



Feldenkrais Skolan

Life is a process. Improve the quality of the process and improve life itself.
- Moshe Feldenkrais

A short series of 4 lessons with Julia with Yochanan Rywerant

In December 2007, at the age of 87, almost 25 years after the death of Moshe Feldenkrais and 2 ½ years before his own death, Yochanan Rywerant invited trainers, assistant trainers, and any experienced practitioners to an advanced training in Tel Aviv. He asked if they would like to get some possible answers to the questions below, and if so, they were most welcome to participate in the workshop.

“How close are we to Moshe Feldenkrais’s spirit?”

- Would you like to deepen your understanding of the Feldenkrais system?
- Would you like to know why the Method works?
- What are the ways to increase its effectiveness?”

I participated in this advanced training in Tel Aviv. He presented an overview of the teaching in Functional Integration (FI) and Awareness Through Movement (ATM), which can be read here: [Handouts](#). He also discussed corollary discharge. This 2007 meeting preceded the upcoming publication of the monologue Corollary Discharge, The Forgotten Link: Remarks on the Body-Mind Problem. [about the monologue](#)

It was unexpected that such a valuable and fundamental teaching tool was unknown to many of the trainers present, who asked beginner-level questions.

YR was well informed about the development of the profession. He continually received writings, papers, and manuscripts to review. The TAB’s sought his opinion to approve trainers. He was frustrated when he felt his comments were not considered. Around this time, he resigned from this position. He conducted ongoing basic, advanced, and TT (Teacher Training) courses until 2010. Teachers came from TAB (Training Accreditation Board) programs, and he identified what they lacked and needed to supplement. In 2003, he wrote Envisaging the Future of the Feldenkrais Method, [The article](#), which is included in this reading to understand his approach to the profession he helped develop.

In December 2007, YR also released the videos of Stockholm 1 as well as a series of lessons with Julia, a girl with an asymmetrical organization, and another series with Wilson, a young man who suffered a stroke.

In the current atmosphere, I have decided to give Feldenkrais teachers access to view the videos on my Dropbox account. There are a few hundred people who show interest in what I publish, and this is the only way I find I can make my library accessible to others. I think that the majority are familiar with how to address these issues, but it is still rewarding to see 'YR in action.' Additionally, I believe this will be new for some.

I am pleased to offer you access to the virtual library of Feldenkrais Skolan. You can view the videos via Dropbox. They will be available until May 20, marking the 15th Memorial Day of Yochanan Rywerant's passing. May his memory be a blessing.

Please use the link below. It involves technicalities and thereafter an approval concerning you personally. It is the inconvenience you have to make to be able to see the lessons

<https://bit.ly/YRwJ>

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Text to the four sessions with Julia By Yochanan Rywerant

A Swedish young girl with scoliosis. These sessions have taken place during a Feldenkrais Professional Training in Stockholm 1986-1989.

Session 1

Pay attention to one right way you have to check the scoliosis, that shows the side deviation, as well as the rotation of the spine. Quite at the beginning you could observe also the trunk's stiffness, an important aspect of scoliosis which, by the way, is often not mentioned even in the pertinent medical treatises.

In the supine position, it seems very difficult to flex the spine by supporting the vertebrae C7 and D1. The shoulder blades are also held in place, but when their movability has been accepted, arm, head and shoulder move in a non-differentiated, secure way, while differentiating the middle part of the trunk.

The flexibility shows itself now also at the base of the neck, and - as a consequence - it allows easy head flexing and extending. All these improvements in flexibility are intended to render any activity easier (the dynamical aspect), rather than to straighten out the scoliosis (the statical aspect).

We could just further accentuate the scoliosis (not correct it!), and then, using the system's flexibility, turn it the other way, so that even the habitual convexity of the lumbar spine to one side changes into the non-habitual direction.

Observe how the trunk's flexibility - already achieved - is not yet used (in sitting), with the head's extension or flexion. But once discovered, it is now used with pleasure.

Session 2

Observe the application of the flexibility, as it has been already partly achieved in the first session. Dealing with the belly muscles on the left side, which are holding the small ribs on that left side, by supporting (shortening) the extensor muscles on her right side ("diagonal antagonism").

Observe that on the other side, the ease is not the same. The small ribs on both sides being now freer, there is a deeper breathing, which is another aspect of diminished stiffness. Still in the prone position, a further application of the improved flexibility is the sharper twist of the spine (the head rotated in one direction, and the pelvis in the other one).

Again, the scoliosis will allow one side easier than the other. A difference also presents itself - in the supine position - in the beginning, in bringing knee to chest.

Session 3

Observe the further enhancing of the flexibility in the side position. The chest on one side being on the table, only the other side can perhaps flare out while breathing. Getting to the middle part of the trunk, either through the arm and shoulder blade, as well as through the extended leg.

Observe the big difference between the two sides, and the holding of the belly muscles which are connecting the left iliac crest with the left-side floating ribs. Observe the repeatedly used idea of doing a non-differentiated movement of two parts, which precedes a differentiated movement.

Session 4

Observe here the way of supporting the pelvis with a soft roller, in the prone position, which should avoid too much extension of the hip-joints, while allowing much freedom in the legs, in the pelvis, in the spine, and in breathing.

The head needs now, in the supine position, its special attention. It occurs that the atlanto-occipital joint (between the skull and C1), shows some stiffness, and has to be attended to. Finally, a carefully done hyper-extension of the head completes the job, and Julia shows now her total satisfaction.