

*Kinetic Chain Assessment
and
Functional Integrated Training*
Sample

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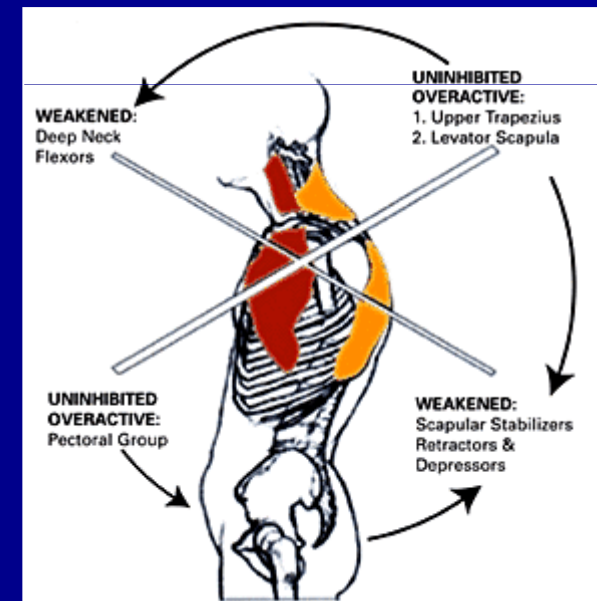
Today's ADL's

Dysfunctional living = Dysfunctional bodies!



Who is the client?

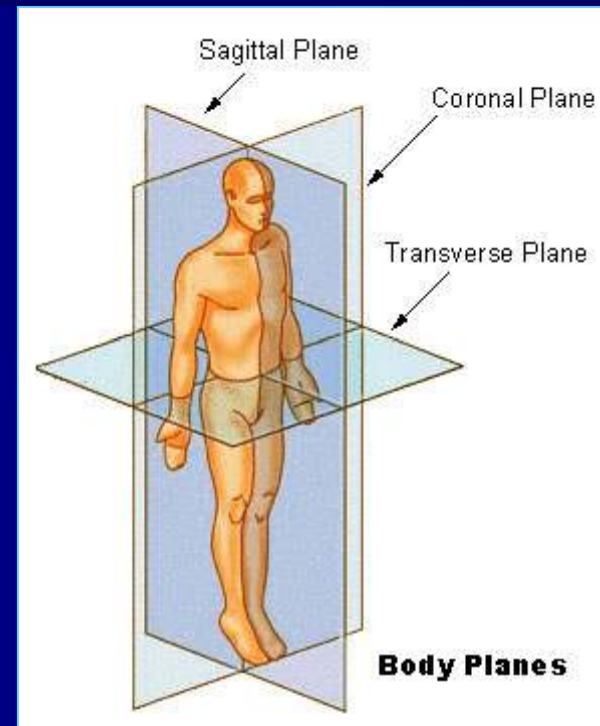
- Average personal training client:
- Deconditioned
- Weight loss / health goals
- Sedentary throughout rest of the day
- Prolonged posture ADL's



Upper cross Syndrome

What is 'Functional Exercise'?

- *"An integrated, multiplanar movement that involves acceleration, decelerating, stabilisation and occurs at multiple speeds in varying body positions" (NASM 2008)*



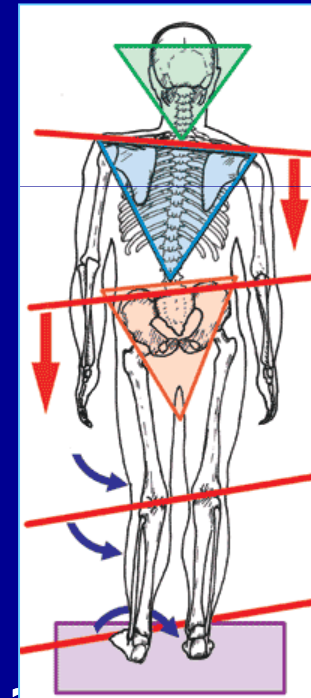
Personal Training

- Question: What is “Personal” about Personal Training?
- Is it enough to base exercise programming on:
 - The Client's goals
 - The client’s overall level of fitness?
 - Etc..?
- Is today's Personal Trainer “Assessing or Guessing”?

Question...

- How does the average personal trainer know that they do not:

- Ignore
- Exacerbate
- Induce



.....Kinetic chain (KC) imbalances?

