

## Fascia, Face Lifts, and The Bendable Body Stretching Method



### Episode 57: Fascia, Face Lifts & The Bendable Body Stretching Method with Sita & John Kelly

**Gregory Anne:** Welcome back everybody to another episode of rebellious wellness over 50. Today, we're going to get bendy. I'm introducing you to John and SITA of the bendable body. Welcome, John and Sita.

**Sita:** Thank you for having us really, really excited to be here.

**Gregory Anne:** We've all heard of foam rolling for fascia release and all of these techniques, and we're supposed to stretch when we work out and who really does that? Then as we get older, maybe we have to stretch just to get out of bed and into the bathroom to brush our teeth because we get stiff.

But yours is different than all the things that I've heard of before. Why don't you give people a definition of what you do.

**Sita:** Yeah, sure. It's resistance stretching, and we call it stretching because it's what we feel truly is stretching.

It's how the animals stretch. And the normal traditional stretching out there, we think actually isn't stretching. So we're throwing a monkey wrench in how people are thinking about it. We're essentially resisting every lengthening of a muscle.

And when you do that, you interface directly with the fascia as opposed to the attachment points at the muscle, which is what traditional stretching primarily interfaces with. So that's, in a nutshell, what we do. We change fascia cellularly through resistance.

**Gregory Anne:** Okay. Now tell people what the fascia is.

**Sita:** Fascia is connective tissue. So it's a head to toe tissue throughout the whole body. A common analogy that's given, and a lot of these programs out there like foam rolling and FasciaBlaster, other things people may have heard of talk about this.

It's like, you have a piece of chicken, right. And you've got the skin and then underneath it, there's that translucent membrane. Everybody's seen that before. So that is technically connective tissue. But what people don't understand is that connective tissue is much more pervasive than that. It's not just a surrounding tissue, like around the outside of us.

It actually surrounds every single muscle fiber. And the way that you can visualize that is like, if you cut open an orange, you know, a singular orange slice, you've got all the little orange fibers, muscles are kind of like that. They've got all those fibers. And so imagine every one of those being encased in fascial tissue.

And then of course it penetrates into organs and bones and throughout the whole system, the whole human system. So it's this all pervasive tissue. Up close it looks like a three dimensional web that is, in it's healthy state, kind of like a translucent watery, like collagen figure. But over time it doesn't look like that.

It looks hard and matted and dried. Kind of like the dry skin on the back of your heel. You can think of it like that when it's not healthy.

That's kind of what it is in a nutshell.

**Gregory Anne:** You mentioned that you and John come at this from different perspectives. John, what makes you two different in your approach?

**John:** Pretty much everything. I came to it physically, because I was stiff and I wanted to get a better body. And, I did yoga for a number of years. And then I started to research stretching. I bought different stretching books and this is how I got into it. And this is who we learned from The Genius of Flexibility written by Bob Cooley.

He created this modality and I ended up training with him for years, but I just came to get a better body. I was very stiff, back pain since I was a late teenager. I just wanted to feel better that way. It was kind of simple for me. So as soon as I started doing the exercises, I mean, I remember the first hamstring stretch I did with the resistance,

I got up and walked around after doing one leg. And I'm like, this is walking by itself. This is lighter. I've never felt lighter. I've never felt any help from my body. I feel like I was always working against it. And I was like, this is really unique. And so I dove right in from there. And it's more broad than that, as we'll hear from SITA going forward.

**Sita:** My background is in spirituality. I spent 15 years in a convent, so I was very much so not physical. I mean, I was physical in the sense that I worked really hard and took care of a big property, that kind of thing, but I was not thinking about it at all in the way that John was.

I got involved through one of the nuns actually, who got diagnosed with MS. And we met Bob who John had been working with. she ended up working with the trainers and getting some incredible relief. As her friend and one of the other nuns in the convent, I took an interest in it.

And the part that really got me, I'm one of those people that walks into a gym and I look at all of the equipment and they look like stormtroopers to me. Like, I was just really not my environment. I like to be physically active, but I'm not someone that's going to work out in that way.

