

Ep. #339 - Anatomically Impossible? Why I Teach a Square Pelvis in Warrior 1



Full Episode Transcript

With your host:

Susi Hatelly

[From Pain to Possibility](#) with Susi Hatelly

Introduction (00:00.00)

You are listening to From Pain To Possibility with Susi Hatelly. You'll 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 Hatelly.

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Susi (00:23.40)

Welcome and welcome back. I'm so glad that you're here today because today, we are diving into a three-word phrase that we often hear in yoga, which is, *"it's anatomically impossible"*. It's a phrase that came up inside of I Love Kinesiology when we were talking about Warrior 1, but this phrase is not only surrounding Warrior 1, although Warrior 1 gets a lot of runway with it.

It often comes around other poses that have been primarily blamed for injury or even misunderstanding. So that includes Warrior 1? Yep. Triangle, Pigeon, Lotus, yes. Even Down Dog, Chaturanga. Transitions between Warrior 2, Warrior 1 and back again. Half Moon to Warrior Three and back again. Revolve triangle.

And when people hear that something is anatomically impossible, they often take it as the final word, as if the body simply can't do it without harm. But here's the thing. More often than not, these statements didn't come from deep anatomical certainty. They came from observing a lot of injury patterns, which makes a lot of sense, right?

You see a lot of injury happening, it makes sense that our analysis then goes to, *well, if there's a lot of injury happening and these poses are part of that injury happening, then clearly there's a problem with the poses*. However, I wanna pose some other questions. Perhaps the real question isn't, *is it impossible?*

Perhaps, the real questions lie in the following: *How was a person moving? How were they being queued and could they receive the queue? And where along the way did compensation sneak in?* This has been a rich conversation inside of I Love Kinesiology, where we're digging into anatomy, motor control, and coordination, and seeing those components of movement as so fundamental to not only reducing and eliminating pain, but also ultimately, in doing more complex movement and greater strength.

And that's what we're gonna do and dig into today. Because when we can take the time to look at not only how someone is moving - the transitions, the sequencing, the intent behind actions - we make a lot of headway and understanding of how someone is moving and how, that how of moving is contributing or correlating to the pain that they're experiencing. We often discover that the pose or the movement itself is not the problem, but the problem is how it was approached. And this is what we do so much of inside of, I Love Kinesiology as well as a therapeutic yoga intensive and certification.

Susi (03:49.11)

It's where the lens of my neuromechanics, interoception and proprioception really, really come in and hone. Because when we look at yoga through these frameworks, from these concepts, we really start to understand and gain anatomical clarity. We start to understand that a lot of what has been written off as impossible is often just misunderstood.

So I wanna bring some of the dialogue that happened inside of I Love Kinesiology about Warrior 1, and to also say that I'm gonna continue this as a series, not like directly next week and the week after, I've already got my episodes planned for the next number of weeks, but over the course of a number of months, I'm gonna tackle one of these movements, one of these poses, and give some anatomical, biomechanical, neuromechanical understanding, and then help you to see if it's appropriate for the people that you are working with, which is very, very different than impossible. It opens up a whole lot more possibility. Now, with that, if as you're listening to this you're like, *oh man, I would love for Susi to talk about this pose*, then please email me or DM me, and let me know what pose is of interest to you for me to explore.

Already, we've got Revolved Triangle, Moon from Warrior 3 to Half Moon and Half Moon to Warrior 3, Triangle itself, Downward-Facing Dog, and if there's more that you want for me to play with, I'm happy to dig in. So let's look at and explore Warrior 1 breakdown.

Susi (05:28.87)

Warrior 1 is one of those poses that does get a lot of debate. You'll often hear people use Warrior 1 as the moniker, as like the, if I put it this way, it's probably not the greatest metaphor, but the gold standard for being anatomically impossible. Right? It's anatomically impossible to swear the pelvis to the front, right?

And when you really look at the movement, it's not entirely true. The problem isn't that the pelvis can't face forward, but rather how the movement is often approached. So for me, I love teaching Warrior 1 with a square pelvis, and I'm very deliberate about how I am working with someone in this way.