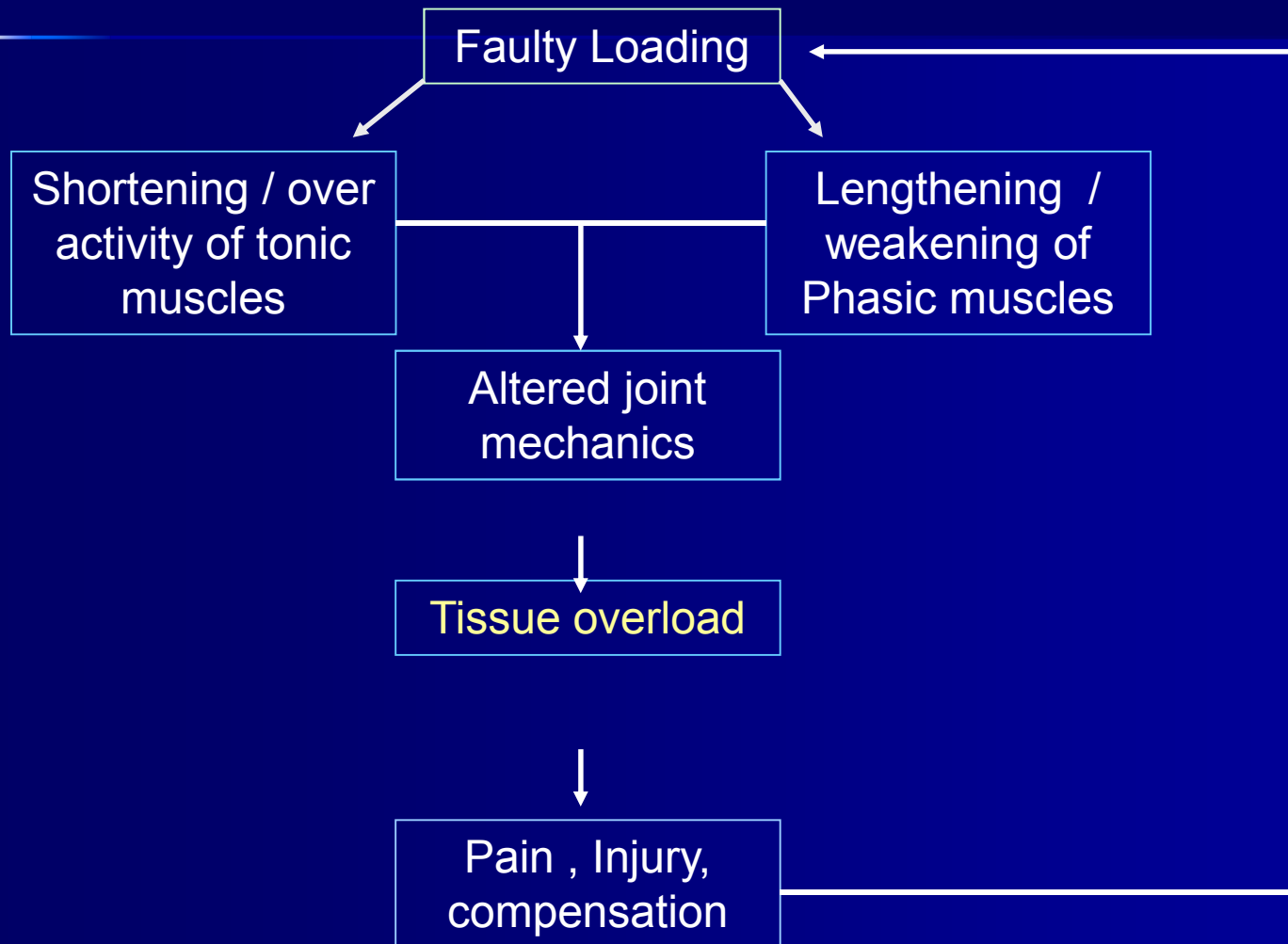
We need

- A... - Systemised
- Logical
 - Effective

System that:

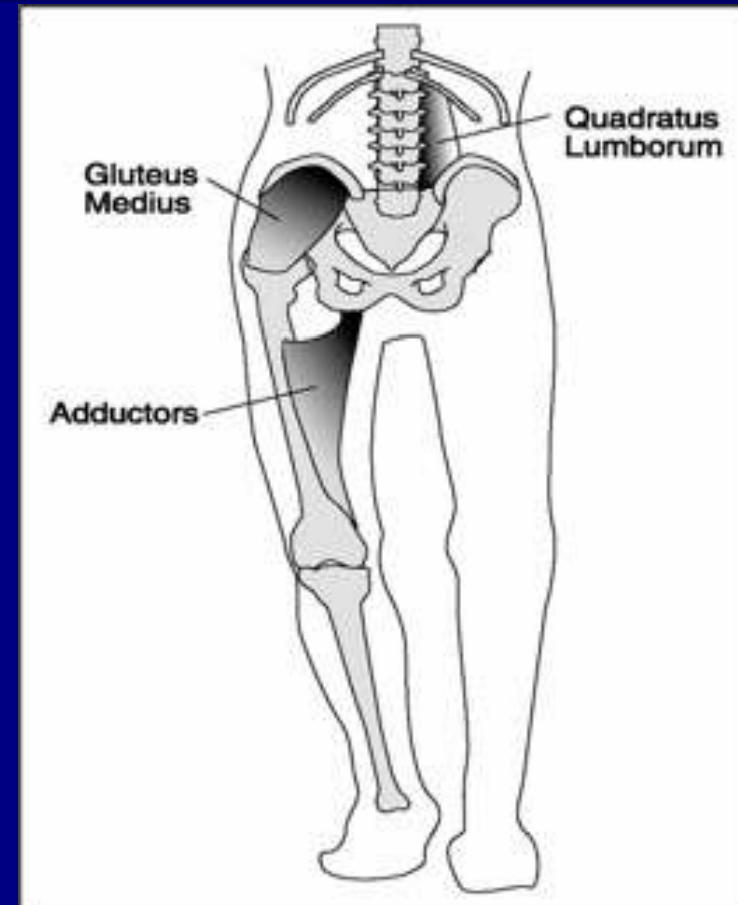
- Identifies kinetic chain imbalances
- Understands the problems that these cause
- Provides the exercise professional with the ability to *identify and correct dysfunction* and then maximise function.

Muscular imbalance



Example in action: Lateral stabilising system

- Assessment of “lateral stability” i.e. stability in the “Swing phase of gait”



Example in action: Single leg Knee Bend assessment

- Assessment of “lateral stability” i.e. stability in the “Swing phase of gait”

Normal Findings

- Knee: Over 2nd toe
- Pelvis level
- Shoulders level
- Knee tracks smoothly
- Forefoot does not hyper-pronate

Stereotypical dysfunction within the lateral system

- Quadratus lumborum: **Over activity**
- Adductors: **Over activity**

- Gluteus medius: **Under activity**

- + **Synergistic dominance!**

'Switch off' then 'Activate'

- PIR stretch the over active muscles:
Inhibition
- Isolate the underactive muscles:
Activation