Franklin Method® Pelvic Floor Fascia Trainer
Dynamic Pelvic Floor Fascia Workshop Exercise Guide

Day 1

1. **Tap yourself down.** Abdomen, thorax, legs, back and arms.

2. **Shake your body. Your legs, arms and your entire body.**

3. **One minute of concentration.** Just feel your body, let your thoughts quieten.

4. **Lift and lower your shoulders:** Now let’s compare the effect of positive and negative words and imagery. Imagine your shoulders are flexible and mobile, compare this with imagining the shoulders are tight and stuck. Use imagery such as balloon shoulders, strings lifting the shoulders.

5. **Get the pelvis moving:** Forward, backwards, side to side, rotation and figure of 8.

6. **Find the hip joint:** It’s located in the middle and slightly below the inguinal ligament.

7. **Get the pelvis moving:** Tilt (rotate) the pelvis forwards and backwards, lift one side of the pelvis and walk three steps in a circle.

8. **Are we training something?** By challenging it, we develop it. If you would like to have elastic fascia, you have to move elastically.

9. **Breathing and the pelvic floor:** The diaphragm and pelvic floor move downwards as you inhale: We can mirror the movement of the diaphragm and the pelvic floor using our hands as we breathe.

10. **Walk around the room with awareness of the movement of our diaphragm and pelvic floor:** As we walk, we visualize the movement of the pelvic floor. How does this imagery influence our gait?

11. **Our pelvis is flexible to absorb forces, enable child birth, bowel movements and walking.**

12. **Widening and narrowing the pelvic outlet:** We bend and then extend the legs, and mirror the change in our pelvis and the movement of the sit bones with our hands.

13. **We now “find” our sit bones or ischial tuberosity:** When we bend the hips, the sit bones move apart slightly, and then move back together when we stretch. As a result, every time you bend your hips, you are training your pelvic floor, because the pelvic floor muscles and fasciae stretch somewhat and then contract again, changing their tone.

14. **Sit bones bouncing on a ball:** We imagine that there’s a ball behind us. When we bend the hips, the sit bones bounce on the ball, and the movement becomes an elastic spring-back. (External focus)

15. **The pelvis is a ball:** Now we imagine that the pelvis is a ball. With every hip movement, we visualize that this pelvic ball is bouncing up and down on an imaginary floor. (Internal focus)
16. **Touch the internal obturator muscle:** The tendinous arch (Arcus Tendineus) lateral to the internal obturator is the area where a large part of the M. levator ani is attached. The obturator internus (OI) and its fasciae represent the continuation of the fascia of the iliacus and it is connected to many other fascia layers. We touch the sit bones and glide our fingers upwards to the ischial spine. Your fingers are now on the internal obturator. We turn the leg inwards and outwards to feel the internal obturator in action. We visualize the change in tension in the ATLA.

17. **Practice the walls of the pelvic floor with hand modeling:** The back wall is made up of the sacrum and its fascia as well as the piriformis and its fascia. The side and front walls are the inner obturator and its fascia, the floor is the coccygeus and the levator ani. These muscles are covered by the parietal fascia of the pelvis.

18. **Squatting with all layers:** We bend and extend the hip joints and then visualize the movement of the individual layers in sequence. From bottom to top, and from top to bottom. We imagine an accordion within the pelvis which contracts and then unfolds again.

19. **Only touch one sit bone:** We place our fingers under the sit bone on one side and repeat the squatting movement 4 times. Try to move as elastically as possible. Now compare the sides. Is the pelvic floor more active? Is the back more relaxed?

20. **Lift a leg:** In order to promote the forwards movement of the sit bone and movement in the layers of the pelvic floor, we lift our leg up and down on the side where we are touching the sit bone.

21. **Now repeat with a side step:** After lifting the leg, we perform a sideways step with a deep hip movement on the same side. We control the rebound and return elegantly back to our starting position. We repeat this movement 4 times. Now we compare sides, before repeating on the other side.

**Day 2**

1. **Tap yourself down.** Abdomen, thorax, legs, back and arms.

