

The Promise of Rolfing Children.



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The Promise of Rolfing Babies, Children and Families

AN UPDATED REPORT ON A PILOT PROJECT



Four generations of the same family.

“ The word ‘posture’ in its physical sense has been commonly regarded as a static alignment of body parts, one above the other, rather like stacked suitcases or boxes. Posture, in its broader sense, is the momentary, ever-changing balance of body components in space as they relate to the force of gravity... at any given instance and in any given position. ”

– Dr. Ida P. Rolf

The Promise of Rolfing Babies, Children and Families

An Updated Report on a Pilot Project
By Robert Toporek

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Revised edition copyright 2012

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Published by

www.teamchildren.com

Originally printed in the U.S.A. by Delaware Valley Printers, Bala Cynwyd, PA 19004.

Designed by

Ryan Putnam

RyanPutnamDesign.com

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On these pages, you will see the amazing results children experienced as a result of their Rolfing sessions. Further research and documentation are essential.

It has been an enormous privilege for me to have worked on this project, and to pass these findings on throughout the world so that babies, children and their families everywhere can benefit from this extraordinary body of knowledge. This revised edition is a pictorial and anecdotal account of the first study, the results of which are extremely promising, and an update from my 35-plus years of Rolfing.

One of the goals of this eBook is to reach out to as many Rolfers as possible so that they begin to discover the benefits of Rolfing babies, children and families. Another goal is to encourage them to study with me so that as Dr. Rolf passed the baton to me, I too may pass this incredible body of knowledge onto others.

A final goal is to make Rolfing available to babies and children diagnosed as developmentally challenged so that Rolfing sessions may be given as a first resort, not a last.

And to raise substantial funding to expand our efforts.

Disclaimer: The purpose of Rolfing is to better balance the body around a vertical line in the field of gravity so that gravity begins to support the body rather than to tear it down. This is done through touch and education. Rolfing is not involved in treatment or diagnosis of disease, nor does it substitute for medical treatment when such attention is needed, desired or required. One who performs Rolfing does not treat, prescribe or diagnose an illness, disease or any other physical or mental disorder. Nothing said or done by one who performs Rolf-ing should be misconstrued to be such. Whenever there is any suspicion or indication of physical or mental disorder, it is imperative that a physician be consulted before you begin Rolfing. Any relief from physical or emotional symptoms is coincidental, and is not the basic goal of structural integration.

ROLF LINES
November, 1977

ABOUT THE CHILDRENS' CLASS

by Ida P. Rolf, Ph.D.

In view of the fact the announcement of a "Childrens' Class" is apt to give rise to misunderstandings, let me explain.

The "Class" that I have in mind is really intended by me as an outstanding demonstration of the work that Rolfing can accomplish with children. It is not intended as a teaching or learning experience except, perhaps, incidentally.

I am anxious to take somewhere between 6 and 10 children of all age groups, not particularly disabled or extremely abberated children, but rather run-of-the-mill children, whose structures as you know in general lack the definition and focus that can be given them through Rolfing. I am eager to see a thorough photographic record made of each child, and that this record then be collected into a book of photographs showing the progression of these children under Rolfing. This documentation should delight the friendly atmosphere which would, I trust, be conducive to financial support from donors interested in children.

I do not think that this particular "Class" is the place to include children who have very severe problems, although I certainly think that dealing with such problems, even though longer-termed, could be very rewarding in many senses. I hope this latter attempt can be taken on by several of you interested Rolfers.

At this time, however, I should like to show the place of Rolfing in improving the state of so-called "normal" children, in improving the level of operation both motor and psychological. Photography is one method of documenting the effectiveness of this work. Psychological testing would be another, and should possibly be considered in the near future.

It is thought that many of you would appreciate the opportunity to sit in on this attempt at documentation and to abserve objectively its progress. If this is so, we will indeed welcome you, but please realize that this is a domonstration experience rather than a routine teaching situation.

Creative ideas and comments to all this will be welcome. Such communication may be sent to Dr. Rolf at the following address:

Ida P. Rolf, Ph.D.
Novato 11, Nob Hill Apts.
Blachwood, N.J. 08012

IDA P. ROLF, PH.D.

January 18, 1978

Dear

From time to time I think of the ways in which you have supported me and rolfing and it cheers me. It truly brightens my days to know there are people who recognize what I have been trying to do with rolfing and see it as the revolutionary advancement to the evolution of mankind that it is.

For the past few years I have been wanting to do a special project which would demonstrate the beneficial effects of rolfing on children. With the encouragement and support of one of the local rolfers I have decided to undertake this project in Philadelphia starting in the middle of February.

The purpose of the project is to gather good photographic material of ten to twelve children showing the beneficial changes that rolfing produces in the short period of time of three weeks. This material will then be compiled into a booklet which would demonstrate what we as rolfers can do, thereby assisting us in obtaining research funding.

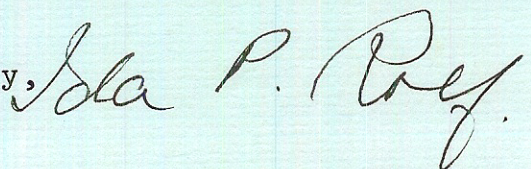
Since there is such short notice on the project, some of the parents cannot afford even the moderate fee we have set for the project. We would like to raise about \$2500 worth of scholarship money to assist these parents. The way in which I would like to have your assistance would be for you to contribute either by sponsoring a child for \$350 or making a contribution of your own choosing.

For me, one of the greater satisfying and joyous areas of my work has been my work with children. I can think of no better way to move us further down the path in having rolfing's acceptance and recognition in the world expand than to present to the world what rolfing has to offer to the younger population. Rolfing releases those traumatic incidents of birth and childhood that prevent the child from achieving complete wholeness -- physically, psychologically, and emotionally. It provides for all children a "good foundation to stand on and grow up from", namely a balanced, supportive physical body. And that is where it all begins.

Along with my sincere appreciation and thanks should you choose to contribute, it is our intention to list you in the booklet with your permission as a contributor to the project.

Thank you again for your support. It has been a continued source of encouragement for me.

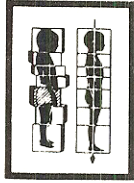
Warmly,



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Rolfing®

Rolf Institute of Structural Integration

Robert Toporek *Certified Member* 2318 Delancey Street, Philadelphia, PA 19103 • 215-735-0460

January 24, 1978

Dear Friend of Rolfing,

I need your help desperately! I knew it was bound to happen sooner or later. I knew one day my mouth would get me into trouble.

