Lesson Plan for 1.1b for Sarah Beck

TUTOR:	Sarah beck				
VENUE:	Willaston Memorial hall				
SUBJECT/THEME:	Micro teaching of asana: Uttanasana				
LEVEL OF STUDENTS:	Beginners in first year				
DATE:	21 st January 2018				
TIME/DURATION:	30 minutes				
RESOURCES:	Chairs, Wall, Blocks				
AIMS:	By the end of the lesson the teacher will aim to: teach a short asana practice preparing for uttanasana, standing forward bend/intense stretch pose, leaving students feeling mentally & physically balanced.				
LEARNING OUTCOMES:	By the end of the class students will be able to: 1. Perform uttanasana to the level of their own ability, using modifications as necessary (psychomotor) 2. State that an anterior tilt of the pelvis is required to practice uttanasana (cognitive) 3. Determine how their weight is distributed within their feet in uttanasana (affective)				
ASSESSMENT METHODS:	To measure whether the learning outcomes have been achieved there will be: 1. Close observation of the group & checking individually with students if needed 2. An invitation for students to show the difference between posterior & anterior pelvic tilts 3. Observation of students experimenting with pada bandha by altering their balance within the pose of tadasana and uttanasana, inviting individual and group feedback as relevant				
EVALUATION METHODS:	After the session I will give some personal verbal reflection, receive verbal peer & tutor feedback, and later will receive written tutor feedback and write a Post Lesson Reflective Evaluation (PLRE)				
BIBLIOGRAPHY:	Author, (Year of publication/edition), Title, Publishing House: Location of publication, page numbers See Guidelines for Writing Assignments for correct referencing and use of a bibliography				

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TIME	CONTENT	TEACHING METHOD	AREAS FOR CAUTION/MODIFICATIONS/AIDS VARIATIONS	PURPOSE/RATIONALE/ BENEFITS	NOTES
	Key for Teaching Method	s: VI = verbal in	struction D = demonstration PA = practicing al	ongside P = presentation	
	Check if any ailments are present within the group, & Check spacing of group				Ensure blocks & chairs are available
0.00	Lying in semi-supine position — attune to the breath 1. Pelvic tilts 2. Dwi pada pitham dynamic 3. Dwi pada pitham short stay (blocks)	VI	Kyphosis, chin lifts: padding behind head Pregnancy: circle pelvis in dandasana Vertigo: may need to turn the head to one side	To centre & raise awareness of pelvic tilts and mobility of spine	Have 2 blocks accessible
0.02	Jathara Parvritti: 1. Dynamic 2. Static where can straighten legs if possible	VI & D (standing)	Kyphosis, chin lifts: padding behind head Shoulder injuries: affected arms to sides Lower back conditions, hip replacement: move gently, feet to floor, blocks beneath thighs or knees if staying Hiatus Hernia, pregnancy: gentle Bharadvajrasana (kneeling twist)	To mobilise the spine & the shoulders, and relax buttocks & hips; engage adductors	
0.04	From savasana, head to knee to T-Shape - dynamic sequence	VI & D (standing)	General weakness, back conditions: keep the straight leg, bent, foot to floor for support Abdominal conditions: avoid head to knee Pregnancy: knee-crank and leg lift in dandasana instead	To awaken & strengthen the abdominals, strengthen thighs and lengthen hamstrings; mobilise shoulder joint into flexion	
	Transit by placing hands beneath lower back, press down into hands & forearms	VI & D	If necessary can roll to one side and come to seated		
0.07	Navasana (Boat pose) i) Feet to floor ii) Feet lifted, knees bent iii) Feet lifted, legs straight	PA	Back conditions, abdominal conditions, general weakness: keep feet to floor Hiatus Hernia, Pregnancy: can practice dandasana instead	To awaken & strengthen the core muscles, the back and quadriceps, relaxing the hamstrings	Soft face

