

Berührung - touch/contact

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Here are experiences which I would like to share with you as they tell a story about the Feldenkrais way of touching.

1.

Aviva was one of the first to have cochlear ear implant. On her experience she wrote a small booklet whom she asked me to share. So, you can find it in the end-the Google drive link. She has now had an implant in her second ear as well. Her doctor insisted on doing the second implant because her eyesight is deteriorating and she might be facing blindness in the future. He was afraid she may reach a moment when, if the first implant is not working, she will not be able to see or hear.

She needs to make an effort to learn how to hear and talk with the new cochlear implant. The hearing aids are attached to her head with magnets and that means she is occupied with them NOT falling out. At our first meeting which was at her home, Aviva told me that she is a bit hesitant about the method, as it is on the floor. She never lies on the floor, nor does she crawl on her knees, she never liked it. "Our aim is to reach the floor" I said with a smile and she replied, "I hope you will not stand me on my head like Ben Gurion." So, we agreed that we settle for now on FIs using the table.

My way of teaching ATM and FI lessons includes talking with the people. For Aviva, talking and sharing daily life, or even very personal experiences, is a very important part of our meeting. Feeling that I am also a "friend" is crucial for her sense of safety.

One day the hearing aid kept off falling during the FI lesson. To put it back she needed to sit and use both hands. I suggested to "give up", put it aside, and continue the FI. "But then I won't hear you" she said. I smiled and said, "So what?" I reached out my hand and she put the device in my palm. "Well, ok then", she said very clearly without hearing herself.

I did the FI bearing in mind that this person cannot hear me and can barely see me; she only feels my hands and the table. I did not lose contact at any point! I used my hands When I wanted to ask her to roll to her side or come back to lie on her back, I used my hands like sign language to convey my request. She relaxed and enjoyed the lesson enormously. The sensation of herself deaf, moving, and being moved in a safe manner was an emotional, introspective experience for her. We were lost in time, but not in space. I was moved enormously as well. The idea of being deaf, living alone and coping with life -struck me. I felt great empathy with her; not pity. I also admired her ability to be optimistic and lively.

"Summertime, and the livin' is easy" (Gershwin)... the apparatus that holds the hearing aids broke! The devices worked, but they did not stay in place on the ear. This forced her to wear woolen hat to hold the devices in place. Constantly checking and rechecking that everything is in place... what a nuisance, not to mention the heat!

"I hate silence," she declared. "That one time we did the lesson without the hearing aids was good and unique, but it also reminded me how it is to be deaf. I hate it. Now we will have to because I cannot allow myself to break the apparatus just because I lie on my side." So, we adjusted the format of lesson to: A) Talking, B) FI in silence, A) Talking again. This led to prolonging our meetings because we have always something to talk about, whether it is connected to the lesson or not.

Sometimes it is good to make a break during FI and a good way of taking a break is really to take it, like a *General Pause* in music. She lies so that she can see me, as I raise the glass of water (she always prepares) for a toast saying: "Le'chaim", which means "to life", a blessing for good and healthy life. Reading my lips, she responds with her voice.

The importance of a break reminds me of a demo I did on a Feldenkrais practitioner, during which I felt constant resistance. I had no idea why and so many thoughts crossed my mind while teaching and explaining. After a few minutes I felt I had to go to the WC (coffee in, coffee out). I apologized to the participants and the practitioner and went. When I returned a few minutes later, the person I was giving the demo on gave up all resistance and accepted what my hands offered.

During the discussion following the demo, I shared with the group what I felt. This practitioner shared with the group that in the short break an internal process was happening on all levels. As if a fight whether to accept or reject, fight or flee.

A few weeks later I got a moving letter that explained more about the emotional dilemma I was unintentionally part of and how it all expressed itself in this FI. The dilemma whether to accept a man's touch in a professional demo. Although not intimate and in a safe environment still a dilemma

As mentioned at the beginning, here is Aviva's booklet "...And there was sound"
<https://drive.google.com/file/d/1otSuz-fsIjyqHbiFejLNelyAHapiOUvt/view?usp=sharing>

2.

An older woman from the former U.S.S.R who was injured by the K.G.B in her right foot.

She came to a long series of FIs in the "Krankenkasse" Clinic which I work as a Feldenkrais Therapist.

So, one day I decided to pay more attention to the "damaged" foot and I did all kinds of toes/foot explorations that she was familiar with. There was nothing new in my way of exploring except for the time. Suddenly I notice that she is sobbing. Usually, I talk with the people I work with so it was only natural to put the question: "Mina, are you ok? Are you crying? Did I cause you pain?"

Her reply was: "Your touch reminded me of my mother. She touched me with softness and curiosity, when I came home as a little child, sometimes wounded, just as you did now. For many years I did not feel this sensation or remembered this memory."

3.

Working at the Shiba hospital - alternative medicine department, I got to work with many I.D.F invalids. One day came a man into the room and declared: "They say I am crazy."

After introducing myself, I asked him to sit down and tell me his story.

He shared his feeling/sensation of "inner tremor", which according to the Doctors/psychiatrists, is not real and just a sign of him being crazy and in need of treatments, pills etc. "Then I asked him to lie on the table with standing legs. I put my hands and touched his knees/thighs. I felt a severe tremor. So, I said: "Yes you do tremor." I added that it reminded me of a car standing yet the driver pushes full-gas, so the car trembles. A washing machine which is on high speed ... will also tremor. Maybe you just need to relax a bit, take the foot off the gas?

"So I am not crazy?! You felt it too?! I am going to kill the Doctors- no one touched me! They were sitting behind their tables typing into their computers but no one touched me."