takes, including the surrounding space, in the same way as a good car driver knows exactly how much space his car is needing and where he can just manage to park it.

Consciousness of the inner space equalizes all superfluous tensions in tonus, circulation and breathing. The movements become free and you experience the body space in the outer space.

The experience of the total inner space surrounded by the outer space is perhaps the deepest and most enriching experience in Eutony.

Nuclear physics can perhaps give us the explanation: in each atom the enormous empty space between nucleus and outer form is filled with consciousness: with spiritual energy.

The inner form thus developed has to be refined and shaped until the inner and outer form become one. During the necessary repetitions, the movement must continue to be lived through and consciously experienced. The necessary "presence" at a given moment in order to master a form which one has created requires as much spiritual discipline as that for meditation. Awareness of the "inner space" with its center of force in the spine ("transport") and a breathing process freed from emotional tensions must be sustained not only in calm and isolation, but also in action.

In the dynamic process of movement, with awareness of one's own inner space, there appears a relationship with the surrounding space and the body space of others. A new consciousness develops which includes simultaneously both the inner body space and the surrounding space.



To create a complete form of movement in space which does not consist of disconnected gestures requires a complete evolution with its own laws. It has to have one inner dynamic structure which is clearly perceived as a whole and must be present in the performer from the beginning to the end.

To develop this capacity, the students are asked to make their own experiments with eutonic movements, in total reaction of bone structure in maximal and minimal strength, as soon as a theme has been developed in group lessons; especially free drawing in space from the periphery of different parts of the skeleton, leading to movements different from traditional movement patterns. The students play with their new movement capacity, improvising and repeating interesting parts, until a form begins to take shape which can be repeated and developed. We call such a form a "study." It is highly interesting to follow each student's development and enrichment of his forming capacity in his studies.

A former student, Karin Sackmann, eutonist graduated in 1980, writes about her experiences with movement studies:

Side by side with the breaking down of the body blockades through the Eutony exercises, psychological blockades are liberated which free latent energy for creative activity. The feeling of one's own inner quality, one's creative power, grows and seeks expression. The growing capacity for experience of the deep layers of one's consciousness takes hold and strives for expression.

The eutonic movement contains the complete series of Eutony education: consciousness of inner space, consciousness of the bone structure, sensation of the skin, the outer form of the body, gravity and antigravity forces ("transport"), the play with resistance, contact with the surroundings, and the movement in space and time.

We begin with small movement improvisations, each time placing the emphasis on another aspect of the Eutony education; for instance the inner-space feeling or the contact with objects. Slowly more and more aspects are drawn in. The development of the movements and rhythm arises out of one's own vital sense and is not influenced by outer stimuli, such as a set theme or music. It is an intuitive letting-go-of-oneself, a being-taken by the movements.

The movement has no intention to take one from one place to an-

other. It has no goal, no purpose. It is an expression and experience of one's own person.

If this improvisation coming from the sensation of the body and mind is repeated, slowly a central structure is crystallized: the essential form—making possible repetitions and reflections representing the spiritual principle. Without this form, this spiritual quality as a counterweight, an overflow of feeling may arise. The Eutony education knows that body and mind do not mean the total person, but that only if the spiritual aspect expressed in the outer form is added, is the holistic person realized. Only then does this being-in-movement become being-conscious-of-oneself: the consciousness of one's own "I."

In the beginning, improvisation and "study" are performed alone. Gradually the growing consciousness allows the contact with one and later two and more partners. The individual members of the group perceive the tonus and rhythm of the others; a tonus adaptation is not forced, but grows naturally through the sensing of the other persons. Thus it is not a question of giving-up-oneself in the group, but of contributing with one's individuality to the group-fellowship. Consequently the "study" leads to an improvement of social conduct and human togetherness.

In the beginning, some pupils feel that working toward a set form is a limiting experience. Nevertheless, creating a form in the surrounding space around oneself, integrating oneself into a rhythm, is a basic human need. Certain rituals of ancient cultures—counting-out rhymes and children's games—are examples of this need for pattern. Young people themselves, while contesting the social structures around them, still seek to satisfy this need in certain folk dances which are regulated by tradition. However, as far as Eutony is concerned, the only interest in these first attempts to discover form lies in the fact that it leads to the next and essential stage: the crystallization of the improvised form by each pupil which represents an important moment in self-understanding. The creation of a form is not only an artistic requirement but also a pedagogical one, and this leads to an understanding of the equilibrium of content and form, in space. The results are never judged on purely artistic criteria. In any case, during training, the creative capacities develop.

The performing of movement studies created by other students uncovers difficulties which were hitherto unknown, since each individual instinctively avoids his own limitations in his movements. In order to ensure that pupils who have no real need of expression do not express themselves by stereotyped movements and thus lose themselves in sentimental exuberances, emotionally charged themes are proposed by the teacher only for therapeutic purposes. However, deep-seated emotional needs are sometimes expressed spontaneously during improvisations or studies. Great importance is given to the harmonization of the psychotonus: the adaptability of the basic tonus which enables the pupil to express the whole range of emotions. In musical education, in rhythemics and music therapy, the aim is to acquire harmonization and mobility of tonus by the influence of music.

In Eutony, we begin with an awareness and liberation from tonus fixations which are the symptoms and consequences of many inhibitions and traumas. After each student has succeeded in the regulation and equilibrium of his own tonus, he can adapt himself to greater variations than those allowed by his own limits. With some students this possibility of adaptation is well developed, while with others it must be motivated. In all artistic activities, in fact, the attention must always be on the capacity for tonus adaptation. When an actor plays a role on the stage and re-creates a particular character through movements and voice, he does this through a transformation of his own tonus. To enable an audience to follow and to vibrate with him, a conductor or a musician must feel the dynamics of music through his whole body, down to the most subtle elements of the musical composition. The liberating and therapeutic results of all great artistic events which are deeply experienced, the catharsis produced by the Greek tragedies, the cures brought about by music, stem from the fact that individuals are touched profoundly and thus freed from deep tonus blockages.

Any personal relationship, if felt deeply, is also accompanied by a corresponding change in tonus. For this reason, tonus regulation and its adaptation are central to Eutony teaching. It is consciously sought from the beginning, first in an attitude of repose, then in simple movements, and finally in interaction



with a partner or a group in which neither one leads nor is led but where common movement in space is achieved.

### *Contact with Others*

The practice of Eutony has very important repercussions on personal development and on the nature of relations with others and the environment. The work with adults never begins by touching and contact exercises between the pupils themselves. Muscular tonus is transmitted unconsciously during bodily contact, and tensions can thereby be appreciably accentuated. In cases of dystonia, a well-trained teacher can transmit his own tonus equilibrium to the pupil through a "conscious touch." If, however, touching takes place between pupils, such contacts may help them to emerge momentarily from their isolation, but they can also transmit their own disturbances to each other. This exchange can never result in better equilibrium or more freedom for any one. Since most people today are incapable of recognizing such disturbances, this interchange remains at the unconscious and harmful level. Specialists of the various techniques of group therapy, using direct body contact, are aware of this danger, but can use body contact beneficially as a first step in the context of a prolonged psychotherapy.

Over several decades of practice, I have acquired the certainty that the capacity of contact can be developed without direct touching. This follows as soon as the regulation of the tonus and the orthosympathetic equilibrium have been achieved through exercises involving contact with the ground, objects of daily life, and with the surrounding space. In this way, the unbalanced person is not freed too abruptly from his habitual fixations, a liberation which could lead to a loss of identity. If these fixations are experienced consciously, it is possible to work towards a new equilibrium of the vital forces and creative possibilities. New capacities are thus developed in both the personal and professional life, and in practical, intellectual, artistic or therapeutic activities.

It should never be forgotten that everyone receives con-

scious and unconscious physical and psychological influences from others. During the work the pupil begins to notice changes in the climate of his relationships and activities and his life. Even psychosomatic difficulties in the family milieu may disappear, especially in children. Similarly, when two people have a good personal relationship, and one of them begins on this path of self-development, the other may feel the need to follow or to break up the relationship.

A profound body awareness and the capacity for real contact make a complete union with another possible. Such an experience, without doubt the most important that a human being is capable of achieving, leads to a new attitude toward sexual relationship. It takes on both a physical and spiritual dimension, which can lead to a profound inner peace.

## *Summary*

From the very first experience of Eutony, each new observation is accompanied by a change at a body level whose physical effects can be observed and measured. They provide evidence that all work with the body, functional or not, influences the whole person, even if one is not always aware of it. Areas of the body which previously had remained unresponsive and emotionally inhibited are discovered progressively by the pupil. A deeper body awareness and a conscious dynamic equilibrium in the tonus, as well as breathing, posture and movement can significantly improve the mental and psychological state.

It has become commonplace to say that there is no separation between body and mind. Since the body is also mind, it contains traces of the individual and collective conscious and unconscious. Therefore it must also be able to express the totality of each unique personality by means of the infinite riches of its own possibilities together with the past history of humanity and all the future potentialities of the species.

Eutony is devoted to this never-ending quest.



### 3 EUTONY THERAPY

There is a sharp contrast between the medical model of treatment and the Eutony model of treatment. Over the centuries the medical model has made the patient into a passive subject for the medical world. Eutony treatments on the contrary can proceed only in the most thorough dialogue between pupil and eutonist. This dialogue is primarily nonverbal and requires an enormous moral and intellectual effort on the part of both pupil and therapist, to come to a body-body communication, connection, dynamic interplay in complete freedom.

In eutonic therapy, the therapist has to have a balanced objective attitude and respect for the state of the pupil, at the same time clearly observing skin and muscle tone, breathing rhythm, breathing limitations or impediments, movement coordination, the way the pupil looks at you, acts and behaves.

Second, the therapist makes a contact by touching the pupil in order to feel the pupil's capacity to discharge tensions, his blocked energy, his resistance to release.

Then comes the observation through touch, of the flexibility of muscles, the stability of bone structure or the missing of the "transport," and the conditions of the skin, to strengthen the pupil's vitality through skin awareness.

While the eutonist is treating, he has to be absolutely conscious of his own body and, in particular, very flexible in diaphragm and breathing, pelvis bottom, neck, shoulders, arms and hands. At the same time he has to be in a state of "neutrality"; to be open to wait, to receive and to be able to balance the pupil's reacting without forcing or invading him.

If the pupil cannot react, the therapist increases the awareness and order of his own body, feeling in his own body the

specific parts where the pupil's body has difficulties. After a while, the pupil's body reacts by normalizing the tonus.

After my very long experience of seeing how the body can be affected or influenced by another body, I can never emphasize enough the dangers of making contact or touching other people without mastering your own organism.

Once very deep-rooted difficulties are overcome, we try as quickly as possible that the pupil learns how to control the way he moves, sits, uses his arms, and so on, to avoid that the usual pattern of tensions takes over again. The pupil is required to take full responsibility and active participation to overcome his difficulties.

In terms of resistance, Eutony differs completely from the body techniques derived from the Reichian work. We don't force or attack a person who presents resistances. We respect very much the way the person defends his own integrity, his own biography in his body. His resistances represent his own unconscious weaknesses or difficulties. We try to help him to develop his own inner concrete security through the conscious support of his bone structure, by working with "transport" and "*repousser*" (the use of force combined with transport) until the person does not need anymore and is ready to drop by himself his body and psychological resistances.

We also try not to overwhelm the pupil with our knowledge; not to mother him, but to help him to achieve self-awareness and self-help. A therapist or a teacher who needs admiration and dependence of his pupils for his own self-assurance is not suitable to work with others.

It is very important that the pupil develops a real confidence in his therapist; if not, the work will not reach deep levels of conflicts. This confidence will enable him to refine and experience his capacity of letting go, and to relate to his body without fear or pressure, allowing suppressed memories, feelings and emotions to come to the surface, in particular feelings of being rejected or rejecting. The pupil becomes aware of tensions in the chest, diaphragm and pelvic area, and his breathing becomes broader and deeper and sometimes develops into hyperventilation. With the feeling of releasing, the pupil comes to

a feeling of wholeness, in some cases like an early symbiotic mother-child state. In this state, very early disturbances, interruptions of even prenatal and preverbal experiences are evoked. These feelings and emotions are not well differentiated, and we don't consider it advisable to verbalize them.

Very often after these experiences, clear pictures, remembering, vibrant and distinct colors and even smells arise in the pupil, bringing new understanding of the origin of his difficulties. At that moment the pupil needs to speak and to clarify himself, and the therapist just listens.

Generally after this Eutony treatment process, the pupil feels freer, full of energy. It is a big opening in the whole person, and pupils are able to express and see themselves more clearly, and they are more capable of transforming their aggressive forces into creative work.

The unconscious is also deeply affected, and a big change takes place at the level of dreams, which comes from very archetypal, primitive, basic manifestations of the collective unconscious.

It is neither possible nor sensible to separate Eutony therapy and Eutony teaching as the working aims of the one are in fact the same as those of the other, namely:

1. Normalization of the body image by becoming aware of both superficial and deep sensibility.
2. Regulation of the circulation and the unconscious breathing by harmonization of the autonomic nervous system.
3. Awareness of the "transport"; the conscious use of the proprioceptive postural reflexes, as a basis for Eutony posture and movement education.

All this awareness allows you to regulate your muscle tonus in order to adapt to inner and outer demands and to develop the ability for contact. Even sick people are not regarded and treated as patients, but as pupils. In Eutony therapy, the teacher assists the student in his work and helps him with the different aims, allowing, for example, a hypertonic patient to experience a state of release of tension, a hypotonic patient to experience the lightness and vitality of a higher tonus, or a sufferer from asthma to experience unrestricted breathing. Even at first, when the teacher must perform all the work himself,



the conscious cooperation of the pupil is required from the beginning.

It is only when an ability to release tension fully has not been achieved that the pupil can be allowed to sleep for moments during the treatment. Even small children can be attentive for short periods; they can also be treated with success while asleep, but only when, as is often the case, they find it difficult to lie still for a longer time. This is not only valid for disturbances in the autonomic nervous system and for the regulation of tonus, but also for the treatment of cerebral palsy and the after-treatment of poliomyelitis and other diseases.

Thus, when certain forms of tonus regulation or control of the autonomic system have been shown by experience to be particularly effective, no fixed recipe can be given for treatment. In addition to specific illnesses, every pupil has his individual difficulties. As the effect of Eutony therapy is dependent on the pupil's condition in the beginning, which is in turn affected by psychic and environmental influences (e.g., atmospheric conditions and radioactivity), totally different ways of working may be necessary for the same pupil on different days, thus making fixed standards of treatment impossible. Even when many repetitions of a definite form of treatment are necessary, as for example, in the training of para- and tetraplegics, new approaches must be found in order to maintain the vital presence of the pupil. Any exercise repeated mechanically is useless.

A requirement for all treatments is that the teacher must control any tension regulation in his own organism in order to be able to help a pupil; thus a teacher still suffering from tonus fixations in the diaphragm and abdominal muscles would find difficulty, even with the aid of the best techniques, in helping someone with an anxiety neurosis to achieve free, involuntary breathing. Without basic work on oneself, Eutony therapy cannot be mastered and practiced. It takes some three to four years of study and work to satisfy the various requirements and to develop the ability to acquire an insight into the faulty tensions of each pupil in a group. The eutonist must be capable simultaneously to balance the disturbances being transferred from the student to the teacher while giving the treatment.

The teacher must be capable of perceiving the state of ten-

sion and tonus fixations in the whole organism of a student from the first contact. Changes in breathing, pulse rate, circulation, skin color, eye movements, swallowing reflexes, and changes in intensity of facial expression: all give important information regarding the effect of the treatment and determine its type and duration. In order to record differences in tension in the epidermis, the dermis, the muscular system and organs, the sensitivity of the hands and fingers must be particularly well developed. The left and right hands must apply exactly equal force in certain treatments, while with other treatments, they have to be used in a dynamically different manner. Still other treatments demand independent work of the different fingers simultaneously.

The overwhelming majority of students come to Eutony therapy because of psychosomatic or neurotic troubles. By becoming aware of the surface of the body, through contact with the environment, with the ground, with sundry devices which result in the normalization of the tonus in the whole body, most students quickly experience a definite alleviation of their symptoms. Even difficult cases of insomnia, circulatory and movement troubles, "tics" and phantom pains, disappear and do not return after the student becomes aware of contact with the surface of the body. In such experiences, the central importance emerges of the major organ, the skin, for the dispersion and harmonization of the tensions of the organism. This effect is strengthened by the "contact" through the skin, connective tissues and reflex zones which coincide with the connective tissue zones. Students also become aware of the touch by the skin surface, and by feeling beyond the skin surface; into the ground, through bamboo sticks, elastic balls or the hands of the teacher. If the teacher extends this radiation zone into the body space of the student, a charging of energy results which represents a valuable aid for the after-treatment of poliomyelitis or similar complaints. But if the teacher "contacts" an inflamed nerve in this manner, there is a rapid increase of pain which becomes unbearable. Thus "contact" inward can provoke an attack in asthma patients while a corresponding dispersion can lead to relief and healing. The teacher must be able to judge in all cases which form of "contact" must be used in order to balance the tension in the organism.



Generally, the student's primary interest is to get rid of pain, but it is the task of the teacher to help him to understand why he has pain and that his disturbances may lie in a chain of faulty attitudes and behavior patterns which manifest themselves in limited faulty breathing and fixed pelvis and fixed tonus, which create new symptoms constantly.

Many of these faulty reactions detectable in the tension of the skin, the connective tissue and the muscular system have their source in earliest childhood; the more-or-less negative communication of the newborn with the mother, which manifests itself from the first day of birth, and in the prenatal state, by both imitation and adjustment of tonus. The child takes over all the faulty tensions of the mother. He also takes over the breathing pattern of the mother, and the rhythms of her sympathetic system which again influence the whole metabolism of the child. Thus the basis is laid for later disturbances; stuttering, asthma, and other problems. Later, attitudes and movements of loved parents or teacher figures are imitated; the adoption of such "typical attitudes" means, however, deviation from the characteristic breathing and movement rhythms of the child.

Equally damaging effects are caused by the excessive zeal of parents who want to toilet-train the child too soon. Just as associating the genital regions with taboos, so taboos associated with cleanliness often lead to tonus fixations in the intestines, in the muscles and in the pelvis, in the genitals and in the diaphragm. The results are frequently frigidity, sterility and anxiety neuroses.

The behavior of parents who cannot wait for the moment when the child shows that technically he is able to stand up straight, who urge him through continuous encouragement to straighten the thigh, pelvis and back muscles, leads also to tonus fixation and muscle curtailment which seldom can be corrected completely. Gymnastic training which is not founded on the basic functions of the posture reflex, but which strengthens the back and stomach muscles, further aggravates the original damage. The dynamic muscular system of the back is degraded into a posture musculature while the free mobility of the spinal column is restricted and the pelvis fixed with lordosis. The facility for standing upright through the "transport"

disappears, the weight of the overstrained musculature and the inner organs presses downwards against the head of the femur in the hip joint; a sure way to cause osteoarthritis of the hip (cox arthrosis).

Similarly, a child who learns to handle a fork and spoon at the dinner table, but is not seated high enough to allow the upper arm to hang down freely and the lower arm to rest on the table top, is forced into making unsuitable movements of the arms and hands with a consequent raising of the shoulders and the turning out of the elbows. These habits are not improved when the child learns to write in school. In the place of a natural movement experienced throughout the body which is then reexperienced in the arm and later in the hand and fingers and finally transferred to the paper in the upward and downward movement of the letters, there appears a scrawl of small letters written with excessive care and anxiety. Such movements no longer have anything in common with a totally experienced movement, all the more so because in addition to the fixed tension of the shoulders, arms and hands, there is also tense breathing, cramped diaphragm, intercostal and throat muscles. All this prepares the way for later writer's (or instrumentalist's) cramp.

It is not sufficient to explain these psychosomatic associations. The student can only grasp the whole meaning to the development of his personality when, for example, he experiences how male or female sterility disappears by making the frigidity skin zones sensitive; zones which have long been regarded as taboo.\* Experiences can also be decisive in removing anxiety neuroses which cause tonus fixations in the pelvis, in the diaphragm, in the intercostal musculature and in the larynx and, for example, when the removal of restrictions to aggression can release unexpected sensory qualities and creative impulses and give way to joy in the form of vocal expression. All these tensions started as undesirable emotions to be repressed such

\*These experiences became possible through cooperation with Richard Hammen, M.D., Copenhagen, who sent patients to me for over twenty-five years for Eutony treatment and for whom traditional treatment had not been successful. Cf. Richard Hammen, *Impaired Fertility in Man, with Special Reference to the Male* (Copenhagen; Munksgaard, 1944).

as anxiety, fear of loneliness or excessive sexual impulses. Gradually these tensions which narrow the body image become unconscious reactions as a result of continuous repetition and real expression of feeling becomes impossible. If these fixations are broken down, strong passions can sometimes emerge which can be a first sign that these zones will again be integrated into the body image. A strong emotional reaction often results such as heavy weeping, laughter or hyperventilation, especially deep breathing, which may last for hours until the involuntary breathing becomes normalized gradually. Spontaneous memories of one's own birth and of life situations from earliest childhood can emerge. These memories emerge not only as images, but are reexperienced with the dynamics and the totality of all sensory impressions of the original situation, but simultaneously with the knowledge: "Here lies the cause of my faulty reaction."

Memories emerge even for those who have been through traditional psychoanalysis; such memories belong to the preverbal time and did not emerge during verbal analysis. It should be remarked here that preverbal memories appear with a much greater power of illumination and totality of environmental impressions than those of later periods in which experiences could be verbalized. Such experiences can also appear by working on oneself or in group work. They show always a liberation from habitual tensions.

As a result of such experiences, I have come to the conclusion that the later ability to overcome conflict situations without endangering the mental equilibrium and the sympathetic functions, breathing, circulation and metabolism, depends on the quality of the preverbal communication of contact, tonus adaptation and tonus imitation during early childhood. How often have I observed that parents who brought their children for treatment were themselves the source of the very obvious damage in their children as a result of the behavior of their own disturbed sympathetic system. How often did the parents themselves confide in me that since they had worked on their own tension balance, spontaneous complaints such as tics, stuttering or asthma disappeared in the children? The head of the children's department at the Copenhagen University Clinic, Professor Preben Plum, often sends mothers to me for treat-



ment when their children suffer from stomach or intestinal troubles. As soon as the mothers find their tonus balance, the children become healthy without treatment. Parents and educators are thus not only mentally responsible for the health of the child, but also through their whole body behavior.

The ability for tonus adaptation of the child is normally retained for the rest of his life. It is particularly marked in artistic people. Thus, for example, the ability to adapt one's own tonus is a prerequisite for the interpretation of music. But also the aptitude for social sensitivity, such as putting oneself in the position of others and sympathy with people in one's environment, stems from tonus adaptation. Thus someone with a strong tonus fixation lacks the prerequisites for realistic social sensitivity which requires a flexible tonus.

How strongly the removal of tonus fixations affects social behavior showed itself in a group of eight neurotic patients who had all responded to individual treatment. Inspired by the ideas of Rudolf Steiner, which suggested assembling those with similar temperaments into one group, a measure which had already succeeded in teaching children, in 1946 I tried putting eight women into a group together. Concepts of group therapy were not yet known at that time. They all protested against the suggestion of working together. It was only when I presented them with the alternative—either group training or no training at all—did they agree to come to their first session, all very reserved and without exchanging a word while changing their clothes. Each took her place on her mat, taking great care that her blanket did not come into contact with that of her neighbor. The first hour passed without a word being spoken other than my own statements. Likewise the second and third, although the silent protest began to weaken slowly.

I carried out a test in the fourth lesson; each pair had to hold one end of a stick. I shall never forget the picture that presented itself. The most talented choreographer could not have interpreted more impressively aversion to contact with another person as did these four pairs. In spite of this difficulty, the ice was broken. Everyone explained how unpleasant such an experience had been. From then on, a verbal exchange grew up slowly between them which developed over the months into a kind of group analysis in which I became practically only a

listener. Only occasionally did I give my opinions. They divulged all their personal problems, discussed the influence of Eutony on their married lives, on their family and the upbringing of their children. They also met as a group outside the training hours. They very strongly criticized the lack of group contact in other courses which they occasionally attended.

This group began in October; and in February 1947, toward the end of an icy winter, most houses in Copenhagen could no longer be heated. Those women who could still heat their homes invited others to stay with them for weeks; one woman even cared for the child of another for nearly a year. This group came to their weekly session throughout the year. They constantly discovered new applications of Eutony in their daily lives as well as in the upbringing of their children. Their own neuroses disappeared and did not return.

It is not possible in all cases to achieve a complete restoration of the inborn ability to make contact. If a child is handicapped strongly in his first formative years, either through complete deprivation of bodily contact, through loneliness or neglect on the part of his parents, favoritism of other brothers and sisters, or leaving the child to the hazard of household help, then often even very positive experiences later on cannot change this fundamental attitude as he feels mistrust towards the world instead of taking pleasure in contact. One can indeed bring about an improvement through understanding, but the spontaneous ability to make contact will seldom appear. The Norwegian psychiatrist, Professor Dr. Trygve Braathoj, who explained the problem of such children in his book *De nervøses Sind*, speaks in such cases of third-degree traumatization in the way that one uses this term in the classification of burns.