For the past two years I have been encouraging Dr. Rolf to do something in Philadelphia--a large demonstration, an advanced class, or a project with children. Well, now I am in trouble; she has finally decided to take me up on it and we need your support.

So, how can you help? First of all, we need 10 to 12 children who would like to get Rolfed and whose parents are willing to have that happen. We would like to invite you, your spouse and your children to a demonstration here at my home on Sunday, February 5th at 2:30 P.M. If you would like, you are invited at 1:30 for cheese and crackers so we all have a chance to meet and talk with each other. Dr. Rolf and I will do a demonstration and will answer any questions you may have about the process. We are also inviting parents and children who have been Rolfed to come and share their Rolfing experience.

Another way you can help is to make a financial contribution. We need to raise funds to cover the costs involved in setting up the project and we would like to be able to offer assistance to those parents, whose children need the Rolfing, but cannot afford to handle the financial aspects.

You may be asking: Why participate? Your participation in this project is an opportunity to contribute to the expansion of Rolfing and have the value of Rolfing made available to more people. Ultimately you are making a contribution to mankind.

In this project we will be demonstrating the value of Rolfing in children and recording the results photographically into a book. Another of our intentions is to have this book assist us in receiving funding for further research.

IDA P. ROLF, PH.D.

January 20, 1978

Dear Friend of Rolfing,

As one of the many people in touch with the value of rolfing and how much it has added to your life, we hope you will consider the special meaning of this communication. Through it, I hope to convey to you a most important project Dr. Ida Rolf is about to embark upon, one that she believes will be invaluable as a means toward the development of children.

For some time, Dr. Rolf has planned to publish a book demonstrating rolfing in children. The book will be in the form of photographs of the first 10 sessions with children ages 2 through 15.

Why a pictorial display of this beneficial technique?

To provide a visual representation of rolfing and the changes that can occur in children as the sessions progress. We're also hopeful that with the assistance of the book, additional funds will be made available to maintain research programs in rolfing.

The urgency surrounding this communication involves Dr. Rolf's decision to begin work on the project by February 13, 1978, in Philadelphia. Your assistance is needed to help raise the necessary funds to assist parents who desire to have their children rolfed but cannot meet the financial responsibility to do so.

Would you sponsor one child at a cost of \$350 or contribute toward that child's expenses? May we count on your help to bring the incredible experience of rolfing to a child--someone who needs that completeness, that wholeness in his or her life?

The rolfing experience has been called a physical and psychological maturing, oftentimes dramatic in appearance and behavior. Knowing as you do the benefits of rolfing and how far this procedure has advanced since its inception nearly four decades ago, may we rely on your participation in the advancement of science and mankind?

Please use the enclosed envelope to send a check for \$350 per child or to donate any amount to help offset the costs of one child's rolfing. With your permission, we will list you in the book as one of the project's contributors.

Thank you for your assistance and support.

With warm regards,

Adrienne Carlée
Adrienne Carlée
Administrative Assistant

For
Ida P. Rolf, Ph.D.

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Introduction

In my original Rolfing practices with adults, I was primarily working on fixing something: poor posture, chronic pain, stress, etc. The goal of these Rolfing sessions was to release old traumas, physical and emotional, stored in adult bodies.



Robert with Dr. Ida P. Rolf, founder of "Rolfing".

In a discussion with Dick Demmerle, (my original teacher, mentor and Dr. Rolf's son) we began to contemplate the possibility of preventing these maladies from the start. We theorized that Rolfing babies and children had the potential to produce tremendous results in the growth and subsequent lives of these individuals.

The first part of this eBook is a reproduction of my original monograph. The second section will cover the body of knowledge that we have developed from the hundreds of babies and families who have been Rolfed by me since 1978.

I first began Rolfing the Demmerle children and soon Rolfed children as part of my practice.

A few years later in December of 1977 I was told that Dr. Rolf wanted to embark on a project in Philadelphia focusing on the effects of Rolfing babies and children. It was my duty to raise money for the project, find the children, and essentially manage the entire program.

Dr. Rolf worked with many children in her lifetime and all of them exhibited some abnormality. She saw curved backs, crooked legs, protruding bellies, and heads tilted forward. Dr. Rolf knew that the structural imbalance in early life was the basis for such adult complaints as chronic backache, neck pain, and other manifestations of physical or emotional stress.

Introduction

In Dr. Rolf's view, stress is caused by imbalance: when there is imbalance, the structural support components of the body operate inefficiently and with unnatural strain. This strain causes more than aches and pains; it also accelerates aging, the wear and tear of the body through time. Imbalance saps physical and emotional energy and reduces one's sense of well-being.

Physical injury, emotional trauma, and/or poor posture cause many people's bodies to become inefficiently organized. Over time, patterns of muscular misuse become deeply ingrained within the connective tissue. This serves

“Dr. Rolf believed that to change structure was to change function,”

to “lock” the body into a structural misalignment that either perpetuates old symptoms, leads to new symptoms—or both.

Dr. Rolf realized that a child's posture is more than an aesthetic concern; it is a visible indication of how the connective tissue is molding itself into its unique pattern of muscular use or misuse.

In her teachings, Dr. Rolf emphasized that all behavior, physical or emotional, is expressed through the musculoskeletal system. Our vital organs function “in the grip” of the musculoskeletal system. Our emotional state is also expressed through it. We are all familiar with the stooped shoulders that signal self-defeat, the bowed head of shame or embarrassment, and the physical tension of anger or fear.

Introduction

Dr. Rolf believed that to change structure was to change function, and she demonstrated this in her work. In other words, to a great extent, our structure determines our behavior.

Proper posture in a healthy organism, Dr. Rolf explained, might be thought of as a “resting state, a capacity and a preparedness to respond appropriately and efficiently to a wide variety of stimuli.”

“Here gravity becomes, in effect, a supportive force rather than a destructive one.”

When a human body is organized symmetrically around a vertical line, it can cope more efficiently with the force that gravity exerts. That is, the vertically integrated body can make use of gravity to enhance balance as it performs its countless routine tasks. Here gravity becomes, in effect, a supportive force rather than a destructive one.

Dr. Rolf knew that Rolfing benefited children. She also understood the necessity of documenting the changes in these children: how they looked, how they felt, and how their lives had been affected-and not just immediately after the standard series of sessions, but after a year or more had passed as well.

The lives of the children involved are just beginning to unfold. In some cases, the course of psychological and physical development is already obvious. Information supplied by their parents supplements and confirms our own first-hand observations.



