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## **Ten Years Ida's Way, Forty Years Marvin's Way Chronicle of an Adventure in Holism**

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Dr. Marvin Solit was one of my two connections to Dr. Ida Rolf. I met Ida in New York in 1964, at the International Conference for the Study of Communications, just two years before I met Marvin. My connection to Marvin, as well as to her, was General Semantics, which is about communication, not linguistics. He had been advised to study it by Ida and I was introduced to it in Montreal, as I searched for solutions to my own life issues. Finding General Semantics<sup>1</sup> (GS) fundamentally important to other studies, a colleague and I had offered to teach a course at McGill University. The University faculty at the time considered it a pseudo-science. In actuality, it is a powerful tool for developing critical thinking and for understanding how we react to symbols and abstractions. Ironically, the reaction of McGill's selection committee changed from derision to acceptance after we changed the name (not the content) to "The Philosophy and Methodology of Science." We delicately refrained from pointing out that this was a perfect example of an institutional semantic reaction! My colleague taught the course. This experience, though, was partly responsible for my going to the ICSC conference.

I never saw Ida again, nor even thought of her until I met Marvin. Marvin was shifting his orientation for at least the third time. Having begun his professional career as an osteopath, he met Ida while still a student. He simultaneously studied with her and became her protégé (also her assistant and protector, according to her son, Dick Demmerle at the International Congress on Fascia Research, '07). By the time I met Marvin, he had changed his osteopathic practice to incorporate Rolfing®, and now, convinced that "inner rolfing" was possible, without intervention, changed it again to "Non-Directed Body Movement." He had observed that the simple act of paying attention led to inner-directed, or non-directed movement. Like Rolfing, it awakened unresolved injuries, traumas, or states, unwinding them in reverse order.

I became one of Marvin's earliest students during his transition. In addition to my long time interest in natural health and healing, since studying and teaching GS in Montreal, Boston and Cambridge, I also wanted to explore its potential applications to this pioneering endeavor. Together we carried his medical equipment to give away to other doctors. He took no money for it - done with equipment.

### **"Standing Around " and Transmutation**

In the late Sixties and early Seventies, we began our weekly "stand arounds." An early participant, Fran, went through a dramatic clearing of eczema that had deeply scarred her face. A visitor from the Netherlands, sitting on the couch with legs primly together, watched in horror as Marvin crawled towards her, his head approaching her legs. It turned out that she had been raped when she was 4 years old. Such events were frequent, but far more typical were the non-dramatic, quiet unfoldings. For instance, I must have spent hundreds of hours crying – no AHA! Nothing cerebral, it was all sub-verbal.

The Work, as we call it, involves paying attention to whatever arises from within. As we stand, sit or lie, sooner or later something comes up. It may be an awareness of discomfort, or something we label "pain" somewhere in the body. It may be something we call "emotional," such as anxiety, fear or rage. It may be a "resistance," such as impatience or irritation with the process, "Let's get out of here, nothing's happening." It may be a pervasive state, which we label "depression," "lethargy" or "emptiness." It could be an old "phobia," "an allergy," or a chronic condition such as "eczema." (Note: quotes indicate that labels are abstractions from broader issues). By noticing what claims our attention, but without the intention of changing anything and without goals of any kind, we allow material to surface which, as Structural Integrators know, is stored not only in memory; it permeates the tissues. Interrupted traumas, because they never reach the point of completion, are braced for repair, but once aborted, they "freeze." Unlike injuries that most people do allow to repair, such as bruises and cuts, interrupted traumas are harder for the repair mechanism to heal, so they clog the tissues with gristle, limiting flexibility and movement. Not only is the "neck bone connected to the shoulder bone," but the bones and tissues are all connected to everything else, including thought, emotion, spirit, history, environment – even symbolic environment.

The impact on health and well-being of ideas and beliefs, which are couched in language and other symbols, became clearer as the work progressed. "John" was furious at "Mary," for instance. As John felt his anger emerge, it became apparent that Mary was not merely the stimulus, but more likely the trigger for his anger. Mary might have had a different political opinion. Though there appeared to be ample reason to be angry at her, continuing to pay attention to his feelings eventually led him to related experiences that shed light on the depth of his anger.

