

The Rosen Method

by Hanna Cohen, P.T. and Jane Pittsinger, P.T.

1997

Introduction

The Rosen Method “is a way that we have found to connect with the unconscious through touch.” Marion Rosen ¹

There are two parts to the Rosen Method. One component is hands-on bodywork, while the other one is movement with music. Both work with the breath and relaxation as a means towards self-awareness. A client may participate in one or both forms during any period but they are practiced in separate situations.

The Rosen Method (Bodywork and Movement) is taught to, and practiced by people with a wide variety of backgrounds and disciplines. Marion Rosen, the founder of this work, is a physical therapist. From Marion’s definition of the Rosen Method, one is immediately aware that the work encompasses the physical and the psychological dimensions of a person. As a physical therapist, why should she reach for the unconscious? What does this have to do with physical well-being and improvement in the patient’s ability to function? How does it enhance these goals which health practitioners concerned with healing of the body traditionally hold? We will address these questions in the course of this article.

Two physical therapists collaborated in its writing. Our purpose is to introduce you to the principles of the Rosen Method, its history and background, its purpose and goals, and some issues concerned with its practice.

We hope to elucidate the value of the Rosen Method in promoting health by contacting dimensions of the client beyond the physical. Marion goes further to say that “being well” is not enough. It is important for the client to find his/her purpose in life. The Rosen Method offers this possibility.

History and Background

Marion Rosen was born in Germany in 1914. She experienced asthma as a child and sought treatment when she was in her early twenties from a woman Lucy Heyer.

“Between 1936 and 1938 Rosen studied with Lucy Heyer, a pupil of Elsa Gindler, grandmother of today’s breathing and relaxation techniques. Heyer’s work was influenced by Mary Wigman in dance; Medau, the originator of a movement school using medicine balls; and Rudolf Laban, father of Laban Notation. She was a student of Jung and treated patients in breath, movement and massage. Her husband, Dr. Gustav Heyer, treated the same patients with Jungian analysis. Heyer’s classes loosened up patients to make their emotions more accessible to them. Thus the pre-war German psychiatric circles’ influences on Rosen stressed the integration of physiologic

¹ Conversation with Marion Rosen, 1997

and psychological analysis, as well as movement and breath work.

In 1938, while her brother was interning in psychiatry at the Tavstock Clinic in England, Rosen treated psychiatric patients with breath, massage and bodywork. The results were excellent and many patients lost their symptoms.”²

Marion left Germany in 1939 and moved to Sweden where she studied some physical therapy. She fled through Siberia and Japan and arrived in the Bay area in the 1940's.

Originally, Marion wished to continue her breath/massage work, but it was not accepted in this country. She decided to go to medical school but neither had the grades nor the money for that type of education. She trained at the Mayo Clinic to become a physical therapist. She was able to achieve very high grades in physical therapy school because she had a deep understanding of what was going on inside the body. She did not learn her classes with her head, but “felt them” with a different type of understanding based on her experience of the breath.

Marion’s first bodywork method pupil was Sara Webb. Marion helped Sara’s brother with his asthma and Sara became interested in her work. She convinced Marion to teach her the breath work and share this work with others. The first official training for Rosen Bodywork practitioners was in 1978 and hence the first school – the Berkeley Center – was born. Eleven Rosen Method Training Centers can now be found throughout the world.

Principles of Rosen Method Bodywork

A Premise and Case Study

The Rosen Method is concerned with getting in touch with one’s deeper self. Sometimes our deeper self becomes masked from our consciousness by our attitudes. The work “attitude” refers to the mental and emotional dispositions we hold and the postures we adopt. One affects the other.

We are all familiar with postures of the body associated with asserting ourselves, protection ourselves and being at ease. These three tendencies manifest, in turn, the instinctual movements of self-assertion, self-preservation and self expression, which, as human beings, we share with all nature. These body postures are created by muscular contractions which are produced in response to a variety of causes. . (E.g. a child may put on an aggressive attitude as he walks through the streets to show how touch he is).

