

Full Episode Transcript

With Your Host

Susi Hately

Male Announcer: You're listening to *From Pain to Possibility* with Susi Hately. You will hear Susi's best ideas on how to reduce or even eradicate your pain and learn how to listen to your body when it whispers so you don't have to hear it scream. And now here's your host, Susi Hately.

Welcome and welcome back. I'm so glad you're here because today I want to get into scapular setting. And the concept of stabilizing or setting the scapula or shoulder blades as a prelude to doing a lot of rehabilitative exercises and why I don't love the idea of it. And why I don't love it, where I think the languaging around that concept can go sideways and not be effective for people.

And then I'm going to outline some of the alternatives to it that can also be additive. So if you love this idea of scapular setting, some of the concepts will blend in and I think up-level how you're teaching it or how you're doing it with your own body. And then if you're like me and you don't totally love the idea of it, how you can utilize these alternatives to really make a shift into your shoulder girdle.

If you love what you're hearing here, you might also love the upcoming program that I'm leading, which is Power of Pure Movement: Strong and Steady Shoulders. And you can find that over at functionalsynergy.com/shoulders.

One of the inspirations for this particular mini series and the program that I'm leading has been the Power of the Pits program that I've been running almost on a weekly basis for, goodness, I think it's almost two years now. We've run almost 10,000 people through that program and the feedback is really interesting.

It's only an hour long and a lot of it, like we have 10 minutes of contact setting with some anatomy and just where I'm coming from. And then we get into about 40 or 45 minutes of movement. And then the rest of the time is Q&A. And so it's just an hour, but again, it's always astonishing what the

power of breathing and movement and self-awareness can do for someone who has had a persistency of issues.

And it's out of the feedback I've been receiving, particularly from people who have come out of breast cancer and people who have had frozen shoulders, and also people who have had a chronicity of symptoms, whether they have been labeled or not. It's fascinating, they're like blown away by, oh my gosh, it was breathing that actually made this huge release happen and I never knew that my QL on one side was actually impacting my axilla or my pit area on the other.

And so that really has been the fuel for leading me to teach now. And then when I look back through my podcast, I realize I don't speak a lot about the shoulders. So I'm going to change that. And that's what we're going to be doing today and for the next few episodes.

Now, if you do want to check out the pits, then I encourage you to go visit functionalsynergy.com/powerpits and you can read about the program there. That's the one hour program.

Okay, so let's get into this episode here. So the first question, I think, to really ask is what does it mean to set the shoulder blades or set the scapula? I'm going to kind of weave between those two terms. So scapula is, obviously, the anatomical term for shoulder blades. And I mention that because the people listening to this podcast are both professionals and also non healthcare professionals, so people who would be clientele. So I want to keep the language open to both groups of people.

So the idea about setting the shoulder blades is because the shoulder blades have such an important function in the shoulder girdle, setting the shoulder blades or setting the scapula puts the scapula or shoulder blades in the position it should be. And the idea is it's putting it in the right place so that when you get to work on strengthening and stabilizing, you're doing it from the right place and you can build proper neuromuscular development from there. That's the idea about it.

Now, this leads into why it can go wrong, and in some cases terribly wrong. There is an assumption that if we put the shoulder blades in the right place, that, A, they were in the wrong place to begin with and simply moving them into the right place by moving the shoulder blade is where it's at.

And what I have noticed is that there is such a strong correlation between the shoulder blades and what's between the ribs and the pelvis. And I'm not going to name a muscle because there's lots of tissue in that area that if I simply change up how the ribs and the pelvis are coordinating with each other, so the kind of fuel source being the muscles in that abdominal region are functioning, that can change the dynamic of the blades. So it's not one particular muscle, but really it's the orchestra of those muscles working better together.

When I have or can help a client get the leg bone moving better in the pelvis and the pelvis becoming more stable, that can change up the orientation of the blades. I've seen the blade change position by what's going on at the knee or at the feet. So sometimes where the blades are sitting is not because of the blade. So right there suggesting that if your blades are in a position that does not look right posturally, that's the problem. That, I think, is the first problem in many cases.

And yeah, it's great to put them in the right place and then maybe at some point the other tissue and neuromuscular things can change. I'm sure that's possible, I just, man, it's like one of those things when you've been at this for as long as I have, almost 30 years, and I know I've got lots of cognitive bias around, obviously, the results I get.

