



HOLISTIC MASSAGE



PROFESSIONAL TRAINING COURSE

HANDBOOK – 2024-2025

Your Journey Starts Here.....

© Andy Fagg, BCMB

BCMB PROFESSIONAL TRAINING COURSE

HANDBOOK

Welcome to the BCMB course in Holistic Massage. This handbook provides an overview of the course and is intended as a support and encouragement for you - a map to help you find your way. It should be read in conjunction with the BCMB Massage Manual, which provides a month-by-month presentation of supporting material.

OVERVIEW

| Page | Massage Principles & Background |
|-------------|---|
| 5 | Principles & Spiral Mandala |
| 6-7 | Energetics of Touch |
| 8 | Holistic Practice and the BPS Model |
| 9-12 | History of Massage |
| 13-18 | Holistic Massage - What is it? & How to do it |
| | Starting to Massage |
| 19-20 | Practical Matters: Hygiene and Client Comfort |
| 21-23 | Massage Strokes – Terminology |
| 24-26 | Looking after Yourself |
| 27-29 | Dynamic Bodyuse in Massage |
| | Theory & Books |
| 30-32 | The Role of APP in Massage |
| 33-36 | Suggested Reading List for Students & Practitioners |
| 37 | BCMB Price List |

ASSIGNMENTS, ASSESSMENTS & QUALIFICATIONS

| | |
|----|------------------|
| 38 | Summary |
| 38 | A word about MTI |

Assignments

| | |
|-------|------------------------|
| 39-41 | Massage Practice Diary |
| 41 | Personal Journal |
| 42 | APP Study |

Assessments

| | |
|-------|----------------------------------|
| 42-43 | Milestones |
| 43 | MTI Assessments within Course |
| 43 | MTI Assessments at end of Course |

SUPPORTING RESOURCES

Massage Practice Diary

| | |
|-------|--|
| 44-47 | Massage Practice Session Recording Form; Guidance Notes; Massage Received recording Form |
| 48-52 | Examples of completed session records (3 given, 2 received) |
| 53-56 | Examples of 2 Client Group Studies |

Personal Journal

| | |
|-------|--|
| 57-58 | Journal Entries: 2 Examples |
| 59-60 | Mental Health Exploration & Massage Benefits Example |
| 61-64 | Halfway Review: Examples |
| 65-67 | Overall Summary: 2 Examples |

Assessments within Course for MTI

| | |
|-------|---|
| 68 | Full Body Massage Evaluation (QC4) |
| 69-71 | Massage Practice Diary Assessment (QC5) |

Assessments by MTI at end of Course

| | |
|-------|---------------------------------------|
| 72-74 | APP exam: guidelines & marking policy |
| 75-83 | Sample Exam Paper |
| 84-85 | Final Practical Exam: Guidelines |
| 86-92 | Final Practical Exam Assessment Form |

AFTER QUALIFYING

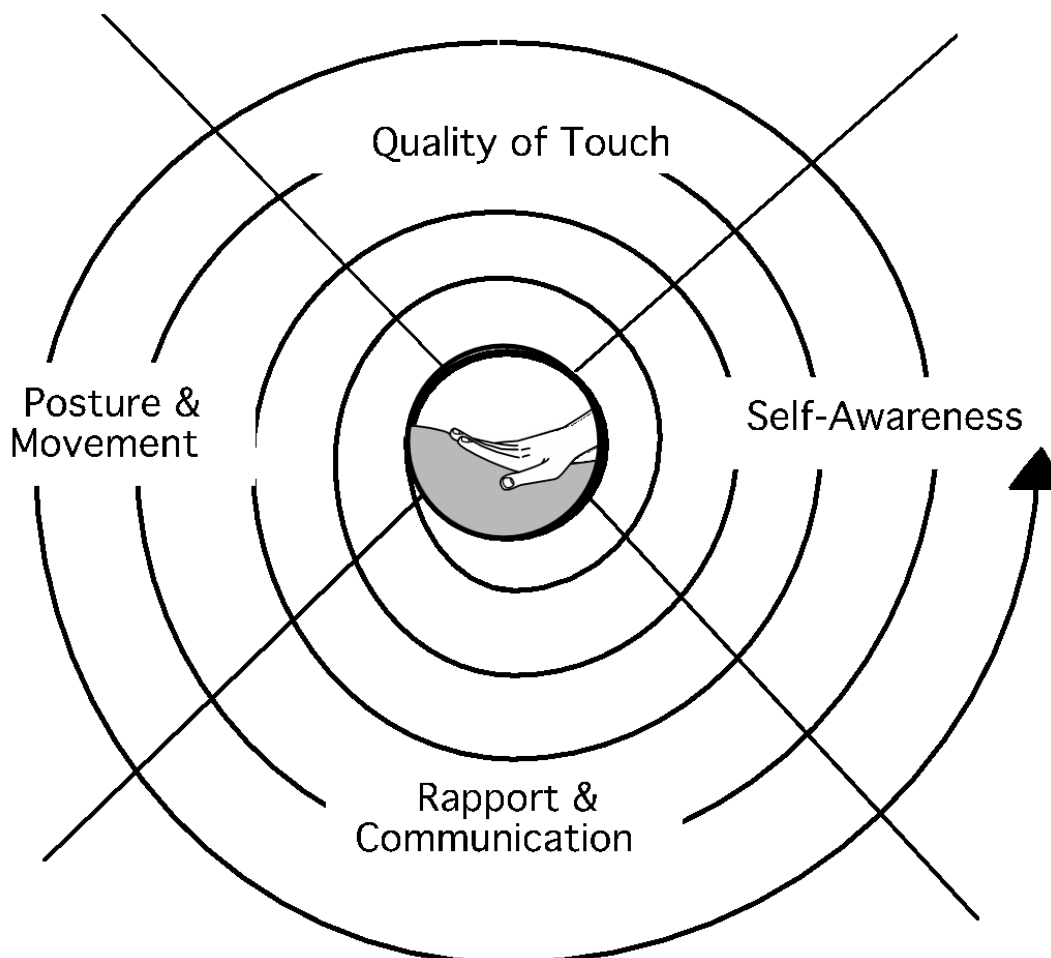
| | |
|---------|--|
| 93-94 | MTI Practitioner Association and Insurance |
| 95-96 | Continuing Professional Development |
| 97-98 | MTI Code of Ethics |
| 99-100 | MTI and Other Organisations |
| 101-103 | Legislation affecting Massage |

* * * * *

MASSAGE PRINCIPLES & BACKGROUND

PRINCIPLES

**“Massage is one person touching another with awareness
so that healing can take place”**



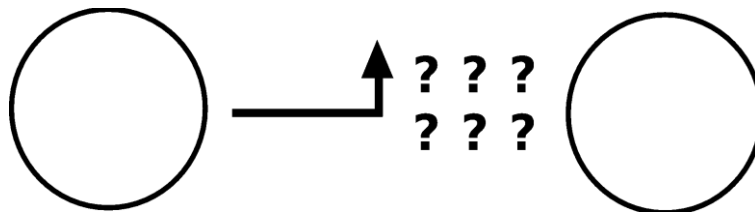
THE LAWS OF MASSAGE THERAPY

**Everything is connected.
Shortened muscle tissue can do no work.
Bones go where muscle put them.
Bones stay where muscles keep them.
The soft tissues of the body respond to touch.**

ENERGETICS OF TOUCH

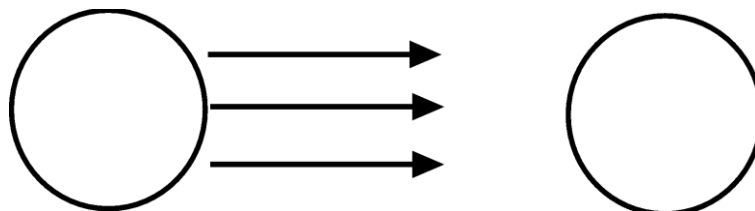
Here are 5 types of energetic touch, which are often experienced during bodywork sessions. Some are more desirable than others!

Absence



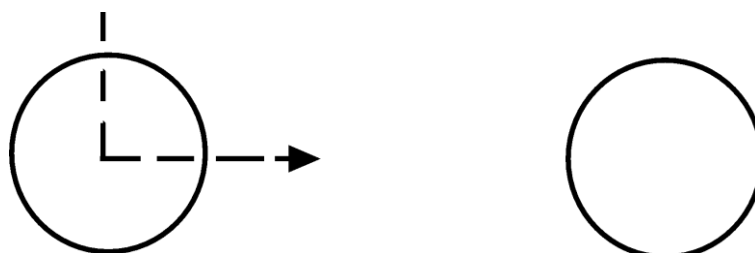
You are in a different world - your partner feels ignored, diminished and cannot be "in touch" with you or themselves - probably is left wondering where you are and what they are doing there!

Streaming



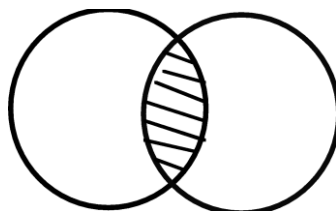
Pouring your energy into another person. The intention may come from a desire to help, almost an excess of caring. Quite common in massage! Result - quick burn out as you deplete your own energy. Can also be overwhelming for your partner. Practitioners may need to check where they are coming from - consider their own neediness and egos. We all stream at sometimes - can you catch yourself doing it?

Channelling



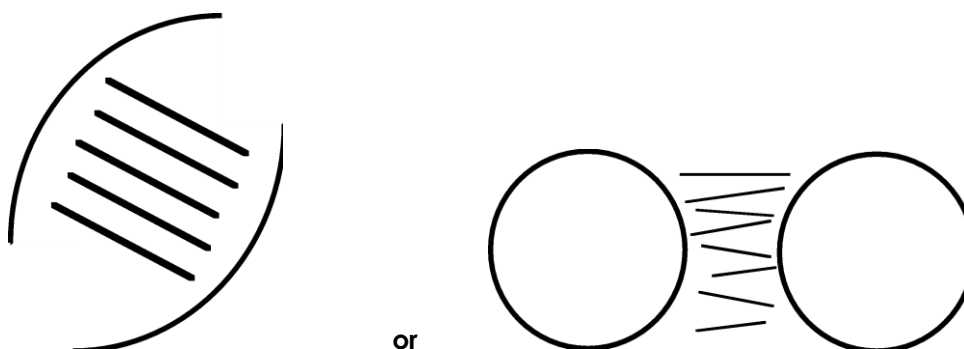
Allowing energy to come through from a different source - a clear, clean engagement. No overwhelming. Practitioner needs to "step aside" to allow it to come through, so a less personally engaged form of contact. Good boundaries.

Merging



Crossing boundaries. Inappropriate - but can also be very delicious and enjoyable! Lovers tend to merge for example.

Interface or 50/50



Meet where the boundaries meet. I know where I finish and you begin - I respect who you are and you respect who I am. The connection, the meeting is the energy. No pouring in of energy from me or you, nor a draining away or taking of energy. Clear boundaries so each person can feel comfortable. No one person owns the session - it is a working together to benefit the client and look after the practitioner. There is a sense of mutuality. This has all the benefits of the others - compassionate, clear boundaries and highly enjoyable. The sheer joy of being met through touch!

The interface or 50/50 touch is the most recommended - but don't give yourself a hard time if you slip away. Do try to observe, if you can, which of the dynamics you are in - and try to bring yourself back to the 50/50 place.

A note about intention: When you massage, your intention is conveyed, either consciously or unconsciously. If your intention is "just to do a bit of massage" and not care too much - or if you are distracted by other thoughts, then the massage will be affected. There will be little attention and contact. If your intention is to "really get stuck in there and solve this person's problems" this can feel intrusive and be overwhelming - as well as being painful! If your intention is to make the other person think you are a great massage practitioner, then you will not be present with them.

We recommend "just allowing" or "just being". A non-judgmental touch and contact that has equal respect and energy exchange.

HOLISTIC PRACTICE and THE BIO-PSYCHO-SOCIAL (BPS) MODEL

Holistic Practice

The giving and receiving of nurturing touch is a fundamental human need.

For this to be as supportive as possible a holistic approach is taken; But what is holistic?

In simple terms, we believe being a holistic practitioner means you bring your whole self – experiences, knowledge, insight, attention – to the other person in order to help them explore how their whole-self impacts their body and wellbeing.

As such it should take into account the physical and emotional impacts and demands, from both past and present life experience. When this comes together effectively it can release stuck patterns and lead to powerful changes in energy.

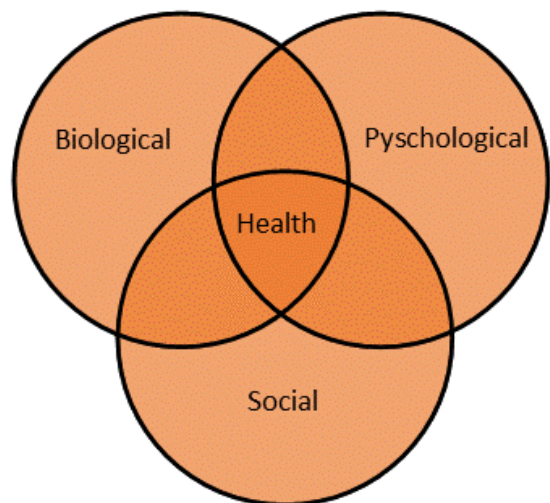
For a detailed explanation of holistic massage practice please read from p.13 onwards.