Very different problems arose in working with children with some brain damage. For this task, all my teaching ability and a great deal of intuition and inventiveness had to be called upon in order to arrange the exercises in continually new forms suited to the interests of the children. Here also the conscious recourse to contact was fundamental. It often gave visible results by the tonus regulation thus achieved. According to the age of the children, special exercises can be used; contact with the ground in all possible positions, beginning in all possible arm and leg positions. Touching materials with hands and fin-



gers in order to sense the difference in quality, feeling woolen blankets, carpets or the wooden floor, always with the whole body, touching flexible balls, sticks, spheres. The teacher checks whether the attention grows and is focused. Above all it is necessary to be able to sense with the whole head, the skin of the head, hair, ears, eyes, nose, mouth, lips, tongue and the whole mouth and mouth cavity as part of tonus regulation in the whole body, but also as an important basis for all speech exercises. This increasingly developing consciousness of the skin should be practiced repeatedly until it becomes a matter of course, first when lying, then sitting and standing, reinforced by the awareness of contact of the skin with clothing.

The use of Eutony movements for the conscious contact outward into the environment, the "elongation," is particularly essential for patients suffering from athetosis by their influence on the tonus regulation and the harmonious cooperation of the synergist muscles. The awareness of the "transport reflexes" is of great importance not only for those for whom coordination was previously impossible, but for everyone. The whole success of this work depends on the ability of the teacher to give and control carefully the amount of reflex stimulation by light vibrations and pressures. The preparatory work for this can be tried in certain cases while the child is sleeping in order to guarantee undisturbed work by the teacher. The transport of the hip joint through the small pelvis towards the fifth lumbar vertebra through the whole spinal column up to the cervical vertebra must be sensed clearly and guided by the teacher. First by resistance toward the ischium, then of the big trochanter (upper, outer edge of the thigh bone) then of the knees and finally of the feet, first left and right alone and then both together until the "transport" from the soles of both feet up to the head remains stable even with rhythmical changes.

The children beam under the influence of this "transport" and one can observe a spontaneous reaction in the eyes of even debile children when the reflex is achieved. Other people also note that the child has become more alert, lively and receptive. This work shows one that the attitude is not only a body process, but that this "standing on one's own feet" is a real human stage in development toward self-consciousness.

The first word that a severely spastic five-year-old child could say when he stood upright alone for the first time by the bed post was "*ka selv*" (can myself). This child in the children's clinic of the Rigshospital in Copenhagen was described as being quite incapable of being trained after a year of tests. He was about to be transferred to a nursing department. As there was something in his look, in spite of his completely helpless state, which convinced me he could be trained, I was allowed to work with him. After three months he was able to sit and eat and drink by himself. It cost me many hours of daily effort for weeks to get him to sense his lips and close them. After six months he was so developed mentally that he could follow schoolwork in the hospital. At first this success was attributed by the medical staff to a course of injections of curare, but later it was shown that curare had no effect on spasticity so that the success belonged entirely to the Eutony work. The boy's father, who had followed the transformation in his child with great interest, took the initiative to set up the first Spasticity Association in Denmark.

In addition to the work with spastics, the results of the work with asthmatic children were particularly interesting. The fact that even three-year-old children could already learn how to avoid their attacks themselves by exercises, played an essential role in their psychic stabilization. This trial led to cooperation with the Asthma Clinic of the Rigshospital over several years which assigned to us as test cases those children who did not respond to medical treatment. Fifty percent of these cases were cured. The remaining fifty percent improved, but occasionally relapsed.

I observed with these two groups that several children got worse after the weekly checkup in the asthma clinic. I went several times with them into the large waiting room where forty to fifty asthmatic children often sat for hours together. Anyone who has been treated for asthma knows what a strong influence the environment has on breathing and that the therapist is incapable of helping if he cannot continuously control his own breathing and the tensional balance in the diaphragm and pelvis. As imitation of tonus and breathing is generally stronger in children than in adults, we observed that deterioration in

breathing was evident in our patients after the long wait with the other very sick asthmatic children.\*

During my years of cooperation with speech educators of the speech education institute in Copenhagen, I had the opportunity to work with children and youngsters from different backgrounds and with whom general relaxation exercises had had no success. In some cases where there existed no acute conflict situation, a lasting success often came astonishingly quickly through the regulation of tensions in the autonomic system. Thus an eleven-year-old youth from the province with a bad stutter, for whom all other efforts had been without success, was sent by his speech therapist for treatment during the autumn holiday. He returned relaxed and happy and with no stutter at the end of the week after six treatments that I gave him late in the evening before sleeping. We exchanged no word about his complaint. There was no relapse.

The problems are quite different in working with people with para- and tetraplegia who were injured in accidents. After the first, usually quickly achieved regulation of the circulatory problems, an improvement which also has a favorable effect on the kidneys, bladder and intestinal functions, the problem of resensibilization is not difficult, except for the doubt of the patients: "Is it worthwhile to sacrifice time and effort where the doctors are sure that there can never be a change in the state of movement?"

My first patient made this clear to me: he was a seventeen-year-old in Mexico who had been totally paralyzed by a broken neck two years before. He had a completely paralyzed lower body and had only partially regained ability to move his hands and arms. After five weeks of daily work and treatments, he could bend his knees while strapped into the "standing board" and stretch the soles of his feet toward the floor. As he demonstrated his progress to his parents and I asked him to repeat it on crutches, he had a nervous breakdown. He kept shouting, "It isn't true. I can never move again—you're just fooling me!" I

\*I am indebted to Professor Preben Plum for allowing me and my students the opportunity to observe in his department, from 1945 to 1950, the effect of Eutonony on sick children through daily work—in spite of the great difficulties caused by his colleagues and physiotherapists.



had not known that after his operation, a psychiatrist had sat by his bed daily and repeated to him that he should never believe anyone who wanted to help him to move again, that, in fact, all technical aids would be placed at his disposal, but that he should hold no hope of ever regaining an ability to move. Only when his doctor in Houston confirmed that his condition had improved so much that he could learn to drive a car did he understand that he had made unexpected progress which he built on a year later as a participant in the summer Eutony course in Europe.

I was able to make interesting observations during the five weeks of treatment on how the resensibilization of the completely paralyzed parts occurred which had been incapable of sensation according to traditional theory. Every day a different position of the deep sensitivity responded to applied pressure and was followed each time by a strong supply of blood. After five weeks, all the paralyzed positions had been sensed at least once. In the following summer, as a participant in group training, he reacted spontaneously to an unexpected touching of his foot which he could not see.

Since then, there was the success of a young soldier who became a complete invalid as the result of an accident in the army. He learnt the fundamentals of "touching" and "contact techniques" and the conscious use of "transport reflexes" in only ten days of group instruction. The young man, who took part in the summer course with his physiotherapist, practiced further with her and after half a year was able to move freely without apparatus and crutches for twenty minutes and, in addition, to bend and stretch his knees while standing on a balancing disc. These results were achieved solely by the application of the principles of movement of Eutony without the support of individual treatment.

These experiences and daily records of the effects of Eutony appear to me to demand a new approach for the treatment of para- and tetraplegia from the following points of view:

1. As a basis of the treatment, the circulation should be normalized, achievable with Eutony in two to three weeks.
2. The resensibilization should begin with awareness of the surface and profound sensitivities in the healthy parts of the upper body (in the case of the paraplegic Rainer H., reported at



length in the following chapter, spontaneous feeling appeared within the first few days in the leg after touching of the arm).

3. For movement innervation, it is essential that no motor innervation, especially no contractions, are tried before the tonus, and above all the postural reflexes, the "transport reflex," are perceived and are under control. The invalid should participate actively and consciously from the beginning through movements as if he himself could perform the movements. Rainer H. was clearly able to sense the weight of the leg in the first week whether he thought about it or not. In the second week, both he and the person in charge could feel the difference in weight given by the change in tonus. Likewise, in the first weeks of treatment, he could use the "transport reflex" released by pressure on the whole sole of his foot in standing and walking. At the end of a two and a half weekly series of treatment (fifteen sessions), he could feel a definite movement of the muscles and tendons with his own hand during knee movements when lying on his side and trying to stretch his legs, but still without apparently visible results for others. By the conscious fusimotor innervation of the "transport reflex," the dynamic muscles responded gradually (detectable by the eutonist even when no muscle contraction is evident), until the first weak stretching movements became visible. The movements were performed only under control; at the beginning only once or twice, then two to four times, otherwise it would have led to an overstraining of the functions to be regenerated which would hinder further progress.

Only stretching is practiced for a long time until the student, with increasing power, mostly unconscious, uses contractions. These are then practiced with tension equilibrium in synergists. Since January 1973, Rainer H. participated in two ten-day periods in the group training of the Eutony summer course in addition to the three series of fifteen, eleven and nine treatments in Copenhagen, where numerous therapists could follow his progress.

A professional Eutony student, who ten years before had had both legs amputated above the center of the thigh, made unexpected progress in the course of the first three months of the training. Above all, she tried to bring her bodily feeling of the phantom legs into harmony with the sensation of the artificial

limbs. This succeeded to some degree in that she could sense every part of the leg down to the individual toes. The tonus regulation of the pelvic musculature together with the developed sense of touch through the artificial limbs resulted in an extraordinarily improved equilibrium. Now she can walk for a long time without canes. After two months she was in a position, like the other students of the training course, to carry out a study of leg movement by which one could see that the artificial limbs were completely integrated into her body image. At the end of the second training year, she was able to participate in the group movement studies with other students.

At a certain stage, the question arises for all heavily handicapped patients: "Can I risk becoming healthy? Would I lose the advantages that complete invalidism brings? How would the insurance company react?" A polio patient who, after years of difficulty, had learned to sit and walk broke off the treatment from fear that the privilege of studying music abroad every year might be canceled.

In the fifty years that our school in Copenhagen has existed, students of all social groups and professions found help not only for special problems related to their profession or help for ailments which could not be cured by traditional treatment, but also found a new approach to life. Always fundamental is the experience that one is answerable to oneself for most difficulties. We still have a group of students who came to us thirty to forty years ago as very sick people and who, after their recovery, worked once a week in a group and learned how to apply in daily life the principles practiced there.

They became alert to disturbances in the organism through their developed body consciousness before these manifested themselves in sickness; through their capacity for tonus regulation, they were able to preserve autonomic system equilibrium even in stress situations and to sleep peacefully. With "contact techniques," an alert attitude to the environment takes the place of monotonous, mechanical repetition of tasks like housework. The tonus regulation so effected stimulates the breathing, circulation and metabolism. Such a realistic contact with the environment also removes the feeling of isolation and is thus particularly valuable for older, isolated people.

I will mention two examples of the many students who have

made a healthy, satisfactory old age possible with the help of Eutony.

Mrs. E., now ninety-eight years old, came for treatment over forty years ago with heavy heart asthma that caused her to spend the winter months in an oxygen tent. After some months, she was in a position to take up again all her extensive activities as leader of the women's auxiliary service. She was active in various fields in an honorary capacity, bicycled in all weathers to friends needing care and members of the family, came to our weekly group lessons and was a great help in the school office. In addition to the housework and gardening and guests, she painted ceilings and did not hesitate to undertake outside repairs at home. While doing these chores, she fell from a high ladder. The doctor found that there was nothing wrong with her and that her joints were as flexible as those of a twenty-year-old. For the last two years she has been living in the country and is still working daily with Eutony by herself.

Mrs. F., about sixty years old, came for treatment during the war years. She had such severe rheumatic pains that I was reluctant to let her participate in the training. She persisted, however, and continued to practice daily in spite of great pain. After some months, the first success came; she could take off her eyeglasses. After two years, she mastered all the control positions (a performance which is not always possible even for younger, generally healthy people), so she became part of a demonstration group of our school work. She participated ardently in all events of the school and integrated Eutony more and more into her daily life. Suddenly she disappeared and did not return.

Fifteen years later, the telephone rang early one morning. "This is Mrs. F. I am eighty years old today and I should like to bring you some flowers to thank you for everything going so well for me in the past years. After the death of my husband, I made a world trip for some years and had to devote myself so much to grandchildren that I had no time to come. But I practiced daily and I am in such good shape that I should like to come to you for the winter to a movement group." She was right, she was unchanged; full of vitality and as strong as a young person.



## 4 SOME EXAMPLES OF EUTONY THERAPY

The Eutony treatment is developed through observation and experiences in practice, but often it is found later on to correspond well with new findings in research.

As an example, Professor Barry Wyke, M.D., B.S., Director, Neurological Unit, The Royal College of Surgeons of England, London, found that the information from the sensory nerve endings in joint capsules is very important for muscular action, not only locally around the joint, but in the whole body.

This finding corresponds well with Eutony practice, which aims at training the perceptual awareness phenomenologically corresponding to these sensations and uses this deliberately to direct through joints and bones the forces of gravity, antigravity and movement.

Also other similar correlations have been found between Eutony practice and new neurophysiological findings.

### *A Case of Paraplegia*

The following report on a paraplegic patient is very detailed. It includes the patient's own observations so that the experienced therapists can give a new direction to their traditional treatments, leading in turn to new possibilities for paraplegics.

Dr. Lise Plum, specialist in physical medicine, professor of anatomy and neurology at the Gerda Alexander School in Copenhagen, wrote:

In traditional medical circles it is considered that a person suffering from paralysis through traumatic medullar section (paraplegics,



tetraplegics) may, over two years, improve neurologically as a result of regeneration of the new fibers. After this the sensory motor situation is considered to be stationary.

Four people paralyzed as a result of traumatic medullar section at various levels were treated with Eutony, all more than two years after onset. In all four cases, it proved possible to develop sensory motor capacities which did not seem to correspond to our present neurophysiological knowledge. This appears to suggest that we might have to reconsider certain ideas about the function and use of the nervous system. In any case, it is a good idea to leave the traditional manner of reasoning and undertake new research.

In this respect, the study of cases of paralysis by traumatic medullar section is particularly revealing: they present—in the traditional view—a localized lesion linked to well-classified symptoms. We cannot here account for improvements by bringing in some psychosomatic phenomena or other.

In 1971 Rainer H., who was twenty-four years old, was thrown out of a car in an auto-racing accident. When he woke up from a brief unconsciousness, he found himself paralyzed in the lower part of the body and the legs. The same day he was transferred to the Department for Spinal Injuries of the University Clinic, Heidelberg.

The following is the summary and conclusion by Prof. Dr. Paeslack, Head of the Spinal Injuries Unit:

Following a motor accident on May 8, 1971, Mr. Rainer H. is in a condition resulting from compression fracture of 7th, 9th and 12th dorsal vertebral bodies and of 1st lumbar vertebral body, including spinal cord injury at the level of mid and lower dorsal area, resulting in a complete paraplegia below Th 8/10 with paralysis of bladder and bowels.

After six months' treatment in this clinic, there has been no remission of the paralyzes so that today it can be concluded with probability close to certainty that these paralyzes, directly caused by the accident, will be persistent.

It can thus be stated that Mr. Rainer H. will be bound to a wheelchair for his lifetime, just as he will have no control over bladder and bowel functions for his lifetime. He must expect a lasting considerable

limitation of his sexual functions. A considerable degree of dependence on helpers and need for care will persist.

The work incapacity caused by the accident is thus estimated to be 100 percent for his lifetime. If, in future, Rainer H. in spite of this serious handicap, continues his studies, and even at a later date he possibly can fill a job, it will be an achievement which cannot be asked for nor expected, considering the severity of his handicap.

He cannot be expected to have the persistent energy needed to continue his education, even if it is adjusted to his situation. Future achievements in this field must be regarded as not influencing his degree of disability.

Mr. Rainer H. will be under medical control. Also, in future, he will need physical therapy at regular intervals. Also at intervals he will need clinical control tests, and probably again later he may need new treatment in the clinic.

In January 1973 Rainer H. began treatment with Mrs. Alexander. Here is an extract from the diary in which the patient noted down his personal reactions:

First treatment by Mrs. Alexander in Copenhagen from January 16 to February 4, 1973 (accident May 8, 1971).

1/16 I felt "pins and needles" in both legs, slept little and badly in the night.

1/17 Slept badly, very thirsty.

1/18 This is the first time I have felt my whole skeleton down to the feet. My leg was able to stretch against the pressure put on by the therapist's hand; I felt the movement of the joints of the left knee and both hips. The "pins and needles" are not so widespread. After the treatment I was cold for two hours and then I slept deeply and calmly.

1/20 During the treatment I was cold and felt at one time the pressure on the muscles of the left femur. I don't need so much concentration, the sensation is stronger in the bones. The proprioceptive reflex (the antigravity forces from feet, hip joint, small pelvis ring toward sacrum and all vertebral bodies up to the atlas), the transport, is easier to discover.

1/21 Making up the sum total of the body's sensitivity—the feeling in the nonparalyzed parts of the body adapt to those which are paralyzed and vice versa, so that the body becomes a

unity once more. Equilibrium in the seated position is much surer, almost comfortable, with the eyes closed. In rocking my wheelchair I could feel the shifting of the skin beneath the buttocks.

1/22 Feeling the right arm, all at once pins and needles start up in the right leg. With the hand, the foot comes into play. Same thing for the left side. I can stretch the right leg better than the left.

1/24 In walking, I can move a leg better if I push backward from the other foot.

1/25 The proprioceptive reflex gets stronger and easier to feel. When I want to help Annegret to bend my knees, she says that they are heavier than usual. I have not found the sensation of bending them yet. I stretch out my legs and start again, and manage to bring them back to normal weight (conscious change of muscle tone).

1/26 After the treatment I feel strong and everything is alive in me. I feel in my knee joint that I can stretch out in my crutch as I walk. If I touch myself I feel it always more precisely, especially the left leg. Next day after a three-hour walk I feel exhausted.

1/28 I walked before the treatment. The treatment was long and intensive. In getting up on my knees I can move my legs from front to back. The left thigh is becoming more and more sensitive. A slight general improvement.

1/29 Improvement in general condition. Deep spasms during the morning.

1/30 Standing up, stretching the knees, (in the fixed braces), seems quite easy. Today, I felt for the first time during stretching, a solidness running from hip to foot. This gave me a feeling of security when standing. Today, Dr. Lise Plum and Mrs. Alexander will examine my first progress.

2/1 The bladder without tension was able to retain 290 cc. (during the passive movements).

2/2 I clearly felt the stomach muscles over the bladder; I can move the muscles. On two occasions I urinated 300 cc. I stretched my legs in many ways.

2/3 In touching the spinal column between the shoulder blades I suddenly felt very strong and rapid reactions in the



stomach. I also felt the stability of the musculature around the pelvis, especially when I brought my legs toward my stomach. On the side, I felt the sliding of the muscles over the neck of the femur. The bladder empties if I tap on it without pressing.

(Rainer H. noted in his diary from February 5 to February 25):

1. Movement and feeling in the back muscles down to the coccyx.

2. After passive movements and tapping, urinated 350cc. and once 400 cc.

3. In seated position, I can tense the thigh muscles and can let myself fall forward without difficulty.

4. Lying on one side I am able, for the past week, to feel with my hands between my knees, all the movements of tendons and muscles, if I try to stretch out my legs and bring them back again towards me, to press them one against the other or to open them.

5. I can stop the spasms in the legs if I voluntarily stretch legs right to the heels.

(Notes made during the eight-days Eutony summer course in Fischerhude, Germany—1974, and after)

7/29 A full day. In the morning after having worked with sticks beneath the sacrum I felt as if a snake had bitten me. The coccyx icy. Suddenly a surge of physical and mental energy.

7/30 We worked on the neck and the cervical vertebrae. Afternoon, the "turning of the column" with emphasis on the costovertebral and sternocostal joints. Traction of the sternum in the bamboo sticks. Intense tension discharges. In the night I urinated a great deal although I had drunk nothing.

8/2 I worked all day: in the evening I had the impression of having thin legs. Many times, while concentrating on stretching of the whole body, I had real shivers in the left knee and thigh.

8/3 While working, I had the feeling that my legs were becoming thin.

8/6 A little fever, I don't know why. In the afternoon I am exhausted, my legs are far away in my awareness, they are swollen.

8/11 Today they are fully there. I have a desire to work and energy to spare.



8/12 Yesterday, I worked well again but my legs are terribly thin. Today, the same thing: when I press on the right leg it leaves a red mark. Not on the left leg.

8/15 I walked again, very well in fact.

8/20 Today, I noticed that I can get up better with eyes closed than with them open. My concentration is so good that I do everything well.

9/11 Each time when by chance I knocked my knee to feel transport towards the ground, I observed a contraction of the thigh muscles.

9/12 Pain in the toes. In pushing away from the feet, the legs moved away from each other spontaneously.

9/14 In walking, if I push away with the right foot twice unexpectedly the left foot comes by itself. I think these are the first signs of a remarkable progress.

9/17 I felt the foot and knee joints in conscious contact with the floor. Good "contact" with the legs.

9/18 Wedding with Annegret. I noticed I can master the spasms in my legs and that I stretch out.

9/26 Now I am convinced. I leaned forward with my chest on my thighs and pushed away my right foot joint with my right hand. As usual I put pressure on the heel and suddenly feel the tendons tensing from the ankle to the toes every time. Great!

9/26 I walked marvelously.

9/30 I walked as I never have before. Stood up for a short while without braces.

10/2 Lying on the left side, I noticed how the hip moves alone without the help of the upper muscles. The walk was excellent, well distributed between left and right. I have tried to relax the stomach muscles when holding the hips.

10/3 All day my legs were alive and easy to feel. Then the feeling went away.

10/10 Walked very, very well, backward too. I believe I have understood for the first time that in order to walk I must stretch and lean forward. In the toes a very strong feeling and I felt tension in the muscles of the buttocks.

10/16 After walking for an hour I had "pins and needles" in the legs and both buttocks.

10/21 Sensational! During a break I sat down in an armchair and during stretching I felt oscillations in the muscles around

the kneecap. In the evening, lying on my side for the first time, I pushed away from the trochanter until my head came up by itself (stretch reflex in the total spine).

10/30 A full program again at the school. My legs hold up well.

11/11 Walked very well in upright position. I feel free in leaning lightly on the bars to maintain balance.

11/12 Thin legs, though I haven't gone to much trouble. This surely means that they have become integrated into my everyday body image.

11/16 Trip to Copenhagen.

11/17 Walked badly, but, at 2 in the afternoon Mrs. Alexander had just begun treatment and suddenly my body became cold, my nails white and I felt very cold all over. After the treatment I was very tired: I slept three hours with ringing in my ears and luminous scenes before my eyes. All my toes tingled with cold. Later, cold feeling only in one foot until the middle of the night.

11/18 During the treatment, Mrs. Alexander pressed down my sacrum and buttocks. Suddenly, an intense shiver went through my body and there were tremendous tensions in all the paralyzed parts of my body. A painful spot below my left kidney relaxed and after that, no more pain.

11/20 After the treatment, like a child I continue to play with the muscles up to the knee. I practised the exercise of pushing against the wall (triggering the proprioceptive reflex).

11/21 Today I found that the result is always better when I am not too concentrated.

11/23 After having seen the skeleton, I found the exact line of force from trochanter to foot at 110° in my body.

11/25 During an ankle flexion I felt clearly the Achilles tendon up to the shins.

Feeling of total progress. Very tired.

11/26 Once more a great feeling of progress in stretching and more stability when seated.

11/29 I found, in my imagination, the right way to stretch my legs. The fatigue and this feeling of heaviness have gone.

(Return from Copenhagen)

12/4 Finally walked! Very badly at first, then very well. I hope I did the pushing-away exercise right.

12/5 From 5 to 11 o'clock I remained seated.

12/6 Terrible spasms in the morning. Starting from the tibias, I pushed away 45° to the ground and came back to my knees as if it was a spring. I'd really got it.

12/7 On my knees like yesterday, I noted during the pushing-away from the ground, the work being done by the thigh muscles.

12/9 Difficulties with the bladder. It empties slowly and it hurts.

12/11 I didn't walk again. Too much seated but legs now swollen. In the evening, working with my wife.

No regression.

12/12 I felt the tensions upward and downward from the backs of the knees during the stretching. Walked well.

12/14 I was outside a long time, in the cold and felt the cold, starting from the feet, throughout my body. I finally observed that the regulation of heat was functioning normally through all my body.

(Treatment in Copenhagen from May 5 to May 15, 1975)

5/5 Mrs. Alexander did no more than pinch the skin of my back. Since then I have sat upright and with much more security in my wheelchair.

7/5 I felt the pulsations the therapist made in the feet and the neck. In trying to turn my feet medially and laterally the muscles employed became very hot. The turning of the feet was visible.

5/12 The first results of Friday's effort are being felt. I have found the right way to stretch the legs when lying on the side. In walking, at one moment when I felt that my posture was upright, the left leg in extension freed itself as if it were coming forward by itself. I am sure it was not a spasm. In the seated position, after having corrected the position of the spinal column, I felt with no pain the connection with the pelvis and at the same time, finally, the left buttock with the weight of the body resting on it.

5/13 The stretching of the legs in dorsal decubitus is finally clearer and stronger, as four people have been able to witness. To sit on the carpet or a hard surface doesn't hurt any more but on the contrary gives more security in posture.

5/15 A film was taken in order to record my present condition.

5/17 Return to Germany.

I made a new discovery in remaining seated on a hard surface: in using my hands lightly to help myself I can move forward and backward, turning my pelvis from the buttocks.

5/20 "Contact" through the skin was really good and immediately effective. Lying on the side I felt the touch of my legs on the ground. After someone helped me to raise the upper leg which weighed too heavily on the other, I finally managed with great effort to stretch slowly both legs at the same time against a resistance in the knee and the feet.