So there's never been an exercise method that I've been drawn to, or wanted to put time in. And of course, you know, I had age on my side. It wasn't really necessary at that point, but the part that I was blown away by is this system. A way to access the entire human, the spiritual, the mental, the psychological, the emotional, and the physical.

And of course your doorway in is physical. It's a physical modality, no doubt, but you can have a result that goes beyond the physical and it's tangible. It's not a belief system. John always says that it really is not a belief system, you need to have a direct experience. That was really cool to me because it makes complete sense to me that the body is a map of the mind and vice versa, and that there is not a random connection, that there is a clear and universal connection beyond the individual universally.

So that's what got me. I'm actually shocked that I'm, own a physical fitness company. That's really not what I ever thought I would be doing.

**Gregory Anne:** We plan and God laughs You're not a nun anymore I take it?

**Sita:** I am not. This is, this is the modern day sound of music, Greg. Whereas the Irish say, what do they say? The hen got in the, what do they say?

**John:** The Fox is guarding the hen house.

**Sita:** The hen house his Irish relatives.

**Gregory Anne:** Okay. Well, I come from an Irish background, so it's all good. So we've now described what the fascia is. Two things, why do we need to pay attention to the fascia and how does having whatever you said, optimal fascia watery, beautiful multicellular thing,

why is that important for us as age?

**Sita:** Well, I mean, quite simply all movement happens in and through fascia as does all physiological functioning. So if you take that description of each muscle fiber being encased in fascia, we think that our muscles contract and lengthen to move us around, but they do it inside fascia.

And so if the fascia gets hard and matted and dried, which it does through injury, everybody knows the term scar tissue, right? Yes. Scar tissue is the most extremely, the most unhealthy version of fascia. It has zero sensation and it doesn't allow for any kind of energy flow, nerve sensation. And in the case of muscles, it would prevent movement.

And so if your muscles can't move optimally, then you're going to get injured elsewhere because you keep moving and primarily it's the joints. And we know that cause that's where all the replacements are happening. And you want to add to that?

**John:** Well, they did the joints where all the replacements are happening but

that's not the source of the ailing joint. And it is the fascia within the muscle. And so why do you have to keep your fascia healthy? There are meridians in Chinese medicine. So this system, when you stretch, for example, the muscles on the outside of your leg, your IT band,

okay. That's a popular muscle group to have foam roller in the gym. Well, the Gall bladder meridian runs along the IT band the outside leg. It goes down second toe and it up it's a long radius. And these have been proven by the west May Wan Ho, she identified these electrical currents that run through our body that are housed in fascial planes.

So if you want to digest fat better or get rid of migraines, these are all associated with the gallbladder. This is Chinese medicine. That IT band needs to contract and work really well. And when it stops working, we know the fascia has overtaken the muscle to repetitive movement through sitting, lack of movement.

And these movements will improve the health of that IT band, and so that may give you relief across the low back, make your waistline feel better, scoliosis help with, but it'll also help with all of the physiological, psychological things that come with it. And this is known in Chinese medicine. For instance, grief is associated with the lung, and fear is kidney and joy is heart.

This is all part of it. And again, it's something you experience. And we've experienced it through ourselves and mainly through other people who we've helped with grief, with fear, with anxiety, in addition to coming to us with the joint pain and things like that.

**Sita:** And one thing that's really interesting is generally speaking, the fascia tends to get stiffer and harder on the back of the body. And the example I like to give is, you can think of us like a turtle. We don't have our defenses back there. So we have to have a thicker shell, right? And then it's softer and more muscular, less fascial tissue on the front of the body.

And oftentimes in Chinese medicine, they don't needle you. They don't use the acupuncture needle so much on the meridians on the back of the body because they know they won't stimulate. Because they're residing in this very hard, tough tissue versus the front they're more accessible because there's less accumulation unless there's been a very direct blow or very specific trauma.

That's a general thing. So it's an interesting tissue that way. In traditional Chinese medicine, they're not really thinking about this fascia, you know, they're just experiencing the result of needling.

