

A Global Hold for the Upper Pole

By Deborah Weidhaas, Certified Advanced Rolfer™,
Rolfing® Movement Practitioner

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If you are a highly experienced Rolfing® practitioner, the approach described in this article will give you and your clients access to some profound structural relationships. If you are a new practitioner, this approach will allow you to work with tensional patterns in a client's neck, head, face, and jaw at any time in a client's Rolfing® process, even well before session seven of the Ten Series.

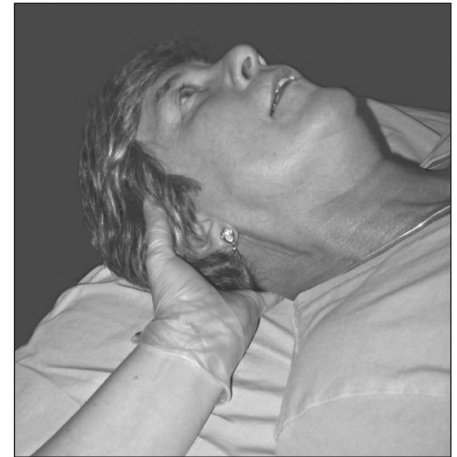
After a few years in practice, I wanted a way to work safely in session one or two with strong tensional patterns exhibited in a client's jaw, head, neck, and face. I believe if clients grind their teeth, clench their jaws, have a temporomandibular joint (TMJ) disorder, or exhibit observable tension in the jaw, head, neck, and face relationships, it is a disservice to wait until session seven to address these. I also feared that high levels of tension in this territory could be inhibiting potential effects and responses from the whole structure during sessions one through six. From these concerns came an approach to address session seven considerations at any time in a client's process, even as the very first thing I engage at the beginning of a first session. In addition, this approach does not rework the same layers but, instead, gives new information and further structural connections through the upper pole each time it is used.

I usually begin this work on the left side of the client's body because, stereotypically, I find left sides slightly more receptive than right sides. The instructions here are oriented for working on the right side of the client's body in order to match the accompanying photographs. Pay close attention to the hand and finger positions so you can reverse it all in order to work with the client's left side.

The client is supine on the table. I am to the right side of the client near the client's head and right shoulder. I kneel on the floor or sit on a stool. I place a thin pillow across the client's right shoulder and chest. Later I will rest my right elbow on the pillow so this work will not include the task of holding my right arm up in the air. Resting my arm allows me to devote my full attention to the client's structural needs and responses. It also allows me to hold this global hold for a long time, in case this is what the client's structure needs from me while it finds relationships through the upper pole. The next thing to do is position the left hand to support the right side of the client's head. For this global-hold work, spreading the fingers out and each finger position are more important than the traditional Rolfing® approach of a palm-support on the back of the client's occiput.

Finger positions for the left hand:

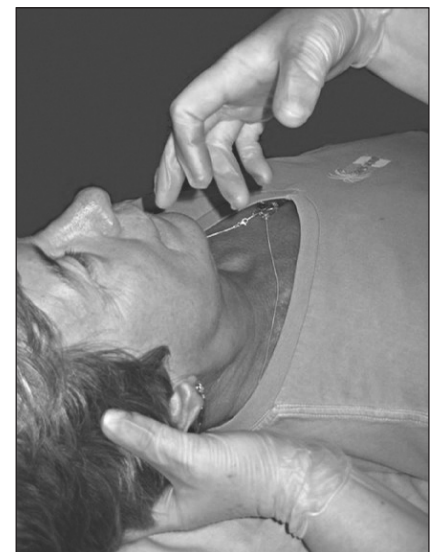
- At first, the thumb is placed on the side of the client's head near the ear. You will position your thumb more specifically after the other left-hand finger positions are set in place.
- The index finger and third finger span across the area of the occipital bone, temporal bone, and lamdoidal suture.
- The ring finger is on or around the atlantooccipital joint (A/O) or C1.
- The pinky finger is on or around C1, C2, or C3, however far you can reach without straining.
- The thumb goes on the cephalad side of the TMJ because its direction of compression may well be needed to go directly into the TMJ from above.



Place your palm under one side of the client's head.



Finger positions for your hand on the back of the client's head.



Positioning your hand on the front begins with positioning your third finger.

Finger positions for the right hand:

- The third finger of the right hand is in the client's mouth. To get the exact position, the pad of the third finger touches the inside of the client's right cheek, travels along the inside of the cheek toward the masseter, then along the masseter toward the TMJ as far back as it can go comfortably for the client. When you get as far back as the finger can go comfortably, this is the finger position for the third finger. Its direction of compression will be toward the TMJ (from the mandible or caudal side of the TMJ and from inside the mouth).
- The index finger of the right hand, which is outside the mouth, goes on the maxilla near the bridge of the nose.
- The thumb, which is outside the mouth, goes on the mandible just below the TMJ (so it is on the mandible/caudal side of the TMJ, outside the mouth).
- Then curl the ring and pinky finger under on this hand because they are not in use and because curling them toward your palm gets them out of the way of the client's chin and mouth.