The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Introduction

We trust this account will serve to dramatize the value, and promise of Rolfing children, and the need for your support in continuing this work with children.

We will be adding to this monograph. Since the beginning of the project I have personally Rolfed over 300 babies and children and now more than 4,000 men women and children have improved their posture, relieved chronic pain, turned stress into energy, and have lived extraordinary lives.

My son had his first session the day he was born and has had Rolfing sessions throughout his life. A number of other babies have also been Rolfed with in the first few days of life. These Rolfing sessions have made a profound difference in the neuromuscular development of these babies. Some of the children I have Rolfed you will meet in upcoming editions as they talk about how they were Rolfed as teens, grew up, had babies of their own and have had their babies and children Rolfed.



Robert began rolfing his son Bryan at an early age.



Robert rolfing Roxi Hughes, 3 months old.

Why Rolf Children?

One purpose of Rolfing is to better balance an individual's body around a vertical line in the field of gravity so that gravity can support the body rather than tear it down. The result of this better balance is an enhancement not only of physical well-being, but also of emotional and spiritual well-being.

Prior to her passing away Dr Rolf saw a bigger vision for Rolfing babies and children. She noticed the balance in our bodies and our bodies' relationship with gravity was reflected in behavior states since self expression was intimately involved in muscular tone. Balance was a resting state; a capacity and preparedness for responses of all kinds depending on the nature of the stimulus. Imbalance then was the movement or impulse to move when it returned to balance. However, she noticed many responses never do complete themselves there for leaving our bodies and lives in what is called habits and patterns.



Why Rolf Children?

Dr Rolf saw Rolfing as an opportunity to consciously evolve our evolution. She wrote the following just before she passed away.

Rolfing: The Vertical—Experimental Side to Human Potential

“ Like so many teachers, some of them very close to home, I complain that people do not seem to understand my basic goals, the fundamental purpose for which Rolfing has been developed. In an effort to lessen this type of frustration, I offer the following summary of Rolfing developments, purposes, and ideas.

First, let me reiterate what I have often said before: I as an individual am not primarily interested in the relief of symptoms, either physical or mental. To hear Rolfees tell of their “wonderful,” “unbelievable” symptom alleviation, it is hard not to accept this assessment as a goal. However, I am interested in human potential, and human potential per se neither includes or excludes the palliation of symptoms.

As of today, Rolfing is accepted as being one of the most basic; on of the most reliable means of developing whatever potential is latent in any given human, psychological as well as physical. By what route did Rolfing reach this particular eminence? We assume that human beings are, as a species, evolving toward verticality. What are the intellectual considerations which can speed us on our way toward understanding the value of this verticality?

There can be no argument that the bony structure is less subject to capricious change than soft tissue. Rolfers have heard me say over and over that the bones, per se, however, are not the basic determinants of body structure. Bones are where they are and as they are to separate and stabilize the softer tissues which, in point of fact, play the more significant role in physical organization. Nevertheless, bones are fundamental, relatively stable elements of structure. As we observe the blueprint of the bones, it becomes increasingly apparent that the softer tissues need to be in certain patterned relations to each other for the bones to perform their role most effectively as separating and relating elements.

Now, the \$64,000 question which I asked many years ago, and to which I am still seeking the answer, is this: What kind of organism will develop if these body parts are appropriately related? What happens when the soft tissue and related bone structure actually function in the positions in space which their architectural design suggests as most appropriate and which contributes most effectively to establishing the vertical? The vertical in man’s structure is the outcome of his proprioceptive, sensory appreciation of the gravity pull of the earth.

The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Why Rolf Children?

Whether consciously or unconsciously, he feels this pull and responds to it. This is the subtle concept: the intellectual formulation arises out of the sensory awareness. Man's appreciation of the vertical evolves from his sense of the gravity pull of the earth.

We as a generation have begun to take this touchstone into all parts of the world of ideas, evaluating the validity of a concept in sensory terms, in the light of information from our senses as well from our intellects.

Up to this point in time, humans have always developed and still live within the gravity pull of the earth. They must make their peace with this energy field, whatever it really is. To the extent that they fail to make peace and mistakenly carry on a war, gravity wins every time. The energy of this field can enhance or dissipate the energy of the individual man. You cannot change the energy field, but you can change the man.

The question remains; to what extent could Rolfers create a small population able to live within the gravity field without an ongoing, everlasting war, without the constant expenditure of precious human energy merely to carry to life within the gravity field? If we could create such a population, what would be its characteristics? I am not interest solely in physical structure, although that is really of basic importance especially in terms of physiological well-being. What will be the psychological characteristics, the behavior both of the individual and of a group

composed of such individuals? How would these more vertical individuals compare with the random, less conscious humans who tread the surface of the earth today?

Is it perhaps too far-fetched to wonder whether one of the tap-roots of human aggression and its underlying fear may be the continuous sense of insecurity which random humans unconsciously feel with reference to their environment-the gravity field? This emotional response is called forth very early in life, probably with the first attempt at verticality (standing), and certainly with the first walking steps. Many psychological and behavioral aberrations arise from causes less basic than this.

Be that as it may, I see no means of gaining an answer to this suggestive and really important question in the abstract. The answer will come when we can create such a population and observe it through a long-term period. At this pint, we are justified only in looking with satisfaction at the reports coming in from people who have experienced some approach to the integrating vertical. The appropriate integration of the bodies of man in the gravity field a is long-term evolutionary project. Not even the first page has been turned yet. It is possible that we are seeing the first conscious attempt at evolution that any species has ever evidenced. ””

– Dr. Ida P. Rolf

Blackwood, New Jersey
March, 1977

The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Why Rolf Children?

Socrates said, “Know thyself.” We must know ourselves in order that we might know the world because the world begins in ourselves. It cannot be overestimated how important it is to children to understand this concept. Their lives are just beginning to unfold. We forget that childhood is charged with concerns and traumas which the adult has survived and can only dimly recall, or perhaps has suppressed completely.

Control, confidence, and understanding of how one’s body truly works- its limits and its strengths, a trust in its essential fluidity and resilience-there are the aspects which give us confidence about the operation of the one organism we are closest to: our individual selves.

Rolfing children addresses these concerns at an early age to give children ease with their own bodies and to allow them to develop the confidence that they carry their own state of grace within them. There is no way to separate the physical child from his mental and spiritual self.



Four generations of bad posture may have been corrected with rolfing from the start.

The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Why Rolf Children?