### *Medical Report 1981*

#### *Work and ambulatory situation:*

Since Rainer H. passed the examination for social workers in 1974, he has worked eight hours a day in a center for disturbed adolescents.

Most of the time he is in a wheelchair, completely independent in the activities of daily life, also traveling by car alone. He walks with long braces and elbow crutches and can be on his feet for considerable periods (two to three hours shopping, sightseeing, etc.), but in general walking is little used in daily activities. This summer he has been busy insulating the roof of his house.

#### *Objective Findings 1981 Compared to 1973*

##### *General Appearance:*

Moving more freely and with less effort and in good posture with much better balance (will be returned to).

The body now appears as one whole, compared to 1973: overdeveloped arms, shoulders, and passive legs.

##### *Skin:*

Legs 1973: white, hard, rough, cold. Some evenings edema.

Legs 1981: natural color, good texture, warm even in cold weather. No evening edema.



Seat 1973: and next years: tendency to furunculose leaving thin scars.

Since 1975: well circulated skin of full thickness.

*Sensation Below Level of Lesion:*

Pressure and vibration on bone was felt very early and is still the most clear. May be close to normal.

Joint sensation is present but less clear.

Touch is felt, but with intensity and clarity varying from day to day. Localization is not point-distinct, but can often be indicated correctly within a palm-sized area. Sometimes touch in one area provokes feeling of touch or cribbling in remote areas (ex: touched foot felt in thigh). Sensation seems to have improved. It cannot be evaluated how much depends on developed awareness or on better circulation and nutritional state of tissues.

*Muscles:*

There is evident muscle atrophy of both legs. After the first series of treatments, quite unexpectedly, the thighs developed to the point that the thigh part of the braces had to be changed to a larger size. Since then no certain change.

*Muscle Action:*

Tested the usual way for the strength of single muscles, there is only an occasional response stretch 2—3, scattered and inconsistent. Testing stretch and push movements,\* active participation is evident. These active movements are clearly different from spasms.

Spasms he can stop by will with increasing ease. Foot

\*Stretch movement is an active movement away from the body in the direction of the axis of all or one extremity (axis of one extremity: ex. femur; for any part of the body: ex. spine), with participation of the whole body (look at a cat!), stimulating tonus and circulation.

A stretch which meets a resistance from an object (floor, wall, person) becomes a push.

clonus cannot be elicited but can be stopped after two to three jerks, depending on his level of tonus.

*Motor Function:*

Most remarkable is the development of his way of moving. In 1973 he moved by using only the arms and upper trunk, the legs following as a dead weight.

Now the whole trunk is working as a unit in turning on bed, in sitting, where he can lean forward 30° without holding on with the hands. The legs have to be put into position by hand, but the legs are participating in whole body movements, not just following as a weight. Action through the legs is perhaps most conspicuous when moving from the floor up to be seated in the wheelchair. When the legs are positioned by hand, he can use transport from feet on the floor through legs and body to lift himself into the chair. He uses the pressure from the hands much less than before.

Standing with long braces, he can balance himself well over the joints with little support on elbow crutches, momentarily without crutch support.

*Practical Walk:*

Swing through gait. He can make some steps with the legs individually when using transport.

In spite of Dr. Paeslack's clinical report (73), Rainer H. has been able to father a son (born in 1982) and twins (born in 1984) in a normal way.

*Signed Lise Plum, M.D.*

Until 1980 Rainer H. participated in my summer courses held near his home town. Then he telephoned to say that he could not come because he was busy tightening the roof of his house.

He is still a social worker in an institution for maladapted children.

Gerda Alexander

*A Case of After-Treatment, Following Polio*

B. was born in 1920, is the mother of two children (five and seven years old), and contracted infantile paralysis in 1950. After a period in the hospital she went for the usual after-treatment.

She had severe paresis of one leg, limped badly and could walk for about twenty minutes at a time with the help of a cane. Her knee was overstretched. She could not raise her thigh in a sitting position, could not raise her leg outstretched in a lying position, could not move to one side, could not walk downstairs without support, suffered from cramps in the leg at night. She was admitted on February 16, 1956 for a two-month trial period, on the condition that she did not take any other treatment during this period.

On her first visit for Eutony treatment, B. felt a sensation of warmth and rapidly understood the principle of eutonization, so that she was able to work by herself at home. After the fourth visit for treatment, she traveled to Norway with her children, but was depressed because she could not walk in the snow. After some reflection, she bought a pair of ski pants all the same. In Norway she worked on Eutony every day and walked in the snow for up to 4-1/2 hours each day. With a little help she was able to lift her outstretched leg for the first time.

4/1/56: Lifted her leg 3-1/2 cm. On April 4 she visited the clinic where she had been for after-treatment, in order to obtain definite information about her future prospects following treatment. She was told that her condition had shown no change during the last few years, and that there were no prospects of improvement in the future. The proficiency that she had already acquired could be maintained only by constant training.

4/14/56: Raised her leg 16 cm.

4/20/56: Raised her leg 18 cm. No more cramps at night.

4/23/56: Walked down the staircase for the first time without support. Could move the leg inward and outward, her buttock muscles had developed visibly, and she could walk without a cane.

4/28/56: Muscles and sinews in the hollows of the knees

were more strongly developed, but no change in the circumference of the thigh muscles, the inner side being still only slightly developed.

6/20/56: Raised her leg 29 cm. Went on summer holiday. Returned in mid-August, had not done any exercises, but could now raise her leg 33 cm. It is to be noted that she was treated exclusively with eutonization. Resistance exercises were used only to check up on her increasing strength.

She was checked at the Polio Institute during the summer of 1956 and her improvement was recognized.

In the subsequent season, 1956/57, she was treated twenty-two times in all. She could walk without any difficulty without the aid of a stick. She could now lift her leg only 25 cm. This relapse was due to a state of overstrain. B., who during her illness had been unable to do very much in the house, was now looking after the household of a farm of considerable size and two children without permanent help. Also, she could dance again.

1957/58 season: B. came once a week to ordinary group-teaching. Does not come in the 1958/59 season. Telephone checkup in June 59: feels fit.

### *A Case of Insomnia Treated at the Bispebjerg Hospital in Copenhagen*

Dr. G.J., a Copenhagen psychiatrist who had noticed the results of Eutony on various patients, asked me to treat the wife of one of the chief doctors at the Bispebjerg Hospital. For months she had been treated for insomnia. Sleeping pills and medicine had had no effect.

In the first lesson she worked on the sensation of touch with bamboo sticks to release tensions in the back, and I freed her tensions in the head and neck. That night she slept so soundly that she did not hear the air-raid alarm. After a few more ses-



sions, she could leave the hospital. She continued lessons twice a week for some months and was relieved from her nervous troubles.

### *A Case of Congenital Dysplasia*

J.M., fourteen years old, studied the piano. His increasing weakness and incapacity of the right hand prevented him from continuing with this instrument. He turned to the bass viol since the fingers of the right hand were at least able to hold a bow.

He came to see us on his teacher's recommendation. The circulation in his right hand was decreased, hand and finger muscles were poorly developed, the fingers were  $1/2$  to 1 cm. shorter than those of the left hand. After six sessions, the circulation and strength in his right arm had improved considerably. There was now hardly any difference between the two arms, and he could, for instance, dig his garden without difficulty.

After ten sessions, the fingers of the right hand became longer and stronger than those of the left hand, and the doctor in the surgical orthopedic service of Rigshospital noted an improvement in the capacity of the right hand to operate in the prone piano-playing position. During the following three months, there was further improvement in the whole organism, under treatment of one of our pupils. At the same time, there was a psychological harmonization and his relations with his surroundings improved. He was able to continue his vocation as a musician.

### *Treatment of a Coxitis*

Mrs. P., sixty-five years old, came for treatment in May 1963. The first pains in her hip began in 1935. In 1936 an X ray showed the first lesions of the acetabulum (cotyloidal cavity) with defor-

mation of the femoral head. Treatment by radiation therapy gave no relief from the pain.

1960: The refitting of the femoral neck and treatment with drugs (butazolidine and delta-butazolidine) managed to ease the pain.

1961: A fracture of the neck necessitated a stay of six months in a special clinic in Germany. After nine weeks of plaster immobilization in extension, the knee was completely stiff. Massage gave little improvement. After the patient left the clinic, she developed phlebitis in the leg.

1962: A hysterectomy was performed, which was followed by circulatory troubles and more severe pain which aggravated the limitation of movement and her general condition.

End of May 1963: Start of Eutony treatment, with no other medical treatment. The left leg was 3 cm. shorter than the right. There was muscular atrophy and shortening of the tendons, with very reduced possibility of flexing the knee. There were circulatory troubles and intense pain. The patient could not lie full length on her side nor undertake the "pushing" movements in that position. She could not sit normally.

After eighteen days of treatment, the left knee could move almost full range, the pain had disappeared and there were no more circulatory troubles. The patient could lie on her side and perform the "pushing-away" movements, using the trochanter muscles (the posture proprioceptive reflex). The bad leg was still shorter, but only by 1 cm. There was remarkable improvement of range of motion of the hip, and the patient could sit normally. She learned to practice by herself and was able to go home. For the first time in twenty-eight years she was able to work without difficulty around her house and in her garden.

In autumn 1963, she went back for a checkup at the clinic in Germany. The X rays made at the clinic in 1960, 1961 and 1963 were put together for comparison in the scientific collection of the clinic. The X ray made after the Eutony treatment in Copenhagen showed that the joint cartilage had regenerated.

The patient took another fortnight's treatment in 1964 and in 1965 she participated in the school's summer course.

## *Eye Injury*

A fourteen-year-old girl was struck in the eye by a splinter of glass during a storm. Following an operation, there was a thickening of the cornea to the extent that her ability to see was reduced to a minimum. After serious bronchitis, the scar on the cornea reopened and medical treatment was once again necessary. Subsequently, the scar reopened about every ten years. This caused the patient special difficulty since she was a painter and had to fall back more on handicraft work. The last time the scar opened was six years ago, and the treatment consisted of sewing together the eyelids for six months and administering daily injections into the eye to improve the blood circulation.

After this, the patient came for Eutony therapy in the hope that this might prevent the scar from opening again. During this treatment, she had strong experiences of color, and she had them when she practiced alone. After a few months, she was able to read newspaper titles and, following further daily exercises, her sight improved to the point where she could read large, clear handwriting. In addition, pains she had contracted in her arms due to excessive handicraft work disappeared completely and never returned. She has since had no relapse.

## *A Case of Tic*

A middle-aged woman suffering from facial tics was sent to me by the neurological department of the Bispebjerg Hospital in Copenhagen. I knew from experience that the treatment of tics often was very long and difficult, and since I was soon going abroad, I asked her to join a group of beginner students, meeting weekly at the school.

I saw her again after five weeks, during which she had mainly done "ground-touching" work in various positions to obtain an overall normalization of the tonus. She was a different woman—her face was calm and relaxed. There was no need to

give her individual treatment. She attended the group from October to the following June. I saw her again some years later. She had never had any more trouble.

### *A Case of Injury to the Ischial Nerve*

A man in a chief administrative post was admitted to Mili-tærhospitalet, Copenhagen, because of a lung abscess. By accident he was given an injection which injured the ischial nerve. He developed severe pain in the area served by the ischial nerve, unrelieved by all attempts of treatment. After some months in pain he asked to be treated by me, and the professor gave his permission. The patient was at that time in a very poor general condition, had lost a lot of weight, often vomiting from pain. I examined his leg. The site of injection was unremarkable. There was marked atrophy and shortening of thigh muscles with contracture of the knee. The leg was cold, white with thin, dry skin. There was decreased sensibility of the skin.

I treated him at the hospital for six weeks, an hour each day. The pain very soon diminished and the circulation was restored to normal in one week. His muscles grew stronger and he became able to stretch his leg.

The patient was able to leave the hospital at the end of the six weeks with nothing more than a slight difficulty in walking and a leg that was not quite as strong as the other. There was some deterioration following an attack of flu a year later, but it was cleared up with six Eutony treatments. No further treatment was necessary after that.

### *A Case of Phantom Limb Pains*

A student came to see me with the following history: after a motorbike accident ten years before, the right shoulder and brachial nerve plexus were so badly injured that he was paralyzed in the right arm with partial loss of feeling. He had refused



to have the arm amputated and all attempts at rehabilitation were unsuccessful.

Because of increasing pain, sympathectomy was done two years before. Following the sympathectomy, the pain was worse so that he could no longer concentrate on his work. As a last resort, a lobotomy was proposed, which he refused. The neurology department of Bispebjerg Hospital sent him for Eutony treatment. When I first saw him, there was a marked atrophy of the arm. He could not move the fingers, sensation was decreased, the hand was cold and blue. He could not use the arm for anything.

After the first treatment with Eutony, the pain ceased in periods. In a second treatment he learned to eliminate the growing pain by the "contact" technique. After the third treatment, the circulation returned to normal, as did the temperature regulation in arm and hand, and the blue coloration disappeared. With the fourth treatment, a slight feeling returned to the arm and hand, and finger movements and a slight supination of the wrist joint became possible. After the sixth treatment, he was able to continue with his studies and to pass his examinations successfully. He is now working as a teacher.

## *Two Cases of Poliomyelitis*

A law student came for a group course. Both his legs were paralyzed and cold to the touch. When he was four years old, he had suffered from asthma with severe breathing troubles. At six, in 1952, he contracted polio with complete paralysis of the left leg from the hip downward and partial paresis of the right leg and hip region. He was treated at the Poliomyelitis Institute in Copenhagen. At seven, he had his first operation: release of a tendon at the left hip. A second operation at ten: the displacement of a muscle from the right big toe to the ankle, without result. A third operation took place to turn the side of the left foot outward more and to stimulate growth (successful). There was a fourth operation: release of tendon at the left hip which succeeded. After a fifth operation, his right hip was placed in

plaster. There were no long-term results. He was bandaged (Candy brace with Swiss binding), boots to support the ankles, two crutches, various plaster casts during the night to prevent contractions of the feet (Spitzfuss) and to stretch the knees. When he was twenty years old, he was given 30 milligrams of Librium per day because of struma. As the drug gave no results, he stopped taking it on his own because he did not wish to become addicted to sedatives.

Physical state when he came for Eutony training in 1973: Both legs cold, edematous, marked muscular atrophy, especially of the left leg, which was 2.5 cm. shorter than the right. Lying down, he could not lift the knees. With bent legs, the knees would fall out to the side. On the left side, the stretch reflex could not be elicited. He walked with a long brace on the left leg and two crutches.

In addition to the weekly group courses, he received one Eutony treatment a week from a professional student of the school. The circulation became normal in a short time. The musculature of both legs strengthened so much that in six months he was able to walk without crutches. The following year he traveled abroad and got married. He passed his state examinations and has since worked as an attorney for an international commission.

From his own testimony, Eutony training developed him both physically and mentally, giving him peace of mind and the capacity to accept his handicap without trying to compensate for it in other areas. His concentration has increased. He felt that his equilibrium and body awareness and posture had improved to such a degree that he no longer needed canes to walk. In the house, he could walk without the brace.

A young female law student came for a summer course of eleven days. At the age of eight, she had polio with paralysis of both legs and weakness in the back, so that she developed a scoliosis. She walked with crutches, putting very little weight on her legs. She was dependent on help for several activities and could not get down on the floor without help. She came to the course because of her back pain. She participated in a group of forty pupils twice a day for one hour and a quarter each session. On the last day of the course, it was shown that her legs

had strengthened so much that in the prone position she could push her soles against the floor with such strength that her pelvis and back were lifted from the floor. The circulation had become normal, her back pain had gone and she had no more difficulty in remaining seated.

After nine months she returned for eight treatments which strengthened her back and legs to the extent that she could stand up alone. A year later she returned for eight treatments which straightened out her scoliosis noticeably. Her legs strengthened still more and she learned to walk with a cane. A year later, she stated that she had no further difficulty and could move about her house without the aid of the cane.

### *Denmark's Radio Symphony Orchestra, Copenhagen*

Right from the beginning of my work in Denmark (1929) musicians, singers, instrumentalists and students from the Royal Conservatory of Music were my pupils, seeking help for technical difficulties with their voices or instruments as well as for their rhythmical and breathing problems. In 1945, Waldemar Wolsing, the solo oboist of Denmark's Radio Symphony Orchestra, came to ask my help. He had difficulties with his finger movements and for this reason had consulted several medical specialists during the previous year. Even several months' vacation had not produced any result. He came to one Eutony lesson and immediately understood the reason for his dysfunction: lack of contact with his instrument. The next day he was able to play the solo part in an oboe concerto. Soon, some of his colleagues from the orchestra and Erik Tuxen, the chief conductor, came to my lessons. They decided that the whole orchestra should benefit from this help, and we began a three months' period with practical work and with Eutony treatment for those who had difficulties. During this time, each participant was under the control of a neurologist (see the following report).



After the three months, group work and treatments for all members of the orchestra, the choir, the conductors as well as the administration and technical staff and the staff directors, were continued for twenty-five years, during working hours. Three-fourths of the fees were paid by the Danish government. The experiences of the first year had shown that two-thirds of the expenses for replacing sick members of the orchestra and staff could be saved, and that the quality of the playing improved.

### *Results of a Survey Made on Sixty Members of Denmark's Radio Orchestra Who Took Eutony Work Over a Three-month Period in 1946*

Fifty-eight of the sixty participants answered the following questions (the other two were absent due to illness):

"How many days of sickness have you had over the three-month period?"

30 participants (22 musicians): "No sickness."

28 participants had had some sickness (eight colds, eight influenza, two mumps, one leg injured in a fall, one stomach ulcer, one bronchitis, one gout, two inflammation of the cornea).

"Did you come to the Eutony work because of some sickness?"

37 participants answered yes, 21 no. The sicknesses reported were strain in the muscles of the arms or legs, tenositis (inflammation of tendon), gout, infiltrations of muscles, headaches, lumbago, sciatica, stomach ulcer.

"Did the Eutony treatment do anything for these disorders?"

33 participants: "Yes," 17 participants: "Cannot say yet," and 8 had been in good health before.

"Have you the impression that the Eutony lessons have had a good influence on your work and the pleasure you take in it?"



33 participants: "Yes," 19: "Unable to say," 1: "Quite possible" and 5 "No."

"Do you believe that the eutonic treatment has had a favorable influence on your capacity for concentration?"

21 participants: "Yes," 12: unable to answer, 12: no answer, and 5 "No."

"Do you wish to continue the treatment?"

33 participants: "Yes," 7 "No" (of these, 4 had hardly come to the treatment at all).

It should be mentioned that most of the answers given in writing were quite detailed. There were answers indicating how a better control of nervous and muscular tonus had led to a better use of the violin bow, a more flexible technique in the playing of the wind instruments, the cure of a tenositis and writer's cramp. Numerous details were given which showed that they had understood the questions and had benefited from all they had learned.

### *Medical Report*

On March 10 and 12 I examined the members of the Symphony Orchestra of Denmark's Radio, who had just taken part in a three-month experimental Eutony course and treatment. Thirty-one people had been asked to participate, four of whom did not turn up, three participated for too short a time to be included in the results, two were sick during six weeks of the trial, and they too had to be excluded from the final results. Of the remaining twenty-two, for whom the results of Eutony can be reviewed, nine were orchestral performers and thirteen were technical and administrative staff.

The results of my inquiry among the nine musicians were: all stated that they were satisfied with the results of the course and treatments. Pain and tension in their muscles had disappeared or diminished so much that their command of their instrument and their musical expression were improved. They could play for longer periods without fatigue or reactions from the muscles. Some said that a customary nervousness when facing a difficult passage had also disappeared. They all en-

joyed better health in general and were able to benefit optimally from Eutony. One participant suffered from headaches as a result of a concussion four years before. The headaches disappeared during the Eutony work. One participant had learned to cure headaches through Eutony practice. One participant had had sciatic pains for a year which disappeared in the course of the work. As a result of flat feet, one participant suffered pains and tiredness which disappeared with Eutony, as did the need to wear arch supports in the shoes. One participant was unable to play difficult passages because of cold fingers. He regained the ability to maintain warm hands and fingers.

Of the twelve participants employed in the administrative and technical services we can report: One participant had experienced nothing in particular. The eleven others stated that the course had been of great help to them, particularly for muscular pains and tiredness which had either disappeared or improved considerably. One case of tenositis was cured completely, as was one case of recurrent headache. One case of periarthritis humeri which had caused pain and hindrance to movement over one year was considerably improved with disappearance of pain, and only a slight hindrance in movement remaining at this time.

In the light of my examination of the staff before and after the three-month Eutony work, I consider the overall result to be very satisfactory.

Thorkil Vanggaard, M.D.

## 5 THE PRACTICAL APPLICATION OF EUTONY IN EVERYDAY LIFE

Up to now, you have read about the various principles of Eutony. But how can you make use of them, if you are not a professional student of the four years' Eutony training?

A year after my first book had appeared in Germany, I received a letter from an eighty-five-year-old woman psychologist, living in a nursing home, who thanked me for her recovery through reading my book. In clear handwriting she explained that she had been unable to write for several years, but now could write letters for other patients and help in the nursing home. "There are still some slight difficulties left, due to anal fixation—but I am sure to overcome them soon," she concluded.

This book does not contain illustrations or directions for exercises, apart from the drawings of the control positions. These control positions, which are not meant for beginners who have not yet learned to respect their limits, represent a mode of testing objectively the flexibility of one's joints and muscles.

Through the eutonic approach you will experience a new way of respecting your body, being the expression of your entire person. You will learn to develop your sensitivity and feel—not imagine—your entire body in all its dimensions from the outer skin towards the complete inner space with muscles and bone structure, tissues and inner organs. Your attitude will change: the usual mechanical approach to moving, straining your muscles, jogging in the city, filling your lungs with the exhaust from cars and buses, proud to be doing the best for your health, will disappear.

For many years it has been known that efficiency in life and in sports has nothing to do with muscular strength but depends on the economic functioning of the skeleton with a clear direction into space and on well-developed sensations.



Annie Famose, who won the first prize at the downhill-ski race at the Olympic Games in Grenoble, demonstrated for the first time what results can be reached through eutonic approach (it is interesting to watch in slow motion the film that was made of her run). Since then, Annie Famose has been training sports professionals and coaches in America and now has her own school in France.

The Belgian sprinter Jacques Borlée, who became world champion in Budapest in 1983, has been preparing his success in his regular work with a licensed eutonist.

In France, several generations of sports and gymnastics students have become acquainted with the principles of Eutony during their professional studies at French universities.

Modern neurology supports the discoveries made in Eutony during the last fifty years. It is my hope that the gymnastic training in schools and especially the rehabilitation of the sick will come away from the mechanical way of strengthening muscles and will profit from these new discoveries which are no longer based on dead bodies but on living organisms. Eutonic movements, equalization of tonus and adaptation of tonus to the actual task, give ease and lightness in the entire body (even when moving fast or lifting heavy weights).

But let us go back to your own work with Eutony. You will have understood that mechanical training (lifting your leg 50 times etc. etc.) has nothing to do with Eutony. Your first step will be to be able to feel your whole body, beginning with the surface, inch by inch, always keeping aware—not only intellectually—of your sensations and the direction in space. We use no music (apart from the artistic development at an advanced stage of the professional training) in order not to disturb you in your own search for awareness. And we give no model which you might imitate. Everybody has to make his own discoveries and find the limitations in the movements of his joints and spine. Even in classes of fifty pupils, all working on the same theme, everyone has to find his own solution.

So you will understand that I cannot give models or detailed exercises which would make you imitate positions and movements and lose the vast possibilities a real eutonic approach is offering you. Instead I will give you some instructions leading you to the basic experience of Eutony and will enable you to



use Eutony in all situations of daily life: in sitting, standing, walking, in all kinds of practical work (in the kitchen, in factories and offices), in sport and play, in every kind of artistic expression as well as in periods of stress and illness.

While you are reading this, let us work with your legs just where you are sitting on a chair, or lying on your bed. Try to become aware of where your right foot is placed, without looking, just through the sensation of your skin. Find your heel through its touch to the floor or to the mattress. Feel the entire foot sole, the arch, the bones and muscles between foot sole and instep, the skin covering the whole area. Add the toes, one by one, move each one separately to become aware of its connection with the middle foot. Become aware of the length of the toes and widen your awareness towards the foot joint, the ankle and the achilles tendon of the leg, the calves, the area under the knee, the back of your thigh up to the seat bones and buttocks. Without forgetting the back side, add the sensation from the foot toward the tibia and the fibula on the outer and inner side, the whole skin of the leg towards the groin, the pubis and the whole pelvis up to the side of your hip.

Then let all the sensations from this part of your body come forward at the same time like many voices telling you the various sensations of your right leg. Start with the foot sole and move gradually upwards, move slowly and note the different sensations. Then move the other leg which has not been prepared for this slow movement. Compare the right foot with the left foot. Does the one move more easily? Is there a difference in weight, in volume, in support? Is there a difference if you take a few steps? Please observe carefully and try to remember the results.

