

# Within Reach

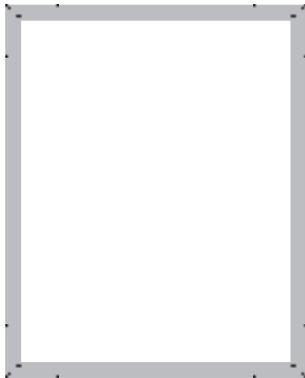
DECEMBER  
2000

AMTA Texas Chapter Newsletter: ALL THE NEWS THAT'S FIT TO TOUCH

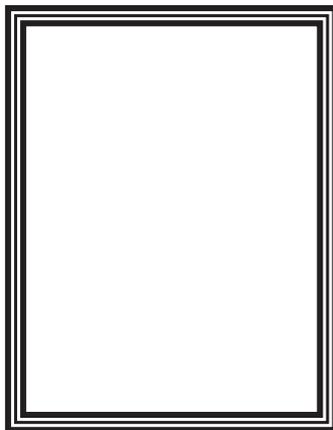
## Photos from the Fall 2000 AMTA-Texas Chapter Educational Conference *(had it not been cancelled)*



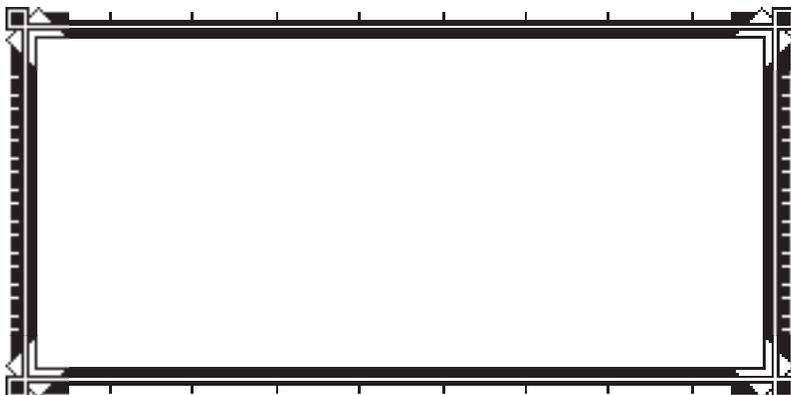
*Workshop participants enjoy cutting-edge continuing education*



*Conference attendees learn about new exciting products at vendor booths*



*AMTA-TX Chapter members listen to Kathy Craft speak*



*AMTA-TX Chapter officers discuss the future outlook for state meetings*

**in this issue:**

**what do you amta  
members want**

**austin unit report**

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**a journey home**

**acupressure seminar**

**insurance  
reimbursement**

**change is in the air**

# Within Reach

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- Articles: Articles, commentaries, letters to the editor, etc., should be e-mailed or provided on diskette along with a print quality original and are due by January 11, 2001 to Rick Robinette. *Content may be edited for length and/or content.*
- PC Files: Must be converted to at least one of the following, if not created in one of the programs mentioned above: Graphics (Tiff, Jpg, or EPS); PDF; or PS. If in native format (as noted above), fonts may not be identical to those originally used. A paper copy must be provided to ensure the closest match as possible. This specifically includes MS Publisher; this *IS NOT* a supported program on the Mac platform.
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## What Do You AMTA - Texas Chapter Members Want?

### AMTA National Convention House of Delegates 2000 Report

Mary M. Rydesky

AMTA - Texas Chapter Delegate

Texas, the message was expressed loudly and clearly: get with the program. At the September 2000 meeting of the AMTA National House of Delegates, representatives from 44 states debated the issues confronted by Texas massage therapists. At the crux of the debate was the AMTA standard of requiring 500 hours' education prior to becoming a Professional-level member. This standard places a barrier to massage therapists in a state requiring 300 hours' education.

Hoping to achieve recognition for the 300-hour curriculum, the Texas Chapter presented a resolution to the House, refining its resolution as presented in 1999. Once again, the delegates debated the issues at great length. Would acceptance of Texas with its 300 hours dilute the standard of quality? Would someone come forward to petition for a 100-hour program next year? Why not push for legislative change, asking Texas to update its registration requirements along the lines of national standards?

The questions and suggestions of the delegates addressed many issues that Texas' history has proven as tried and found ineffective. In the early 1990s, the Texas

Chapter sponsored a workshop to teach RMTs how to contact their State Legislative Representatives as part of a grass roots campaign. RMTs throughout the state spoke in favor of increased educational requirements, explaining the value to the public as well as to the profession. In spite of the hours and energy devoted to this effort, RMTs saw the initiative defeated due to lack of a cohesive voice. Some RMTs misunderstood the movement as one to threaten their practices, and chose to speak in opposition to the heightened requirement. Since then, the Texas Chapter has continued to speak in support of practicing RMTs by addressing challenges to our legislated scope of practice. However, another campaign to increase the required hours has not been mounted.

Texas now has more than 13,000 RMTs. Starting in 2001, each one who wishes to renew registration will be required by the Texas Department of Health to take six hours of continuing education per year. Presently, TDH's refinement of the procedures, approved list of educational providers, and requirements for record keeping continues. This educational requirement went into effect without the sponsorship of AMTA as an organization; however, it supports a major tenet of AMTA's mission. In other words, the Texas continuing education requirement is welcomed by the Texas Chapter as a means of encouraging all RMTs

to remain current with new thought, technique, and issues in the profession.

AMTA is but one of the choices available to Texas RMTs seeking professional affiliation. Its members select AMTA for many reasons, but a few of these are common. AMTA's ability to educate the public about massage therapy via the national media is high on the list, as is its quality and availability of continuing education. Insurance - and support for members who face legal issues - are important, and therapists in communities where code restrictions or legal proceedings against one of its members are the most vocal about this benefit. Others comment that the fellowship of RMTs with a similar drive "to make a difference through massage therapy" is their key motivator for joining.

