

Social Stories, The Feldenkrais Method and the Unanswered Question

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As both a Guild Certified Feldenkrais Practitioner and a public school educator, I am in a unique position to bring what I have learned through my work with the Feldenkrais Method of somatic education directly into the lives of children. I also have the opportunity to inform my Feldenkrais work by what I learn in my continuing education as a teacher.

In my classes are a number of students on the autism spectrum. I joined the Autism Team at my school in order to better serve them. As a member of that team, I took the opportunity to attend a one-day conference on autism spectrum disorders (ASD). I was curious to see whether my Feldenkrais training would give me a special insight into the subject of autism. What I did not expect was that the presentations on autism would give me more insight into how the Method had impacted me!

This article reflects my discoveries. It is designed to bring those familiar with the Feldenkrais Method into awareness about a central aspect of the work that they might themselves be using subconsciously: How through the course of a session we answer questions, unanswered and often unasked, which manifest themselves in the client's organization.

THE INVENTION OF SOCIAL STORIES

The lead speaker at the convention I attended was Carol Gray, a public school teacher who, while working with students on the autism spectrum, developed Social Stories as a means to help them recognize the impact of their behavior. Prior to Social Stories the options for teachers wanting to work with these children were limited because of the variety and nature of the manifestations of the disorder, including peculiarities in communication styles, selective attention and interest, and other barriers to their effective social interaction.

Ms. Gray told us that Social Stories were inspired by her work with a particular student. She had been involved with this young man with ASD for ten years. He was notorious among his teachers for disrupting class by speaking out at any time and for any length of time.

One day during an all-school assembly, a public speaker started to give a talk about economics. Ms. Gray's student interrupted almost immediately, engaging the startled speaker about all kinds of topics, much to the audible amusement of the rest of the young audience. This would have become just another episode in the student's history, except that it was videotaped.

Ms. Gray, who had for years been unable to make the student aware of his behavior, seized upon the video as a means by which he could see himself engaging in his hyper-social behavior. Video was a relatively new tool at the time, and there had never been footage to work with. Perhaps if the student saw what he was doing, he would recognize his impact on the social structure of the group.

Unfortunately this was not the case. The student, seeing himself talking to the speaker, failed to connect his behavior to the speaker's discomfort. Pressing onward, Ms. Gray began to have a conversation with the student about the video they were watching. She described the event to him as though it were a story about a third person. *A speaker was presenting his topic; the student was interrupting; the other students were laughing because . . .* She created an informative, bias-free narrative of the event based on the video.

At this point, the student made an unexpected comment. As he listened to his behavior described as a story, he was able to understand that his habit of interrupting had negatively affected the assembly. Recognizing the impact his behavior had made on his community, he said "I can change that." His simple, matter-of-fact utterance was not a promise to Ms. Gray designed to win her approval. Rather, it was a statement of self-awareness.

The next day, the student came to one of his classes with a piece of poster board and asked to sit in a different chair, one by the wall. When the suspicious teacher asked why, he replied that he wanted to write down the rules of the classroom and place them by his desk where he could see them. His behavior changed dramatically from that point forward.

COMPARING SOCIAL STORIES TO THE FELDENKRAIS METHOD

Stories provide a context by which we understand our world and communicate what we know. Social Stories are very special stories with particular characteristics useful to the ASD community.

The website of the Gray Center defines a Social Story to be a narrative which "describes a situation, skill, or concept in terms of relevant social cues, perspectives, and common responses in a specifically defined style and format. The goal of a Social Story is *to share accurate social information in a patient and reassuring manner that is easily understood by its audience*. Half of all Social Stories developed should *affirm something that an individual does well*. Although the goal of a Story should *never be to change the individual's behavior*, that *individual's improved understanding of events and expectations may lead to more effective responses*."

The above emphases are mine. Much of this description could, with slight changes, be referring to the Feldenkrais Method. As Feldenkrais practitioners we offer accurate information through touch and movement, usually in a patient and reassuring way. When we bring someone's attention to themselves, we strive to make our observation easily understood by the client. We often start by going with our client's pattern, in other words reinforcing something that our client is doing well. Finally, it is our hope that by increasing the client's self-awareness, they may experience more effective responses to stimuli.