Movies illustrate such evocativeness. Celluloid characters interact; you react. You experience thoughts, feelings, bodily sensations, usually altogether. You cry, you laugh, you're turned on – you have a holistic reaction, not to a real event in your life, but to a representation, or symbol, of an event. When I was sixteen, I sobbed hysterically at a movie, *The Oxbow Incident*, in which an innocent man was being lynched. To this day I have no idea what it awakened, since I wasn't paying much attention to my feelings at the time, but it might have been transformative had I done so.

Because events happen to us within a context that is unique, we have found it valuable to allow them to emerge without techniques of any kind. The reason is that techniques are generalizations, which could not possibly be specific to **this** person, or **that** event. Even meditative techniques, however non-intrusive, which seek to quiet the mind or loosen the body, still do not provide a context for historical unwinding.

For awhile, patients continued to visit Dr. Solit, the osteopath, or Dr. Solit, the Rolfer. As he changed his orientation, however, what they had come to expect was no longer offered. Marvin had come to consider even benign intervention a form of control, which interfered with the unique unwinding experience. They were invited to stand and pay attention to their feelings. Those who were intrigued by this unorthodox approach attended workshops – no longer with Dr. Solit – now simply with Marvin. Roles, too, were discarded, along with the equipment. Together we paid attention to feelings. From time to time, he would remind us to ask ourselves "What am I aware of feeling?" He would repeat the question, sometimes maddeningly, to bring attention to sensation. As sensitivity to one's inner process increased, so also did sensitivity to one another, often leading to a kind of mutual "rolfing," with uncanny accuracy. In reuniting mind, spirit and body with individual and mutual history, we were enlarging our experience of holism.

### **Money, Roles and Holism**

It was not, nor is it yet, easy for people to understand the role of money in a situation where roles are de-constructed. After all, if Marvin's not in the role of doctor or therapist, if he's just standing around like the rest of us, what are we paying him for? For those who would like to shift their practice towards inner-directed work, the financial aspect will be an ongoing challenge, as it was for us. Those who could, provided financial support; those who could not provided support that was unique to them. Somehow, through many struggles over the years, the Center and Marvin survived. It was, in Maslow's terms, a Self-Actualizing process for everyone involved.<sup>5</sup>

As we became more sensitive to our own processes, we felt more connected to one another's. In reuniting mind, spirit and body, individual and mutual history, we were enlarging our experience of holism. As tissues became less dense, light could more easily penetrate. This, to Marvin, was the natural order of "enlightenment" - not abstract or metaphysical concepts first, but direct body experience first. We may indeed be spirits having a physical experience, but bypassing the physical route seems to relegate spirit to the realm of abstraction. You can separate spirit, mind and body in language, but if you separate them in fact, you have a corpse.

### **Control Takes Many Forms**

We had a lot to undo. The notion of allowing guidance to emerge from within runs counter to most experiences. Guidance usually comes from adults. Adults represent a variety of belief systems. "Don't touch," "stop crying," "fight back," "you're a bad girl"; "compete and win," "Pray THIS way or you will be eternally damned." Wading through the programs we've been exposed to is a big part of "the work."

Much as management controls labor, parent controls child, dictators control subjects, and religions control thought and behavior, so does mind control body. Yet

body, slave and child all seek expression and empowerment. The history of the body is typically a microcosm of the history of oppression.

We are not asked; we are told what to do. "Arthritis? Take steroids." "Hypertension? Control salt and exercise." "Urinary tract infection? Take antibiotics." "Depressed? Take an anti-depressant." "Broken arm? Put ice on the swelling." "Fever? Take it down." Really? Might not the body know what it's doing when it swells or raises its temperature? The mind chooses experts to trust, and then transmits their expertise to the body. Control becomes institutionalized.

The brain is the most highly valued organ of the body. The collective mind, with its ability to generate high order abstractions, encompasses the wisdom – and errors - of the planet. The body as a source of valid information is ignored, except as it provides information for the mind to research, to categorize and to make decisions about. Those who are spiritually oriented often see the body as merely the vehicle of the spirit; something to take care of, but not listen to, or something to control, but not respect.

