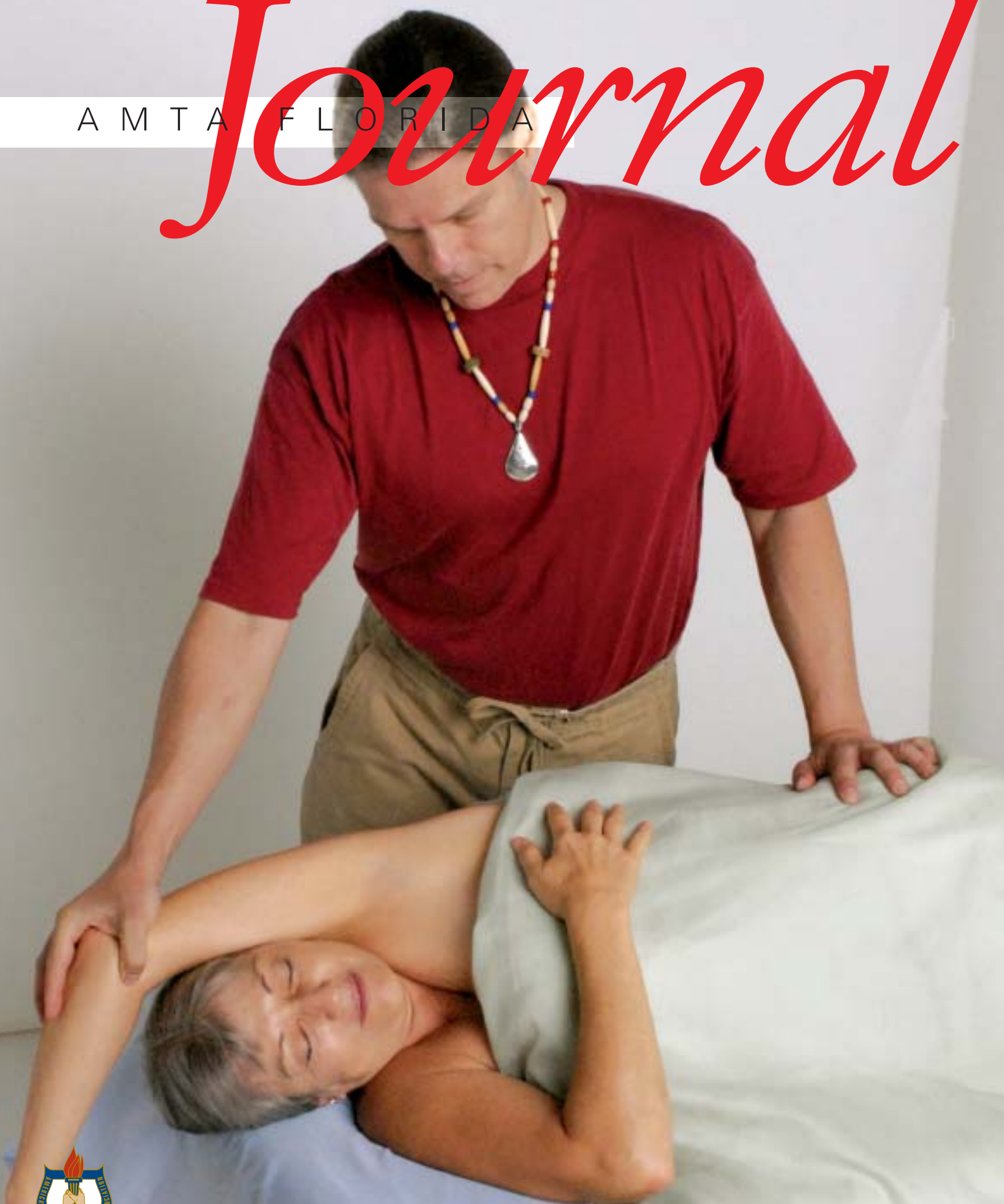


A M T A F L O R I D A

Journal



Spring 2008 #45 • \$4.00 • Active Isolated Stretching • Iterative Process • The Wounded Client

Mission:

“To serve AMTA members while advancing the art, science and practice of massage therapy.”

Acting Managing Editor

Pat Donohue/Valerie Cartagena

Publisher

AMTA Florida Chapter

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May 10, 2008



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Volunteers Needed!

To fill Committee positions call Pat Donohue if interested.

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B I N D I
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Message

PAT DONOHUE



I have been an AMTA member for over 30 years. I remember my first experience with AMTA. It was at a National Conference held in Scranton, Pa. What a wonderful experience for me. A whole room filled with massage therapists, all willing to care and share their talents with me. WOW!

I strive to share that feeling with everyone who becomes a massage therapist. The place is AMTA. Sharing and caring for one another while building our practice, promotion, public awareness and achieving success in our wonderful field of massage therapy.

I started my service life with AMTA in another chapter, for my first 25 years as a member, I wrote meeting notices, stuffed envelopes, ran workshops, and started a chapter convention which has continued as a yearly event. After serving my presidency for 2 terms, I moved on to the National Board as a Vice President.

I moved from New York and relocated to Florida in 2002 to retire. That lasted for about 3 months. I started to feel a lost. What was it? I was missing my AMTA family. I became active in the Florida Chapter, attended my first AMTA Florida State Annual Meeting in St Augustine.

I submitted my name to run for a position on the Board of Directors and was elected to serve as 2nd Vice President of our chapter. Due to circumstances the president, Marie Turk, resigned in the middle of her term.

I was asked to fill the position and moved up to President. In 2006 I ran for President and now, I am asking for your vote, so I can continue my term limit which ends in 2010.

I am a visionary. When I became president my vision and goals were:

- Update the Standing Rules; separate the office of secretary/ treasurer which will create another voice on the Board of Directors for greater input to the membership needs as well as balancing the work for the volunteer. Passing the updated Standing Rules, enables us to recognize Units, giving the members from local areas the ability to network, a voice on the state board as well as bringing continuing education to their neighborhood.

Now the work began.

Establish Units -we now have 10 Units and a few more in the works:

- Pensacola Unit, Pinellas Suncoast Unit, Miami Unit, Heart of Florida Unit, Monroe Unit, Pembroke Pines Unit, Southwest Unit, West Palm Unit, newly formed Jacksonville 1st Coast Unit, Sarasota Unit.
- Establish a variety of quality education in and out the Florida area.
- Establish a strong Education Committee, with the help of Eileen Newsome as the chair along with Jeff Wood and Sam Pace on her committee, they have created an education survey to see what you would like to have presented at future meetings.
- Establish and registered this chapter with the CE Broker as a Florida provider for CEU's through the Education Committee.
- Establish a Speakers' Bureau to easy local a speaker(s) on the topic(s) you want to be presented.
- Establish an Education Program at our "Conference" every two years to coincide with our license renewal year. This was planned so that our members can receive all of the CEU's required to renew their license all at the same time for an affordable fee's, and enjoy having a wonderful time networking, visiting the Trade Show as you view the latest state of art innervations in the profession of massage. All this beginning tax deductible item and loving it!

Our next State Conference is coming up in March 2009. I will bring in the best bids to keep expenses down.

Establish our Annual Dinner Meetings. This has brought out more members each year. "A night on AMTA" you could say with free CEU's for appetizer while, exercising your rights as members by voting on your budget, projects, programs and services along with the officers that will represent you.

This year we have a higher attendance. Last year we had 32 at the Annual Dinner Meeting attended 2007. Tonight in attendance a non-renewal year we have over 50 members registered. (Next year I would like to see it doubled.)

Establish a more attentive and interactive relationship with the Florida Board of Massage. The Florida Board of Massage meets 4 meetings a year. I've appeared before the Board on behalf of the Chapter and with some of our members for various reasons.

One of the issues for the Board was to accept more massage therapist who relocated to Florida as they applied for Licensure through Endorsements. I am happy to say has become a reality more therapists are now going through endorsement for their Florida license.

Second item is the recognition of the new National Massage Therapy Exam in addition to the well established National Exam for Massage Therapist and Bodywork and soon a third the Exam from the Federations of Massage Boards.

Requesting the State Board of Massage to give presentations at our Annual meeting where you receive CEU's regarding the Law. This year the state, thanks to Lynda Soline-Wolfe has added Legal Counsel, Sam DiConcilio has offered to do the presentation. Thank you both for your support.

Major fact...Establish a solid financial situation that provides us with reserves. (\$75,000.) At the close of business on January 31st 2008 we have \$169,000.00 in the bank. This puts us into the position of being solvent and able to provide better programs & services for the entire membership without raising chapter dues!

Establish a Web Site that is user friendly and informative for members and public use. Thank you to Karen Roth our Website Chair

I supported and assisted in the campaign to help the Massage Therapist in need of disaster relief. Encouraging the national board of directors under the leadership of MK, now our National President, to have the national organization fund victims of Katrina with new massage supplies, including massage tables, sheets, oils, etc. so they could get back on their feet.

I attended, work and networked at last year's FOAM event to see how this Public Relation service affected our membership. I think this is a great way for the Osteopaths to become aware of where to find a qualified massage therapist for their patients and themselves.

I started to Interacted with Schools creating a better level of understand of Units and the need for local networking and education.

Confirm, support and entrust while assisting committees. Committees are the back bone of our chapter. We must lead, and then let them go to complete their charge. Empowerment is a wonderful feeling.

"Respect for each other and Trust are the two main ideals I follow."

Our chapter has many volunteers becoming active ... I welcome you and applaud you for your volunteering spirit.

I hope you have appreciated and accepted my work as president.

I am not finished... There is still plenty of work to be done.

I trust you will support me and vote for me, so I can continue to work and represent you locally and nationally.

Thank you,

Pat Donohue.

Thank you for voting for me...I was re-elected as your President!

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Editor

VALERIE CARTAGENA

On February 7, the Chinese celebrated their new year. 2008 is the year of the Rat. The Rat is the first sign of the Chinese zodiac which signifies new beginnings. That makes this year a great time to start new ventures and break new ground. This includes new ideas, directions and ways of doing things. We should experiment and put plans into action.

Our Florida chapter of the AMTA also has a reason to celebrate. In March, we celebrated our 20th year as a chapter. All of the chapters around the country have been an outgrowth of our national AMTA who has supported chapters, enabling us to flourish while shaping the future of the massage profession.

Our annual chapter meeting was held on February 29th in Jacksonville. It was my first time attending where I was able to meet our fellow members. I also got to take part in the elections. Pat Donohue was re-elected as our chapter President. Karen Roth returned to the board as our 2nd VP. We added two new faces to the board. Candy Morris as our Secretary and Eileen Newsome our Education Chair is our Treasurer. The delegates for 2009 are: Karen Godfrey, Tracy Samples, Anita Dean, Dave Kasprzyk and Estrellita Izquierdo. I would like to congratulate our officers and delegates who were elected to their positions. I enjoyed meeting and greeting all of you.

Our chapter is still looking for our next pin design. Please contact our 1st VP Jackie Kincaid @ cmti@bellsouth.net with your ideas.

Yours could be the new pin for the Florida chapter.

Karen Roth has been organizing the Medical Liaison Committee. She needs volunteers for their FOMA (Florida Osteopathic Medical Association) as well as other osteopathic events. Please contact Karen to volunteer. This is your time to educate Osteopathic Physicians on the importance of massage therapy.

Karen Roth has also been busy building our website. Check it out: www.amtaflorida.org. There is a lot of great information to be found and you can also find journal archives.

In honoring the spirit of the Chinese New Year, I am breaking new ground. This is my first journal as your editor. I hope you enjoy the articles that I have pulled together and that they only add to your career as a massage therapist. I would also like to thank all that have helped me along the way. As always, I welcome comments and suggestions.

Make 2008 a great one!!