The Texas Chapter desires to sustain the ability to choose AMTA as one's professional organization. Because of its size in prior years, the Texas Chapter was accused of strong-arming decisions affecting all RMTs in Texas. The AMTA's 500-hour requirement has helped some RMTs make the choice for membership in other organizations that welcome them on the basis of state registration alone. As a result, the likelihood of legislative interest in increasing the educational requirement is decreased. While RMTs can sit for the state registration exam at 300 hours, and while they can enroll in continuing education programs to gain 200 more hours (holding Associate membership in AMTA for three years while taking courses), loyalty to other organizations has time to strengthen. This is called brand loyalty. As it does, membership growth projections for Texas AMTA falter and weaken.

The House of Delegates spoke with one voice, telling Texas to get with the times. The individuals who filled those seats, however, spoke with compassionate voices. I cannot count how many individuals came to me to ask for more details, to tell me they regretted having to stand on tough love principles, or to provide a word of encouragement. Many suggested methods for helping Texas reach the national minimum standard of 500 hours. All gave heartfelt concern, hoping that we would recognize the negative vote as a vote FOR our progress.

We have the choice of several paths now. Do we come together to work towards renewed legislative action? Do we fold our tents and quit? Do we take "time off" to renew our energies before reevaluating? Do we ignore or acknowledge market trends... or what the universe is telling us?

The decreasing enrollment in recent conferences over the last three years brought the Texas Chapter to an abrupt conclusion earlier in September when insufficient registration led to canceling the Austin conference. This conference had been designed to decrease the RMT's time away from home, and therefore, costs. It was located in an area with well more than 2000 RMTs, many of whom are AMTA members. Advertised in *Within Reach*, on the website, and by word of mouth, it garnered fewer than 10 enrollees from the Austin area! Not one person living west of Austin registered! Most enrollees were to play dual roles as attendee and conference volunteer or board

member/unit director. There were several registrants who are not AMTA members that did enroll, which leads to the conclusion that the word thankfully exceeded our target market. But critical mass was not achieved, and the costs of hosting the conference far exceeded the revenues. Thus, it was cancelled.

Is it time to stop offering conferences as a member benefit? If members' need for fellowship, education, and sharing of new ideas through networking is satiated, does the Texas Chapter have a place in meeting these needs?

If it is time to stop meeting in person, what are the needs of Texas RMTs that we CAN and should meet? Are the trends for all voluntary organizations heading in a direction we should follow? What is the right thing to do regarding Unit development and support? And lastly, if we do not meet, how do we conduct the business of the association in an environment that is open to the entire membership? Indeed, a handful of volunteers could meet regularly to review and manage a budget, disseminate information, hear issues and suggestions, measure progress against goals, and represent Texas to the AMTA National House of Delegates on matters of resolution.

In business, the company that seeks to meet the needs of its customers is the company that stays profitable. In volunteer organizations, it is the association that seeks to meet its members' needs that stays strong. I ask you- what meets your needs? Beyond the basics of the tangible items you get with membership (insurance, journal and newsletters, etc.) what services do you want from AMTA that can and should be delivered via the Texas Chapter? We are not Big Business, and cannot underwrite a Gallup poll to gather your input... we can only ask you to send email, faxes, and letters that can be reviewed for similar issues. The Board and Unit directors cannot be leaders if you are silent, as silence cannot be led.

Please. Think about your practice and your personal goals. How would you like to progress? People rely on one another to progress - that is the history of the tribe, the community, the organization. How can our community, the massage therapists of Texas, be furthered in its progression?



**IMPORTANT DATES**

- January 11, 2001  
Article Deadline for February *Within Reach*  
Contact Rick Robinette
- January 17 – 20, 2001 – *Huatulco, Mexico*  
AMTA Council of Schools Annual Meeting  
Contact 847-864-0123, ext. 150
- October 17 – 21, 2001 – *Quebec, Canada*  
AMTA Annual Convention  
Contact 847-864-0123, ext. 143

# The Essentials of Hydrosols- A Conversation with Jeanne Rose

Paul M. Frizzell ND, PhD, OMD

**P.Frizzell:** What are hydrosols?

**J.Rose:** Hydrosols are a product of the distillation process associated with the creation of essential oils. Hydrosols are the water that is created during the essential oil creation process. The word hydrosols when broken down means, hydro or water and sol or solution. Hydrosols are simply water solutions that contain the water-soluble micro-components of essential oils and water-soluble plant components from the plants used to create the essential oil. These micro-molecules of essential oil give the hydrosol its scent and the plant components give the hydrosol its herbal or floral therapy.

**P.Frizzell:** Can hydrosols be used in massage?

**J.Rose:** Well, there's a female therapist in Pennsylvania who thinks that the hydrosols are absolutely fantastic for two levels. After a full body massage she sprays the whole body down with hydrosols, and she finds that it is a good way to bring people back up to where they can get out and drive a car instead of leaving them so relaxed that they can't move and that's why she uses it. But, I also think that you could use them direct without oil at all as a non-oily massage for somebody who has to go back to work. I think that they can be used very nicely for hand and foot massage with reflexology.

**P.Frizzell:** Do you think that they can hydrate the skin as well?

**J.Rose:** Absolutely, I think it absolutely does hydrate the skin. I think they're excellent. I wish that I could get more people using them.

**P.Frizzell:** I understand that people can get hydrosols from you for about \$90.00 per gallon.

**J.Rose:** No, the Aromatic Plant Project does not sell hydrosols by the gallon. We now only sell them by the quart.

**P.Frizzell:** With the hydrosols do you feel they are more of a sensible way for us to use essential oils and herbs?

**J.Rose:** I think that the hydrosols are an extremely valuable 21st Century way of using, what I call the best synergy of Herbalism and Aromatherapy because it combines the best of herbs and the best of aromatherapy and the hydrosols in a safe and easier way to use. You can bathe in them, you can drink them, and you can spray them on your face or underarms as a deodorant. You can do all kinds of things that you can't do with straight essential oils.