The Biopsychosocial (BPS) Model

One way of viewing our needs holistically is captured in the BPS (BioPsychoSocial) model developed by George Engel in 1977.

This model suggests we have biological needs, psychological needs and social needs.

In order to be well and healthy we need each of these to be met; as represented by the space in the centre of this diagram where the three circles overlap.



The Biopsychosocial (BPS) model

HISTORY OF MASSAGE

Massage has been used for healing throughout recorded history (and no doubt before that). There is a natural instinct to rub a sore spot or ache to make it better, and cultures all over the world have built upon this to develop varied styles of massage. Massage is so ancient that the derivation of the word is uncertain - it may have come from the ancient Greek word "massin" (to knead), or the Arabic "mass" or the Hebrew "mashesh" (to press softly).



The earliest written reference to massage is in the "NeiChing", the Yellow Emperor's Book of Medicine (written about 2700 BC in China), which describes many massage techniques and their use. Indian texts on Ayurvedic Medicine from about 1800 BC also describe massage. There are many references in the Old Testament of the Bible to the practice of people being "anointed with oil", particularly after a long journey. From about 500 BC, there are references to massage in medical texts from Egypt, Persia and Japan.

In Eastern systems of massage, the emphasis is on the idea of

balancing energy in the body. Acupressure massage developed in China, based on the acupuncture energy meridians and points. It is often used in combination with other traditional systems such as "Anmo" (pressing and rubbing) and "Tuina" (pushing and pulling). In Japan "Amma" massage of pressing, rubbing, wringing and stretches was traditionally practised by blind practitioners. Shiatsu combines this with pressure techniques on acupuncture points. Thai massage also combines pressure, rubbing and stretches with techniques that work on the energy lines of the body.

In addition to its use by skilled professionals, massage has been used within families throughout Asia and Africa, particularly by mothers massaging babies, and head massage is an automatic part of a visit to the barber or hairdresser throughout much of North Africa and Asia. Massage also developed independently in other parts of the world. Many of the early European visitors to Pacific islands described the use of massage (such as the Hawaiian "Lomilomi"); Captain James Cook, on his third Pacific voyage in the late eighteenth century, had massage ("romee") in Tahiti to relieve sciatic pain.

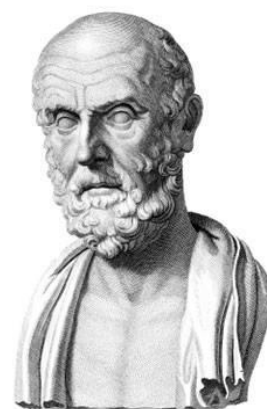
In the West, massage has often been used in tandem with exercise, quite commonly as a branch of medicine, and has therefore been influenced by developments in the knowledge of anatomy and physiology. In the fifth century BC, Hippocrates, the "father of medicine" preached the benefits of massage saying, "the physician must be experienced in many things, but assuredly in rubbing". By then gymnasia were established in many Greek cities, and the anointing of athletes with oils and powders was a common practice in the popular Games. In earlier times, Homer

described in "The Odyssey" (about 1000 BC) how the war weary heroes were rested and replenished by the use of massage.

Thus two uses of massage - as a method of relieving stiffness, soreness and tightness in muscles, and as a treatment for particular problems - were well established in classical Greece, and were further developed in Roman times. The Roman physician Celsus (25 BC - 50 AD) wrote that



that
"a



paralysed limb is strengthened by rubbing". Julius Caesar was "pinched" daily to relieve neuralgia. Galen, a Roman physician (AD 131-201) promoted its use in the preparation of gladiators for combat and in the treatment of injuries.

Following the end of the Roman Empire in the fifth century, the Arabs sustained and continued to develop the knowledge and teachings of the classical world. Avicenna, a tenth century philosopher and physician, wrote that the object of massage was "to disperse the effete matters found in the muscles and not expelled by exercise". The Arabs also carried on the tradition of massage being done at the Public Baths - which continues to the present day in the "Hammams", the traditional Baths which operate in North Africa, the Eastern Mediterranean (e.g. Turkish Baths) and across into Pakistan and neighbouring parts of Asia.

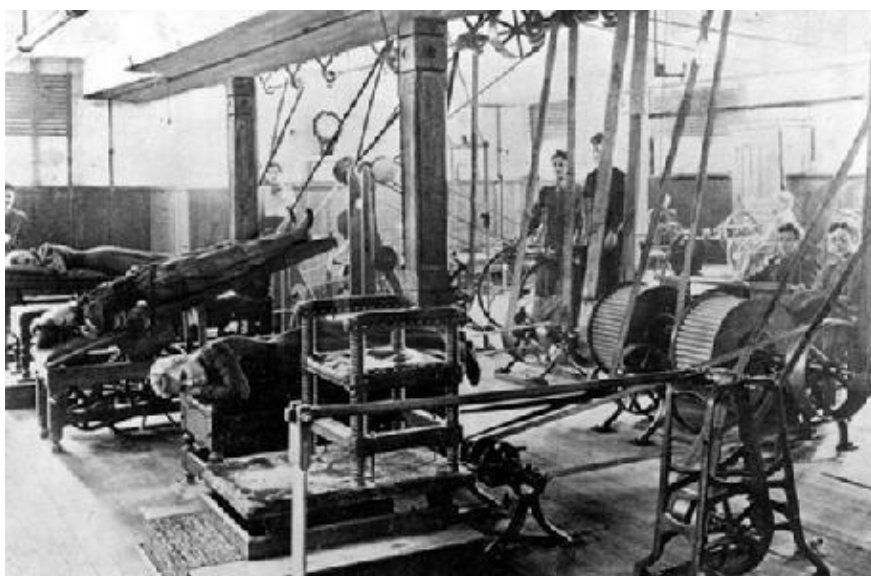
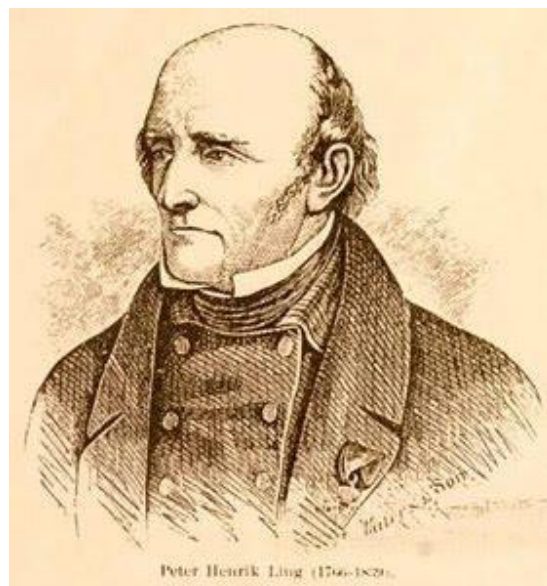


Classical medical knowledge re-entered Europe from the Arab world during the Renaissance (approximately 1450 - 1600), firstly in the new commercial centres in Italy where medical schools were established, and then spreading to other European cities of rising prosperity. One of the first books from the Gutenberg press was "De Medicina" by the Roman Celsus (25 BC - 50 AD), which emphasised the importance of rubbing, exercise and anointing.

During the sixteenth century, the French doctor Ambroise Pare (1517-1590), one of the founders of modern surgery, used massage, particularly friction massage, in the treatment of stiff and injured joints. His ideas were passed on to other French and German physicians. However massage began to have a less happy relationship with mainstream medicine, as the latter developed further away from being a primarily hands-on skill.

"Swedish Massage", which forms the basis for European styles of massage, is so called because it was first codified by a Swede, Pehr Henrik Ling (1776-1839) as one component of a system of gymnastics. From the early nineteenth century, when he began teaching in Stockholm, his massage system began to be practised on its own, and spread throughout Europe.

Just prior to Ling's death, one of his pupils established a clinic in St Petersburg; these techniques form the basis of Russian Medical Massage, which is widespread in the former Communist countries of Eastern Europe. In the 1840's, Dr Mathias Roth, another student of Ling, introduced it to Britain, and wrote the first book in English on Swedish Movements and Massage in 1850. Two of his students, the American brothers Charles Taylor and George R Taylor MD, established it in the US in 1856 and, over the next thirty years, published extensively both about Ling's system and their own work with it. By the 1880's, there was a growing popularity for massage throughout Europe and North America, and considerable literature on the subject.



Queen Victoria had successful treatments for rheumatic pains, which gave considerable publicity and prestige to the Swedish Massage Cure. The first formal organisation of massage practitioners in the UK was formed, in 1894, by women with nursing backgrounds. It was called The Society of Trained Masseuses. They continued to practice massage in medical settings, becoming the Chartered Society of Physiotherapy in 1943. This was state registered in 1966,

from which time they have, in fact, used massage less and less in their work. However the growing popularity of massage outside the medical setting has led to a renewed interest by a section of the physiotherapy profession.

Sports massage has developed into a well-established and highly specialised field, covering pre and post event massages, and training to deal with sports injuries. Massage has continued meantime in areas in which it was taught and applied very much as a routine - the gym/sauna "rubdown" and in the growing field of beauty therapy (as well as in "massage parlours", an unfortunate aspect of the lack of recognised national standards and registration of massage practitioners).

In recent decades, many interwoven factors have contributed to a growing public interest in massage – the fashion for fitness (in part, through the need to balance sedentary working lives); growing awareness of stress as a health/illness factor; a desire to receive personal treatment where appropriate (rather than be plugged into a machine); an interest in health maintenance that has seen such a growth in "complementary therapies"; the re-emergence of traditional Western and Eastern approaches; the increasing availability of approaches developed in other parts of the shrinking "global village", and the consequent development of "cross fertilised" hybrids; and the

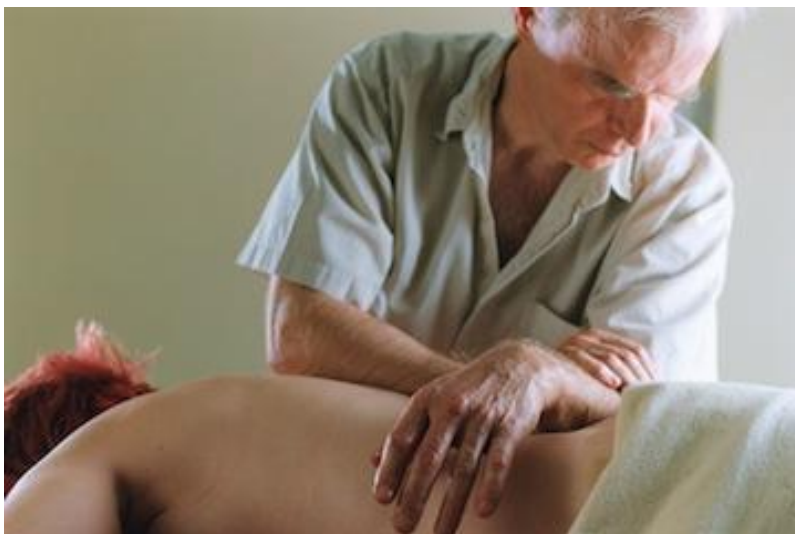
influence of physically based personal development disciplines (ranging from the purely physical to the spiritual - such as Yoga, Tai Chi and Eastern Martial Arts).



These have served not only to bring massage (of all sorts) into mainstream awareness; but have expanded the scope for massage to be seen as a meeting point of these and many other disciplines. In recent years, people have turned to massage not just for general physical relaxation and to release the muscle tension after a "workout", but also for its relevance to stress management as an adjunct to or even an essential part of counselling, psychotherapy, and personal/professional development; as "touch communication" to enhance partner, family or social relationships; and as an aid to comfort people in ill health, nurture and replenish them in recovery. One of the important avenues of

acceptance of massage has been in hospices, where the quality of care is important.

Massage training has developed which is geared towards the development of a widely skilled and flexible practitioner, who can adapt to a clientele in varied states of health and physical fitness, with a range of builds and lifestyles, and needing different sorts of treatments depending on the reasons for their tension and the events occurring in their lives which need to be taken into account.



Simultaneously there has been a growing belief amongst many professionals that the practitioner's personal development needs to be an essential (and continuing) component of their training and work. This has been fuelled by the fact that it is standard practice in many of the eastern massage systems now established in this country (such as Shiatsu and Thai massage), in other body based disciplines (such as the teaching of Yoga, Tai Chi, the Martial Arts, the Alexander Technique and the Feldenkrais Method) and also by this development in professions such as Counselling and Psychotherapy.

Although, in some parts of Europe and most of North America there is a very high standard of training for massage practitioners, it is legally possible in Britain to set oneself up as a massage practitioner without having done any training at all. However, to work in a health centre or medical setting one does need to have done training which allows you to join an organisation with a code of ethics and disciplinary procedures and to take out professional indemnity insurance - as forms of public protection - so standards are thus being informally established. Unfortunately short trainings that merely teach massage routines can give these credentials.