Because when I work with someone, when they've gotten to a place of being able to do Warrior 1, because my clientele - whether they are private clientele or my group clients - like they've often come out of pain 'cause that's typically what people have come to me, whether it's SI joint pain, knees, somewhere in their back, shoulders, whatever, oftentimes what's needed is a better bridge between the ribs and the legs. And somewhere in there, there's a fogginess or an instability around the pelvis, the pelvis isn't working well as a kind of a platform in which the leg bones swing. That's part of what's been contributing or correlated to the pain that they've experienced.

Susi (07:02.98)

So when they've come to a point in the work I'm doing with them where their pain has dropped, they feel more stable, their interoception and proprioception has improved. Warrior 1 becomes

an amazing position to play with, especially a warrior 1 with a square pelvis. Because in order to keep the pelvis square, coming into Warrior One, there needs to be some deliberate action. There needs to be well honed interoception and proprioception, and when someone uses that as a way to improve their interoception, proprioception, Warrior 1 can be absolutely amazing for improving stability, mobility, strength and a whole lot of capacity and capability between the ribcage, the spine, the pelvis, the legs, the feet.

It can be remarkable for reducing SI joint issues, improving SI joint stability, peer piriformis issues, bursitis, back pain, disc protrusion, and the list goes on. So why is the way that I look at this different than what happens a lot inside of yoga? Well, let's first look historically, when someone steps back into Warrior 1, historically, the pelvis would unsquare as the person steps back.

So they weren't even conscious of where their pelvis was in space. And typically, the teacher has said, *step your leg back into Warrior 1*. Then, if they have the idea that the pelvis should be square, or if the teacher has an idea that it should be square, then they try to re-square after the fact, and that's often when torquing and other scenarios happen.

It's not in maintaining a square pelvis, but it's in the re-squaring that problems can occur. And this really is a super important distinction because it's not about a square pelvis in Warrior 1 is being possible or impossible, but it's really about the intent that is brought to the movement, how the body organizes itself as you transition into the pose.

Susi (09:35.70)

So, as I've mentioned, I use Warrior 1 an awful lot. An awful lot. Like, every single day, someone is likely doing Warrior 1, and if it's not every day, it's probably every week. It gets on my roster because it combines so many aspects. Like think about it - if you're in Ted Asana and you're stepping back, we've got one leg, the back leg, stepping back into extension and also rotation, while the front leg is moving into flexion at the hip, as well as at the knee and ankle. So there's a lot that's going on in the position. There's a lot for our system to pay attention to. And when we've come to a place where we can actually do that, paying attention, the position is really great now.

Now, someone might say, *okay, that's great, Susi, but you're just making the point for the argument that it's impossible*. Because most people, as they come into Warrior 1, are not paying attention. They're not tuning, intercept or proprioceptively, and then the teacher is noticing their pelvis is unsquare, so they're making them square it again.

Yeah, I get that. I understand that. And it doesn't make it impossible. There's a queuing piece that might be here. There's a movement piece, like the person's unaware of how they're moving that might be there. The key here is **it's not that it's impossible**. What's closer to being impossible is expecting that a body continues to stack compensations and a person will still feel stable.

Susi (11:26.76)

And yet, if we move into positions with clarity, of intent, the mechanics become a lot more integrated, and the whole system will work with you, not against you. Which then leads to this idea of intent. And what I love about the word “intent” is it really comes to a place of understanding why it is you’re choosing to do what you’re doing, why is it you’re choosing to say what you’re saying.

When I'm watching people move, what I'm really looking for is not the end position, but rather what happens on the way to the end position. How are they organizing themselves as they move from point A to point B? What's driving the movement? What's lagging in the movement? What's moving that should be? What's moving that shouldn't be? What's bracing that ought not to be? Where does effort get smooth and where is it sticky or congested?

You see, this is where intent becomes such a powerful guide. If the intent is, *I must make my pelvis square at all costs*, the body will follow that directive. And it will do whatever it can to get there, even if it means layering compensations on top of each other.

Susi (12:55.52)

That's when you see things like a torque at the SI joint or gripping the lower back or the knees doing the work that they were never designed to do. However, if the intent is, as I've mentioned earlier in the episode, *I'm gonna keep the pelvis square*, but I'm going to use that as an intention. So now let's look at how I am moving, and is it one that integrates through my joints, coordinates the load, that allows the pelvis to be organized forward without forcing.

