

The History of Rolfing®

Ida Pauline Rolf was born in the 1890s in New York City. She earned a PhD. in biochemistry from Columbia University in 1920, quite rare for a woman at that time in the United States. Dr. Rolf studied anatomy, physiology, osteopathy, yoga, homeopathy, kinesiology and other movement systems popular in her time. She began doing physical manipulations in the 1930s and taught her first bodywork classes in 1954. Originally she hoped to teach her methods to physicians, chiropractors and osteopaths. By the late 1960s she developed the Rolfing 10 Series and began taught it to select residents in Big Sur, California. The 10 Series conceptualizes principles of human posture in gravity and is truly a work of genius original to Dr. Ida Rolf.

Ida Rolf died in 1979. She organized the Guild for Structural Integration located in Boulder, Colorado which later was renamed the Rolf Institute. More than three decades after her death, the faculty has grown widely and Rolfing instruction is now implemented in Japan, Europe, Brazil and the United States.

What is Rolfing® and What Are the Benefits?

Rolfing is a hands-on bodywork system that manipulates fascia, improves structure and coordination, and improves energetic movement through the body. Rolfing organizes structure and coordination to the line of gravity. According to physics, all of our movements must relate to the earth. Therefore, improving our relationship to gravity will make our coordination more efficient.

As Rolfing sessions progress, clients report straighter posture, better coordination, decreased strain patterns, improved stamina, better physical and emotional awareness of themselves and others, and even a clearer sense of purpose. Many of my clients find that Rolfing supports their efforts towards psychological and spiritual awareness as well as a sense of grounding both physically and mentally.

How Does Rolfing® Achieve Its Effects?

Rolfing uses two mutually-reinforcing components: hands-on myofascial techniques and movement cues which educate the client towards better coordination. A Rolfer™ remodels the client's fascia and retrains inefficient muscular tension patterns, freeing the stiff fascia of long-held tension patterns. As soon as the chronic muscular tension pattern releases, the attachment to the associated psychological pattern is now open for revision.

“Gravity is the therapist” is a famous Dr. Rolf quote, and implies that symptom relief comes from gravity being an energizing rather than a depleting force. Rolfers understand that posture becomes structure, and structure becomes identity. We can become locked into an idea of our self-identity because our physical structure becomes “locked” into a particular pattern.

The Rolfing® 10 Session Series

To straighten a wrinkle in a bed sheet, you can't work on just the wrinkle. You have to organize the entire sheet. So it goes with Rolfing® and why it progresses over ten sessions.

Dr. Rolf's 10 Series consists of 10 different postural principles relating to the body's structure in gravity. Sessions 1-3 work on the body's exterior organization and releases superficial fascial layers. Sessions 4-7 organize more interior structure and function and contact deeper layers of the body to include organs and the front of the spine. Sessions 8-10 integrate arms with the, pelvis to leg function and interior to exterior structures. On a physical level, coordination, stamina, posture and physical symmetry improves. On a neurological level, sensory input and motor output improves. After the 10 series has finished and a period of assimilation is completed, further Rolfing will deepen the sense of structural integration.

Committing to all ten sessions is not mandatory. You only have to come to the first session. A client can come in for one or more sessions to address their issues, but typically my clients choose to continue all ten sessions. It will be apparent if more Rolfing is appropriate and meaningful for you. You can do as many or as few of the 10 sessions as you wish.

How Does Rolfing® Differ from Physical Therapy and Other Bodywork Such as Massage?

Physical therapy relieves swelling and inflammation of acute and chronically injured tissues and restores coordination and function of the musculoskeletal system. Massage primarily addresses muscular relaxation. Chiropractic works on vertebral alignment with low volume, high amplitude techniques. Myofascial Release is designed for rapid resolution of soft tissue injuries.