The Massage Training Institute was established to bring together training courses that incorporate the developments described above. MTI is an active member of the General Council for Massage Therapy through which it has had a large influence on the National Occupational Standards for Massage in the UK. MTI also promotes continuing professional development (which has become a requirement amongst most professions) to maintain the standards of practitioners and works with the Complementary and Natural healthcare Council (CNHC) to develop standards and procedures for the voluntary regulation of massage therapy in the UK.

HOLISTIC MASSAGE: WHAT IS IT?

On Page Five we saw the 4 principles of massage and the Massage Mandala.



Holistic Massage builds on these principles. It is a creative process of touch and response between practitioner and client. The 3 key elements to this "wholeness" are:

1. Whole client – physical, mental, emotional, spiritual needs
2. Whole range of techniques, used as appropriate in each situation
3. Whole practitioner, who stays present and focused, drawing on experience and giving good attention. Hence massage is a personal development process not just a collection of techniques

These ideas are explored further in the following 2 articles, written by Andy Fagg and published in the November 2002 issue of "Massage World" magazine.

Introduction

Many massage therapists describe their work as "holistic massage". Yet this term is often used in a vague and woolly way, which can prove damaging to the reputation of

massage therapy as a whole. Even the constitution of the Massage Training Institute (MTI) blandly defines holistic massage as "nurturing touch involving the whole person". Other sources talk of "holistic massage affecting all levels, including physical, mental, emotional and spiritual".

It is difficult to take exception to these worthy phrases - but what do they actually mean? As a client looking for a "holistic massage", how can I be sure that I will get the massage I want and need, both in terms of the quality of the experience and the range of techniques used? As a practitioner, how can I be sure I will attract the clients I want to work with? We all need to understand what we mean here.

I believe the term "holistic massage" conceals a rich complexity of work. Many massage therapists and teachers work in this manner, upholding a long tradition of high quality and sensitive touch therapy. I seek here to fill out this picture of what holistic massage is, both in a historical and present day context. I hope this will provoke a debate in the massage community. Only by clarifying what it is we do can we stand proudly for the standards of that work.

What is the “Whole” in “Holistic”?

I like the word holistic, although recognise that many people object to its “holiness”; indeed, I know some practitioners who insist in spelling the word “wholistic”. To my mind, the significance of the word “whole” in this context is that I not only work with the “whole” client but also I bring the “whole” of myself to the massage situation.

Massage in essence is about sensitive communication through the medium of touch. At the moment of placing my hand on a client's body, a range of physiological responses can occur, affecting the skin, the sensory nerve receptors, the muscle tissue, the circulation of blood and lymph, the ease of movement of joints, the digestion and so on. My skill as a holistic massage therapist, varying the depth, speed and intention involved in the touch, helps to determine which response occurs.



Yet there is great deal more than this. Our emotions are body felt sensations. Consider when you have experienced familiar feelings such as anger, fear, shame and joy. Each of these is fundamentally a physical response and experience as result of the situation you were in. When I touch your body, I am literally in touch with your feelings. Also, our tissues embody our conscious and unconscious belief systems about ourselves. If you believe yourself to be a confident, outgoing person, you will carry yourself in a certain way, your muscles will develop particular patterns of tension and relaxation and you will present a particular appearance to others. If you believe yourself to be insignificant and unimportant, the posture and muscle patterning will appear very different. Whatever your self-belief, when as a holistic massage therapist I touch you, I am literally touching your view of yourself and the feelings that help to maintain that view. Of course, that view is likely to be the product of all you have experienced to date - so that when I touch you, I am in touch not only with who you are now but also with all of your personal history to that moment.

In that moment of touch, not only are all your physical and emotional responses present, but so are mine. I cannot help but bring to the massage situation my physical symptoms, my feelings and experiences and my personal history. As a holistic massage therapist, my professionalism means that I will take care of myself elsewhere, but also that I may draw on my own history as appropriate in order to assist your individual process. It means that I may develop an expertise in working with particular clients because their experiences and needs relate to my own. So the range of possible responses in a particular session is enormous, bringing together the rich complexity of who you are, who I am and how we connect through the medium of touch.

As human beings, we are physical entities. Part of the deal of the human condition is that each of us has a body! Yet we have a culture and generations of conditioning that try to marginalise the body, teaching us to be ashamed of its size, shape and functions. Many of us are not properly “embodied”. We have been taught by families, advertising media, partners and our own inner critics that our bodies are not good enough. The role of the holistic massage therapist is both

radical yet simple, namely enabling people to live fully in their bodies. That's it! My work in essence is as simple yet profound as helping others to celebrate their physicality.



Historical/Cultural Considerations

Our approach to holistic massage today can be seen as a natural evolution from different massage traditions in both eastern and western cultures, over many years. Specific influences from the 20th century include:

- The development of Swedish Massage by Heinrich Ling;
- The growth of the personal development and human potential movement. In particular, the meditative style of massage developed at the Esalen Institute in California is often seen as the birthplace of present-day holistic massage;
- A growing awareness of stress as a major factor in health and illness;
- The growth in complementary therapies generally;
- The influence of physically based personal development disciplines such as yoga, Tai Chi and martial arts;
- Increasing demands for massage therapists to adapt to a clientele in varied states of health, physical fitness and emotional stability;
- The growing importance of practitioner self-awareness as an integral part of the massage, drawing here on therapeutic models such as counselling and psychotherapy.

The second of these articles explores how we might proceed to developing holistic massage techniques and approaches.

HOLISTIC MASSAGE: HOW TO DO IT

Part 2 of the series from "Massage World", published in December 2002/January 2003

Process not Routine

Holistic massage should be seen as a nurturing process of touch and response. The key here is to adapt the treatment to each client's unique needs, physical characteristics and personality. I often explain that I massage people, not bodies - that I do a massage "with" someone, rather than doing it "to" them. For example, I will adopt a very different approach to a client who approaches me in order to work through the trauma of a history of sexual abuse to one who simply wants her stiff shoulders eased after spending too long in front of the computer screen.



As a holistic massage therapist, I engage with each client, assessing his/her needs and including physical, mental and emotional factors. I then make an appropriate selection from a wide repertoire of possible techniques, customizing the treatment to meet those needs at that particular time. This process is creative, sometimes unexpected and does not follow standard routines. I need to be guided by principles of sensitivity, awareness, knowledge and professionalism.

In many ways, holistic massage is about setting an atmosphere, creating an energy, being in a particular "vibe". The way in which the massage is approached is as important as the techniques themselves. Of course, techniques matter too and may be drawn from a wide area. For instance, holistic massage may include:

- Classical Swedish techniques such as effleurage; petrissage, kneading, friction and wringing;
- Percussive techniques such as hacking, cupping, pummelling, plucking and brushing;
- Gentle hand holds, drawing on healing traditions and an awareness of the human energy field. This may extend to working off the physical body in the human aura;
- Deeper pressure techniques; such as neuromuscular technique (NMT);
- Passive joint mobilizations and stretches, such as muscle energy technique (MET);
- Appropriate techniques from related bodywork traditions such as cranio-sacral therapy and shiatsu.

An important feature of this approach is the ability to "track through" from a theoretical knowledge and understanding of anatomy, physiology and pathology to the practical realities of each client's symptoms and responses - and how therefore to adapt one's massage. In other words, the really skilful holistic massage therapist will understand the body's structure, function and malfunction, know how to assess the effects on a particular client and the consequent links to massage technique.

Role and Qualities of the Practitioner

The holistic massage practitioner is a facilitator through touch, working with and guided by the client. To quote Deane Juhan (ref 1):

"Touching hands are...like flashlights in a darkened room. The medicine they administer is self-awareness. And for many of our painful conditions, this is the aid most urgently needed."

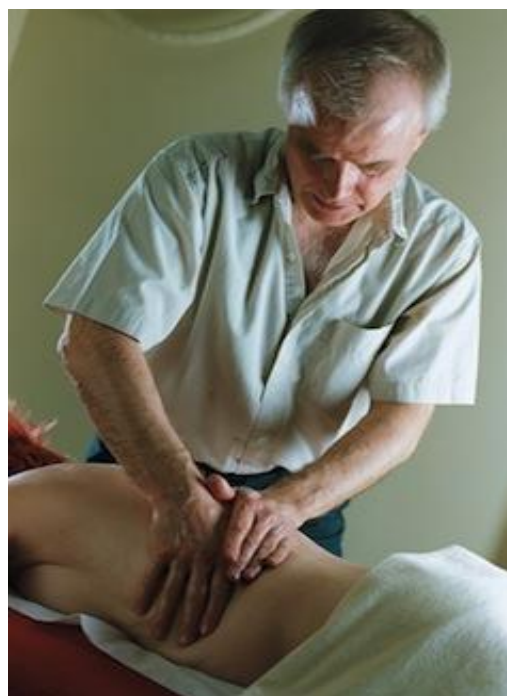
This contrasts with other massage approaches, which may seek to "sort out" the client, regarding symptoms as problems to be "fixed". Such a reductionist approach treats the body not the person, offering massage as a biomechanical intervention within a medical paradigm that is becoming

increasingly outmoded. For instance, the growing scientific evidence for mind-body medicine or psychoneuroimmunology (ref 2) supports the importance of relaxation, stress reduction and emotional factors as fundamental to understanding and healing dis-ease.

In addition to technical skills, the role of the holistic massage practitioner must require self-awareness, since depth of contact with oneself is a prerequisite for depth in the therapeutic relationship. This self-awareness might be physical, through exercise, dance, yoga or tai chi; emotional through counselling or psychotherapy; or spiritual through meditation practice. What matters is that holistic practitioners are committed to working on their personal process, in order to enhance their work with clients. In the Massage Training Institute all practitioners must maintain continuing professional development (CPD) through supervision and further training courses and cannot renew their annual registration without this.

Attention to personal as well as professional development by the practitioner means that during sessions s/he can be more present and grounded. Quality of touch becomes the interface at which the practitioner and client meet. There can be a deeper level of communication beyond technique, offering clients opportunities for change through greater awareness. Also, through effective body use whilst massaging the holistic massage practitioner both looks after his/her own physical wellbeing and also brings into the session qualities of grace, fluidity and rhythm.

Massage without awareness!!



Outcomes

Holistic massage can lead to a variety of outcomes; depending on the needs of the individual client (Ref 2). They can include:

- Physical improvements such as relaxing tight muscles, improvements to circulation, nervous function and joint mobility; this can ease many short and long term ailments, such as back pain, arthritis and insomnia.
- Reducing stress, one of the main causes of disease in Western society. As well as addressing stress factors, holistic massage can facilitate the switch between sympathetic and parasympathetic nervous systems, hence allowing both body and mind valuable recuperation time (refs 3,4,5).
- Emotionally, massage can provide the caring non-intrusive touch clients have often longed for; this can soothe the busy mind, reduce stress and enhance self-esteem.

- At a deeper level still, massage can release the personal history stored in body tissues; this can lead to powerful changes in our energy and provide a vital and chemical ingredient in each person's process of growth.

Of course the key here is to work with each client and the agenda they bring. Some simply wish to have their tight shoulders relaxed, whilst others might use massage for much deeper personal growth.

Conclusions

The holistic approach to massage therapy can touch an individual's whole being - physical, mental and emotional. It holds the possibility of reintegration, is person centred and is guided by principles of sensitivity, awareness and quality of touch. These enable the holistic massage therapist to work with clients, applying techniques and skills in an appropriate manner. At an organisational level, the MTI has a well developed, thoroughly thought through approach to holistic massage.



Andy Fagg was Chairman of the Massage Training Institute for 14 years and Director from 2008-2014, and ran the Bristol College of Massage and Bodywork for over three decades, and still has a degree of involvement to this day. Since qualifying in massage in 1984, his approach to bodywork has been influenced by such disciplines as T'ai Chi, meditation, dance, Zero Balancing and Process Work. He has been in private practice since 1986 and has offered professional trainings since 1989. He worked at the Bristol Cancer Help Centre and has also taught at centres in Spain and Greece.

STARTING TO MASSAGE

PRACTICAL MATTERS: HYGIENE & CLIENT COMFORT

All of this is common sense and probably obvious to all - but is documented anyway:

1. Maintaining a clean place of work

Conditions such as Athletes Foot (TineaPedis), fungal infections of the nail and verruca (a flat wart) are examples of infections and viruses that can easily cross between clients, unless care is taken (see contra-indications and cautions). These situations are examined in more detail when you study pathology and how to adapt your work accordingly. The following steps are required in order to minimise the possibility of cross infection:

- Wash hands before and after each treatment in soap and water. Also useful to end with cold water - both for hygiene reasons and also as a ritual to yourself that you have ended the session and are moving on to work with another person.
- Use disposable couch roll to cover massage table (on top of cotton cover) OR change the covers/towels after each client. The paper couch roll will minimise your laundry bill!
- All disposable material should be disposed of immediately after use.
- Read the consultation card just prior to the client's arrival to refresh your memory. Try to record details of the treatment immediately the client leaves. Again, issues of cross-infection must be recorded.
- During the session, do not work on infected areas - see contra-indications/cautions in Workshop One resources.
- Make sure the working area is clean and surroundings pleasant. Use disinfectant on tile or vinyl floor and other surfaces (including the couch) daily. If the client has an infection on the feet, you could ask them to put their socks on before getting off the table. Most people understand this and want to do so anyway.