Jeanne Rose is leading herbalist, a published author, and an accomplished and sought after lecturer and instructor. She has documented over 101 ways to use hydrosols. Here are some of the possible uses she has listed for hydrosols made from Lavandula (Lavender):

- \* As an aftershave toner.
- \* To spray on hotel pillows for a refreshing sleep-enhancing scent.
- \* Coffee all day, garlic for lunch...PFEEEEEEEEEW! A little swish and gargle of hydrosol and I can stand close.
- \* Mix half-and-half with honey as a gentle daily face wash – Oh, the luxury and tight skin too!
- \* Riding your motorcycle across Texas in June! Take off that helmet and cool down with a refreshing mist.
- \* Spritz your sock drawer once a week.
- \* Nobody in the family likes those "bathroom" sprays because they are too synthetic – spray, spray, spray away, AHH!
- \* Lavandula hydrosol and Aloe Vera gel...soothe a burn, treat your skin.
- \* Champagne jazz brunch add some Lavandula for some truly unique bubbly!
- \* HYDROSOLS ARE GOOD FOR EVERYTHING!

Jeanne Rose will be holding a Healing with Essential Oils Workshop in San Antonio, Texas at the Neuromuscular Pain & Nutrition Center April 6-8, 2001. For more information call: (210) 558-3112 or e-mail [nmpnc@aol.com](mailto:nmpnc@aol.com)



[www.amtatexaschapter.org](http://www.amtatexaschapter.org)

Are you moving?

Here's what you must do:



1. Write or email the AMTA National office to let them know a.s.a.p.
2. Write the Texas Department of Health to let them know a.s.a.p.

The Texas Chapter office is updated by TDH and AMTA's National office.

This is the only way the Texas Chapter will have your updated address.

## For Serious Education in Lymph Drainage Therapy, Come to the Source: The Upledger Institute



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## A Journey Home to Ourselves: The Healing Synergy of Body-Mind-Spirit Awareness AMTA National Convention 2000 Report

*Alice Abbott*

*Friend of the AMTA Foundation for Texas*

I was certainly intrigued by the title of this workshop but really decided to attend because I had taken a class with the presenter, Suzanne Scurlock-Durana, before and knew that she would be an excellent educator. I was not disappointed. Suzanne is both a gifted therapist and an engaging speaker. It was hard to believe that those four hours passed so quickly! I came out of the workshop feeling very grounded. Suzanne talked about creating a healing space for ourselves so we can be coming from that place of connectedness in order to create a healing space for our clients as well. Our sessions are better for our clients and for ourselves when we are grounded.

In the workshop we learned several grounding exercises that were interesting on an experiential level. (Making a point to feel your feet is helpful!) Being massage therapists, we really relate to our worlds on a feeling level more than most. In one of the activities we paired off and were led in an exercise where we became conscious of our boundaries and those of our client. As we learn how to sense and feel more, internally and externally, we will enhance our capacity to feel more connected to our Source.

Whenever possible, we want to come into our sessions with this sense of connectedness to Source. When our 'containers' are full of nourishing energy, we have a clearer sense of ourselves and where our boundaries are. Then from that quiet inner place we feel a sense of connection to the world around us. When we can connect with our clients using that awareness, we can then hold a healing space for someone as their healing process unfolds. Furthermore, that awareness of our connection will aid our healing process as well. The truth is that the facilitation process can become a source of deep nurturing for ourselves, as well as our clients, when we are fully connected and grounded. Indeed, in this paradigm, to give is to receive.

This workshop was a powerful one for me to attend. Suzanne really brings a sense of the sacred to her presentations. I would certainly recommend attending one of her seminars if you are afforded the opportunity.

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# Insurance Reimbursement: A View From One Who Has Been There, Done That

Debra Brooks

AMTA National Member-at-Large

Note- at the AMTA National Convention in Phoenix September 2000, there was a presentation and a hearing regarding Third Party Reimbursement Issues conducted by the Special Committee on Insurance Issues. Many members voiced their concerns via letters, e-mails and calls. On the questionnaire that went out to the members via the Chapter newsletters last year, over 81% said they did not want to be involved with third party reimbursement or HMO's.

Reminder: We are not discussing reimbursement from auto insurance (personal injury) or worker's comp. Next newsletter will run a letter from a member is who is in favor of third party reimbursement and HMO's. Here is a letter from one AMTA member who has been there, done that-

I have concern regarding insurance reimbursement (IR) for massage therapy. I base my concerns on 25 years of experience as a nurse and 12 years of experience as a massage therapist. I have both professional and personal experience with the impact that IR has on delivering care. I believe that IR will negatively alter the profession and will ultimately limit not only client/patient access but also professional control. I am asking that the AMTA leadership do everything possible to discourage this practice.

The sole motivation for seeking IR for massage therapy is money. I am sure that many proponents of IR believe this to be easy money. As a maturing profession, it is natural to compare ourselves to other professional groups. In our society the ultimate of the health care provider is the physician. Physicians are well paid, held in high esteem, and receive IR for their services. I assume that the logic used by proponents of IR goes something like this:

## **A. Physicians are health care providers that**

1. are very well paid
2. receive IR for their services
3. are held in high esteem and are respected

*Therefore as health care providers receiving IR:*

## **B. Massage therapists**

1. will be very well paid
2. will be held in high esteem and be respected

*Unfortunately, B will not follow A for the following reasons:*

1. I R will take control of professional practice and standards away from the therapist and put control in the hands of insurance companies and physicians
2. IR will increase costs to consumers while eroding the income of therapists
3. Regardless of profession, IR always degrades ethical practice
4. IR will limit client/patient access
5. IR will advance mediocrity in the profession

It is beyond the realm of logical thought to assume that if IR becomes common for massage therapy, it will be administered in a manner different from the current model used for other health care providers.