Rolfing is more transformative and evokes client participation to be most effective. Rolfers work on the connective tissue system of the body to integrate the entire physical structure over time. Rolfing can also tap into the psychological trauma that can be held in the body as stiffness around which the rest of the body must compensate. Such compensations lead to imbalances which in turn lead to fatigue or pain. With an unresolved physical or emotional trauma, a person inevitably develops protective psychological patterns against the recurrence of such an overwhelming or unwelcome experience. Rolfing goes right to the heart of the matter. Without such an intention other bodywork is never Rolfing.

What To Expect at a Rolfing Session

Rolf sessions typically last about 75 minutes. It is important to wear comfortable clothing suitable for bodywork such as shorts and a sports bra. No lotions or oils are used in Rolfing sessions, so please arrive to the session without these products on your skin.

The first Rolfing session will consist of taking a medical history and a visual assessment of your structure, both standing and in walking. Then we will get to work on the goals of the session. Most of the Rolfing will take place on a wide bodywork table and a bench or chair. On follow-up appointments I ask for feedback about effects from the previous sessions. Further history may be discussed. I repeat my visual assessment of your structure, looking for changes and transitions. Sometimes Rolfing movement education will be taught toward the end of the session. Verbal movement cues are offered and coordination exercises are taught to further anchor the Rolf changes into the movement brain.

Who Chooses Rolfing?

Many people initially choose Rolfing to see if it will help resolve a long-standing musculoskeletal pain syndrome. Having exhausted their known options, their continued desire to improve forces an opening to other approaches. Many of my clients get Rolfing to avoid surgery or to get a different perspective than mainstream physical therapy. Rolfing can accelerate recovery from surgeries or accidents. Many of my clients know that they would like to improve their posture due to their jobs and life habits, and Rolfing always brings more awareness to their patterns. I have also worked with clients who have scoliosis to help them find more ease in movement in their structures with amazing success. I have helped many clients who are very healthy high-level athletes. Rolfing has helped them achieve increased performance due to its profound effects upon coordination. I have also worked with athletes with injuries, and Rolfing got them back to desired performance levels.

Beliefs and Resentments and How Rolfing Can Help Improve Sensory Awareness

When we live with a physical limitation, there is an inevitable change in our self-concept. What we used to be capable of is no longer possible. The affected body part no longer serves us as it once did. Most of us resent this as our movement diminishes, becoming a psychological loss which can lead us into depression. A sense of **I can** changes to a deeply entrenched belief of **I cannot or dare not**. The body and

the movement brain subsequently comply. This can be reversed with Rolfing. People who receive the 10 Series feel their relationship to gravity more clearly than before they were Rolfed. This is especially true when they slump or slouch while sitting and standing. Rolfing activates the muscles, ligaments and tendons to send sensory feedback to the movement brain to help resolve chronically held muscular tension patterns.

Frequently Asked Questions:

Does Rolfing Hurt?

In hindsight, many Rolf teachers admit that in the early days Rolfing could be too aggressive. Effective Rolfing is not meant to be painful and is respectful to both the body and the person to bring balance and support to the structure. The comfort of any particular Rolfing intervention depends upon a dialogue between the client and the Rolf practitioner. Each Rolfing experience deepens understanding of Rolfing and clients develop their personal exploration over time at their own rate. Rolfing is about the growth one can comfortably assimilate in the present moment; the client is always in charge and nothing is ever forced.

Will Rolfing Help Me Recover from an Injury?

If you have had a car accident, trauma or surgery and are not satisfied with your level of recovery, then Rolfing can help. In one consultation it will be evident to you whether not further improvement can be made. Once a client is dedicated to personal recovery and has courage, willingness, and acceptance, Rolfing remarkably accelerates and deepens personal growth.

Does Rolfing Help Nerve Impingement Issues?