In the unwinding work, control often shows up as resistance, which offers clues to what has to be unwound. Rather than try to overcome such resistances (a form of control itself), we pay attention to them. Eventually, if we stay with that moment of resistance, we may be able to go deeper. We don't escalate control with internal messages saying "it's wrong to do nothing," or "I shouldn't feel depressed; look at all my blessings," or "this impulse to move is not inner-directed." We observe these thought/feelings as we do anything else that comes up.

People who seek expert intervention often feel they have no choice; fear and pain drive them towards relief from symptoms and cure of disease. In the work, however, we have come to regard pain as important to the repair process. By not labeling it "pain" (which is a category rather than a specific feeling) we can be led to connections which, if the "pain" were relieved or suppressed by medication, would not appear as readily. Learning to listen to the body is a process that has to happen over time, during which one learns to recognize escalatory and suppressive impulses through direct experience, and hopefully to distinguish the "pain" of unwinding from that of damage.

Emergencies are not the time to suddenly switch trust. In fact, many a former patient would return to Marvin to "fix" something, or to deliver a baby at home. He would not, however, since he did not feel confident in their ability to deal with unexpected situations that might arise.

### **Trauma and Control – One Cat's Experience**

Here's an example of control and an incomplete trauma. Shortly after I began working with Marvin, our cat, Booffie, fell out of a tree. Distraught, my husband and son, both named Howard, rushed her to the vet. They came back with the news that she had a dislocated hip, which would be operated on at noon the next day. I acquiesced at first, not feeling clear about what to do. As the next morning wore on, however, I became more and more agitated. It just didn't feel right. I expressed my concern, and was met with stony silence. "What will you do? Let her suffer? How can you risk her health for some kooky idea?" "I just can't do this right now," I said. "Here's what I would like. Let's pick her up, take her to Marvin's, and see what he says. If he feels she needs surgery, we'll go do it right away, but I don't think a couple of hours will matter." They sullenly agreed. I called the vet who was irate. "You must see the X-rays; her hip is above the socket;

there's no way for it to heal. She must have surgery to put it back in place. Also you will still have to pay for the anti-contagion medication, the anti-swelling medication, the X-rays, and her overnight stay. Not easy on a graduate student's stipend, but "Okay; we will. I'm just a bit hysterical right now. I'll probably bring her back tomorrow."

We drove the 20 minutes from our home in Lexington to Marvin's office in Brookline. Booffie was shivering in the back seat. We stopped occasionally for her to rest beside the road.

When we arrived, we took her to Marvin's treatment table (which had not yet been given away), and we all sat there, the Howards glowering, me cowering, and Marvin quietly observing Booffie. He pointed out her breathing, which was diaphragmatic. As we watched, it changed to abdominal. Her shivering he regarded as important; it was her body reestablishing balance. He explained that she would have to do several things as part of the healing process. She would slowly calm down as she realized we were not doing anything to her. She would also have to recover from the anti-contagion shot, the anti-swelling shot, the fear of the fall, and also her reaction to the environment at the Vet's. Her defenses had tightened and weakened her, making it hard to restore breathing and circulation, and to repair the damage.

Marvin felt that if we provided a quiet environment, without pressure, without anxiety, simply supporting her as she healed, she would gradually strengthen her muscles, tendons, sinews and tissues, and improve blood circulation. He thought it might take about six weeks for her to be strong enough to pull the hip back into its socket, and reverse the accident. On the other hand, there were many variables and no certainty. "It's really your decision."

I waited. It sounded good to me, but my glowering Howards were the ones to decide. Still anxious, but partly convinced, they agreed to try it.

For several weeks she was a "three-pawed" cat, gingerly avoiding putting weight on the fourth paw. Six weeks later, she was able to pull the hip back into its socket. Afterwards she walked with a very slight change in her gait; it was not perfect, but it was 95 percent perfect. And she was a very strong and confident cat. No joy from either the vet or my men, but that type of recovery, which continued to happen over the years for many of us seldom aroused curiosity. "Anecdotal," "It's immoral to take such a risk." "Is this Christian Science?" "A certain percentage of cures happen anyway without intervention."

Booffie went from being controlled to coming into her own power – an inverse relationship. The more control, the less power. Not only for the one controlled; the controller has less power as well, since control depends on suppression, whereas power comes from organic inner growth.

