



A Physiotherapy That Inhabits Time: Between Doing and Being Reflections for a More Human, Conscious, and Present Practice

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We live in a world where everything is urgent. Doing, creating, moving forward, never stopping... To the point where productivity has become the contemporary religion. Rest has been pathologized and is now viewed as a privilege, a waste of time, and a luxury that not everyone can afford, not even those of us who work in healthcare.

The system and society measure value by what is useful, fast, and visible. It's an accelerated society that demands results and considers anything unproductive as inefficient. And in this rhythm — mainly economic, but also symbolic — we've inherited a way of understanding health: a "state" achieved by doing more, moving more, accomplishing more, occupying all our time, our body, and our thoughts. Because only by "doing" and being "productive" are we seen as healthy.

Without realizing it, even through discourses that aim to be holistic, we've reduced health to constant activity — a pattern even replicated by those of us who claim to have a more human, broader, and sensitive perspective.

If we are health professionals, not disease professionals, we should ask ourselves: Do all people really need to become more active and less sedentary? What if what they need is not activation, but rest? What if health is not built through movement, but through pause?

This is not a praise of sedentary lifestyles. It's not a call to stop moving. Instead, it's an invitation to ask ourselves, with clinical and ethical honesty, what does this person in front of me truly need? Is what I propose as treatment emerging from their needs or from my urgency to intervene? If I stop to listen to the person in front of me, truly, is it a waste of time?

We've confused intervention with action. And physiotherapy with constant occupation of the body. I firmly believe that we urgently need to see rest, stopping, and pausing as part of health — that rest is not the opposite of movement, but another form of movement. That stopping can also be therapeutic. That staying still, in silence, can be just as transformative and effective as a structured exercise session.

As physiotherapists, we routinely ask how much someone walks, how many hours they work, whether they exercise, and if they're "active"; however, we rarely ask if they rest, if they sleep peacefully, or if they have time for themselves to reflect or pause. We seldom validate the right not to be able, not to perform, not to be "fit."

We have self-proclaimed ourselves "experts in the body and movement," but the most crucial question is: whose body? Because bodily experiences are not neutral — they are filled with subjectivity, history, memory, emotion, trauma, and silence. There is no universal body or a single way to move, so how could we be experts in someone else's body and movement? Perhaps we can only become experts in our own.

Thus, our role may not be to be experts in others' bodies, but to accompany people in becoming experts in themselves. To help them recognize their limits, possibilities, desires, and unique rhythms. To build, from the body, a relationship of genuine self-awareness. And that's only possible if we stop listening, observing without haste, and asking without assuming.

Have we confused active physiotherapy with "hyperoccupation"? Since we claim to empower people and implement active health interventions, but... who sets the goals? Who proposes the exercises? Who sets the pace, tone, load, and objectives? How much listening exists in our practice? How much space do we give to what this person wants, can, or needs today?

A truly active physiotherapy is one in which the person is the protagonist, not merely a compliant participant.

Promoting health is not just about mobilizing and encouraging people to be "more active." It is also about legitimizing fatigue, allowing silence, and recognizing that contemplation is therapeutic too. That doing for the sake of doing does not always heal, and sometimes, just sometimes, the most transformative thing is to be able to say: "It's okay to stop," "It's okay to rest."

This is not about replacing doing with rest as the new universal recipe. It's about knowing when *not doing* is also *doing*. And this includes us, healthcare professionals, permitting ourselves to pause, to question, and to review our interventions, logic, and assumptions. To confront our own need for control, for protagonism, and our urge to fill every therapeutic space with action.

Because stopping is not passivity: stopping is presence.

And if there's one thing I'm convinced of, it's that accompanying people humanely requires not just knowledge, but awareness. An awareness cultivated in stillness, in respect, in deep listening — one that doesn't fear clinical silence, but embraces it as a space for connection where both people can be nourished.

Maybe it's time to remember that even in physiotherapy, we can inhabit rest as a health practice. Because in a world that never stops, pausing is revolutionary. And in a health system that demands so much, giving people back the right to rest is also care.

I hope that all readers who come to this journal will find in its pages an opportunity to pause, supported by the words and reflections of those who, through their work, demonstrate their deep commitment to life and others.

May authors find here not only motivation to produce more and better research in mental health, but also a space that connects them with the greatness, strength, and inner calm that dwells within each of them.

And may the team that makes this great endeavor possible also recognize themselves as a living part of this act of care. May our work never cloud our purpose.

To those of you who make this publication possible, my deepest gratitude.