Valerie Cartagena





Welcome NEW FLORIDA MEMBERS

New Members

Eva Ambrus	Miami	Timothy Dunn	Jupiter	Jennifer King	Melrose
Kristie Amezcua	Miami	Christopher Earle	Merritt Island	Lauren M. Kirkendall	Morriston
Christina Andelmo	Ocala	Lauren L. Eldredge	Jacksonville	Stephanie Koob	Delray Beach
Theodore H. Andreadis	Gulf Breeze	Penni J. Engelman	Brandon	Dina Krukovets	North Port
Anabella S. Avellaneda	Miami	Amy Finkelstein	Boca Raton	Zhanna Krukovets	North Port
Blair Bain	Bellevue	Keith Fitch	Rockledge	John Kylo	Rockledge
Judy T. Baker	Pensacola	Michelle A. Fossler	Mc Intosh	Stacy J. Laden	Miami
Amber Banda	Wimauma	Danielle Fountain	Saint Augustine	Linda Grant Laman	Fort Lauderdale
Florencia Barolin	Coral Gables	Jessica Freeland	Tallahassee	Charles Lawrence	Lakeland
Donald Bell	Orange Park	Janelle Gamez	Keystone Heights	Tamara R. Lewis	Orlando
Amanda Blackwelder	Bradenton	Diana Garcia	Miami	Jennifer L. Liesen	Key West
Melanie Boden	Pompano Beach	Matthew A. Garner	Gulf Breeze	Rebecca Lopez	Orlando
Alix M. Brandow	Gainesville	Joseph Giglia	Venice	Stephenie Lynn Lorenzini	Tallahassee
Gerolyne Bronte	Winter Springs	Raiselle Gittler	Fort Lauderdale	Ina C. Ludka	Miami
Anne Kirkpatrick Brown	Gainesville	Robert G. Gouley	Fort Myers	Beata S. Lysakowska	Palm Coast
Adolfo Calligos-Espinoza	Deerfield Beach	Michael Jon Gowin	Saint Petersburg	Russell Mamorsky	Hollywood
Christine M. Campbell	Holt	Barbara J. Granberg	Winter Park	Andrea Mannas	Fort Lauderdale
Padraic Carey	Miami	Laura J. Grovac	Trenton	Skyler Martz	Clearwater
Eduardo Castro Zamora	Miami	Casey R. Gruendler	Riverview	Robert David McNeil	Deerfield Beach
William Chin	Dunedin	Kerri W. Gyllenship	Plantation	Alba D. Mendez Rodriguez	Crestview
Scott Clark	Palm Harbor	Hillary Anne Hancock	Vero Beach	Soraya Merino	Fort Lauderdale
Huxley Coulter	Tallahassee	Alison Harmon	Miami	Linda Miles	Brandon
Janna Coyne	Saint Cloud	Heather Harvey	Miami	Feliciano L. Mohamad	Miami
Lisa DeCamps	Kissimmee	Darren J. Hendershot	Largo	Malia Mokuohai	Daytona Beach
Amy Deen	Trenton	Susan Ann Hesidenz	Deerfield Beach	Diana M. Moon	Gainesville
Jessie Delapena	Tampa	Beth Horrigan	Tampa	Darcell A. Neibaur	Pensacola
Joanna Dembek	Saint Augustine	Granville H. Houldsworth	Saint Petersburg	Cassandra L. Norris	Wildwood
M. J. Dennis	Maitland	Michael Howson	Fort Lauderdale	Tracey A. Norton	Morriston
Ashley Diehl	Winter Garden	Regina F. Huntley	Sunrise	Thomas Joseph Nummy	Panama City
Glen Scott Diffenderfer	Miami	Brian J. Irby	Orlando	Lucas A. O'Leary	Jupiter
Lynn Dixon	Tampa	Dana M. James	Hollywood	Christina Ogrodnik	Miami
Todd F. Dowdy	Saint Petersburg	Anthony Lorne Johnson	Gainesville	Gipsy Oquendo	Miami
Jorge Duany	Opa Locka	April Johnson	Fort Myers Beach	Magaly Otero	Orlando
Valeri Ducharme	Bradenton	Brittany Johnson	Orlando	Charles Gregory Owens	Gainesville
Michael S. Dudley	Navarre	Carley L. Johnston	Orlando	Katie Pardo	Fort Lauderdale
Martha Dudzinski	Rockledge	Alicia C. Kelb	South Daytona Beach	Natassia Parr	Oviedo
		Nancy S. Kempf	Eustis	Jennifer Perales	Miami

Calendar OF EVENTS

Magda B. Peralta	Homestead	Sunet Triana	Hialeah
Lorraine Perez	Hialeah	Lisa Trimble	Riverview
Paola Piaggio	Miami	Robert S. Trindle	Gainesville
Bethany K. Putnick Evans	Coconut Creek	Laura Van Camp	Saint Petersburg
Donna B. Register	Lake City	Lesley Van Vurst	Pompano Beach
Theodora Reynaert	Fort Myers	Jessica D. Vigne	Fort Myers
Christine Rich	Molino	Cathy Villagomez	North Palm Beach
Wanda I. Rios	Orlando	Jennifer Weinman	Williston
Ruth M. Rivera	Hialeah	Jessica Whittle	Orlando
Angela Rodriguez	Miami	Kayla SM Wong	Niceville
Karem Rodriguez	Boynton Beach	Diane Zapack	Jupiter
Cristina M. Ross	Pompano Beach	Dana Zupitza	Boca Raton
Vanessa Ruoco	Miami	Transfer Members	
Jenny Isabel Sabogal	Pompano Beach	Brenda Avraham	Long Prairie
Nicholas Saporito	Hialeah	Michelle D. Bethea	Perry
Ronald F. Schlauch	Ruskin	Moira J. Dana	Naples
Krystal Scott	Osprey	Michelle Freeze	Fernandina Beach
Lynette Seidell	Boca Raton	Michelle Freeze	Fernandina Beach
Carlos Sessler	Miami	Darren J. Hendershot	Largo
Barbara Silva	Miami	Brian J. Irby	Orlando
Ashley Simons	West Palm Beach	Jennifer L. Liesen	Key West
Vickie Sloan	Jacksonville	Stephenie Lynn Lorenzini	Tallahassee
Richard Smith	Ormond Beach	James Molise	Gulfport
Luis Sorell Lopez	Miami	Jenny Paden	Jacksonville
Eileen M. Spaulding	Daytona Beach	Robert J. Petrus	Apollo Beach
Megan Spies	Sarasota	Bob Pumphrey	Summerfield
K Landon Stafford	Tallahassee	Charity Raker	Jacksonville
Kelly Staso	Boca Raton	Melissa Speerly	Jacksonville
Marta E. Stepien	Kissimmee	Susan M. Thelen	Land O Lakes
Ashley Stewart	Hooper	Paula Vulcain	Hollywood
Christina Stewart	Sarasota	Dorothy M. Wagasky	Sun City Center
Zac Stone	Delray Beach		
Amanda Lynn Stradling	Silver Springs		
Sarah Tarantino	Elkton		
Deborah Weiss Thompson	Winter Park		
Kelly Thurman	Miami		
Karen Touchette	Orange Park		

April

- 8** First Coast Unit 2 CEU "TBA" Location "LifeZones Center"
- 8-9** Legislative Awareness, Tallahassee
- 21** AMTA Florida Chapter Board conference call
- 22** Inverness Unit at the WTI www.wtionline.cc - 2CEU "TBA", room 301
- 23-25** BOMT with Retreat, TBA

May

- 19** AMTA Florida Chapter Board conference call

June

- 7** AMTA National BOD Meeting Louisville, KY
- 10** First Coast Unit 2 CEU "TBA" Location "LifeZones Center"
- 16** AMTA Florida Chapter Board conference call
- 17** Inverness Unit at the WTI www.wtionline.cc - 2CEU "TBA", at room 301

July

- 10-13** CVOP, Evanston, IL. (Leadership Training)
- 21** AMTA Florida Chapter Board conference call
- 24-25** BOMT, TBA

August

- 12** First Coast Unit 2 CEU "TBA" Location "LifeZones Center"
- 18** AMTA Florida Chapter Board conference call

September

- AMTA Florida Chapter Board conference call
- 12-14** FOMA, Grand Hyatt, Tampa
- 16** AMTA National BOD Meeting, Phoenix, AZ
- 17-20** AMTA National Convention, Phoenix, Az.

October

- 7** First Coast Unit 2 CEU "TBA" Location "LifeZones Center"
- 19-25** National Massage Awareness Week
- 20** AMTA Florida Chapter Board conference call
- 30-31** BOMT, TBA

November

- 17** AMTA Florida Chapter Board conference call

December

- 9** AMTA Florida Chapter BOD Conference Call 7pm-10pm call in number
- 15** AMTA Florida Chapter Board conference call

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Newly Formed Units

First Coast Jacksonville

Chair: Dr. Samuel Pace
drsampace@yahoo.com

Sarasota Unit

Chair: David Kasprzyk
dreamaker2005@verizon.net

Education Update

Learning is fun, especially for LMT's who participated in one of the many 2007 AMTA Florida Chapter Unit education session. Throughout the year, active units held 18 educational sessions and awarded a total of 42 contact hours. All 2 hour sessions were free, and all awarded education contact hours were applicable towards their Florida massage license renewal. Education topics included; Active Isolated Stretching, Seated Chair Massage, Bindegewebsmassage, Marketing Massage as a Medical Necessity, Business/Marketing Massage, Manual Lymphatic Drainage, Body Bridge, Ayurveda, and Spa Techniques.

2008 is already off to a good start. Unit officers' are working hard to meet your education expectations. New educational meetings have been schedule by unit's and posted on the AMTA Florida web site. Go to www.AMTAflorida.org and click on Calendar of Events to view the latest schedule. If you have a favorite topic that you would like to hear about, why not attend your next local unit meeting to share your thoughts with your fellow LMT's. Your views are important so please be sure to attend your regularly scheduled unit meeting.

On another important education topic; I recently formed an education subcommittee to help with this and next year's activities. I am pleased to announce that Jeffery Wood and Dr. Sam Pace have graciously agreed to serve on the committee to help plan future activities. As you know 2009 is a license renewal year for Florida LMT's. Many of you have already begun to accumulate the 50 CEU's you will need for renewal. If you attended the February 2008 annual / education meeting you may have already accumulated a quarter of the CEU's necessary for license renewal.

On still another note; the education survey I mentioned in an earlier communiqué is has been approved by the board. Watch for an e-mail directing you to the survey site. Please read and respond to the survey As quickly as you can. Your response will help the board select the education topics for the 2009 Conference and beyond. If you are not on line, please complete this paper ballot on page 11.

Lastly, if you have any questions or wish to share your thoughts on education topics, please e mail me at eileennewsome@verizon.net. I may also be reached via phone at 727 781 1034.

Eileen Newsome

AMTA Florida, Education Chair

Come join us at a meeting near you!

Education Survey

- | | YES | NO |
|--|--------------------------|--------------------------|
| 1. Are you currently holding a Florida License | <input type="checkbox"/> | <input type="checkbox"/> |
| 2. Have you attended a National AMTA Convention in the past two years? | <input type="checkbox"/> | <input type="checkbox"/> |
| 3. Have you attended AMTA Florida Unit Meeting in the last year? | <input type="checkbox"/> | <input type="checkbox"/> |
| 4. Did the AMTA Florida Unit Meeting you attended include education? | <input type="checkbox"/> | <input type="checkbox"/> |
| 5. Was the education the reason why you attended the Unit Meeting? | <input type="checkbox"/> | <input type="checkbox"/> |
| 6. Which is better format for learning - | | |
| An All Day Workshop (6-8 hours) | <input type="checkbox"/> | <input type="checkbox"/> |
| A Two Day workshop (12-16 hours) | <input type="checkbox"/> | <input type="checkbox"/> |

Please indicate the best response, 5 being the best 1 being the least.

What educational topics are you interested in? Please rate your interest

- | | | | | | |
|--|---|---|---|---|---|
| a) Ethics | 5 | 4 | 3 | 2 | 1 |
| b) Cranio Sacral | 5 | 4 | 3 | 2 | 1 |
| c) Kinesiology | 5 | 4 | 3 | 2 | 1 |
| d) Infant Massage | 5 | 4 | 3 | 2 | 1 |
| e) Shiatsu | 5 | 4 | 3 | 2 | 1 |
| f) Thai Massage | 5 | 4 | 3 | 2 | 1 |
| g) Reiki | 5 | 4 | 3 | 2 | 1 |
| h) Muscle Release Techniques | 5 | 4 | 3 | 2 | 1 |
| i) Massage for Trauma Situations | 5 | 4 | 3 | 2 | 1 |
| j) Essential Oils/Aroma Therapy | 5 | 4 | 3 | 2 | 1 |
| k) Lymph edema | 5 | 4 | 3 | 2 | 1 |
| l) Business of Massage | 5 | 4 | 3 | 2 | 1 |
| n) Bindegewebsmassage (CTM) | 5 | 4 | 3 | 2 | 1 |
| o) Review for National and State Exams | 5 | 4 | 3 | 2 | 1 |
| p) Chair Massage/Corporate Massage | 5 | 4 | 3 | 2 | 1 |
| q) Sports Massage | 5 | 4 | 3 | 2 | 1 |

Please indicate the best response, 5 being the best 1 being the least.

