

## No 32 Wilfred Barlow (1915-1991)

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1. Today I am going to talk about Wilfred Barlow. He was unique in being both a practising medical doctor, a rheumatologist, and being trained by Alexander.
2. He was a major figure in the AT from the 1940s until the 1980s. He was particularly interested in getting the AT accepted in the medical profession.
3. His book called *The Alexander Principle* which was published in 1973 focused on a medical view of the AT and was highly influential.
4. One of the people it brought into the Technique was Nikolaas Tinbergen, the scientist who shocked the scientific world by devoting half his 1973 Nobel Prize acceptance speech to praising the AT.
5. When I read it in the 1990s, I found it gave me a reason to continue with the AT when I was experiencing serious doubts about whether I should. I bought it to read when I was on a weekend work trip to Denmark and it convinced me to keep going.
6. Some biographical details. He was born in 1915 and grew up in Colwyn Bay in Wales. As a young man he was an excellent athlete and when he was studying at Oxford University in preparation for taking a medical degree, he represented the University in tennis.
7. He first heard of the AT in 1937 when he read Aldous Huxley's *Ends and Means* and was impressed by what it said. By coincidence, Frank Pierce Jones a classic professor in an East Coast University in the US at almost exactly the same time read the same book which also led on to him becoming an AT teacher and researcher.
8. In Barlow's case, it meant that the following year when he had a skiing accident which dislocated his shoulder and the doctors recommended surgery, he came instead to Alexander and began to have lessons.
9. He soon decided he wanted to become an Alexander teacher and joined Alexander's training course in 1938. He said:  
*Almost everything he (Alexander) was saying made sense to me, and I decided to study under him to learn to teach his methods. We struck a very close bond and*

*he certificated me as a teacher in 1940, just after the outbreak of the war.<sup>1</sup>*

10. On the course, he met Marjory Mechin (1915-2006) one the students from the first course who had stayed on to help. She was Alexander's niece and they were married in 1940.
11. At the same time as he joined Alexander's course, Barlow was doing his medical training in St Thomas' Hospital in London.
12. But meanwhile the Second World War had begun. This disrupted everything. Alexander was persuaded to go to America for safety. More or less everything was on hold until 1946 when normal life began to resume. Barlow finished his medical studies and was drafted into the Royal Army Medical Corps in 1942 where he remained until 1946.
13. After the War, Barlow began to specialise in rheumatology at the Middlesex Hospital. He also went back to work with Alexander, though as a practising doctor he was professionally not allowed to be paid for teaching the AT.
14. He then became involved in a libel action that Alexander had brought against the editor and author of a South African magazine which had published a remarkably hostile article attacking the AT, calling it *dangerous and irresponsible* if not *criminal* and calling Alexander a quack.
15. When the magazine refused to withdraw the article, Alexander felt he had no alternative but to sue. Barlow, as a medical doctor and AT teacher, agreed to go to South Africa to appear as a witness for Alexander even though his hospital refused to grant him leave of absence.
16. It was a bad career move for the young consultant. The head of the hospital Lord Webb-Johnson appeared for the magazine on the opposite side to Barlow. Alexander won the case and got damages but Barlow's post with the with the hospital was not renewed and he did not get another consultancy until 1952. He then got a post as a consultant at the Marylebone Hospital where he stayed until he retired in 1980.
17. In 1949, he and some other teachers tried to set up STAT with Alexander's approval. But Alexander withdrew his support and the effort got nowhere.
18. He and Marjory started a teacher-training school in 1950. He was also involved in getting the AT on to the curriculum at the

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<sup>1</sup> Barlow (1973)p23

Royal College of Music, RADA and the Central School of Speech and Drama.