**Gregory Anne:** You have a webinar kind of training that you did, that's available to the public right now. And a couple of the things that you talked about, I wanted to mention. One is, the idea what you said at the beginning? Resistance stretching. You know, there's right

ways to stretch and wrong ways, sometimes people like to bounce when they're in a stretch, but we're not really getting any resistance they are, unless the muscle is resisting. So what is resistance stretching?

**John:** The fascia again is the deal. And that's what we're interfacing and you're resisting the movement. So just give a quick example, people that want to stretch the outside of their shoulder and they kind of put it in the end range. So they would like bring it on as they pull it across their chest and pull harder.

Right. So the only thing that's really stretching, you can feel it, is the joint. And so you're overstretching. So how we would do that is you always want to get the muscle in the shortest possible position, given the stretch. And we have multiple stretches for each muscle group. So for this which we call the large intestine muscle in the back of the shoulder, you want to get that muscle on the back of the shoulder

nice and short. Short as you can, and then you grab the, because it's audio it's. Okay. Okay. So I'm grabbing my elbow, my elbows moving back. Right. And so now I have resistance and they're going against each other. So I'm pulling with my I'm resisting, and then you get to a point where you could feel it going into the joint or it stops.

So as you could see, that was really all I have because two things, the front stops shortening. So you got to take into consideration when you're lengthening something, something else has to shorten, right? It's like a real estate thing. And, and the deal is when we talk about flexibility, it's really about the muscles contracting and shortening because the muscle's job is to contract and shorten.

So if I want to reach up in the cabinet and grab a dish out the cupboard and I got to go like this. The top of his shoulder all has to shorten. Right? And as you get older, the body starts to turn. So you may compensation cause this doesn't shorten efficiently. And so when you resist and lengthen, The fascia is literally engaged and resisting, and you're overcoming the tensile strength of the fascia and it's pulling apart shearing off.

And that's how it gets reconstituted and hydrated and reformed. And you can see how that's, how you get rid of scar tissue. Now it would take a great deal of resistance and a great many repetitions to remove scar tissue,

**Sita:** the most unhealthy version of fascia, there's a spectrum of health spectrum.

**John:** And the thing about these movements is there's no pain when you resist and stretch a muscle in that way. You're suspended in the joints because the fascia engages and now you're dealing with the fascia and not over pulling tendons and ligaments at joints.

**Sita:** And you can't really feel fascia

**John:** Even though it has five times as many nerve endings as the nervous system, it's not wired to our brain in the same way.

So no one goes, Hey, my fascia is killing me. I mean, I know about fascia plantitis but that's not necessarily the fascia in the way that we interface with it and describe it.

**Sita:** I think it's really important to note that the general definition of flexibility is a muscle getting long.

Think of people doing the splits. Think of people bending over and touching their toes and the person that can, you know, put their chest on the ground. That's the flexible person. So we've taken that and turned it right on its head. And actually it's right in the word, flexible, the ability to flex and what is to flex it's to shorten.

It's not get long ability, right? And that's because that's in the nature of a muscle for a muscle to be functional and to work well, which is really how we define flexibility. It's a muscle's ability to work, not just get long, it has to shorten. And so your improvement of flexibility comes from its ability to get shorter and shorter.

And as short it will get that's how long it will get. These movements are targeting it from that angle. It's the exact opposite of traditional stretching. We are totally not the end range people.

**John:** In terms of traditional stretching, we commonly know about six different stretching methods from ART, PNF, dynamic, and these types of isometric exercise,

and when there was some studies done, they all weaken your muscles. So traditional stretching and all that stuff, weakens your muscles.

There was an article in the wall street journal about three years back that talked about high end athletes, you know, the elite of the elite and they're never stretching, because they're so in tune with their body, they feel what's going on. This is okay.

I'm not going to do this. Yeah. I'll just train doing this, I'll eat this and I won't eat that. If stretching worked and it kind of got you healthier, we wouldn't see what we're seeing today in younger and younger ages.