- | | | | | | |
|--------------------------|---|---|---|---|---|
| r) Spa Treatments | 5 | 4 | 3 | 2 | 1 |
| s) Reflexology | 5 | 4 | 3 | 2 | 1 |
| t) Trigger Points | 5 | 4 | 3 | 2 | 1 |
| u) Deep Tissue | 5 | 4 | 3 | 2 | 1 |
| v) Insurance Billing | 5 | 4 | 3 | 2 | 1 |
| w) Breast Massage | 5 | 4 | 3 | 2 | 1 |
| x) Massage for Diabetics | 5 | 4 | 3 | 2 | 1 |
| y) Animal Massage | 5 | 4 | 3 | 2 | 1 |
| z) Zero Balancing | 5 | 4 | 3 | 2 | 1 |

AMTA FL Chapter is seeking Volunteers for numerous positions. This is your chapter, your ideas and help will become realities when you get involved. Would you like more information? Would you like someone to contact you?

Board Positions _____

Committee Chair Positions _____

Committee Member Positions _____

Presenters _____

Educators _____

Sponsoring _____

Meet and Greet Committee for the AMTA National

Convention for 2009 _____

Send your completed survey to:

Eileen T. Newsome
P.O. Box 236
Crystal Beach, FL 34681

Workshops

Touch for Health Kinesiology

1 - 4- January 20 - 27, Kissimmee 60 hrs.

The full certification training in TFH will equip you with indepth, state of the art energy techniques. Learn how you can release the cause of chronic muscle imbalance instead of just treating the symptoms.

Enhance what you can do for your clients as well as transform your own personal health and well-being. 60 CE's. \$1000 register online: www.USKinesiology.com

Classifieds

Sacro Wedgy® Therapists Third Hand

Relaxing 20 minutes on the SACRO WEDGY® helps to isolate, cradle & elevate only the sacrum to mimic how the hand is used in some therapy techniques. With the sacrum stable and in a neutral position it's easier to access the piriformis, psoas & sartorius muscles using gravity to do

most of the work. When combined with neck support a "natural traction" is created to help improve posture. This system works well in rehab or as self care - very important for a busy therapist! The Sacro Wedgy® retails for \$29.95. Call 1-800-737-9295 for professional volume discounts or visit www.sacrowedgy.com

Become certified to teach Baby's First Massage!

Next class in the Tampa area - April 13, 2008 Health care professionals and others can learn how to teach prenatal or newly delivered families to massage their newborns. RN's and LMT's earn 27 CEU's. Contact: www.EileenNewsome@verizon.net; 727 781 1034; www.etoouchmassage.com.

Announcements

Free CEUs Coming to Your Local Units!

Attend your local meetings!

Annual Chapter Meeting in Jacksonville

February 29, 2008



I was eager to be a part of this year's annual chapter meeting in Jacksonville. It was held at the beautiful Crowne Plaza located on the St. John's River in the heart of downtown. Much of the meeting was spent discussing AMTA business and then we moved on to the elections. There are some new faces to our board of directors: Cindy Morris-Secretary & Eileen Newsome-Treasury. Re-elected was Pat Donahue as our President and we welcomed back Karen Roth to the 2nd VP position. There was also an election for the 2009 Delegates: Karen Godfrey, Tracy Samples, Anita Dean, Dave Kasprzyk and Estrellita Izquidero. The new officers were sworn in by past AMTA National President, Laurel Freeman. Everyone filled out Eileen Newsome's education survey, which can be accessed on our website www.amtaflorida.org and in this issue of the Journal. Participants were entered into sponsored by Hygenics/Performance Health. The winner was our 3rd VP; Kathy Reid. Lynda Sol-Wolfe presented her with an amazing basket of products. I urge you, the members to attend these meetings and participate in the activities.

The AMTA is a community and an extended family. It's a great way to meet fellow therapists and network. If you ever feel isolated in the massage profession, an excellent way to remedy that is to get involved. As they say, the best way to predict the future is to help create it!

Valerie Cartagena
AMTA Florida, Journal Editor



Florida Senate - 2008 (NP); SR 2806;
By Senator Jones sp; 13-04216A-08
20082806 - (proposed)

- 1 Senate Resolution
- 2 A resolution recognizing April 8 and 9, 2008, as
"Massage Therapy Legislative Awareness Days."
- 4
- 5 WHEREAS, members of the Florida State
Massage Therapy
- 6 Association (FSMTA) and the American Massage
Therapy Association
- 7 Florida Chapter (AMTA-FL) throughout the state
are actively
- 8 involved in public awareness and health programs
to im prove the
- 9 health and quality of life of Florida residents, and
- 10 WHEREAS, the Florida State Massage Therapy
Association and
- 11 American Massage Therapy Association Florida
Chapter have been
- 12 holding Massage Therapy Legislative Awareness
Days at the Florida
- 13 Capitol since 1988 for the purpose of educating
the State
- 14 Legislature and the public concerning the many
health benefits of
- 15 massage therapy, and 1
- 16 WHEREAS, the practice of Massage Therapy is
regulated by the
- 17 Board of Massage Therapy within the Department
of Health under
- 18 chapter 480, Florida Statutes, and
- 19 WHEREAS, licensed massage therapists have
been licensed and
- 20 regulated in the State of Florida since 1943, and
there are more
- 21 than 26,000 massage therapists licensed by the
state, and
- 22 WHEREAS, massage therapy is a low-cost, high-
quality means
- 23 of enhancing and restoring health, and
- 24 WHEREAS, increased awareness of the benefits
of massage
- 25 therapy will lead to improved health and vitality
of the
- 26 residents of the State of Florida, and
- 27 WHEREAS, the Legislature recognizes massage
therapy for
- 28 wellness and preventive health measures, NOW,
THEREFORE,
- 29
- 30 Be It Resolved by the Senate of the State of
Florida:
- 31
- 32 That the Florida Senate recognizes April 8 and 9,
2008, as
- 33 "Massage Therapy Legislative Awareness Days."

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AMTA Chapter Approved Budget



Lynda Solien-Wolfe Hygienic/Performance Health Massage Consultant presents the Biofreeze Basket to winner Kathy Reid

INCOME			
A	National Dues	\$104,798	
B	State Dues	\$68,500	
C	CD Interest (on \$75K)	\$3,000	
D	Web Site (10 Banner Ads)	\$1,200	
E	Journal 4 Issues	\$16,000	
F	Education Registration	\$2,000	
G	Total Income	\$195,498	

EXPENSE			
Chapter Administration			
1	Accounting	\$500	
2	Bank Charges + Pay Pal	\$600	
3	Board of Dir's Communication	\$8,300	
4	Board of Dir's Supplies	\$2,500	
5	Telephone Tree	\$-	
6	Chapter 800 Number	\$450	
7	Conference Calls	\$1,000	
8	Equipment	\$3,500	
9	Goodwill / Welfare	\$250	
10	Insurance	\$2,100	
11	Membership Development	\$2,000	
13	Postage	\$2,000	
14	Storage	\$400	
	Chapter Administration Expense	\$23,600	\$23,600

Public Relations			
15	FCA Dinner	\$2,500	
16	FSMTA Convention (2 invited)	\$1,600	
17	FOMA (5 Events)	\$7,000	
18	Awards	\$500	
19	Massage Therapy Foundation		
20	Massage Therapy Awareness Week	\$500	
21	Public Relations	\$12,100	\$12,100

Communications / Web Site			
22	Hosting (Posting fee \$125 per month)	\$1,500	
23	Update Design	\$500	
24	Post additional Line for Pay Pal	\$100	
25	Renewing Fees	\$100	
26	Communications / Web Site	\$2,200	\$2,200

Journal			
*4 Issues 3700 copies per issue			
27	Editor Stipend	\$-	
28	Preperation/Graphics (\$2,100 per issue)	\$8,400	
29	Printing (\$5,100 per issue)	\$20,400	
30	Bulk Mailing Prep (\$200 per issue)	\$800	
31	"Postage/Mail/Deliver (\$1,600 per issue)	\$6,400	
32	Administrative cost	\$600	
33	Journal	\$36,600	\$36,600

Education			
34	CE Broker Fee	\$250	
35	Travel / Lodging / Meals Chairperson	\$1,500	
36	Administrative coast (phone & supplies)	\$250	
37	Annual Workshop	\$2,000	
38	Survey	\$100	
	Education	\$4,100	\$4,100

Legislative			
39	Independent Contrator (Lobbist)	\$22,000	
40	Legislative Awareness Day	\$6,000	
41	Meet with Legislators	\$2,000	
42	Legislative	\$30,000	\$30,000

Meetings			
43	Committees	\$2,000	
44	National Board Meeting (3 meetings)	\$3,000	
45	Chapter Annual Meeting Feb/Mar 09	\$10,000	
46	National Convention (7 Officers-Phoenix)	\$13,000	
47	National Convention (5 Delegates-Phoenix)	\$7,000	
48	CVOP (President & 1 additional person)	\$1,500	
49	Chapter BOD face to face meetings (3)	\$13,900	
*50	Board Retreat + Facilitator \$1,000 + Transportation	\$2,000	
51	FL Board of Massage meeting (4 per year)	\$3,600	
52	FL Board of Massage Metting Reporter Half the cost shared by FSMTA	\$1,800	
53	Chapter Conference Feb 09 Membership Drive	\$10,000	
54	National Convention Host 9/09	\$2,000	
	Meetings	\$69,800	\$69,800

UNITS			
55	Unit Development (\$1,00 each)	\$1,000	
56	Administration (7 Units)	\$15,000	
57	UNITS	\$17,000	
58	Total Expenses	\$195,400	

59	Total Income	\$195,498	
60	Total Expenses	\$(195,400)	
61	Balance	\$98	

Active Isolated Stretching: The Spa Method

by Bruce Baltz, LMT, NCBTMB and Aaron Mattes, MS., RKT., LMT

Bringing clinical therapeutic knowledge into the spa world is a trend that has been seen in many spa trade shows over the past few years. One of the most established clinician and educator in the massage clinical setting is Aaron Mattes, founder and developer of Active Isolated Stretching “The Mattes Method” (AIS). Aaron Mattes’ unwavering dedication to finding a way to reach the deepest tissue of the human body in order to alleviate chronic or acute pain started in 1970. The outstanding results experienced with difficult problems such as Parkinson’s, TMJ, thoracic outlet syndrome, cervical, thoracic and lumbar disc problems, Lou Gehrig’s disease and incomplete spinal cord injuries give hope for greater health improvement for thousands of people. AIS: The Mattes Method epitomizes efficient stretching with maximum results. His commitment is still burning strong today.

Aaron believes that human movement is more enjoyable when the body is flexible and capable of performing without restriction. Active people understand the importance of good health and seek specific methods to improve their abilities by incorporating stretching exercises into their daily lives. Flexibility is not a general factor but is specific to each joint. Mattes found that exercise that produces repeated overuse of the same muscles confines joints within a restricted range of motion and tends to reduce flexibility. The primary obstacle to flexibility is the tightness of the surrounding muscles and fascia of any joint.

I met Aaron Matte’s over 5 years ago at the Florida Massage Therapy Association Convention where we were both teaching. I was intrigued by the results that AIS achieved and by the simple guidelines the method was based on. I would watch as clients achieved increased range of motion and better posture change from one treatment to another. The results speak for themselves and the science behind the technique soundly supports the principles.

The basic principles of AIS are as follows:

1. Identify the muscles to be stretched.
2. Isolate the muscles to be stretched by using precise localized movements.
3. Intensify the contractile effort of the agonist muscles opposite to the antagonist muscles through neural reciprocal innervations. The antagonist muscles are signaled to relax and lengthen, short of triggering the Myotatic Reflex.
4. Increase local blood flow, oxygen and nutrition to tissues before and after activities. The contracting muscles are major vehicles used to deliver blood, oxygen and nutrition. Repetitive Isotonic muscle contraction transports fluids and gases to specific regions in far greater volume than static or isometric muscle contractions. Numerous repetitions are an important consideration in a thorough warm-up or post-activity recovery process.
5. Oxygen through deep breathing decreases fatigue and is important to release muscle and fascial tissue tension. Fatigue results from tension in contracted muscles, inflexibility, insufficient blood and oxygen and limited nutritional supply to the tissues.
6. Stretching is a daily requirement. Muscles shorten, stiffen or become tense from work, training, posture, gravity or stress. Active Isolated Stretching helps restore full joint movement, decrease tissue soreness and fatigue, increase muscle/fascia pliability and improves posture.

After dedicating most of my free time in the studying of AIS over the past 4 years, it became apparent to me early on that this work needed to be shared with as many people as possible. This led me to collaborate with Aaron on AIS: The Spa Method. This program’s intention is to offer a modality of substance that a massage therapist/body worker can identify with and appreciate its far-reaching effects of accessing the deepest tissues of the body. The first step in this process is education; giving the therapist concise information that can kindle or bolster that passion that has brought him or her to this place of helping others. As the therapist learns the routine and how it can flow from one movement to another and shares with the client the principles of AIS, he/she will build the all-important trust which will produce the necessary RELAXATION. Aaron says; “Other than stretching itself, relaxation is the most important factor in developing flexi-

bility.” Most people, no matter what their profession is, will find their success most likely hinges on their ability to communicate in a way that will draw in the client and engage them. Massage therapy is no different; your client will be taken in by your passion and your knowledge of your craft. This becomes much easier when your work is supported by science, especially for those of us who need proof. When the therapist combines knowledge and dedication he or she will gain the trust of his client which will produce that relaxation which will then start the healing process.