Can this analogy really be sustained? At the outset, the two methods seem very different! Social Stories are designed for children with ASD. The Feldenkrais Method is a general approach meant for anyone, at any age and any level of ability. Social Stories are specifically designed to provide social cues to people who have difficulty reading them. The Feldenkrais Method has ostensibly little to do with social cues, bringing people to look inward at themselves. Finally, Social Stories utilize language nearly exclusively, while the Method is designed to circumvent language in favor of a direct touch or movement experience.

Despite the differences in approach and intended audience, I believe these two methods, when seen from the perspective of "answering questions," have a great deal in common and, in fact, illuminate each other profoundly. By better understanding the aspect of Social Stories that deals with a child's unanswered questions, I discovered a new way to look at how the Feldenkrais Method affects people like myself who are not on the autism spectrum.

RECOGNIZING A CHILD WITH A QUESTION

Throughout her presentation, Carol Gray sought to emphasize not only how children on the autism spectrum are different from us, but how we are like them. She points out that the need for story is a common human characteristic through time and across cultures.

Like children on the autism spectrum, we use stories for more than entertainment. They answer our questions about life, both stated and unstated.

Our desire to answer our own questions often drives us to greater self-understanding. Feldenkrais practitioners might very well see a child's first attempt to roll over as a kind of inquiry about his ability to move: "Can I get off my back?" The process that follows may be frustrating, and a child may display great displeasure until the "question" is answered by the first successful reversible roll.

Ms. Gray has found that a child on the autism spectrum who is exhibiting challenging behavior is often a child with a question. Ms. Gray gave two examples in her presentation. One involved a child who came over to her house and, after looking around, asked her "Why did you change your dog's name to 'Popcorn'?" Ms. Gray had not, in fact, changed her dog's name at all. Nonetheless, the question remained.

Ms. Gray recognized that arguing her own perception of reality with the child's would have been futile. Upon investigation, Ms. Gray noticed that she had replaced the dog's normal food bowl with a temporary bowl that said "popcorn" on the side. Now she understood the child's question and was able to answer it.

An even more compelling story involved that of a two and a half-year-old boy diagnosed with ASD whose exhibited behaviors baffled his parents. Among these were a desire to wrap himself around stop-signs, a tendency to spin around, and a disquieting habit of throwing intense tantrums any time someone brought a lollipop into his house. One day Ms. Gray witnessed an episode in which his sister, upon coming home from school with a lollipop in her pocket, forgot her brother's reactions to them and put it on the table. The child quickly flew into a rage. Later, while driving home, Ms. Gray found herself contemplating the idea that this tantrum represented an unanswered question. As she paused at a stop sign, she suddenly had a revelation. She immediately called the parents, asking them to bring the child to the place where she had parked.

When they arrived, Ms. Gray and the child dug in the dirt around the base of the sign. She showed him that the metal stem is buried deep in the ground and has cement to hold it in place. She then accompanied the child back to his home. Taking the lollipop out where he could see it, she placed it in a lump of play-dough so that it would stand upright by itself. Immediately, the child began spinning in delight.

Have you figured out what the child's question was? "Stop signs look like lollipops. Why do stop signs stand up by themselves when lollipops don't?" The child was enraged at the inability of the people around him to recognize his question and to answer it. When the question was addressed, the rage vanished.

How different are we as "fully functional" adults from that child? Is our perception of reality of an entirely different order from his? Do we experience the same level of frustration with our own unanswered, unanswerable questions? How do we manifest the rage?

MY UNANSWERED QUESTION

As a child, and well into my young adulthood, I found it enormously difficult to make sense of my world. Ostensibly there was nothing wrong with me. Except for nearsightedness, my ability to see, to hear, to smell, to touch, and to taste was "normal." No one would have diagnosed me with any kind of disorder. And yet the symptoms of my inability to relate fully to my environment can be seen all throughout the story of my life.

I paid far more attention to details in life than to the overall picture. My piano teacher was never able to help me progress in the perfection of a piece of music because I was

always fussing over, and never improving, minute aspects of the work. My painting instructors were always telling me to back away from the canvas instead of making tiny little marks with the paintbrush. Even in my early writing one can see my obsession with detail to the detriment of a storyline.

I also had difficulty forming friends and maintaining social relationships. Aside from two or three long-term friendships, I was never able to maintain my place in a community of friends. Instead I bounced from group to group or kept to myself. Many social cues eluded me, and my relationships with other people were often contrived and fell apart at the point at which they should have deepened.