To prevent accidents, it is advisable that you work with your left leg in the same way before you get up and leave the house. You change muscle tonus and circulation by giving your full attention to your left leg. But before you start to do so, let me advise you not to expect the same sensations as you have just felt in your right leg and in this way reduce your ability to become aware of "the reality of the moment," an important step in developing Eutony. Try to begin anew, without preoccupation of any kind, and you will be astonished to find how different the

conscious awareness of your body can be, depending on your mental and physical state and on the influence of temperature and atmospheric pressure. Even after fifty years of daily work with Eutony, I still make new observations!

You can work in this way during many a free moment: sitting in the bus, waiting for your train, during a lengthy meeting without disturbing anyone. Your health will improve and you will find it easier to tackle your problems. Mechanical repetition of movements, on the other hand, will exhaust your body instead of stimulating its vital functions.

Still better is the development of awareness of the envelope which is your outer skin. The outer skin makes you experience your limits towards your surroundings and enables you to explore these surroundings through touch and contact. The clear feeling of your outer form is necessary for the development of your body image and your orientation in space.

The skin regulates your temperature; without stimulation of the skin through touch or licking, young children and animals cannot live, the production of antitoxins being stimulated through the skin. Stimulation via mechanoreceptors in skin and tissues (brushing, showers, massage) is necessary for blood and lymphatic circulation, for the breathing process, the hormonal production, in fact all the vegetative functions.

An easy way to stimulate the outer skin is to use the resistance of the floor in lying comfortably on your back, with a small cushion under your head, if necessary. Become aware of the touch of both heels, the calves, the back of your thighs up to the pelvis and sacrum, the touch with the lumbar region, the ribs, the shoulder blades, the head, both arms, hands and fingers. Notice simultaneously the different qualities of weight pressure against the floor from the various parts of your body until you feel one great touch with many nuances and qualities.

Then start to turn slowly to one side, noticing all the changes of pressure until the entire body from foot to head is lying on its side. Try again to obtain the wholeness of touch with the floor. Roll onto your stomach in the same way, observing the difference in touch of your front side, the softness of the stomach area, the touch of your face etc. etc. Then roll onto the other side, again noticing in the slow movement all the nuances

in the quality of pressure. When you lie on your side and feel the touch with the floor, try to complete it with the sensation of the totality of your outer skin. The touch of your clothes may help you to find the surface of your body where there is no pressure. Try to feel the difference in the fabric touching your body (cotton, wool, silk).

Roll onto your back. Include your arms from the shoulders to the finger tips and change their touch by rotating your whole arm inward and outward.

Let the arms lie along your trunk with the palms turned to the floor. Then—without making any movement—*pretend* to stretch the fingers of one hand, one after the other. Pretend to stretch them as far as possible, rest, and do it again with all fingers together. Now lift the whole arm from the fingertips, lift the other arm on which you have not been working, and compare the sensations in both arms. Although you have only pretended to move, there will be a difference because muscle tonus and circulation are influenced by the intention to move in the same way as if you had carried out the movement. With the intention to move, you improve your circulation and tonus flexibility and avoid motor innervation and the waste products in your metabolism. This mode of stimulating the circulation is especially important when movement is difficult or impossible, for instance in cases of broken limbs, after poliomyelitis and with quadriplegics.

After having worked with Eutony for some time, you will experience that your body sensation is present also when you do not make a special effort for it. Now you are on the right road toward body consciousness. It is important, however, that you do not pretend to feel what you cannot yet observe. You have to accept that you are still on your way, that you cannot force the development of your body consciousness.

If you find it difficult to keep your awareness on your body while doing Eutony, it may help you to tell yourself aloud what to do, on which part of your body to work. By giving these instructions aloud, you may avoid thinking of other things outside your Eutony work.

It is very important to keep apart the real sensations you obtain through Eutony from the imaginations of your mind to



avoid an unrealistic and uncontrolled state of your mind.

Through the development of the awareness of your skin and the touch with your surroundings, you stimulate all vital functions as well as your capacity to adapt easily to the demands of daily life with the right amount of energy. Your body image gives you your identity, self-assurance, security in your movements and clearness in your orientation in space.

When making "contact" you pass the visible limit of your body and include in your observation your radiation zone, the electromagnetic field which is the invisible part of your organism. In this way you can influence and regulate the balance of energy in your body. With "contact" through your hands with the objects you touch, you obtain release in head, neck, throat, jaw joints, shoulders, armpits, arms, hands and fingers as well as in intercostal muscles and diaphragm. Through your head you obtain release of tension in face, forehead and inner space of the brain.

Making "contact" through your feet into the floor means becoming aware of the invisible part of your feet reaching down into the floor. Following consciously the direction of your feet one or two meters into the floor, you will obtain a strong release in pelvis and diaphragm. Old fixations of emotional tensions in diaphragm and pelvis bottom as well as acute tensions and stage fright can be released in this way. Through working with "contact," long-forgotten impressions mostly from early childhood and the prenatal state may reappear and be remembered, sometimes clearly with all details such as smells, colors, feelings, sometimes as vague feelings of discomfort, sadness or lack of security. The freedom and lightness you feel after such a release is a great experience which you will never forget.

When you have integrated Eutony into your daily life up to this step, I advise you to participate in a Eutony workshop with one of the graduate Eutony teachers. There you will be able to get help if you have difficulties as well as personal advice and new inspiration for your further work.

At the end of this book there is a survey of the places in which Eutony is taught. You may write to the Gerda Alexander School in Copenhagen for details of the yearly summer courses in Germany and France.





PART II

*Applications  
of Eutony*



## 6 A SELECTION OF WRITTEN OBSERVATIONS, DRAWINGS AND MODELINGS

The following examples will serve to show how varied are the reactions of students to simple Eutony experiences which, starting with the body, always apply to the total person. At the beginning of a summer course, a mixed group of beginners and advanced participants were given the following task: those sitting at a table had to close their eyes and remain without moving. While in this position, the right and then the left foot had to be sensed, then both together, then the sole of the foot, the ten toes, the heel, the arch and front of the foot, the ankle, the shin-bone and fibula, the calf, the knee, the thigh up to the hip joint. Starting from the ischia bones, they had to feel the seat of the chair and its connection with the pelvis and stomach area up to the chest. Then the left and right sides of the chest with the breastbone in the center and the connection of the ribs to the vertebrae, the shoulder area between the two shoulder joints and the arm sockets in relation to the arms, elbows, lower arms, hands, fingers; likewise the shoulder area in relation to the neck and the head, the mouth and the throat, the upper and lower jaws with the tongue, the hard and soft palates, the back of the head in relation to the nose and the eye sockets, the scalp complete with the skin and hair. Duration of the experience: nine minutes.

In order to avoid individual impressions being influenced by remarks made by the group members, the participants were asked to write down and draw what they had experienced immediately after the exercise. Then, they were asked to model their experience in clay with the eyes closed. Only then were the written texts read aloud and the clay shapes and drawings shown.

In looking at the following shapes and drawings, and the



description relating to each one, I am afraid you will search in vain for any real connection between shape and text. Not only did the students' shapes and descriptions vary from each other, in each case the student's shape and description did not connect with each other!

Fig. 1—The shape of the body felt, through the feet, the strong connection with the floor to the earth. The striving upward through the stretching of the vertebrae strongly sensed the "eutonic position." From the head, everything became lighter and brighter. Tranquillity, safety and radiation into space. Connection with other participants and a peaceful feeling.

Fig. 2—Sensation of body—alertness.

Fig. 3—Feet were firmly fixed to the ground, the head directed upward. The group was experienced as a harmonious unity.

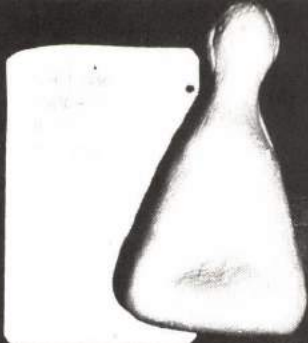
Fig. 4—After this intensive activity with myself, especially after feeling my posture and relaxed position of the head and neck, I felt as though I had freshly created or modeled a harmonious face. In the actual modeling I felt that I was sensing the contours of a face entrusted to me.

Fig. 5—It was the first time that I took part in such an experience. I felt a strong but pleasant pressure on the seat of my chair and a heaviness in the lower part of the body, but no connection with my feet which felt cold on the ground. With further work I felt strong tensions in the shoulders where everything else seemed to be blocked. I could not feel my head very well, only my spinal column at the neck.

Fig. 6—Back, arms and pelvis formed a circle from which warmth radiated outward. Head and neck beautifully modeled and felt. Seat of the chair as basis—felt solid. Feet felt like surfaces unconnected to the body—cold and isolated.

Fig. 7—Warmth and stimulation were felt from below upward—leading to improved posture.

Fig. 8—Differences in space, quality and length. Brighter in the head; top of the skull and hair particularly clear. Pressure points became less acute.



1



2



3



4



Fig. 9—My feet became bigger, I felt my back more than my front side, mostly from my neck to my shoulders and to the back of the head. I became aware of my ears hearing what was said to me. A desire to accept other people by taking them on my lap, but felt difficulty in reaching out to others because of tensions in arms and legs.

Fig. 10—I felt a great inward peace and security. Unfortunately, I was constantly disturbed by a fly. The longer I worked on the head, the more aware I became. Everyday worries and needs were forgotten—I was happy. I tried to express how peace expanded within me and outside of me.

Fig. 11—Clear contact at the ischia and feet. On relaxing my tongue, I felt the inside of my body open up. The back grew upwards toward the head. The head was large and clearly outlined and tilted backward gently.

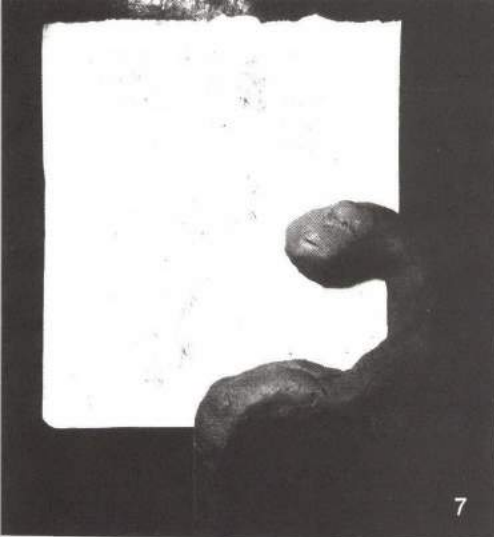
Fig. 12—The biggest experience for me was to sense the connection between the neck and the back of the head. As I relaxed my arm sockets, I simultaneously relaxed my knees. On contact with the floor, the feet were noticeably sensitive.

Fig. 13—I was particularly struck by my experience with the following association: I felt myself as an "I"—but also felt in a manner of speaking a "greater I." I felt myself enclosed—as if I were crouching inside an egg—and yet at the same time felt completely integrated with the others.

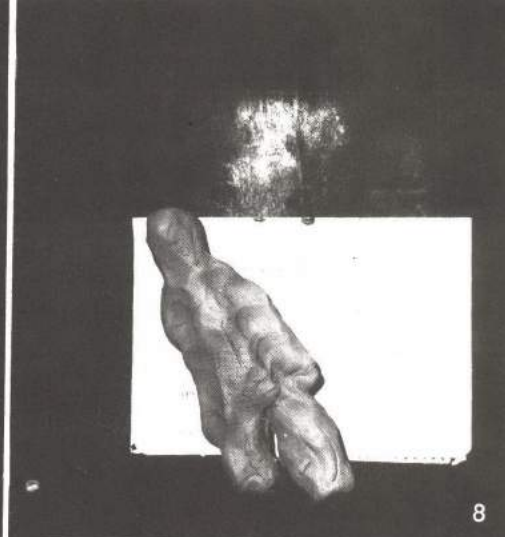
14—Although I did not want to show the suffering of my body, the model showed the imbalance of the upper part of my body as compared with the lower.

Fig. 15—I breathed through my feet, my left foot twitched lightly—warmth—my mouth became quite soft and rosy red. Suddenly I felt my head quite clearly, its hardness, sitting quite lightly on my neck. Then suddenly I had an awful feeling. What does Eutony give me, what does it give to anyone? Where is Eutony leading us?

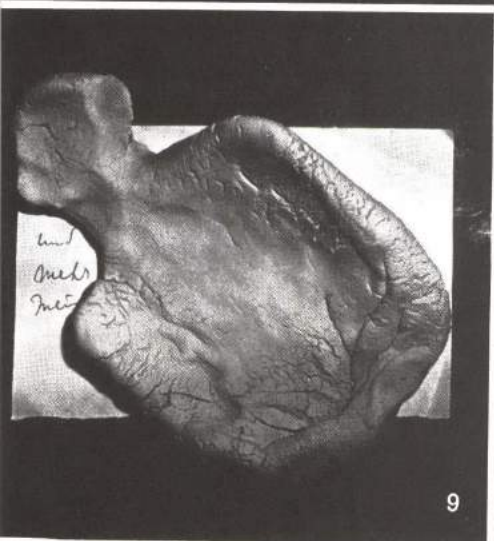
Fig. 16—I had difficulties in becoming equally aware of the right and left sides of my neck. The front of my neck felt hard. At first, I had almost a slight feeling of weakness. Contact surface heavier on the side of the left hip almost without feeling.



7



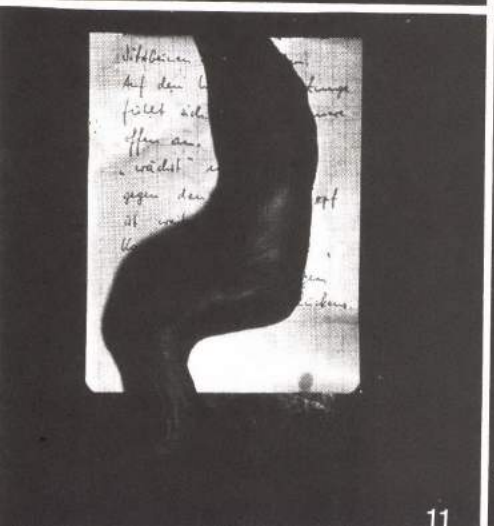
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12



Fig. 17—From an attitude of hard resistance, experienced a sudden wave of release right up to the head.

Fig. 18—A sense of complete being, a circular movement through the whole of space, a sensitive concentration in large concentric circular movements just as Van Gogh often painted the sun. I sensed contact with the others very nearly like an extension to both sides—from left to right and from right to left, always flowing in ethereal circles. I myself was placed in the outer layer. My head and back remained as they were—but closely connected with the whole. I also remained sensitive and conscious of my hips. I couldn't draw anything. In modeling, however, the result corresponded in some degree to my feelings.

Fig. 19—I was conscious of the form and connection of my body with the environment. Felt great tension in eyes and back.

Fig. 20—I felt pleasantly peaceful in an open and relaxed mood which wanted to radiate outward, but remained in fact in myself.

Fig. 21—My head was a round shape full of tension on a tense neck.

Fig. 22—After wanting to retreat at the beginning into a sphere, I gradually began to open up in all directions.

Fig. 23—Tension in the head—contact of the feet with the ground was not very successful. Slight relaxation of the muscles in the back and in the arms.

Fig. 24—I felt my right foot very well; it was touching the ground and cold—the left foot not at all.

Fig. 25—I felt very closely what is shown in my drawing. I sensed a released feeling of my skin, and in the head a sensation of warmth; my ears felt warm and big.

Fig. 26—A large space within the legs and the pelvis—a large mouth, large throat.

Fig. 27—A tension between concept and feeling, a separation of body and spirit. I was reposing in my center, feeling my body as a unit, closed in upon itself. At the same time, I sensed the general peacefulness of the group.

Fig. 28—Oneness—radiation.

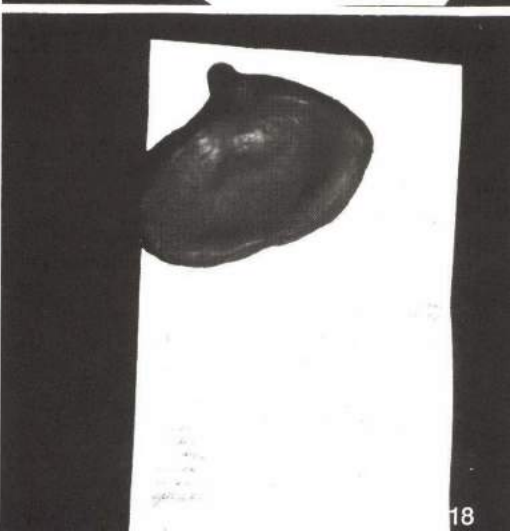
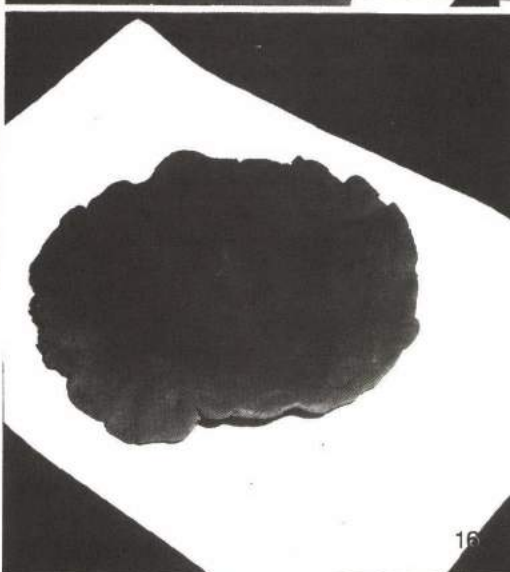


Fig. 29—I felt extremely uncomfortable in my seated position—my feet were twisted, my upper body bent forward slightly. I sensed strong tensions in my legs and around the nape of my neck which impeded my concentration. The uncomfortable tensions caused a slight feeling of aggression in me—emanating from the back of my head, which seemed large and the center of radiation.

Fig. 30—Comfortable and warm.

Fig. 31—I expanded and felt free and warmer in spite of a bad sitting position, and much fresher and relaxed. In particular I experienced a strong upward force and a feeling of wide space. A five-pointed star reposing on itself.

Fig. 32—At the beginning of the exercise, my right foot was flat on the floor and I sensed this foot and the right leg clearly and, in fact, the whole time. The left foot was supported only by the front part and I ceased to sense it. I felt the remainder of the body as three hollow spaces; one for the head, one for the chest and one for the stomach and pelvis. The positions worked on were sensed as limited by a thick shell while the remaining positions had only a thin wall. Although I had intended to shape a completely abstract figure out of three hollow spaces with the modeling clay, in actual fact I had shaped a human figure.

Fig. 33—I discovered hollow spaces upward—a warm cap of fur around the head—throat as a pipe—shoulders pressed downward toward the pelvis. Positions worked on—knee and heel, peaceful and relaxed. Felt contact with everyone around me from the security of my seat.

Fig. 34—I felt spaces in the throat, spinal column at the neck, inner spaces of the neck and head; seat support, ischia, musculature of the seating surface and the surface of the feet.

Fig. 35—Growing outward from inside—permeable.

Fig. 36—A state of tranquility—enclosed yet open.

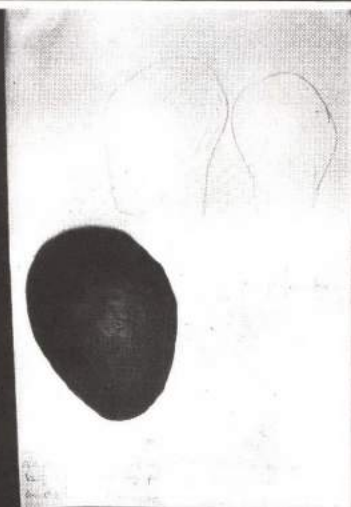
Fig. 37—I concentrated mainly on the head and had a feeling of warmth. I sensed the peace around me. My model lacked a mouth.



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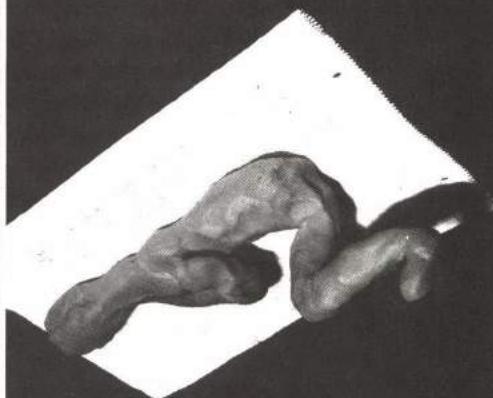
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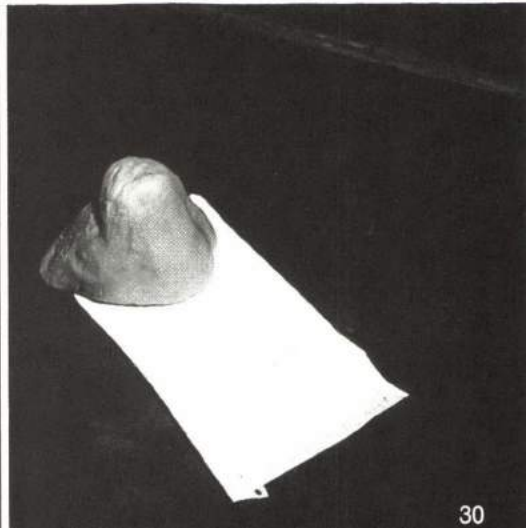
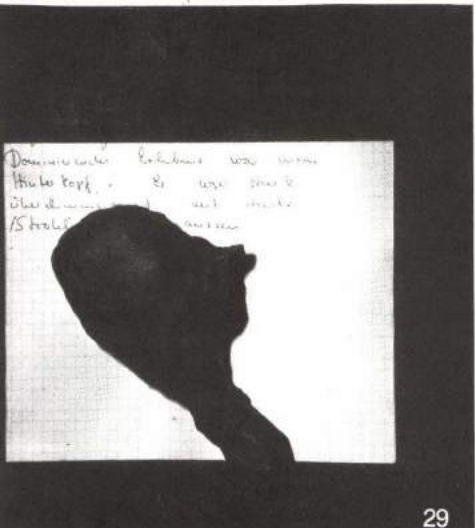
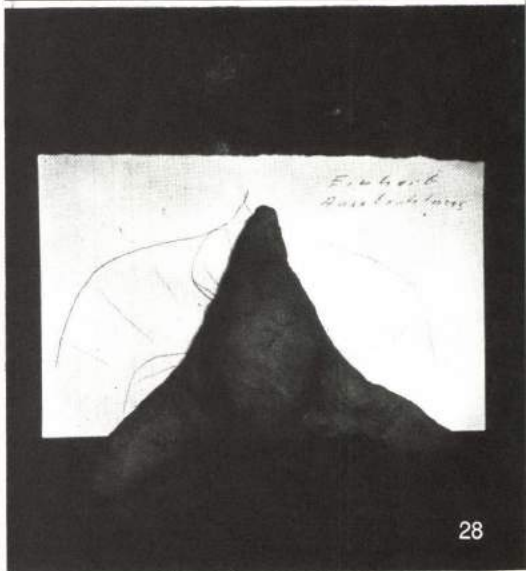
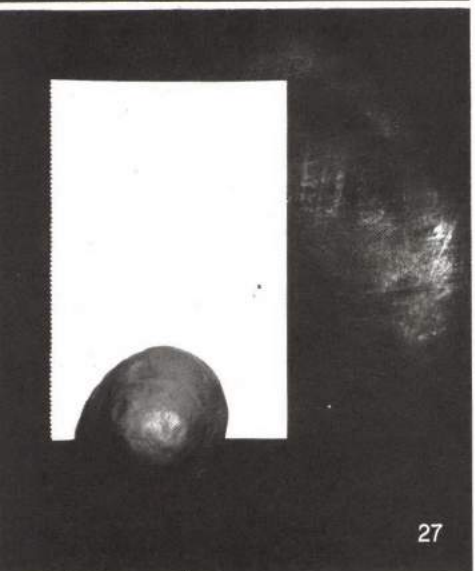
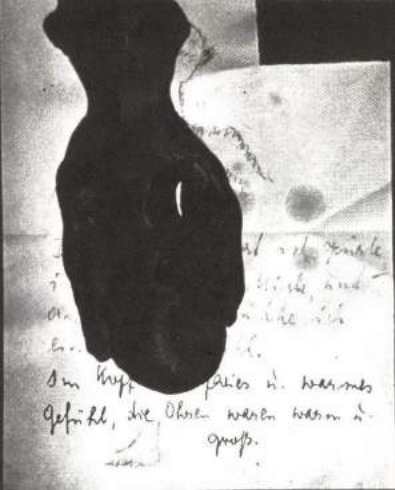


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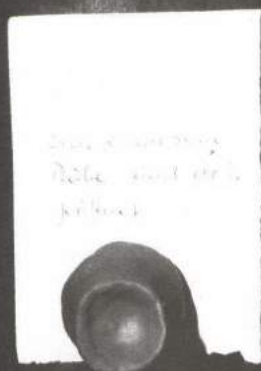




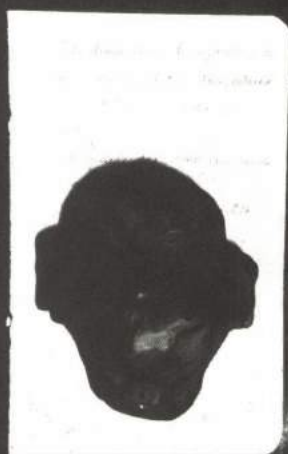




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Readers will, of course, appreciate from these examples that one cannot draw up a simple exercise program to suit every case as each individual must find his own way to experience Eutony.