19. He also managed to persuade the Inner London Education Authority to pay the fees of students attending AT teacher-training schools. It was Mrs Thatcher who put a stop to that.
20. In 1949, there was a complete rupture between Marjory and her uncle. She never revealed what had happened but the upshot was that she and Alexander never spoke again.
21. The Barlows and Joyce Wodeman managed to get STAT going again in 1958 and Barlow was editor of *The Alexander Journal* for its first eight issues. He remained active in AT affairs up to his death at the age of seventy six in 1991.
22. So Barlow was a big and influential figure in the AT. He was also a difficult man, very dictatorial and bad-tempered, sometimes flying into uncontrolled rages but there is no doubt about his overall importance to the AT.
23. For the rest of this talk I would like to sketch in his medical and scientific contribution which began in 1946.
24. He said:

*I myself spent a few boring years as a Regimental medical officer seeing little of either the enemy or medicine. It did, however, give me the opportunity to carry out research on large groups of young men and women who were under great emotional and physical stress: and in the process to confirm many of Alexander's observations...<sup>2</sup>*
25. This research was based on quite simple experiments in which he attached a tape measure to the back of people's heads and measured how much they pulled their head back when they sat into and got out of a chair.
26. These experiments are to the best of my knowledge the first attempt to investigate the AT in a scientific way.
27. He later did a variety of other experiments and published the results in medical journals. These are now long-forgotten but when Jean Fischer's book that assembles Barlow's papers comes out in June, we will be able to see how he built up his scientific picture of the Technique over the years.

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<sup>2</sup> Ibid.p23

28. In 1973, Barlow published *The Alexander Principle*. At this stage he had had about thirty years of medical practice and Alexander teaching. He said the basic principle underlying the Technique could be summarised as USE AFFECTS FUNCTIONING.
29. He distinguishes this basic principle from the various things that go in AT lessons which can be called the practice of the Technique. He bases this distinction on Alexander's description of the evolution of the Technique in the first chapter of *The Use of the Self* which is widely regarded as Alexander's clearest exposition of the development of the Technique.
30. In discussing the Alexander Principle, Barlow is very careful to define what he means by the terms USE and FUNCTION.
31. He said:
- Use means the way we use our bodies as we live from moment to moment. Not only when we are moving but when we are keeping still. Not only when we are speaking but when we are thinking....Not only when we are searching and manipulating our surroundings but when we are letting our surroundings manipulate us like puppets...<sup>3</sup>*
32. In this sense, we are "using" ourselves every moment of our lives, whether we are healthy or ill, aware of ourselves or oblivious to what we are doing; even asleep, we are using ourselves in the way we lie and breathe.
33. As to what we mean by good use, Barlow said:
- There are many alternative possibilities in the mechanical use of the body at any given time, but there is, for any given situation, a way of using the body which makes for the best functioning, for the least wear and tear, and for the sweetest running engine, just as there is a USE which leads to waste of energy and undue fatigue.<sup>4</sup>*
34. By *functioning* Barlow meant the way things work in relation to the way they should work.
35. If I pour coffee into the keyboard of my computer, it will almost certainly not function as it should. If I use a chisel as a screwdriver, it will affect its functioning the next time I want to

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<sup>3</sup> Ibid.17

<sup>4</sup> Ibid.p67

use it in some precision carpentry. If we persistently tighten our chests and hunch over our work, our lungs will not function as they should.

36. Really bad use is obvious to most people. But the majority of the population are completely unaware of the subtle and damaging ways in which they are misusing themselves. This is something, as AT teachers we learn to recognise and, with luck, point them towards improving their use.
37. In contrast with normal AT practice in which teachers deal with fully clothed pupils – removal of the shoes is normally as far as disrobing goes – Barlow treated his pupils as normal medical patients.
38. His book, uniquely in the AT literature, is copiously illustrated with photographs of these pupils completely naked or in their undergarments (faces blocked-out). Many of the photographs were also taken against a background grid so that postural deviations from the horizontal and vertical can be easily identified.
39. Although these photographs show little that would surprise an experienced AT teacher they provide clear visual evidence of how the misuse detected by AT teachers is associated with unbalanced or excessive muscular tensions, twists, distortions, and other deviations from the proper use of the musculo-skeletal system.
40. The same evidence is readily accessible to medical doctors but is rarely sought or considered by them.
41. One of Alexander's key discoveries was the importance of the head-neck relationship. He figured that out quite early in his teaching career.
42. When Rudolph Magnus published his study on animal posture in 1924, he used the phrase "*central apparatus*" to refer to the nexus or collection of nerve centres in the brainstem that govern posture.
43. Alexander was not a neuroscientist and he thought that he and Magnus were referring to the same thing and he began referring to the head-neck relationship as the "*primary control*".
44. It is a primary control in the sense that if you have not got the head-neck relationship working properly it is going to interfere with the working of the whole neuromuscular system. But it is