And I've seen more tension build up and the clientele who come to see me who have tried doing that many, many, many times, it just hasn't worked for them. So I'm clear that this obviously works for many people or it wouldn't be a cue that's provided. And it's just curious. I'll just leave it at that, it's just really curious.

So some of the common cues that I have seen with clientele who have come to see me, some of the common cues that I have seen that can go kind of haywire or sideways are pulling the shoulders back or pulling the shoulder blades or the scapula toward the spine, as if to say you should retract, pull those shoulder blades toward the spine because pulling them towards the spine is the right position.

Or your shoulders should be in line with your ears. And if your shoulders aren't in line with your ears, so pull your shoulders back and that will help the position of where your blades are. Which is kind of goofy because your blades, yes, they're connected to your shoulder girdle, obviously, but where their place isn't necessarily correlated to where your shoulder joint is in line with your ear.

Like I haven't found that to be correlated. I can move my shoulder in line with my ear and not move my blade or I can get really congested around my blade, particularly if my blade is quite sticky. So that doesn't always correlate.

Another one is pulling the blades down your back or down into your back pockets or down into the opposite back pocket. A lot of times with that cue, people can get way over engaged down through their mid lower back. So sometimes the QL can get going or the lower part of the erector spinae or like the lower lat area. I mean, just lots of different tissue in that area.

I can't say specifically which muscle group, but if I place my hands on somebody and they're pulling their shoulder blades down, it's not uncommon for that lower back or the mid back to really get involved when it ought not to be.

When we're pulling those blades down, it's the lower traps, but not like the upper part of the lower back. So I would call that the mid back area. And certainly not the lower, lower back by the pelvis and not the glutes, right? Not the butt, if we're isolating those shoulder blades and the muscles around the shoulder blades well.

So there can be a lot of extra force and fuel that's being utilized to pull the shoulder blades down, which can create up-leveled compensatory strategies that might not serve people.

Another cue that I've often heard is you should feel the blades gently widening. And I am all for imagery like that. I'm all for people both interoceptively and proprioceptively tuning in. But here's the problem, particularly with cues like that for the back of our body, it's really difficult to actually see if that's in fact what we're doing.

We can perceive and have an idea that we might be widening our shoulder blades away from the spine, but how do we know we're actually doing it? Because we might think that's what we're feeling, but we might be doing anything but that.

And I realize that might be difficult for some people to hear because it's like, but I'm feeling that. It's like, yeah, but if we put a mirror and you could see through a mirror, or put a camera, a lot of times when my clients have been given that cue and we actually see what they're doing, it's not that.

So then what my job is, is to support them and actually interoceptively cluing into what they are doing, and them proprioceptively becoming more aware of where those body parts are in space.

Now let me just take a short little break here because something I have not defined here is the interoceptive and proprioceptive. And I apologize for that. I'm making an assumption that many people have listened to these podcasts episodes where I have described this or they're coming in with that knowledge. So let me just make sure to identify what I mean by interoception and proprioception.

So interoception is our ability to feel sensation. And a lot of times when we look at this from a Google search, it's sensations like hunger, sensations like heartbeat. And I add into that other sensations like a sensation of stretch or strength or like muscular sensations. And then there's

proprioceptive awareness, which is, can we feel where our body parts are in space?

Now, sometimes there can be a bit of a blur between what in fact is interoception and proprioception, because if I'm noticing how my arm is moving in space and I'd have my arm coming up, for example, up towards the sky, I can feel it moving. And I can also interoceptively feel sensations associated with that. So semantically sometimes the lines can get blurred between what we're feeling. Most importantly though, is that we're tuning into a semantic embodied sense of how we are moving.

And it's that feeling sense I really love cultivating with my clients, because I think that is one of the fundamental keys for helping people to tune in. And as I circle this information back to the concept of this episode, it's where I think a big part of the setting of the scapula can go sideways because when we're talking about setting the scapula and it's being spoken about from a very logical, like this is where the shoulder blades should be placed, we start to be thinking about this really from a neck up perspective.