2. Ensuring Personal Hygiene - again you are going to say this is obvious:

- Prevent body odour and smelly breath - imagine what it is like to be massaged by someone smelling of garlic or last night's curry. Also don't wear perfumes/aftershaves - remain neutral - some clients are allergic, others will find it distracting, others may have some memory attached to it, which could completely change the direction of the session; others will simply find it invasive.
- Clean clothes and underwear daily (at least). Also make sure your clothes do not drag on your client when working, so don't wear baggy t-shirts. Also, be mindful of your own appearance - fashions such as exposed navels or visible thongs are not the most appropriate for a massage professional!
- Keep hair clean, tidy and tied back when treating clients. Make sure it does not fall onto your face when your head is bent as this can obscure the client's view; most people would prefer to see their therapist's face when talking to her/him.
- Keep nails short and, like the whole hand, clean.
- Wash hands before and after each treatment - as previously mentioned, this is also symbolic - the end of your time with this client.
- Cover all open wounds on hands and lower arms.
- Low shoes or none at all - think about what is best for your posture and body, and therefore for the person receiving the massage.
- Take care of yourself before you attempt to take care of others.



CLIENT POSITION AND USE OF DRAPES

Ensure that your client is as comfortable as possible prior to the start of their massage - so ask them!!

There are variations on the use of covers on a massage table, experiment with whatever feels comfortable to you - provided that your client is sufficiently covered and respected. In BCMB, we tend to use single bed sheets - cotton preferably. These can more easily be tucked in to cover "nooks and crannies" e.g. between the client's legs. Suggestions:

When prone:

- Cover with one single bed sheet, folded in half so the width of the sheet covers the length of the client's body (double thickness!).
- Brushed cotton sheets are comfortable and tend not to slip off; Debenhams sells nice ones!
- A hand towel covering feet, widthways.
- Offer the use of a face hole, cradle or pillow; use a "face favour" for comfort.
- Prop (bolster or pillow) under ankles to support the lower back.
- Some women also prefer a pillow or cushion under their breasts or shoulders for support – especially if they have had a mastectomy.
- If there is a lower back problem, some people want a pillow under hips.
- When working on buttocks, place the drape in a diagonal position, so that only side is exposed at a time. Keep the cleft of the buttocks covered at all times.



When supine:

- Sheets as above, with the option of a further hand towel to cover chest area whilst working on abdomen - do offer this, even if you imagine the client (male or female) may be OK without.
- Prop under knees to support lower back
- Offer a folded towel for the head - you may need access to the back of the neck, so don't use a big pillow.
- Ensure the genital area is covered at all times; as with prone, use the drape diagonally to provide access when working on the hips. This applies whether the client has removed underwear or not.

When turning over on the table:

- Hold up the sheet such that there is a screen between you and the client who is free to turn over. Ask the client to start turning and then, in the moment, adjust your screen positioning so that the client feels safe and not exposed;
- Modifications may be needed depending on the needs and position of client, e.g. For Side lying work or sitting in a chair or wheelchair.



MASSAGE STROKES - TERMINOLOGY

Giving names to particular strokes or types of strokes is one way to define the movement building blocks of massage. In doing so, it needs to be kept in mind that the description of a 'stroke' is the description of an abstract shape in relation to an imagined body - it is given precise shape and meaning by working on a real body (adapting to the client's build, needs and comfort level) via the practitioner's ability to 'listen' with their hands (i.e. to monitor and adapt to the client's responses - verbal and nonverbal, including the moment by moment reactions at the tissue level). And a good massage is, of course, more than just a set routine of strokes, no matter how fluidly performed.

There are variations on aspects of the terminology of Swedish Massage, and even with the agreed categories, many strokes would not fit neatly into these groupings. It is therefore most useful to define groups of strokes in terms of the stage of the massage they belong to and how they are applied to the tissues. The following notes describe the different stages that a sensitive massage tends to go through – it is NOT a strict 'sequence' but rather an observation of what happens in practice. Distinctions between these 'stages' are not clear-cut, and skilled practitioners can usefully break the 'rules'.

HOLDS

Holistic massage usually begins and ends with holds. They can also be used intermittently throughout the massage (contact holds and energy holds), mostly done with the whole hand. (Holds are outside of the 'classic' Swedish massage terminology and categories).



STROKING

The practitioner then begins stroking the tissues - the 'effleurage' stage - 'saying hello' to the tissues and getting a feel for them by putting the oil on and warming them. This stage engages firstly with the skin, then with superficial blood flow and lymph drainage and, with more pressure, can be used for 'draining' or 'milking' limbs and to begin applying pressure to the superficial muscles. These strokes are also used later as linking strokes – in between other strokes, and also between parts of the body - and finishing strokes - both for specific areas and for the whole body.

These can all be varied: the pace, speed and rhythm of application, the pressure applied (e.g. between very light 'feathering' with fingertips to deep pressure effleurage) and the part of your hand that is used. The massage therapist can simultaneously have different things happening with different parts of the hand or with each hand. They can stroke (with short or long strokes, either separate or overlapping) in one direction only or 'flow' forward and back (like waves lapping at the edge of the sea). They can follow the contours of the client's body or stroke more specifically along or across muscles.

MOVING THE TISSUES AROUND



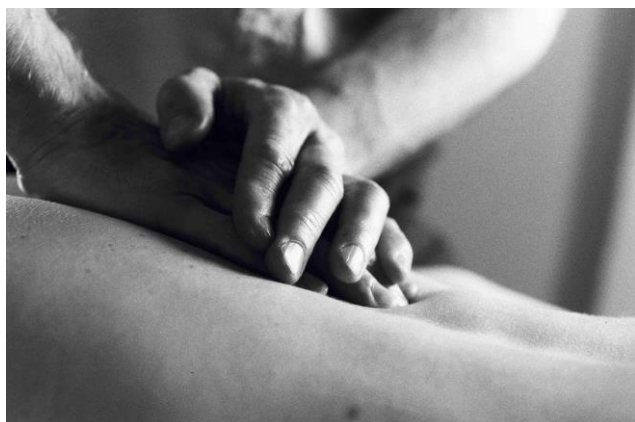
Deeper, penetrating effleurage strokes are often used to lead into the next stage, in which the practitioner begins moving the tissue around, working through the skin to get to the muscles underneath. The terminology for this stage is contentious, but 'petrissage' is the most common way of defining it. This covers various ways of taking hold of the tissue to move it around - lifting and stretching, squeezing or pinching, kneading (as one would knead bread), wringing or shaking; skin rolling is also usually included. Most of these strokes involve grasping the tissue with each hand, primarily with thumb and fingers, perhaps also involving the palm (depending on the size of the area being tackled), or, for large areas, using both hands simultaneously to squeeze or push the tissue between them.

COMPRESSION STROKES

Many authorities distinguish a third stage of working - the compression strokes, often called 'friction techniques', which are the deepest in the 'classical' Swedish Massage repertoire - where the practitioner digs into the muscles or presses them against the underlying bones.



(However, as there is no clear boundary between the previous stage and this one, many people group both of them together under the Petrissage heading). The pressure can be static or, if moving pressure is applied, along or across fibres. The heel of the hand (best applied with the other hand on top, or the forearm, are often used initially to apply some general pressure and to gauge the client's responses. If required, the thumbs, fingertips, knuckles or elbow will give a sharper, deeper, or more specific focus.



VIBRATION & PERCUSSION

Another stage (if appropriate) is 'percussion' - strokes with intermittent contact- and 'vibration' - those with continuous contact.

'Percussion' includes all the classic 'striking' strokes - tapping (with fingertips), cupping (with cupped hands), patting (with the front of the fingers or the open hand), hacking (with the side of the little finger), and pummelling'/beating/pounding with the side the fist or the flat surface of the knuckles. Other parts of the hands can also be used (e.g. the back of the hands).

There should always be a transition in and out percussion. Strokes should slowly evolve so there is a break in contact, intermittent massage, before entering full percussion and the same process reversed when finishing. This prevents the sudden shock to the client's body when percussion is introduced. Good percussion is done with loose wrists and a 'bouncy' action, as if the client's body were made of rubber or elastic.

Very light percussion strokes can sometimes be quite relaxing, stronger percussion is more commonly stimulating to the skin, blood circulation and muscles, while the heaviest (which emphasise compression of muscles) can encourage specific muscle release. Because you can get your hands around the limbs, percussion techniques here can easily also incorporate shaking the muscles (scaled down elements of which can be applied on the back). They include grabbing (between thumb and fingertips, or with the whole hand), and flicking or brushing (with the fingers).



Depending on your intentions - e.g. to gently loosen the tissues or to stimulate them, and to move them in a general way or to apply focused pressure - you can vary aspects of percussion strokes such as the pressure and depth of application and the size of the area being covered.

Vibrations can also be done in a small or gentle way for release, or vigorously to energise the tissues. They can range from 'classic' vibration ('jelly wobbling' from side to side) on an area of the skin (using fingers for small areas or the flat hand for more spread effect) or with more pressure applied to get into muscles, to the simultaneous lifting and shaking out of large muscles (especially on the limbs - grabbed by fingers or the whole hand). Vibrations can also incorporate elements of the other categories (e.g. maintaining a 'jelly shake' while doing a sliding movement). Body rocking and the shaking out of limbs are often included in this category.

PASSIVE MOVEMENTS

These are a further category of techniques, which are coming into widespread use in the field of massage (although they're not part of the 'classical' Swedish Massage repertoire which only covers strokes that are applied directly to the muscles). They are done by moving bones (especially of the limbs) around joints (mobilisations) to encourage movement in the muscles, in order to emphasise and amplify the suppleness and flexibility gained in the muscles through the previous techniques. They can be 'pure' stretches, or include shaking or vibrating, or incorporate elements of some of the other types of strokes (e.g. simultaneous petrissage or compression strokes on the stretched muscles). This more sophisticated approach is very economical and efficient – and tends to be taught on the BCMB Advanced Workshop programme.

LOOKING AFTER YOURSELF

The BCMB course explores throughout the training how you can massage without getting exhausted. It is important to look after yourself and to find a balance between 'giving' and 'receiving', in order to stay healthy and be able to work optimally.

GENERAL SELF MAINTENANCE

Signs of feeling 'off-balance' can include a loss of resilience and perspective, an inability to cope, and a feeling that every massage is hard work. Associated physical symptoms can include backache, constant stiff shoulders, and permanently tense arms/hands. Eventually, over time this may lead to 'burn-out'.

Therefore, it makes good sense for the practitioner to take preventative measures to make their working life easier. What works, of course, varies from person to person, and also may vary from time to time for the same person. Thinking about what you do in the rest of your life in terms of self-maintenance also helps in terms of making suggestions to your clients - about handling stress and the demands in their lives.

For example:

- Make the working environment as pleasant and well functioning as possible.
- Set a realistic number of working hours per day.
- Allow enough preparation time each day, and 'wind down' time afterwards.
- Organise non-pressured time for rest and replenishment, including regular treats for yourself and holidays.
- Exercise regularly – choosing something you enjoy.
- Receive regular massages/bodywork.
- Eat well and get enough sleep.
- Have regular supervision or peer support.
- Keep a journal.
- Do things that nourish you, replenish you, give you energy and enjoyment and allow you to play/be frivolous and 'let off steam'.
- Maintain a 'freshness' and interest in the work via continuing professional development.
- Get involved in a relevant professional organization.
- Stay up-to-date with new developments in the field by reading professional journals, attending conferences, etc.

PREPARING FOR THE MASSAGE – PRACTITIONER SELF-PREPARATION

In addition to general preparation of the working environment, equipment, case notes, personal clothing and hygiene, there are some important mental and physical preparations the practitioner can do to bring themselves into an appropriate state or 'attitude', and to help them become focused and ready for the client. These can be done as part of a regular daily routine, or as and when needed (e.g. for a few minutes before seeing a client).

1. **Energising** techniques including: physical activity to raise the body's physical energy, and breathing techniques to raise inner energy.



2. **Calming/Relaxing** techniques including: gentle stretches, breathing exercises, relaxation exercises, meditation, Yoga, Tai Chi, and some martial arts exercises.
3. **Flexibility** can be maintained through stretching. Some movement systems also address dynamic posture and co-ordination - e.g. Yoga; Tai Chi; Pilates, some martial arts; the Alexander Technique; the Feldenkrais Method.
4. **Centring** techniques, especially those derived from Eastern trainings (Tai Chi, martial arts and Shiatsu) that focus on the Hara or Tan Tien (the body's power centre, located in the lower abdomen). Many of these systems also contain **Grounding** techniques - to feel one's legs and feet, their connection with the floor/ground, and the energy that can flow through them.
5. **Self Inventory** before the massage. Go through a short checklist to raise awareness of what you have to offer - the state of your physical and emotional energy, calmness, centring, grounding, and your own aches or areas needing caution or protection as you massage. This self-monitoring can continue during and after the massage also.

