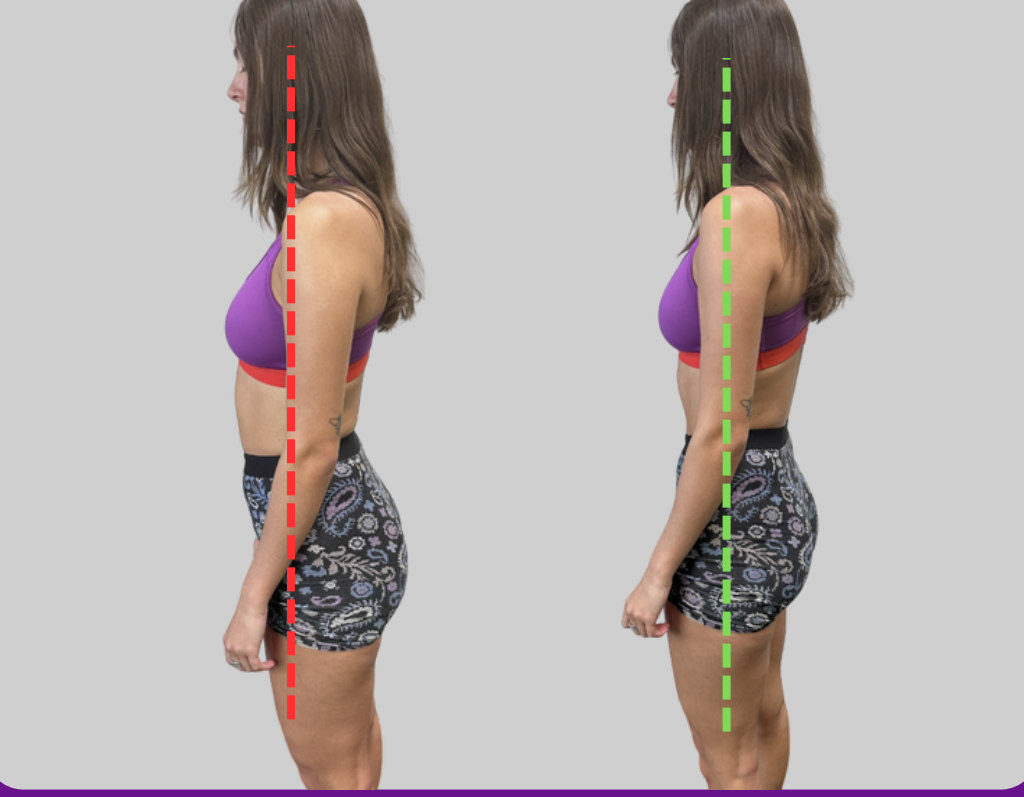

THE POSTURE PLAYBOOK

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DISCLAIMER

This eBook is for educational purposes only. It is not meant to serve as a means of injury diagnosis or treatment. If you are in pain, go see a qualified physical therapist.

"I've worked with many practitioners. No one could fix anything, despite some working at even the highest level. After working with Conor I feel great for the first time in years!"

- Tom

Student Athlete

INTRODUCTION

Welcome to the ebook! I am excited to share with you an easily digestible guide to understanding and improving your posture.

The goal for this guide is to give you the resources to understand exactly why your body looks the way it does, why it can feel asymmetrical, and how we can truly address the root cause of poor posture and subsequently, poor movement patterns.

The ebook will be in the following order:

1. What is posture really telling us?
2. How to self-assess your posture
3. Tools and exercises to being to fix your problems