It's a cognitive perception of where we think these blades should be, and by the way, where your blades are is wrong. So we need to place them in the place that's right. And for all the reasons I've already mentioned, making all the assumptions about, well, is it the blades issue that the blades are not in the correct space? Or are the blades simply a result of the forces that are playing out on one's body?

And when we start to shift up the mechanics in other parts of the body, they might just come right back into position. So in those cases, setting the shoulder blades could actually be a compensation on top of a compensation, then we're layering more tension or limiting neuromuscular patterns on top of each other. So it's another reason why I don't totally love the term.

And so this is where I then shift gears and say, okay, so then Susi, how do you work with this in that way? So I'm going to talk about three ideas that I think are really important.

The first one comes from the principles of movement that I teach. I've got eight principles of movement, and I'll move through these in a brief way to give you some ideas of how I work with this. I'm then going to get into two key questions that I ask myself when I'm watching somebody move. And then I want to speak briefly about the planes of movement.

So the first is the principles of movement. And when I'm working with a client, these are fundamental in supporting them in tuning in, both interoceptively and proprioceptively, and being able to listen. And the first one is to nourish or to nurture relaxation, because when we can first settle in, we can become aware.

And we can't change anything we're not aware of. So if we can start with awareness of just where our body parts are in space and how they're moving, what's compensating, what's not compensating, and then start to quiet what's compensating and nurture what's working, then we can start to really build upon that.

And sometimes with the setting of the shoulder blades cue, the practitioners and the clients are not doing that. They're just saying, okay, this is not right, so here's how you correct it. But it's not actually addressing underneath it all what's correlating to why those blades are in a funky position in the first place.

So when we can first nurture relaxation and settle into how all of us, like all of our body is moving, how we are breathing, how we're tuning in and settle, settle, settle, settle, then we can start to really feel and gain more knowledge about how we are moving and what then needs to change and what is really being supportive.

The next piece is where is the spine as we move? And so this is common when I am working with someone, say with a movement like arms overhead. So they're lying supine on their back and their arms start at the sky and they're holding a buckled strap in their hands. And then I ask them to take their arms over their head. So we're moving in flexion at the shoulder joint.

And as they go overhead, oftentimes what begins to happen is their ribs start to move or their arms start to move left and right and they're not moving purely through the sagittal plane, moving their arms overhead. So then what I ask them to do is can you move in through that joint still, but can you keep your rib cage quiet? Not to hold the upper abdominals really hard. Only move as far as the ribs don't have to move, for example. Or only move as far as the arms don't move left and right. And then let's see what's happening.

And so when they're doing that, then they can notice what the center line of their body is doing. So is their center line going into extension or is it bracing, or is it what? Like what is it doing? What are the qualities or quantities of movement extraneous to the arms just going over the head, right? So then they can tune more into globally what's going on through their body.

And so then as they are moving, are they moving optimally at the shoulder joint? Because sometimes people who have arthritis or if they're overcoming a frozen shoulder or other adhesions or anything else, like someone who's coming out of breast cancer surgery or anything else in that area, there will be a limitation initially through the tissue. And so if you're moving in an optimal range of motion for where you are at currently and honoring that limitation, that's when we really give the opportunity for the tissue to settle out.

And I recognize this can sometimes go against the, we've got to force through tissue in order to make a gain. And I don't know, I just, I haven't found that to be really helpful when it comes to therapeutic movement, that

the more we force, the more resistance there is. And if we can just move a little more gently, honoring those principles of movement that I've just mentioned, we can make a quicker change that's much more sustainable and kind of deeper. Like there are more layers that are involved.

To think about moving more simply to begin with than complex, so doing all that needs to be done and nothing more. So we're really just focusing on something simple, like the one I just mentioned, arms overhead. Like that's what we're just beginning with.

And you'll notice that in all of this, I'm not saying put your shoulder blades somewhere. I'm just simply asking, okay, we're moving the arms overhead, can that arm bone move in the socket? And then if it's not, or if there's ribs moving or if there's arms going back and forth, can you quiet that? Can you just move the arm bone in the socket?

And can you do that movement in a range that doesn't increase pain? Because you might have the range, you might have the actual range of motion, and if you could find the other range of motion without pain, then you'll get to your actual range of motion a lot more quickly because if you've got the range but it's painful, that tells me you have the available range. It's just not super functional right now.