This technique offers a new approach and substance to any spa menu and the opportunity for clients to get involved in their own well-being. In addition to providing hands-on and verbal skills for the therapist, there will be a book available for the client which will instruct them on how to do the stretches and progress on their own.

We have found that most spas embrace change when they can offer a new dimension and quality service to their menu. This, combined with a retail product that we can support, can only be a win/win situation for all involved. This added dimension will inspire the client to take control of their own muscular imbalances in and out of the spa.

Our hopes are that by introducing AIS into the spa setting, the massage therapists/body workers will find themselves thirsting for more knowledge about Active Isolating Stretching. At the very least they will be able to introduce their clients to AIS and be able to refer them to Aaron Mattes network of advanced training practitioners.

In the reorganization of AIS: The Mattes Method into AIS: The Spa Method, I had several concerns about adapting a clinical approach to helping the body heal and customizing it for a spa setting. I had to take into consideration the type of clients who patronize a spa and what they are looking for. I wanted The Spa Method to appeal to the largest population of spa goers as possible. That would include those that just come in to relax as well as those who might want more physical types of bodywork. The next challenge was to take The Mattes Method and give it the flow of a spa routine and not require the client to move from one position to another several times during a session. Too much movement will not allow the client to relax. The last component in this routine is the massage therapist. I wanted AIS: The Spa

Method to have a foundation with hands on massage technique enhanced by stretching. By doing this, it will allow the therapist time to focus on specific concerns of the client.

Mattes has several basic principles for AIS: The Mattes Method, three of which he agreed would need to be adapted to fit into the spa setting.

The original Mattes Method;

- The client must be active or attempt to be active during the session
- The client must be put into position and supported by the use of seat belts for the best muscle isolation
- The client must stretch muscles in a defined order for best clinical results

The Spa Method;

- For the best physiological results, we suggest the client being active but if for some reason they want to be or have to be passive, we must support that choice.
- Stabilize the client to the best of your ability without the use of seat belts
- The session must flow to minimize your client's movement so the order of stretches may be slightly different

The spa routine can be divided into three half-hour segments focusing on the upper body and neck, lower body, and hands and feet. We divided this routine into three different segments for the following reasons;

- Having three segments makes it easier for massage therapists to develop a flow with the stretches and not have to memorize a long routine while they are in the learning process.
- From the spa's perspective you can have three different half hour sessions, or, when combined, you can have a single session of 30 to 90 minutes duration.

In keeping with having the session flow from one stretch to another, the majority of the session for upper body and neck will be in a side lying position where the therapist will work one side of the body then the other. For lower body and hands/feet your client will be in a supine position most of the time.

These photos will depict a few positions in the flow of a session as well as those stretches that your client will be able to perform on their own in the upper body routine.

We now offer a two-day workshop to teach massage therapists working in the spa setting how to use AIS: The Spa Method. The workshop has been designed by Aaron and I and is taught by myself, founder of SpiriPhysical, Inc.

Aaron Mattes, MS., RKT., LMT

For information on AIS: The Mattes Method and workshops dates and clinic hours: www.stretchingusa.com / 942-922-1939

Bruce Baltz., LMT., NCBTMB

For information on AIS: The Spa Method and workshops dates: www.SpiriPhysical.com / 305-438-9649

Upper Body

Lateral Arm Raise



Triceps



A Wholistic Approach to Breast Cancer

by Faye Schenkman, MA, LMT, Dipl. Chinese Herbology & Kim Rosado, MS, LMT & L.Ac.

The subject of breast cancer and complementary approaches to treatment of this disease is very complex. What is presented here is a general introduction to a wholistic viewpoint on the subject of breast cancer. Most women at some point in their lives worry about breast cancer since the number of women being diagnosed with the disease has been increasing at an alarming rate.

Depending on where a woman lives, the rate of diagnosis can be as high as one in three women who will get it in their lifetime. Many women know a family member or a friend who has suffered with the disease and perhaps even died. While recent reports indicate that women are living longer with breast cancer they do not show that more and more women are being diagnosed with this horrible disease. When we compare statistics in the United States with those of women in Asia, for example, we find that breast cancer rates are four to seven times higher in the United States. This difference is not dependent on genetics alone since Asian women acquire the same rates as American women after several generations have lived in the United States. Clearly other factors are at work. Wholistic medicine can provide a much broader viewpoint of the causes of this disease and the modalities which treat them.

Western medicine tends to be reductionist in its approach to the human body - seeing the body as if it were some isolated conglomeration of parts. In medicine structure dominates — organs are removed, nerves severed, and powerful pharmaceuticals administered without considering the consequences of such radical actions on the delicate bio-system of the living body. We see this same structural viewpoint in psychology where the mind is seen simply as the brain, with no existence separate from the structure of that organ. This materialist perspective creates an unnatural view of the human being, one where the dynamic, interactive quality of life processes are not acknowledged.

In comparison the philosophy of wholism, which is common to many cultures and medical systems throughout the world, emphasizes the principle that “the whole is greater than the sum of its parts.” It sees human beings not simply as a collection of organs, muscles, bones and nerves but rather as a complex living organism, many systems integrating, resulting in an ongoing dynamic being. Human beings have physical, emotional, intellectual and spiritual components that are intertwined with intricate connections which confront the reductionist approach. Human beings do not exist in isolation from the universe, they are part of it. Each person exists within their own, individual physical, psychological and spiritual condition that is critical to understanding the meaning of their health. The word “heal” literally means “to make whole” and to understand health, one must have some understanding of the whole person. This wider perspective, that mind and body really cannot be differentiated, but must be seen as a single entity, engaged in an ongoing dynamic called life is crucial to the wholistic viewpoint and to the prevention and treatment of disease. There cannot be a psychological problem that does not manifest in the physical body and there cannot be a physical problem that does not have psychological impact. The concept of wholism, which expresses the unity of mind and body, is rooted in a different approach to health care. It is impossible to treat a breast, or arm, or lung, isolated from the dynamic of a living being. Since there is no division of mind and body, all diseases are of the mindbody, treatments are for the mindbody, and methods of maintaining the health focus on the mindbody. Wholistic health sees the most profound power of health and healing to be inherent in the mindbody. Therefore, wholistic health practices seek to support and encourage healing whenever possible and seek natural, safe, minimally invasive methods to help the mindbody to heal itself. Practitioners of wholistic health tend to see themselves as facilitators of the healing process, rather than as the source of healing. Wholistic health practitioners educate their patients and teach them methods and ways of removing sources of abuse to their health. Wholistic approaches to health care are concerned not only with treatments that support the body’s energy system but with lifestyle changes, education and very importantly, patient responsibility. Patients must recognize that they must take responsibility for their own health and well-being and work cooperatively with a professional. This means that an individual must take a pro-active role in the process: reading, investigating, learning, making changes in daily habits, and eating and exercising properly. The potential of wholistic health care is actualized only when an individual makes the decision to be an active participant in their own wellness.



That said, there are two different avenues from which women can approach breast cancer — prevention and treatment. Treatment can further be divided into two categories - strictly alternative treatment or complementary - a combination of wholistic treatment in combination with traditional allopathic therapies. All of these choices contain the same elements for healing the body.

Proper nutrition is a major key in both avenues. The National Academy of Sciences estimates that 60% of women's cancers and 40% of men's cancers are due to nutritional factors. In women, the cancers that are most closely connected to nutritional influences are breast and endometrial cancers. The importance of a low fat, high fiber diet to prevent cancer has been documented in many scientific circles and many experts recommend eating less fat. We know that casein, a protein found in milk and used in the production of cheese is also used to make glue and plastics. A high dairy intake leads to what in Chinese medicine is called mucus or phlegm production which can congeal in the body producing growths and masses. Therefore eating less dairy and less meat is a key to prevention as well as increasing the amount of organic fruits, vegetables, legumes, seeds and grains. Plant estrogens or isoflavonoids, found in soy products, can interfere with the body's estrogen and potentially cut a woman's risk and may explain why Asian women have such low rates of breast cancer. Some animal studies also show that diets high in polyunsaturated fats such as corn oil foster tumor formation whereas olive oil does not have this effect. A study published in the esteemed journal *Lancet* in 1994 found that bile acids characteristically found in the intestines were also found in breast cyst fluid demonstrating a link between the digestive process and the formation of masses in the breasts. The study concluded "It is likely, therefore, that bile acids present in the microenvironment of breast tissue affect its biological activities. The exchange and

concentration mechanisms for bile acids also apply to a broad range of organic compounds, including food preservatives and drugs." A 1993 study showed that the risk of breast cancer was four times higher in women who had high levels of pesticide in their blood versus women with lower levels. Other studies have found traces of pesticide in breast tissue samples. Clearly a plant-based diet should be one that utilizes organically grown foods and distilled water, so that most cancer causing agents have been removed.

In addition many of our processed foods also contain a large number of synthetic chemicals while many of our meats and milk have hormones added to them which can catalyze disease in the human body. We don't know the long range effects of genetically modified food which is banned in a number of European countries and called "frankenfood". Numerous toxins found in the environment can injure tissues and organs, and the failure of the body to detoxify such chemicals, leading to their storage and accumulation can result in neurological damage as well as cancers.

Women interested in breast cancer prevention should also consider yearly detoxification diets under the supervision of a health professional. Such detoxification efforts should be undertaken in the summertime, when the climate is more suitable for lighter eating and internal cleansing. Detoxification may include fasting, juicing, various types of enemas for colon cleansing and the removal of toxins from the colon and liver. Research also indicates that diet has an important role in the body's ability to detoxify chemicals and drugs. Nutrient deficiencies and imbalances can prevent proper detoxification from occurring. For example, toxins which are fat soluble are very easily absorbed in the body but very difficult to excrete, therefore they tend to build up internally. Certain enzymes needed to convert fat soluble

chemicals to water soluble chemicals may be deficient thus promoting carcinogenesis. Detoxification also utilizes many antioxidants, certain vitamins and minerals. The wholistic movement has long used chlorophyll for detoxification, specifically wheat grass juice and barley grass juice. There are several books that have been published on the subject of wheatgrass and its application to cancer and other diseases. Chlorophyll has been shown to clean as well as support the blood, removing toxins from the system.

In short, there is quite an extensive body of knowledge demonstrating that diet plays a major modifying role in chemical carcinogenesis. The body's natural detoxification channels are largely affected by protein, carbohydrate, fat and micronutrient ingestion. The absence of some nutrients and the presence of highly processed foods, preservatives and chemical additives, hormones, nitrates — tend to foster cancers while organic, unrefined natural foods, complex carbohydrates, certain phytoestrogens, plant flavonoids and cruciferous vegetables help protect the body and can be anti-carcinogenic.

While proper nutrition and detoxification are essential for prevention, the same techniques can be utilized once someone has received a diagnosis of breast cancer. In the latter case, the patient must undertake a serious commitment to a completely vegetarian lifestyle, in essence starving the cancer of animal protein which is a cell builder, and detoxing the body of harmful and toxic cancer caus-

ing agents. Such a regimen is essential and may involve certain vitamins, minerals, herbs and other forms of supplementation and can also be utilized in conjunction with traditional western treatments such as chemotherapy and radiation provided the patient is working with a skilled wholistic health care professional.

Exercise is another very important factor. Many studies have demonstrated the importance of even moderate exercise, one to three hours a week. Exercise improves the circulation of blood and energy in the body and helps with detoxification as well as hormonal balance. Certain forms of exercise, such as Hatha Yoga, Tai Chi Chuan and Qi Gong, are rooted in the principles of energy medicine. These forms of exercise help to balance the body's vital energies, restoring the energy system so that the body can help to heal itself. In China there are hospitals that focus on helping to heal cancer through rigorous Qi Gong exercises. The sicker the patient or the more advanced that disease, the more exercise is recommended. These are very specific simple but powerful exercises that are aimed at healing, balancing and building the energy system that can change the course and direction of the cancer and bring the body back to health. It is very important that Qi Gong exercises be learned from an advanced practitioner who is teaching a style with a history of health benefits. It is not something that should be learned from a video or from someone who is practicing only a short time. A complete exercise routine would include energy building exercises in combination with cardiovascular exercises and moderate weight lifting where applicable.