**Gregory Anne:** Which is?

**John:** You know, people getting slower well,

**Sita:** and God, joint replacements are expected to go up

I think by 200% in the next 20 years, like it's absurd. Knee replacements,

**John:** the hip replacement and now ankle replacements are a thing which you didn't hear of more than three or four years ago. As an example. There's some very specific movements. The IT band, the gallbladder Meridian associated with the waistband, the waist girdle, the hip girdle, the ankles associated with the bladder, the lateral hamstring. So stretching your lateral hamstring in the way that we do would improve the health of the ankle.

And, you know, there's this kind of one-to-one direct correlation. It's not a mystery, the knees associated with the health of the brain, the central hamstring and hip flexors, the sexual Meridian. It's, it's really exciting to experience and to get some relief, get rid of that premature aging from setting it all.

**Sita:** There's an interesting thing that we've noticed. So I've been doing this work for pushing 10 years, about nine you for pushing 20 years. And when we first would teach people, cause we've just described what the stretching is and I'm sure that a lot of people out there really do not get this.

Cause it's the polar opposite of how you've been stretching physically and how you've understood it mentally for your entire life, from your very first gym class, in first grade. And when John and I used to teach people in a group setting or even an individual setting, it felt like we were screaming out of a megaphone and no one heard anything we were saying.

And as time has gone by, that has really shifted. People are getting it a lot faster now. I'm sure that we've become better teachers. It's not worrying so much about

all the extraneous details. It's like learning how to resist in a stress. That's what it all rests on.

**John:** There's a funny, this has happened recently.

One of our community members online was telling us about her job and that she's the go-to lady at the job. And she runs this big organization. Everybody's coming to her nonstop with, oh, can you do this? And I'm like, Mary, you got to get some boundaries, let's do some lung poses.

Let's work on the lungs that traverse the chest muscles. So we showed her specifically what to do. Couple of weeks later she's online, she's taking one of the classes and then afterwards we have a Q and A so I ask Mary, Hey, how's that going? She goes, John, nobody's come up to me in two weeks and asked for anything.

**Sita:** to us for knee pain came to us for knee pain. She didn't come to us for boundaries. Karen, she was retired, in an office job for 35 years in New York city, which is where we used to be.

And she had plantar fasciitis, back problems, knee problems. She was exercising six times a week. Nothing was getting better. She's gotta be 70, 68 when she first started stretching, and all that went away relatively quickly. But she was like, the part I can't believe is I'm calm.

I have like a new level of calm and peace. I wasn't expecting that. So that layer is, I think what makes people stay, they come for one reason and then they stay because there's more to go.

**Gregory Anne:** Yeah, we are that onion where there's always another layer.

**Sita:** There's always more to go.

**Gregory Anne:** Especially the people that you attract, it would make sense that those people are open to what's next.

I love that the Chinese medicine is brought into it.

There was a time I lived in San Diego and I found a Chinese medicine, a woman who had been trained as a Western medicine physician. She was a transplant transport nurse, ER, but she found Chinese medicine. And for a few years, that's the only doctor that I had. And there was a point where I was at first afraid of acupuncture.

And then I couldn't wait to get in, I'm like, feel the need. And just that feeling of what you said that women felt peaceful. So I'm saying all of this to say to the listeners, if it all sounds weird to you that your lungs could have something to do with your job or your Meridian, you know, the hip thing is related to.

It's so, so, so freaking true. And I've sort of gotten away from it. I still don't use Western medicine if I can avoid it. Of course, sometimes you need it. But I love being re-introduced through you guys to this whole idea of the whole body and the ancient arts of predicting in the body, how our lives could go.

**Sita:** We like to say people know more about their cars and are more intimate with the owner's manual to their cars than their body.

And this is really what this method is. We don't want ownership of it. We want to hand you your owner's guide so that you can be empowered to take care of stuff when it comes up.