And so if you back it up to the place where there isn't the pain, where the pain is a lot reduced, then you can start to build in better neuromuscular patterns, better breathing patterns, more relaxation and awareness. What my experience is anyway, is that you'll get to that greater range, the actual range a lot quicker.

So inside of that I find that overall, when clients follow those principles, there's a real settling down and less of a striving for something that's outside of them, if I could put it that way. And there's a greater tuning into what they can actually feel now. And I know this is going to sound almost cliché, but all of the potential and all of the possibility lies within somebody. And that's when they can really tap into it.

So those are some of the key concepts around the principles of movement that I teach. I didn't touch on every single principle of movement, but it gives you an idea of where you can play with some of the movements that you might do with a client.

So this leads to two of the key questions that I've touched upon in the teaching of this episode so far. And that is, what's working? What's supposed to be moving right now that is? And then what's not working? So what's moving right now that isn't? And can we quiet the thing that should not be moving and can we nurture the thing that should be moving?

And what I mean by that is that I bring the example now back to the arms overhead, if the ribs are flaring, can we do the movement without the ribs flaring, but also without holding the upper abdominal hard? Can we just move the arm bone in the socket softly and easily?

Now, this might lead to someone asking the question, okay, this is really great with arms overhead, Susi, but what about doing like rotator cuff work? Really good example because a lot of time with rotator cuff work there is a, let's set the shoulder blade and let's move the arm into rotation type of exercises, either with a TheraBand or with a free weight.

And again, to build upon what I've just mentioned, I would do something very similar. I would ask the person to keep their blade quiet. You'll notice I didn't say make it solid or concrete or don't move it. I didn't say that. I said, can you keep it quiet?

Now, there's a tonality to the word quiet, which has the blade, and people interpret that as being let's not move it, but it's not zero. When people, I find, go try to make this zero, that's when all this other kind of forcing and constraining happens, but not in a super effective way. But when it's quiet, we're turning the volume down and allowing for us to really tune into rotating that arm bone in the socket, blade quiet. And now let's see what the range is.

And what I've noticed is that if someone was used to concreting their blade and then doing rotation, they can sometimes get more rotation, like more range, but it's done in a way that's very, very compensated. And if I ask them to take the blade into a quiet position, a lot of the times initially their range of motion is a lot smaller to start with, which can be frustrating initially.

But in about five or seven repetitions, all of a sudden their brain and their muscle and their skeleton go, oh, this is how we're supposed to work together. And then the range just shows up because they have the actual range of motion, they're just doing it in a really laborious kind of way. And so when we get more harmony between those parts, the skeleton, the myofascial system in the brain, it just naturally comes together.

Another one might be if someone is doing an exercise that involves protraction and retraction, so the blade coming away from the spine and then the blade coming toward the spine along that kind of horizontal axis. And a lot of times what people will do is they'll raise the blades up in elevation as they move that blade away from the spine. And they might kind of pull the blade down towards their butt when they're bringing it back towards the spine.

So think of it like pinching the shoulder blades is retraction. And the opposite, like widening the shoulder blades would be protraction. And so what I'll say to people is I want you to look in the mirror or in the Zoom camera, since most of my work now is with people on Zoom. I want you to notice what's happening with your blades. When you go into retraction and protraction, where do your blades actually go?

And a lot of times they will notice that their blades are creeping up towards their ears or they're creeping down towards their butt. Like they're maybe over utilizing their lats or they might be overusing their left scap or any other number of muscles. And I can see them wanting to set them. Like it's just for so many people, it's just that's the trigger. Like that's the trigger response, to go there, right?

And I'll say, I don't want you to set them because what will happen is you'll create more tension in and around the ribs and in and around the axilla area or the armpit area. So can you just move your blades to retraction and protraction only as far as the blades don't creep up or slide down?

Then they notice just how chunky that range for them sometimes is or how the blades might be a bit stickier. But then now they can feel it, right? Now they can feel what's happening. And then again, many times, like I mentioned before, five or seven reps in, all of a sudden they get it. And it's like it's all oiled up, WD-40'd, and they get the movement and they can feel, oh, now my head feels much better. My jaw is not involved. Or, my gosh, my neck. I had no idea. My neck feels so much better. My back's not involved or my pelvic floor is released. Like these are all very, very common things. Even hamstrings can let go.