These instinctual reactions, under normal circumstances, are natural survival mechanisms. They may, however, become changed into attitudes or postures which are habitual. We may come to a point in our lives where these “survival mechanisms have become barriers to the possibility of expressing ourselves fully, of being in the world.”³

² Rosen Method of Movement, Marion Rosen and Sue Brenner, North Atlantic Books, Berkeley

³ Conversations with Marion Rosen 1997

What interests us as Rosen practitioners is how fully the client can feel and express who he/she really is. So often in life we have repressed, and subsequently forgotten a part of our own experience which was too difficult or overwhelming to bear at the time. We dealt with the particular experience through the survival mechanisms but could not, or did not feel it with full consciousness. The experience, the feelings, and the responses of the body associated with it, were “put away”; pushed beneath the consciousness. The memory of the experience, though hidden from us, nevertheless, remains a part of us. This may cause us to live with some kind of barrier between a sense of the wholeness of ourselves and that aspect of ourselves which we allow into our consciousness. To paraphrase Marion, we act from who we “think” we are, not from who we “really” are.

Sometimes we do remember past experiences but suppress the feelings associated with them. When any feelings are shut out, there is a deadening of our overall capacity to feel. We are less able to feel joy as well as sorrow.

The purpose of the Rosen Method is to provide a way for the client to fully experience the “wholeness” and interrelatedness of the body, feelings and life experience such that he/she may feel more conscious, more alive and able to move forward in her/her life.

The case history below illustrates the basic purpose of the Rosen Method. The working principles used in the bodywork are summarized in the next section.

Case Study

F.D. is a 36 year old woman who came for Rosen work in 1994. She felt alienated from people and was often told that she was aloof and unapproachable, even intimidating, though this was quite different from how she felt inside. She also suffered from neck pain, stiffness and headaches though she did not necessarily see any connection between her physical and emotional complaints.

At the first meetings, F. Held her head in a defiant posture with jutting chin. Her chest was held up and forward as if to confront the world, yet her shoulders were hunched, as if at the same time, she was shielding herself from something. Her face was rather set and expressionless.

Early on in the Rosen session, the practitioner contacted a place of deep muscular tension around the right scapula and F. remarked how tight she felt there,; that it was an old familiar feeling, though she had not previously been aware of it. She started to recall the sensation of carrying a cumbersome suitcase and this was mixed with a feeling of dread and sorrow. She was going back to boarding school, and had said goodbye to her parents and her home in a far off country. She dared not show her feelings, especially to her peers, and so she pushed down the sadness and put on an attitude of coldness and distance – her way of feeling “above” her peers so that she need not enter into what seemed superficial association with them, compared with her own depth of feeling and fear.

Over ensuing sessions, F. became aware of how she had continued to practice this “survival mechanism” over many years. She was frequently teased for being different and she “removed”

herself by being distant. This made her feel strong and impregnable. At the same time in her sessions she began to experience an old feeling of longing to break out of a “prison” longing to be open and spontaneous with people. She did not know how to “come out” of herself. The tension between her desire to come out and the fact that the “could not” was agonizing.

Over two years of working with F., twice a month, small cumulative changes occurred. Her body began to relax more easily, she smiled more often and she allowed herself to cry during the session (at first with her hands over her face, then openly). She had never before been able to cry in front of anyone, duplicating her experience of stifling her sobs under the bed clothes at boarding school. She expressed her inner experience as “softening.” She no longer felt a need to shield herself when she was with other people but could relax and listen to them and feel joy in discovering who the other person was.

She became aware of what made her tighten and harden her face. As she became more aware, she was able to watch her own habitual reactions, instead of becoming caught up in them, she could smile at herself and relax her face, neck and shoulders, and reason about the situation. She learned to recognize the kind of muscle tightening that would culminate in a headache, and relax. She voiced feeling more “at one” with her body and herself, able to feel more, rather than being constantly in her thoughts. There was more trust of others rooted in a growing sense of trust and acceptance of herself.

Summary of Case Study

Rosen Bodywork allowed F. to experience how she was holding her body and to feel the emotions and memories associated with the patterns of muscle tension. The function of muscles is to relax as well as to contract. We are not always aware of the tension we hold but when the brain receives the conscious perception of un-needed tension, it seems that the possibility of relaxation ensues. Conversely, relaxation of the body when touched in a certain way, may allow feelings and memories to surface into the consciousness.

To bring about awareness in the client as well as the possibility of relaxation, are basic goals of the Rosen Method. When the body is less tense, the breath may be deeper and the muscles may allow freer movements. The client need no longer be locked into habitual ways of moving, responding and feeling.