Wholistic health shares a great deal with Traditional Chinese Medicine, the oldest and most well documented system of medicine in the world, written evidence dating back over five thousand years. Like wholistic medicine, the Chinese medical system



emphasizes prevention through proper treatment and lifestyle. The three limbs of Chinese medicine include acupuncture, herbalism and bodywork or massage therapy. All three are rooted in the concept of an energy system which is as complex as the nervous and vascular systems but invisible to the naked eye, much as we cannot see atomic energy or electrical energy but we certainly can see its effects. The energy model unifies and explains the other principles of wholistic health care, explaining the need for a mindbody concept. Currently the leading researchers in nuclear physics are providing a very profound message and one that the Chinese gave over five thousand years ago — that there is no material universe. There is only energy, or movement; only vibration. Man is a microcosm of that universe — the same energies that exist in the world exist in man and move in complex energy pathways that can be manipulated and controlled. Disease is the result of disruptions in those energy pathways which underlie the physical form. Modalities such as acupuncture, herbalism and massage can help to bring the body back to energetic balance and thwart the progress of disease or help prevent its onset. These modalities are very helpful for women who desire to avoid the surgical-chemical route and are also helpful for women who opt for the traditional western route of chemotherapy and radiation. They can help ameliorate pain as well as the side effects of chemotherapy and radiation treatment, supporting the body and helping it to remain strong through such treatments. These treatments can help provide quality of life and in some cases, extend the life and help prevent recurrence of the disease. Health professionals in all these fields will vary in their skills and training and their experience in treating cancer patients. The patient must be responsible and investigate a variety of practitioners, checking to see that the practitioner is licensed in their state and certified by a national organization such as the American Massage Therapy Association, the American Organization of Bodywork Therapies of Asia or The National Commission for the Certification of Acupuncture and Oriental Medicine.

Since Wholism sees the most profound power of health and healing to be inherent in the mindbody, the mind must be

addressed as well as the body. There have been many studies pointing to the negative effects of stress on the system. Psychological stresses often cause a disruption of the energy system and disruptions in the flow of the energy system result in disease. Therefore it is imperative that women learn to constructively deal with their emotions which may be causes or contributing factors towards their disease and learn to deal with the stresses imposed by their condition in a positive psychological framework. For many this may entail enlisting the help of a clinical psychologist or a support group. Many studies show that patients who have strong social support groups live longer than patients who do not. Meditation is also essential for providing peace of mind and a positive attitude of healing. In Taoism it is said that “idea precedes manifestation”. Being determined to heal oneself can help make it a reality for that person. In addition, the spiritual component should not be ignored.

In our combined experience of over forty years of treating clients with cancer we have seen what works and what doesn't. Wholistic approaches to breast cancer work. They emphasize changes in lifestyle, education and overall patient responsibility. When clients recognize that they are ultimately responsible for their own health and well-being, that they must take an active role and work in cooperation with a professional, they achieve the best results. It is best if they can enlist a team of professionals working together on their behalf. More and more physicians are recognizing the value in interacting with wholistic health practitioners for the benefit of their patients, having seen the results that wholistic modalities can offer. There are many different programs and treatments available to cancer patients — some are valid and some are not. The patient must investigate, read, utilize the Internet, and make an informed choice. At the same time they should be making changes in their daily habits, in their eating and exercising and in a complementary treatment schedule. The potential of wholistic health care is actualized only when an individual refuses to abdicate responsibility for her health and moves from being a passive recipient to becoming an active participant in health development.

Healing & Touch

by Donna Cerio



Question:

I am a bodywork therapist and very interested in working with clients who have been sexually abused. I am also a little uncomfortable because I notice that these clients often have strong emotions arise during session. How do I respond to these strong emotions without stepping out of the bounds of the bodywork profession?
Dorothy in Orlando, FL

Answer:

This is a very good question because staying within your scope of practice is essential, and, it is important to respond to your client. Clear thinking on your part and a compassionate appropriate response from you will smooth out any rough edges for you and your client. I suggest following these steps when a client's emotions arise during a session:

1. Stay 100% present

Immediately check in with yourself. If you find that the client's experience is bringing up uncomfortable feelings or thoughts for you make an internal note of this and take it to your next therapy session. Use breath to ground and center yourself. These steps are part of self-care and bring you fully present for the client. By taking care of yourself and staying present, you are less likely to step out of the bounds of bodywork therapy.

2. Acknowledge

Acknowledge to the client that you are aware that they are having an experience. This lets them know that you are present and it is usually comforting for the client. It can be a simple statement such as "I am aware that something is happening for you. I am fully present for your support."

3. Accept & Trust

Decline any inclination to judge, fix or try to analyze the situation. Stay in an accepting state of mind and a state of compassion. Hold the client in the highest regard and trust in the client's healing capability.

4. Suggest action

Recommend that your client call their therapist as soon as possible. If you have a working relationship with the therapist, offer to also call the therapist on your client's behalf. Make sure you obtain a written authorization from your client to talk to the therapist. It is a good idea to have this document on hand right from the first session with any client with a history of sexual abuse.

5. Closure

The closure of the session becomes very important in these cases. At closure, there is a set of needs that are important to address in this client population. One is the need to orient to the present and future pace. It can be disorienting for the client if they remain in the emotional state after the session is over. To insure that your client walks out the door feeling capable and functional, closing has to be well defined and intentional on your part. I suggest that you leave a little extra time for closure when emotions have emerged. Use a verbal fulcrum¹ such as "As we close our session, bring your attention to your body. Occupy all of you from the top of your head to the tips of your fingers and toes, feeling more present with each breath. When your feet touch the ground, feel yourself fully here and now, today, Day of week, Date, and place."

To the Readers of AMTA Florida Journal

Please send your questions to Donna C. Cerio through the US mail or e-mail. No handwritten questions; please type. Ms. Cerio will publish at least one question per issue. She will do her best to answer all other questions. Please include your name, mailing address, and phone number if you would like her to answer you directly.

Donna C. Cerio, The Cerio Institute, P.O. Box 65, Soquel, CA. 95073
health@thecerioinstitute.com and dccerio@thecerioinstitute.com.
(Put AMTA FL in subject line)

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¹ A verbal fulcrum is verbal point of reference around which the brain, body cells and energy molecules can orient.

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Is Your Massage Chair a Therapeutic Tool?

by Raymond Blaylock, NCTMB

Some people still consider massage chairs, and the work performed on them, a form of “fluff and buff” massage, not true therapeutic massage. Some would offer that Seated Massage is a good marketing tool to get people into the office or clinic to get some “real” massage. As massage therapist we can not even agree on what the correct terminology is, Onsite, Chair or Seated Massage. Not good for the fastest growing part of our industry, it should have definitive nomenclature.

When my practice was located within a Physical Therapy Rehab center in Monterey, California I had my original introduction to the use of a massage chair. My frame of reference to the use of a massage chair was for people who were physically unable to lie down on a table. In some instances my initial work was done with them on a stool. Whiplash, rotator cuff injury rehab and low back discomfort seemed to present instances where the positioning on a massage chair facilitated the massage work I was performing and made the physical part of the work less of an energy drain on my body. Fibromyalgia clients seemed to do better in the seated position. The majority of the “hotspots” were located on the posterior aspect of their bodies making the seated position more advantageous for Fibromyalgia work.

All of the original massage chairs in this country, and most chairs since, were designed on the concept of the Back-saver Chair that became popular in the early 1980's. You remember the design, a chair with no back and a slanted seat with slanted kneepads for the legs. The original design was the concept of a Danish Orthopedist, his thought being that in this position you could not “slouch” and your vertebrae were “stacked” in a fairly straight column. The chair was done for people who were spending many hours sitting at a desk doing repetitive motions with their hands above their waists, and developing the compensatory low back discomfort and cervical immobility that is associated with repetitive motion imbalances from this position and type of activity.

The Danish Orthopedist theorized that a person's spinal position and support in the Back-saver chair relieved about 70% of the pressure at L-5/S-1. Although the Back-saver chairs never became a large market, home versions were developed, and high tech “Sharper Image” versions exist today. Hybrid designs still exist in the office furniture market. Research never could verify the stated hypothesis.

My experience with the massage chair version of the design has been that it is an effective position for individuals with low back pain. At just about every show that I have ever done over the last 20 years, I have had at least one individual, who was complaining of low back discomfort, tell me that the discomfort had significantly subsided after they had sat down on the chair, many times before I had even had them lean forward into the chest pad and headrest!

During my work in the rehab setting the use of the massage chair was very significant, in that I could get the chair to custom fit each individual according to their body size and type. Using the adjustability of the massage chair I could put them into a supported position with the weight and pressure off of L-5/S-1. A secondary advantage exists as the seat and leg position design of the chair and it's effect on the lumbar area; and the correlating weight and pressure release on the cervical area, This is due to the position and support of the cranium in the adjustable head rest. When the client is properly positioned, the spine, is in a supported position, allowing the muscles of the client's back and neck to relax, releasing bio-mechanical tension. The spine is, ideally, straight, after you adjust the client in the chair, with a line drawn along the lateral body from the center of the ear through the greater trochanter. The pressure on the cervical area and the lumbar region is reduced significantly. In this position you can usually detect hypertonic tissue like a “speed bump”! Plus, I know that if you just leave clients in the chair for 10-15 minutes, in this position, a certain level of release is achieved without even putting your hands on their bodies. When we do begin to use our hands the position in the chair has helped them to become relaxed and has already relieved some of the existing tension in the cervical area and the lumbar region. In effect the chair has already done some of the work for us.

Advertisers INDEX

I have found that most upper body work can be performed in a massage chair more efficiently, with about 1/4 to 1/2 the energy expenditure, on my part, needed for table work. For some of the work, hands, arms and shoulders, I can actually sit down while being incredibly effective.

It has been said that “You can't build a house with just hammer”, I am assuming this would include “remodeling”, too. I know for myself, after 35 years of doing bodywork, I need tools to assist me in continued proficiency and longevity in this profession. Perhaps it is time for you to take another look at the massage chair in a different light and to consider Seated Massage and it's substantial therapeutic applications and outcomes for your practice.

Raymond Blaylock, NCTMB is the Director of Education for the Touch Resource Institute. Massage Today called him “One of the true pioneers of Seated Massage and a producer of a top selling video on the subject.” He has been teaching Seated Massage since 1989. The Seated Massage Experience and the Integrative Health Care Practitioner Certification Program are two of the programs he has developed over a 35 year career as a massage therapist, clinic owner and educator. The Seated Massage Technique Video, originally released in 1994, was released as an expanded Second Edition in 2004 and continues to be the definitive work on using a massage chair for therapeutic work.

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The Massage Coach

How your Cat can help you grow your Business

by Coach Cary Bayer

My cat is a 10-pound Buddha named Ananda (Sanskrit for bliss) because she's the fastest purrer in the West. This calico has taught me volumes about how to succeed in business. They can teach you, too.

1. Think highly of yourself and others will be attracted to you.

Ananda says self-worth is the basis of net worth. To build a "multi-level cat home," the foundation must be secure. The foundation for increasing the massages you give is for people to be attracted to you. Why would anyone work with you if you don't think highly of yourself? "Treat yourself like a dog," my cat says, "and others will, too."

2. Let others support you.

"Always accept dinner invitations, and bring home leftovers in a kitty bag." You *must* be supported by others for your livelihood. (Ananda replaces "earn a livelihood" with "enjoy a *loveliness*.") No matter how large your business, it can't survive unless people purchase your services.

Let others support you in every way—a book from a friend; a coaching session from a colleague; a ten thousand dollar gift from your parents .

3. Let others touch you.

Don't just *give* massage; receive it, too. A talented LMT can relieve the thousand slings and arrows your flesh is heir to, as Shakespeare's brochure might have said if he was the Bard of Bodywork. The less tense your body, the more relaxed your mind, and more deeply you connect to people. This inspires people to work with you.

Massage breaks down your body's armor against being touched, allowing you to be more intimate with people on every level. Such intimacy enriches you to perform better on your massage table.

It also gives you the profound experience of receiving, the fourth R you should have been taught in elementary school. Reading, 'riting and 'rithmetic lead to an educated life, not a prosperous one. The fourth R does.

4. Exercise keeps you young in body and heart.

My cat's idea of exercise is chasing chipmunks. She doesn't belong to a gym; her health club is outdoors. She doesn't *try* to get endorphins going, they just appear when she does her thing. Stimulate your endorphins by playing tennis, swimming, or whatever your body loves doing. All work and no play makes Joanie a dull LMT.

Plato said we need a sound mind in a sound body. They're essential for developing sound massage businesses.

5. Nap when you feel like it; it's good for your soul and body.

"Stop living like a dog," Ananda tells LMTs who overwork. When your cat cuddles with you, she's saying, "Stop working, start napping." Downtime for meditation, walks on the beach, or catnaps do wonders for your soul. This rejuvenation travels through your hands, benefiting clients.

