

Rolfing® SI for All Stages of Pregnancy

By Christi Mueller Caspe, Certified Rolfer™

Rolfing SI Before, During, and After Pregnancy

Rolfing Structural Integration (SI) is an invaluable resource for pregnant and postpartum women. Through Rolfing SI we can help women be more comfortable and in control of their bodies throughout their pregnancy journey. We can empower them by educating them with the tools and information they need to understand their bodies well enough to be able to make better-informed decisions about their healthcare and delivery process. Our manual skills, knowledge of anatomy, biomechanical information, and movement work can be utilized at any time during pregnancy from the planning stages to postpartum.

Rolfers can use our unique perspective and holistic approach to fill in the gaps left by standard healthcare. A typical prenatal checkup for a healthy pregnancy would consist of blood work, weight and blood-pressure checks, recommendations for vitamins and flu shots, and 'rules' about not drinking alcohol or eating certain foods. These measures, while vitally important, do not consider the body as Rolfers do from a holistic or structural point of view. These components leave out how pregnancy feels in a woman's body, how the body physically supports that pregnancy, and how many times nature can do an amazing job of carrying and delivering a healthy baby when biology takes its course and healthcare providers only use dramatic interventions when they are medically necessary.

Additionally, although it is beyond the scope of this article, the healthcare system in the United States seems to have dissociated the biological, emotional, and structural components of a person and tends to look at them as separate parts. Elements of basic knowledge that could assist women in the healthcare decisions they make for themselves and their babies may be lacking. And culturally and socially, women often are made to feel ashamed for discussing their reproductive processes or are told that their bodies will experience irreparable negative changes post-pregnancy.

How We Can Help

Regardless of our specific skill sets, we can probably all agree that we have two main objectives when working with our clients: to educate people so they gain a deeper and more informed connection and understanding of their bodies, and to manually assist their body's structure, nervous system, and energetic body. These objectives can be so incredibly valuable when applied to women who are considering becoming pregnant, are already pregnant, or have already had their child – whether recently or decades earlier.

As Rolfers, our goal should be to facilitate a healthier pregnancy, labor, delivery, and postpartum period. At each stage we can prepare the woman's body, to carry and deliver the baby, and we can provide information for clearer knowledge and better strategies beyond just coping. We can consider the health of the woman from a whole-body perspective, possibly preventing or easing conditions that are entirely normal and should not cause shame, like pelvic-floor weakness or prolapse, problems with sexual intercourse, and frequent urination or incontinence. And finally, we should ensure that our clients receive the best care possible and consult and collaborate with the client's healthcare providers.

Pregnancy Planning

Rolfers can help a woman with pregnancy planning by teaching her the basic anatomy of her pelvis and reproductive organs. Guide her through sensory exercises so that she can begin to feel where these areas are and establish clear relationships with them. If she is more sensitized to the abdomen and pelvic region, she may be able to track her fertility and ovulation cycles more accurately.

Teach her to differentiate her levator ani and muscles of the urethra from the pelvic-floor muscles. This serves as great preparation for pushing the baby out, and helps with strength and stability for carrying the baby during pregnancy. Note that Kegel exercises are the standard recommendation, but often people are not able to accurately isolate the correct muscles without guidance.

Assess the position of the uterus and ovaries. For clients experiencing irregular menstruation or infertility, anecdotal evidence suggests that Roling SI could be of use as a first and less-invasive step before other interventions.

First Trimester

Dr. Rolf always said to start with the breath. Since we want to be extra cautious with women in early pregnancy (especially before detection is possible) and abdominal work is not advised in the first trimester, this is a good time to work with the breath at length in preparation for the rest of the pregnancy and to revisit later to practice for labor. Helping your pregnant client to breathe more freely and deliberately through gentle rib work can also assist in the management of discomfiting sensations like pain and nausea. If you decide to only work hands-off at this stage, it can be beneficial to give visualization exercises to access and feel the breath in different areas of the rib cage.

The hormone relaxin, which helps soften the ligaments and cervix, is at its highest levels during the first trimester (and during labor), so be mindful of working the pelvis or any joints and ligaments as overwork here may reduce pelvic or body stability.

Help the client to better connect with her body; learn where her sit bones (ischial tuberosities) are, where her pubic bone and pubic symphysis are, and what a healthy spine curvature looks and feels like with breath and movement.

Second Trimester

Teach your client about the ligaments around the pelvis and uterus – like the sacrotuberous, sacrospinous, and round ligaments – because as they slowly stretch, there may be discomfort or instability. Work with these before the pregnancy; during the pregnancy, work directly or indirectly, but only if appropriate. Descending through a better-aligned pelvis would certainly make things easier on the baby and mom during labor.