The client, as in the case of F., becomes an active participant in his/her healing process. This is the way in which the Rosen Method is practiced, in that clients become more empowered to make choices and to realize that they have options about how they live, feel work and connect with others.

B. Working Principles (For convenience, in this section “he” refers to the client and “she” refers to the practitioner).

A Rosen session of bodywork lasts approximately sixty minutes. The client may leave on any clothing they wish, but generally the person is unclothed except for underpants, and is draped with a blanket while lying on a massage table. Usually the client starts in a prone position and the back is worked on first. They turn into the supine position about half way through the

session when the more vulnerable and sensitive front of the body is worked on.

One of the basic working principles is that the practitioner is not doing something to fix the client's emotional or physical pain but allows something to happen in the client. Marion says, "We do not intrude into a person. We facilitate the opening up. The idea is that whatever is suppressed will come out, if you give it enough room to emerge."⁴ "Room" is given to the client by the quality of the practitioner's presence; the way she touches the client and the way she uses words.

The practitioner's approach to the client is one of profound respect with an attitude of listening and receptivity. She is receptive to the client with all her faculties and senses, through which she takes in the texture of the skin and muscles under her hands, the temperature, and the movement of the breath into the different regions of the body. She notes how the client holds and shapes himself on the table, and listens to the tone of his voice.

As her hands pass over the client softly she may wonder silently, "Who is this person?" Where the body structure seems held back from a position of ease, such as a hunched shoulder which might drop as well as rise, up, she might wonder, "How would this person feel different if he relaxed here? What possibilities are held back?"

As well as receiving the client through her hands by feeling over the body, the practitioner acknowledges the places of tension. When she encounters a place of muscular holding, her hands move into the holding to match the degree of tension in that place. It is in this acknowledging touch, the discovery of this hard or tight place by another, the mirroring back to the client of a place which he had shut off from himself, that the client may receive a profound proprioceptive experience of that place, and that associated memories and feelings may arise.

The practitioner follows the process of the client by watching the rise and fall of the natural breath. The natural breath refers to the breath which flows spontaneously rather than the breath that is consciously controlled by the client. As a general principle, ease of breath indicates ease with oneself, being in one's truth, if you will. Holding or stopping of the breath, sometimes quite subtle, reflects doubt or hesitation.

We especially pay attention to the client's breath by watching or feeling the respiratory diaphragm.

Verbal interaction with the client is in response to what is observed in the body. When the client speaks, the practitioner gives feedback depending on whether she feels a response in the body that does or does not support the statement. When a statement by the client is supported by the body, the breath eases and the muscles tend to soften. Conversely if the client hesitates, there is a holding or tensing which can be felt. In this manner the client's body's response and his feelings or mental activity are brought into conjunction in his conscious experience.

This is the basic process of the Rosen Method. The frequency of visits may vary from once a

⁴"The Power of Gentleness" by Jane Silver Ghent, staff writer, Oakland Tribune, Wed, March 19, 1992

week to less but it is not usually more often. The period over which a client attends varies greatly according to individual needs. Some clients come for a relief of physical and/or emotional pain, and other for personal growth. Sometimes people have experienced severe trauma; great patience as well as much time is needed. The client's process is never forced. Still other clients come to experience touch in a gentle, non-intrusive way that may take them to a deeper experience of being alive. Each client is unique and each session is a new journey in itself. The practitioner must remain open for it is through her own openness to the unknown that the client may be open to his own unknown.

Rosen Movement

What is Rosen Movement? How does it differ from other forms of exercise or dance?

Marion Rosen began teaching movement classes in 1956. Her purpose was to help people learn how to prevent aches, pains, and stiffness, which she refers to as “physical therapy in reverse.”⁵ Our culture usually refers to exercise as “working out,” emphasizing external goals like muscle building, performance, and fitness. In Sweden, where Marion continues to teach movement, the Swedes refer to it as “working in.” Herein lies the difference. In the same way that Rosen Method Bodywork reaches deep into a person, allowing that person to find more space for themselves, Rosen Method Movement comes from the core and we move from the “inside” out.

Rosen Movement is fun, easy to do, and everyone can do it within their own limitations. The principles are basic. Marion believes that if one moves every joint once a day in each direction, the joints will not become stiff and one will gradually move with greater ease. The joints are put through gentle range-of-motion, allowing habitually-held tight muscles to lengthen. Music is used to support this movement.

