



Embodiment, Case study

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Subject: Cs. (own child)

Born: 15th April 2011

Currently a 7th grade student at the Waldorf School Óbuda

1. Anamnesis

Cs. was born as an expected child, after an uncomplicated pregnancy, under undisturbed conditions, in water.

She was a calm and balanced baby. Movement developmental stages followed each other nicely, she liked to be on her belly, rolled in both directions, crawled irregularly but frequently for a short time. She cross-crawled, sat up from that. She started walking independently between 12-13 months of age. At the age of one, she was already using many words, she could express herself in simple sentences. At the age of one and a half she was singing a lot of songs, she loved to swing, she moved a lot, she had a happy, joyful childhood, closely with me. She breastfed until she was one and a half, but only with the help of a breast protector. She weaned herself at one and a half years old. She accepted complementary feeding, and had several favorite foods as a baby. She is not allergic to anything. She was out of day diapers before the age of 3, but wore night diapers until she was 4. Her muscle tone is very loose, hypotonic. She slept with me for a long time (until about 9 years old), she expressed a need for it.

She started to mature very early. At the age of 7 and a half, her left breast started to grow, at the same time an abdominal ultrasound showed the first signs of ovulation. For this reason, she was under the supervision of an endocrinologist, but was not given hormonal treatments. A few months (3 months) before her 10th birthday, she had her first period, by which time she was showing all the signs of secondary sexual maturation. Her palms and soles are prone to sweating. After the age of 10 years, endocrinological monitoring was discontinued and became unjustified.



Her emotional world is balanced, open and she has good adaptability. These good qualities have not been broken by a series of school changes every 2 years. (We did not start at Waldorf.)

She likes to draw, move, and she is generally creative. She has been riding horses for a long time, and feels close to nature. She also likes to write essays and poems, but she does not like to read; her reading skill is behind that of her peers. She also does not like cursive writing (she has forgotten it) but writes quickly and legibly in small print.

In the past, when very tired, she mixed p/g, d/b, and k/g in writing. This sometimes still happens to this day. Because of this, she had a thorough eye examination, which showed no organ abnormalities. She also had attended speech therapy and reading therapy, which led to some improvement in the fluidity of her reading, but no improvement in ease. Regardless of the difficulties, her reading comprehension is very good.

She has been nauseous regularly in the car, and says she cannot stand the smell of the car. She prefers to travel with her window down.

She has had several assessments to check her infant reflexes, rate of movement development, execution, balance, flexibility, seriality, spatial awareness. We attempted to uncover a source for her struggles when reading and writing, but none of the tests revealed any abnormalities or difficulties that needed to be addressed separately.

Another thing we noticed is that she likes to sit with her legs up (or only one leg up) (see photo 9/10). She also “clings” with her toes, which is visible on the insoles of her shoes. She thinks she does this because, according to her, “she has tiny feet (size EU35) so she clings to the shoes for dear life”.

She took ballet when she was a preschooler, folk dancing, and rhythmic gymnastics when she started elementary school. She learned to play the piano and to skate. She loves cycling, waveboarding, roller-skating, mountain climbing and hiking.

She did the Embodiment exercises and the test for me - to help me - and started doing them with my cooperation, because my original subject dropped out.

Reflex test 2 - summary of test results

During the reflex test examination, none of the infant reflexes were detected. Her balance was also completely normal.



3. Sensory test - summary of test results

All the important details were included in the Anamnesis section.

4. Describe the practice(s) you have chosen and the reason(s) why.

Windmill - we went into it from a simple lying down position, that's how we started the whole introduction to Embodiment, we liked it straight away. We had to help her get comfortable with it so she could relax into it by resting her knees, or else she would get sore quickly. (see photo 1.) We did it 3 times a week for 2 weeks, we incorporated it into our evening routine, she used it to tell us how her day was. During winter break, even during the holidays, it became a favorite resting and talking pose. When we weren't talking, she liked to listen to an audiobook. A photo from the end of our very first practice showed her relaxing into the experience (see photo 7).

Lying on back and turning head in both directions - We started about 2 weeks after the windmill exercises, also just lying flat. I had to hold her legs because she was really leaning out to the sides in the hip stretch, almost into a reclined bound angle pose (see photo 6). I tried propping her up with a pillow, which did not work. Finally the variation of holding her knees from the sides with my legs myself as I stood up (see photo 5 and 4).

Lying on her back, head/legs turned to the sides at the same time - she could do this by holding her own knees. We started at the same time as the head turn. (See photo 8.)

Lying on her back drawing a sideways figure eight with her nose - we introduced this in February. She managed to do it with small movements.

Head lifts on belly - I slowly added exercises to her, a new one every week or so.