not the collection of nerve centres that Magnus referred to as the central apparatus.

45. Walter Carrington tended not to use the phrase “primary control” and I certainly do not like it. But Barlow hated it and refers very scathingly to the way some Alexander people seem to *...attribute an almost mystical significance to it.*<sup>5</sup>

46. Using the term “*primary control*” within a purely AT context is normally not a problem, provided you know what you are talking about. But it is worth remembering that it is not an expression that physiologists, doctors and neuroscientists recognise.

47. Barlow placed a lot of emphasis on the shoulder-neck area which he referred to as the “hump”. He said it is *the most important USE-area we possess.*<sup>6</sup>

48. He said

*...it is here that mis-use most frequently starts: it is here that we have to start if we are to correct the multitudinous mis-uses which the rest of the body can throw up...it is only when this primary misuse is dealt with that we shall see the answers to an expanding range of questions.*<sup>7</sup>

49. Anne Battye said that this did not mean that Barlow denied the importance of the head-neck relationship. She said that in his work on people Barlow always started and referred back to the release of tension in the head-neck area.

50. Barlow’s book is full of interesting material for us as AT teachers and we can each pick our own topics of interest. I am particularly interested in the whole question of balance which of course ties up with how we hold ourselves – our posture - and he devoted a long chapter to it in his book.

51. He says

*...it is possible to sit stand and walk and indeed to perform highly skilled tasks and yet be wrongly balanced.*<sup>8</sup>

52. This imbalance brings long-term problems:

*In time, not only does the resting state of the muscle become wrongly balanced, but it begins to modify the*

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<sup>5</sup> Ibid.

<sup>6</sup> Ibid.p41

<sup>7</sup> Ibid.p44

<sup>8</sup> Ibid.46

*bones and joints on which it works and also the circulatory system that traverses it. The bony framework becomes warped and cramped and stretched by the stresses and strains which are put on it by persistent over-contraction of muscle.*<sup>9</sup>

53. He gives the example of a skater who was able to bend over backwards and pick up a handkerchief in her teeth. But she had a twist in her back which was throwing off her balance and she developed a back pain which her trainer, physio and doctors were unable to cure.
54. Barlow said he was able to cure her with AT lessons which undid the twist and allowed her body to get back into balance and the pain disappeared.
55. As AT teachers AT teachers watching Wimbledon or the Olympics can easily identify faulty patterns of use even among top competitors. The sporting commentators never notice it, but once they are identified they make it easy to understand why some competitors suffer injury or fail to reach their performance potential.
56. As you read through the book, you will not agree with everything you read, but Barlow's observations are always interesting.
57. I also like the fact that he did not see the AT as a rigid body of dogma. Like Walter, he saw it as an increasing and developing body of knowledge.
58. He said:

*It remains for a new generation of scientists and educationalists to refine what we have been doing, and to see to it that the subtle basic training skills do not get lost.*<sup>10</sup>
59. For me, Wilfred Barlow is an extremely valuable addition to the rich tapestry of the AT. He is well worth the time and attention we give him.

## **References**

W. BARLOW (1973) *The Alexander Principle* - Vista London 1988

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<sup>9</sup> Ibid.p80

<sup>10</sup> Ibid.p14