None of these things appear catastrophic to the casual observer. They are the kinds of things many of us experience as children to one degree or another. Yet even as I should have matured, these tendencies remained. They dogged me in my college work, preventing me from thinking or expressing myself clearly. By the time I was in my twenties, I found myself living alone in an apartment with no full-time employment and no real social network. My way of dealing with the world had not changed since I was a child, and yet I was no longer protected by the organization of school life.

I myself had remained a child with a question: "How do I put the details of my life into a bigger picture?" By living my life as a dysfunctional adult, I was asking the question, but no one was able to hear it. If they had, how could they have answered it? It might have been a question that could only have been recognized and addressed by a Feldenkrais practitioner.

THE FELDENKRAIS METHOD FUNCTIONS LIKE A SOCIAL STORY

Feldenkrais practitioners create contexts for their clients by providing a somatic description of a person's present state. This description can answer questions for a client that the client is unable to ask. For both a child on the autism spectrum and a "healthy adult," these questions always go beyond the physical and touch on the mental and emotional as well. Is it possible that a child on the autism spectrum dealing with "ordinary awareness" is having an equivalent experience to an adult faced with an overwhelming leap to a new level of self-comprehension? While we cannot make a clinical claim that this is true without significant research, the possibility of such a parallel may still be helpful.

In the Feldenkrais Method, one begins to recognize, and can work with, the explicit connection between the physical, the emotional, and the intellectual. In talk therapy, one most often works with the emotional and, to a lesser extent, the intellectual. We are occasionally surprised upon experiencing a breakthrough or a catharsis at the end of a talk session to find that something has changed physically in us as well. We may carry ourselves differently or feel lighter. Sometimes these experiences are "explained" as a release of long-held tension. Our work with the Method suggests otherwise.

In fact, Dr. Moshe Feldenkrais suggests that by working mainly with the physical, that is, our functionality in movement, we can experience a profound shift in our mental and emotional capacities.

A fundamental change in the motor basis within any single integration pattern will break up the cohesion of the whole and thereby leave thought and feeling without anchorage in the patterns of their established routines. In this condition, it is much easier to effect changes in thinking and feeling, for the muscular part through which thinking and feeling reach our awareness has changed and no longer expresses the patterns previously familiar to us.
(*Awareness Through Movement*, p. 39)¹

In reality there is no isolation of the physical. When we move, we think either overtly or subconsciously about what we are doing and how we are doing it. Depending on the familiarity or sense of risk in the movement, we may also experience profound feelings that can assist or interfere with the task at hand. Dr. Feldenkrais made no claims for an isolated physical approach. The Feldenkrais Method is not a form of physical therapy.

But one can disconnect a movement from the thoughts and feelings that habitually accompany it, if one is encouraged to go slow and pay attention. If one removes the item one is reaching for, one can examine the act of reaching by itself, differentiate the elements of the reach, and see what one might have to alter in one's entire organization in order to improve it. When one returns to the full function of truly reaching for something one needs, one finds it a different experience, physically, mentally, and emotionally.

My own physical impairment was poor depth perception. An imbalance between the acuity of my two eyes, corrected with thick glasses, long contributed to a distorted visual image of the world. Glasses, especially those with thick lenses to correct severe nearsightedness, have the effect of flattening the image the viewer sees. When my vision was corrected by laser surgery in my late twenties, I could at last see with two balanced, unassisted eyes. But the habits of seeing that I accumulated over the years persisted and, without realizing, I was not taking advantage of my restored capacity to perceive depth. I did not realize the extent of my poor depth perception until I began my training in the Feldenkrais Method. As my overall organization improved, so did my ability to truly see. As my world began changing, I discovered that my physical limitation had carried with it some mental and emotional implications with which I had been struggling for a long time. My visual limitations were connected to questions I had long had about the world that had always gone unanswered.

LIVING IN DEPTH

You are most likely reading this article now on a page in a magazine or book, or perhaps a computer screen. The page is probably buckled and curved, or the screen is at some kind of an angle to your face, so that each word is at a slightly different distance from your eyes. I doubt you noticed that until now. Most likely you are engrossed in what you are reading and have automatically condensed the depth so that all the words seem the same distance away.