## 7 OUR BODY IMAGE

Our body image is born with us. In the first years of life, the child learns through close body contact with the mother, by multifarious contacts with things, and by his limitations in regard to the environment. Slowly he becomes conscious of his own body. If a small child is allowed free movement from the beginning, one can observe how even in the first weeks he prepares himself to stand upright.\* In a healthy child, stretching and walking reflexes are already natural from the moment of birth. If a child is held in such a way that the sole of his foot touches the ground, he stretches and makes walking movements. He also stretches against the bars of his crib while lying down. During tests lasting over months, all variations of movement are tried out until he manages to stand upright on his own feet.

The development of body independence through standing in an upright position, walking and running, hopping and jumping, (the important moment when a child succeeds in freeing himself from the ground) is an essential basis for self-esteem, self-confidence and independence.

If the free development of movement in a small child is restricted, whether from lack of space in small urban apartments, lack of suitable playing areas, not allowing the baby to make its own discoveries by itself, mechanical gymnastic exercises for infants—but also through misunderstanding on the part of adults because of their own incorrect movements and breathing habits, whose incorrect attitudes and tensions will be imitated—then the feeling of the unity of the organism, the freedom of posture and movement are lost. Images of the shape

\* See also books and films by Dr. E. Pikler, Budapest, in bibliography.

and proportion of the body are unconsciously formed which do not coincide with the visible reality. The reflex of standing upright is restricted by muscular tensions which lead to incorrect concepts of the pelvis, hip joints, spinal column and functions of the limbs. These incorrect concepts are clearly visible to the practical observer in the attitude and movements of the child even before they lead to organic damage. Eutony training shows that by making children and adults aware of such incorrect concepts, bad habits disappear within a short time without special exercises. Even the best training and special treatment can have no lasting success if a false body image is not corrected simultaneously.

In 1960 I tried for the first time during a teaching period to model a human figure in clay; in this way I hoped to make the students aware of their body image. To my astonishment, in addition to missing elements in the body image, the lack of body feeling and disordered movements and inadequate breathing, organic sickness as well as the physical adjustments of the student, were visible. No matter how often they tried in new tests consciously to avoid modeling their basic defects, they succeeded only when the missing body awareness was awakened and all of the sympathetic system disturbances were removed. A student who had not seen himself psychically as standing on his own feet was determined not to forget to model his feet the next time but, in fact, he again modeled his legs without feet and remarked that he had not enough clay. Nonetheless, however much material he was given, there was never enough for the feet. It is the same case with students who have contact disorders; the hands are left out. This ability of people to express their body-soul image by means of a model without any previous exercises is always impressive.

The teacher concentrates on the deviations which are in direct connection with the body image. The students soon understand, however, that their whole personality is shown in their model; their own interpretation of the work is often astonishingly comprehensive. It is also surprising that a large majority of students are able to handle a large lump of clay in such a way that even with the eyes closed all the material is used up; while

others, trying with many different quantities, always have either too much or too little.

The style and manner in which the clay is handled also portrays the general condition of the participants; whether a figure is modeled directly out of all the material or whether it is first divided into six portions, each of which is first worked and then put together. In the latter case, it is nearly always the work of an analytically inclined person.

Sometimes one can see how more or less conscious desires are realized; e.g., a thin man gives himself oversized shoulders, an ill-proportioned woman models a delicate, elegant body. Intellectual personalities often model a human being as a body without a head or a head without a body. Ballet dancers often show the body in relief; because of their training in front of a mirror, they are mainly conscious of the front aspect of the body.

Thus in general it seems that visual control is not decisive for the body image, as those born blind do not differ in modeling from the sighted. A comprehensive collection of drawings (some 2,000) mainly executed by gymnasts, sportsmen, dancers, physiotherapists and doctors showed that even they, who work professionally with the body, had no specially developed body feeling and body image.

The task was:

- (a) To model a human body with your eyes closed.
- (b) To model a human body with your eyes closed before and after an 8–14 day Eutony course.
- (c) To draw a human body before and after an 8–14 day Eutony course.
- (d) To draw what you now feel in your body.
- (e) To draw a human skeleton.

*(a) Model a Human Body with Your Eyes Closed*

From our collection of thousands of examples, here are representative ways that people responded to the instruction to make a model of a human body while their eyes were closed. Each person had about twenty minutes' time to work. I think each figure speaks for itself so in each instance my comment is as short as possible.

Fig. 38—Senses the wholeness.

Fig. 39—Senses the wholeness.

Fig. 40—Solution of an analytical type.

Fig. 41—Young energetic teacher with both feet on the ground; observe the reduction of the right waist. On questioning, it came out that he lacked his right lung.

Fig. 42—Some months previously, an injured left knee.

Fig. 43—This student suffered from severe circulatory disturbances and lack of feeling in the shoulder, arm and hand on the left side.

Fig. 44—Image of the human body; pelvis, chest and spine formed one over the other.

Fig. 45—Body image speaks for itself.

Fig. 46—Typical solution of an intellectual student; either body without head or head without a body.

Fig. 47—Solution of an analytical type.

Fig. 48—Typical figure without a head by an intellectual.

Fig. 48a—Idol from Mesopotamia, approx. 3000 B.C.

Fig. 48b—Cycladean idol, approx. 2000 B.C.

Fig. 48c—Marble idol, Paros Island, approx. 2000 B.C.

Fig. 48d—Idol from Naxos Island, approx. 1800 B.C.

*(b) Model a Human Body with Your Eyes Closed Before and After an 8-14 Day Eutony Course*

Fig. 49—Model of a human body. Work of a nun before and after a 14-day Eutony course.

Fig. 50—A woman who suffered greatly from not having a

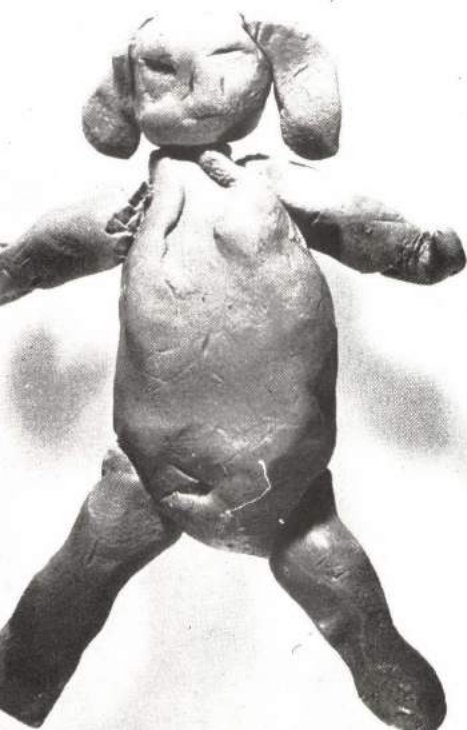




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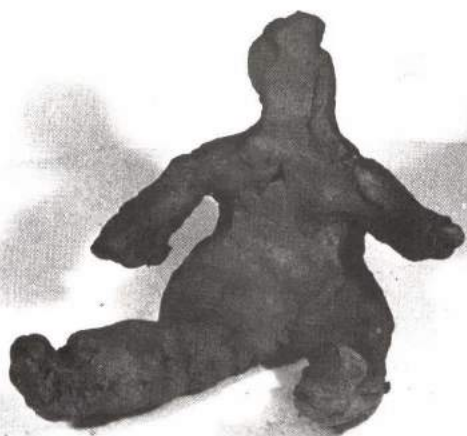
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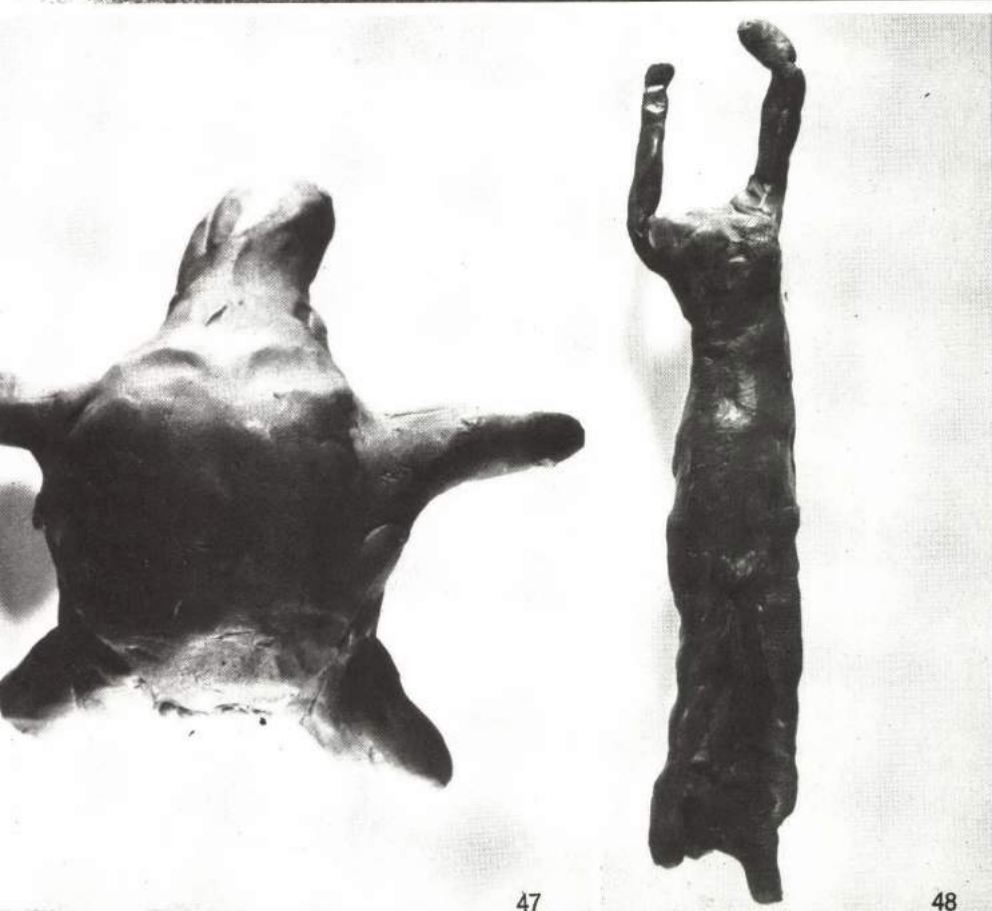
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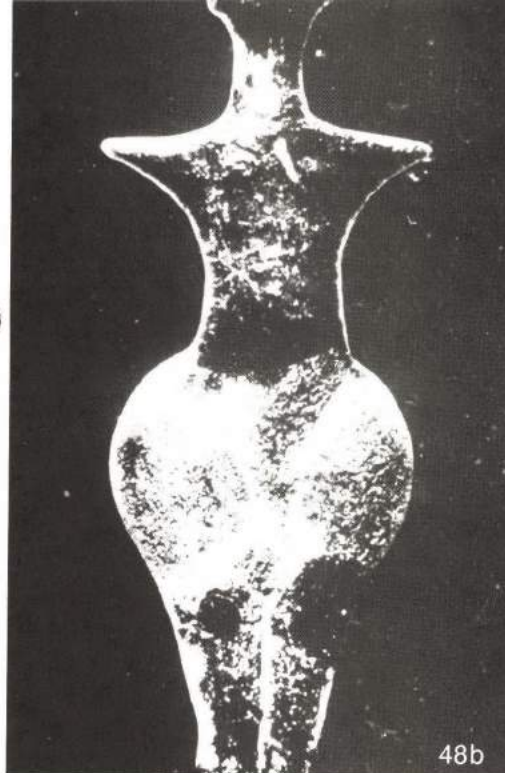


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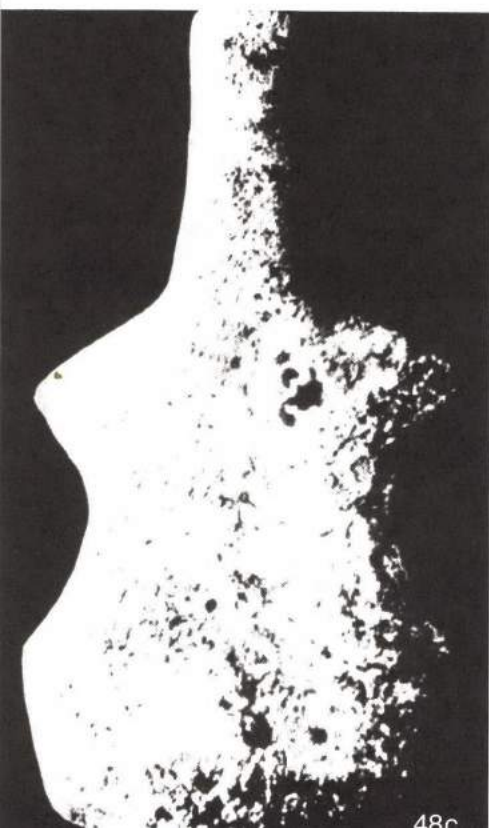




48a



48b



48c



48d



child first modeled a baby in swaddling clothes—then after ten days, an adult who could not stand on his own feet.

Fig. 51—Before and after a 14-day Eutony course.

Fig. 52—Work of a doctor, specialist in autogenous training.

Fig. 53—Before and after a 14-day Eutony course.

Fig. 54—A sportsman modeled a female figure without arms—after ten days, a male figure standing up with arms clamped together.

Fig. 55—The first model of a woman reminds one of prehistoric shapes and represents only an outline of the body—standing up on feet. With the second, the arms and pelvis are sensed differently.

The similarity of many models with archaic idols (cf Figs. 48a–48d) confirms Jung's assertion that these early stages in development are evident even in modern man.

(c) *Draw a Human Body Before and After an 8–14 Day Eutony Course*

Fig. 56—Drawing by a gymnast, physiotherapist or psychotherapist.

Fig. 57—Drawing by the same person after a 14-day Eutony course.

Fig. 58—Drawing before a Eutony course.

Fig. 59—Drawing by the same person (Fig. 58) after two 14-day Eutony courses.

Fig. 60—Drawing before a Eutony course.

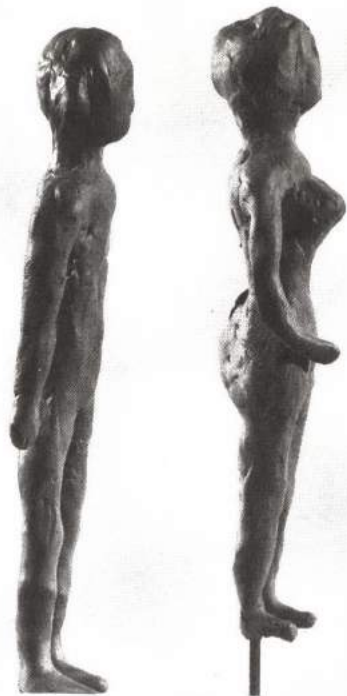
Fig. 61—Drawing by the same person (Fig. 60) after an 8-day Eutony course.

Fig. 62—Drawing before a Eutony course.

Fig. 63—Drawing by the same person (Fig. 62) after a 10-day Eutony course.

(d) *Draw What You Now Feel in Your Body*

The following drawings by sports and gymnastic teachers (Figs. 64–70) show how perfunctorily even people who train



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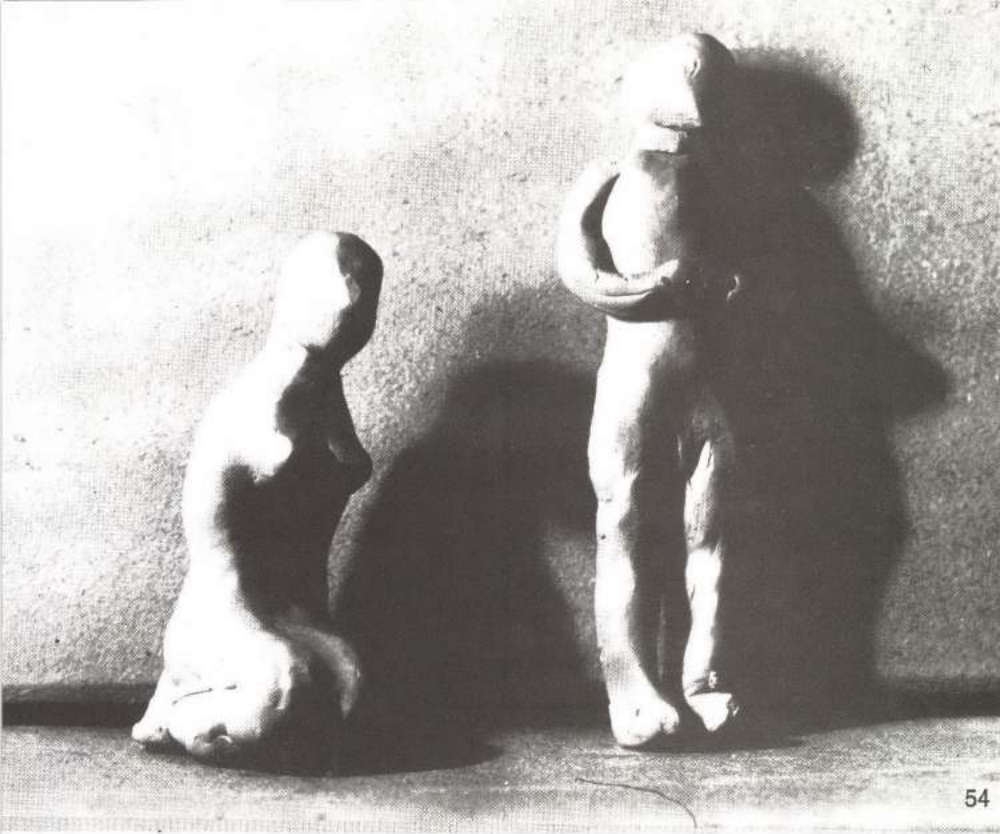
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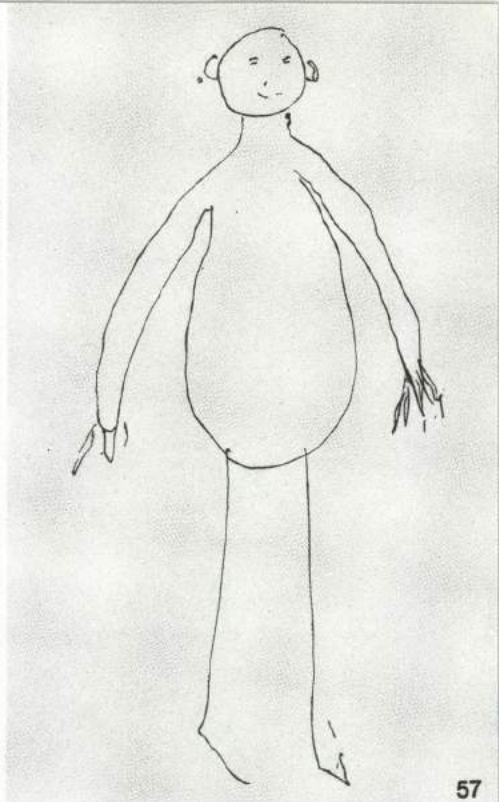


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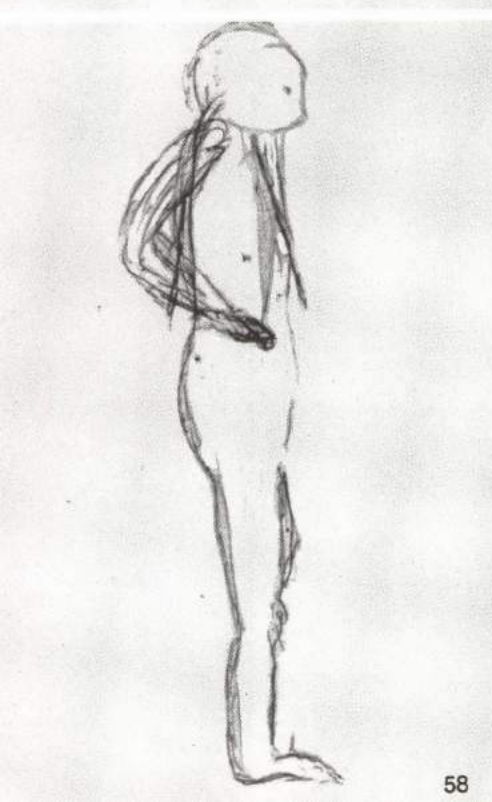




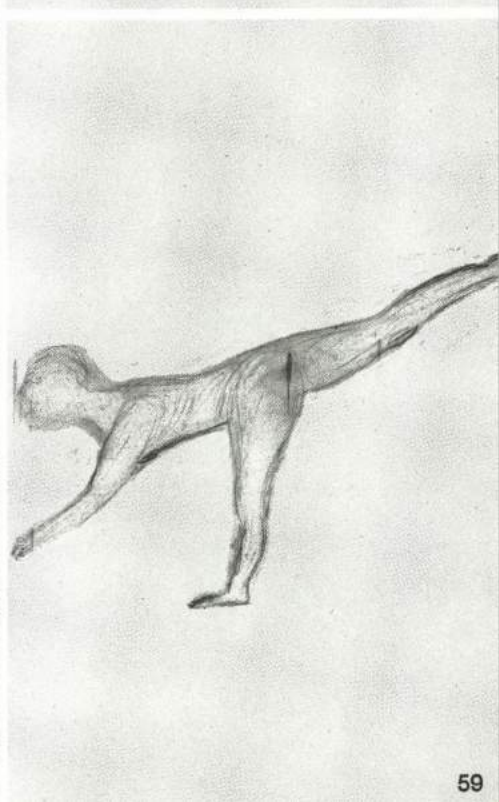
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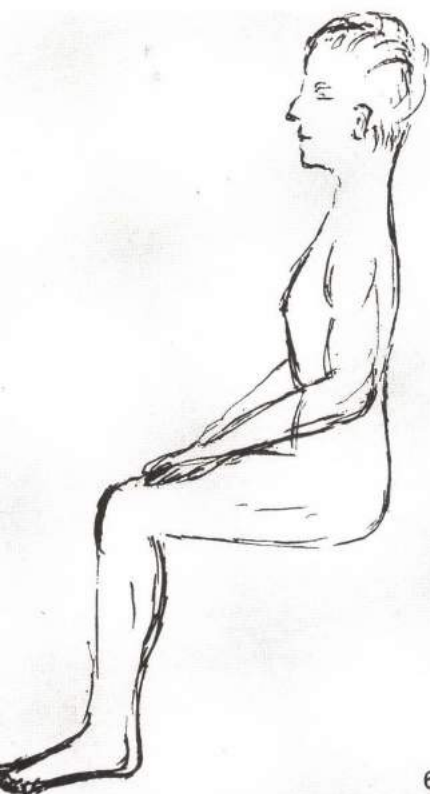
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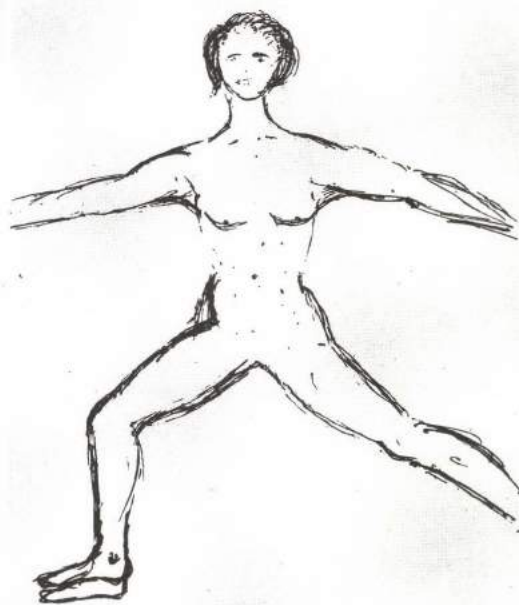
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their own bodies experience them. The instructors asked participants to darken on their models those parts of their body where they perceived sensations. For people of our Western culture, this perfunctory body feeling is not the exception, but the rule. Most men only feel their bodies when they have a pain or when they feel a pressure from outside.

In psychiatry, a complete lack of body feeling or body image is regarded as a sign of severe mental disturbance. My experience shows, however, that people without previous training in body awareness never have a complete body image or body feeling.

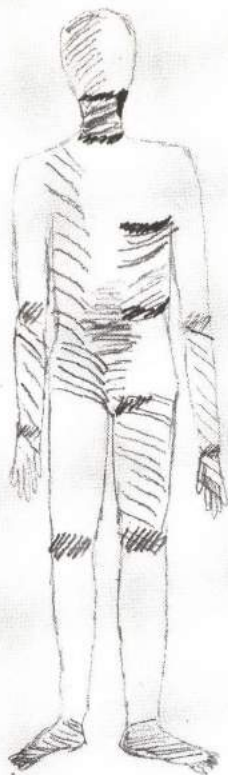
(e) *Draw a Human Skeleton*

The typical drawings of skeletons selected here represent the false body images which inevitably affect attitude and movement.

*Group I* shows the many possibilities of poorly conceiving the position of the spinal column and results of overstrengthening the posterior, back, neck, head, shoulder and arm musculature (see the normal position of the hip joints and spinal column in comparison to the body centerline in Fig. 71). In addition, the shifting of the spinal column from the center of the body to the periphery of the back testifies to the loss of the supporting center: independence.

*Group II* shows ignorance of the connection of the legs to the hip joint and pelvis. It leads to overstrengthening the leg and pelvis musculature and to a restrictive movement of the hip joint.