So it becomes fascinating when people just simply notice and then, okay, let's quiet the elevation or depression and just foster what is meant to happen. You know, like just really, really, really, really gently, yeah?

Okay, so then this leads into this idea of planes of movement. And briefly, I'm going to talk more about this in an upcoming episode, but briefly what we're talking about here is recognizing that there are three planes of movement.

There's the sagittal plane, which is raising. So there's raising up to the sky in flexion and then bringing the arm back down into extension. So when we kind of stretch ourselves vertically and then bring ourselves into a fetal position, that's the sagittal plane.

And then there's the transverse plane, which is rotation. And then there's the frontal plane, which has us moving into side bends or arms, if you think about a snow angel or jumping jacks, arms and legs moving away and then coming back to midline. That's the frontal plane.

And what we're looking at is supporting the movement in the plane that it is moving in. Now granted, most of the movements we utilize are multi-planal. But the nice thing about rehabilitative type of movement is that we can start at single planes a lot of times, and we can really just help tune into what is that single plane of movement. And then we can add planes.

So if we begin with single planes and help people train in that single plane, then they can tune into, oh, okay, this is how this bone moves in this joint, right? So this is how the arm bone moves in the shoulder socket. This is how the blade moves relative to the rib cage or the arm bone. And then we can start to add, right?

But when we just kind of jump into multi-planal work without that foundational awareness, it's a bit trickier because we're asking ourselves to pay attention to a lot more than we have the bandwidth for. And I think that's another piece around the setting of the shoulder blades that can go haywire, is we're asking someone to pay attention or hopefully pay attention to things that we haven't even taught them to pay attention to. And a lot of things, right?

And so it's easy then to fall into the trap of, okay, I'm just going to logically process this through. I'm just going to think my way through. I know you're not thinking those words, but it tends to be where we then go. It's like, I'm just going to put my shoulder blade into this place because this is the right position. And off we go, not realizing that they might be creating tension unbeknownst to them.

And we want to help build out more easeful movement with less compensation, because what I have found is it just enables better and better biomechanical patterning, more fluidity in movement, more harmony in movement. And I think that, and I've got nothing to prove this to be true, but I just think that there's better force transfer between the upper and lower body.

And I say that simply because what I see is better coordination of movement, better control of movement without having to think about that control. It's just happening and there's more ease. People feel lighter. They feel younger. They feel less pain. They feel less strain. So something is going on. And right now, the best language I have for it is they've just got better load transfer, they've got better harmony in their movement.

So when we've got that, then we don't have to think about setting the shoulder blades, right? Because we're now tuning into our parts and feeling our parts from not an anatomical or textbook perspective, but like what our blades are doing. And that leads to this idea of when people are saying set your shoulder blades to the place where they should be, it's assuming that the place they should be is right for everybody.

And if there's anything I think all of us have been learning over the past couple of decades, it is that the place that is the best place for someone is the place that is unique to them and is an inherent balance for them. And that can be different for so many people based on the activities that they do and what's going on in their body.

So all in all, when you are practicing, consider the cuing around setting the shoulder blades. And if you absolutely love the cues, then obviously keep working with it. If it's working for you, if you've got clientele, if it's working for clients, then don't change what's not broken, so to speak.

And if you're kind of thinking, hmm, I probably can up-level results here a bit more, whether it's for your own self or whether it is for your clients, then these are ideas here that I have found work really, really well for me and my clientele and the graduates from my program, that when people can tune in more effectively interoceptively and proprioceptively, then they can chew through that data and cognitively process the data that arises. As opposed to starting the process just cognitively thinking about, okay, I need to set my shoulder blades. Here's where they need to go. Okay, body, behave, right? It becomes less friendly with the body.

Now, I do talk about something similar to this in episode 122 on clamshells. I have a similar thought process around clamshells about why I don't like them and how I think they can be made better. So if this has resonated with you, you might want to check out episode 122 on why I don't love clamshells and how to make them better.

And if you want to dig into these ideas more, please join me over at Power of Pure Movement: Strong and Steady Shoulders, functionalsynergy.com/shoulders. I would love, love, love to share and teach you more. Until next time, take care. Happy exploring.