There are some simple facts that need to be discussed regarding insurance companies. The sole purpose of an insurance company is to make a profit. The customers of so-called health care insurance are employers who want to pay the least amount of money possible for coverage of their employees. Insurance companies hire physicians as advisors. In this capacity, physicians help insurance companies decide:

which services should be offered, at what rate the services should receive compensation, who should provide the service, and how often a service should be covered per year or lifetime.

State and federal governments have legislative control of insurance companies. State and federal governments use physicians as advisors in roles that are very similar to that which they serve in insurance companies. While there are a handful of insurance companies that actually pay for health care or have some token coverage for illness prevention, the majority of coverage offered by so called health care insurance is actually illness treatment insurance. Illness treatment is the core approach used by allopathic medicine. Those who control IR are only interested in immediate and quantifiable results. As an example, there is universal IR for the treatment of lung cancer but almost no IR for smoking cessation.

Access to insurance covered health care services is, for the most part, controlled by physicians. A sister profession, physical therapy (PT), illustrates this point. State government controls access to PT. There are two basic models of access- self referral and physician only referral. In states that allow self referral, insurance companies will only pay for PT ordered by a physician. In States that only allow physician referral, a physical therapist can only perform those services ordered by the physician in his or her prescription. To get a prescription, a person must visit his or her physician. This adds to the overall cost of health care. The physician is not required to honor a patient's request for any specific treatment and is most likely to order treatments that will directly reimburse themselves. For example, a physician is far more likely to inject a joint with cortisone rather than order physical therapy. Any prescription by a physician must have an associated diagnosis to justify the prescription. This may seem to be an innocuous process, but once a

diagnosis becomes a part of a person's medical record it can haunt him or her for life. Certain diagnoses can be used as a reason to deny employment and future insurance coverage.

We must remember that it will be physician advisors who will play the primary role in helping an insurance company decide what diagnosis warrant massage therapy. They will also determine how many sessions per year or lifetime will be covered. Considering the level of ignorance that physicians have about massage other than as a form of relaxation, and the fact that massage is a non-physician performed modality, how many times per year do you think a physician advisor will recommend payment for "a nice relaxing massage"?

In my experience over the years, physicians have changed their practice by usually ordering only those services that are covered by IR. Those suffering from Fibromyalgia receive great relief from manual therapies, yet manual therapy is rarely ordered by physicians because few insurance companies recognize Fibromyalgia as a "legitimate" diagnosis, let alone have provisions for non-allopathic care.

Another area of control that is imposed on health care providers by IR is the issue of documentation. Both nursing and PT illustrate my concerns. The roles of the Registered Nurse and Physical Therapist has moved from and continues away from direct patient care to those of management and documentation. Why this focus? Because insurance companies really do not care about outcomes but they do care very much about documentation. Without "proper" documentation there is no payment and those agencies employing RNs and PTs are justifiably interested in being paid. Will massage therapy have to develop another level of profession such as massage technician or massage assistant in the same way that nursing has licensed practical nurses and nursing assistants and physical therapy has physical therapy assistants and PT techs? Documentation can be used as a delaying tactic by insurance companies. It is perfectly legal for an insurance company to delay or deny payment of legitimate claims based on typos or minor documentation technicalities. This practice has given rise to whole a new bureaucracy of medical billing, which adds another layer of cost to the health care consumer and increases the cost of providing health care.

Since documentation is the tool for reimbursement, massage therapists will have to become "creative" when documenting to maximize payment. Physicians are masters of this practice, finding obscure symptoms or combining symptoms in such a way that a higher paying diagnosis can be used in their documentation. While this practice is not illegal, it is unethical. Such behavior is almost mandated by IR. I personally know of one physician who retired early just because his conscience would not allow him to be "creative". He was greatly ridiculed by his peers, after all "everybody does it" (creative documentation).

Insurance companies will set the rate of reimbursement for a massage session. As with other health care professionals, massage therapists will be forced to set their fees to maximize IR. The fees will have to be higher than those now charged to offset the higher cost of doing business and to offset the weeks, months, or years waiting for the reimbursement check to come in from

the insurance company.

Acceptance of IR also determines what a therapist must charge all of their clients/patients. Once any health care professional accepts IR all fees must be the same for all patients, since having different fee scales for the insured and noninsured is considered to be insurance fraud. Conviction of this crime can include fines and jail time. IR also causes most client/patients to develop an "insurance" mentality. This mentality means that if a service that was once covered by IR is dropped, a person will now refuse to pay for it out of pocket. I have personally "lost" clients, who could easily afford my fees, when their IR changed and no longer covered massage. This story has been repeated to me by numerous other health care professionals, such as chiropractors and counselors. For reasons noted above, once a service is covered by insurance, it becomes more expensive. While the proponents of IR claim they want to make massage more available to those currently unwilling or unable to pay out of pocket, the increased cost related to IR will make massage therapy prohibitively high for the very populations they say they wish to serve.

IR will not make massage inflation-proof or protect us from downturns in the economy. When economic times are bad, employee benefits are cut and it is unlikely to think that massage would escape the ax when a company is trying to save money on insurance costs. During hard times fewer people are working, and non-working individuals are less likely to have IR, let alone be able to afford the out-of-pocket expense of massage.

I am also concerned that IR will attract those to this profession simply because they will see the profession as a source of easy education and easy money. This will ultimately promote mediocrity. A good massage therapist does not go into the profession simply because training is readily achievable and does not require a college education. The last thing we need are individuals who think "massage is getting paid for just rubbing a body". The recent increased demand for massage has unfortunately attracted this kind of individual. Too many times in the recent past, I have heard comments like "well I couldn't make it in the nursing program, or the nail technician program, or cosmetology program, so I am going to try massage". While many of these individuals do make it through massage training, few stay in the profession very long once they encounter the actual demands of a viable practice. If IR becomes a standard practice, I am afraid that more and more individuals will be attracted who are merely looking for an easy income rather than providing quality health care.