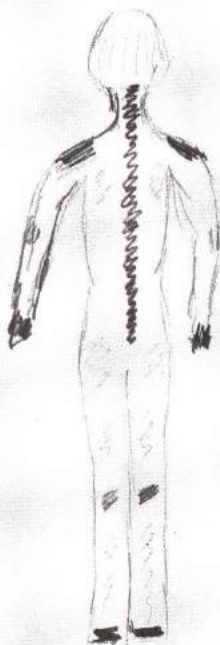
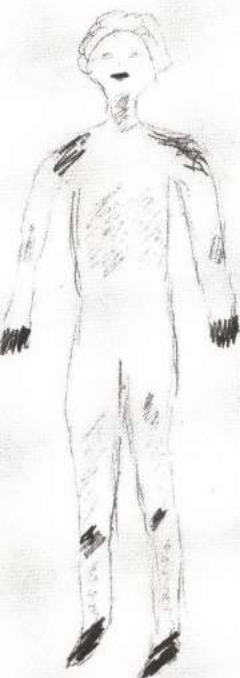
*Group III* shows that many people have an erroneous concept of the breastbone and the ribs, as a result of which they restrict the breathing function and also restrict the movement of the diaphragm, the intercostal muscles and the pelvic girdle. The fact that one finds such drawings made by doctors, physiotherapists and gymnasts must in part be attributed to the incorrectly jointed skeletons which are often used in anatomy instruction.



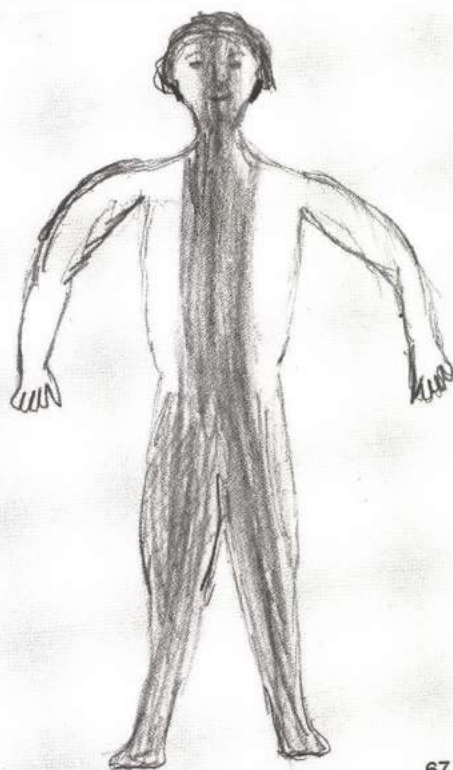
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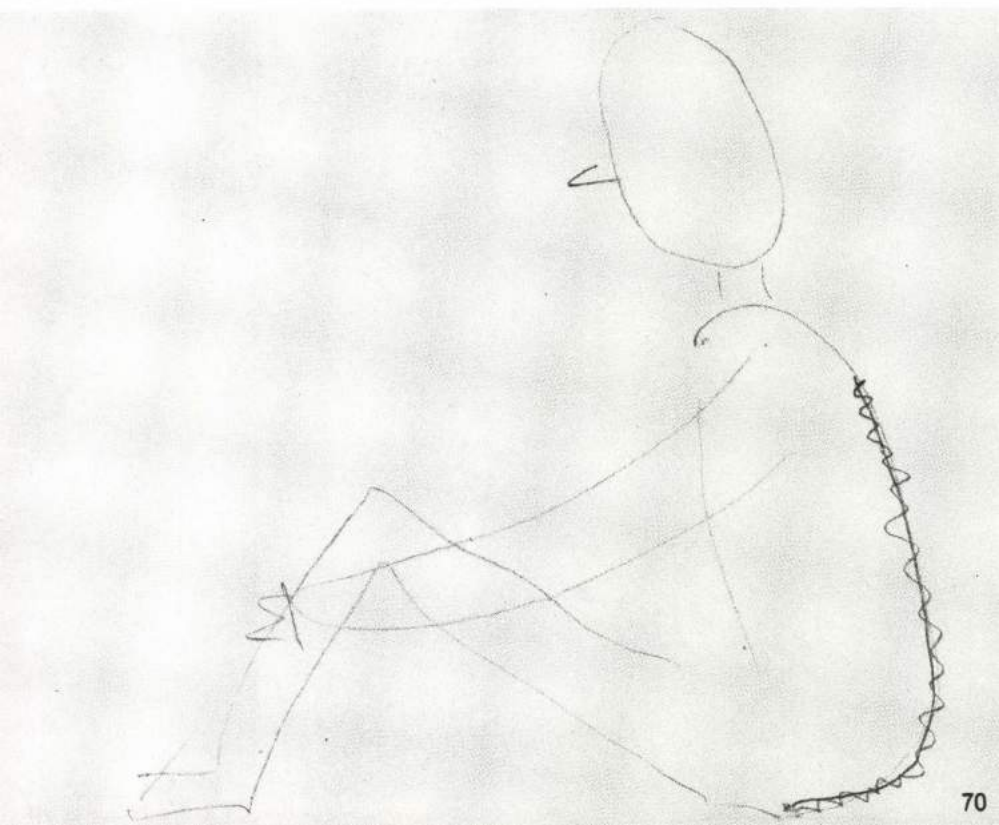
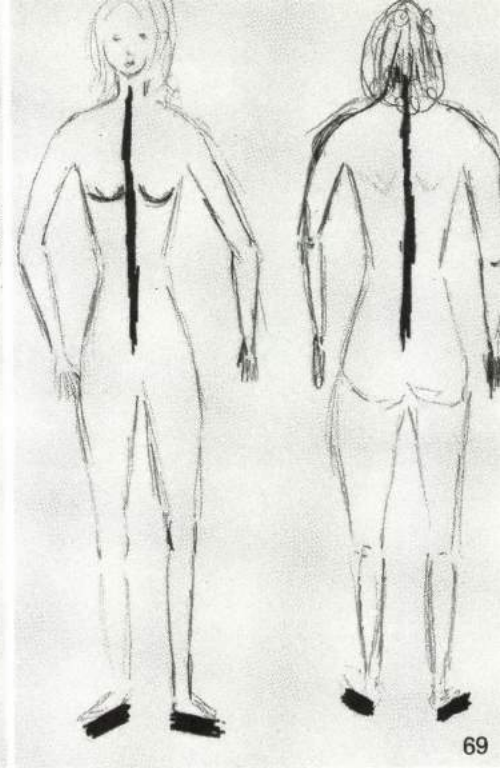
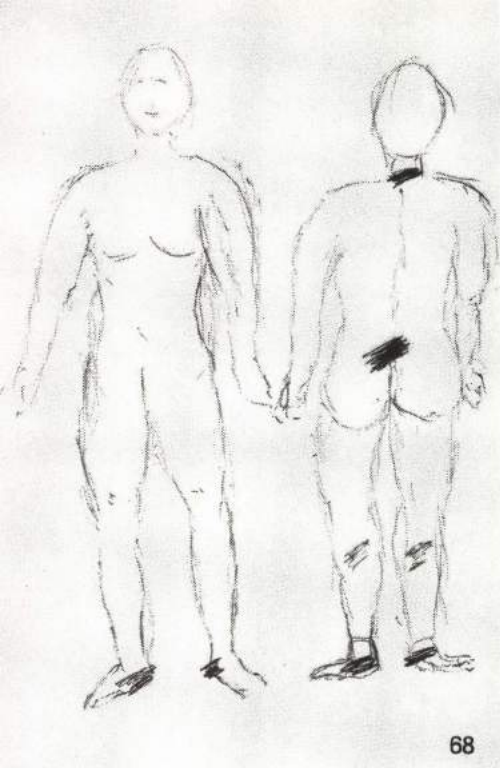


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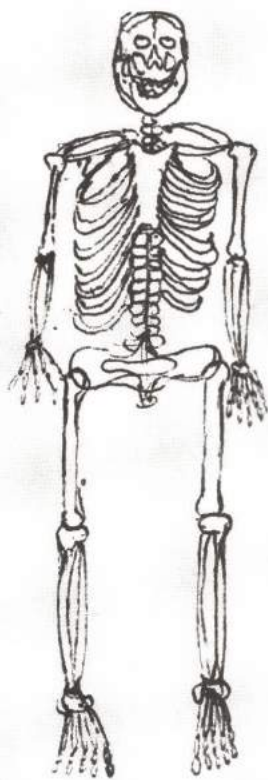




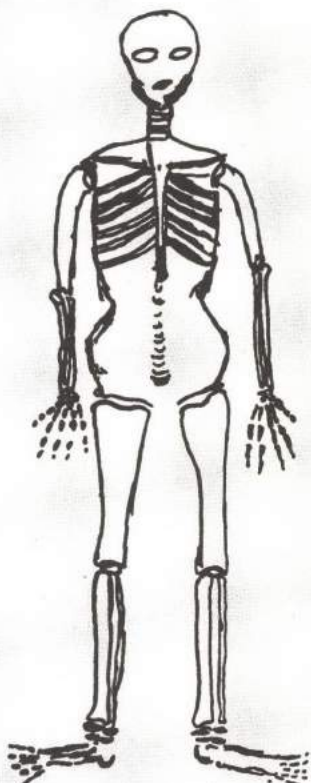
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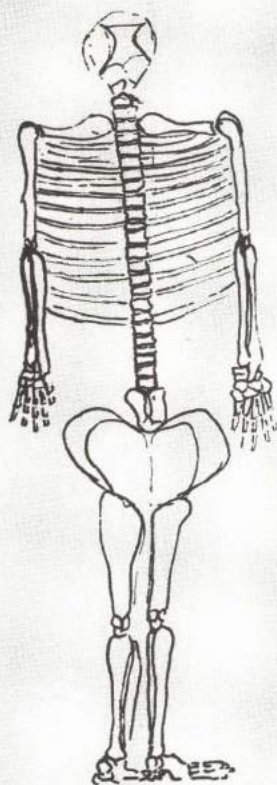
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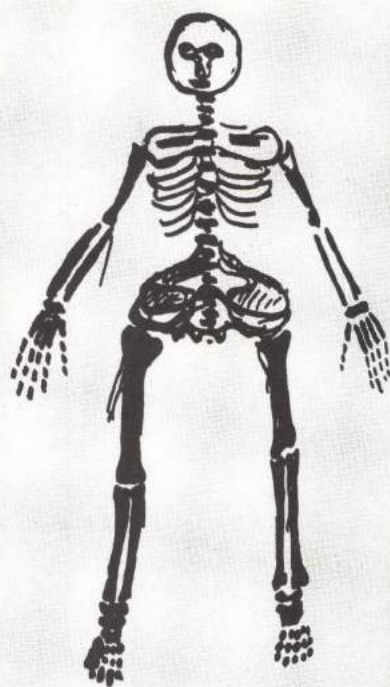
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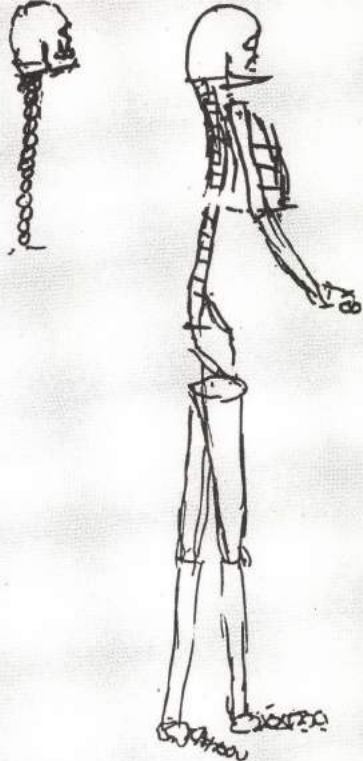


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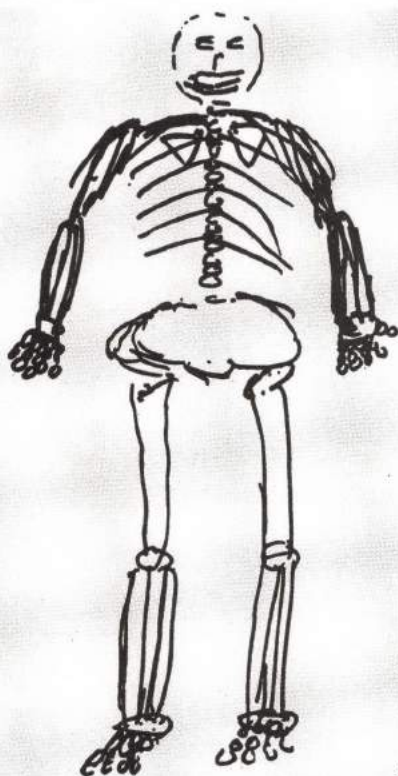




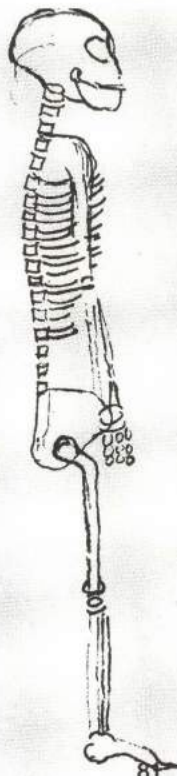
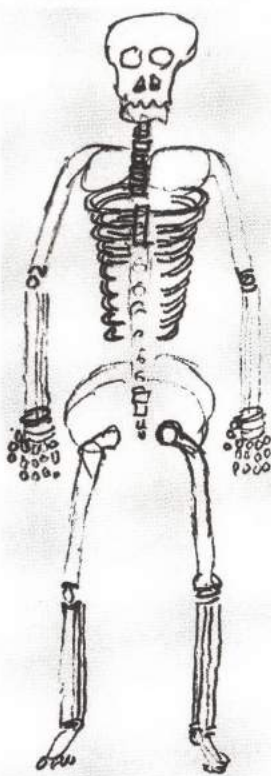
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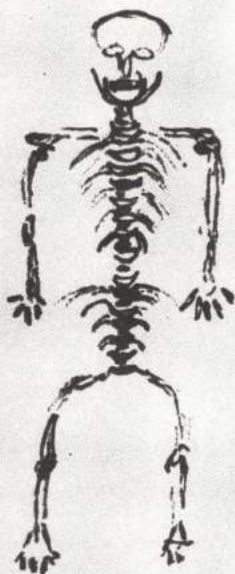


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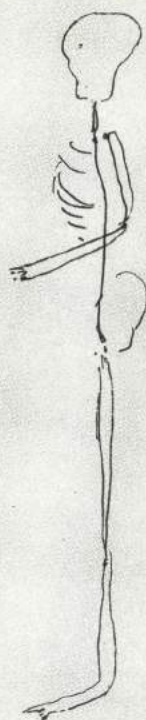
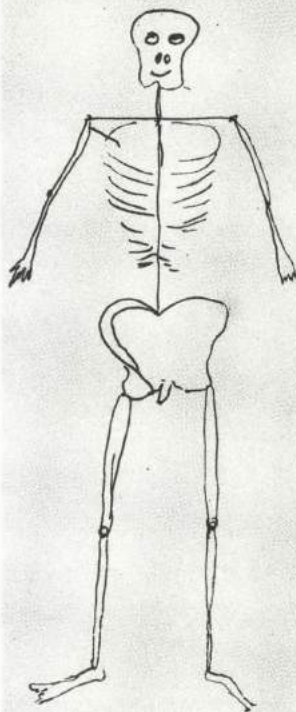


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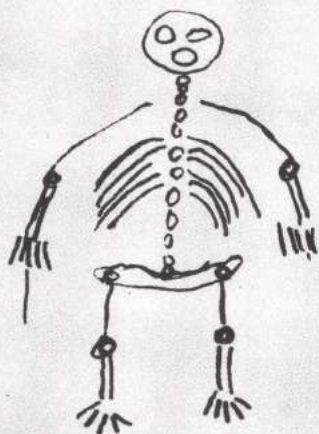




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Fig. 71—Normal position

Fig. 72—Group I

Fig. 73—Groups I, II

Fig. 74—Groups II, III

Fig. 75—Groups II, III

Fig. 76—Groups I, II

Fig. 77—Groups II, III

Incorrect body image concepts of doctors, physiotherapists, gymnasts and movement teachers.

Fig. 78—Group III

Fig. 79—Groups I, II and III

Fig. 80—Groups I, II

Fig. 81—Groups I, II and III

Drawings by students who have had no professional training in anatomy.

Fig. 82—Groups I, II and III

Fig. 83—Groups I, II and III

Fig. 84—Groups I, II and III

### *Physiological Measurements*

Myographies, showing the difference between ordinary and eutonic movements, made by S. Molbech, M.D., at the Institute of the Poliomyelitis Association, Copenhagen.

Plate 85 top: Hip-bend with gymnastic technique. Electro myogram of the muscles biceps femoris (upper graph) and rectus femoris (lower graph). The pupil is lying on his back, lifting his leg in the perpendicular with normal stretch in the knee-joint.

The muscle iliopsoas is doing most of the work. The pelvis is fixed in isometric work by rectus abdomini. The two middle graphs show the integrated work of both muscles measured (IEMG).

Plate 85 bottom: Hip-bend with Eutony technique. The registration is the same as for plate 85 top. When comparing both illustrations, it is shown that the gymnastic technique needs much more muscle activity than Eutony technique. This is especially remarkable because the total movement with Eutony technique was larger than the movement with gymnastic technique. A second clear difference can be noted with regard to the length of the activity period. It is considerably longer in the gymnastic technique.

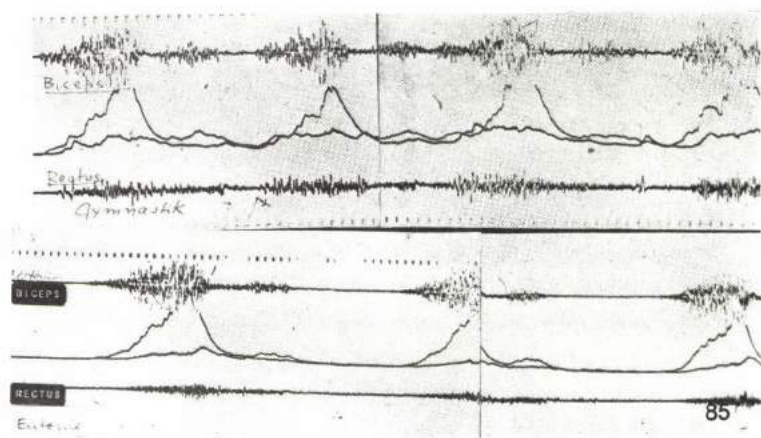
Anticipatory changes of tonus: From the difference in the

muscle activity it can be concluded that there is an anticipatory change of tonus before movement. Compare: the unexpected reaction when lifting an object, the weight of which is considerably different from what was expected.

Copenhagen, February 1976

S. Molbech, M.D.

University of Copenhagen



## *Spontaneous Watercolors and Drawings Before and After Eutony Therapy and Group Sessions*

### *Watercolors Painted by a Young Architect*

Plate 86—The day before the first Eutony session.

Plate 87—The day after the first Eutony session.

The second painting shows a change in form, but more significantly there is a development from weak to strong and vital colors showing the release of an aggressivity repression.

Plates 88 and 89: Two drawings by different people of a body contact experience with the ground and the surrounding space.

Plate 90: A watercolor painted spontaneously by a woman of 40, after a fourth treatment. It shows the Virgin Mary giving birth to the infant Jesus.

This woman gave birth to her first baby sixteen years before she had her first orgasm. Since she had been brought up very strictly, she had repressed this total sensation and had become psychotic. She lost her identity and for six months believed she was the Virgin Mary and had given birth to Jesus. She recognized no member of her family. She recovered, but remained deeply neurotic. During Eutony treatment, she recalled the birth of her child and her psychosis, during which she saw portraits of her parents on the wall and they seemed to be looking at her threateningly. After this spontaneous recollection, her behavior improved during the following three sessions. Relations with the members of her family became better and the sexual complications she had suffered from since her psychosis disappeared completely.





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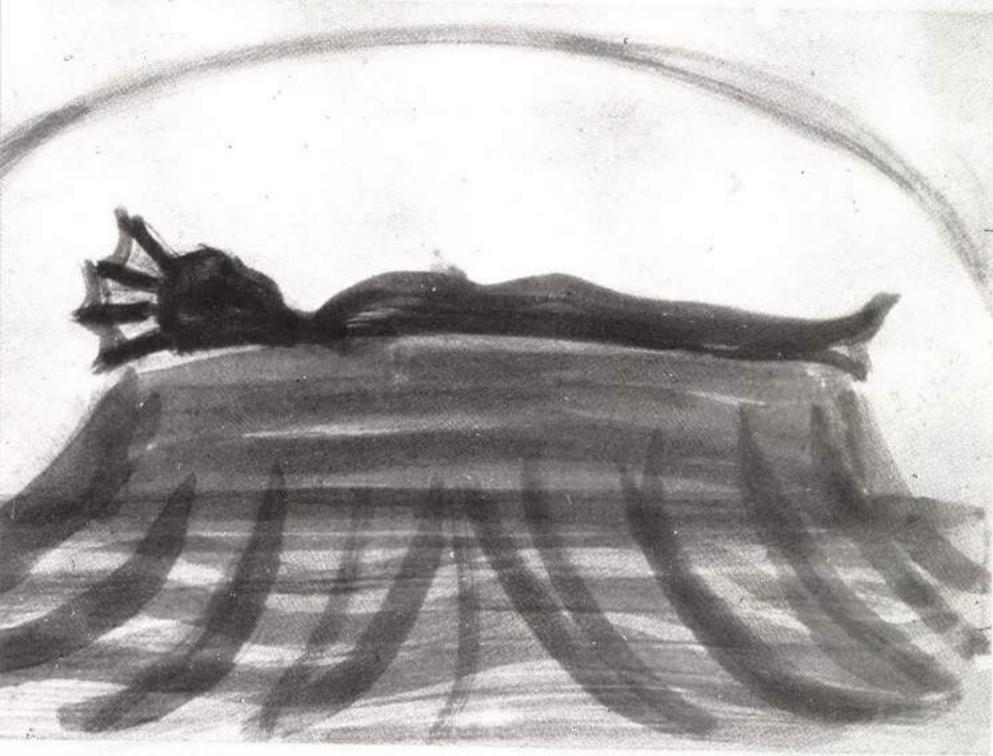
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## 8 EUTONY AND ARTISTIC EXPRESSION

The creation of the principles of Eutony sprang from two important needs within myself. One was to be cured of chronic ailments which orthodox medicine was unable to treat. This book is essentially an account of these principles which I feel have prolonged and improved the quality of my life. My other wish was to develop a new medium for movement expression for opera, drama and dance. An exposition of the principles which I have developed would necessitate writing a very lengthy book, and this task will perhaps have to be left to others. Here, however, I will give a short autobiographical sketch of how Eutony came about.

At the age of nine I saw my first opera, Bizet's *Carmen*. At that time I had received an Eurythmic education according to Jaques-Dalcroze for two years, and I was able to observe the disharmony in the artists' vocal and bodily expressions, their empty and stereotyped movement patterns. I wanted to find a way to express and interpret the whole scale of musical, rhythmic, melodic and harmonic nuances with the body.

The first chance to test my own ideas came at the age of fifteen. I persuaded the school principal to allow me to perform the first two acts of Humperdinck's *Hänsel and Gretel* with my class. This would replace the classical comedy, directed by one of the teachers. Four wonderful months followed with rehearsals every afternoon in the icy cold aula. Our troubles in the aftermath of the first world war were forgotten. The orchestra consisted of one violin, one cello and myself at the piano. Local newspaper critics were of the opinion that our arrangement was more suitable for this opera than Humperdinck's Wagnerian orchestra!

As a rhythmic student of the Otto Blensdorf School at Wup-



pertal and Godesberg, I was given the opportunity to teach "Körperbildung": somatic preparation for expressing music in movement. Here I could experiment with my ideas. Jaques-Dalcroze had always tried to improve the movement preparation, he wanted to base his attempts on scientific knowledge, but a satisfactory explanation did not exist during his lifetime. The important neurological and myological discoveries concerning movement were made only after his death. For example, the fusimotor nerve system which allows the change of muscle tonus according to emotional states and its adaptation to the movements of daily life, was first described in 1946, the year Jaques-Dalcroze died.

Having passed my examination as State Teacher of Rhythmic Education in Berlin in 1929, I came to Denmark to attend the congress of the New Education Fellowship, where my teachers gave a course in Dalcroze Eurythmics to Scandinavian pedagogues and I taught body preparation after my own ideas. There I was invited to teach music and rhythemics at the Fröbel High School. I gave lessons to their students and taught in eight municipal kindergartens in Copenhagen for twenty-two years.

At the Sydsvenska Gymnastikinstitut at Lund (with Major Thulin) I taught music and functional movement to Swedish gymnastics teachers and physiotherapists until 1939. I also had a large group of private students in Malmö, with whom I had the chance to stage Gluck's *Orpheus and Euridice*, together with conductor W. Meyer Radon, the Philharmonic Orchestra and Choir in Malmö. During the following years I staged Kurt Weill's *Der Jasager* and Purcell's *Dido and Aeneas*.

Soon after arriving in Denmark I made contact with actors of the Royal Theater and musicians at the Royal Danish Music Conservatory who asked for advice concerning their technical and rhythmical difficulties.