RE-DEFINING POSTURE

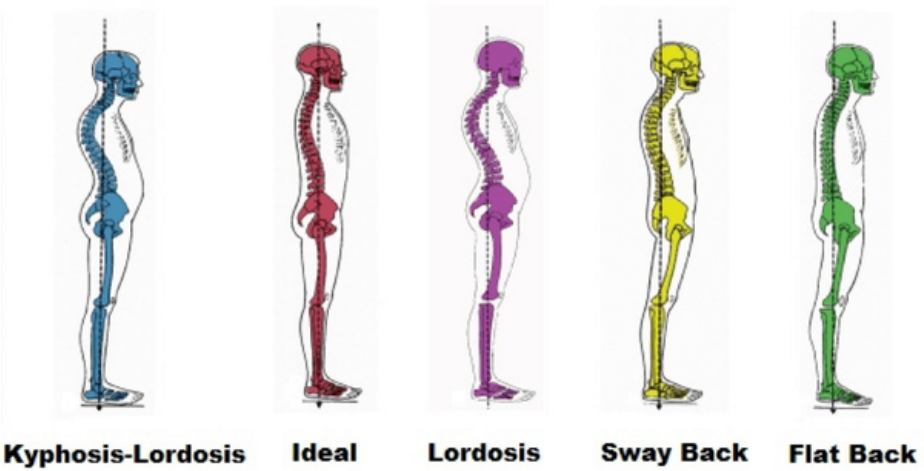
Posture is a representation of how we manage our center of gravity.

Our center of gravity can be described how we distribute our bodyweight from head to toe in relationship to the ground.

Essentially, all our body is trying to do is keep itself upright against gravity.

Gravity is constantly pushing us down, so we need to find the strategy that is best available to us based on our genetics, movement capabilities, and injury history to stay upright.

Therefore, we will find a way to organize our spine curves around an invisible line that runs down the center of our body.
This is what every single posture has in common:

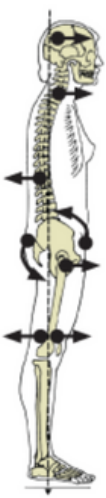


We will tilt our pelvis forward, backward, and side-to-side to best accomplish this.

But then, our shoulders have to adjust to accommodate for that to balance out our center of gravity.

For example, if my pelvis tilts forward, my ribcage has to move back, or else I will fall forward:

If my pelvis tilts back, my head/neck has to move forward, or else I will fall backward:



If my pelvis tilts up on one side, the shoulder on that side will tend to shift down in many cases:

Hopefully you're starting to get the picture.

The point is, we can't keep looking as posture as if:

"Oh these muscles are tight/overactive and these other ones are long/underactive, so all I need to do is stretch the tight ones and activate the long ones!"

No. That is addressing the symptom, not the actual cause.

We need to ask ***WHY.***

Why are those muscles tight in the first place?

Did your body decide to wake up one day and create tight hip flexors and pec muscles?

Did your body think it was a good idea for you to live with Anterior Pelvic Tilt because it thought it would be fun?

Of course not. Everything our body does happens for a reason.

Our bodies are not stupid. Our brains, working constantly at a sub-conscious level to monitor our center of gravity, balance, and threat level, are not stupid.

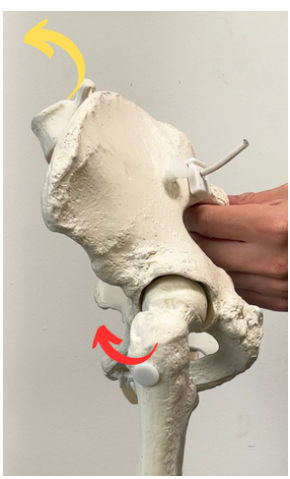
The Real Answer

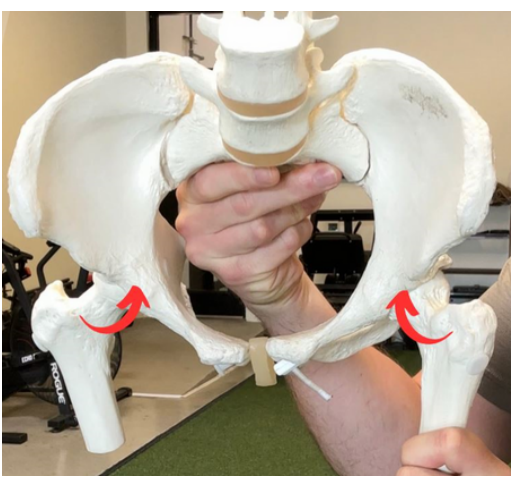
Going back to the example before, maybe your pelvis is tipped forward into Anterior Pelvic Tilt because you are trying to find something you're lacking.