If I haven't convinced you, I hope that I have at least given you something to ponder. Please do something to stop the lemming's race to IR. IR will not increase access to massage therapy. IR will not increase the level of professionalism and quality of care. IR will add layers of bureaucracy and outside control. IR will probably not increase income but if it does it will only be temporary and at what price? I believe that widespread IR for massage will lead the profession to become a profession of excellent accountants and record keepers and mediocre body rubbers.

With Respect

David M. Frederick CMT, BSN/RN



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## Orthobionomy

### AMTA National Convention 2000 Report

*D'Jango Sanders*

*AMTA - Texas Chapter Director of Education*

This workshop, presented by Bruce Stark, discussed the nature of orthobionomy from its origin in 1964 through the work of Lawrence Jones, a doctor of osteopathy in England, (where it was known as strain counter-strain) to its development by Arthur Pauls, another osteopath who developed Jones' ideas into Orthobionomy. During the demonstration, we learned positions of release for the cervical, thoracic and lumbar spine, the sacrum and also the psoas muscle. Positions of release for long and short leg were also taught.

Orthobionomy (which means straight-life-study) is a gentle system of healing which works to restore the body's natural balance, alignment and well being, and is considered to be a somatic therapy. Using the body's innate wisdom, the practitioner exaggerates the clients' preferred posture. By working in the direction of least resistance, the nervous system will be less taxed, and normalization can occur. No force is used at all. A therapist simply uses movement and gentle compression to fold the body about a tender point, and then proprioceptive reflexes located in the joints and muscles are stimulated. This process allows the body's own healing and self-corrective mechanisms to kick in and then ease the person out of pain. Self-healing occurs as the person remembers his/her natural ability to move away from pain and toward ease. 



## Austin Unit Report

*Stacey Lemire*

*Unit Director (Outgoing)*

The Austin Unit is alive and well! We had the greatest attendance in three years at our meeting September 5 with nine people. Elections were held and four folks stepped up to the plate! They are:

**Co-Directors:**

David Washburn and Mary Huggins

**Secretary/Treasurer:**

Adriana Travers

**Newsletter Editor:**

Lew Browder

Cathy Condray will remain **Education Director**

Rima Star offered her massage school as a permanent meeting place (we have used her facility for the last three meetings). 

## Steven Halpern- Sound Healing and Massage Therapy in the Millennium

### AMTA National Convention 2000 Report

*Mary M. Rydesky*

*AMTA - Texas Chapter First Vice-President/Units*

Hearing the pleasant voice of a learned man with a sense of humor, over 500 massage therapists crowded the general hall. They had gathered for continuing education, for the stimulation of travel, and for the joy of gathering with kindred spirits. From as far away as Hawaii and New Hampshire, Florida and Alaska, they came to the AMTA National Convention in Phoenix. What did they hear?

First, musician Steven Halpern busted the myth of Mozart's music increasing intelligence. He explained that there are many levels of energy, but as we look underneath the surface, we discover the profound impact music has upon us. If the sound is in harmony with the structural integrity within a body, it assists with that structure coming into an energy balance. For massage therapists, the music played during a massage affects the receptivity of the client, and the therapeutic effect of the touch. Simply put, sound is absorbed within the entire body, not just through the ear. Music can transform the environment to become a healing environment. We can circulate liquids with sounds. Smoke studied in a chamber to represent gasses in the body can be directed in its movement by sound. Violin music, for example, is not a relaxing vibration, according to the study of cymatics.

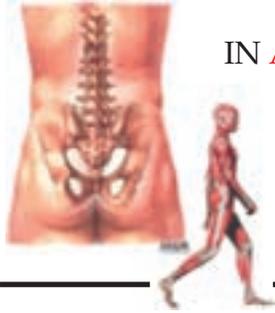
Music can nurture the spirit. In Halpern's recordings, the sounds balance the neurohormonal transducers in the body. These are the seven chakras. He led the audience in a balancing meditation coding the seven chakras with the seven colors and the seven tones. It starts with the note 'C' (the frequency of 256 cycles per second), which is in tune with the natural environment. When we are in tune with it, our brains act at 8 cycles per second.

The meditation changes the internal energy of the therapist who practices it, allowing the therapist to affect the client in a balanced, sustained way.

In closing, Steven invited us to contact him by mail or through his chat rooms on his website ([www.stevenhalpern.com](http://www.stevenhalpern.com)) or by mail. He encouraged the sharing of massage therapists' observations about the impact of music on their massage effectiveness. His new CD, MUSIC FOR MASSAGE, is specific for one hour massage. SPECTRUM SUITE, and MUSIC FOR SOUND HEALING are also available. 

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## Acupressure Seminar

## AMTA National Convention 2000 Report

Mary M. Rydesky

AMTA - Texas Chapter First Vice-President/Units

In a half-day session by Michael Reed Gach, students learned the basics of acupressure from a master. He reviewed the history of acupressure and noted that it both preceded acupuncture and remains a viable therapeutic option today. A noted author, Michael Reed Gach has numerous books and materials that are available to the serious student. His new wall chart serves as an excellent road map to both the points and the meridians.

Two kinds of points, muscular and skeletal, comprise the 365 acupressure points on the body. When viewing an acupressure chart, the points are the dots in the meridians. The meridians relate how a pressure at one point can relieve pain at another. There is a high electrical conductivity at the acupressure point on the surface of the skin. One can conduct the healing energy by

pressure at that point. Points are bilateral, and one would use both local and remote points. One-finger width measurements use the client's finger width. Of all the fingers, the middle finger is the most healing, as it has the most healing energy. The next time you see the middle finger extended, think of the blessing you are being given!

