FORTITUDE
FITNESS TRAINING

Five Ways to Test Your Mobility

Curious where you stand? These five quick checks take just a few minutes and need only a little floor space and a wall. There is no pass or fail, just a snapshot of how your body is moving today and a guide to what to focus on next.



1 The Floor-to-Stand Test

Sit on the floor with your legs crossed. Now stand all the way up without using your hands, knees, or anything else for support. Then sit back down the same way.

What to look for: Getting up and down smoothly with no hands. Needing a hand, a knee, or a push off the floor counts as a "work on."

If this was tough, work on: Hip mobility (especially rotation), ankle mobility, leg and glute strength, core control, and balance. This test reflects strength and mobility working together.

What often causes it: Long hours of sitting, rarely getting down on the floor in daily life, gradual loss of leg strength with age, stiff hips or ankles, and old knee or hip injuries that have changed how you move.



2 The Deep Squat Hold

Stand with your feet about shoulder width apart. Sink down into the deepest squat you comfortably can and try to hold it for 30 seconds.

What to look for: Heels staying flat on the floor, chest tall, and the ability to stay there without tipping backward.

If this was tough, work on: Ankle mobility, hip mobility, upper back (thoracic) extension, and core stability. Heels lifting points to the ankles. Tipping backward or rounding forward points to the hips and upper back.

What often causes it: Sitting in chairs for most of the day (we rarely squat all the way down anymore), tight calves from shoes with raised heels, past ankle sprains, and a stiff upper back from desk and phone posture.



3 The Back Scratch Test

Reach one arm over your shoulder and down your back. Bring the other arm behind your lower back and reach up. Try to touch your fingers together, then switch sides.

What to look for: Fingertips touching or close to it on both sides, without a big difference from one side to the other.

If this was tough, work on: Shoulder rotation (both directions), upper back mobility, and flexibility through the chest and the large back muscles (lats). A lopsided result means one shoulder needs extra attention.

What often causes it: Rounded posture from computers, phones, and driving, tight chest and lat muscles, past shoulder injuries, and one-sided activities like golf, tennis, or always carrying a bag on the same shoulder.



4 The Knee-to-Wall Test

Face a wall in a staggered stance with your front toes about four inches away. Keeping your front heel flat on the floor, bend your knee forward and try to touch the wall. Test both sides.

What to look for: Your knee reaching the wall without your heel popping up. If it is easy, scoot your foot back a little to find your limit.

If this was tough, work on: Ankle mobility (how far your shin can travel over your foot) and calf flexibility. Limited ankles often show up as knee, hip, or lower back discomfort higher up the chain.

What often causes it: Tight calves, old ankle sprains that never fully regained range, shoes with a raised heel, long periods of sitting or driving, and not moving the ankles through their full range very often.



5 The Toe Touch

Stand tall with your feet together and knees straight (but not locked). Slowly hinge forward and reach toward your toes.

What to look for: Fingertips reaching your toes without strain, with your back rounding smoothly and no pinching or pain.

If this was tough, work on: Hamstring flexibility, the hip hinge (bending from the hips, not just the back), and lower back mobility. Sometimes the body is simply guarding and needs to feel safe moving into that range.

What often causes it: Long hours of sitting, which keeps the hamstrings and hips in a shortened position, a lower back that has been protecting itself after past aches, and rarely moving through a full forward bend.