The other basic principle is to increase the expansion of the chest and rib cage, thus allowing for more freedom of the respiratory diaphragm and increased capacity for breath and circulation.

Often in standard aerobics classes, although the arms and legs may be moving quite a bit, the chest remains still. This can create a shortness of breath, which is uncomfortable and fatiguing. This shortness of breath can also occur if the music is so too fast and one is not stopping to “catch one's breath.” One should be able to talk while aerobically exercising, and feed the body with oxygen.

Rosen Movement classes may appear to the casual observer, to be people in a circle merely enjoying themselves and doing simple random steps to various types of music. Actually, each motion has a very specific purpose with the additional goal of “finding our inner wiggle.”⁶ The three primary muscle groups that we wish to influence are the trapezius, the respiratory diaphragm, and the iliopsoas. The origins and insertions of these muscles span the neck to the head and upper extremities; the ribs and trunk, and the lower extremities. All three muscle groups converge at the thoraco-lumbar junction. When these muscles are working integrally and

⁵The Rosen Method of Movement, Marion Rosen and Sue Brenner, North Atlantic Books, Berkeley.

⁶Conversation with Marion Rosen, 1997

moving freely, one is able to take a fuller breath. The trapezius greatly affects the motion of the upper body. The diaphragm is the horizontal center plane of the body with nerve innervation from the cervical region and muscle attachments which include the sternum, lower ribs, T12 and the lumbar vertebrae. The iliopsoas, when it is not contracted and inhibited, allows the pelvis the freedom to align itself under the chest and rib cage, such that it provides structural support for the breath.

Tightly held muscles can compress joints together. When muscles stretch and relax, there is more space for the joints and thus greater ease of movement. Increased joint space allows for the possibility of enhanced synovial fluid production and decreased pain within the joint.⁷ Marion feels that a restricted iliopsoas is a major component in compressing the joints in the lumbar spine which can lead to back pain. Although only three main muscles groups have been discussed, ultimately all muscles work together throughout the body to create full integration in movement.

Gentle movements are used to stretch muscles, allowing for gradual lengthening and mobility over time. Force and the “no pain, no gain” concepts are never a part of Rosen Movement; we move within our range as far as we can go. The “stuck places” help us gain self awareness of where we do not move and where we do. Taking the time to feel ourselves move and feel where we are not moving can bring up deep feelings from within. A student shared that she remembered how it felt when she was a long, lean child who danced with balance and grace. Time, age, and various traumas of living have re-shaped her body. Gradually, through Rosen Movement, she is changing and reclaiming the grace she once had.

A Movement Class

Class are 50 - 60 minutes long. Most people attend once a week. Rosen Movement uses music to help facilitate the ease and joy of moving. It may include any kind of music. It is helpful to have a beat that is easy to follow. The first movements are slow and very simple. The teacher should be aware of each student, increasing speed and complexity of the movements only when all students are ready to move on. “There should be no program, only people, and they should go home having received something.”⁸

We stand in a circle and start with simple range-of-motion movements to lubricate the joints and open the chest and ribs. Much of the warm-up is done with the upper body and some gentle lower extremity range-of-motion. Stretch motions like reaching up, out and backward are also included in this phase. Periodically, we pause and take a deep breath. This give us an opportunity to stop and become aware of what we are feeling. It is not about hurrying to the next movement. It is about experiencing one’s self through the present moment.

Moving in a circle lends itself to community, while standing in lines watching the teacher in front or watching oneself in walled mirrors doesn’t seem to break into the isolation that many of us feel. “When I hold the hands of people in my class, we support each other’s movements. I

⁷ The Rosen Method of Movement, Marion Rosen and Sue Brenner, North Atlantic Books, Berkeley

⁸ Ibid.

feel grateful for the balance and feel connected to the group.”⁹

Movements begin slowly and simply, and sometimes progress into more complex dancing which is reminiscent of a grapevine folk dance. The circle aspect of folk dancing is, in fact, similar to this phase of Rosen Movement. The difference is that we are focusing on the breath, purposefully moving each joint and the steps are easier to do. Easier steps allow everyone to participate and feel included.