Slowly, gently, firmly: remember this mantra when performing acupressure. Super slowly, hold the point, and bend your body into the point. Pressure depends on the recipient; a strong athlete needs more, a traumatized person needs a lighter touch. Do not jam the finger into the body. Two ounces equals a light touch; 25 pounds is deep pressure. How long to hold a point? There are several indicators in knowing when the point has released. The most verifiable is feeling pulsation. The sensation is like a blood pulse but is actually the energy flow. A second one is the release of tension. A third is a lessening of soreness or sensitivity, as the endorphins have then kicked in. As the point releases, release the pressure and hold it half as deep. This draws the pulse. Press at a 90-degree angle to the skin and hold 2 – 4 minutes. Multiple sessions are usually necessary for chronic problems. 🙏

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Stacey Lemire (see Standing Rules Chair)

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Susan Olson (see Convention Coordinator)

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### **Standing Rules Chair** (Appointed Position)

Stacey Lemire - 12101 Mill Hollow  
Austin 78750 - (512) 258-7695  
email: staceylemire@netzero.net

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Alice Abbott  
(956) 831-9668 - email: gitalin@aol.com

### **Director Of Education** (Appointed Position)

D'Jango Sanders - 241 Oleander  
St. Corpus Christi 78404-1769 - Wk: (512) 882-6800  
Fax: (512) 882-6800 - email: dsand49@aol.com

### **Historian** (Appointed Position)

Pending

### **Convention Coordinator** (Appointed Position)

Susan Olson - 1804-F Brothers Blvd.  
College Station 77845 - (409) 693-5562  
Fax: (409) 695-2828 - email: massage@tca.net

Congratulations to Stacey Lemire, former Austin Unit Director, for being the AMTA – Texas Chapter State Meritorious Award recipient at the AMTA National Convention 2000 in Phoenix, Arizona! She received this honor for her service within that organization and a "dedication to enrich lives".

Stacey is a Professional Member of the American Massage Therapy Association (AMTA). She volunteered her leadership for 3 years as the AMTA Texas Chapter Austin Unit Director and currently serves the AMTA State Chapter as the By Laws Chair, an appointed position. In addition to completing 550 hours of training at the nationally approved Lauterstein-Conway Massage School in Austin, Texas, she has taken workshops in several different modalities (including energetic healing) and completed a 125-hour certification in Star TherapySM (breathwork). Stacey has also participated in the education classes at the AMTA National and Texas Chapter conventions since 1997. She is one of a dozen people certified nationwide to massage people with Hemophilia and is registered as such with the Touch Factor Foundation. Along with a private practice in her northwest Austin home, Stacey is a professional volunteer for Circle of Life Hospice. Further, she is an instructor for business practice and professional ethics at the Lauterstein-Conway Massage School and does stress management lectures for various organizations.

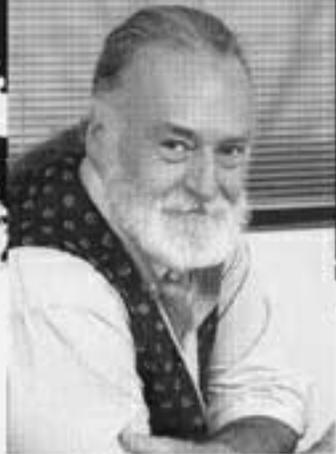
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## AMTA MERT Wants You!

Mary Castleman RMT

The AMTA MERT (Massage Emergency Response Team) program prepares volunteer massage therapist responders for professional deployment during a disaster. This program offers AMTA professional members a layer of expertise that cannot be obtained through any other professional channel. AMTA MERT members will enhance their personal growth and professional development by working under high-pressure conditions, in a safe environment, within a structured chain of command.

The AMTA MERT Committee has created a formal program that provides a framework of guidelines and safety measures within which a massage therapist responder can participate. The AMTA MERT regions will provide the same coverage as the Federal Emergency Management (FEMA) responders. There are 10 regions encompassing the United States to include Alaska and Hawaii, which correspond to the FEMA regions.

**AMTA MERT Mission Statement:** The AMTA Massage Emergency Response Team is committed to respond to emergencies with the power of compassionate, professional touch to promote the health and welfare of humanity.

### AMTA MERT Goals:

1. To be a leader and resource in massage emergency response as a support to emergency-responder and disaster communities.
2. To create the standard by which massage therapy at disaster is measured.
3. To have an organized and effective response structure.
4. To be aligned with governmental and non-governmental emergency management agencies.
5. To enhance the personal growth and professional development of AMTA members.
6. To be inclusive of the massage therapy community.
7. To promote the visibility of AMTA and the massage therapy profession.

**Team Leader and Responder Training:** Your cost for training will be \$45. This will cover the cost of your training manual. Team Leader and Responder training for the State of Texas will be held on Friday, Saturday, and Sunday, February 2, 3, and 4, 2001 by MERT Regional Director Arturo Delgado.

For more information, contact Mary Castleman at 903-665-8946 (email [steamboat@mcc4u.com](mailto:steamboat@mcc4u.com)) or Susan Olson at 409-6935562 (email [massage@tca.net](mailto:massage@tca.net)) For further information go to the AMTA website at [www.amtamassage.org](http://www.amtamassage.org). Click on "Members Only". Click on "Programs". Scroll down to "MERT".

## Change is in the Air President's Message

Carolyn Scott-Naile

AMTA - Texas Chapter President

Faith Popcorn in her 1991 book, 'The Popcorn Report', describes "cocooning" as the trend for the New Decade. She explains that everyone will be looking for a haven at home-drawing their shades, plumping their pillows, and clutching their remotes. Could this be the possible reason our membership is less likely these days to attend a meeting? Or perhaps the membership is so happy with the way the AMTA - Texas Chapter officers are running the state chapter that you do not feel the need to attend meetings. Maybe it's a combination of both.

In an effort to re-think the activities of the Chapter, the Board of Directors recently approved a motion to examine the needs of the AMTA Texas membership. We are now in the process of drafting a membership survey to explore those needs.

In the next few weeks you will be getting a call from a member of the telephone survey committee to ask your opinion on the direction of the AMTA - Texas Chapter. It is my hope that you will take the few short minutes needed to discuss your ideas so that we can plan for your future.