**John:** I want to mention, the first few years I was doing this, I, I was working with a lot of athletes and really top athletes

around the world. And one thing that stuck out to me was an NFL player who had retired in his mid twenties and with concussions and injuries, he worked with me for about six months, and then he came back and he played again. And for those out there that are interested in this, his 40 yard dash went from 4.7 to 4.4.

And he never lifted a weight. And his max bench press went from 22 reps to 36 reps.

**Gregory Anne:** Wow.

**John:** And he told me, John, I will never lift another weight again. And he came back and had a career year and, he was able to save money for his kids' college by coming back. It just helped him out and he felt much better, but the most important thing with him were the concussions. He came to me one day and we were in Boston. He said, John yesterday, my wife asked me after we worked out to go pick up some things down on Dartmouth street. So I went out and I had asked for directions, but what I didn't have to do is write them down. I remembered four streets to make turns. It was so touching.

I mean, it was just overwhelming.

**Gregory Anne:** You talk about, you just mentioned not having to do weights. John, you used to be a runner. You don't run any more, but you're in great shape,

physical health. How do you give up? I just did a whole thing on weight training for women as they age and the importance of said weight training, but how can we just stop doing all our usual exercise?

**Sita:** Well, I don't think you have to, that's not how we're thinking about it.

**John:** It's complimentary to gardening, singing, yoga, running, lifting, it'll make all your activities better.

**Sita:** The way that we think about it, Greg, is that

this is the only exercise method that removes the wear and tear, and also gives you the fat burn and also get your alignment better, and gets you stronger, but it doesn't create, wear and tear. Weight training does. Anything on a treadmill, running? All of that absolutely does, yoga does.

And so if that's what you love doing. Don't stop doing it because there are obviously benefits, but you got to add this in. You have to address the fascia or the wear and tear will take over. How many instances are there where a person loves to lift weights, they get injured and then they have to stop until it repairs. That will never happen with this method.

**John:** Another way to look at what SITA just said is that when you train your muscles and you're doing concentric movements, you're shortening of the muscles with resistance training. The muscles expend energy. And then when you're tired and fatigued, you have to rest. And then a few days later you can go back to that muscle group.

Or when you make arm movements and you resist and lengthen, you're interfacing with the fascia. Now the fascia does two amazing things. It creates energy and it stores energy. So your energy levels go up. In addition to your muscles working better, your gait will naturally change over time. You'll get effects immediately

as soon as you do a set of stretches. You'll maybe feel lightness or some relation to the other side or the muscle working better, more movement.

**Sita:** I think another reason why some people do get involved in this and some people end up giving up other forms of exercise, like say weight training, is cause it's really hard work.

So if you're out there thinking that it's like a kind of a restorative relaxing stretch class, it is not. It is equally as difficult as weight training. You're sweating, you're

working really hard. And so, it's like, , do I have to go do something else too? And the answer is no, not unless you want to.

And if you do, you'll be able to do it longer. I think another thing that's really important to note about this is it's a subtractive method. We are removing dense, unhealthy fascia, and by doing so, it allows the muscles to contract and work better. It allows the body to fall back into a proper alignment. It would be kind of like eating for nutrition and never brushing your teeth.

This is the brushing your teeth component. And so you've got to subtract that to remove the wear and tear. Yeah. And that's solely based on the nature of fascia. That's what it comes down to.

**Gregory Anne:** The fascia is like the unsung hero of our health.

Oh my gosh. Like it's the big elephant in the room totally is.

**John:** And another way to look at it. If you go to the gym and you lift weights and you can lift 50 pounds. You would be stronger if you could lift a hundred pounds, right. But that muscle, let's say for instance, a shoulder, if you start here and you pull down against resistance,

do the opposite movements. Generally speaking, healthy muscle would generate two to five times the force. So, if you could push up 50 pounds, you could actually resist a hundred to 250 pounds going down. And so that would develop the muscle more than just pushing up 50. But the bonus is the interface with the fascia and the energy and the changing of the arm in relation to the shoulder.