IN THE MASSAGE SITUATION

1. **Setting clear boundaries:** it is important to set clear boundaries. This will help practitioners look after themselves and avoid feeling drained by clients or by the work, either during the session or by demands made by clients before or after.

State the nature of your work clearly on your publicity and inform clients as necessary regarding treatment times, the method(s) used, reasonable expectations of outcomes and likely time needed to achieve those, amount and method of payment. Get an agreement from the client about what the present session will entail.

The practitioner needs to be aware of their time - giving clients a reasonable amount of time (on the phone or in person) to gain appropriate information, and if they remain uncertain about booking a session, suggesting to them that they think about it further and get in contact again if and when they're ready.

The practitioner also needs to have a clear finishing stage to the session. So once the massage treatment is complete, the session moves on to taking payment, making the next appointment (if appropriate) and making it clear that the session is finished.

2. **Massage is a two-way process:** have a clear perspective on what is realistic in a massage session. There are two people involved in the massage process, and the practitioner can only do their best to help the client, they cannot guarantee an outcome!

It is helpful to keep in mind the place of the massage - it is only one hour in the overall context of the client's life. The client's approach to life, the nature of their lifestyle, and the energy they are prepared to commit to relaxation/self help/dealing with their stresses will play a large part in how they respond to a massage and the possible outcomes of a session, as will their attitudes (often unconscious) and expectations - e.g. whether they expect to/are interested in being involved in the process, or whether they expect the practitioner to do all the work.

It is also useful to be aware that there are gradations, again often unconscious, in people's willingness to release - clients will often be able to 'go with' the process to a certain stage, and then no further (at least not without discussion, reassurance, and coaching).

Giving the client suggestions, advice and exercises will demonstrate their commitment to looking after themselves, to be involved in the process, and not expect the practitioner to do all the work. If they do care for themselves, they are more likely to be more responsive to what the practitioner does and possibly value it more

DURING THE TREATMENT

1. Beginning the massage – what the practitioner can do:

- a) Outline the treatment strategy to the client and get their agreement for it.
- b) Tell the client the sort of feedback that is required during the session (e.g. how the pressure is, if it starts getting cool; if the client feels uncomfortable); and then say how you will respond to the client's comments (adjusting the pressure; covering them with warm covers etc.).
- c) Clients may arrive tense and flustered, so to help them reach a more receptive state, try talking them through a brief relaxation/calming breath procedure when they first get on to the massage table.

2. During the massage – what the practitioner can do:

- a) Keep attention moving between the clients, the techniques being used, how the client is responding, and how the practitioner is in your own body, mind and emotions. At first the practitioner will have to keep shifting attention between these places of focus, and with practice, you'll develop the ability to monitor all of them simultaneously.
- b) Be aware of your own body use, so pay attention to your posture, how you are using your body, how your body feels (is there any discomfort or aches/pains), the pattern of breathing (are you holding your breath, breathing freely, or using your breath in coordination with the massage strokes), and note any growing discomforts, aches or pains.
- c) Some practitioners use images from meditation, yoga, martial arts or healing practices while doing massage, not only to energise themselves, but also to 'protect' themselves during the massage, and to 'cleanse' themselves afterwards.

3. After the massage – what the practitioner can do:

- a) Have a clear cut off point from each client. Then take time, if needed and you're able to do so, to sort through any remaining thoughts/feelings from the session or about the client, to disengage, re-centre and prepare for the next client.
- b) Washing hands after each session, as well as being good hygiene, can be a good cleansing ritual - to 'dissolve' the connection with that client and prepare for the next one.
- c) At the end of the day, it can be helpful to have some 'ritual' way of finishing off - cleaning up the space in preparation for the next day, filing papers and doing the book work can all form part of this. Many practitioners have further routines - e.g. sitting quietly for a few minutes and mentally processing the day/re-centring/meditating, a short walk, a soak in the bath.
- d) If, after a massage, the practitioner feels that they are left with uncomfortable feelings, energy and thoughts from the client, it's good to do something immediately to clear it. Shaking, vibrating, flicking it off, while visualising getting rid of this unwanted stuff can all be helpful.

If this process is not enough, or if it's persistent or happens regularly (especially with a particular client or a certain type of client), discussing it with someone who can help sort through the issues involved (e.g. colleagues, supervisor, support group) is usually really helpful.

DYNAMIC BODYUSE IN MASSAGE

By Andy Fagg & Darien Pritchard

Published in Positive Health Magazine Issue 40 (May 1999)

Introduction

Massage is about movement, both within the client but also on the part of the practitioner. Effective movement and bodyuse by the massage therapist can be a key to good treatment, both in terms of physical ease and creating appropriate atmosphere. In this article, we consider the elements, principles and practical ingredients of dynamic bodyuse as well as its benefits.

Importance of Bodyuse

Effective bodyuse pulls together many strands of the massage, including quality of touch, awareness of ourselves and the dynamic interchange possible between giver and receiver. There are 3 main aspects to this good bodyuse.

In mechanical terms, we have more effective leverage and pressure available but with the expenditure of less effort. What a relief it is not to have to be as strong as possible! Our hands can soften and strokes come alive through our own movement. We can thus feel, adjust and respond to the nuances of clients' bodies and their reactions. This can allow the massage to become a dialogue of sensation, reaction and response between our hands and our clients' tissues.

Also, good bodyuse enables us to embody within ourselves qualities that we wish to become the atmosphere of the session. Our physical alignment and fluidity and ease of movement are clear indicators of how at home we are within ourselves. We cannot create relaxation for our clients if we are stressing our own bodies in the process! We can foster healthy movement and flow within our clients' bodies modelled upon our own movement and flow at the massage table. This allows us to become a vehicle for whatever energy we believe that we work with. Effective bodyuse also allows us to focus our mental and emotional attention on the massage, expending less effort in 'doing to' our clients and allowing ourselves to 'be with' them far more.

Finally, effective bodyuse offers a valuable means of self-monitoring. As practitioners, we can trust our own bodies to give us feedback, both physical and energetic, when we lose our own centre and grounding. Our own comfort becomes a source of further information both for when we are working well and for when we are off track.

Poor Bodyuse

Two common extremes of **poor posture** are:

1. Stiff legs, no movement from lower body, massage conducted mainly with shoulders, arms and hands. The hands are often close to the practitioner's body. This approach exaggerates the attitude of 'doing to', is detached, hard, and mechanistic and leads to a quality of touch that can feel invasive, 'pokey' and impersonal. The practitioner will become tired quickly and will find it difficult to sustain a full day of treatment sessions.





2. Another extreme is the posture that crouches over the client with rounded back and excessive attention to detail. This approach can be 'over-caring', smothering and fussy. The quality of touch involved can still feel invasive, but with a sub-text of "please get better because I need you to". We sometimes call this 'tea-potting' – pouring oneself into the client! This practitioner will become depleted, probably suffering 'compassion fatigue'.

Both these approaches can lead to many of the common physical strains

and difficulties encountered by massage therapists, e.g. lower back pain, hunched shoulders leading to kyphosis, arthritic thumbs and repetitive strain conditions of wrists and forearms. The practitioner may well become disillusioned, cynical or burnt-out.

Good Bodyuse

Good movement is very important. It is possible to adopt apparently good static posture, which doesn't then translate into the process of massage at all. So don't just adopt the stance of the photographs! Try the exercises as well! The major ingredients of **good bodyuse** are as follows:



Weight on front foot and leaning into the stroke. Notice relaxed shoulders and alignment of body behind hands, from the feet upwards. The touch has both comfort and depth.



Sitting back in the pelvis, allows body weight behind a comfortable stretch. Again, notice alignment of body behind hands and bent knees.

1. Bending the knees and shifting the weight from foot to foot with a sense of sway, i.e. moving the whole body rather than standing still.
2. Relaxed shoulders, plenty of space between ears and tips of shoulders, so that the main power of the massage comes from the lower body. This can be explained mechanically in terms of the pelvis being the centre of gravity of the body or the most powerful muscle groups in the body being in the thighs, buttocks and abdominal wall. Or, in terms of energy, the belly is the tan-tien (or hara) and is seen in Chinese terms being the centre of the body's chi.
3. Maintaining alignment of hands and trunk whilst moving. This means keeping one's spine soft and long with the hands far enough in front of one's body to allow the transmission of lower body power through them. One exercise is to imagine a spotlight shining from the belly / hara / tan-tien, and then keeping one's hands in the spotlight during a massage.
4. Feet positioning. For long sweeping strokes up and down the body, it is best to keep the feet parallel to the table and the back foot at an angle of 45 degrees.
5. Keeping your body aligned behind the direction of the stroke. So if you shift to working transversely across the body, move your feet so that you are at right angles to the table.

By aligning the body according to these guidelines, practitioners will be using whole-body energy (chi) rather than just strength and will be centred within themselves, both energetically and mechanically. Good posture and movement will enhance the quality of touch. The feeling is respectful, caring and able to respond. There is also a clarity, a sense of who I am and who you are and therefore much more ability to give and take whilst maintaining a clear '50/50' contact.

Such an approach to massage provides more space for physical and emotional processing to take place. It's also more likely to be energising for practitioners, enabling them to perform several sessions within the day. The attitude generated within the treatment room is congruent with an invitation to open and explore oneself through touch.

The dynamic use of body provides important self-monitoring information that practitioners can continue to make use of throughout a series of sessions. For example, noticing which clients one feels uncomfortable with, physically or emotionally, may give some clues on the direction and shape of future treatments. It provides a form of work that offers effective use of physical strength that is both centring and grounding to give and receive. Such effective self-care means that we as practitioners model for our clients the experience that we are inviting them to step into. It also provides the space for our own growth as practitioners and a framework within which every session is seen as a fresh opportunity for exploration.

NB. Darien Pritchard went on to develop these ideas into his book:

“Dynamic Bodyuse for Effective, Strain-Free Massage” (2007 pub Lotus)

This comprehensive reference book provides everything you need to know about bodyuse when massaging clients in the prone and supine positions and you may buy it in the BCMB Bookshop.

THEORY & BOOKS

THE ROLE OF ANATOMY, PHYSIOLOGY AND PATHOLOGY IN MASSAGE

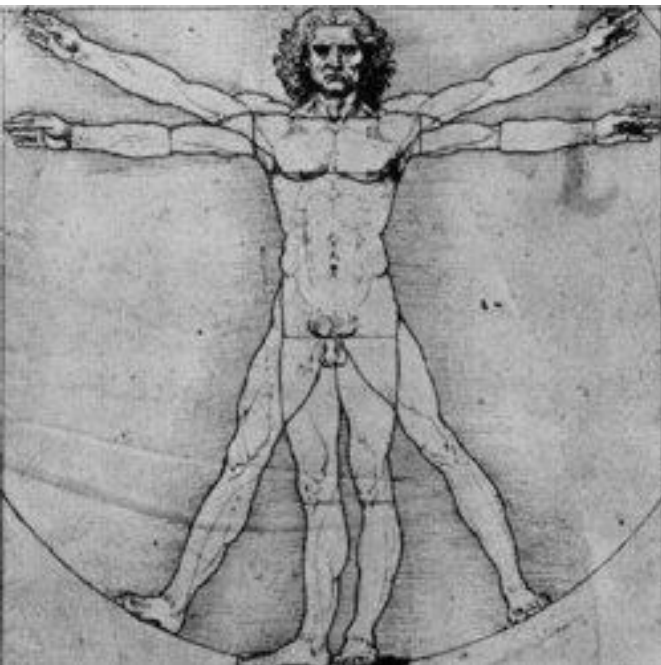
This sets out the MTI approach and offers teaching ideas. With thanks to MTI tutor Darien Pritchard.

Anatomy, physiology and pathology is an essential and fascinating element of Holistic Massage. A working knowledge and understanding of A, P and P goes hand-in-hand with the more intuitive and sensing aspects of massage. It provides a firm foundation for safe and competent professional massage practice.

DEFINITIONS

| | |
|-------------|---|
| Anatomy | is the study of the body's structures |
| Physiology | is the study of the chemical processes of the body |
| Pathology | is the study of body problems and diseases |
| Kinesiology | is the study of body movements (the actions of muscles at joints) |

APPROPRIATE KNOWLEDGE



The role of Anatomy, Physiology and Pathology (APP) knowledge in massage is crucial in determining guidelines on contra-indications, cautions to be exercised and parameters within which to work with a client.

In recent decades an upsurge of research on stress management has highlighted useful information that can be part of a practitioner's repertoire. Massage therapists can benefit from an understanding of the physiological dynamics of stress and relaxation. Helping the client to relax by teaching relaxation or at least creating a relaxed working atmosphere is an important component of most treatments. Professionals need to be able to explain to clients the body's responses to short-term and long-term stress.