A child who slumps mentally and emotionally, contrasted with a child whose body is balanced and moves gracefully and confidently all reflects an inner grace and confidence. However, as conscientious parents can be all too painfully aware, not all children carry their bodies so well. Thus, we have come to “read” those timid, tense, or distorted bodies as dramatizing needs which are not otherwise being communicated. Parental concern is to produce a balanced child. Rolfing is an immediately effective means of addressing this objective.



Rolfing involves manipulation of the major muscle groups and the connective tissue, which is called fascia.

This manipulation is designed to bring the body's soft tissue to its anatomically efficient position. The induced changes are eventually made permanent by the more efficient patterns of movement which results. The net effect is a significant decrease in the amount of stress experienced in the body during both normal and strenuous activities.



In order to understand Rolfing, it is important to consider the nature of fascia. The word fascia comes from Latin and means “bands.” Fascia forms a continuous network throughout every part of the body. It is a fibrous connective tissue that surrounds muscles, blood vessels and nerves.

The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Why Rolf Children?

Deep fascia, as the name suggests, is found deep inside the body. It surrounds and attaches itself to the various interior structures of the body: to the membranes that cover the bones, to the membranes that envelope each primary bundle of muscle fibers, and to ligaments, vessels, nerves, bursae, lymph nodes, viscera, joints, and cartilage. In the limbs, it thickens and serves to hold the tendons in place when the muscles contract. In the muscles, it forms walls and separates the major muscle groups. It functions as a system of protection, padding, insulation, separation, and support for various body tissues and organs and the nerves and vessels that run through them.



Fascial tissue responds to physical and emotional trauma by shortening and thickening. Over time, this has the effect of pulling the body out of its balanced vertical alignment. An unbalanced body will compensate to combat the downward pull of gravity, and this drains additional energy. The resulting distress is cumulative; the body becomes more and more out of balance as time passes.



Consider the example of a child who falls on his knee. Though this is not a serious injury, it causes pain for several days. To ease the discomfort, the child favors the leg. Neighboring muscle groups are used to support the changed pattern of weight bearing. The fascia in the distressed areas thickens or sticks together to support the increased load on these muscles.

The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Why Rolf Children?

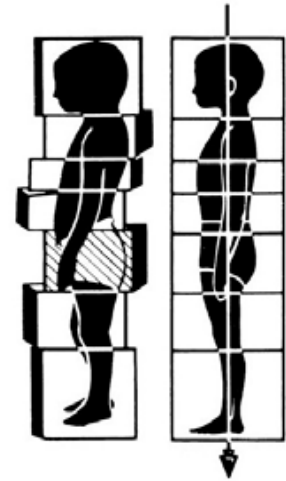
A lifetime of such bumps and knocks causes a body to lose its vertical alignment and natural grace.

Emotional trauma has a comparable effect. A child who is often yelled at and criticized may carry his head tipped downward as an emotional response to the hostility he has experienced.

Over time, the head hanging reaction becomes chronic; the muscles in the back of the neck become enveloped with thickened fascia. The child develops and changes, but the head tends to remain in the set position. Not only does the imbalanced posture become set, but the associated emotional feelings of inadequacy become “locked up” in the musculature as well.

The average person of any age suffers from aches, stiffness, and musculoskeletal imbalance, and the amount of discomfort increases and he or she ages. We maintain, however, that the key factor here is not so much age as the force of gravity. We know that this force which operates to press down on the body can be used to support it as well.

Imagine the body as a stack of segmented blocks: head, shoulders, thorax, pelvis, and legs. When these blocks are aligned correctly, a straight line can be drawn, beginning from the top of the head, which will touch the ear, shoulder, pelvis, leg, and ankle. In this optimal vertical alignment, gravity will work to support the body. This is because the weight of each block is close to a common, central (vertical) axis. Hence, each block “rests” on the one below it. In such a “resting” state, far less energy is needed to support and to move the whole set of blocks.



Why Rolf Children?

In a body that is out of alignment, each of the blocks does not rest on the one below it. For example, for a person who habitually hangs his head, the force of gravity pushes down on the head. If it weren't for the muscles in the back of the neck that initially compensate for this condition, the person would always look as if he is about to fall over.

People expend a great deal of extra energy to deal with such imbalance. The purpose of Rolfing is to correct physical imbalance so that the body blocks are automatically aligned within the field of gravity. When this is accomplished, the person has increased energy available for use in more creative and joyful ways.

“Standing squarely on your own two feet,” “having your feet planted firmly on the ground,” “having your head on straight,” and “feeling supported by gravity” are not just clichés to us. They are the objectives of our professional efforts with our clients.

And, especially when these clients are children, there is often observed in them a thrilling realization that at last, and perhaps for the very first time, they understand what straight means and is, as they begin to assert control over their bodies and their lives.

Case Studies

Jo

Jo's mother reports that before Jo was Rolfed she was the baby of the family, not only chronologically but psychologically as well. After her Rolfing sessions, however, her mother described her as "almost another child." She says that Jo is more grown-up, has developed a stronger sense of self, is cheerful, and that she is putting more structure and definition in the way she handles her physical world.

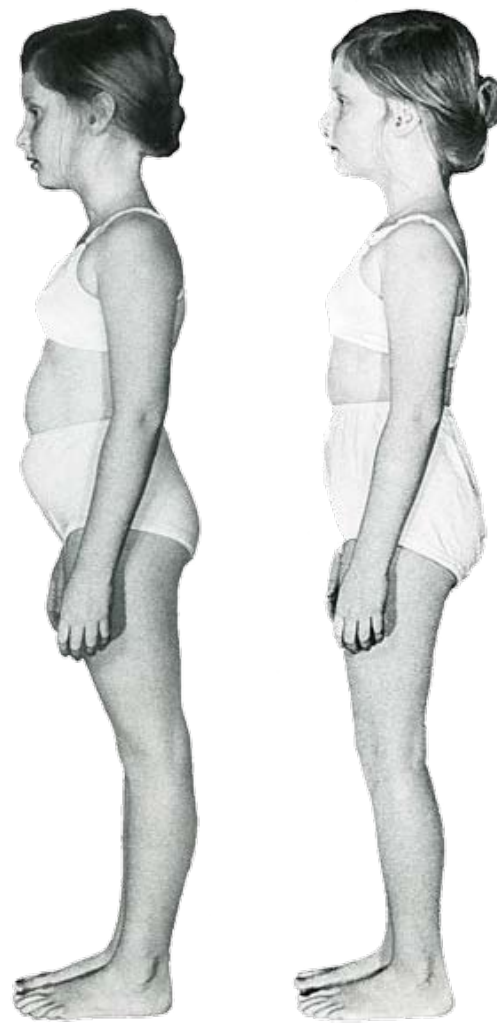
As you can see, before her first session, Jo stood with her knees locked back, making her appear bowlegged. Later photographs show dramatic improvement.