This condensing habit is useful in reading, and in other situations as well. It is enormously helpful to be able to condense spatial information into a flat picture so as to make comprehension of the image quicker. When watching a baseball game, depth is less important than the position of the players on the field.

But imagine if you always condensed what you saw, discounting depth completely. If someone was walking towards you in the hall you would perceive them as getting larger! It would be very confusing.

What if you compressed different kinds of distances, metaphorical as well as physical? Pretend that you're considering something that may happen far into the future but you automatically compress the "distance." Instead of anticipating the event, you believe it's happening right now. As an even worse side effect, every event in your past, every mistake, every embarrassment, no matter how long ago it was, still seems present to you and never becomes just a memory but is always occurring with the same intensity. Very emotionally difficult.

What if you were arguing with someone? Some of the things they are saying would be more important (closer) and some less important (further away), but you would be unable

to make the distinction. You would treat everything the person says as equally important, from little insults to essential facts about how they're feeling. Wouldn't that be confusing for both of you?

The person we are imagining is me. My tendency to focus on details without relating them within a larger framework, my difficulties negotiating the finer aspects of relationships, even my tendency not to use dynamic shifts in my own musical compositions, all were extraphysical manifestations of my tendency to compress the world.

As I began to explore the idea of "depth" in a Feldenkrais environment, I gradually came to recognize the central importance of this aspect of myself. I began to recognize how I flattened *everything* in my life, physical, mental, emotional, and temporal. I found that I had always been impaired in my ability to distinguish between deep interpersonal relationships and shallow ones, between consequential activities and trivial ones, between the past and the present. It was only after I began to see in three dimensions, then to *think* in three dimensions, that I could mature, experience real relationships in my life, and gain some true perspective on my past and my future.

In order to have real relationships with people, relationships with depth, I must recognize that not every hurtful thing the other person says in a fight is equally meaningful. I discover that I have more choices in my reaction to another, that there are more options than simply advancing in a relationship or losing ground. I gain a whole world of movement in which new directions become possible: left and right, up and down, spinning.

Because my questions about the ways in which people can connect to one another have been answered through my new organization, I am able to give up parasitic and neurotic ways of relating to others that have only partially served me. Suddenly the person across from me is not a flat image, but a true person who can be engaged in conversation, touched, embraced. Then we two individuals, with the benefit of our depth perception, can dance.

ANSWERING THE QUESTION

How did the Method make this possible? By creating an awareness in me that I am a three-dimensional person, the practitioners with whom I worked helped me to answer a question I didn't know I had. Together we mapped my ribcage, and I felt its shape change as I breathed. In order to roll on the floor easily and reverse the movement, I had to experience both my body and the space in which I was moving as something more than an intellectual abstraction. Finally, as I began to think of myself as a solid, three-dimensional being, I could begin to see in three dimensions again. With my perception improved, I could then *imagine* a three-dimensional world in which I could move, with others in it.

Through the techniques of touch, movement, and dance, I was given a context in which to place myself. This context was much like the social context provided by a Social Story. Determining my physical presence in three-dimensional space is equivalent to an ASD child finding a temporal presence between the past and the future, events and consequences. In both cases our deficits prevent us from being able to ask, or even realize that we are asking, a question whose answer will provide the key to the kinds of mastery we see in others.

For a child with ASD, a Social Story, a clear description of a moment in time free of bias and extraneous information, enables them to see themselves in relation to others. With such knowledge, they can recognize the effect they have on the world in which they live and can make changes to it. This knowledge may provide the answers to their hidden questions.

In our work, it is necessary to recognize the “question” the client is asking, no matter how it is manifested, and to find the appropriate context so that they can begin to answer it. The context must be given in a way that provides meaning and a sense of self. We must share accurate information, free of judgment, which connects to the client’s own areas of comfort or competence. We want the client to end the lesson saying, “I can change that.”

Whether the “story” of a client is told through timeless touch, or bias-free language, the need of the client is the same: to be able to examine him- or herself with the help of another set of eyes. If we take our cue from the successes that Social Stories™ have had with children on the autism spectrum, we can understand that people can make profound changes in their lives when we compassionately and intelligently provide accurate information and then give them a context to make sense of it. We must listen out for our clients’ unanswered questions so that we can offer the information they will need to move toward the answers, and beyond them.

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REFERENCE

- 1 Feldenkrais, Moshe. *Awareness Through Movement* (New York: HarperCollins, 1971, 1977).