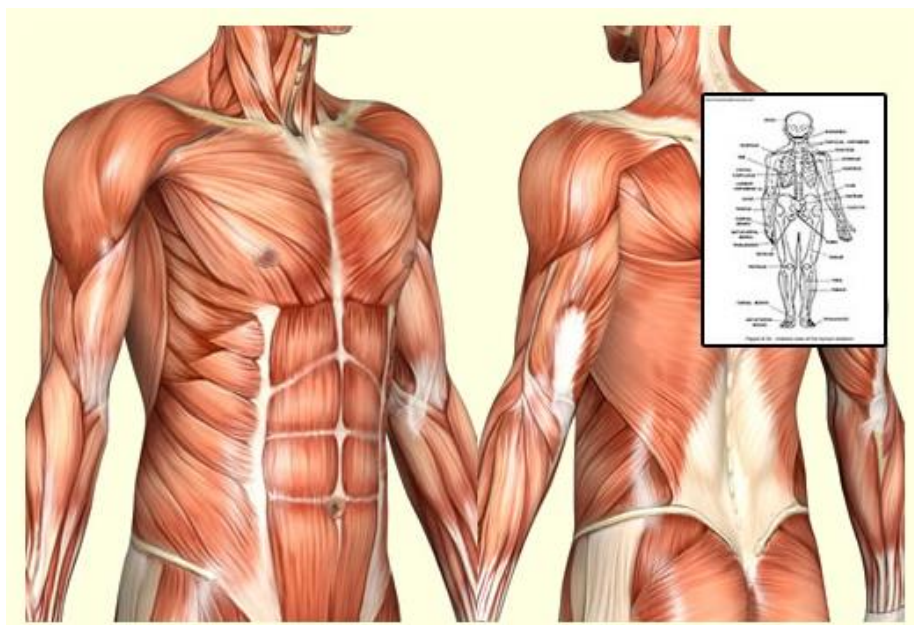
There has also been wide publicity and growing interest in massage, which means that practitioners are seeing clients with a wider range of conditions than in the past. Many people now seek out massage along with other treatments.

So it's important to have a grasp of the body's structure, functioning and common problems. **Massage practitioners don't diagnose medical conditions**, but if a client has already had a skilled medical diagnosis, a practitioner needs to be able to make use of this. Therefore we need to be familiar with the terminology of human biology, how the words are built up, how to look up medical books and make sense of relevant information - particularly what the likely effects on the relevant body tissues and areas will be.

This understanding will also lead into further questions about how the condition affects the client and to determine how it will shape the treatment session (e.g. if they have difficulty in lying down comfortably or areas of the body not to be touched), or to elicit 'safety' information (e.g. if the client is diabetic - is their blood sugar level presently steady and likely to remain so? What are the symptoms

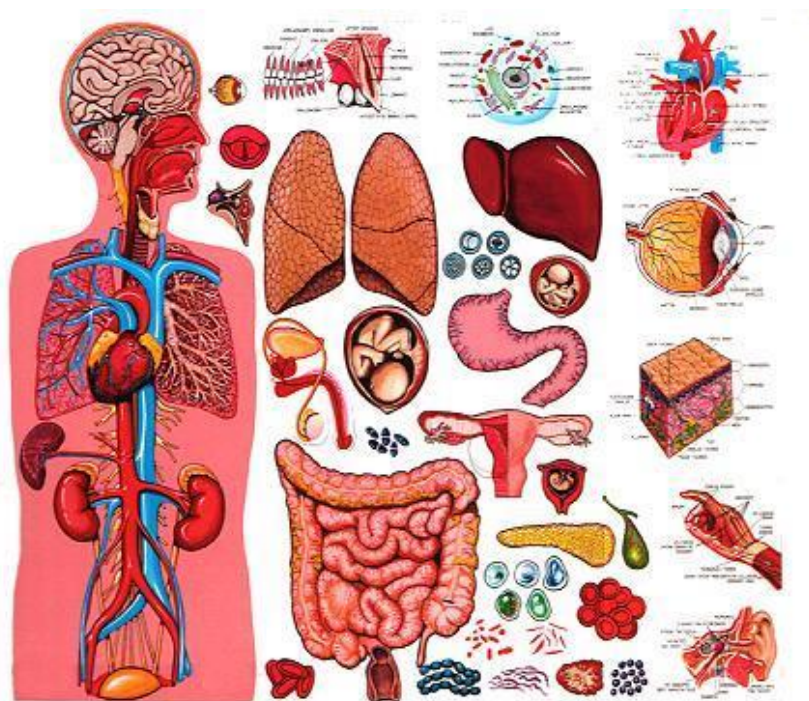
that will indicate if they are becoming hypoglycaemic and what do they need the practitioner to do in that case?).

If needed, practitioners should be able to work out which professionals to refer clients to, and how to question the client, if necessary, to make some sense of undiagnosed conditions. Massage practitioners also need to be able to talk to other professionals in medical language - to share information and to explain relevant aspects of their work.



Additionally, using textbooks and the internet to research things which they've discovered with their hands during the treatment (e.g. investigating the structure of a joint or identifying the muscles in which tension was found) is invaluable.

THE ROLE OF TEACHING METHODS



The way that APP is taught can be a very important factor in shaping the student practitioner's attitude. It can be presented in a way that opens up useful applications. If it's taught in a dry 'bookish' way only, to be learned by rote, it can feed into the unfortunately common experience of learning biology as an abstract academic subject, affecting the student's attitude to its inclusion in a course, how much they learn from it, and its potential for them to use as a practitioner.

Our intention on the BCMB course is that your experience of A, P & P will be a hands-on vibrant one, in which the information is:

- Presented in a practical way, supported by books and hand-outs.

- Made relevant to what you are doing with the massage strokes e.g. can you name the muscles you are working on? Do you know what is going on in the colon and hence why you massage it clockwise?
- Useful in helping to make an assessment of clients' needs, offering a treatment strategy that meets those needs and guiding you whilst giving the treatment – including, if need be, the ability to change strategy in the light of the client's reactions.

So, you will experience APP in a manner that:

- Summarises what you will learn each session.
- Is experienced through visual, kinaesthetic (movement) and proprioceptive (touching) as well as auditory and visual channels wherever possible.
- Introduces and explains new terminology, using common language and technical terms and concepts side by side, until (like learning any new language) it becomes familiar via use.
- This will include a range of teaching methods including e.g. brainstorming, role plays, experiential learning, guided fantasy journeys in the body, researching in books and active teaching aids e.g. flash cards, information sorting packs, colouring in charts, review questionnaires etc. to complement the 'traditional' charts and models
- Encourages you to work with fellow students, especially when revising material and preparing for exams - questioning, discussing and researching together are usually more stimulating, enjoyable and productive than just struggling on your own.

APPLYING THE INFORMATION

There is concern that massage may be viewed in medical terms only (particularly as the struggle for national registration increases the pressure to 'medicalise' massage), downgrading or ignoring the importance of friendly, interested, nurturing touch. The concern is that students will discount intuition, and ignore the importance of the interpersonal connection between practitioner and client, coming instead to view themselves as experts armed with immutable knowledge which will allow them to 'fix' the passive client. Operating only within channels defined by a narrow application of medical information (e.g. viewing the range of a joint's movement as a directive to attempt to force this range on every client), they will not adapt to different clients and also lose any larger perspectives on their work.

The overall perspective to keep in mind is the ideal of developing a well-rounded practitioner who is able to marry sensing and knowledge, analysis and intuition. Such a practitioner will take into account medical conditions that might influence the intentions and shape of a treatment session and (allied with an understanding of the dynamics of the professional relationship) thus deliver the best service for his/her clients.

SUGGESTED READING LIST for STUDENTS and PRACTITIONERS

(NB. Many of these titles are now on their 2nd, 3rd, 4th or even 5th editions)

FOR STUDENTS: MASSAGE

The Massage Book, George Downing, 1972; London: Arkana (ISBN 0-14-046-203-1). The first modern (non "sporty"/sauna rubdown) massage book, with lots of good information on related topics (Tai Chi, massaging pets, self massage). A classic!

Massage : The Ultimate Illustrated Guide, Claire Maxwell-Hudson, 1999; London: Dorling Kindersley (ISBN 0-7513 0664 9). Her best book: wide ranging introduction to range of massage styles presently popular in Britain - Swedish, On Site, Indian Head, Thai, Shiatsu etc.

Touching, Ashley Montagu, 1978; New York: Harper & Row (ISBN 0-06-012979-4). The role of skin in touch, nurturing, child development and communication.

Dynamic Bodyuse for Effective, Strain-Free Massage, Darien Pritchard 2007, Lotus Publishing (ISBN-10: 0954318897). How to apply pressure without straining your body or damaging your hands.

Basic Clinical Massage Therapy: Integrating Anatomy and Treatment, James H Clay & David M Pounds, 2003, pub: Lippincott Williams & Wilkins (ISBN 0-683-30653-7). Brings to life the techniques of massage therapy by embedding superb illustrations of internal structures directly into photographs of models being treated. A gem.

(The New Book of Massage (Now out of print but available secondhand), Lucy Lidell, Sara Thomas et al, 2000; London: Gaia Books (ISBN 0-85223-328-0). Well-written and illustrated introduction to massage, shiatsu and reflexology.)

FOR STUDENTS: ANATOMY, PHYSIOLOGY & PATHOLOGY

Anatomy, Physiology and Pathology for Massage, Darien Pritchard, 2022; Dynamic Massage Publications (ISBN 9780-9576-3950-7). Written by an MTI teacher. An excellent student reference, also aimed at the practitioner. Recommended text book for MTI accredited courses.

The Anatomy Colouring Book, Wynn Kapit & Lawrence M Elson, 2nd ed, 1993; New York: Harper & Row (ISBN 0-06-453914-8). The first A&P colouring book, that got this fun way of learning respectable - now in second edition, with more words and slightly smaller pictures - still good value.

The Concise Book of Muscles (4th Edition), Chris Jarney, 2018; Lotus Publishing (ISBN 978-1-905367-86-3). Covers all major muscles in the body with a good illustration of each, accompanied by good information, including stretches.

The Human Body Book - An Illustrated Guide to its Structure, Function and Disorders, Dorling Kindersley 2007 (ISBN 978-1-4053-1625-50). Excellent general graphics and accurate technical info.

Pocket Atlas of the Moving Body, Mel Cash, Ebury Press, London, 1999. (ISBN 0 - 09 - 186512 - 3). An excellent alternative to The Muscle Book, including diagrams of bones, bones and ligaments, and muscle, and text on muscle physiology and common injuries. Spiral bound, easy to use.

The Massage Therapist's Packet Book of Pathology, Su Fox (MTI tutor), Lotus pub 2013. Useful basic text with simple information on options for treatment. Helpful for a quick reference and to explain issues to clients.

FOR PRACTITIONERS: MASSAGE

Techniques:

Handbook of Massage Therapy, Mario-Paul Cassar, 1999; Oxford: Butterworth Heinemann (ISBN 0-7506-4000-6). Well written, range of techniques, very thorough section on massage for medical conditions and problems.

Pregnancy & Childbirth—A holistic approach to massage and bodywork, Suzanne Yates 2010 Churchill Livingstone (ISBN 978-0-7020-3055-0). Brings together western and eastern approaches: describes in detail the application of massage and shiatsu from early pregnancy up to the end of the first year postnatal.

Advanced Remedial Massage & Soft Tissue Therapy Mel Cash 2012 pub Ebury (ISBN 978-0-0919-2670-0) Mel's updated text provides a deep understanding of the way the musculoskeletal system functions and dysfunctions.

Sports Rehabilitation and Injury Prevention Paul Comfort and Earle Abrahamson (MTI Chair) pub Wiley Blackwell 2010 (ISBN 978-0-470-98563-2) A comprehensive, practical, evidence-based guide. Includes initial assessment, diagnosis and treatment to return to fitness and injury prevention. Presenting a holistic approach, also addresses nutritional and psychological aspects for amateur sports enthusiasts and elite athletes.

Medically Challenging:

Massage for People with Cancer, Patricia McNamara, 1994, a useful booklet published by Wandsworth Cancer Support Centre, PO Box 17, 20-22 York Road, SW11 3QE, 0207 924 3924. Findings of a qualitative research programme conducted in the London area. (ISBN 0-9523224-3-9).

Medicine Hands, Massage Therapy for People with Cancer, Gayle Macdonald, 1999, Findhorn Press (ISBN: 1-899171-77-0). A comprehensive review of the myths, fears and possibilities around massage for people with cancer. An invaluable resource for therapists, people with cancer, care-givers and health care professionals.

Massage for the Hospital Patient and Medically Frail Client Gayle Macdonald, LWW 2005 ISBN 0-7817-4705-8) An essential resource for gaining the skills and knowledge needed to provide safe, effective massage therapy to patients in acute care settings.

Research

Outcome-Based Massage, Carla-Krystin Andrade and Paul Clifford, 2001, pub. Lippincott Williams and Wilkins (ISBN 0-7817-1743-4). "The first text to introduce soft tissue massage techniques with functional outcomes in mind". This text introduces criteria to promote scientific investigation and evidence-based practice. Quite reductionist in some respects but also provides good terminology for dialogue with academics!