After warming up our joints and inviting in our breath, we move to the dance — the phase called “across the floor.” Recruiting the whole body, we use a combination of movements to dance. Often this is done in partners which helps to increase coordination and sensitivity to the way another person moves. This phase is a lot of fun, as we might strut to the Blues or glide to a waltz. Intimacy and laughter are usually present.

The last phase is done on the floor and serves to assist in relaxing and moving the spine. Stretching should only be done from a relaxed state. Strengthening movement is done to remind the muscle of its capacity to work, and is followed by a full relaxation of the muscle. “I feel good after I’ve been in class. My body feels looser, my posture is a bit reshaped, my breathing is easier, and I generally feel happy.”¹⁰

One Rosen Movement teacher talks about how Rosen work has been the greatest gift she has been given. She was always told she was, “too fat to move – she shouldn’t move.” When she found Rosen Movement, she felt she had permission to move and was good at it. She feels that the opening of the chest is an opening of her spirituality. “Rosen Movement is something that is accessible any time and can be done in a group/class or by yourself. There is an integration of movement, spirit, and music.”¹¹

Lisa Thompson has been teaching Rosen Movement for fifteen years. She started semi-professional dancing in the tradition of Isadora Duncan about fifty years ago. She continued with Anna Halperin-Latrop Studios, where she danced and later taught for twenty years. She said her Rosen Movement teaching was different from her previous experience. She said other dancing had been more oriented toward learning and perfecting dance. “In Rosen Movement, it is more about discovering how your body works for you.”¹² A dancer, who had known her body in another way, she found that the core movements of Rosen engaged her at a different level and she liked herself more. This changed her relationship with others, because as she came to know herself, she felt more love for others and “wanted to spread herself out a little more.”¹³ An

⁹Hanna Cohen

¹⁰Ibid.

¹¹Conversation with Miram Cantor - Rosen Method Practitioner and Movement teacher.

¹²Conversation with Lisa Thompson - Rosen Method Practitioner and Movement teacher.

¹³ Ibid.

obviously active woman, still teaching classes three times a week at age 79, she stated that before starting Rosen Method Movement and Rosen Method Bodywork she felt she was “doing her life” but had not been “living it.”

Like Lisa Thompson, many of the women involved in the Rosen Movement classes are in their 70's and 80's. They emerge giggling maidens with faces that sparkle with life. Although their hair is gray, their youthfulness abounds. Could the Fountain of Youth be our own fluid movement from within?

Rosen Method in a Physical Therapy Practice (In this section , “he” refers to the clients and “she” refers to the P.T.)

A wide variety of clients may come to a physical therapist (P.T.) Specifically to receive Rosen work, often because of the P.T.’s knowledge of the body. People with chronic pain or disabilities may feel more secure because of the P.T.’s medical training. Others come so that the sessions may be covered by their insurance policies. Some clients come with primarily physical complaints while others come for more existential reasons while recognizing that touch is important for their healing. When taking the client’s history, it is important to ascertain the client’s needs and aims.

During the evaluation, the P.T. assesses the extent and quality of biomechanical dysfunctions. She offers the client whatever skills she possesses to treat out the dysfunctions. It is also important to establish whether the client has the support of friends or family, and whether he has received psychotherapy in the past or is receiving it currently.

Another set of circumstances exists. A client may come for physical therapy who has no knowledge of the Rosen Method. During the course of working with physical therapy procedures, the P.T. realizes that the client might benefit from the Rosen Method. In this situation, the P.T. may educate the client about the Rosen Method and her intention will shift from a physiotherapeutic one of releasing particular restrictions to one of a listening, receptive touch. The difference between the listening touch of manual therapy and that of the Rosen Method is that in the latter, we hold questions in our mind about the client’s life. It always amazes this practitioner how, through the shift in her own intention, the client shifts also, and more often than not, will begin to relax and talk of difficult situations from his/her past or present.

In a client with chronic pain, a pivotal point in the healing process seems to be his conscious connection between the time when the pain began and the circumstances happening in his life at that time.

Rosen Movement may be incorporated into physical therapy practice. Whether teaching a class or an individual home exercise program, clients are encouraged to gently move their joints to music. Clients are encouraged to breathe - often and fully. Movement may be used as a tool for teaching posture and body alignment - e.g. clients are taught to feel how a “sunk in” sternum can

lead to a forward head or rounded shoulders. Attention to the sternum and chest may lead clients to start taking fuller breaths and to open their hearts in a way that facilitates the healing of core issues.