I discovered how important it is to obtain a free breathing rhythm through a flexible diaphragm and flexible intercostal muscles as well as balance of tension in the entire body. The experience I gained through this work gave inspiration in my work with the Stanislavski Group and the theater schools. Contact with the theater resulted from monthly demonstrations with my first professional students. Actors from the Royal The-



ater and the private theaters of Copenhagen were especially interested and the Stanislavski Group asked me to work with them. I learned a great deal about Stanislavski's ideas and about the needs of actors while performing their role: how to avoid losing their own personality in group work; the importance of developing body image and inner space and being able to connect this to the space of the scene; improved breathing resulting in greater volume of voice and more freedom of expression and, last but not least, the importance of retrieving their own balance after performing difficult, unbalanced characters.

After performing the choir scenes of Gluck's *Orpheus* with my professional students (with Else Brems as Orpheus) in Copenhagen in 1946, I was invited by the Royal Theater to choreograph the same opera with the opera choir. I had two months of preparation with them, including one-and-a-half hours of Eutony every day before the rehearsals.

Since then, Eutony has become increasingly important and is now a basic discipline at the Theater Academy in Copenhagen, the Theater School in Aarhus, the Gmelin School in Munich and the Institut National des Arts du Spectacle in Brussels.

My experiences also led to an engagement with the Danish Broadcasting Corporation in 1946. I worked with the orchestra and choir for a trial period of three months. The results were very good, both with regard to the musicians' artistic development and their health (see also doctor's report, page 000). As a result, the state decided to pay 75% of the expenses for all members of the orchestra, choir, technical and administrative staff to participate in Eutony lessons during working hours.

Margot Lander of The Royal Danish Ballet was one of the first to understand the new ideas of eutonic movement. These new concepts in movement found increasing attention among young ballet dancers, and they came to both private and group lessons. A former dancer of The Royal Danish Ballet, Marianne Walther, became a professional eutonist. She has taught Eutony as a major subject at the Theater Academy and the Royal Ballet School in Copenhagen.

During a Latin American and Argentinian ISME Congress (International Society for Music Education) in 1971, Professor

Rodolfo Zubrisky arranged a week's Eutony course for Latin American teachers in Buenos Aires and one week in La Plata. Approximately 500 people participated in each of these courses. I taught the pedagogical principles of Eutony. Buenos Aires, La Plata and Rio de Janeiro became centers of interest and activity for Eutony. Several times a year, graduated eutonists give courses for the various groups of teachers of music, music therapy and dance.

The outstanding musician and piano teacher, Violeta de Gainza, head of international music therapy in ISME, understood my pedagogical ideas from the beginning. Today she integrates Eutony in her work with pianists and music teachers in Buenos Aires and in her international courses in Europe and Latin America.

Music therapy in Argentina has developed more new aspects than anywhere else in the world. I have seen remarkable musical work and dance therapy with blind children. Deaf children, moving with the music, feel the vibrations in their bodies, as in Mimi Scheiblaue's work in Zürich. Singing teacher Helga Epstein bases her lessons on Eutony and Patricia Stokoe bases her school for dancing on sensory awareness and Eutony. They both teach in Buenos Aires.

Zouzou Nikoloudi, international dancer and choreographer, instructor for the Greek festival in Delphi, Epidauros and Herodes Attikus, and her group "Chorica" bases her work on the principles of Eutony. She teaches in the Greek State School for Rhythmics and Dance in Athens. Through her, the principles of Eutony are also used in the Theater Department of the University of California, Berkeley.

After visiting Berkeley, the director of the Belgian Theater School in Liège became interested in Eutony. A three-week intensive seminar in Eutony was arranged for the theater schools in Brussels, Anvers and Liège, sponsored by the Danish-Belgian Cultural Exchange.

The extent to which Eutony is now applied in Belgian theaters may be deduced from the excellent work by Michel Seifert, a graduate of the Institut National des Arts du Spectacle, Brussels: "Eutonie et Arts du Spectacle," 1982. He has given me permission to add some pages of his thesis to this book. As an

actor and pianist, I think he is in an excellent position to give a survey of the influence of Eutony on artistic development.

### *Music and Theater* BY MICHEL SEIFERT

The performing arts differ from other kinds of art by their ephemeral character. The performance always takes place at the present moment and is different in each representation depending on the mood of actors and audience and on the atmosphere born between artists and audience.

Many among us feel the holy fire of music. Many also have discovered that in this domain it is not enough to will. When playing an instrument, we encounter our limitations and realize that our body does not always answer our will: stiffness, discomfort and inhibitions arise nearly all over our body and check our profound dynamism. Yet our being possesses unsuspected riches which are at our disposal if we impel them gently. They may enable us to express our essence with ease and freedom. How to reach this goal? It is this research that Eutony proposes, giving us the very concrete and precise means.

Many are the musicians who speak of a state of deep communication with the universe associated with a feeling of well-being and unity while making music.

Music enables us to live the highest emotions accessible to man, emotions that find their realization in the present.

This is one of the experiences one may have from music. Unfortunately, it is not the only one! By the thousand, young people learn to play in a cold and mechanical way, often with abstract exercises which reduce their attention and motivation in the long run. The teaching of playing a musical instrument is often done in such a manner that many people (especially adults) stop practicing, feeling that they face obstacles which they cannot overcome. This is all the more astonishing in view of the fact that it is the traditional teaching itself that has created all these obstacles with a series of theories and ideas adopted once for all, conditioning its pedagogical principles se-



verely. How many bodies have been scorned and maltreated in the cause of ideas!

As we will show, the contribution of Eutony in the teaching of music and playing an instrument can be a double one:

- to liberate body and spirit, to liberate inhibitions which hinder practicing and improving instrumental playing,
- to create new conduits (new cerebral connections) favoring the learning of music.

Eutony pursues the following goals:

- to attain expression of the essential with great economy of means (this is perhaps the best characteristic of the practice of all art),
- to attain to express music as you feel it in your deepest self ("breaking through" the shield of physical and psychic inhibitions),
  - to play in a comfortable and nurturing manner,
  - to learn to play, using all your body,
  - to attain to let all your energy pass towards your instrument, into the space and towards a possible audience (and vice versa),
- to develop the musical memory and hearing.

For the teaching of music, the attitude of Eutony is indicated simultaneously: before you begin to play the instrument, during the music exercises, and even after. This approach is particularly beneficial for people who desire to learn to play an instrument at an age at which they have lost their mobility and their original readiness.

### *Gaining Consciousness of the Body*

The ideal would be to begin the study of a musical instrument by gaining consciousness of the body in order to avoid "constructing" an instrumental technique on a fragile and inadequate base. The idea is not new, it was fervently defended and brought into practice already at the beginning of this century by E. Jaques-Dalcroze. Dalcroze had also felt this lack of gaining body consciousness before beginning to study a musical instru-



ment. Unfortunately, this concept is still far from having acquired its full application.

The state of the "human instrument" is absolutely primordial and conditions quality of sound, rhythm and interpretation. It is too frequently forgotten that the approach to an instrument is, and must be, above all sensory: what is to be acquired in the first place is not necessarily comprehension but *sensation*. It is not through reasoning that one learns to bring a spoon to one's mouth without turning it upside-down, but surely by *sensing*. It should be the same with an instrument. In fact, only the more and more precise proprio- and exteroceptive sensations make it possible to determine with delicacy the movements which are most adequate in a given musical passage, and this by virtue of one's hand and the whole body.

Gaining consciousness of the body starts with the sensation of the different parts touching the ground. Progressing from the sensation of touching the ground, the pupil gains consciousness of his inner space. In the training of musicians, special weight will be placed on gaining consciousness:

- *of superfluous movements and useless synsinesia:*

which provoke unnecessary tensions and reduce the quality and ease of the musical playing.

- *of muscular independence:*

the playing of most instruments requires maximum lightness of the fingers. Thus, for instance, every contraction of the muscles of the shoulders reduces in extraordinary proportions the freedom of action of the fingers and of the whole arm.

- *of currents of energy in the body:*

the pupil will learn to feel how the energy circulates in his body and where are the areas through which it does not pass. He will learn to reestablish "a way" through these areas especially with the exercises called "current."

- At this stage of the work it is important to regain the proper flexibility of the various joints. In fact, if a joint has lost part of its mobility, the possibilities of movement are considerably reduced and the passage of energy is strongly impeded. This causes fatigue, lack of force and a loss of the unity of the body.

Chopin, a pedagogue of genius, liked to tell his pupils: "Your body should be supple right to the soles of your feet."

### *Transport*

The pupil will learn to entrust the transport of his body to his skeleton: in this way he will liberate the entire dynamic and peripheral musculature as well as the vegetative functions such as breathing and circulation.

As an example, let us mention that it is important to distribute the weight of one's body equally on the two sit-bones (sitting instrumentalists: piano, orchestra) and on the two feet (standing instrumentalists: soloists).

Moreover, the pupil will learn to liberate and make use of the transport of force through his skeleton in those musical passages which demand a great intensity and depth of sound. Consciousness of the transport from the sit-bones, through the whole vertebral column, through shoulders, arms, elbows, forearms, wrists, hands and fingers is particularly useful for piano technique. Consciousness of the bones gives the fingers stability and force without causing contractions, as well as muscular strength in shoulders, elbows, and wrists.

Let us add that we have not one single muscle in our fingers: we have only tactile upholstery, bones and tendons. It is therefore absurd to want to develop the muscles of the fingers! Yet this is unfortunately the basis of many methods of instruction for pianists.

### *Contact with the Ground and/or a Chair*

Permanent contact with a possible seat and with the ground keeps the organism in a certain unity and harmony. Particularly in the case of very strong emotions, reducing the physical capacities (stage fright is perhaps the best example), the conscious contact with the ground and with the seat will make the energy circulate all over again. In addition, the "emotional charge" is distributed between fingers, sit-bones and feet.

*Contact with the Instrument*

Only profound contact with the instrument makes it possible to harmonize the musculature profoundly. Contact with the instrument allows every pupil to find the correct handling/attitude when entering into an intimate and profound relationship with his instrument. Particularly for those instrumentalists who have to hold their instrument, the contact removes all fatigue resulting from holding it. The hold on the instrument should be as delicate as possible in order not to reduce the mobility and suppleness of the fingers. Through the contact which harmonizes the muscular tensions, the lymphatic and blood circulation are stimulated in such a way that eventual cramps disappear. In working systematically with the contact with his instrument, the pupil may discover how the instrument itself may become a source of energy. Only through practicing will it be possible to understand and prove this reality.

*Breathing*

The guidance given in Eutony concerning breathing is to "let the breathing happen by itself" in order to arrive at the sensation rather of "being breathed" than of "doing in order to breathe."

The point is to eliminate from one's mind the very wish—however natural and legitimate—to obtain deep and regular breathing. It is necessary to understand that to each individual being and to each given situation corresponds a particular breathing, which only the vegetative (autonomous) nervous system is able to define. Our intellectual faculty cannot regulate the respiratory function finely enough. Even if we knew the exact quantity of air needed and the correct manner of breathing, we could not obtain this ideal breathing by a directed voluntary act. The intellectual intervention would be clumsy compared with the spontaneous act which so subtly obeys the various needs of the organism.

In music the breathing will follow the emotional oscillations



which do not necessarily correspond with the rhythm of the music.

Once the pupil has learned to entrust his transport to his skeleton, a good many muscular contractions, impeding the respiratory process, will disappear. He will also learn to dissociate his breathing from the rhythm of the music: he will observe, for example, whether he forces his breathing during fast passages to the point of reducing it to a vital minimum. We never insist sufficiently on the fact that it is a question of observing the wave of breathing and not of a voluntary intervention. When the pupil no longer forces himself in rapid or difficult passages, he will discover the very elastic and relative quality of time: the same passages which he executed breathlessly without having time to listen to what he played become accessible to his profound attention.

### *Unity of the Body*

The more the pupil includes his inner space as a wholeness, the more his body will engage itself as a wholeness in the expression of music: his movements and the music will be carried by his whole body; the instrumentalist will let his movements resound in his whole body. Thus there will be a real participation of the whole body in the music. The impact on the audience from a musician who has acquired such a quality of engagement cannot be compared with that of one who only feels his arms and hands.

Finally, consciousness of the unity of the body is of greatest importance in the expression of very strong emotions: in fact, in the case of strong emotion, the emotional charge is too important to let it pass through the fingers only with the risk of paralyzing oneself or losing one's ease in arms and hands. When the instrumentalist feels his body as a whole and remains in contact with the ground and his chair, the emotional stress not only passes through his fingers but also through his sit-bones and his feet. In this way there is no longer any risk of an inner block.



*Flexibility of Tonus and Interpretation*

The adaptation of tonus is the basic condition for giving life to and interpreting music. The flexibility of the tonus function allows the musician to pass through all the subtle gamuts of human thought and emotion. This capacity of spiritual and emotional oscillation, of living through music "with its entrails" is one of the first conditions of touching an audience and awakening its interest.

Let us remember that if the tonus remains confined to a middle level, the performer cannot achieve the "rapture" and lightness that happens when one interprets music with all one's being. It is a great joy only too rare!

*Eutony and Theater*

Eutony in no way pretends to be a new formation of the actor. It can, at most, provide future actors with precise and concrete means for developing qualities which are essential in acting.

Technically speaking, the actor must be able to:

- "appear" from the space, fill out and occupy the space;
- give life to very strong emotions without thus altering or destroying his psychophysical balance in his private life;
- live through very high degrees of physical engagement without hypertensions;
- let his voice flow;
- pass rapidly through very different states of tonus (e.g., from a heavy state to a light, euphoric one);
- create a real and "tangible" contact with the audience and the other actors;
- concentrate very strongly while keeping a wide opening towards the outer world;
- keep his respiration free (an actor who breathes badly will make his audience breathe badly);
- regain his psychophysical balance after each performance (e.g., if the actor portrays a depressed and anguished char-

acter, he must be able to come back to a more harmonious state after the performance);

- have a highly developed capacity to imitate tonus;
- have an inner security sufficient to take risks;
- have developed the capacity of observation;

As regards all these briefly and incompletely mentioned points, Eutony offers very precise means and strategies to acquire such capacities.

### *Relaxation and Letting Go*

"... the muscular tension impedes the inner life in unfolding naturally. As long as our muscles stay tense, we cannot even imagine the subtle nuances of our sentiments, nor penetrate into the spiritual life of our person.

"Not only a general tension of all the muscles impedes the proper function of an actor, but even the smallest contraction at a precise point is able to hinder all creative faculties." (Stanislavski)

Who has expressed the importance of letting go and relaxing for an actor better than Stanislavski?

In Eutony, relaxation and letting go are worked through in all imaginable situations and positions, stretched out on the floor, sitting on the heels, sitting cross-legged, standing, ... and in movement. With experience, the pupil can attain the feeling of profound relaxation, and lightness simultaneously. Actually, in Eutony the letting go and the relaxation are not associated automatically with heaviness and passivity.

*Eutony is primarily a research of functional movement and the learning of economy, harmony, precision, presence and freedom in movement.* If an actor, in the midst of gigantic flames, is to cry "Help!" with all his might, he should be able to do it also at the following performance, and at the next as well, for a month or two. An actor who has cried "Help!" with all his might, moving the audience to tears, and who finds himself with a hoarse throat on the following day is not an actor! Eutony teaches to evoke very strong impulses from the center of the body, without destroying the body.

*Flexibility of Tonus*

Liberation of tonic fixations and normalization of tonus (when the work has enabled the pupil to refind his proper flexibility of tonus) will enable him to give life to and interpret the whole range of human sentiments.

Teachers of dramatic interpretation know well that some pupils avoid and resist the risk to express certain emotions. Each pupil has his own limits, and these limits are inscribed in the organization of his musculature. Certain pupils have difficulties in expressing anger, others in expressing joy or sadness or fear. . . . We point out that their difficulties in expressing and giving life to certain sentiments are also to be found in their daily life.

*Imitation of Tonus*

The pupil will learn to feel in his own body "the tonic organization of his personality." We are talking about the first interpretation, in which it is the most primitive. Observing a person in the street, the pupil will be able to feel in his body how the other person is carrying himself (his tensions, his breathing, his posture, his way of moving).

Thus tonic imitation is more than a simple observation of the other. It is a matter of profound and spontaneous intuition in the order of *sensation*.

It is the same "tonic imitation" which happens, in large part, in the learning process of young children whose conduct and vocal accents resemble those of their parents.

*Touch and Contact*

By touch, and more particularly by contact, the actor establishes a profound relationship with his fellow actors and the audience. His opening toward the others will depend on his capacity of opening and of contacting the outer world in general. An "open" actor will really be able to "give" to his audience and in return receive the "echo" of the audience.

*Contact with the Space*

The pupil will learn progressively to occupy the space around himself with his presence.

In order to accomplish this, the pupil will first learn to feel his skin, his clothes, the air between his skin and his clothes and later the space beyond his clothes. He will also learn to elongate his movements far into space until he has the sensation of being "clothed with the space."

*Contact with the Other Actors*

The pupil will learn to feel the perceptible presence of his fellow actors without looking at or touching them; for instance, walking freely in a room the pupils can feel the change of energy that is created when they change place or when they cross each other's paths. The practice of Eutony teaches to feel the other with his rhythms, his breathing and his radiation of energy. In the movement exercise for two, the pupil learns to move with the other without one leading and the other following: he learns to live his own dynamic while accepting the dynamic of the other. This task is developed in the exercises for three or the exercises including the whole group: it is a question of moving together, feeling each individual in the group and the totality of the group, living his own dynamic in the bosom of the dynamic of the group. Such research develops the capacity of contact with a group without the group being directed by a person outside or by any external order. (It could be given, for instance, by the rhythm of music.)

*Contact with the Audience*

Even the immobile attitude in the space should radiate this current, this contact which is established between the actor and the audience and that we call magnetic exchange.

*Félicien Marceau*



Contact with the audience takes place through the space. Thus you must first be able to occupy the space of your presence. The candidate actor will learn to feel the whole audience so that he stays constantly in contact with it while he is onstage (even if he turns his back to the audience or if he is momentarily not in the center of the action).

Parallel with this contact, the pupil will develop a correct intuition of the favorable moment: he will be able to adapt his acting to the felt impression he has of the audience's atmosphere and mood. With practice, such a capacity, as all those developed by Eutony, will become spontaneous.

Finally, we insist on the fact that the pupil can only really open toward his environments (in this case toward his audience) when he has developed a real capacity of presence in his own body. If that is not sufficiently stable, he will "give" himself entirely to his audience and find himself "empty" after the performance. So he should first be able to maintain and nourish his own balance of energy. This phenomenon of radiation from the actor toward his audience ought to happen with ease, freely, naturally and without loss of energy.

### *To Unify Body and Spirit*

The actor should be able to catch and keep the attention of a big audience, to maintain a continual exchange of thoughts, sentiments and energy. He should be able to interest the audience, "touch" it from spirit to spirit, from body to body. In order to accomplish this, he should develop his spiritual faculties as much as his bodily faculties. To want to develop them separately is a poor solution: it is only in finding the fundamental unity of body and spirit that the actor will discover realities and forces hitherto unsuspected, like the exchange from intuition to intuition that makes us be moved to tears by a performance even if one does not understand the language or the story.

Just as an iceberg is made of visible and invisible portions, the authentic capacity of the actor is made of the body and the spirit, the visible and the invisible. Only when he succeeds in unifying his body and spirit, can he make use of his full capaci-

ties. While feeling his body more and more deeply, the actor can search his spirit more and more deeply. It is by mastering his body that he can master his spirit, and by mastering his spirit that he can master his body. We mention in passing—the reader will already have understood this—that his mastery is very close to the ease, spontaneity and freedom of any voluntary discipline.

As we have repeated all through this thesis, the repercussions of thoughts in the body are enormous, even though we are not conscious of it as spectators, they touch us and influence also. If the actor walks hearing inwardly the *Marche Funèbre*, even if he voluntarily tries not to change his step, the effect is completely different from when he hears the *Ode to Joy*. If the actor is in panic, the audience will feel it!

### *Creativity and Spontaneity*

The essential problem for the actor is not so much to liberate his creativity as to learn to be able to channel it. It is of no use to have an exuberant imagination if you cannot materialize your intuitions. The artist is not necessarily he who is the most imaginative, but rather he who can interpret in his own discipline what he feels, thinks, visualizes, hears, his forebodings. . . . This is the essential problem concerning creativity to which Eutony can contribute, always prompting the pupil further to move and live his profound impulses progressively.

## 9 THE FORMATION OF AN OBSERVING SELF IN EUTONY BY FELIX MORROW

One very important result of years of work in Eutony (Alexander 1978) is the development and enhancement in the practitioner of an Observing Self. This part of the psyche is *not* the thinking self, nor the emotional self, nor the functional self. It is the part of the psyche which is awareness itself (Deikman, 1982). It is ever-present whenever there is consciousness but, unfortunately, in most people it usually exists in a rudimentary form. The Observing Self requires a very great deal of persistent work of special kinds in order to grow, to develop, to be enhanced into a veritable entity. In mystical literature, this entity is often referred to as a Person, or a Presence. Up to now, Western psychology has evinced little comprehension of this phenomenon.

Gerda Alexander understands this formation very well but has not written about it. I hope to fill this gap in the presentation of Eutony. At this early stage of trying to identify and describe this phenomenon, I think it is inevitable that there may be a certain amount of vagueness or imprecision. The same difficulty exists in the early stages of any scientific enterprise dealing with human nature.

At some stage in the long work of mastering the inner and outer practice of Eutony, students become increasingly aware that a substantial part of their psyche has accumulated and crystallized into an Observing Self, an entity which begins to have a conscious existence of its own and which is often able to be present during the times that students are working in classes or by themselves. This Person does not direct the activities nor does it judge them, but is aware of what transpires and endows the situation with a state of continuing consciousness which did not exist before. This Presence thus transforms the series of exercises into a state of Being.



I think this transformation takes place in well-nigh everyone who goes through the systematic and rigorous four-year course at the Alexander School. For those who come to the school with a background in therapy and meditation, the transformation may come fairly early in the course; for others, later. Once achieved, it has to be maintained by continuing the practice of Eutony. It is not money in the bank! Yet without it there is no center, no authenticity in Eutony.

Can we pinpoint elements in this study-training of eutonists which are particularly important in helping to accumulate and crystallize this Presence? I offer the following clues. The new-awarenesses of the total person, which are evoked by the unfamiliar exercises of Eutony, induce all kinds of new and old feelings, emotions and thoughts in the student. How are these feelings, emotions and thoughts processed (dealt with) by the student? The student tends to do three things with them: (1) In turmoil with them, the student tries to sort them out and come to terms with them. (2) The students discuss these experiences among themselves and with peer friends. (3) Since the teacher is aware of these induced emotions, feelings and thoughts and empathizes and is in touch with the student's reactions, the teacher encourages the student to talk about them—to the teacher and also to older friends and advisers. In the first years, these dialogues between students and helpers no doubt have a therapeutic quality but, wisely, I think, Gerda Alexander tries to avoid the usual gap between therapist and patient-client by staying away from the therapeutic model. Gerda Alexander's distaste for the distance between therapist and client was shared by Alfred Adler long ago, when he suggested that therapists call themselves simply "older brothers" differing only in age and experience. More recently Abraham Maslow has endorsed Adler's idea.

I think that, in accordance with Maslow's distinction between D-needs (deficiency needs) and B-needs (Being), the early stages of this dialogue between student and older brother deal primarily with D-needs. Later, the dialogue becomes one dealing with Being-needs, which is the process of growth into the formation of the Observing Self.

Such dialogue is only part of the process. After attending



classes for a little while at the Alexander School in Copenhagen, I saw that a great part of what happens comes from being in the Presence of Gerda, in all the authenticity of her Observing Self, for four years. The student cannot but aspire with his whole being to internalize this model.

As long as our Observing Self still exists in us only in rudimentary form, we remain in the grip of our ordinary waking consciousness. And this, as Gurdjieff above all has helped us understand, is really a state of sleep. It is a trance state in which we are at the mercy of our vagrant thoughts, daydreams and unconscious moods. We can understand better the profound gift of the Observing Self when we thus keep in mind what the Observing Self frees us from when it takes over from our ordinary waking consciousness.

Eutony is a quite original and often unique system of somatics education, but it is no surprise to find that the Person-Presence that crystallizes in Eutony is quite identical with the Person in certain other disciplines. It may be that Gerda Alexander has felt inhibited from spelling out this common ground between Eutony and these other disciplines, especially when the latter are explicitly spiritual disciplines. Her struggle to defend Eutony against the scientific medical profession, which often attacked her because she obtained results which orthodox medicine failed to achieve, has left her silent on the spiritual dimension of Eutony. In her struggle against scientific medicine, Gerda Alexander did not yet have the standpoint, which we owe to Michael Polanyi and Abraham Maslow (1966), that human study of human nature has every claim to the name of scientific endeavor. Even now, Gerda Alexander makes in her book only one reference to the fact that Eutony is "like meditation." In truth, Eutony is one of the great schools of meditation. For meditation is the sustained awareness of all that goes on in us and within us and this is just what Eutony does and teaches.