2. **Shake your body.** Your legs, arms, your entire body.

3. **One minute of concentration.** Just feel your body, let your thoughts quieten.

4. **Pelvis tilting with imagery:** Visualize the pelvis is a bowl filled with water. The water is swashing back and forth. Imagine you are alternately pushing your lower back and belly into a pillow to ensure the flexion and extension of the lumbar spine.

5. **Lift and lower your leg with imagery:** An imaginary string or a gust of air lifts the thigh upward.

6. **We move one hip joint with one hand on our shoulder:** We move the leg within the hip joint. One hand is on the shoulder, the other is on the hip joint of the same side. We make circles with the knee to the inside and outside.

7. **Breathing with “SSS” and pelvic floor:** When I exhale on “SSS”, the pelvic and diaphragm floor move up. When I breathe in, the pelvic floor and diaphragm move downwards. Always pause between the “SSS” breaths. Use muscle and fascia imagery, such as filament sliding and fascial geometry as you do this.
8. **Walk around and imagine the pelvic floor moving up on “SSS”:** Incorporate imagery into your daily life. Walk and imagine the pelvic floor as a flying carpet, for example.

9. **We now focus on the perineal body:** It is a connection point for the layers of fascia and muscles in the pelvis in front of the anal sphincter. When we breathe out (also on “SSS”), this point moves upwards and slightly forwards.

10. **We imagine that this connection point is slowly bobbing up and down with the breath:** It is a ball bouncing up and down in slow motion.

11. **Feet and pelvic floor:** If we supinate our feet and shift the weight onto the outer foot, we notice that the coccyx moves forwards and the sit bones move together. The pelvic floor contracts. If we pronate and shift the weight onto the inner foot, we notice that the coccyx moves backwards and the sit bones move apart. The pelvic floor widens and the pelvis tilts forwards.

12. **First rib and pelvic floor:** The torassic outlet is the roof of the thoracic cage. Place your fingers at the front and back of the first rib and visualize this circle together with the diaphragm and pelvic floor. Perform movements with your torso and visualize the changing relationship of these floors. Imagine your first rib floating up as the diaphragm moves down during inhalation.

13. **Practice sacrum movement:** Touch your coccyx and perform deep knee bends. The sacrum nutates, and the coccyx moves back. When the legs are extended, the sacrum moves in counternutation, while the coccyx moves forwards.

14. **Touch the internal obturator (anterior side wall of the pelvic floor) and visualize:** The tendinous arch lateral to the internal obturator is the area where a large part of the M. levator ani is attached. The obturator internus (OI) and its fasciae represent the continuation of the fascia of the iliacus and it is connected to many other fascia layers. The fasciae of the OI are connected with the sacrotuberous ligament. We touch the back of the sit bone. We move our fingers upwards to the ischial spine. Your fingers are now on the internal obturator. We turn the leg inwards and outwards in order to feel the internal obturator in action. We imagine the change in tension in the ATLA. We then compare sides.

15. **In the sitting position rock your sit bones front and back:** Also practice walking front and back on your sit bones and swinging one sit bone front and back.

16. **We now sit with a towel or balls under the sit bones:** Rocking back and forth. We initiate the movement from the pelvic floor. Sit bones together, coccyx to pubic bone and vice versa. The shoulders and breathing remain as relaxed as possible.

17. **Rocking back and forth:** We initiate the movement from the pelvic floor. We start slowly and then increase our speed. The shoulders and breathing remain as relaxed as possible.

18. **Rocking back and forth with our hand in the armpit:** We initiate the movement from the pelvic floor.

19. **Pelvic floor pull-ups for power and flexibility:** We place a towel or ball under one sit bone. We then drop the other sit bone down onto the chair and lift it up again. This moves the sit bones apart and then back together again. Ten repetitions.

20. **Stand up and sit down:** We initiate standing up from the pelvic floor. The shoulders and breathing remain relaxed. We visualize that the pelvic floor is a flying carpet.

21. **Stand up and sit down:** Imagine the movement of the pelvic bones as you do this.
22. **Hop and tap:** We hop up and down, and tap the buttocks, back and diaphragm.