When we're in that space, the mechanics change. Now, we're paying closer attention to our bodies and we're more connected. And body, in this case, finds a more efficient pathway, and the outcome is very different. Intention acts like a compass. It directs the nervous system. It directs our whole system, really, because the nervous system is in turn directing our mechanics.

That's why two people can end up in shapes that look very similar on the outside, but one feels stable and supported, while another looks strained or painful. The difference wasn't necessarily in their anatomy, the difference was in their intent and how they transitioned through and into the pose or the shape that they're wanting to do.

So when you begin to pay attention in this way, Warrior 1 becomes **less** about, *is this anatomically possible?* And more about *what's the body's strategy in getting here? And what's your role as a teacher in supporting someone in improving their functional movement?* This shift from forcing outcomes or moving into shapes or poses to noticing strategies and patterns is at the heart of neuromechanics.

Susi (15:00.90)

One of the things I've noticed again and again over the years, is that most people don't walk into my space and say, *Hey, Susie, my coordination and motor control are limited*. That's not the language that they use. Like, nobody uses that. Even me, who's got a background in motor control and coordination is not using that language.

What clients do say is, *I've lost range of motion, or I'm really tight, or I just don't feel mobile. I need better flexibility. I don't feel stable. I'm not as strong as I used to be. I have pain.* These are all results that they can perceive, but what's often sitting underneath those results is a coordination issue.

The body's not sequencing well, the connection between the brain powering the intent here is off. The joints aren't sharing the load, the nervous system is running the less efficient strategy. And so what shows up on the outside looks like a loss of strength or range or stability or flexibility or mobility, but it's not actually. It's actually a shift of coordination.

So, what do I mean by coordination? There's a whole field called motor control and coordination, and I spent a good chunk of my kinesiology degree steeped in this information. At the simplest, motor control is the nervous system's ability to direct and regulate movement. It's the constant communication between brain, spinal cord, and muscles to decide which muscle fires, how much, and when, and when to stop. Good motor control is what allows you to lift your arm smoothly, step back into lunge without wobbling, or adjust on uneven ground without having to think about it.

Susi (16:50.64)

Coordination is closely related. It's the ability to organize different parts of the body to work together efficiently. Think of it as the choreography of movement. I like to use the metaphor of an orchestra a lot of times - and you'll hear that through these episodes, me using the orchestra - really, the orchestra of movement, of how joints, muscles, and connective tissue share the work and distribute and transfer load.

When coordination is clear, the body feels fluid and strong, and when it's unclear, the body compensates. Some muscles grip, others go offline, and strain starts to build in the system. It's why I emphasize so much coordination and motor control, because when we improve those, people will regain range stability and strength without needing to muscle up or push harder.

Their system simply becomes more efficient. It's one of the reasons why reducing compensation can lead to such quick results for people, particularly when the reduction of compensation is not coming from a place of saying that they're doing it wrong, a client's doing it wrong, but rather it's a place of refining movement.

Susi (18:11.15)

When someone is compensating, they're using areas of their body that are not designed for a particular movement. And those patterns will stack and become more and more problematic. When we refine them, now we've got the tissue doing the job that it's meant to be doing. It's way less exhausting and way more strong. We've got a greater ability to generate force in those circumstances.

To build upon this, when we think about what can interfere with good motor control and coordination, it can be a matter of capacity or capability. So as I've mentioned, **capacity, here,**

would be about compensations. Joints or tissues just don't have the movement available so they can find other ways of getting that movement available. Or not the movement, but a movement available. There's a lacking of capacity, but the body finds a way to do it. When it comes to capability, **capability really is a person's ability or skill or awareness to access what they have available.** Pain can interrupt motor control and coordination because the nervous system will reorganize movement around protecting what feels threatened.

There's also habits, patterns that might have started to be useful at one time - like a limp, for example - but over time became the default even though they're no longer needed. So as you continue to layer in compensation patterns, in relationship to these three areas, it's easy to see why someone might feel weak, stiffer, and stable.