Massage Therapy: The Evidence for Practice, Ed Grant Jewell Rich, 2002, pub: Mosby (ISBN 0-7234-3217-1). Design and conduct of massage therapy research; massage for immune disorders, following spinal cord injury, effect in ovarian cancer patients and effects in relation to chemotherapy.

Massage Therapy Research Tiffany Field, 2006, pub Churchill Livingstone (ISBN 0-443-10201-5) Examines the research base of touch or massage therapy, especially in areas of stress reduction; pain reduction; growth and development; immune function; auto-immune disorders

Therapeutic Relationship:

The Educated Heart Nina McIntosh LWW 2nd Edition 2005 (ISBN 0-7817-4886-0) Demystifies the crucial issues of establishing professional boundaries in manual therapies – practical examples and solutions to the dilemmas and sensitive situations that all bodyworkers face – confidentiality, sexual attraction, socializing with clients and setting fees.

Relating to Clients, The Therapeutic Relationship for Complementary Therapists, Su Fox, 2008, Jessica Kingsley Publishing, London (ISBN 978 1 84310 615 9) A guide to all aspects of the therapeutic relationship, including improving interaction, communication and setting clear boundaries, as well as useful exercises to explore the client relationship in your developing practice.

ANATOMY, PHYSIOLOGY & PATHOLOGY

Anatomy of Movement, Blandine Calais-Germain, 1991 (France), English Language Edition, 1993; Seattle, WA, USA: Eastland Press (ISBN 0-939616-17-3). Well written and illustrated, covers bones, joints, muscles - good text to take practitioners on from training level.

The Physiology of Joints, 3 Vols, I A Kapandji (France), English Edition 1970; New York: Churchill Livingstone (ISBN 0-443-00655-5 for Vol 2). Very detailed analysis of each joint - movements, range, ligaments, muscles, joint surfaces etc.

Surface Anatomy - The Anatomical Basis of Clinical Examination, John S P Lumley, 1996: New York, Churchill Livingstone (ISBN 0-43-05302-2). Pictures with clear superimposed drawings of structures, and clear accompanying text.

Job's Body, Dean Juhan, 1987; New York: Station Hill Press (ISBN 0-88268-134-6). Most detailed exploration available of the physiology of bodywork.

Anatomy and Physiology for the Manual Therapies, Kuntzman A, Tortora G, 2010, Wiley NJ [ISBN 978-0-470-04496-4]. In depth anatomy – all you'll need to know, with quizzes and study tasks – and including short 'clinical connections' and 'manual therapy applications'. Well illustrated and detailed.

Principles of Anatomy and Physiology, Tortora and Grabowski, 1993, Harper Collins (ISBN 0-06-046702-9). Thorough, comprehensive, academic; if it ain't here, it ain't worth worrying about!

Trail Guide to the Body, Andrew Biel, 5th edition 2014, pub Books of Discovery (ISBN 0-9658534-1-1). A hands-on tour to enable you to palpate the body's structures with ease and precision. Fantastic illustrations and extremely clear descriptions - all massage therapists should have one!

A Massage Therapist's Guide to Pathology, Ruth Werner, 5th Edition 2012, pub: Lippincott Williams & Wilkins (ISBN 0-7817-5489-5). Comprehensive and detailed. Excellent illustrations and photographs. Over 200 conditions examined thoroughly including definition, etiology, signs and symptoms, massage options. Indispensable.

Pharmacology for Massage Therapy, Jean Wible, 2005 pub: Lippincott Williams & Wilkins (ISBN 0-7817-4798-8). Excellent information on pharmacological terms, physiological effects of massage, cautions and contraindications. Highly recommended.

The Anatomy of Stretching. Brad Walker 2007 pub: Lotus (ISBN 978-1-905367-03-0). Superb theory and practice of stretching with excellent diagrams to show your clients

BODYWORK& GENERAL

Postural Assessment Jane Johnson 2009 A comprehensive, user friendly guide to assessing posture, with tips that will enable you to perform your observations in a confident and competent manner.

The Concise Book of Trigger Points Simeon Niel-Asher 2005 pub Lotus (ISBN 978-1-905367-12-2) How to treat chronic pain through trigger points – tender, painful nodules that form in muscle fibres and connective tissues.

Fascial Release for Structural Balance James earls & Thomas Myers pub Lotus 2010 isbn 978-1-905367-18-4) Explores the exciting new field of structural therapy – designed for any bodywork practitioner using manual therapy.

An Ethical Guide to Touch in Psychotherapy, Mic Hunter and Jim Struve, Sage Publications, 1998. Although this book is written for practitioners of talking therapies, there is much of interest for massage therapists including sections on the skin and the physiology of touch, recent research findings, cultural differences in perception and experience of touch, and the emotional component.

The Shaman's Body, 1993, Arnold Mindell, Harper Collins (ISBN 0-06-250655-2). Quite brilliant by the creator of Process Work - relating body symptoms to altered states of mind and consciousness. Also Dreambody by the same author.

Body Secrets, Don Macfarland, 1988, Healing Arts Press (ISBN 0-944504-00-0).The synthesis of different bodywork schools and approaches, dealing with the essence of what matters. Inspirational.

Emotional Anatomy, Stanley Keleman, 1985, Center Press (ISBN 0-934320-10-1).The creation of human shape, the marks made by love and disappointments, insults and assaults, the challenges and stresses of existence. Examines our patterns of somatic distress - rigid, dense, swollen and collapsed - describes how they function and offers possibilities for change.

The History of Massage Robert Noah Calvert Healing Arts Press, 2002 (ISBN 089281881-6) A rich use of anecdote, historical reference and illustration, the author details the cross-cultural applications of massage including the emerging trends for the 21st century.

ENERGY WORK

The Handbook of Self-Healing, Your personal programme for better health and increased vitality, 1994, Meir Schneider, Arkana (ISBN 0 14-019331-6). Expand your body's capacity for health and longevity, using the methods developed by Meir Schneider as he cured himself of congenital blindness.

Hands of Light, A Guide to Healing through the Human Energy Field, 1988, Barbara Ann Brennan, Bantam New Age Books (ISBN 0-553-34539-7).An in-depth study of the human energy field, "for people who seek happiness, health and their full potential".

Inner Bridges, A Guide to Energy Movement and Body Structure, 1994, Fritz Smith, Humanics New Age (ISBN 0-89334-086-3). An inspirational and insightful book by the founder of Zero Balancing.

BCMB SHOP

NB. Prices are benchmarked against Amazon & change from time to time

| <u>Student books</u> | |
|---|---|
| | See notes on page 33 |
| The Concise Human Body Book | |
| The Human Body Book | |
| The New Book of Massage | |
| The Concise Book of Muscles | |
| Anatomy, Physiology and Pathology for the Massage Therapist | |
| The Massage Therapist's Pocket Book of Pathology | |
| Dynamic Bodyuse for Effective Strain-free Massage | |
| The Concise Book of Trigger Points | |
| <u>Practitioner Books</u> | |
| A Massage Therapist's Guide to Pathology | See notes on page 34-36 |
| Pharmacology for Massage Therapists | |
| Basic Clinical Massage Therapy | |
| Pocket Atlas of the Moving Body | |
| Trail Guide to the Body | |
| Advanced Remedial Massage & soft Tissue Therapy | |
| The Anatomy of Stretching | |
| The Educated Heart | |
| Fascial Release for Structural Balance | |
| Postural Assessment | |
| <u>CDs</u> | |
| Bowl of Plums | This music is by Piers Partridge, a great friend and supporter of BCMB for many years. |
| Water Break its neck | |
| The Big Field | |
| <u>Gloop</u> | |
| 1888ml ½ gallon bottle | “Gloop” is our nickname for Biotone Advanced Therapy Massage Gel, a hypoallergenic massage medium that we are very fond of at BCMB. |
| 1888ml ½ gallon bottle pump | |
| 236ml bottle | |
| 236ml bottle Refill | |
| <u>Couch Covers</u> | |
| Face Hole Covers - Pack of 100 – “Face Favours” | Couch roll and face favours ensure a clean hygienic surface for every client |
| Couch Roll | |

ASSIGNMENTS, ASSESSMENTS & QUALIFICATIONS

SUMMARY

On qualifying from the BCMB Course, you will be awarded the Level 4 Diploma in Holistic Massage, Anatomy, Physiology and Pathology from the Massage Training Institute (MTI). That was a mouthful, wasn't it! To gain the Diploma, you will need to:

1. Submit a satisfactory folder of work, covering your massage practice, personal reflections and APP study.
2. Follow the requirements of the BCMB learning Contract, which you have signed.
3. Pass a full body massage assessment.
4. Pass a 3 hour externally assessed exam in APP.
5. Pass an externally assessed massage practical exam.
6. Pay all your course fees.
7. Hold a current First Aid Certificate.

Further details of these assignments and how they are assessed is set out in Pages 39-43.

On the First Aid point, if you have a current Certificate, do let us know, as you could be exempted from the day we organise, which is the Friday of Workshop 9. However, the day we organise is excellent, going well beyond the normal minimum required and is tailored specifically for the needs of the massage therapist.

A WORD ABOUT MTI

The Massage Training Institute (MTI) is the UK's leading authority on the teaching, assessment and practice of holistic massage. These 3 functions are reflected in the organisation of MTI, which consists of:

- A group of 12 massage training centres throughout the UK, from Brighton to Sheffield and from Bristol to Edinburgh.
- A group of practical and theory assessors, all of whom are very experienced massage teachers themselves.
- A Practitioner Association, comprising some 500 or so full members and 300 student members, with a network of regional groups organising talks, workshop and promotional events, subsidised by central funding. There is also an Annual Practitioner Conference. To maintain membership of the Association, practitioners must fulfil criteria on continuing professional development eg further training, supervision or research. We examine this further towards the end of the course.



As a BCMB student, you interact with MTI in a number of ways:

- BCMB is MTI's largest training centre and we have influenced MTI standards for many years.
- Your final exams in APP and massage will be conducted by MTI assessors.
- You are automatically a student member of the Practitioner Association. You are very welcome to get involved in local events and attend the Annual Conference. Ask your teaching team where the next one will be!
- Andy Fagg was a Director and Chair of MTI. Other BCMB staff: Karen Yarnell (APP teacher) and Tim Bartlett are currently Directors; Andy, Tim, Karen and Sarah Hoare are assessors; Sarah Cohen, who teaches in Worcester, is the New Tutor Officer.

ASSIGNMENTS

Your folder of work will include 3 sections:

1. **Massage Practice Diary:** at least 50 hours of recorded massage practice (at least 40 given and 10 received).
2. **Personal Journal:** including personal reflections and exercises.
3. **Anatomy, Physiology and Pathology (APP)** study.

The tutor team will take in your folder each month and give you feedback on your progress, to be kept in your folder. Sometimes we ask to see specific work in advance eg APP answers and **MILESTONE ASSIGNMENTS**. These are marked "M" below. See Page 41 for more information on what these are and how they are assessed.

At weekend 9, the practice diary and personal journal, but not APP study, are submitted for final assessment by the Course Leaders. A random 20% are also selected for checking by the external practical assessor.



1. MASSAGE PRACTICE DIARY

Purpose

- a record of the massages you give and receive throughout the training;
- focus on technical and interpersonal skills; including client responses.
- establish what you have learnt and areas where you need support.

Given massage

- 40 hours (at least) away from the course weekends;
- can be on anyone: friends, family, fellow students etc;
- do not need to be in 60 minute "chunks"; impromptu 15 minute massages through clothes are valuable too – write them up!
- as wide a range of clients as possible in terms of age, gender, ethnicity, sexual orientation, physical conditions or emotional states;
- some clients should be regulars; to support this requirement, we have the "6 x 3" rule ie 6 clients whom you have massaged at least 3 times each. These must be presented, along with Initial Consultation forms and evaluation summaries, by the end of the course. (M)



Received massage

- 10 hours (at least) away from the course weekends;
- must include at least 2 professional massages; BCMB tutors offer "Buddy" sessions where you can give and receive a treatment with a tutor; you should also try non- MTI styles eg ITEC, beauty;

- 3 hours may include other bodywork eg aromatherapy, Rolfing, shiatsu or osteopathy, but not reiki.

Clinic Sessions

- In weekend 8 we introduce our first professional clinic; include notes on these massage sessions in your folder (M)

Format

- Write up each session; you may use the forms on pages 44 or 45 or adapt to suit your own style – see page 46 for suggestions.
- Also write up sessions received – see page 47.
- Examples of completed session records, both given and received, are at pages 48-52.
- Include an index page with client names (or initials), age, gender, dates and duration of session. Maintain a running total of the overall hours.
- Group your sessions person by person NOT chronologically.
- After weekend 6, add a case history for each of your 6 x 3 clients.

Writing an essay for every massage will get boring – for you and for the tutor team giving you feedback! As a rule of thumb, think in terms of:

- What did I do?
- What changed in the client's tissues?
- What 3 things did I do well?
- What 3 things could be improved on?
- What questions do I have for tutors?

