

# THE RUNNING FIX

**Stop Overstriding. Control Your Mechanics. Feel Lighter On Every Run.**

**A 7-MINUTE PLYOMETRIC PROTOCOL FOR RUNNERS 30+**

[@dobetterfitness](#) · Running Gait Mechanics Expert

**THE GUIDE TO THE 5 DIFFERENT RUNNER TYPES**

# Why You Feel Heavy on Your Runs

If your legs feel like lead after mile two, or your knees and hips nag you even on easy days, there's a real chance it isn't cardio, shoes, or mileage. It's how your body lands.

Most runners over 30 are unknowingly collapsing (their hip, knee, or foot drops inward at impact). That collapse costs you energy on every single step, pushes force into the wrong tissues, and leaves you fighting a stride that's fighting you back.

## The fix isn't more miles. It's teaching the body how to land.

This guide is the companion to the 5 different running mechanics (Overstrider, Weaver, Collapser, Glute Amesiatic, and Bouncer) – the multiple posts where I broke down each of the five ways runners fall into. In the next few pages, you'll learn:

- How to spot your own collapse in 60 seconds
- A 7-minute plyometric protocol to re-train your landing
- Three in-run cues you can use starting on your next easy run

**Promise:** Done twice a week for four weeks, 80% of runners I coach report feeling lighter and more controlled in their stride — without adding a single mile.

## The Five Collapse Patterns

Every collapse I've assessed in a gait review fits into one of these five buckets. You probably have a primary and a secondary. Circle yours.

### 1. The Knee Dropper (weaver)

Knee drifts inward (valgus) at midstance. Often paired with IT band pain, runner's knee, or kneecap aches.

*Root cause: Weak glute medius + poor foot intrinsic control.*

### 2. The Hip Dumper (Collapser)

One hip drops as the opposite foot leaves the ground. Watch your own shadow on sunny days — you'll see it.

*Root cause: Weak side glutes, poor trunk control.*

### 3. The Foot Pronator

Arch collapses hard at impact, foot rolls inward beyond neutral. Often blamed on shoes — the real issue is above.

### 4. The Forward Faller

Torso leans ahead of the hips; you're overstriding to chase your own center of mass. Hamstrings, low back, and shins take the hit.

### 5. The Brake Runner (Overstrider)

Heel lands way in front of the body with a locked-out knee. Every step is a micro-brake. Common in runners who came from cycling or who "think" heel striking is wrong.

# The 60-Second Self-Screen

You don't need a lab. You need a phone, a wall, and a minute. Do each test, note the result, and match it to the patterns on the previous page.

## Test 1 — The Single-Leg Mirror Check

Stand in front of a mirror. Lift one leg. Hold for 20 seconds per side.

**Look for:** Does the standing-leg knee drift inward? Does your hip drop on the lifted side? Either = collapse pattern.

## Test 2 — The Step-Down

Stand on a 6-inch step. Slowly lower the opposite heel to the floor. Film yourself from the front.

**Look for:** Knee cave, hip drop, or torso lean. Any of the three = the pattern shows up under load.

## Test 3 — The Treadmill Shadow Test

Film your stride from behind on a treadmill at an easy pace for 60-90 seconds (BEHIND YOU). Slow it down in your camera roll.

**Look for:** Which hip drops, which knee caves, which foot rolls. This is the clearest view you'll ever get of yourself.

**Tip:** Don't try to fix everything at once. Pick the single biggest collapse you see. That's the one the protocol below will attack first.

# The 7-Minute Plyometric Protocol

Plyometrics teach the nervous system what “stiff, controlled, light” feels like. This is short on purpose — do it before your run, 2–3x per week, for four weeks.

**Rules:** quiet feet, land softly, no collapse. If your form breaks, cut the reps in half.

#	Exercise	Reps	Purpose
1	<a href="#">Pogo Hops (in place)</a>	2 × 20s	Reactive calf + foot stiffness
2	<a href="#">Lateral Line Hops</a>	2 × 20s	Frontal-plane control (knee cave fix)
3	<a href="#">Single-Leg Hops (forward)</a>	2 × 6/side	Hip + glute medius under load
4	<a href="#">Split-Stance Stick Landings</a>	2 × 5/side	Trains controlled deceleration
5	<a href="#">Box Jump → Stick</a>	2 × 4	Whole-stride force control
6	<a href="#">A-Skips</a>	2 × 15m	Locks in tall, light posture
7	<a href="#">Wall Drill (knee drives)</a>	2 × 10/side	Posture + cadence reset cue

**Progression:** Week 1–2 stay with the above. Weeks 3–4, add +1 rep to each set. If anything hurts sharply, stop and regress to half reps — plyos are a nervous-system drill, not a grind.

## Three Cues to Take on Your Next Run

The plyos build the capacity. These cues actually cash it in mid-run. Use one cue per kilometer for the first 20 minutes — don’t try all three at once.

### CUE 1 — “Run Tall, Push Back”

Imagine a string pulling the top of your head up, and push the ground behind you instead of reaching forward. This single cue fixes most overstride/forward-fall patterns.

### CUE 2 — “Quiet Feet”

Make your footfalls silent. If someone couldn’t hear you running, that’s the target. Silent feet are controlled feet — it directly reduces collapse at impact.

### CUE 3 — “Knees Forward”

Drive your knee forward (not up) off the ground. This cue alone subtly raises your cadence and shortens your overstride without you thinking about either.

#### The 4-Week Rule:

Plyo protocol 2–3x/week. One cue per easy run. Don’t add mileage for four weeks. Then reassess with the self-screen on the previous page. You’ll see and feel the difference.

## Want the Full Gait Review?

This guide gives you the framework. But every runner's collapse is a little different — and after 800+ gait reviews, the single fastest path to pain-free miles is having a trained eye look at yours.

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- 01 [Book a Call](#)** We'll spend 15 minutes on your running: your goals, what's not working, and a few tips you can start using right away. From there, we'll walk through how coaching together would look if it feels like a fit.
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- 02 [Download the Do Better App](#)** Your plyo protocol, running drills, and strength library in one place. Daily workouts tuned to runners 30+.
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*Medical disclaimer: This guide is educational and not medical advice. If you're actively injured, consult a qualified provider before starting new plyometric work. Stop any exercise that produces sharp pain.*