Jo's mother insisted that we mention the effect Rolfing has had on Jo's creativity. She says "when Jo was born, I knew that this child would be a creative spiritual child."

Since her Rolfing has flourished in this regard. Rolfing seems to have given her a centeredness she never had before. This has increased her ability to direct her creative energies. Her creativity, her mother reports, has developed in many areas. She plays the violin, sings, dances, appears in plays, and does art work.

“ We are not truly upright, we are only on our way to becoming upright. This is a metaphysical consideration. One of the jobs of a Rolfer is to speed that process along. We want to get them into the place where gravity reinforces them and is a friend, a nourishing force. ”

– Dr. Ida P. Rolf



before

after

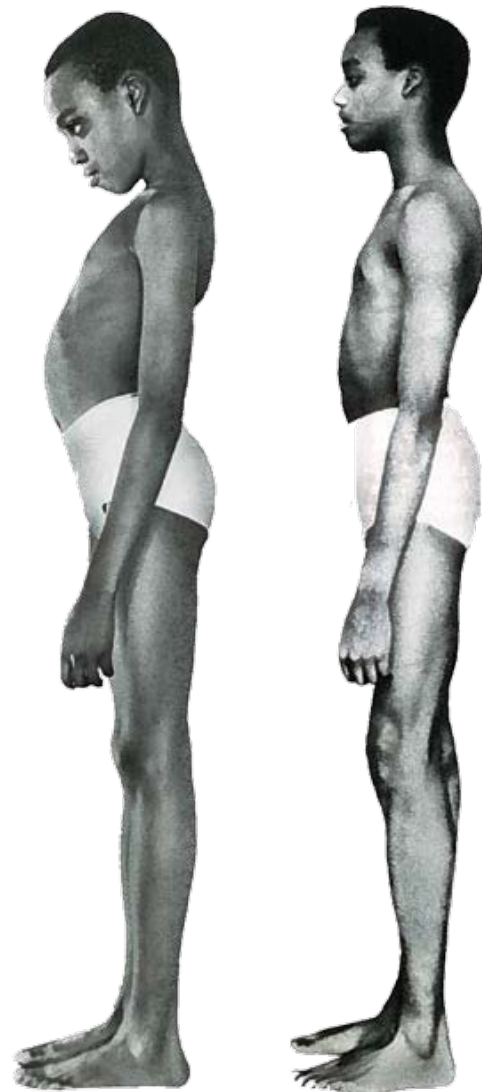
Case Studies

J.C.

Before he was Rolfed, J.C. had a protruding stomach and stood hunched-over. Significant improvement in these areas can be seen in the photographs. His mother states that he seems more in control of his movements and that, whereas he frequently complained of headaches before his Rolfing sessions, he never complains of them now. She also reports that there is a positive shift in J.C.'s self-image, as evidenced by the pictures.

“ The human body is not static; it's plastic, and that plastic quality enables a person's body to be realigned into a more optimally functioning and feeling human being. Rolfing accomplishes that realignment. ”

– Dr. Ida P. Rolf



before

after

Case Studies

Liz

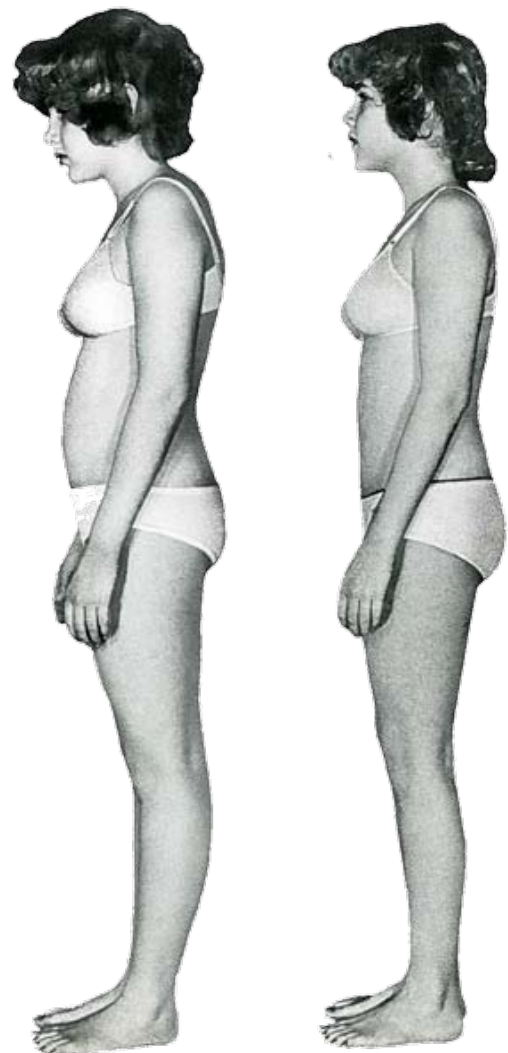
Prior to her Rolfing sessions, Liz felt she was overweight and she was not pleased with her posture. She complained that her stomach stuck out. Notice also how her head hangs forward. Immediately after Rolfing, and as much as a year later, you can see a notable improvement in her posture. Her head is more erect and her stomach is flatter.

As Liz is maturing into adolescence, her mother was concerned not just about her daughter's slumping posture, but also about her difficulty with being emotionally open and expressing herself. Liz seemed to worry a lot.

The most important recent report from Liz's mother is that, besides the big improvement in Liz's posture, she also says she could see a big overall change in her. "She has become much more open, loving, and helpful; she is full of enthusiasm and even worries a lot less. In short, Liz has become a joy to live with."