6. It's innocent to be the center of attention.

Your cat is completely at home as center of attention; you can be, too. Handling energy prepares you to handle money.

7. Curiosity *thrills* the cat.

At 13, Ananda doesn't have kitten-like curiosity anymore; but her ears perk up when there's rustling in the woods. When does *your* curiosity get aroused? Curious about learning Thai massage, Hot Stone or watsu? Why keep putting it off? Curiosity keeps your spirit lively, so explore your interests. Curiosity can also thrill your bank account if you pursue your passions. Curiosity can make you one rich cat.

8. The more playful you are, the more you're loved and prospered.

The people celebrated on *People* magazine covers are actors who play at being others; singers who play concerts; athletes who play games. Our culture pays buckets of money to people who play. The more playful you are, the more your inner child is alive and kicking. Self-love attracts love and support from others. Having fun makes the workday fly by, and, if you're self-employed, brings you more money.



9. **If you're happy and you know it, purr away—you'll be feline groovy.**

"Don't just walk your talk," my cat teaches, "*strut* your stuff." It innocently sends a message that you're the cat's pajamas. It's time you reverse your parents' message to "wipe that smile off your face." If there's a smile on your face, let it grow.

Ananda says, "The more I purr, the more you stroke me and the more I keep purring." This opposite of a vicious cycle; is a delicious cycle. An LMT's *delicious* cycle looks like this: When you do your livelihood you have a great time, and others are attracted to your joy, giving you money for what you do. This bring you more joy, and that joy attracts even more money to you.

Cary Bayer, a Life Coach in Florida and New York, who's worked with Oscar-winner Alan Arkin, David Steinberg, and Quality Inns, and ran his own marketing/ PR firm for 18 years, writes columns on coaching for World Massage Forum globally; *Massage Today* nationally; and for massage publications in 11 states. He's coached more than 100 massage therapists, and is a faculty member of Massage Business University.

His five CEU classes—developing prosperity consciousness; the art of marketing a massage business; communicating effectively; writing; and overcoming procrastination—have been popular with LMTs at annual conventions and chapter meetings. Each class is certified by the National Certification Board for Therapeutic Massage and Bodywork; the first four by the Florida Department of Health's Board of Massage Therapy, as well.



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The Iterative Process: A CranioSacral Approach to Health and the Human Body

by *Eric Moya, MS/MFCT, LMT, CST-D*

At some point you've probably had a client ask, "How many sessions will it take for my pain to go away?" It can also be challenging to explain why a pain may show up in one part of the body when the underlying problem is somewhere else altogether.

With these issues in mind, I'd like to illustrate a couple important points about health and the human body from a CranioSacral Therapy (CST) perspective. CST is a light-touch approach that releases soft-tissue restrictions around the central nervous system so the entire body can relax and self-correct. It naturally helps relieve pain and dysfunction by resolving these issues at their source. And because it's so gentle it has wide applications for newborns to 90-year-olds.

To better understand CranioSacral Therapy, consider the seemingly simple process of tuning a guitar. Whenever you put on a new set of strings, you have to tune a guitar many times over days before the strings hold their tune. First, when you tune one string up to pitch, it stretches out and goes flat, so you have to retune it. Eventually the string will stretch out completely and be able to hold its pitch.

Then the guitar itself actually changes with the tension on the strings. The neck may be stiff, but when you load it with a bunch of asymmetrical tension in the form of strings, it bows a tiny bit and throws the strings out of tune. Which means you need to go back and tune the whole thing all over again.

You can see how it's impossible to tune a guitar perfectly the first time. Instead you have to retune and retune, continually moving closer and closer to the end goal of a perfectly tuned instrument. It's simply a process of making minute changes until you reach your desired solution.

There's a term for this kind of problem — where it's impossible to find the solution through direct or linear means. It's called an *iterative* problem. The word "iterate" means to repeat. It's also the root for the word "reiterate," which also means to repeat. (For you language lovers out there, it's ironic that we have two words that both mean "to repeat.")

Mathematically, an iterative problem is one in which you can't arrive at the solution using linear means. Instead you must continually adjust the data, getting closer and closer to the solution until it's finally revealed.

Tuning a guitar is a great example of an iterative problem. Structural health in the human body is also an iterative problem. With the vast interconnections of our anatomy from the perspective of muscles, bones, fascia, lymphatic system and so forth, it becomes increasingly difficult to look at the body as a collection of parts. It's actually an integrated ecosystem in which any minuscule change affects the entire system.

Looking at fascial anatomy alone, there are innumerable ways in which a pull on one part of the fascia can affect other parts of the body. Practically, this means your client can have a right-shoulder pain while the source of the problem is somewhere far removed from the shoulder. Although it would be important to work the shoulder girdle in your session, if you don't locate the original source of the shoulder pain, then it's bound to recur.

Initially, this situation becomes a defeating conundrum for many manual therapists. Trying to intellectually figure out such problems is a staggering task. Fortunately there's an easier way, and it comes from the lineage of Andrew Taylor Still (the Father of Osteopathy), William Garner Sutherland (the Father of Cranial Osteopathy) and John E. Upledger (the Father of CranioSacral Therapy).

Their philosophies deviated from the standard allopathic approach of looking at the body in terms of problem and solution. Instead, they each viewed the body as an interconnected web that is continually trying to heal itself.

In CranioSacral Therapy, we cultivate techniques based on *following* the body. Because it's continually trying to self-correct, even hidden problems become accessible when you know how to follow the body's cues and let them show you where to work.

This is what we do in CranioSacral Therapy. We align ourselves with the body's attempt to heal itself. And we cultivate techniques to help it do what it does best naturally. This involves working the entire body using a range of techniques based on tissue, energy, emotion or cognition to help our clients heal.

Back to iterative processes. Let's say that a client comes to see me with right shoulder pain. It isn't important for me to know whether the shoulder pain is a result of one or two restrictions or a whole lifetime of accumulated tensions. As a CranioSacral Therapist, my job is simple. I follow the tissues into their restrictions and help them release using whatever techniques are at my disposal.



With each release, the whole ecosystem of the body adjusts slightly. And with each change we get closer to a pain-free shoulder until finally we reach the solution — just like tuning a guitar.

So whenever clients ask me how many sessions it will take to “fix” their problems, or if they wonder why I’m working on areas that don’t seem to hurt, I help them appreciate how complex and interconnected their bodies are. Then I help them recognize the shifts that have already taken place.

Once they realize they’re getting better, even in ways they didn’t realize were connected with their problems, they usually become intrigued and excited about their process. And why not? Feeling better is a magnificent thing.

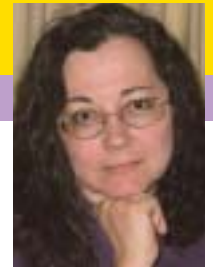


Eric Moya, MS/MFCT, LMT, CST-D, is a Diplomate-certified CranioSacral Therapy instructor for The Upledger Institute headquartered in Palm Beach Gardens, Florida. He is also a Licensed Mental Health Counselor, and President and Founder of The Ripple Effect: Center for Mind and Body Therapy in Albuquerque, New Mexico. Currently, Eric is the acting Dean of Integral Education at the Esalen Institute in Big Sur, California, and lives in Monterey, California with his family.

For more information about CranioSacral Therapy, please contact The Upledger Institute at 800-233-5880 or visit www.upledger.com

The Business of Massage

by Carolyn Pardue



“I have finished school I have passed my tests The State of Florida has granted me a license to practice massage ... I am a Licensed Massage Therapist!”

Yes you are. Congratulations! You have learned the science of Massage and are ready to practice the art of Massage Therapy. The State agrees you are qualified to have the privilege of a license to practice your profession in the State of Florida within a specific scope of practice.

HOWEVER

You are not yet ready to practice the BUSINESS of Massage Therapy.

Your professional license is specifically for that — the profession. It is a physical announcement to the public that you have been adequately schooled and tested so that if you practice within certain parameters you are not a threat to the health and safety of the citizens of Florida.

There is much, much more to the Business of the Massage Therapy Practice — and LMTs need to educate themselves to the Business as they educate themselves to the science and art of the profession.

Anyone who chooses to do business in the State of Florida, regardless of whether they are selling widgets or performing brain surgery, have to meet specific business requirements.

A couple of specific questions that are repeatedly asked of AMTA, Florida Chapter Board Members deal with establishment licenses and occupational licenses (often called business tax certificates).

Business Tax Certificates are required by cities and counties in the State of Florida for anyone who is establishing a business,

even a business located in a home*. The Business Tax Certificates (Occupational Licenses) are the cost of doing business in an area. A business needs to contact the City Clerk’s office in the municipality in which they will be opening the business and the County Tax Collector. The people in these offices are knowledgeable on whether a new business will require both the city and county Business Tax Certificate or only a county certificate. Application forms are often available on-line.

If a massage therapist will be practicing as an employee, a business certificate should have been obtained by their employer. HOWEVER, if the LMT is a contractor the Business Tax Certificate may be required. It is imperative for the LMT to contact their City Clerk/County Tax offices and determine that before fines are imposed.

*If a business is to be located in a home, the person opening the business needs to speak with the Zoning agency in their city/county to determine if zoning allows for a business at that location.

Massage Establishment Licenses are required by the State of Florida and issued/enforced by the Florida Board of Massage Therapy.

The demand for the professional services of Licensed Massage Therapists at conventions, fairs, by employers has somewhat muddied the waters about when an establishment license is needed.

Staff at the Florida Board of Massage Therapy has been very patient in attempting to identify the many situations in which LMTs practice and advise AMTA, Florida Chapter regarding when an Establishment License is required and when an LMT may practice without an establishment license. The Florida Board of Massage Therapy provided the following information.

Location	EXEMPT from Establishment License	Establishment License REQUIRED
Convention	LMT must <i>first</i> obtain written approval from the property owner before massaging general public.	
Fairs & Flea Markets	LMT does not need an establishment license to provide massage services to Fair and Flea Market EMPLOYEES in their Offices.	LMT does need an establishment license to provide massage services to the <i>General Public</i> — including vendors who rent booths at the Fair or Flea Market.
Hair Salon	LMT does not need an establishment license to provide massage services to EMPLOYEES of the salon.	LMT does need an establishment license to provide massage services to salon <i>clients, vendors, or the general public.</i>
Hotel	LMT does not need an establishment license to provide massage services to <i>guests in their hotel rooms or to hotel employees in their offices.</i>	LMT does need a massage license if they are going to have a <i>fixed location</i> in the hotel that will be available to guests, employees and the general public.
Mobile Massage/Van	NOT ALLOWED	NOT ALLOWED
Hospital	LMT does not need an establishment license to provide massage services to patients, hospital employees, and physicians.	LMT does need establishment license to provide services to the general public.
Office Building	LMT does not need an establishment license to provide massage services to <i>employees at their office.</i>	LMT does need an establishment license to provide massage from a <i>fixed location</i> in a building available to customers or clients or office workers and general public.
Physician's Office	LMT does not need an establishment license to provide massage services to the employees of the physician.	LMT does need an establishment license to provide massage services to the patients of the physician and /or to the general public.

How long does it take to get an Establishment License? The entire process (including the mandatory inspection) can take approximately 8 weeks.

Is my establishment license portable (i.e. if I move to new location, is it good there)? As soon as an LMT knows they are moving, they should apply for a change of location application. The transfer is only good AFTER the application is filed and completed, the fee paid, and a new inspection of the new location is complete.

If I sell my business to another LMT, can I transfer my current establishment license to the new owner? NO.

Opening a new business can be overwhelming. Make a list of “steps to take” — take them one at a time and open the business of massage correctly.

The old adage “it’s easier to get forgiveness than permission” is NOT applicable in the case of an LMT opening their business. Failure to have the proper licenses — professional, business, establishment, etc. can result in payment of fines, having business stopped for a period of time, and in some cases — actions against one’s professional license.

Good resources: floridatrend.com/small_biz.asp. provides a lot of information for those wanting to begin a business in Florida.

For those who may be interested in a corporation or partnerships or LLCs, the Department of State website (dos.state.fl.us) is a great resource for the forms needed to file those types of papers.

A call to an AMTA, FC Board member will also be able to put you in touch with other massage therapists who have already conquered the ‘bureaucracy of business’ — look to them for assistance.

The Wounded Client: Guidelines for Delivering Bodywork to Survivors of Sexual Abuse

by Donna C. Cerio

Bodywork Therapy with Survivors of Sexual Abuse

The face of health care is changing and bodywork therapy is significantly influencing that change. Bodywork therapy is fast becoming a household word. This is an exciting time for our profession as we take our rightful place in the health field. The benefits are profound for people who are suffering from a wide range of injuries and conditions.

In the United States, bodywork practices are now accepted as viable, effective health care, and specialization within our field is being defined and developed. Working with clients with a history of sexual abuse is a specialty that needs to be recognized. Intentional Touch™ is a training that defines and develops this specialty.