For example, we generally need internal rotation at the hips to produce force and move forward in the gait (walking) cycle.

If we lack this ability to create internal rotation at the hips, we will need to find it somewhere else.

When our pelvis tilts forward, we pick up internal rotation:





This is a strategy to pick up compensatory internal rotation. Now you can produce that force you previously couldn't, but you also set off the cascade of compensations that lead to the pelvis tipping forward and ribcage tipping back:

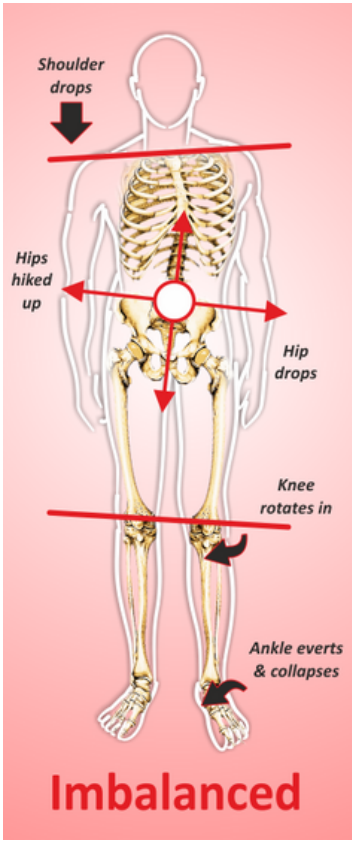
Now your hip flexors feel tight all the time, so you think that is the issue.

This doesn't apply to just both sides of the body at the same time, or just from front-to-back.

This can, and does, have major implications on side-to-side imbalances as well.

Another example: Maybe you sprained your left ankle badly when you were 16 years old.

Your body didn't trust it's ability to load your left side any more so you shifted your center of gravity to your right side, but now you set off that cascade of compensations where your right hip hikes up, your right shoulder lowers.



Now your right low back and knee hurts because you can't shift out of your right side and you're overloading your body on that side.

Maybe now your left knee hurts because every time you load your left side, your body doesn't trust your left side and your knee collapses in because it's making up for the fact that you can't properly load your ankle.

Hopefully this is starting to make sense.

Tight muscles, pain, and limited range of motion are all symptoms of a greater underlying problem: The inability for us to control our center of gravity and effectively shift from one side to another in the gait cycle.

I promise you, if you improve those things, in most cases a lot of these “problems” suddenly start to disappear.

This is going to be easy in some cases, and hard in others.

Anyone who tells you it’s always an easy fix is lying to you.

In the upcoming section, I’m going to show you easy tools for understanding how your body is presenting the way it is today, and what those easy assessments tell you.

Then, we’re going to get into exactly what you can start to do about it.

SIMPLE ASSESSMENTS

We are going to use three simple assessments to understand how our body's posture is organized:

1. Head Rotation
2. Shoulder Abduction
3. Pelvis Rotation

These three assessments are the most common tests I use in my Biomechanics Course, and in my every day practice.

Let me show you why:

Head Rotation:

CLICK HERE

Ideal range of motion: 30 degrees, or the ability to get your chin to the front of your collarbone without **any** restriction.

You'll know when to stop when you feel any amount of tension in your neck beyond about a 1/10 intensity.

This test tells us to what side you can more easily turn your head/neck towards.

In order to do that optimally, we need to be able to have a “neutral” position of the neck to allow the vertebrae to rotate fluidly and as needed for full range of motion.

If we have less than 30 degrees on both sides, that tell us that your head is likely in a forward position, creating restrictions on both sides.

If you have noticeably more range of motion, or one side feels easier than the other, then the side that is easier is very likely the side your head is constantly rotated towards to some extent throughout the day and within your posture.

You just don’t feel it because your body has normalized this within you. You don’t know any different. Below is obviously exaggerated for visual demonstration.

Rightward-Oriented Head

=

Better Right Rotation

Shoulder Abduction:

CLICK HERE

Ideal range of motion: 45 degrees, or the ability to get your humerus (arm bone) at a perfectly diagonal angle to the ground.

