

Breaking down a B32 training session: the reasons behind your training prescription

Firstly some context

Training a *group* of people is tricky- everyone is different. The prescription we lay down must be more global; based on the needs of the group as a whole (within the context of our definition of 'BALANCED FITNESS'). So what we have done @ B32 is split our services into 3 SEPARATE STREAMS. There are prerequisites for each stream based on where people sit in balanced fitness, their levels of awareness, and what their personal goals are. This enables us to individualise the experience of each of our members by offering and customising (to the best of our ability) the stream that best meets their needs at any given time along their fitness and health journey. This has come about mostly from trial and error- what works, many mistakes, consultation with our mentors, understanding our biases, listening to clients, embracing what feels right in our gut for exercise prescriptions, thinking outside the box and review of our ETHOS.

Our group/balanced fitness prescription is essentially stream 2. To be in the right place to safely benefit from this prescription, we require someone to:

- successfully reach certain checkpoints in their individual exercise physiology assessment (for those CCP folks that means at least level 2 out of 5)
- have their endocrinology somewhat in check (no elevated/excessive cortisol, a healthy thyroid and responsive adrenals as determined via BIOSIGNATURE/ OPT SUMMATION SCORING).

This prescription is designed to safely nurture folks to higher levels of fitness and performance over time. Stream 2 is about experiences- learning the language of training, noticing the effects, responses and changes, and having those 'a-ha' moments.

Informed prescription

Our 'global' prescription for balanced fitness is based on observations and testing data we've collected from the group. What we've seen recently is:

1. The need for greater structural balance (single leg balance, balancing of upper body to lower strength ratios, core development, hip function and scapular stability). Most folks in the group at present have anterior tilted pelvis (82%)
2. Good energy pathway access to CP+ ALactic (94%)
3. Anaerobic 20sec-60sec-720sec (still testing; current observations look like this needs work in AnG lactic endurance 1-3; 60sec-240sec)
4. Good MAP 1-2 capabilities (15%)
5. Good MAP 3-7 capabilities (7%)
6. Busy lives, goals aren't "Elite Fitness", more like be better at stuff , look and feel good

So, bearing that in mind... let's break down today's training:

2-6kg OH med ball toss x1

Rest as needed x5

+

6 Sets:

Box squat – 2 tough reps

Rest 4min (include 5 Strict chin ups in rest period)

+

10min: AMRAP Step down box jumps @ 60/50

(score = rep x BWT in kg x .60 for guys and .50 for gals)

The format of lower body (LB) squat, upper body (UB) pull touches, double leg jumping development and aerobic power development around the 10min time domain (MAP 7) was used every Saturday during this last phase to create changes in those areas. This was based upon previous testing and where we feel folks need to go to create a solid strength foundation in line with 'balanced fitness'.

OH med ball toss – this was an exposure to some new fitness testing parameters we're looking at. Known as true hip extension, the med ball toss can give valuable information on whether someone is innately athletic, faster than they are strong, and if more explosive hip work will be valuable to them in fitness. This is also a good CNS primer before the rest of the training session. We chose 5 sets so folks could get an exposure long enough to feel and learn the language that is 'fast hip extension'. No rest was specifically assigned due to the skills-based stimulus we wanted to incite.

Box squat – we're definitely on the high bar back squat, no belt side of the fence when comparing low bar to high bar squat definitions and usage in training. Why? I feel that the high bar has a greater carry over athletically in balanced fitness and also demonstrates more biomechanical data that relates to other lifts (more on that another time). So why box squat this time? Pelvic tilt. Most folks at B32 have a pelvis that is in anterior tilt (82%), as mentioned above, and 50% of the 18% of folks who are in posterior tilt have other biomechanical limitations that inhibit ass-to-grass high bar squatting (these folks may in fact be level 0-1 in our exercise physiology screening perhaps?) The box squat teaches a better relationship with the glute and hamstring for folks who are in anterior tilt. Traditionally anterior tilt equates to mobile and weak hamstrings, strong glutes at the bottom of the squat, weak glutes at the top of the squat, tight hip flexors, a weak and long rec ab, tight TFL and over active spinal erectors.... In short their ass sticks out and when they squat deep it looks ace because that bottom position comes easy to them. The posterior version is just the opposite... in most cases.

We specifically prescribed 6 sets of 2 tough reps to enable folks to learn the language of box squatting and encourage some loading without being outrageous.

The wording we use at various times to communicate the session, certain movements we prescribe, and the strength and conditioning response we're after considers people's familiarity with the movement and training stimulus, and even takes into account the way we see folks react emotionally to things in the gym. We intentionally used the terminology "6 sets of 2 tough reps" to help us achieve a specific training stimulus based on all these factors... As an example, writing x2x6 or 2,2,2,2,2,2 or build to a heavy 2 or 2rm are all very different things, that each incite different responses from folks.

The chin up touches (in the rest periods) are just that. *Touches* on something we feel needs exposure, skill development, volume etc. Pull ups and squats are a neurological symphony in strength and conditioning work if optimising training outcomes and care for clients is important. Max effort work is placed on another day.

10min Box jump test: Have to thank Mike Fitzgerald for this one. The 10min timeframe and the step down movement standard enable the athlete to find non-stop, sustainable movement and actually test/train their aerobic power. The definition of aerobic is a) oxygen as energy and b) cyclical nonstop movement (think running). The step down also reduces the impact on the feet and achilles so we can train to train tomorrow.

Hope this answers some questions and gives you an insight into the kind of information and thought that goes behind even one session at B32.

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