“ The word 'posture' in its physical sense has been commonly regarded as a static alignment of body parts, one above the other, rather like stacked suitcases or boxes. ”

– Dr. Ida P. Rolf



before

after

Case Studies

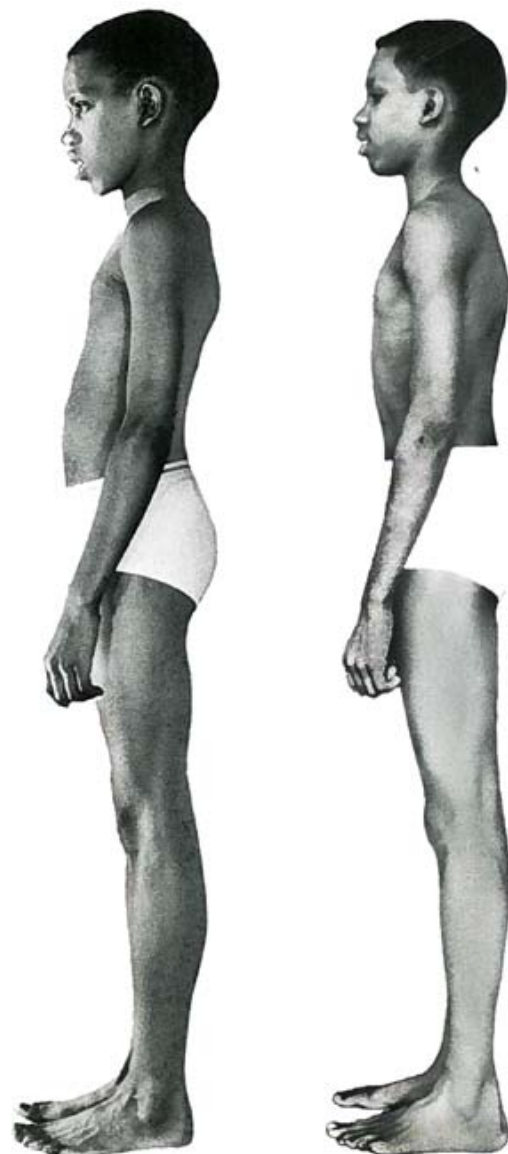
Reginald

Like his brother J.C. (shown previously), Reginald evidenced a chronic slump and a protruding stomach before Rolfing. After ten sessions, the change in Reginald's posture was quite noticeable. The protruding stomach is gone and, according to his mother's report, his stance is much more erect.

The aggressive pose that Reginald presents in the photograph taken before Rolfing belies the anxiety, fear, and mistrust his mother sensed in him. After he was Rolfed, his mother noted that he had more self control and was less destructive. Most significantly, she reported that he was less antagonistic and less deliberately annoying.

“ We are not truly upright, we are only on our way to becoming upright. This is a metaphysical consideration. One of the jobs of a Rolfer is to speed that process along. We want to get them into the place where gravity reinforces them and is a friend, a nourishing force. ”

– Dr. Ida P. Rolf



before

after

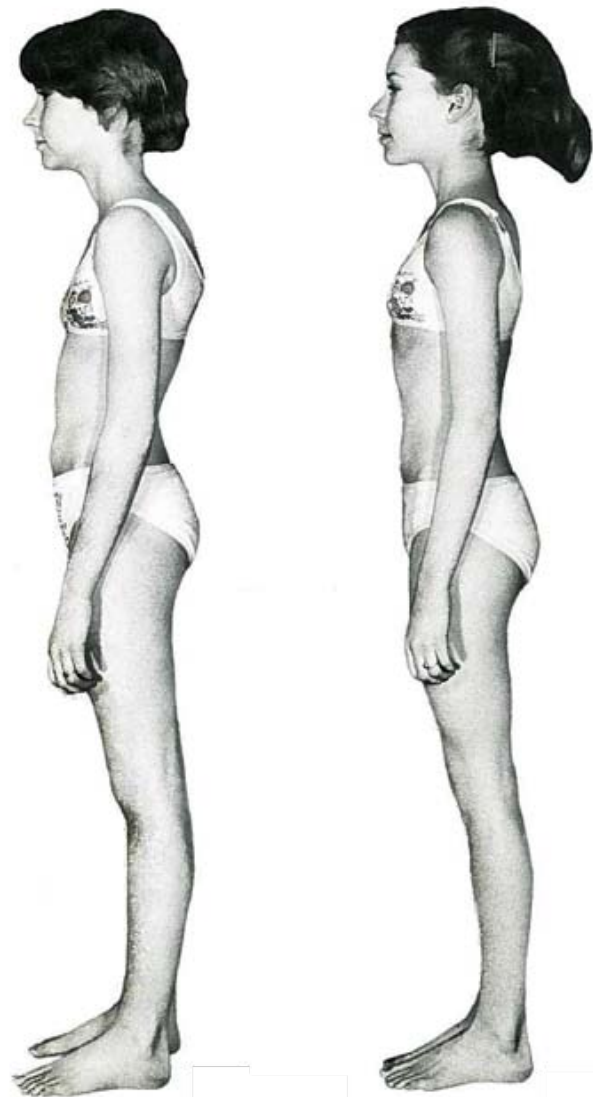
Case Studies

Ann

Ann and Chris are sisters. At the time of their sessions, their parents had been divorced for some time and they lived with their mother. Ann is the older of the two, though physically smaller, and her mother reported that she kept her thoughts and feelings much more hidden. Both girls, she said, were uncomfortable with the size of their bodies. Ann felt she was too small and Chris felt she was too large. In addition, they both expressed concerns over their difficulty in getting along with each other.

“ Posture, in its broader sense, is the momentary, ever-changing balance of body components in space as they relate to the force of gravity... at any given instance and in any given position.” ”