You'll know when to stop when you feel **any** amount of tension in your pec, arm, or shoulder beyond about a 2/10 intensity.

This test is assessing for your ability to turn your sternum/ribcage to one side, and have your shoulder rotate in a way that represents freedom of movement without restriction.

If you have less than 45 degrees on both sides, you likely have some degree of tightness/compression of your shoulder because your ribcage isn't in a good position to allow your scapula (shoulder blade) to move freely on it.

If one side feels noticeably better than the other, then you are likely turned towards that side within your ribcage.

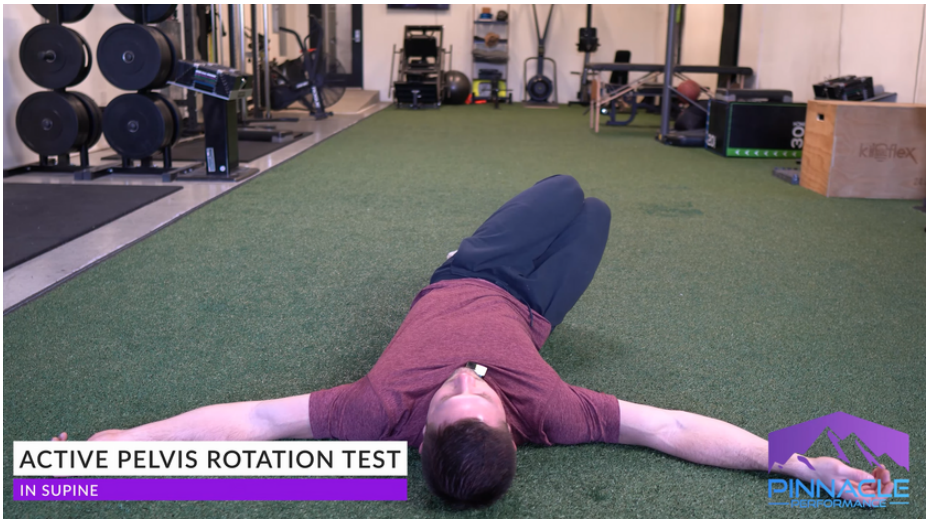
Here is a simple way you can visualize that. If your ribcage is turned to the right, then it's going to be easy for you to abduct your shoulder on that side, which will naturally make your left side more challenging:

Rightward-Oriented Trunk

=

Better Right Abduction

Pelvis Rotation:



CLICK HERE

Ideal range of motion: 70 degrees, meaning the crease of your knees gets almost to parallel with the table/floor.

You'll know when to stop when you feel **any** amount of tension in your low back, hips, or ribs beyond about a 2/10 intensity.

This test is assessing for your ability to turn your pelvis towards a given side.

You are keeping your trunk stable while your pelvis is turning towards one side.

If you are limited less than 70 degrees on both sides, you likely have a forward center of gravity which is creating a tight low back and flared ribcage on both sides.

If one side is noticeably easier than the other, then your pelvis is very likely turned towards that side, limiting your ability to shift out of the side that's easier and making it harder to shift into the side that is more limited.

Rightward-Oriented Pelvis

=

Better Right Pelvis Rotation

INTERPRETING ASSESSMENTS

Ultimately, everyone is going to have some limitation. If you pass all the tests, I would bet you are pushing too hard through restriction.

Keep in mind that you need to stop these tests at the first sign of any meaningful tension.

After you gather your assessment results, one of two things will become clear:

1. You have all your tests indicating your are turned towards one side
2. You have mixed results

Think of a rubix cube.

Your head, ribcage, and pelvis are all oriented in a given direction - the left or right.

Your head can be oriented to the left while your ribcage and pelvis are oriented to the right:

Your head and ribcage can be turned to the left while your pelvis is turned to the right:

Everyone will be a bit different. But the key is, considering how this is affecting your center of gravity and your ability to shift from side to side.

STRATEGIES TO IMPROVE POSTURE & MOVEMENT

There are two ways to start to fix your posture and movement capabilities.

It will depend on your assessments.