At this point you have an incredibly global hold on the right side of the client's jaw, neck, head, and face.

Compress all that is within your hands into the front/back relationship. Gently compress your right hand into your left and your left hand into your right. Feel as you compress for where the structure needs you to be, or where it draws your attention, or where it stops and asks you to just hold it.

Sometimes just holding in this way will help this territory begin to relate to itself. It can begin finding subtle connections, relationships, releases, and motions. Sometimes this territory will require much time and patience from you before it begins to relate to itself or to direct your focus within it.

Adjust your compressions as needed based on what the body is asking for and telling you. Feel for what the body wants from each of your fingers in terms of level of engagement, level of pressure, and front-to-back directional compression. Every finger, and what bit of your palm you have under the back of the head, has the potential to compress toward a finger or fingers of your other hand. You can compress hand to hand, or a few fingers to a few fingers, or one finger to one finger, or the finger(s)



Finger positions for your hand on the front of the client's head and face.



The global hold.

on the face to your palm on the back of the head. You can also compress directly into the TMJ for a TMJ unwinding with your (a) right third finger, (b) right thumb, and (c) left thumb. The combinations are too many to count.

One of the most potent and profound compressions is to compress all that is within your hands and wonder if the front of the head and the face realize the back of the head is here and if the back of the head realizes the front of the head and the face are here. If that sounds weird to you, try it. There are many heads that don't relate as a complete orb, front to back, within the middle, and back to front. Many people have patterns in consciousness that include only their faces, because the face is all they look at or see in the mirror.

Sometimes I will also wonder if this side, which I have in my hands, realizes that the other side of the jaw, neck, head and face exists and is a part of the whole. Sometimes I will hold this territory and wonder if it realizes it has a torso or a pelvis or legs. I learned this from one client for whom I was holding this territory, and all it wanted to know was where its legs were. My work in the upper pole that day was focused solely on the global hold and on helping it find the lower pole. If you follow the guidance of the structure, this structural hold may take you into any relationship needing your facilitation within the whole.

On occasion, I can sense that the structure needs the hard palate to ease laterally a bit. This may happen at any time. Most often it occurs as the last bit before moving to work on the other side of the client's body. If I sense a need in the hard palate for it to ease laterally, I let go of the global hold and ease

the hard palate. Then I return to the global hold on this side or shift to doing this work on the other side of the client's body. The need for hard palate easing comes up about 10%-20% of the time in my experience, so it is not frequent, but is common enough to mention.

IMPORTANT ELEMENTS TO NOTE

A) This work is not done with a craniosacral touch. It is a clear, distinct, real, structural integration contact coupled with your refined ability to listen for what the body and structure want. In other words, contact and hold like you're holding a coconut, not like you're holding a feather.

B) Slowly, progressively compress it all into itself and sense for what it wants from you, and in what directions. Perhaps it needs more compression, clarity, and precision from you in order to discover lost connections and relationships within itself. Perhaps it needs less compression from you in order to have the room to make its own way toward building relationships and connections within itself. Listen for what the structure is asking of you and provide it. Realize that many times all this territory needs is a clear hold into itself, along with your unwavering patience, in order to find its own way.

C) You can follow, or hold a state of inquiry for, whatever the structure brings to your attention. This is not about anatomy pieces; it is not about working with anatomy. It is about structure. It is about the whole and relationships within the whole.

D) You will also stay alert and sense for when the client's structure is done with this work for now.

REMEMBER TWO THINGS:

1) What will always keep you safe doing this work at any time in a person's process, even if it is the very first session, is to have a global hold on the front/back and back/front balance and the front/back and back/front relationship. I believe this safety feature exists because front/back balance is so fundamental to structure, preceding other dimensions of balance. As a result, it doesn't matter if the body calls you to focus superficially or into the deep center or anywhere in between. You can multitask and go anywhere with your attention so long as your first priority is sustained as front/back balance for the upper pole. As I said earlier, sometimes a global hold on the upper pole can include connections to the lower pole.

2) This is not session-seven work. Don't expect to do or accomplish the goals of session seven specifically. This work is about global relationship, global availability, subtle motions, connections, structural transmission, and structural integrity. In actuality, you may be surprised to find for one client or another that this work is more valuable than the details of session-seven work.

Over the years of sharing this approach with other practitioners, Rolfers named this approach Deborah's Mouth Work. By whatever name, a highly experienced structural integration practitioner said this work gave her connections she never had before and now realizes she needed. In addition, a Rolfer called one day just to say, "Your mouth work rocks."

Author's note: My sincere thanks to Michael Vilain for taking the photos and to Shonnie Carson for being our photographic model.