The most common cause of numbness, chronic shooting pain or altered sensations is pressure on the affected nerve. This can occur at the exit of the nerve from the spinal canal through the vertebrae into the arm, leg, head, neck or trunk. If the impingement occurs at the vertebra, steroid shots and/or surgery are typically prescribed. However, many such syndromes are actually caused by pressure not at the exit from the spine but by muscle tension pressing the nerve anywhere further along its track. Releasing such muscular pressure frequently stops the nerve symptoms immediately. Retraining the muscular habit provides an enduring solution. Rolfing helps relieve this muscular pressure. Many clients become pain and medicine free.

Some nerve impingement (such as sciatica) can occur at the exit from the spine or anywhere along the track where muscular tension is imposing upon the nerve. If the nerve is metabolically impaired, severed or frayed, then Rolfing, steroid shots, or surgery will have little to no long-term effect.

Does Rolfing Help Relieve Headaches and TMJ Syndrome?

Some headaches and jaw tension issues are caused by impinged nerves exiting the cranium. Rolfing decompresses the nerves so they will not impinge on the cranium. If the headache is caused by muscular tension in the scalp or neck, Rolfing does quite well. Many of my clients report fewer to no headaches or TMJ issues throughout the 10 Series.

Can Rolfing Help Relieve Back Pain?

Rolfing is very efficient for certain types of backaches. Back strains without nerve impingements are typically acquired during lifting incidents due to altered front/back muscle coordination and respond very well with Rolfing. Many people with mild to moderate Magnetic Resonance Imaging (MRI) findings with nerve impingements can safely avoid surgery and function well with Rolfing. Backaches due to altered anatomy such as prior surgery, fractures, or developmental disorders can also respond to Rolfing. Scoliosis responds well to Rolfing - it is rare that Rolfing brings perfectly straight alignment in a

curved spine, but visual improvement in alignment clearly occurs. Most people with scoliosis who receive Rolfing have considerably less pain and move with more ease than before being Rolfed.

Does Rolfing Help with Shoulder Pain and Mobility?

The shoulder is a very complicated area anatomically. It has very little ligament strength and depends almost entirely upon balanced muscular tone to feel normal and move fully. However, Rolfing is an excellent option for rehabilitating shoulder motion. Rotator cuff strains and minor tears, tendonitis, and range of motion limitations respond well to Rolfing.

Does Rolfing Help Relieve Carpal Tunnel Syndrome or Other Repetitive Stress Syndromes?

Carpal Tunnel Syndrome is numbness and weakness in the hands and fingers. It is not always due to pressure from the carpal ligament at the wrist - it can be caused by forearm muscular tension. Resolving such tension with manipulation and educating movement patterns reduces swelling in the tendons under the carpal ligament. Rolfing can be a very effective approach to such a situation and can therefore avoid surgery. Resolution usually occurs in 2 or 3 visits for most clients.

Does Rolfing Help Relieve Plantar Fasciitis and Other Foot Problems?

The most common presentation of plantar fasciitis is usually resolved in 2 to 3 visits. If the foot pain is due to mechanical/coordination problem Rolfing will be very effective.

Does Rolfing Help Knee and Hip Pain?

Frequently, yes. As with most such musculoskeletal syndromes, an individual assessment is necessary. For acute and chronic hip and knee strains, Rolfing is very effective. With advanced degenerative joint disease, Rolfing is still effective to help you maintain high function levels.

Can Rolfing Treat Bunions?

Mild to moderate bunions respond readily to Rolfing interventions. Typically, the pain improves with one or two visits. The big toe can straighten in that time but frequently takes longer.

Many thanks to Dr. Wiley Patterson for his inputs into this webpage. He is a well-established Certified Advanced Rolfer™ in San Antonio, Texas, a former faculty member at the Rolf Institute, and my first mentor. He once told me, "There is life before Rolfing and life after Rolfing". Rolfing has transformed my life for the better and I am passionate about sharing Rolfing with others to help them achieve a new life experience through this amazing modality. Call or visit the appointment webpage to start your transformation and experience life after Rolfing.