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# In the Wake of a Cancelled Conference

*Rick Robinette*

*AMTA – Texas Chapter Third Vice-President/PR*

As longer-term AMTA members know, this newsletter normally subsists on primarily on promoting upcoming state meetings and then featuring commentary and reaction afterwards. The cancellation of the Fall 2000 Educational Conference in Austin was a rather unprecedented event. I asked for short responses from various people regarding state chapter meetings and have summarized some of these below. If you have never undertaken a project on the scale of an AMTA state chapter convention or conference, I doubt you can completely understand the monumental amount of behind-the-scenes work and effort that is involved to undertake a state meeting with education. We, as chapter and unit leaders, need to know if this seeming lack of interest and support from the AMTA – Texas Chapter membership is indicative of a future trend and, if so, determine if it is a disservice to the broader membership to hold state meetings that are not cost-effective (much less profitable).

A Response from Susan Olson, AMTA – Texas Chapter Convention Coordinator

The AMTA – TX Chapter Executive Committee had a very difficult decision to make in canceling this conference, as this action had never before been necessary. After evaluating how many conference enrollees had committed one week prior versus how many we felt were necessary to break even, it was apparent that we were about \$5,000 in the hole.

Having top-notch education made available to Texas Chapter members at an extremely reasonable price, networking with

fellow therapists, plus the added benefit of having health care product and service vendors on site are some of the many things members have come to expect at each and every state meeting. Having educational conferences available is a valuable asset we might all be taking for granted. From seeking cutting-edge educational presenters to locating a space large enough to fulfill our estimated enrollees are all part of the responsibilities of the Educational Chair and Convention Coordinator.

Many kudos to D'Jango Sanders, Director of Education, for his longstanding ability to engage the very best educators. I hold D'Jango in high regard. He goes about his work quietly, consistently, and with focus. I can not recall when he was not part of the AMTA – Texas Chapter. He is certainly an asset to our membership.

Each conference is planned 1-2 years in advance. Countless phone calls, numerous site visits, endless computer hours and executive committee meetings are spent designing and creating two state meetings a year just for you members and by VOLUNTEERS just like yourself. Each person has other work that they devote their life to besides providing us this service. Every state meeting is totally dependent on the number of enrollees. As numbers have dropped off over the past several years this has greatly endangered the continuing education process that is available to you. We need membership support if we are to continue to provide you with the continuing education and opportunities that are available at these state meetings.

Information about future state meetings will be in the next issue.

A Response from D'Jango Sanders, AMTA – Texas Chapter Director of Education

As the person who ultimately chooses the education for the conference, it more than casually

saddened me that only thirty-five people thought the event worthy to register for. I would be lying if I told you I didn't take it personally. As best as possible, I try to anticipate what form of education would be suitable for a broad audience of massage therapists and seek appropriate presenters. With regard to continuing education seminars at the state chapter meetings, I've tried to stay with trends and bring in cutting-edge presenters for massage therapy. I have polled the membership as to what types of education they desired and reasons for not attending; we have heard, listened, and done our best to comply, but attendance has not gone up. When small numbers such as this sign up, I can only conclude that I do not have pulse on what people want.

A Response from an Inactive Member

I'm an older lady who has worked out in the real world for decades, and this is my perspective:

First, the reality is that the population you are trying to attract sees massage as a one on one profession. Getting together appeals to them, if at all, only in theory. These are introverted, contemplative people. School and other organized groups didn't work well for them... rarely ran for cheerleader or class officer or appeared in drama club. They do not perceive groups as safe or supportive. Once they get to a [state meeting], they have a good time, so

Second, we have to recruit attendees, and we have to use people who attended before to do that. Massage therapists as a culture do not read their mail, circle their calendars, call two other people in excitement and say "Oh! Let's stay together in Austin!" They have to be lured, recruited, enticed. Fun or useful or helpful or interesting descriptions in the literature don't convince them. There must be pods of callers who recruit others to attend, and nail them down to making reservations, etc.

*continued on page 18*

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# hands-on therapy

Ever since I started teaching my first massage class in my living room, I have been planning and designing my DREAM teaching facility. After 10 years of successful effort the dream teaching facility is finally open in Mesquite. It includes such amenities as an enclosed wet-room and a supervised play room for children. I would love for you to come by and see the kind of dedication to student services that has made our school famous. This is my personal invitation to you. Carolyn Scott Naile, owner

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# Why MERT?

Susan Olson RMT

On November 18, 1999, the date of the famed Texas A & M University bonfire, a towering mass of logs and object of student passion collapsed, killing 11 students. Shortly after the news of the tragedy reached the entire nation, I received a call from University officials asking that I round up as many massage therapists as possible to assist at the bonfire site. Rescue crews had been steadily working for a good 10 hours when we arrived. The Red Cross tent was earmarked for our use. We literally had to pull rescue workers in to take a few moments to catch their breath. The cold, wind-whipping night wore on with cranes painstakingly removing logs on the stack while victims still lay trapped beneath the massive pile of logs. As time passed, there was little hope that any person beneath the tons of logs

would be alive, but we did what we could to assist. Ten long hours later, most of the massage therapists went home in the wee hours of the night.

This was an experience I hope to never see repeated, but when I read in the AMTA National Convention 2000 brochure about the grass roots Massage Emergency Response Team (MERT) it definitely caught my attention. I wanted to be a part of this team. As a massage therapist, I felt I could have done so much more to assist during the A & M disaster. Now, with having MERT established, there will be a massage protocol response for any similar disaster occurrence. MERT will help with the assessment of the situation at hand and also any long-term effects facing those who deal with this type of disaster situation. I would not have had the opportunity to be a part of the Texas MERT team without the information I received at the AMTA National Convention.





