

Received this question on email today. Thought I'd share my response as I believe its a valid set of questions, and we always encourage discussion...

'Why do you use so many tempo, rep, set, rest ranges @ B32? In particular the squatting. Why does a beginner program look so different? Where is the max effort 1RM training days? How do you determine these, who does what?'

Firstly, our definition of a squat is high bar, ass to grass. Why? Healthier knees and hips over time and greater transfer to athletic pursuits.

Secondly it's important to know that the programming you see on the blog is designed with a "do no harm" approach. We definitely drive in the direction of improvement but the improvement we're after is one of consistent, injury-free balanced fitness. Every day folks that are not looking for elite fitness. Just want to be BETTER.

Why tempo? Creates a consistent (i.e. repeatable) lifting environment for comparing lifts week to week, month to month and year to year. Allows the coach to tailor the time under tension in a lift to develop whatever muscle activation/development they deem biomechanically appropriate movement.

Back to squatting...

We could seriously talk about how folks should squat all day. There are so many facets to ideal 'biomechanics' that without looking at the whole picture for each individual, a general prescription is unlikely to ever fully develop someone's kinesiological patterns to support athleticism. That is, to advance an individual to their best athletic state requires a customized & tailored prescription addressing their unique set of needs for development. Not a 'one size fits all'. Attempting to teach technique by simply holding all folks in a squat and just telling them to go deeper and drive their knees out IS NOT good coaching.

We try to look outside the box a little and assess WHY someone's squat is less than ideal. It's during this assessment that we can discover and unravel what a correct prescription may look like for that individual (or small group- our group classes are only 5-10 max). Defaulting and/or being too heavily influenced by conjugate or repetition methods of training strength is possibly doing the client a disservice. It may not be what they need. That's the coach's bias affecting the prescription.

(Side note: how often do you see clients doing the same sport as the coach? Another topic all together. One that i plan on elaborating on in the future!)

So, based on all of the above factors, we give varied prescriptions because folks vary in shape, ability and mechanics.

So where should a coach start with a squatting prescription? Here are some basics for understanding what squat prescription may suit a beginner.

What is a beginner?

Never been under a barbell before.

Never been properly shown how to squat or been given an explanation of where a squat can be used athletically.

Assuming that they have adequate fascia and joint movement to achieve an ass to ankle squat.

What else needs to be considered before throwing a beginner into squatting?

Testing kinematic chains - can they bend knee and hip at the same time? (the accordion)

Can they perform an air squat with the same movement pattern of hip and knee bending unison?

If yes to both questions then here are 3 potential prescriptions and guidelines for accurate and safe kinematic chain development.

1. Heels elevated bsq @ 5010, 10,10,8,8; rest 2-3min

- aim is to nurture and develop correct vmo/quad/glute relationship in full ROM squatting while allowing enough time under tension to learn the language of squatting. Loading will be light as each rep takes 6sec.

2. Rhythm Squats @ 1010, 35reps; rest 1-4min x2

- aim is to learn rhythm and breathing in squatting while maintaining constant muscle tension. Endurance aspect helps to teach efficiency of movement while providing enough repetition to learn the language of squatting.

3. 1+ 1/4 squats, FS, goblet sq, bsq or air sq @ 4111, 8,8,6,6; rest 2-3min

- aim is to develop greater control in deep hip flexion. This squat requires the athlete to lower themselves into the hole of the squat rise slowly to just below parallel and then return back into the hole before standing. Almost like a slow bounce out of the hole. This extra time spent controlling knee and hip in deep hip flexion teaches the client to maintain vmo+glute med to re-activate in and out of range where they switch off.

Things to consider for squatting:

1. BWT bsq @ 30X1 is the goal BEFORE any jumping or plyometrics. Eg. Box jumps.

2. If training age of athlete is low and they've only been squatting for 1-3 years any max effort (ME) repetitions under 5reps may be more harmful than beneficial. That's why you don't see any 1RM bsq attempts on our blog anymore. Anyone who is attempting 1RM squatting is usually only doing it for sporting reasons and that's when we put that person on an individualised program design (IPD).

3. Adequate movement screenings, single leg and lower back testing is paramount before designing a squat session and progression for someone. It's truly amazing how many folks are out there doing lifting in gyms with coaches, jumping and running around in boot camps WITHOUT these tests being conducted. And they're being damaged by it, not developed. Assess, don't guess.

Hope this helps. Comments welcome. And thanks for encouraging some discussion.

Ross