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**Day 3**

1. **Tap yourself down.** Abdomen, thorax, legs, back and arms.
2. **Shake your body. Your legs, arms, your entire body.**
3. **One minute of concentration.** Just feel your body, let your thoughts quieten.
4. **Lift your shoulders up and down, bend and stretch your legs.** How can I improve this movement using self-talk and imagery? Imagery for legs: Legs/knees moving through a bubble bath.
5. **Pelvis tilting:** The urogenital triangle and the anal triangle are located on different levels. We tilt the pelvis back and imagine the front triangle pointing further forwards; we tilt the pelvis back and imagine the anal triangle pointing further backwards.
6. **Focus on the perineum, move the pubic branches:** We touch the pubic bones as we bend and extend the legs. We visualize how the descending pubic branches and the rising pubic branches move gently apart when bending the hips and then swing back towards each other when the hips are extended. We demonstrate the movement of these pubic branches with our hands. Imagine wings slowly waving.
7. **Now we’ll work with one side of the urogenital triangle:** We touch the pubic symphysis and the sit bone on one side. We bend and extend the legs. We imagine this triangle expanding and contracting. We place our weight on the leg on this side. Now we can feel the movement of the sit bone much more clearly.
8. **Bladder lifting:** We move our fingers along the umbilical ligament to the navel, moving from there to the lig. teres, falciform ligament, the diaphragm, pericardium and the ligaments between the pericardium, sternum and spinal column. We lift the navel and visualize the upwards pull on the front of the bladder. We lift the heart and feel the pull from the bladder to the heart and beyond. We pause to feel this wonderful posture and the uplifting inner feeling.
9. **Feel the connection to the abdominal muscles in the pelvic floor:** Move your hands upwards from your abdomen and pull them upwards with the spine slightly extended. We can feel the pull in the pelvic floor both on a superficial level (Colles’ fascia) and deeper (transversus abdominis and other abdominal muscles)
10. **Feel the connection of the thoracolumbar fascia to the pelvic floor:** Flex your lumbar spine and glide your hands upwards on the thoracolumbar fascia. Feel the pull into the tail bone, anococcygeal ligament and pelvic floor.
11. **Connection of the leg fascia to the pelvic floor. One leg on a chair:** We feel the adductor longus and magnus with our hands. We stroke along this muscle to the knee and notice the effect on the pubic bone. We move our hands from the adductors to the pelvis and perineum.
12. **One leg on the chair:** Run your hand from the hamstring muscles to the pelvis, sit bones and levator ani. We visualize the connection of the leg fascia (fascia lata) to the pelvic floor fascia.
13. **One leg on a chair to the side:** We bend and extend the legs in a loose bobbing motion. We feel the elastic springing of the pelvic fascia, particularly the membrana perinei and the fascia of perineum.
14. **One leg on the chair. Feel and activate the connection of the pelvic floor with the oblique abdominal muscles:** We stroke our hands from the sit bone and hip joint over the symphysis to the external oblique abdominal muscles on the opposite side. We rotate our spine as we do so. We feel the pull from the fascia of the pelvic floor through to the fascia of the abdominal muscles.

15. **Place each foot on a towel and turn them inwards and outwards:** We can feel how this influences the pelvic floor. When the feet are turned inwards, it stretches the posterior pelvic floor, while when the feet are turned outwards, the anterior pelvic floor is primarily extended.

16. **Place each foot on a towel and turn them inwards and outwards while squatting:** When the feet are turned inwards we perform a squat, when the feet are turned out with come back up and extend our legs. This is a powerful stimulus for the pelvic floor.

17. **Adductor to pelvic floor connection:** Place your feet parallel. Then abduct one leg by sliding that foot over the floor. Bend your knees as you do this and perform a slight squatting motion. As you adduct the back in, feel the connection of the adductors to the pelvic floor.

18. **Notice your posture and walk around the room:** Experience the connections into the pelvic floor, notice the swing of your legs.

19. **Hop up and down:** Tap your gluts and lower back four times. Notice your posture and your general body feeling.