Ultimately, many of the goals of the Rosen Method and physical therapy are the same - to restore ease to the body, the reduce pain, and to improve the client's ability to move and function more freely in everyday life situations. Differences arise in the process of and intention toward achieving these goals. Physical therapy takes an active role in trying to change a person's physical structure, whereas Rosen work helps people to re-connect with themselves, and allows change to occur beyond the physical structure and into life.

In the context of a physical therapy practice, Rosen Method has a role, not just in enabling people to get physically well, but in identifying what attitudes contributed to the illness in the first place. It offers the possibility for deeper, more permanent change.

Contraindications and Indications

Contraindications

People who are in great psychological distress or have psychosis may not be appropriate for Rosen work and/or should also be involved in psychotherapy. For Rosen practitioners who are not psychotherapists, it is beneficial to have one with whom you can consult. Often a Rosen Practitioner will consult with a client's psychotherapist with permission from the client.

People who are very medically ill or have suffered an acute injury should have a medical consultation and treatment, as needed, in conjunction with Rosen work. As with any exercise procedure, clients with a medical history of spinal dysfunction, or heart and circulatory disease must be monitored more closely throughout the Rosen Movement class.

Rosen Bodywork and/or Movement is valuable for people experiencing chronic pain and discomfort created by tense muscles or postural habits. It helps to increase mobility and flexibility. It can be used as an adjunct to physical therapy or psychotherapy, and it assists in stress reduction through breathing and relaxation.

Documentation and Reimbursement

Within a physical therapy practice, Rosen Bodywork or Movement are documented as various aspects of manual therapy, kinetic activities or therapeutic exercise. After the evaluation we continue to document changes and accomplished goals that are physically oriented. It is not appropriate to document on verbal interactions as we are not trained psychotherapists.

Clients using insurance require a physician's prescription. Reimbursement can depend on the achievement of goals set through the initial evaluation and on the parameters set by the individual insurance company. Standard physical therapy codes are used for billing purposes,

The Training

As special aspect of Rosen Method Training is that the students is required to receive Rosen sessions. This deepens the learning process and reminds us of why we are doing this work, which touches our truest selves.

Marion asserts that to practice this work, the practitioner does not require particular skills; but rather must “be” a certain way. She must be a good listener, learn patience, and put her ego into the background. She say, “Then you can start.”

For further information on Training contact the Rosen Institute Website:
www.RosenMethod.org

Bibliography

Rosen Method, Elaine L. Mayland, Ph.D., Copyright by Elaine Loomis Mayland, 7th printing, 1995
“The Healing Touch of Rosenwork” by Bevelyn Crawford, Yoga Journal, article, March/April 1990
“Healing Through Rosen Method Bodywork” by Paul McGuire, article in Heart Dance, 1996
“Rosen Method” by Sandra Wooten, article in Massage Magazine, Issue Number 44, July/August 1993
Touching the Body, Reaching the Soul by Sandra Wooten, published by Rosen Method Center Southwest.

Suggested Readings

“Rosen Method Bodywork” by David Berger, M.A., P.T., M.F.C.C.I., Complementary Therapies in Rehabilitation, Ed. Carol M. Davies, Flak Incorp. ISBN 1.55642-281-4

Authors:

Jane Pittsinger has been a physical therapist since 1973. She has worked with people of all ages and with a wide variety of disability and illness, in patient care, consulting and teaching. For the last 8 years she has focused on refining her manual therapy skills. Living and working in several different countries, she has always been interested in exploring what is universal to all human beings as well as what is unique to the individual. Her interest in the relationship of mind and body in health and disease let her to train in the Rosen Method, which has enabled her to work more effectively with the “whole person.” She working in private practice in San Mateo Country, CA.

Hanna Cohen completed her training in physical therapy at the University of California, San Francisco in 1976. Her interest in working with various types of chronic pain has led her to study different methods of healing. She has been practicing osteopathic-based manual therapy since 1987. These skills have taught her ways of listening to the body. Her deep love of music has inspired her to listen for the song in each person. These two aspects come together in the Rosen Method. She currently practices in San Mateo, CA at ABA Physical Therapy Associates and in private practice in San Francisco.