### **By Contrast....Trusting the Body – Giving Birth**

When I was giving birth at home 37 years ago, as most of us did who worked with Marvin, I was in labor all night, surrounded by my husband, friends from "the group," Marvin and his wife Harriet. Two of my other sons hid in their rooms, covering their ears. At a certain point, I began pushing. Marvin, quietly sitting on the floor, suddenly asked me, "Are you sure you're in second stage labor? Knowing you and how impatient you are, I think you may be trying to get it over with instead of paying attention to the moment." That's about all he said or did all night. He didn't even cut the cord, but did

suggest that we wait till all the blood ran out before my husband cut it. I paid attention and stopped pushing until the push came from the baby.

As with Booffie, the remarks I heard were mostly incredulous and disapproving: "But you could have needed a Caesarian," or "In your room? Not a very sanitary environment," and "You were just lucky that nothing went wrong; what would you have done if you had needed emergency care?" One can discern the fear motivating these questions - precisely the kind of verbal environment that would have made me tense and inflexible, had I been exposed to it.

### **IASI Breakout Session**

I recently hosted a breakout session at the IASI Symposium '07. I had a wonderful group who got right into non-directed attention. I spoke for a short while, introducing the history of "the work," and then I asked everyone (~12 people) to stand, pay attention to what they were feeling, not label or judge their feelings, (or if they did, notice that they were labeling or judging) and not move until a motion originated unmistakably from within. I talked briefly about the value of paying attention to their own feelings while treating their clients, and tackled the conflict they might feel as professionals who were charging fees. Having pointed out that they could bring much more of themselves to their work if they included their own state of being, and also model inner attention, I added that they might expect less burnout, more energy, and be able to work longer and more effectively, to say nothing of more authentically.

We stood around for about 25 minutes, during which time I walked around to some of the participants, feeling my own sense of connection to them. "What are you aware of feeling?" I stood quietly beside one, not sensing an impulse to do anything but be there. I found my hand drawn to someone else's upper back, gently supporting it. I leaned my back against another's back, as I experienced her fear while she was going into a backbend. I felt I could not invade another's space; I was clearly shut out, so I just sat beside him for a few minutes. Another, who had come in late, dissolved into tears, saying she felt she was at the "breaking point," and that she felt pressure in her face. I asked her to feel that more, and maybe tell us what it felt like. She said she had a test to take later, and repeated that she felt like she was breaking.

A late participant, who came in after my opening talk, just saw a bunch of people standing around, sitting, lying, etc. He looked at me quizzically, so I whispered to him to just stand there, and not move till he was moved to. He did.

When we reassembled to share what had transpired, I was blown away. I have never seen or heard so much emerge in so short a time. I don't know if it's because they're Structural Integrators, but they were stunned by what came up. The woman who had been nodding while I touched her back said she had mild scoliosis, and felt warmed and embraced. The "backbend person" was sobbing. She had been working professionally as a Rolfer for several years, and nothing like this had ever happened to her. She had felt her body twisting, her head "bashed," her neck unwinding, and by the time she was done, her neck moved freely, the unwelcome torque had disappeared, and she felt clearheaded and open for the first time in a long while.

The participant who later said that his leg and hip had been bothering him, also said that he felt distant and uninvolved. I acknowledged his lack of involvement, saying

that I had felt no access to his space, and he then related childhood incidents that seemed connected to his current experience.

The woman who had dissolved into tears would have liked me to spend time with her, and I learned later that others were watching, hoping I would, so they could see what would ensue. I didn't feel drawn to do so, but another participant spoke up, asking "What if you don't label it a "breaking point," but rather an "opening point." We had talked a little about General Semantics, and how labels and abstractions can freeze our perceptions. The power of the group in action! The entire event was momentous for me, and full of learning for all of us.

### **Inner Exploration Leads to Outer Exploration**

Marvin had one of those rare minds that discerns the connections between everything, and seeks until it finds the root beginnings that explain everything. For those who share that kind of quest, you know how daunting it is. Marvin was a tireless explorer and one insight would sooner or later open doors to further insights, most of them initiated by his "standing around" experiences.