One of the great teachers of meditation in our time is Karl-fried Graf Dürckheim. His standpoint may be studied especially in two of his books: *The Way of Transformation: Daily Life as Spiritual Exercise* (1971) and *Méditer: Pourquoi et Comment* (soon to appear in English). Dürckheim's ideas and language may at first glance appear theological and far from the language

of Gerda Alexander, nevertheless I strongly recommend studying them precisely in order to grasp the spiritual dimension of Eutony which Gerda has not written about. At the heart of Dürckheim's method of meditation is a practice in which correct breathing and physical posture in *Zazen* is central. Dürckheim himself makes explicit his debt to Gerda Alexander in *Méditer* (1978):

There are no limits to the progress of this movement of transformation of the body. It is necessary that the student learn to sense himself all the time in his body so that it emerges in his own consciousness. No doubt, in beginning exercises, the body will occupy all his thoughts, but the body which he is is also the soul and the spirit. . . . The method of Eutony, taught by Gerda Alexander (Copenhagen) develops this art today particularly. The Eutony exercises thus facilitate *Zazen* and are the recommended preparatory exercises.

In *The Way of Transformation*, Dürckheim writes: "In so far as such transformation is achieved a man becomes a *Person*, which means to say a living form through which Divine Being may sound (*personare*)."

Graf Dürckheim informs me that Gerda Alexander's Eutony exercises precede the practice of meditation in the monasteries, thanks to the fact that Graf Dürckheim has trained most of the directors of meditation in the German monasteries.

Perhaps it would be better said that Eutony and Dürckheim's *Zazen* are not so much identical as that they are on a continuum. I would have to add that the formation of the Observing Self as a new entity becomes richer and many-sided if one masters both Eutony and the *Zazen* of Dürckheim. In any event, reading Dürckheim (as Gerda Alexander herself has always done) provides for eutonists missing pages in Alexander's nonexposition of the spiritual dimension of Eutony.

The same kind of Observing Self comes into being in the course of long and assiduous devotion to the Gurdjieff work. It is necessary to work under the guidance of competent Gurdjieff teachers in both group classes and in the classes of physical movements. The latter are as indispensable in getting anywhere in the Gurdjieff work as are the physical awareness exercises in Eutony. I emphasize the Gurdjieff groups and movements

classes because there is a considerable body of literature—ostensibly about Gurdjieff work—which makes no mention of these key elements of the work. As an example, Colin Wilson, a very intelligent thinker in many fields, insists that one can master the Gurdjieff method simply by studying the literature (1984).\*

Since Graf Dürckheim and Gurdjieff both have teachings with a strong physical component, their common ground with Eutony becomes clearly apparent upon examination. Much less clear is a connection between Eutony and Freudian psychoanalysis. But we can clarify a connection.

Two aspects of psychoanalysis are noteworthy in this regard. One is the similarity of its fundamental technique of free association to the continuous self-observation in meditation and Eutony. Here are Freud's words to the patient, instructing him in the "fundamental technique" of free association (1955, etc.):

The treatment is begun by the patient being required to put himself in the position of an attentive and dispassionate self-observer . . . on the one hand to make a duty of the most complete honesty while on the other not to hold back any idea from communication. . . .

We instruct the patient to put himself into a state of quiet, unreflecting self-observation, and to report to us whatever internal perceptions he is able to make—feelings, thoughts, memories—in the order in which they occur to him. At the same time we warn him expressly against giving way to any motive which would lead him to make a selection among those associations or to exclude any of them. . . .

You will be tempted to say to yourself that this or that is irrelevant here, or is quite unimportant, or nonsensical, so that there is no need to say it. You must never give in to these criticisms, but must say it precisely *because* you feel an aversion to doing so. . . . So say whatever goes through your mind. Act as though, for instance, you were a trav-

\* Colin Wilson's mistake is to reduce the Gurdjieff work to a psychology. But as the famed Gurdjieff teacher Orage pointed out: "Gurdjieff gave us the religious teachings of the East disguised in a terminology which would not alienate the practical minds of Western thinkers." Cited in Daniel Goleman, *The Varieties of the Meditative Experience*, (New York: Dutton, 1977), p. 96.



eler sitting next to the window of a railway carriage and describing to someone inside the carriage the changing views which you see. . .

The second noteworthy aspect of psychoanalysis is the kind of interplay between analyst and patient which has been termed a therapeutic alliance by Elizabeth Zetzel (1971) and a working partnership by Ralph Greenson (1976). These terms, coined by a later generation of psychoanalysts, refer to a process in which a partnership is formed between the mind of the analyst and the mature ego parts, or the conflict-free parts, of the psyche of the patient. The analyst is thus able to provide the same kind of support and role model as the eutonist teacher. Thus fortified, the patient, in his free association and sensory awareness develops, strengthens and expands the conflict-free parts of his psyche. This is simply another way of saying that he develops and expands his Observing Self until it becomes fully formed.

I have referred to this process in meditation, in the Gurdjieff work, and in psychoanalysis, in the hope that seeing the same phenomenon at work in these fields will help us understand better how it evolves in Eutony. When we train ourselves systematically—under guidance—to observe continuously the contents of our mind and body, it does not really matter what particular contents we are observing at any time. No doubt, in Eutony, much of the time will be devoted to observing very subtle sensations and movements of bone and skin, muscle and organs. But what counts is the *process* of training the Observing Self, not the particular contents. For the practice of the profession of eutonist, of course, the ensuing knowledge of bone and skin, muscle and organs is of supreme importance. But his great gift of acquiring an Observing Self then also becomes a valuable, central part of the eutonist's life as a whole.

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# 10 THE HISTORY OF EUTONY

Three years before I was born my parents came in touch with the ideas of Jaques-Dalcroze through one of his friends, Otto Blensdorf, later my teacher in Dalcroze Eurhythmics, who demonstrated some elements of his new education with his five-year-old daughter Charlotte (later MacJannet). My parents then and there, decided that their child was to be educated according to these ideas.

No wonder that I made movements to music as soon as I could stand on my own feet. My father used to play the piano every day, preferably the music of Mozart and Beethoven, so that music has been part of my life even from the prenatal state.

When I was four years old I wished to become an orchestra conductor, but after having seen "Cinderella" at the theater (set up for children, with music from Richard Strauss' "Rosenkavalier" which I knew by heart), I changed my mind in favor of theater and opera.

Since I got more than enough inspiration to move in daily life, my parents did not yet want me to attend Dalcroze lessons. However, at the age of seven I was allowed to participate in the Dalcroze lessons given at the Otto Blensdorf School. Here I got all the inspiration for my artistic development. The school gave demonstrations at the theater twice a year so that I was soon accepted there and allowed to attend the theater rehearsals in the morning (instead of going to school).

Otto Blensdorf was a friend of Jaques-Dalcroze, composer and pupil of Delibes and Bruckner. He taught pupils of all ages and professions besides realizing, in school education, his own ideas on music as a basis for the entire education.

In 1904 Jaques-Dalcroze and his students of the Music Academy in Geneva were invited to demonstrate his new way of

music education through movement at the first congress for modern education in Hamburg. This was followed by demonstrations given in all large cities in Germany. The response was so enthusiastic that a group of influential people decided to create a center for these new ideas in the Gartenstadt Hellerau near Dresden.

The famous architect Tessenow built the school as well as a great festival house (still existing), where Jaques-Dalcroze and the famous Swiss scenic designer Adolphe Appia, renowned for his new ideas about space and light, created a new art of movement in the spirit of music. The results were presented at the Hellerau Festival which took place every year.

Right from the beginning, musicians, conductors, dancers, actors and pedagogues from all over the world came to Hellerau, among them members of the Russian Ballet with Diaghilev; Max Reinhardt and Leopold Jessner from the State Theater in Berlin; the dancers Clothilde von Derp and Sacharoff; the conductors Wilhelm Furtwängler, Igor Markewitch and Sergiu Celibidache; educators like A.S. Neill who opened his first free school in Hellerau before he went to Summerhill. Among the pupils, some of the best known are Mary Wigman, who created her own dance style and the Wigman Group, the sisters Braun, the Rome Sisters.

The first performance was given after the first school year in 1911: the opera *Orpheus and Euridice* by Gluck. This performance made the names of Jaques-Dalcroze, Adolphe Appia and Tessenow known all over the world and Hellerau became an international art center.

I remember that I was fascinated by the pictures from this performance which were shown in the monthly magazine *Velhagen & Klasing*. Especially the furies had my great interest.

At the beginning of the First World War, in August 1914, all activity in Hellerau stopped. The students returned to their own countries and Jaques-Dalcroze opened his institute in Geneva (still in existence).<sup>\*</sup> Here many of his former students gathered for the first time in 1926 at the First Congress for Eu-

<sup>\*</sup>The 28th International Congress of Eurhythmics was held at the Jaques-Dalcroze Institute in July 1985.

rhythmics, demonstrating how they had developed the inspiration received from Jaques-Dalcroze in their own countries. The Otto Blensdorf School with its leader Charlotte Blensdorf took part in the demonstrations showing the development in Germany. Monsieur Jaques talked to us at the end of the congress: "I gave you an idea and I am happy and grateful to see that everybody has developed it according to his own possibilities and the needs and conditions of his country." For me, this sentence was the most important statement of the congress. Jaques-Dalcroze wanted no imitations, but a living adaptation of his ideas.

Just after the congress in Geneva in 1926, Charlotte Blensdorf obtained an invitation from the University of Jena to teach Rhythmic Education for children and teachers at the first Institute for Scientific Pedagogical Research under the leadership of Professor Peter Petersen, internationally known for his Jena Plan, a postgraduate preparation for teachers in free schools. He wanted to develop an inner discipline through music to replace the outer discipline of the old schools, especially for children.

I got the opportunity to work as assistant to Charlotte Blensdorf in Professor Petersen's school and was inspired by his pedagogical ideas. At the same time I completed my year of practical work at Stadtroda, an institution of the State of Thüringen for all kinds of disturbed children and young people up to the age of 21, including criminal cases.

I worked primarily in the house for small children (up to 7) and young mothers (aged 11 to 16, all coming from brothels), and with a group of boys between 12 and 18, most of them criminals. I have never since learned so much in pedagogy as during that year, and since then I have never had difficulties with "normal" classes.

In 1929 I passed the State Examination in Rhythmics and Music Education at the Hochschule für Musik in Berlin, now called Hochschule der Künste. During those years I had several severe attacks of rheumatic fever, followed by heart diseases so that I had to face the fact that I could not become a dancer.

I followed Professor Petersen's ideas for a new education as well as the ideas of the "New Education Fellowship." I went to



their congress in Helsingør, Denmark, together with my teachers to give a course in rhythemics for Scandinavian teachers.

I was asked to stay in Copenhagen to give classes at the Fröbel Højskole, the training center for kindergarten teachers, and to work with children in kindergartens in the Folk Music School (leader C.M. Savery), and many music pedagogues and school music teachers.

In 1929 I also started to give private group lessons in Sweden (Malmö, Göteborg and Stockholm) to children, dancers and musicians, and kindergarten teachers. Already from the beginning I was engaged to stage Gluck's *Orpheus* and *Euridice* at the Malmö Theater. From 1930 Major Thulin of the Swedish Gymnastics Institute in Lund engaged me to take over the music and movement education, and I also taught during their large international summer courses with Swedish gymnastics teachers from all over the world: Africa, India, Irak. In Göteborg and Stockholm I gave monthly Eutony lessons as part of a post-graduate course for logopeds, Dalcroze teachers and physiotherapists at Erikastiftelsen and Karolinska Institut.

In 1930 I came in contact with Leopold Jessner who was a former student of Jaques-Dalcroze and at that time producer at the Berliner Staatsoper. He asked me to teach movement to all actors and to be his assistant in stage work. As I wanted to learn this field from the bottom, I agreed to a three-year engagement, to start on the first of April 1933. On the 4th of January Hitler came into power and Leopold Jessner went to America.

With this serious development in Germany I decided that it was more important to work on a new international education for the coming generation than to follow my private dreams about opera work. In Denmark I had every opportunity to work with education: the kindergarten teachers and students, etc. The municipal kindergartens continued from 1929 to 1951, and the work was taken up by some of my graduate students.

I have had my home in Denmark since that time. Apart from the pedagogical work, the artistic side became more and more important, and I have been working at the Private Theater School, the Royal Theater, the Theater Academy, as well as with the Orchestra, Choir and Staff of Danish Broadcasting House for 27 years. In 1940 I started the first professional Eutony educa-

tion at the Gerda Alexander School, a five-year training course in movement and music education in connection with the Royal Music Conservatory, based on my new system of body preparation: on Eutony pedagogy and therapy.

The Gerda Alexander School has always had international communications, at first in Scandinavia, Switzerland and France through Dalcroze Eurhythmics. Eutony as a new approach towards the education of the total person, including the new therapy built on the responsibility of the pupil and demanding the active participation of the sick person, became known internationally when Professor Preben Plum, in whose department at the Rigshospital in Copenhagen I had worked since 1945 with cases in which traditional treatment did not succeed, recommended me for presentation of my work, with a demonstration and lectures, at the First International Congress for Orthopedy after the Second World War, in 1951, representing Denmark.

At this congress, all the representatives from the various countries stated that school gymnastics were completely unsatisfactory. A young doctor belonging to the Research Group of Prof. Xaver Mayr, Vienna and Karlsbad, Dr. Schmiedecker, presented a large body of material consisting of films and case histories demonstrating the important influence of nutrition and a healthy digestive tract on the normalization of posture and bone structure. After a few weeks of treatment with the Mayr cure, digestive troubles and lower back pain disappeared and, quite unexpectedly, posture, bone structure, spine, rib cage and muscles were normalized.

I contacted Professor Mayr and his Research Group, and the internist Dr. Alfred Bartussek invited me to Austria with my pupils for three weeks to do some research: to compare the influence of Eutony with the influence of the Mayr cure. The specific eutonic phenomenon "contact" was measured with the dermatometer of Dr. Regelsberger (of Siemens). Regular meetings, once a year, continued for seven years, and Dr. Bartussek supported my work and acted as president of the German Eutony Society (DEGGA) until his death in 1983.

Through Professor Preben Plum I also came in contact with Professor Struthers, M.D., the Rockefeller Foundation's represen-

tative in Paris. He had suffered from a painful frozen shoulder for years and had been treated in many countries without result. After one Eutony lesson, he could make free movements without pain.

Professor Struthers put me in connection with the Hoffklinik in Vienna and the Tavistock Clinic in London, as well as with the Center for Spastic Children near London.

In 1954 Charlotte and Donald MacJannet invited me on a four month visit to U.S.A.

Beginning with lectures at the University of Florida at Rollins College, and at the Center for Cerebral Palsy of Fairfield County, Bridgeport, Connecticut, I talked about my experience with spastic children. Lauretta Bender, M.D., at New York University, introduced me to her work with disturbed children and invited me to speak at the Wednesday seminars at New York's Bellevue Hospital. Frieda Fromm-Reichmann, then president of the Freudian Society, invited me to their yearly congress in Atlantic City as well as to the yearly congress of the Psychosomatic Society with Franz Alexander. She also brought me in contact with a young gifted psychiatrist, Alexander Lowen, in the hope that he would study with me in Copenhagen. During several long conversations, Alexander Lowen asked about all the eutonic principles and he became especially interested in "contact," the regulation of the vital energy in the organism. He included this principle as "grounding" in his own work, the only principle that did not come from Reich, whose pupil Lowen was already at that time.

In New York I gave lectures for the Dalcroze Society and to the Dalcroze School with Hilda Schuster. One of the students, Leonard Bernstein, invited me to his first performance as a conductor in a small Broadway theater: a tap dancer was accompanied with J.S. Bach's Two-Part Inventions. Both were perfect musicians who gave me an unforgettable and beautiful musical experience.

In Boston, Professor Frank P. Jones invited me to a week's research on Eutony movements in daily life at Tufts University. In Arlington, at the house of my friends Charlotte (Blensdorf) and Donald MacJannet I gave a two-week information course about the principles of Eutony pedagogy and therapy, followed



by a three-day symposium which was attended by many movement teachers, psychoanalysts and some of Freud's first American students, including Frieda Fromm-Reichmann, Edith Weigert, Charlotte McCarthy, and Ida P. Rolf.

When in 1959 I held the first international congress on release of tension and functional movement in Copenhagen, many of these people took part, among them Irmgard Bartinieff and Doris Breyer, as well as representatives of all great movement schools in Europe, the Dalcroze Schools, Rosalia Chladek of Vienna, the leader of the Laban School and Mathias Alexander Schools in London, Professor Frank P. Jones, as well as Moshe Feldenkrais with 20 students from Israel. Professor Fritz Winkel of the University of Berlin talked about his research on the influence of posture on the voice.

I had arranged this congress in the hope to further mutual research in a new approach to movement education. I had invited fifty people, but nearly six hundred attended, apart from the guests from the international psychoanalytical congress which took place in Copenhagen at the same time.

The congress was sponsored by the Danish Ministry of Education which offered the facilities of Emdrupborg and gave a large reception at Christiansborg Castle.

In 1959, after the congress in Copenhagen, I received many invitations from abroad. For the next seven years, the Ministry of Education of Israel, together with the international group of modern dance movement teachers (among them pupils of Elsa Gindler, Moshe Feldenkrais and Mathias Alexander) and the Dalcroze group, invited me for a month's stay. I gave seminars at the University of Jerusalem, as well as in Haifa, Tel Aviv and at the Wingate High School for Sport.

In Holland, Belgium and France the following years brought increased interest in information on and prolonged work with Eutony. This led to work with dancers, with the Dalcroze school, and with the University of Louvain-la-Neuve, where education in sports and physiotherapy is based on the principles of Eutony.

From 1968 a group of University teachers (for sports and practical subjects) from France, Belgium and Switzerland began to assemble four to five times a year to do a week's intensive



work with Eutony, followed by two months' intensive work and participation in the yearly summer course of the Gerda Alexander school. This "groupe international" finished their professional training in Eutony after fifteen years and obtained the diploma for group teaching (a few of them also for therapy) after eighteen years.

In 1958 I became a member of ISMA (International Society for Music Education) after having demonstrated my work with children and musicians at the ISME Congress in Copenhagen. Since then I have done practical work with musicians at many of the ISME Congresses in Vienna, Moscow, Buenos Aires, La Plata, Toronto, Montreux, Oregon.

In 1972 the Gerda Alexander School was invited to demonstrate Eutony education on the more artistic level in Rotterdam, Louvain-la-Neuve, Paris and Geneva (Dalcroze Institute), Zürich and Basel.

In 1974 the Eutony School ESEGA (Ecole Suisse d'Eutonie Gerda Alexander) opened in Geneva, Switzerland, under the leadership of Gunna Brieghel-Muller. Here, Eutony training is given in French. Looking back on fifty-five years of research in Eutony Pedagogy and Therapy, I find that it began with my asking: What is natural movement? The various aspects came to my observation in a logical sequence:

- 1) a movement education which is NOT based on the imitation of other people's movements,
- 2) optimal freedom of all joint movements, based on the normal length of muscles at rest.

Objective test: Control Positions (developed in 1930-32), giving each pupil the possibility to test his own state objectively, independent of the teacher.

- 3) the importance of conscious release of tension to recover in short periods of rest and sleep; the capacity to use the right amount of energy based on the postural reflex, the bone structure, on tonus adaptation and on optimal circulation and autonomous involuntary breathing, giving maximum strength without strain.

- 4) the importance of clear directions and elongations in space for the equalization of the tonus level in the synergists.

The capacity to adapt the tonus exists already in the prenatal state, adapting the tonus of the mother (see Henri Wallon). This tonus adaptability is also the basis for all social communication which is not limited to the intellectual level of understanding, but includes the ability to feel with others.

5) the importance of a person's complete body image for personal development, self-security and orientation in the outer space, and in the development of body consciousness.

Body Image test: the modeling of a human body in clay showing in detail the unclear or rejected parts of one's body. The modelings will change step by step as the all-around skin sensation is developed through touch with the surroundings.

6) the difference of touch and contact. Contact to the outer world, conscious regulation of bio energy through contact into the ground, contact through space.

7) the experience of the inner body space, including the bone structure and the inner organs, in communication with the outer space, in free improvisation alone, with a partner and with groups, respecting the space of the other persons.

8) the importance of form as a basic need for mankind. Out of improvisations a final form (statement) can be repeated and developed.

9) neutrality, respecting the space of the other person.

These steps on the way to consciousness of one's organism and its relationship with the surroundings open the door to the discovery of the psychosomatic and spiritual unity of the total person, not only during exercises but in all situations of daily life. Teaching the discoveries of Eutony purely as a technique, even with good results in movement and sports training and with handicapped people, one sets aside the essential task of Eutony.

In the course of the years the interest in professional education in Eutony grew constantly so that the Gerda Alexander School became an international school with pupils from Switzerland, France, Germany and Belgium, Scandinavia, U.S.A. and Latin America.

At the beginning, before the second World War, the school

was mainly based on education in rhythmic and music (with examination held at the Royal Conservatory in Copenhagen). Later other fields were added and the application of Eutony in therapy became an important aspect. After the discovery of the gamma system by the Scandinavian neurologists Granit and Koda in 1954, our work with tonus could be scientifically explained. From that time, new findings in neurophysiology have become an important support of our work, and our practical discoveries can be explained step by step.

Since 1978 Professor Barry Wyke of the Royal College of Surgeons of England has been giving regular seminars to our students, giving us the latest findings in neurophysiology with relation to our work.

The professional training in Eutony includes the following subjects:

- Eutony—practice and theory—pedagogy and therapy
- Speech Training
- Psychology
- Anatomy
- Physiology
- Neurology, Neurophysiology, Neuropathology
- Psychiatry
- Visiting seminars from specialists about current developments in neurophysiology and other relevant disciplines.

The professional training in Eutony takes four years, the first half of the last year being a period of practice in the student's own country where he has the possibility to teach in his own language.

# Appendix

## THE ORIGIN OF THE WORD *EUTONY*

The work of Gerda Alexander, which originally was a method of relaxation, became, after long experience and deeper development, a method which involved the whole organism, going far beyond a simple effect of relaxation.

In order to clear up physical disorders, it is not enough to eliminate tensions; it is necessary to equilibrate the tonus in the muscles and the nervous and circulatory systems. This state of balanced tonus could be called *normotonia*. However, the word *normal* has long since lost its meaning of what is natural and orderly in all areas including that of health. What is called normal these days corresponds, unfortunately, to an average which is often far away from a harmonious and balanced state. It is no longer applied to an optimal state of functioning and development of the organism. The word *normotonia* is not sufficient to describe Gerda Alexander's work, its effects and its aims.

In medicine the prefix *dys* is often used to refer to a disorder or malfunction (dyspepsia, dysplasia, dystrophy, dystonia). The opposite is the Greek prefix *eu*, meaning good or right, which is not used much in forming words (eubacteria, eutrophy)—possibly because such optimal states are not usually sought or attained, the norm or average being acceptable. But in Gerda Alexander's method it is the optimal bodily and spiritual tonus which is sought and attained.

In Freiburg in 1957 I suggested to Gerda Alexander that we should no longer speak of relaxation in describing her work but of tonus regulation. The word Eutony gave a good indication of the effects of her work. On the initiative of the Society for Eurhythmics and Relaxation which has supported Gerda Alexander's work since 1944, an inquiry was made to see whether the word Eutony was used in Europe, America or elsewhere in any other specialized or scientific discipline. Then Gerda Alexander could have called her method Eutony Training and Therapy. Unfortunately it was not possible to keep the word Eutony as the specific and exclusive term for the Gerda Alexander method. Mrs. Alexander presented and explained it for the first time in an important



address she gave to the first International Congress on Relaxation and Natural Movement in 1959 in Copenhagen, before an assembly of specialists. Three years later, a book was published on what was said at this congress. Its title—*Eutony*—made the word known everywhere but also, unfortunately, marked the beginning of a misunderstanding and misuse of it.

There are thoughts and discoveries which are in the air and for which people are ready. They correspond to their needs and extend their awareness. Thus, at a time of growing insecurity, of a civilization in trouble and disorder, the word *Eutony* seems to have crystallized this desire for harmony. *Eutony* has captured the attention of vast circles and has been echoed everywhere. One can appear modern and progressive if one practices *Eutony* or be considered something of a pioneer if one applies it in one's own professional field. The pharmaceutical industry has discovered it and uses it in its publicity for relaxing or tranquilizing drugs in slogans such as "*Eutony* through . . ." followed by a complicated or fantasy term for some drug. One can imagine the interest this method arouses in those who teach relaxation, gymnastics, physiotherapy, yoga and other fields. There are more and more announcements about courses in *Eutony* or other treatments which have nothing to do with Gerda Alexander's method. Many of these organizers of courses and teachers have borrowed the bases and exercises of *Eutony* and associated them with their own practices.

It is not sufficient to have the desire to know and understand *Eutony*. Long study and practical work are necessary. This misuse of a concept is not only a disappointment to its founder, it is prejudicial to her work and does great harm to the recognition and interest it could receive from scientific circles. As a result, the deeper research on the phenomena which show up in *Eutony* practice is held back. It is unfortunately impossible to patent the word. It is impossible to prevent others from using, for their own purposes, a word which has become interesting.

All we can do to protect the work of Gerda Alexander is to speak of "the *Eutony* teaching and therapy of G. Alexander" or simply "the *Eutony* of Gerda Alexander."

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Gerda Alexander

The back cover consists of two watercolors painted by a young architect. The upper he did the day before his first Eutonic session. The lower, the day after the session. The second shows a change of form but, more significantly, is the development from weak to strong and vital colors, showing the release of suppressed aggression.

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