**Sita:** Well, and then there's another component too, if you just think about it from a sheer numbers game, you know, if there's 50 pounds worth of force and muscle strength and a hundred to 200 pounds of force and fascia, you need to pay attention to your fascia more. It needs more attention by virtue of the amount of force in it.

And that's exactly what we find. It's not that we don't use strength training we do, but we use it very judiciously. And not nearly as much as we do the opposite, which is the fascia movement we'll call it, the resistance stretching.

**Gregory Anne:** So I wanted to talk about eyebrows.

Your testimonials is really great and the woman I think ends with, and my she's mentioned, you know, how she feels better, no knee pain, back pain, whatever it was. And then she said, I, my eyebrows are no longer crooked. Okay. What is

going on with either her eyebrows or our facial fascia that would rearrange her eyebrows?

**John:** Well, yeah, the bladder meridian and thymus meridian, they run right down into the eyebrows. So if you stretch your lateral hamstring and you stretch the traps and shoulders in this way, You're going to affect the fascia in here, but when we're stretching the muscles in the thighs and in the arms and the shoulders and chest, we're addressing usually the densest tissue along that meridian.

And when you change the densest tissue, the whole electrical current, the whole meridian is affected. When I do stretches from my hip flexor on the front of my thigh, I can feel the energy running all the way up, goes right into my, the side of my face.

So I can feel this being light and full of energy and this side not because I didn't go to the left side yet. So if you do the bladder, which runs along the back of the body, it comes up over the head and it goes down into the eyebrow. So. You're going to change that Meridian all the way through and the skin and the bones and the alignment is going to all change.

**Sita:** Yeah. So there's an interesting thing with the fascia. We're talking right now about eyebrows and symmetry in the face, but it also applies to injury. It's really the same concept. You know, we think our problem is where we feel it, but it's actually far removed when you take into account the fascial system.

And it's because it is this connective system. So you could have a problem of dense tissue all the way down in the back of your thigh, and it's creating a warping and an asymmetry in your face and you would never associate it. You'd go get plastic surgery, but you can directly change it by changing that root cause.

And it's the same thing with any kind of joint pain, which is, I think another thing that you'll find us say regularly is if it hurts, stay away from it. You know, the idea of, I gotta stretch where the pain is, is really wrong. You need to go to the source and it's an area you probably have no consciousness of.

**John:** So if something's going on, on the outside of the shoulder, there's usually a twisting or overstretching there. So that's where your symptom is. But the source is usually the muscle on the other side of the bone not shortening properly. And so the very simple way people learn how to problem solve their aches and pains and feel much, much better. And you feel better knowing that if something shows up, you can deal with it.

**Sita:** But the whole facelift concept is a popular one and we have a flow inside the memberships called the facelift flow and it focuses on the meridians that go into the face to raise the cheekbones, to get rid of the crow's feet, to create more symmetry. And you can feel it. When you do these stretches, you will feel your face relax, and you'll feel that fascial meridian connection. It's like a plane going through the body is kind of a way to think about it.

**Gregory Anne:** I could ask you a million more questions, but one thing you mentioned scoliosis.

So many people age into their scoliosis, right. Diagnosed as a young person. It's not warranted to have surgery. And so you get crooked and you live with it. Sometimes it hurts. Sometimes it doesn't, speaking from experience. Is this a facial situation?

**Sita:** Of course, you already know the answer to that, right?

**Gregory Anne:** I know but I want you to talk about it.

**Sita:** Totally. Yeah. I think we both want to talk about it. I just want to say one thing first. So anything going on in the spine is coming from your hamstrings. Okay. And there's diagnosed scoliosis, but there's not too many straight spines out there. Everybody's got some crookedness to their spine of some degree or another because nobody's hamstrings are working properly.

So I'll let John take over from.

**John:** Well, you know, I had a direct experience with a trainer and people have come over the years, the twist in the spine and the curves in the sense of scoliosis yes, the hamstrings are really impactful, but the gallbladder, the IT band is you know, is the source of that, and you need to change the IT band that runs along the outside of the butt start for the gallbladder to get healthier, but to spine to get the twist out.