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This seems like a lot of work (and it is), and it seems like mothering a population that "should be" old enough to see the value in a conference. But these are not go-getter, competitive people who are turned on by something that puts them one-up, or gives them a chance to network. That's what's both good and bad about our profession. Definitely not hustling yuppies!

Third, I am not perfectly in the loop, being inactive, and not attending meetings, but I could not make any sense of the pre-convention information. I could not find out where, just approximately when. I could not get an overview of price until the pre-registration date had passed. And I could not get a clear idea of how the conference affected the new Continuing Education requirements- if it does. And I tried! I followed up on e-mails and asked.

So some of the feed back needs to go to the person who must send out a sharp, clear bulletin, especially if this conference does affect our continuing education requirements. I know most of that was evolving: continuing education and a list of exhibitors and classes. But I couldn't find anything to pin my plans on, and I live in Austin and wanted to go!

It's always a struggle to get information out early enough. I think you volunteers are heroic, and you probably can't work any harder than you do. But I think some things faltered: the publicity wasn't strong and clear enough to pull the introverts and the wishy-washy out of hiding AND not enough of us were recruiting folks to come-on-in-to-Austin. I pray the momentum continues and there is energy to put together another conference soon.

#### A Response from a Former Unit Director

Reasons why Texas massage therapists don't go to educational conferences:

1) Most therapists who have successful businesses (or not) probably only take workshops in their specialty. And after they have taken several workshops in their specialty, they don't feel like there is really too much else to learn, so why bother? My sense is that most therapists taking continuing education classes are still inspired and excited about the profession. But most of us old farts have seen enough and done enough to know that there really isn't all that much to learn. But the mandatory Texas Continuing Education requirement is about to change all that.

2) Most massage therapists don't need the group support that they once needed; massage is much more widely accepted now than 10 years ago. Also, massage jobs are quite plentiful.

3) The only draw for me to this Conference (which has now been cancelled) was that Kathy Craft was going to speak.

4) This Conference was also competing with the

AMTA National Convention in Phoenix.

The Price of Cancellation- A Response from Sue Northcutt, Dallas Unit Director

Recently I was asked to assist with securing vendors for the Fall 2000 Education Conference (now cancelled). I had been Exhibits Coordinator for the Spring 2000 Convention and worked with vendors to send invitations, get them registered, collect their fees, meet their needs (for booth spaces, electricity, chairs, etc.), encourage raffle prizes and "freebies" for participants, and ultimately ensure that all went well.

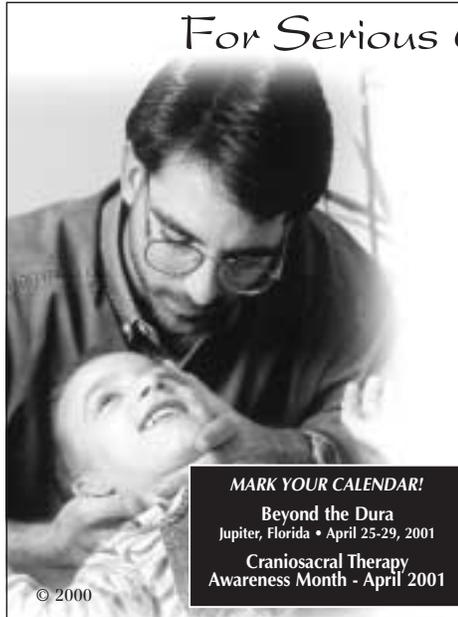
When I accepted being Exhibitor Coordinator for the Fall 2000 Conference, I did so with reservations because of the poor attendance and subsequent vendor disappointment at the Spring Convention, and also because of the large effort involved in the coordination of logistics for these events. I asked for, and received, assistance from Michealle Fisher, also an AMTA member. I printed, labeled, folded, stuffed, and mailed over 200 invitations, then received and processed registrations as they were returned, speaking to many personally. Michaelle spoke to more vendors, discussing the event and the advantages of their participation. When the lack of participation caused the decision to cancel, I was in the envious position of calling all vendors who had registered to tell them we didn't have enough members to make the conference viable, so "thanks, but it wasn't worth their time and money to exhibit." I also had to return checks, samples, and raffle prizes- indeed, Susan Olson as convention coordinator had to return samples and raffle prizes that had already been sent to the hotel by the vendors. Then, of course, I cancelled my own travel arrangements and plans.

"Damages" resultant from this whole affair is the credibility of our vendors, not to mention our own credibility as an organization. In my opinion, I understand the necessity, but it is shameful to me that this has had to occur. The shaming part is not that we cancelled, but that we HAD to do so.

My experience with the Dallas Unit membership has been a parallel to the conference experience; very few people show up. In the entire Dallas area, I think attendance to the Dallas Unit meetings of 0.8% representation of the AMTA members is also a bit shaming. Three postcard mailings have gone out the entire membership, still with only a representation of 0.8%.

Now to the crux of my comments: what does the membership want? What does the membership need? What do we need to do to meet these needs? I'll gladly step down off my soapbox and look forward to feedback. From my standpoint, I'm rather disappointed and burned out. I can't even imagine what the viewpoint of Susan Olson (the convention coordinator) is, having had much more effort involved than I did.

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## Continuing Education Report

*D'Jango Sanders*

*AMTA - Texas Chapter Director of Education*

My fellow massage therapists and body workers, we seem to be at a crossroad. Our next scheduled conference is March 2-4, 2001 at the Animal Institute in Conroe. My question now becomes, is anyone interested in attending, or will this be another effort gone for naught. If there isn't an interest please let the AMTA - Texas Chapter board or myself know. This way, we can avoid expense and time commitments from the Animal Institute and those who set up the event. Yes, CEU'S for AMTA and CE hours for TDH will most likely be given for attending (although I will need to confirm with TDH to be sure).



## East Texas Unit Features New Website!

*Registered massage therapists and AMTA members in the East Texas area will now be able to keep up with regional massage and Unit information. Be sure to bookmark the website for the latest in any important developments.*

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