– Dr. Ida P. Rolf



before

after

Case Studies

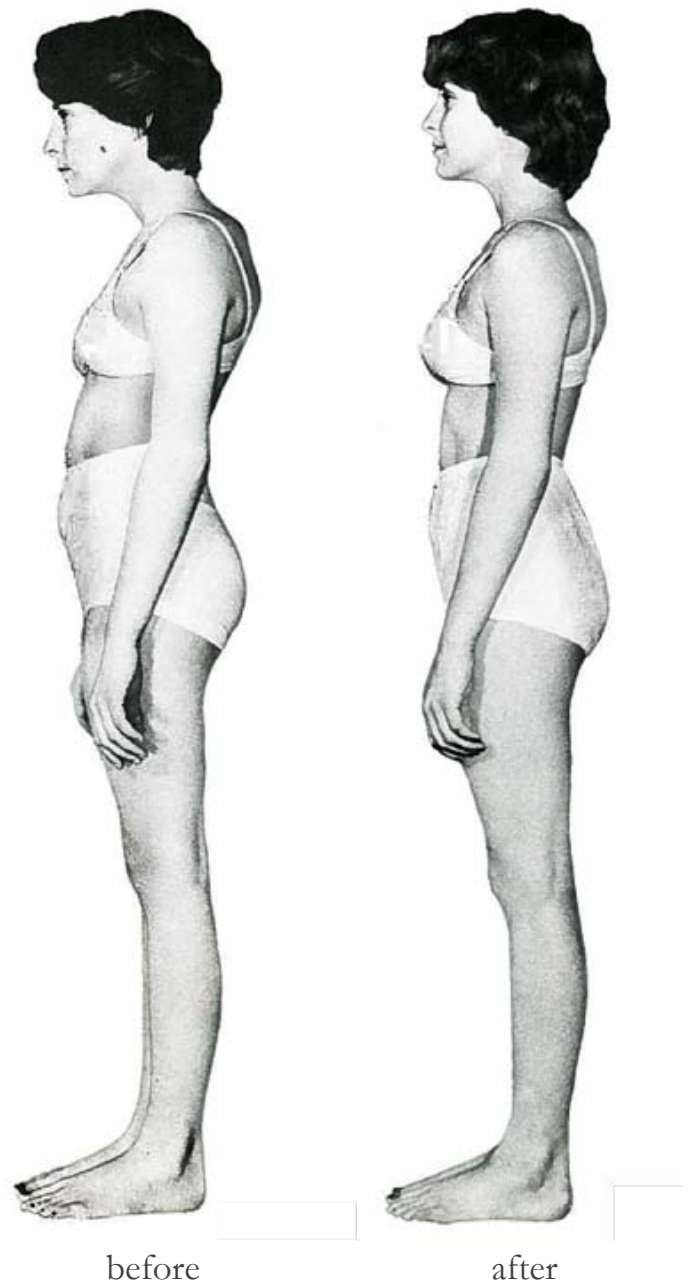
Chris

After Rolfing, according to their mother's accounts, Ann became considerably more open and straightforward, and both she and Chris became more comfortable with their bodies. Now the two sisters are, in their mother's words, "the best of friends." Chris reports that her baseball game improved after

Rolfing, that she can run faster and her swing is more accurate. There was a dramatic realignment in the girls' family too. Shortly after their sessions they both went to live with their father, whom they had difficulty relating to prior to their Rolfings.

“ We are not truly upright, we are only on our way to becoming upright. This is a metaphysical consideration. One of the jobs of a Rolfer is to speed that process along. We want to get them into the place where gravity reinforces them and is a friend, a nourishing force. ”

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Case Studies

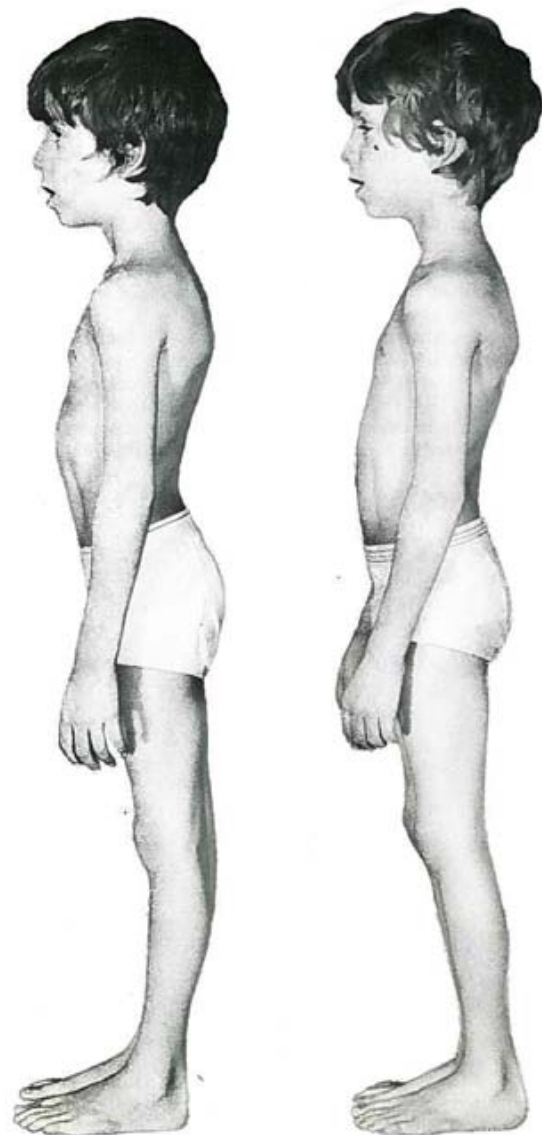
Teddy

Notice the change in the structure of his chest after ten Rolfing sessions. Notice also the changes in how his body blocks are aligned.

Teddy's mother reported that Teddy had suffered from serious allergies and asthma since early childhood. She suspected his problem was as much psychological as it was physical. This was underscored by Teddy's body tension. "He held his body like a steel coil," his mother told us. After being Rolfed, Teddy's wheezing stopped and his allergies cleared up. He has become involved in bicycle racing now that asthma is not a part of his life.

“ In a healthy organism, proper balance might be thought of as a resting state; a capacity and preparedness to respond appropriately and efficiently to a wide variety of stimuli. ”

– Dr. Ida P. Rolf



before

after

Case Studies

Shanna

Shanna is a special case. She was not a part of the original Children's Project, but we have included her in this report because the changes she underwent after Rolfing were dramatic. Shanna's case demonstrates the potential of Rolfing in working with children who suffer from symptoms of serious diseases.

As an infant, Shanna had been diagnosed as having cerebral palsy. None of the conventional therapeutic techniques had substantially relieve her symptoms, so, when Shanna was 14 months old, her parents approached me about Rolfing.

I Rolfed Shanna over the normal series of ten sessions, which were completed in four and one-half weeks. During this time no significant changes were made in her medical treatment. Conventional therapy was, and still is, being pursued in conjunction with the Rolfing. Her parents felt this was important to her overall treatment.



“ Rolfing has to do with gravity. Not chemistry, not medicine, not the idea of individually fixing this or that. Gravity is the one and only tool we use. I think my experience justifies making this very broad assumption: gravity is the only tool that deals with chronic situations in the body. ”

– Dr. Ida P. Rolf

Case Studies

It is not our contention that Rolfing cures people who have serious diseases. However, Shanna's case and certain others do indicate that Rolfing holds' considerable promise, and should be seriously considered as an adjunct to other treatments.

At least one pilot study by medical researchers has indicated that Rolfing benefits some persons suffering from cerebral palsy. More research is needed, however, before we can have a clear picture of Rolfing's possibilities for improving the lives of people with special problems like Shanna's.