**Sita:** These muscles attach at the base of the pelvis. And there, if you can visualize this, you've got these powerful muscles attaching to the base of your pelvis, the IT band, the three hamstring muscle groups.

And over time, or maybe even just from the beginning in your evolution in the way you've not developed, they develop a lot of dense fascia and that fascia holds that muscle in a warped position. And so what's happening is from the bottom up, it's then creating a twist in the pelvis and holding the pelvis in a mirror twist of the twist that it's held in, that muscle, which then just ricochets right up the spine.

So the source is down low in the pelvis and you can feel it like if you were to, if anybody out there were to just kind of do a body scan, just calmly and quietly, either laying down or standing, close your eyes and tune into your body, you would see that your pelvis is not lying straight. It's either tilted forward or backwards, turned to the right or the left.

It's higher on one side higher on the other, something is going on and that is then just going right up the spine and creating a twist. And over time it becomes calcified, cemented because it's just been going on for so long. But if you can shift it down below at the root, it's going to release it little by little up higher biomechanically.

That's how we understand what's going on in the spine, coming from the legs. So in scoliosis, in particular, the IT band.

**Gregory Anne:** So now to unhear all the things we've been hearing all these years and to make room for what you've just told us will be the challenge for people. But I want to encourage people to go to The Bendable Body and watch the free webinar and get a better sense of seeing it.

But there's demonstrations on your website.

**Sita:** Oh, yeah. And also on YouTube.

**John:** Yeah. And on the website, there's a blog with videos attached. We talk about herniated disc. Talk about different ailments that are common. We give you a few stretches to try to help those out.

We teach zoom classes.

**Gregory Anne:** And you're not doing any live. I saw on your site, New York, Boston, or New York and DC, you used to be.

**Sita:** Yeah, we were in Manhattan. We also worked in DC for about six, seven years between those two locations permanently in Manhattan and yeah, with all that's gone on, we moved to the country and bought a home and we just have been teaching virtually and are reluctant to go back to, in-person not really because of any danger at this point, just mainly because we like our new lifestyle.

**John:** It will happen Greg, it will happen.

**Gregory Anne:** I would imagine. Some people just want that one-on-one, help me move my arm in the right position. I'm curious about your membership and you give personal one-on-one attention to people in your membership community.

**Sita:** We love the community. We really do. It's, it's been amazing for us. You know, I, I think I was listening to you say, women, pretty much between the ages of 50 I'll even say like 60 onward. It's just a really underappreciated, undervalued, underused part of our population.

And they that's our community and they're our biggest fans. And. We just love them. I mean, we feel just as supported by them as they do us. It really is some symbiotic that way.

**John:** And the questions sometimes are really challenging, but, when people pose a question, "doesn't the heel want to go this way?"

The general answer we give is try it both ways and see which way you like it, which generates more force, which feels better to you because you know, everyone should be the authority on their own body. Yeah. And we're going to give you the four basics, the four pillars of a stretch, just basically how to do it.

The direction and force and speed and repetitions. And then you get to go from where you're starting from, where you're at and go at your own pace. You know, we're really not bound by anything except resisting and changing the fascia and feeling better.

**Sita:** Yeah. That's the one thing we won't bend on is the resistance.

No pun intended.

**Gregory Anne:** John and Sita, this has been absolutely fabulous. I really can't wait to take the class because, as you said, we're underutilized as we age, but if we're not feeling well, it's very easy to just be okay with not being our full selves. And as we get older, The conventional wisdom says that we will get stiffer and things will hurt and we'll fall apart.

And I know that my listeners don't buy that and they're all looking for ways to make sure that they can beat the conventional wisdom. So with people like you out there in the world, we have more opportunities to do that. So thank you very much for being my guest today. Yeah, really appreciate what you're doing.

**Sita:** Totally. When I was listening to your opening, I was like, oh my God. I feel like we're kind of doing the same thing here. We're thrilled you're out there.

**Gregory Anne:** Well, thank you so much. I appreciate it. People I'll be back next week with another fabulous guests be well till then.