Head lifts and head turns to sides on belly - this was introduced along with the regular head lifts. She likes to tighten and then relax her muscles in these exercises. Keeping her legs spread and in the C.C. leg position were both comfortable for her.

Sideways figure eight drawing while laying on her belly - also introduced in February as a companion to the other exercises.

Lateral head lift from palm to both sides - I introduced this to her in the second half of February, before the assignment deadline. She didn't like it at first, thought it was a strange exercise.

Hip press supported by a balance pad lying on back, opposite elbow lift on each side - we introduced this in early February just to try it out. As she liked it, we left it in the rotation.



Dolphin - This exercise became her absolute favorite. She even liked it better than the Windmill, at first. I have to help her keep her legs together so they don't slip apart when leaning to the side, but she can follow the directions nicely, has memorized the sequence and enjoys moving in it. She had pleasant joint cracks while doing the exercise, and she felt good as she was doing it.

Going from stance to Little Mermaid, twisting, stretching and bending in the series of exercises - I understood the importance of this at the January meeting, so since then we've been going into the exercises like this and stringing them together. Sometimes I myself get confused with which side is next, which way we turn etc., but she performed above my expectations with the twisting, stretching and contracting in the little mermaid. She can execute it beautifully, which is good to see.

Incarnation exercise - we did this after every practice as a closure, from the very beginning, even when we only did the Windmill. She just lay quietly and I stroked her back, thinking about the incarnation all the way through. Even during the practice, she stops several times and relaxes into the end of an exercise after the sigh. Not just in this incarnation pose, but rather lying on her back with a balance pad under her waist, or without, like a relaxation pose, only more open and relaxed (see: photo 2, after the Dolphin). I let her do it, I felt that if she instinctively wanted to be in it, she certainly couldn't hurt herself, and it certainly has a similarly profound effect as the incarnational exercise at the end, even if the positioning is different, but the stillness, relaxation and turning inwards happens.

5. Summary of your practice

The exercises were not done every day as a precaution, but usually 3 times a week.

She needs support often due to the laxity of her muscle tone. It was a good experience to go through the possibilities of using a cushion or a blanket or a balance pad, or myself as a helper to create the most perfect result for performing the exercises. These choices have remained throughout, with no lessening of the need for them, so we didn't abandon them.

We had pleasant, opening conversations. Extra reclining figure eight rubs on the back and waist made the "must do" exercise an even more enjoyable program together. It was a highlight of the day for me, and I believe for her as well. I was glad that she likes the Windmill exercise, I felt that she was safe in it.



When different, new exercises were added to the rotation, she felt good doing them, but they made her very tired. Now (mid-February) she can do almost the whole rotation. She still gets tired, it makes her very sleepy, which makes her fall asleep quickly and soundly when it's time to go to bed. Sometimes she relaxes so much that she snores loudly, although this could be because of her braces.

Also, it has been a good experience that when she doesn't feel like talking, she listens to an audio book during the Windmill exercise.

When I showed her the Dolphin exercise in February, it became an instant favorite. She really enjoys doing it. Together, paying attention to the sequence, holding her legs together the whole time. She likes the twisting and the feeling of being able to move around in it. If I didn't hold her legs together, they would quickly slip apart.

With the Windmill and the Dolphin exercises, she would sometimes crack her spine, hips and waist. She was fine, and said it did not hurt.

If we missed a few days of exercise because of other circumstances, she would ask me whether we should do those "whatchamacallit" exercises. :-)

She liked and needed the support of the balance pad throughout. It is comfortable for her, she doesn't like to take it out from underneath herself, she says it feels much better when it is under her and propping her waist up.

There were two ways we used the supporting pads. At first she had her feet on the end of the larger pad (see photo 3), then after a few weeks of practice she was fine with her feet on the ground and only her waist on the pad.

In the supine exercises, when she had to relax her hips, her legs were very wide apart, twisting out to the sides. The best way to keep her relaxed and able to do the exercises was to hold her legs with my own feet (see photo 4) The suggested pillow support was not comfortable and the weight of her legs would topple even the larger pillows.

It was nice to see that she understood the importance of small movements, she didn't find it difficult to do the tasks slowly.

Overall, I enjoyed the exercise, learned a lot from it, and can see and feel the benefits. As I had no demonstrated residual reflexes from her, I was unable to move purposefully through the exercises. I was also driven by the overall beneficial effects and practice, and the confidence that I was doing no harm. Overall, it's beneficial for the nervous system and I trusted that it would somehow help with the difficulties in one way or another.



I tried the Windmill exercise with several children, incorporating it into my individual sessions. It has even been a big hit in my adult yoga classes when we relax this way.

6, Attach the results of the reflex and sensory testing and detailed documentation of the practical work!

Attached photos of the exercises and situations.

15 February 2024.





















Erasmus+ Project: Cooperation for Movement Therapy in schools
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