Throughout my 25+ years as a Holistic Health Professional, I have specialized in working with clients who are dealing with the aftermath of recent and past sexual abuse. I have found bodywork therapy to be an effective and powerful tool in assisting the recovery of this client population, many of whom are suffering in isolation and silence.

Intentional Touch(tm) is a model that provides a protocol for interaction between the health practitioner and the health care recipient as well as the partnership of conventional and complementary medicine. Intentional Touch™ is applicable to all bodywork therapies. It is based on principles that guide the approach to touch used in all health care delivery.

This and future issues of the AMTA Florida Journal will feature more on Intentional Touch™. I will continue to write an interactive column on the subject of bodywork therapy with survivors of sexual abuse. I hope to hear from many of you with your concerns and questions.

I am deeply committed to increasing the awareness of the specific needs of clients with a history of sexual abuse by training professionals to specialize in this area. It is a challenge that I feel privileged to have the opportunity to meet.



The belief that time heals all is not always applicable to the wounds of sexual abuse. Healing can be a life-long process. Years after abuse, survivors find themselves experiencing chronic body pain, negative behavioral patterns that seem impossible to change, a pervasive underlying anxiety, a severely damaged self-concept, a fear of intimacy, and many other debilitating symptoms.

Throughout my 25+ years as a bodywork professional, I have specialized in working with clients who are dealing with the aftermath of recent and past sexual abuse. I have found bodywork therapy to be an effective and powerful tool in assisting the recovery of this client population, many whom are suffering from sexual abuse in isolation and silence. Bodywork therapy played a significant role in my own personal healing, and as a result, I began using it to assist clients with a similar history.

Even if you do not specialize in working with clients who have a history of sexual abuse, statistics indicate there is a strong likelihood you will encounter them in your practice. Consider the following statistics from the 2002 *California Coalition against Sexual Assault Report on Rape and Violence*:

- In 2006, there were 272,350 victims of rape, attempted rape or sexual assaults according to the 2006 National Crime Victimization Survey.¹ (Because of the methodology of the National Crime Victimization Survey, these figures do not include victims 12 or younger.)
- Every two and a half minutes, somewhere in America someone is sexually assaulted.²
- In the United States, a rape is **reported** about once every five minutes.³
- 1 out of 3 women worldwide has experienced rape or sexual assault. (2001)⁴
- A recently published eight year study indicates that when perpetrators of rape are current or former husbands or boyfriends, the crimes go unreported to police 77 percent of the time. When perpetrators are friends or acquaintances, the rapes go unreported 61 percent of the time; and when the perpetrators are strangers, the rapes go unreported 54 percent of the time.⁵
- “Of the 22.3 million adolescents in the U.S. today, 1.8 million have been victims of serious sexual assault.”⁶
- Only 39% of rapes and sexual assaults were reported to law enforcement (2003 National Crime Victimization Survey)⁷

These statistics are staggering and lead us to the conclusion that there are a significant number of people suffering from emotional and psychological wounds incurred from sexual abuse. As the bodywork profession continues to grow, it is increasingly likely that clients affected by sexual abuse will enter your practice.

Bodywork therapy can contribute significantly to the recovery of clients who have been sexually abused. And because of the

nature of this kind of abuse, bodywork therapists have an ethical and legal responsibility to work in partnership with appropriate licensed professionals in the care of these clients. When you have established that sexual abuse is in the history of a client, I suggest obtaining written permission to confer with their other licensed health-care professionals. This could be a physician, psychiatrist, therapist and/or psychologist, among others. If the client is not under the care of a licensed health-care professional, I explain to the client that it would be to his or her benefit to explore this option. I always have a list of referrals on hand in several appropriate areas of specialty for this purpose. As a bodywork therapist, partnering with a licensed professional gives you confidence that your client will have whatever care she needs, while you stay in the context of your own scope of practice.

The Wounded Client

In my experience, there are three categories of clients with a history of sexual abuse: The first is open and direct with you about their history and desire to heal. The second group is aware that they were sexually abused but do not tell you for a variety of reasons. They may feel shame and/or fear of being judged or rejected. Or, as a survival mechanism, they may have minimized the impact abuse has had on them. The third type of client has been sexually abused and has no recollection of it. He may have separated the traumatic event from the conscious mind in order to tolerate what happened.

How a person is affected by sexual abuse depends on several factors: the age at which she was victimized; her relationship to the perpetrator; the duration and consistency of the abuse; and the type of abuse. Even so, there are common effects that most sexual-abuse survivors experience. According to health-care experts, the most common conditions this population is at an increased risk for are: posttraumatic stress disorder; eating disorders; drug and alcohol abuse; depression; anxiety disorders; significantly poor health; and chronic pain. These conditions affect both the body and the mind.

“I spent years in chronic physical pain, severely limited in what I could do,” says sexual-abuse survivor and bodywork client Lina R.* “My mind was often in chaos, and I felt unsettled. With bodywork therapy I am experiencing enhanced mental clarity and emotional peace. I can work on my computer, do yard work and hike. After years of physical and mental limitations, I can use my body and mind freely again.”

There are clues, such as those mentioned above, that clients with a history of sexual abuse will present, whether or not they reveal the abuse to you verbally. Additional indicators of sexual abuse will be covered throughout this article.

Whether or not you know that a client has been sexually abused, or if you suspect past abuse based on the indicators listed throughout this article, use the following guidelines to provide hands-on therapy that prevents re-traumatizing the client and opens the door for the deepest healing possible.

PECE - The Four Stages of Safe Touch:

P: Prepare yourself for each session using techniques that assist you in clearing your body, mind, emotion and energy, and bringing your focus completely to the client. I suggest breathing exercises and setting an intention regarding how you want to approach the client. Your intent, for example, could be, “I intend to be completely present throughout the whole bodywork session and hold this client in the highest regard at all times.”

E: Enter your client’s physical space with awareness, realizing that there is a transition taking place from the time the client walks through your door to the time the session begins. I suggest opening with an energy — balancing technique to allow for the transition and to mark the beginning of hands-on work. This also creates comfort and builds trust between you and your client.

C: Work at the contact point. This is a point in time, rather than a point on the physical body, when a direct, high-quality link is established between you and your client. Staying focused, aware and present will help you reach this contact point.

E: End the session by affirming the existence and ongoing nature of your professional relationship with the client; acknowledge her progress by pointing out what you observed; and assure her that she is responding to the bodywork.

Landmines

Sexual abuse leaves deep imprints. Physically and energetically they are stored at the most basic level of structure, encoded in the cellular levels of the human body. Any touch can activate these “landmines,” trigger cell memory and re-traumatize the client.

While we cannot always prevent encountering a landmine, we want to do all we can to avoid triggering its effect. And when we

do encounter one, we want to approach it so that the greatest amount of healing can occur. As bodywork therapists, we need to be aware of the landmines that we may encounter with this client population. Stimulus in any environment, from direct hands-on therapy to common everyday situations, can be a trigger, causing a flare-up in the effects listed above.

I have worked with clients who have had landmines triggered by such common events as a routine medical exam, a dental procedure, or a firm pat on the back by someone who intended to be friendly. Even instances where physical contact does not occur — such as a verbal altercation with a friend, a conflict with a clerk in a department store, or witnessing an accident — can trigger landmines.

Due to its hands-on nature, bodywork therapy is an arena where there is a high likelihood of encountering these landmines. Any touch therapy can feel invasive and abusive to the client if it stirs up buried responses from the initial abuse. Because the client's experience may be internal or not even come to his attention until well after the session, the inexperienced or untrained practitioner may not realize anything has been triggered unless told so by the client. For the client, the experience may seem surreal or imaginary. This may confuse her and create a feeling of being traumatized without understanding why. Often due to her confusion, shame and inability to set limits, the client may not inform the practitioner about the experience at all. That is why it is important to take precautions with all clients that you suspect may have a history of sexual abuse.

The following behaviors may indicate landmines are present:

- Micro-managing her session
- Longer recovery time for injuries
- Apprehension about being touched
- Intensified reactions to common health-care procedures
- Undeveloped boundary system
- Self-destructive behavior
- Problems setting limits
- Problems asking for what she needs and wants

If you encounter any of the above, you may be in territory that necessitates further training, to provide increased awareness and guidelines to modify your approach.

“Participatory Health Care”

Clients who have experienced sexual abuse have a particular

need to be an equal partner in their health care. This is essential in order to promote and ensure safety and sustainable solutions.

Sexual abuse is done to a person without consult or consent. It is usually a result of being overpowered by size, verbal threat or authority. You represent authority in your field, and this alone may activate your client's landmines. Including her in the therapeutic plan helps prevent this from happening. I call this approach “participatory health care.”

One of the most important things you can do is to set aside the client's first session for intake. In doing so you promote “client authority”, which is an antidote to being a victim. This also gives you and your client the opportunity to begin building trust and partnership and set the pace and style of approach together, by gathering information and setting a foundation and intentions for future sessions. Throughout the years, clients have told me that the intake session gave them a foundation for feeling safe and building trust.

Sexual abuse changes how a person responds to touch. For some, the idea of being touched in any way is so repulsive or uncomfortable that they shy away from all or most physical contact. Others set no limits with touch. These extremes are common in sexual-abuse injury, though, of course, many variations exist. Clients may seek bodywork therapy to overcome the inability to be touched, as well as to experience safe touch.

One of the beneficial results of bodywork therapy is that it can give the client an experience of safe, appropriate touch that, according to research and health-care experts working with this population, will eventually override the imprint of the traumatic touch from the sexual abuse. Bodywork therapy is touch that the client has sought out and chosen for herself, consented to, and participated in how it will be received.

“At first I was so unfamiliar with safe, self-chosen touch that my body's response was to separate me from the experience,” says sexual-abuse survivor and bodywork client May S.* “Bodywork has helped me reclaim myself. With consistent sessions, I can now feel nurtured from being touched. This has impacted my life significantly. I now have a healthy relationship, a more satisfying work life and more confidence to connect in meaningful ways with others,” she adds.

Gradual Touch

How you approach touching your client is important. This client

population responds best to gradual touch. Putting your hands on these clients too quickly often feels abrupt and sudden to them and can trigger fear, confusion and other negative reactions. Also, gradual application of pressure is more likely to be accepted by their bodies. I have the client use sound and breath as I work, which empowers him as a partner in the session and puts him at ease.

Watch for signs of apprehension and reluctance. If any signs appear, you have encountered the client's "protective field". These signs can be both obvious and subtle. Examples are: A history of dissatisfaction with previous bodywork sessions with other practitioners; stiffening up when you start the session; muscle tension that will not release; and a worried facial expression. When I encounter a client's "protective field" I give the following message, sometimes verbally and sometimes non-verbally: "I respect your reluctance and/or apprehension; I am glad to wait until you are ready; or I am willing to restructure the session to make you more comfortable; and I will be patient." I remain fully present with the client. I detach from any need to proceed, let go of my agenda and quietly wait for the client's signal to go forward. Presence, patience and choice are the keys to encourage the client to open into trust. When the client develops the ability to trust in the therapeutic relationship, she can transfer it into her daily life.

The Role of Self-Care

I have found that self-care has to be a priority in order to serve clients with a sexual-abuse history. For this reason, I receive bodywork on a regular basis. I also leave enough transition time between sessions, use breathing techniques before each session and make sure I disconnect completely at the end of a session. These practices keep me centered and grounded, and allow my client to focus on her well-being.

The energy field of a person who has been sexually abused often has an amplified sensory receiving system. This indicates ultra-sensitivity to the obvious as well as subtler elements in the environment. If I have not taken care of and centered myself before a session, the client may sense this and find it difficult to let go. At those times, she will almost always ask me how I am doing and be overly concerned about my well-being. Sexual abuse survivors are often exquisite caregivers, but it is often very difficult for them to accept care from others.

Customizing the Session

It is important to be aware that you are often working on multiple levels of the person at the same time. You may encounter aspects of the person's past, such as the wounded child, the hurt teen-ager or the harsh critic, who are much younger and less developed than the adult body you are working on. Be aware that these are not pathologies, but rather the parts of the person that had to deal with a horrific situation and developed protection as best as she knew how. When I encounter this "protective field" in a session, I recognize it as part of the brilliant design of human makeup: adaptive, with a strong will to survive and astoundingly creative. The best way to approach the "protective field" is to acknowledge it, accept it, and offer it a respectful invitation to heal and change through touch.

Often the monitoring system of a client with a sexual-abuse history tends to under-function. This causes her to have underdeveloped boundaries. The client may not let you know that something is not working for her in the session. She may not even know this herself until long after the session is over. Developing a feedback strategy — a plan the client has constructed with you in the initial intake session — is profoundly helpful. With this plan in place, your client has a comfortable way to let you know when she needs something. The plan also provides a controlled place to practice strengthening the boundary system.