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0.09	Chakki Chalasana (stirring the pot pose):	PA	Back conditions, sciatica, sacroiliac strain, stiffness: work with caution, sit on block, minimise flexion, bending knees as necessary	To mobilise hips, stretch adductors	
	transit through sukhasana (easy pose) -	D	Can move legs to side & come to kneeling if prefer		
0.12	Majrasana (cat pose) 1. ease out 2. dynamic cat Show anterior Pelvic Tilt ST The state of t	PA	Pregnancy: do not lower back, move flat to arch Wrist conditions: can place hands further forwards, can place wedge or rolled blanket beneath heels of hands Knee problems: if needed can place pad beneath knees, if necessary work from dandasana instead	To mobilise the spine and become familiar with the anterior tilt of the pelvis.	Note 3 pelvis tilts, also movement of individual vertebrae
0.14	Adho Mukha Svanasana (Down-Facing Dog) Stage 1:foot to foot Stage 2 Both heels Stage 3 one leg raise Stage 4: one leg raise & hip open	VI & D	Wrist conditions: can place wedge/rolled blanket beneath wrists, use fist or half dog HBP, CAD, ear & eye conditions & mature diabetic, pregnancy: be aware of effort, do not stay in pose, can practice cat balance Stiffness, back condition, sciatica: bend knees Osteoporosis: caution, rest as needed Hiatus hernia: practice cat balance	To stretch the hamstrings and calf muscles, utilise the anterior pelvic tilt & mobilise the shoulder joints & hip joints; also stretch hip flexor of raised leg	
0.18	Utthita Balasana (extended child's pose) to Mandukasana (frog pose)	D	Inflexibility, obesity, hypertension, CAD, detached retina, glaucoma, mature diabetic: cup chin in hands, elbows to floor or forehead to fists/blocks Knee conditions: try padding beneath knees, between heels & thighs or soft paschimottanasana Total hip replacements: very soft paschimott.	To ease open the hip joints, extend the spinal column; mobilise shoulders towards full flexion; practice using the breath to aid flexion from the hips.	
	- transit low squat (Utkasana) lifting up to standing via rag doll	D	Hypotension: move slowly through the levels	To relax the spine & raise awareness of the vertebrae	

0.20	Tadasana (mountain pose) to Palmryasana (palm tree pose) – work dynamically Stage 1: side to side no arms Stage 2: Raise one arm Stage 3: Raise both arms	PA	Shoulder injury: Stay at stage one Heart conditions, hypertension, CAD, mature diabetic: Caution & stay at correct level Low back conditions, sciatica & stiffness: Caution & stay at correct level	Raise awareness of pada bandha, mula bandha & keeping the lower ribs tucked in away from the skin Mobilise shoulder joint	-
0.22	Uttanasana: Stage 1 Hands to hips and bent knees – blocks between thighs – can stay here hands to chair/wall or go lower with hands to floor. Lift with hands to hips. Repeat if needed Uttanasana: Stage 2 Uttanasana with arms lowered to sides; can bend knees; can stay at this stage; Check Pada Bandha Uttanasana: Stage 3 Uttanasana with arms flexed forwards; can bend knees; Check Pada Bandha	P & D D possibly using student	For uttanasana: Herniated disc: avoid forward bends for at least 3 to 6 months, work with vrksasana, tree instead. Hamstring injury or stiffness: Bend knees or can work to halfway only Low back conditions, sciatica & stiffness: bend knees or can work to half way only, hand to chair if needed Osteoporosis: Work cautiously with knees bent Pregnancy: Caution, halfway with hands to chair can be an helpful - no prolonged stay Sacro-iliac strain: work with caution, limit flexion, bend knees Hiatus hernia: Half way only Heart conditions, hypertension, CAD, mature diabetic, eye and ear ailments: do not keep head down below the heart, can stay in ardha uttanasana, half forward bend. Hypotension: take care moving slowly between different heights	Raise awareness of use of adductors in uttanasana To explore flexing the trunk from the hips, lifting the tailbone & sitting bones backwards and upwards, aligning the whole spinal column Quiets the mind Calms the systems of the body, especially the cardiovascular and nervous systems Floods the brain with blood providing a sense of calm and clarity Rejuvenates the spinal nerves	Use 2 Blocks if possible Make chairs available or wall
0.29	Urdhva Hastasana (Raised hands pose) – stay – to Tadasana: Dynamic	VI	Shoulder injury: move to maximum, perhaps arms to shoulder level.	To realign the body & re-centre	