Susi (19:52.50)

But again, what's important is that these aren't fixed states. Their outcomes of how a body mind is coordinating. It's the same story that we often will hear when people are talking about weak or lazy glutes. And I talk about weak and lazy glutes a lot in this podcast, right? A client might be told their glutes aren't firing or their hips are unstable because of weak muscles.

But when we look really closely and we really help someone to improve how they move, we notice the issue is not the glutes or 'lazy' at all. Rather that coordination has been disrupted. Other muscles have stepped in to compensate. The glutes haven't disappeared. They've simply been bypassed by a different strategy.

Once the coordination is restored, once the sequencing is cleaned up and the joints share the load more effectively, the glutes almost always come back online. Suddenly, the weakness or the laziness just isn't there anymore. There's tone now available. This isn't a strength problem. **It's a coordination problem to solve.**

Susi (21:08.12)

So when we look at this through the lens of neuromechanics, things can get even more interesting because motor control isn't just a musculoskeletal thing, it's a nervous system thing. It's influenced by interoception, proprioception, by the stories people hold about their bodies. So remember, interoception is what you can feel. Typically when you do a Google search, it's hunger or thirst. But when we're looking at our movement patterns, it's also just *can we feel a muscle contracting? Yes or no? What other sensation is present when we're moving?* Which is distinct in my books from proprioception because proprioception is noticing where our body is in space. So as I'm standing here recording this episode, I can bring my arm behind me and know where that arm is in space.

Ultimately then, **if someone believes a pose is impossible, their nervous system is gonna organize around that belief.** Their interoception and proprioception is going to organize around that belief. If they believe a movement is unsafe, their nervous system constraints their options, which thankfully is a great thing to do.

And when they start to experience more coordinated, integrated movement, when they feel their joints working together better, they notice a strain dropping away, nervous system starts to update, safety is restored, capacity increases, pain often decreases or disappears, and they start thinking differently about it all.

It's why I say over and over again that strength and stability are outcomes where coordination and control are the drivers.

Susi (22:57.62)

So now, let's come back to Warrior 1.

Warrior 1, leg bow motion in the pelvis, glutes - it's really a microcosm of something bigger, how pain, movement and perception all intertwine.

Consider when you are doing Warrior 1. What is your intent? Really, not what's the right way to do Warrior 1, but what's your intent? And when you do it, are you doing it as you've intended? And if you're a teacher, what's your intent for Warrior 1 with your students? And, are they doing it as you are intending, is your queuing matching your intention?

Does it provide sort of a flow through from what's in your mind and heart through the language that lands for the student? I often will say that how we know our cues are working is if they're **landing** for that student. If they're not landing, then it may be that the way that we're teaching it, the language that we've been using isn't landing for the student.

Susi (24:33.62)

Now, the truth is, as a caveat, there's lots of reasons why people come to class. Many of them might not be listening to what's being said, so we do need to recognize that that's also a clear possibility for sure. But also, really look at what's your intention for doing this, and is what you were saying, landing and enabling that intention to come to fruition for the people that you're working with.

It's why, again, why I love Warrior 1, because it's not just a high lunge. If we're stepping back into a high lunge, both legs are doing very much similar things. They're both moving in a sagittal plane. Yes, the front leg is doing a bit different than the back leg. The front leg is going deflection at hip, knee, and ankle. The back leg has that leg bone moving into extension. In many cases, the heel will be off the ground. And in a rotation of that back leg, as that leg comes into extension, now we're looking at something like Warrior 1. Can a person do it? Yes or no? Where are they compensating? So often, what I see with my intention being *let's keep that pelvis square*, is that that pelvis will become unsquare, and that's where I bring their attention and I say, *okay, let's explore*.

Is the issue here in how you're rotating that leg bone, the back leg? Is it the extension of that back leg? Is it the front leg coming into flexion through the hip, knee and ankle? Is it something with that pelvis? Is it wanting to do too much of a tilt forward? Or even posteriorly tuck? Do the

ribs wanna poke forward? Does the head wanna come forward? Is there any other deviation that's happening in the body as the person's coming into the movement?

And I just let my eyes gaze through because my intention is, *let's move into Warrior 1*, pelvis, square, back leg bone extending and rotating, front leg bone, inflection, hip, knee, and ankle.