If there is instability or discomfort in the pelvis, teaching the client at-home care will become increasingly important as the pregnancy progresses. Use a wedge or a bolster with blocks under one end to create an angle so she's reclined (a pregnant woman should not be on her back for long periods of time in later pregnancy since the weight of the extra fluid and fetus can affect the blood flow between the lower

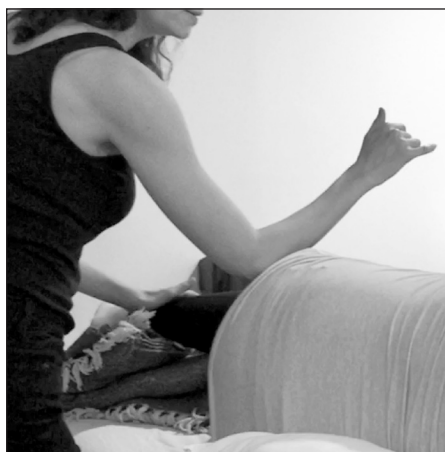


Figure 1: Sidelying work around the pelvis.

and upper body). Have her lie semi-seated with her spine on the bolster and pelvis on the floor. Let her pelvis rest as evenly as possible on the floor and help her establish a balance between the two sides by bringing awareness to her sit bones, iliac crests, and pubic symphysis. She can keep the legs either bent with feet flat in a generous parallel or with knees touching, or legs extended on the floor. Additional blankets or pillows for support for her head or pelvis may be needed.

Teach your client supported sleeping positions in sidelying with healthy spinal



Figure 2: Supine work can be done with body support cushions designed for pregnancy.

curves since trying to find a comfortable position to sleep during pregnancy can be a challenge. In this position, bolsters or pillows can be placed between the knees to keep the top leg supported to prevent sciatic irritation. Also, to support her growing belly, she can place a pillow under the side of her belly and torso.

To reduce stress on the fetus and mom, you do not have to do direct work on the abdomen to affect the baby's position in the mom's belly. If the baby's position is breech, or has been in one area of the abdomen for a long period of time, or is positioned on the mom's bladder, teaching your client how to do gentle, supported inversions with her legs up on a couch or stairs, letting her belly hang, could encourage the baby to change its position.

Third Trimester

Remind the expectant mom about healthy spinal curves and help her find support for the added weight her body is now carrying. As the baby grows, many women will let their bellies hang from the weight and become hyper-lordotic, increasing the likelihood of low-back pain and shoulder and neck discomfort. Also, a belly that is not supported or is stretched and weakened by the carrying of the baby could result in diastasis recti, the tearing of the linea alba in the rectus abdominus.

Work on the client's legs and feet to maintain function and support and help her keep healthy walking habits to avoid sinking into a waddle. She may begin to feel her pelvis widening more dramatically now, or feel that the baby has dropped deeper into her pelvis, so again help the client's pelvis feel stable and connected by contacting the sit bones on a chair and finding evenness in the two sides. Our focus in this area may also help mom determine when it is really time. And do not forget back work. Giving mom back work will be critical to her overall comfort in the home stretch.

Labor Prep and Delivery

Teach your client sensory exercises to prepare for the pain and mental marathon of labor. A clear connection from the awareness of the woman to her body can assist what is naturally occurring. As a result of your guidance, mom may be able to explain more accurately what is happening during the various stages of labor, which will help her birth team assist her more appropriately.



Figure 3: Seated back work with a pregnant client.

Have the client practice activating the different pelvic floor muscles so that she's familiar with them and ready to go once labor begins. During the pushing stages, if mom cannot access her pelvic floor properly she runs the risk of putting undue stress on the structures of the pelvis, possibly causing prolapse. Be sure she knows where and where not to push from.

Get the woman's birthing partner involved so that s/he can provide mom with help when the Rolfer is not there. Teach some simple hands-on assists to relieve and soothe – like basic shoulder work or ways to hold mom's pelvis so that she feels supported when laboring.

Postpartum

After labor mom will be tired and her body will be sore, so just holding space for her might be the most appropriate work in this period. Allowing her to be in her body and to process and acknowledge all that happened could be the most helpful and restorative for her, especially if she had a tough labor or delivery.

Once she has had some recovery time and clearance from her obstetrician, appropriate visceral work (if you have training in that field) could speed recovery. She may be suffering from hemorrhoids, frequent urination and incontinence, or a weakened or distended pelvic floor.

Help mom learn how to hold her baby in supported ways. Whether they are breast- or bottle-feeding, rocking the baby to sleep, or just giving cuddles, parents spend countless hours holding their babies and need to learn to do so without stress on their backs and shoulder girdles. Giving easy cues like remembering to find their

backspace can really make a difference for comfort and fatigue.

Teach mom to create healthy habits for her baby early on. For example, changing a baby's head or pelvic position in the seat or bassinet can prevent conditions such as torticollis. Learning supported movement and postures from the beginning will help the infant for the rest of his life.

Conclusion

Use the skill sets you have as a Rolfer to help your client through this life-changing journey, but remember that Rolting SI is never a substitute for medical treatment. Women should be concurrently seeing their gynecologists, obstetricians, fertility experts, and medical providers as appropriate. Do not do anything with your client that is illegal in your state or that you do not have the proper training or licensing for.

It is critical that practitioners inform women about Rolting SI's role in a whole-body-approach to pregnancy because we can serve as a unique resource for them not only with their pregnancy but also for other women's health-related issues. It is also imperative that we inform the birthing community – including doulas, midwives, and pelvic-floor specialists – that our tools are a vital piece of the pregnancy-care puzzle and that our contribution will only facilitate and enhance the awareness and skills that nature has already given women.

Christi Mueller Caspe is a Certified Rolfer practicing in New York City. Since the birth of her son, Ati Bodhi, in January 2017, she has become inspired to help women have safer, more embodied pregnancies and deliveries with healthier and more supported postpartum periods. Her website is www.iNeedRolting.com.