From exploration of body structure, Marvin moved naturally to the investigation of structure in general. From General Semantics<sup>1</sup> he and I had both come to understand that there were no static "things" - no homeostasis, only hetero-dynamics. Motion was everywhere. There were no smallest particles, however small the dissection. Ultimately there were only related events. GS had led us to a kind of quantum perspective. He became increasingly confident that there was precision, not only in unwinding of tissues, but also in unwinding of relationships: between individuals, among groups, countries - even planetary and cosmic events. Relationships were his business, and became our business.

Marvin's interest in structure attracted him to geometry, which was its ideal language. He began to make models. It became apparent to him that the "straight line" was an abstraction, merely a diagonal of more complex relationships. "You can't get there directly, you have to tack" he observed, "there's no such thing as a straight line. There are waves and orbits. The models represent motion arrested in time." He created tensegrity structures illustrating the spinal column, the cell, DNA. The models were not simply space envelopes; they had centers from which all relationships emanated. His quest would be satisfied by nothing less than a "general theory of relationships," and this quest finally resulted in a simple, elegant, and beautiful model of the shift from waves to matter.

His quest eventually brought him into contact with William Day, author of *Genesis on Planet Earth*<sup>2</sup>, and *A New Physics*<sup>3</sup>. These two pioneers found common (and uncommon) ground as they unwound the assumptions behind Newtonian and Einsteinian physics. Bill's physics, based on motion, informs and supports the experiences of Structural Integrators in a way that earlier theories of motion do not: "Bodies center themselves in their space environments by their gravitational fields. Instead of moving because they are forced, bodies in space move spontaneously to remain centered in a space environment made non-uniform by other fields around large masses. It is a self-organizing universe." <sup>3</sup> To paraphrase Marvin: Humans center themselves in an environment made non-uniform by other fields - we orbit around larger masses, or they orbit around us.

## **Marvin's Final Exploration**

Marvin's own health gave out. Using himself as a guinea pig, he wanted to see how far he could go in repairing his own damage. Over the years, old injuries and traumas had been worked through and reversed, such as colitis, a broken arm, prostate enlargement, jaw and back injuries from an early diving accident and later, a car accident, and more. Perhaps because he had been encouraged by the many repairs that had happened over the years, he placed great confidence in his body's ability to repair any damage. In his determination to explore the limits of his ability to repair, however, he took risks with full understanding that he might die. He ignored abdominal and chest symptoms, clues like breath odor, sallow complexion and prolonged exhaustion.

Eventually, we urged him to go to the emergency room where he was diagnosed with kidney failure. In emergencies, allopathic medicine is at its best. Dialysis followed which, after a few years, he stopped altogether. He stayed off it for an amazing two years. We who needed him finally persuaded him to resume dialysis; he also felt that he had more to discover and do. He continued enduring his twice weekly visits to the hospital for a couple of years longer, until progressive exhaustion and the discomfort of his pierced veins wore him down. He knew he would not be able to repair all the damage he had sustained in one lifetime.

Ten hours before he died, Marvin told me he had heard from Vladimir Ginzburg, another author whose perspectives he admired. One of his books: *Prime Elements of Ordinary Matter, Dark Matter and Dark Energy*,<sup>4</sup> had led to some very animated conversations, especially about Vladimir's study of toroids. Marvin had discussed his conviction that the golden ratio was THE key to understanding nature, growth and organic structures. Vladimir was finally persuaded to consider it in relation to toroids and vortices and emailed to say: "I now understand its crucial importance." Marvin smiled contentedly as he told me with a twinkle. "I can go now, I've been validated."

Those of us who were Marvin's friends, students and fellow "unwinders" have inherited a formidable legacy. We feel we bear the responsibility of carrying on the awareness work, the structural findings, the educational messages, and the worldwide relationships he developed along the way.

We have come to realize that the evolution of the relationships among us is central, not only to our own health and wellbeing, but to the effectiveness with which we carry the work forward. Accordingly, you can usually find one or more of us in the "rug room", as we call it, at 93 Belmont Street, in Cambridge, Massachusetts, doing the quiet work of paying attention to our feelings. If you feel drawn, you are automatically a member of the community. Welcome!

## **Endnotes**

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