And now I just get to play, and then we get to refine the movement dynamic and help someone discover, interoceptively and proprioceptively, what the heck is going on oftentimes with the way the leg bone rotates and extends. 9 times out of 10, the people that I see, that is a primary issue. What's also a key issue is the ability to stabilize through the front leg, and out of that reduced stability, they often will then poke the ribs forward or grip through the ribcage in some way, or hold their breath and then I pull them back. Let's find the range where ease exists. Let's find the range where your nervous system can be settled.

And when that happens, cool stuff occurs. They start to feel more stable. They start to feel stronger, they begin to feel lighter. Their head is less achy. When they stand, they're taller right away. It's not needing to come back time and time and time again. It's because we re-coordinate the patterns. Now yes, we do need to grow the habit of this. For sure, for sure. And, this is where we begin. It starts with the intent. It continues with what we're seeing and noticing. It's teaching to that and enabling someone to experience and feel. Now, some of you who are teaching in flow style of yoga classes, that might be a really tricky thing to do. I'm not suggesting that simply because I've got an intention of keeping the pelvis square as someone comes back into Warrior 1, means that you need to have the same intention.

My whole purpose of this episode is to really play into, okay, *is Warrior 1 with the pelvis square anatomically impossible?* And the answer is no. It's not anatomically impossible. Do some people have a lack of coordination and control to be able to do it? For sure. But that doesn't make it impossible. In fact, it makes it all the more reason to help someone grow the ability to do it so that they've got better control and coordination. They'll walk better. They'll run better. They'll climb stairs better. They'll descend hills better. So much of their knees and their feet will be better. Their golf game will often get better. So much can change when people improve these fundamental components of Warrior 1.

Susi (29:45.75)

Bottom line: interoception, proprioception and awareness, just like coordination, can be trained. When you bring awareness to how you move, when you refine intent, when you explore transitions with curiosity rather than force, **your nervous system learns**. It updates. And as a result, your system, including your brain, begin to trust again, and beliefs shift.

It's why I often will say that yoga is not about perfect poses. I'm certainly not the only one who says that, but rather, **it's about building clarity**. Clarity in how you sense, perceive, move, and how you respond. So the next time you hear someone say that Warrior 1 with a square pelvis is anatomically impossible, or for that matter, any pose is anatomically impossible, consider pausing and instead ask, *what's the intent here?*

What are their coordinating patterns doing? Do they have the control and coordination to do this? And what's going on in the nervous system? Where are they bracing? Where are they gripping? Because more often than not, the pose is not the problem, but rather it's the strategies you bring to it. And when those strategies shift, so much expands, the pain drops and the impossible becomes possible.

Susi (31:18.71)

So overall, **Warrior 1 is not anatomically possible with a square pelvis**, and neither are many of the other poses that get written off. What's impossible or closer to impossible is asking the body to pile compensation on top of compensation and still feel good. When we pay attention to intent, to coordination, to motor control, to how the nervous system is guiding and receiving movement, so much changes. That's where neuromechanics, interoception, proprioception really come together, and it's what makes this practice such a powerful tool for healing. Not because it gives us shapes to force ourselves into, but because it gives us a way to listen, to clarify, and to move with integrity.

Susi (32:14.12)

If this is resonating with you, and you wanna dig in more to this idea as it relates to reducing and eliminating physical pain, I would love for you to join me at the Therapeutic Yoga Intensive, and you can learn more about that at functionalsynergy.com/intensive. We're meeting on Zoom, October 25th to 30th. We'll be talking more about anatomically impossible movement patterns or so-called, and what happens when we bring intent to them and what they might reveal as a result.

So I'll be coming back, sharing more over the next number of months, and I hope to have you back here again. Have a great time exploring and see you next time.

Susi (32:57.36)

Hey, did you love this? Did it resonate with you? And would you like to dig deeper into the ideas of mechanics, in kinesiology, neuromechanics? Well come join me over at I Love Kinesiology. This is my foundational program for really helping you learn and apply these concepts. Whether you are a therapeutic teacher, a PT, a yoga teacher, a pilates professional, anywhere that you wanna dig into movement, you can learn more over at **functionalsynergy.com/ILK**.

Take care.