Customizing the approach and pace of your bodywork techniques is essential. Since the cellular and energetic imprints that result from trauma are often deep and very close to the surface at the same time, any quick, unexpected touch might be felt or interpreted as abrupt and/or rough. This can awaken deeply buried emotional, mental and/or physical responses from the time of abuse.

Specialization

In the United States, bodywork practices are taking their place as viable, effective health care. Specialization within our field is relatively new. Delivering bodywork to clients with a history of sexual abuse is a specialty that needs to be defined and developed. Clients with a history of sexual abuse benefit significantly from bodywork therapy. By knowing how to approach these clients, you ensure that they receive work directly applicable to their healing with the least risk of being re-traumatized.

I have presented some of the basics of this specialty to you in this article. The main points are: have an appropriate intake procedure that begins the building of trust in the therapeutic

relationship; stay alert for signals that you may be approaching a landmine; practicing patience, acceptance and a nonjudgmental attitude will encourage the client's trust; let go of your agenda; promote "client authority" and "participatory health care"; meet the client's "protective field" with respect and care; and, importantly, work in partnership with licensed health-care professionals.

*The names of clients have been changed to protect their privacy.

Note: The information and suggestions in this article are not a substitute for training. Readers are urged to seek training to make sure they have sufficient education and experience to understand the information presented here and to safely apply it to clients who are sexual-abuse survivors.

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Training

Donna offers training in Intentional Touch(tm), which addresses the needs of people recovering from sexual abuse and dealing with chronic emotional, physical and/or mental pain.

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Donna C. Cerio's 25+ years as a Holistic Health Professional include bodywork, teaching and organizational development in private practice, academic and medical settings. Founder and Director of The Cerio Institute, she has developed and refined Intentional Touch™, a body of work that addresses the needs of people recovering from sexual abuse and other traumatic experiences, suffering from serious illness, and those who deal with chronic emotional, physical and/or mental pain.

The Intentional Touch™ certification program Phase I training is now offered in Florida. For more information contact Donna at (831) 475-5472 or Bhasa at ServeWell™ at (831) 662-2232.

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- 1 *National Crime Victimization Survey, 2006* Retrieved from Rape, Abuse and Incest National Network website on 12/21/07 <http://www.rainn.org/statistics/index.html>
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Board of Massage Therapy Report: January 2008

by Michael Garcia

The 345th General business meeting of the Florida Board of Massage Therapy was held January 24-25, 2008 at the Doubletree Hotel Westshore in Tampa, Florida.

Board members present included Dave Quiring, LMT, chair; Lynda Solien-Wolfe, LMT, vice chair; Andrea Vala, LMT; Lorena Haynes, LMT; and Irene Andriole, consumer member.

Representing the board staff were Christy Robinson, program administrator; and Donna Garret. Daniel Biggins, Esquire, Board Counsel and Sam diConcilio, Esquire prosecuting attorney were also present.

The Capital Clinic in Tallahassee was awarded the board recognition award for their efforts in educating our legislators to the world of massage, and for helping our associations and board when visiting the Capitol building. We all owe a warm. "Thank you" to Michelle and Carol, two hard-working nurses in this clinic.

Dave Quiring was voted in as the chair of the board and Lynda Solien-Wolfe will remain the vice chair.

We are making progress and changes! The board of massage therapy will not provide an audience copy or an association copy of the agenda at any future meetings. The good news that all public information (that was previously in the agenda books) will be on the board's web site prior to the meetings, and can be viewed and downloaded by anybody that so desires. Now, everybody can have a copy!

If you are associated with a massage school in Florida, please make sure your students know the following information. There is still only one test that is approved and offered by the national certification board that entitles those that pass to become Florida licensed. Even though there was an article recently printed that said a second test has been approved and is currently acceptable (the NCETM), that information is not accurate. Please make sure that your students continue to study the Eastern modalities, Chakras, meridians, etc., since those subjects are on the only currently approved test (for Florida licensure). The Board recently voted to accept the new test, but the Department of Health is questioning having two tests approved for use. A representative of the Department was present at the meeting to voice the concerns of the Department. There was some discussion comparing both tests from the National Certification Board and which one would be more appropriate for Florida students. It was clear that the Department favors having only one test approved for use.

There is a third test being examined and considered. This test is the result of the work of the Federation of State Massage

Therapy Boards (FSMTB). Even though the NCETM test is certainly a more appropriate testing medium for entrance level massage, the test from the FSMTB is an even better choice for Florida students. The FSMTB is made up of the regulatory boards for Massage Therapy from all participating states.

This provides an advantage by allowing direct and immediate input into the exam that will permit correlation from the state's requirements and the exam requirements (unlike what exists now). As many of us "old-timers" remember, there was not much of an "Eastern" modality influence or knowledge requirement of these subjects (chakra's, meridians, etc.) on Florida's previous licensure test. The NCBTMB then changed the test content and certification requirements without any input or concern from Florida (or other states) massage therapy schools or massage regulatory boards. The result was chaos (or at least mass confusion and anxiety) in many Florida schools, both for the staff and students. All of a sudden, Florida massage schools with only the basic 500 hour program were forced to find a way to continue teaching the subjects required/mandated by the Board of Massage Therapy and to add in the new "Eastern materials, all within the same time frame. Of course, schools did the best that they could, but many were forced to "teach to the test" rather than focus on the mandated subjects. Students were forced to study "Eastern modalities" rather than what was more appropriate for entrance level knowledge for Florida licensure. This information was shared with the representatives from the Department of Health by myself, and confirmed by several other massage school educators and owners. I have personally attended many meetings and discussion groups over the past few years that were intent on correcting this problem faced by graduates of Florida Massage Therapy Schools. I am excited that our state is working with regulatory agencies of other states and may soon have a truly appropriate entrance level exam for our graduates! Remember, this test is not yet available for Florida candidates, even though it being used by some other states (16 states have already adopted the FSMTB exam). All Florida candidates for licensure must still take the old, NCETMB test!!

For clarification, I personally asked the Board to state, on record, which test may be used for Florida licensure. Only the NCETMB is acceptable.

Speaking of the test, did you know that the national passing average for the NCETMB test is only 66%. That means 34% of students nationally fail this test the first time that they take it. Don't laugh. Florida graduates don't even score that well. The passing rate for the NCETMB in Florida is only 53%! Some schools have

a good passing rate and some are just awful (0% to 15%). The Florida Department of Education does not have a process in place to monitor or address this problem, so our Board has decided to tackle this problem in order to further protect our public (which includes students). Board member Lorena Haynes, LMT is working with Board Counsel, Daniel Biggins to develop language for a rule concerning requirements and possible disciplinary actions for Fl. Schools that do not maintain a satisfactory passing rate on the licensing exam. Lorena would like input from massage schools, educators and LMT's on this subject.

Our Board should be applauded for standing up for the rights of Fl. Students to obtain quality education in Fl. Massage Therapy Schools. This is a wonderful example of protecting the public. Way to go, Florida Board of Massage Therapy!

There were 4 licensure reactivation cases on the agenda. One was withdrawn, one will be continued at the next meeting, and two were granted. Applicants MUST be present at the BOMT meeting in order to have their license reactivated.

23 history applications were on the agenda. These are applicants for a license that have something in their history that the Board needs further clarification/information on in order to make an informed decision regarding whether to issue the license or not. The Board denied only one applicant, due to the fact that the person had been required by the Board to attend this meeting and previous meetings, but the applicant did not show up for any of the meetings. Fourteen of these history applicants were approved to have their licenses issued unencumbered (no strings or additional requirements). Two history applicants will be continued at the next meeting. Six history applicants were approved with the condition that they enter into and remain in compliance with a contract from P.R.N. The BOMT denied a reconsideration of a previously issued with conditions applicant.

There were 9 establishment history applications. Only 3 applications were approved without conditions. Three others will be continued at the April 2008 meeting. One was denied. Two were approved, with conditions. Two applications for licensure were withdrawn.

There were only 4 informal hearings originally scheduled. Two of these cases involved therapists that were previously disciplined and failed to comply with the final order from those disciplinary cases, which is a violation of 480.046 (1)(k) F.S.. [480.046 Grounds for disciplinary action by the board. (1) The following acts constitute grounds for denial of a license or disciplinary action, as specified in s.456.072(2): (k) Violating a lawful order

of the board or department previously entered in a disciplinary hearing, or failing to comply with a lawfully issued subpoena of the department.] The Board voted to waive both the fines and costs for the current violation (480.046 (1)(k) F.S., as long as the therapists complied completely and fully with the previous order(s).

There were 12 settlement agreements considered, with one of the cases being continued at the next meeting and the others cases being accepted.

The BOMT voted to approve all 9 Voluntary Relinquishments of Licenses.

For some reason, one of the most common reasons that LMT's are disciplined remains working in an unlicensed establishment. 480.046 (1)(n) states that: The following acts constitute grounds for denial of a license or disciplinary action, as specified in s.456.072(2): Practicing massage at a site, location, or place which is not duly licensed as a massage establishment, except that a massage therapist, as provided by rules adopted by the board, may provide massage services, excluding colonic irrigation, at the residence of a client, at the office of a client, at a sports event, at a convention, or at a trade show.

Is it the schools lack of effort to inform students of the importance of knowing our laws, or is it the indifference of the students that causes this continuing problem? The true and ultimate obligation, of course, is with the students. Let's review some important steps LMT's should take before working in any location. First, since the law states that all massage establishment licenses must be posted in a conspicuous place, simply look for the license! [64B7-28.008 Display of Licenses (3) The owner of each massage establishment shall conspicuously display a current establishment license issued by the Department on the premises.] Don't know what it looks like? Look at your personal LMT license. It looks just like your license, except where your name appears as a 'Licensed Massage Therapist', the establishment license says "Licensed Massage Establishment".

Can't find the license posted anywhere? Be careful. Excuses such as "it's in a drawer somewhere", "I left it at another office", "This other license is all we need", etc. are often reported by LMT's to be the reason an office or owner can't show or produce the license. No matter what excuse you are given, if the license is not posted in a conspicuous place, politely decline to provide any massage services at that location until a proper establishment license can be posted. Second, look at the expiration date. If the license is expired, don't perform any massage services until a new license with the current date is posted! Excuses from

owners and managers include “I already sent in the check, so it’s okay”, “I sent in the renewal application, so you don’t need to worry, we’re covered”. These and many other clever lines are used in an attempt to convince the therapist to continue working (and earning income for the business), even though the establishment does not have the current and required license. If the license is expired, it is the same as not having a license. The LMT will be disciplined for working in an unlicensed establishment. Don’t fall into this trap.

There were 4 Hearings for determination of waiver/default. Two cases involved the same therapist, and both cases were for sexual misconduct. This therapist was accused of rubbing the client’s vagina and then inserting his finger into the vagina. Approximately 2 months later, this therapist was accused of uncovering and inappropriately touching another client’s breasts. Both offenses occurred at different locations. During the hearing, he admitted to uncovering the client’s breasts and touching them, and to knowing that it was wrong to do so. DUH!! He stated he had entered into a plea agreement for the criminal charges brought against him for these offenses and was going to prison for 18 months. The Board revoked his license, but did not impose any fine or costs, since it appears he would not have the ability to pay while in prison.

One hearing was for (Surprise-Surprise) “Practicing massage at a site, location, or place which is not duly licensed as a massage establishment.” The therapist was fined \$100.00 and also has to pay costs incurred for the case in the amount of \$1,167.85.

The last hearing involved several violations, including practicing massage without a valid Florida Massage Therapy license and unlawful sexual touching. The establishment license at this location was revoked and the owner fined \$4,750.00, plus costs incurred of \$1,434.19.

No rules have been adopted since the last meeting, but several rules have been noticed for promulgation, and one rule has been developed. 64B7-32.003 (1)(b) Minimum Requirements for Board of Massage Therapy Approval is the rule developed and the rule development was published 06/29/07. This rule would change the wording that now includes “Florida Statutes and Rules and History of Massage” (and 10 hours for these combined) to just “Florida Statutes and Rules” (and only 8 hours required). It will also change the wording for the 97 hours of “Allied

Modalities” to 97 hours of “Allied Studies”. Lastly, it adds wording to include “Medical Error Prevention” for 2 hours, under 64B7-32.003(1)(b).

Stay well, practice safely within the law, and always remember the following 3 quotes:

“Ignorance of the Law is no excuse!”

“Education cures ignorance!”

“It is your responsibility to know your Laws!”

Disclaimer: *This information is not the official transcript or minutes of the Board of Massage Therapy. The office minutes can be found on the Board’s website at www.dob.state.fl.us/mqa.*

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