“ A Rolfer works with gravity; he understands the gravitational pull in everything that a human being does, 24 hours a day, 365 days a year, from the moment he gets out of his mother's womb. From that day until the day the undertaker catches up with him, gravity does not take a vacation. ”

– Dr. Ida P. Rolf

Please contribute financially

On these pages, you have seen the amazing results these children experienced as a result of their Rolfing sessions. Further research and documentation are essential.

Unfortunately Dr Rolf passed away shortly after the completion of this project and most Rolfers have never had the opportunity to benefit from the knowledge accumulated with this project. I am now committed to train as many Rolfers and teachers of Rolfing and structural integration the power of this work.

Please help us make this monograph available to as many people as possible.

Contribute financially. Your contribution may be tax deductible. [Click Here](#) to donate.

TeamChildren is an IRS approved non profit organization.

Your contribution will write a new chapter about what is really possible in early childhood growth and development and help us rapidly expands the benefits of Rolfing to many, many more babies and children.

Please send your contribution to:

TeamChildren
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Please let us know if you have any case studies to contribute to this project or wish to take a class or participate in future projects.

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Dr. Ida P. Rolf

Ida P. Rolf was born in New York City in 1896. In 1916, she graduated from Barnard College and was hired to do research at the Rockefeller Institute (now Rockefeller University) in New York, where she continued her education. She received a Ph.D. in biochemistry and physiology from the Columbia University College of Physicians and Surgeons in 1920 and spent several more years working in the departments of chemotherapy and organic chemistry at the Rockefeller Institute.



Dr. Rolf's interest in Structural Integration-or Rolfing- came about through her search for solutions to personal and family health problems, for which conventional methodologies had proved of little value.



The technique that Dr. Rolf developed during her years of study and practice first received wide professional exposure through demonstrations and workshops that she conducted at Easlen Institute in California during the mid 1960's. She then established the Rolf Institute in Boulder, Colorado. She spent the last years of her life in Blackwood, N.J. refining her methods and teaching them to other Rolfing practitioners.

The Promise of Rolfing Babies, Children and Families

by Robert Toporek

Robert Toporek

Robert Toporek studied with Dr Rolf extensively from 1975 till her death in 1979. He organized and managed most of her final classes, supported her administratively, traveled with her to various board meetings and conferences, was influential in having psychology today do an extensive interview with her, and assisted her in a somatic conference in Los Angeles.



Robert is one of the leading pioneers in the world standing for the possibility of Rolfing for every new born, baby, child, and their parents. In 1997 Robert created a Rolfing clinic on the sidewalk in one of Philadelphia's most dangerous neighborhoods. For three years he organized other massage therapist and body workers to come on a weekly basis to give children in this neighborhood a relief from the daily intense stress they lived with. Robert has expanded his work with babies and children and is now a leading worldwide advocate for the integration of high tech with high touch to cause a breakthrough in early childhood development. Robert is also the author of the New Book of Baby & Child Massage.

“ One individual may experience his losing fight with gravity as a sharp pain in the back, another as the unflattering contour of his body, another as constant fatigue, and yet another as an unrelenting threatening environment. Those over 40 may call it old age, yet all these signals may be pointing to a single problem so prominent in their own structures and the structures of others, that it has been ignored; they are off balance. They are all at war with gravity. ”

– Dr. Ida P. Rolf

Project Methodology

In the Spring of 1978, Dr. Rolf, Ron Thompson, Cathryn Ellison, Carol Gold, Andy Crow, and myself gathered in Philadelphia. During the next four weeks we worked with nine children and five babies. Except for the babies, who did not receive all ten sessions, each child went through the complete basic Rolfing process.

The standard ten sessions were completed over a period of three and one-half weeks in order to eliminate growth as a factor in the recorded changes.

Photography and interviewing were used to document the results of the project. The photographs and interviews in this study were taken before and immediately after three and one-half weeks of Rolfing. Some were taken again one year later, and in some cases, three years later, to document the ongoing and lasting changes introduced by the Rolfing process. Although not all fourteen subjects are shown in this report, the results shown on the following pages are not “exceptional” cases; they are representative of the children who participated in the project.



Acknowledgements

Many people have made contributions to the preparation of this monograph and to the project it describes, and a number of acknowledgements are in order. Hundreds more have contributed to the project as it has expanded over the years. If we do not specifically acknowledge you here rest assured that we know who you are.

I am very grateful to the following Rolfers, Ron Thompson, Phyllis Singer, Cathryn Ellison, Carol Gold, and Andy Crow for sharing with me the work of Rolfig children and documenting the results of the project.

Acknowledgement is also in order for the contribution of the children and parents who participated in the project and the extensive follow-up. I want to especially acknowledge Alice Matusow, Alan Silverstein and the Goldsteins for their support. Their cooperation in the face of endless scheduling difficulties enabled us to finish our work within the critical time frame established for it.

I particularly would like to thank the children who participated in the project and allowed their pictures to be used in order that others benefit from Rolfig.

I would like to thank Joe Golden and the Delaware Valley Printers for their patience, persistence and good will in bringing this monograph into print; Elliot Curson for the one simple instruction that bought me out of confusion and into order; Debbie Brandt, Rochelle Dorfman, Howard Coffin, and Steve Passin for their contributions to the text. I would especially like to thank Kathy Kuhl for her assistance in the design of the monograph and for the warmth, beauty, and professionalism she brought to this work and to Meredith Gatschet for the completion of the work.

I would also like to express my gratitude to Dr. Mike Phillips for his help and insistence on rigorous scientific research. Special acknowledgements are in order for Marilyn Hall and Adrienne Carlee for their continuous support of the project from beginning to end, and to Connie Shuster for keeping our work place organized. Without the typing of Roz Burak and Margie Frank, especially during emergencies, I wouldn't have known what to do. Thanks.

To all my friends and clients in Philadelphia and elsewhere who have aided me and the project financially, morally, and in countless other ways, I thank you.

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This monograph is dedicated to Dr. Ida P. Rolf who trusted me to organize, manage and continue this project, Werner Erhard for training me in the distinctions of enrollment and registration conversations and the distinctions he has created around personal transformation, to Easlen Institute and my friend Dick Price who first introduced me to alternative thinking and created a platform for Dr Rolf's work to be realized.

I want to acknowledge Dick Demmerle and his family for their love, support, warm beds and meals and to Dick and Bridgette for taking me under their wing and trusting me to Rolf their children.

The parents and friends who have supported me throughout, to Suzanne Squires for her financial generosity and to my house mates that made it all happen. Marilyn Hall, Adrienne Carlee, Karen Cauley.



Dr. Ida P. Rolf


Robert Toporek