Method #1

If you were limited on both sides in two out of three, or all three, assessments then you should start here.

For example, if you two or more of the following:

- Less than 30 degrees of head rotation on **both sides**
- Less than 45 degrees of shoulder abduction on **both sides**
- Less than 70 degrees of trunk rotation on **both sides**

You very likely have significant restrictions in your ability to control your center of gravity. It's likely forward to some extent.

You have either anterior or posterior pelvic tilt which is creating tightness on either the front or back side of your hips, which both can significantly restrict these measurements.

If you have anterior pelvic tilt, you are stuck in a more forward position of your pelvis. The goal would be to help you find your heels (rearfoot) with pulling your pelvis into more of a relative backward position.

Here are some exercises that helps with this:

EXERCISE #1:

COMPLETE 3+ SETS OF THE GIVEN AMOUNT OF REPETITIONS OR BREATH CYCLES

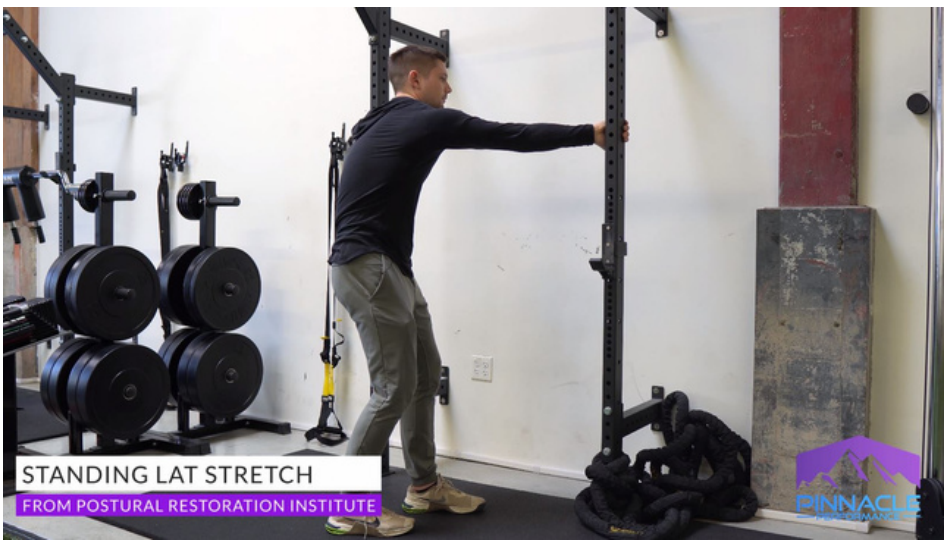
EXERCISE	REPS
90/90 Hip Lift with Active Ball Squeeze **Note:** Some benefit from not squeezing the ball at all, but most do. Experiment with what works best for you. If you do squeeze, make sure everything else stays relaxed outside of hamstrings/inner thighs.	8 breaths

EXERCISE VIDEO LINK

EXERCISE #2:

COMPLETE 3+ SETS OF THE GIVEN AMOUNT OF REPETITIONS OR BREATH CYCLES

EXERCISE	REPS
Standing Latissimus Stretch	8 breaths per side



EXERCISE VIDEO LINK

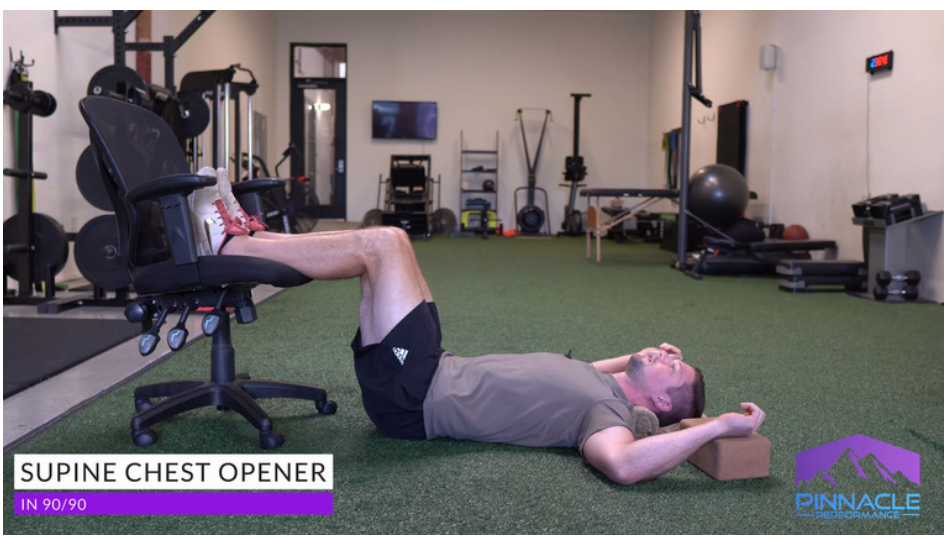
If you have posterior pelvic tilt, you are stuck in a more backward position of your pelvis. The goal would be to help you create a more neutral pelvis with a little bit more forward position of your pelvis and to help your find your center of gmore over your mid-foot.

Here are some exercises that help with this:

EXERCISE #1:

COMPLETE 3+ SETS OF THE GIVEN AMOUNT OF REPETITIONS OR BREATH CYCLES

EXERCISE	REPS
Supine Chest Opener	5-8 breaths (however many you can do without feeling any neck at all)



EXERCISE VIDEO LINK

EXERCISE #2:

COMPLETE 3+ SETS OF THE GIVEN AMOUNT OF REPETITIONS OR BREATH CYCLES

EXERCISE	REPS
90/90 Hip Lift with Extension Bias	5-8 breaths

EXERCISE VIDEO LINK

Method #2

If you had large asymmetries from side to side of around 10 degrees or more in two out of three, or all three tests, then this section is for you.

For example:

- **Head Rotation:** 10 Left, 20 Right
- **Shoulder Abduction:** 20 Left, 45 Right
- **Pelvis Rotation:** 55 Left, 70 Right

That would be a very asymmetrical body as all three segments are facing the right side. This would require the subsequent approach.

Or:

- **Head Rotation:** 30 Left, 15 Right
- **Shoulder Abduction:** 40 Left, 15 Right
- **Pelvis Rotation:** 50 Left, 70 Right

This would be a more complex case since the head and ribcage is facing the left, but the pelvis is facing the right. However, it's still quite asymmetrical.

To simplify things, as long as you have 2/3 or 3/3 tests indicating you are facing one direction more than the other, this indicates you are overall more shifted to that side and shifted away from the other side.

If you want to address this more in detail, check out my Beginner Body Restoration program.

If you want to learn more about this in detail, check out my Beginner Biomechanics Course.

Therefore, you would do the following exercises. Do this first one lying on the side you are shifted away from. For example, if I was shifted left overall, I would lay on my right side:

EXERCISE #1:

COMPLETE 3+ SETS OF THE GIVEN AMOUNT OF REPETITIONS OR BREATH CYCLES

EXERCISE	REPS
Sidelying Grounding	5 breaths

EXERCISE VIDEO LINK

Do this next one lying on the side you are shifted towards, with the top (active) leg being the one you are shifted away from. For example, if I was shifted right, I would do this lying on my right side:

EXERCISE	REPS
Sidelying Adductor Pullback	5 breaths

EXERCISE VIDEO LINK

After doing these exercises for about 3 sets of 5 slow breath cycles each, try re-testing your measurements and see what happens!

They should feel a bit easier :)

Ending Notes

I hope you enjoyed the ebook! I put effort into this, and I hope you appreciate the resource and it starts to help guide you in the right direction.

Again, If you want to address this more in detail, check out my Beginner Body Restoration program.

If you want to learn more about this in detail, check out my Beginner Biomechanics Course.

Please keep in mind this program is meant to be self-guided and is not me training or working with you individually. This is a free program I give out. It would not be fair to expect me to answer questions or give you individual help for free.

My YouTube channel is a fantastic resource to learn more.

I sincerely believe that giving out free, high quality content is the best way to attract people to what I'm doing. That's why you can expect this quality content to continue coming your way since you are on my email list.

Wishing you all the best,
Conor