Guidelines for content

- Clear notes
- Assessment of clients' needs
- Strategy for working with client
- Working appropriately with a range of clientele
- Feedback from clients
- Appropriate and effective physical work
- Sense of progression, willingness to learn and try things
- Realistic self-appraisal
- Awareness of areas needing further research & practice; how these are followed through
- Linking of APP knowledge to massage techniques
- Sensitivity to emotional issues, explicit and implicit within the session
- Handling of emotional release
- Safety
- Self-care



Client Group Study (to be started after weekend 6) (M)

- This is a further project that forms a subset of your massage practice diary.
- 8 of your 40 practice hours should be with a specific client group and will form a separate section of your Practice Diary.
- It is **not** an additional hours requirement ie the 8 hours are part of the overall 50.
- The people involved may also form part of the 6 x 3 requirement.

- Work with a specific group of at least 3 people with something in common - choose according to your personal interests.
- Examples might include:

- people with learning difficulties
- age groups – over 65, adolescents
- people with osteoarthritis
- people from an ethnic minority
- people going through separation/divorce
- mothers of young children
- people recovering from drug or alcohol dependency
- surfers or other keen sports people



- This is an excellent opportunity to explore issues of accessibility and diversity. For example, issues of disability, sexual abuse, prejudice. You can include yourself if you fit the particular criteria, i.e. some of your massage received can count.
- Write guidelines for a colleague who has approached you for advice. See examples at page 52-55.
- Be wide-ranging in your conclusions - include initial meeting through issues like working on a table/in a chair/undressing/techniques possible/aftercare etc.
- Include background research you may have done and information from other sources e.g. support groups.

2. PERSONAL JOURNAL

Purpose

- To record your personal responses to the massage training.
- To give an opportunity for creativity, wider research and exploration of massage.

Content

- Personal reflections on training weekends & your journey through the course as a whole. Keep these in one section of the journal.
- Exercises and assignments given during the course eg self-awareness meditations or posture & movement practice. Keep these in another section.
- Some assignments, known as milestones (M) are designed to help you make links between practice and theory eg muscle names and strokes or self reflection at the mid-point of the course.

Format

- For the personal reflections use whatever form works for you – prose, poetry, mind-mapping, drawing, photos, painting etc...
- See extracts from a journal entry on pages 57-58.
- And from 2 overall summaries (a milestone assignment) at pages 66-68.



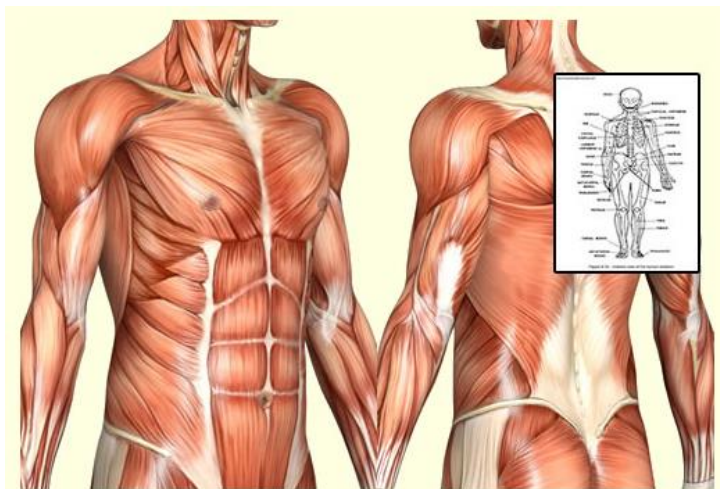
3. APP STUDY

Weekends 1-4: muscle, bone and joint naming leading to a test in Weekend 4 (M).

Weekends 4-7: “systems” questions, drawn from past exam papers (M)

Weekend 8: mock APP exam paper (M)

Weekend 9: final revision before APP exam on the Friday of Weekend 10.



H ASSESSMENTS

1. MILESTONES

The milestones are assignments set by BCMB that are assessed within the course. They are called “milestones” because they give us – and you – a sense of progress in your massage journey. All milestones **MUST** be completed to a satisfactory standard before you can be entered for the final MTI assessments. Here they are, their purpose, when they are set and when they are due in.

| Milestone | Purpose | Set | Due in |
|--|--|---|-----------|
| Mental Health Exploration & Massage Benefits | To demonstrate understanding of how to support clients in terms of mental health and show knowledge of different massage techniques, when to use them. | w/s 3 & 4 | w/s 4 & 5 |
| 6 x 3 clients | To demonstrate ability to assess clients' needs over time and provide treatments that meet those needs. Requires completed initial consultation form and review at end of sessions. | Throughout course, especially after w/s 6 | w/s 9 |
| Client study group | To demonstrate ability to adapt to needs of a particular client group, in terms of communication skills, massage techniques required and considering issues of diversity and inclusiveness as appropriate. | w/s 6 | w/s 8 |
| Half-way Review | A review of your connection with our massage principles, consideration of the therapeutic relationship, and looking where your massage career is heading | w/s 6 | w/s 7 |
| Journal as a whole | To demonstrate the ability to explore the world of massage through personal reflection and engaging with the exercises set in the homework | Throughout course | w/s 9 |
| APP muscle & bone test | To review knowledge of muscles and bones | w/s 4 | w/s 4 |
| APP homework | To consolidate APP days by answering questions from past papers | Each w/s from 4-7 | Next w/s |

| | | | |
|---------------------|---|------------|---------------|
| | | | |
| Milestone | Purpose | Set | Due in |
| APP mock exam | To see if student is ready for the final APP exam | w/s 8 | w/s 9 |
| Mock Practical Exam | To see if student is ready for the final practical assessment | w/s 10 | w/s 10 |

2. MTI ASSESSMENTS WITHIN COURSE

These are assessed within the course by the BCMB team and form part of your final submission to MTI. They are:

| Assessment | Purpose | When |
|------------------------|---|---------------------------------|
| Full Body Massage | To demonstrate the ability to use a good range of massage techniques by performing a full body massage in 60 minutes | During w/s 6 |
| Massage Practice Diary | Completing at least 50 hours of massage practice, a minimum of 40 hours given and 10 hours received, with good quality reflective practice – as described above. To include the 6 x 3 groups of regular clients and the client study group. | Throughout course, due in w/s 9 |

3. MTI ASSESSMENTS AT END OF COURSE

These are conducted by MTI theory and practical assessors:

| Assessment | What it is | When |
|----------------------|---|---------------------|
| APP exam | A 3 hour written exam in Anatomy, Physiology and Pathology, sent off for marking by MTI examiners. | Friday w/s 10 |
| Final practical exam | A 45 minute practical exam which involves meeting an unknown client, taking a case history, negotiating a treatment plan and delivering a massage that meets the client's needs. External MTI Assessor. | Between w/s 10 & 11 |

MASSAGE PRACTICE DIARY

MASSAGE SESSION: RECORDING FORM

This sheet is offered for recording your initial massage sessions. You may copy it, adapt it or use another of your own design.

Client Name:

Age:

Date:

Length of Session:

Practical Issues (room layout, temperature etc):

How is client today? Massage plan?

Massage given? (speed, depth, strokes, areas of body, main muscle groups etc):

Reflections

What did you notice? And did it change from the techniques / approach you used?

What else could you try in the future in a similar situation?

What did you do well? (up to 3 things)

What needs improvement? (up to 3 things)

What aftercare idea(s) did /can you suggest relevant to this person?

Important / Useful Information and research needed or undertaken?

Here's what one student did with the Massage Practice Session sheet to make it their own:

MASSAGE PRACTICE SESSION

Name:

Date:

Parts massaged:

How did your partner feel before massage?

How did you feel before massage?

Any particular practical issues?

What was your intention with the massage?

What happened? How did you do the massage?

Did you discover any tight areas, knots, sense of emotion/energies, anything specific to this massage? If you did, what did you do then?

How did your partner feel during and afterwards?

How did you feel during and afterwards?

What did you do well?

What needs improvement?

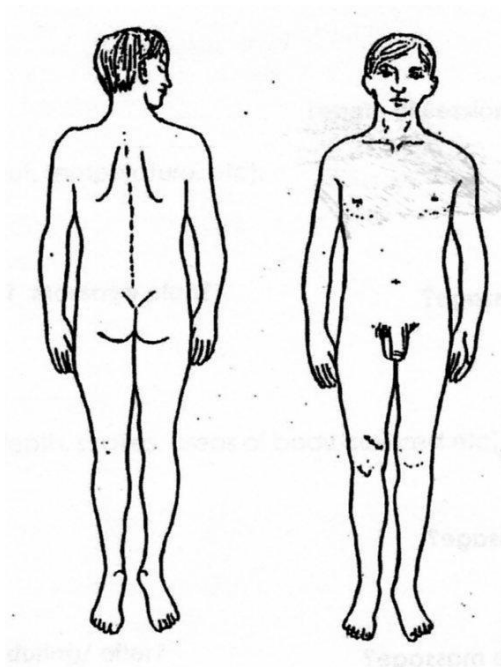
What else could you have tried with this person?

What aftercare idea(s) did you give?

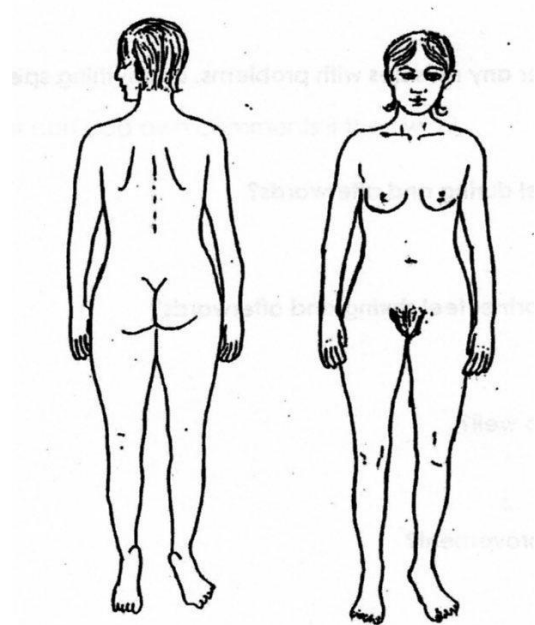
Other Useful Recording ideas

1. Figure Outlines

Male



Female



Try shading areas that need attention or have a history of injury. Or to indicate which areas receive most massage attention. Try different colour codes for different purposes.

2. Use **bullet points** to express what is essential – an essay will be boring for you and us.
3. Include a section for clients to add **their own comments** – perhaps on the back of the sheet.
4. Include a note about your **intention** – e.g. to relax and soothe; to work deeply into tight muscle areas; to invigorate and stimulate.
5. Consider how this intention translates into specific **strokes and techniques** eg relaxing through holds and still, slow massage; to release through focused deep pressure into areas of muscular knots; to invigorate through vibration and percussion.
6. Include your **observations** of client e.g. posture, facial expression, tone of voice, degree of agitation.
7. Identify which were the **main muscle groups** you massaged, why you massaged them and the effects of your massage.
8. As your massage develops, include research into **client's presenting condition** (if appropriate) and ideas on how you might therefore massage.
9. Notice how you are doing with your **posture**, which strokes come easily, which are more difficult.
10. **Appreciate yourself** – celebrate what you do well!! Especially what you previously found hard.

NB. Other important resources are provided when they are required. For example, the Initial Consultation Form is considered during Workshop 6.

MESSAGE RECEIVED SESSION

This sheet is offered for your recording your received massage sessions. Again, feel free to copy it, adapt it or use another of your own design.

Practitioners Name:

Date:

Length of session:

Practical Issues (room layout, temperature, comfort etc):

Parts of Body Massaged:

Style of Massage (soothing, vigorous, deep etc):

Quality of Massage:

How you felt: (before/during/after)

Consider the massage and interpersonal skills displayed by your massage practitioner. In particular, whether there are any lessons/ideas for your own practice.

What might you take on board?

What would definitely NOT take on board?

EXAMPLES OF COMPLETED SESSION RECORDS

The following examples show how previous students have completed their massage write-ups. There are 3 sessions given and 2 received.

MASSAGE PRACTICE SESSION: EXAMPLE 1

Client Name: JJ

Time of Session: 1pm

Date: 29.08.12

Length of Session: 1 hour

Male/Female

Age 76

Used Oil – Yes/No

Practical Issues: (room layout, space, temperature, carpet/tiled floor, music, smell etc.)

Nan's lounge, spacious, bit chilly, carpeted floor, music which wasn't quite right but okay. Clean

How is client feeling today?

Bit tired and achy. Shoulders are stiff. Hips hurt when walking far.

Massage plan?

Shoulders, back, neck and buttocks

Massage given? (areas of body covered etc – speed, depth, stroke)

Did some gentle massage on back and shoulders – concentrating on trapezius, rhomboids and sternocleidomastoid but using circular knuckle, side of hands and fingers to trace the muscles worked deeply in shoulders, using percussion and knuckles slug like movement down erector spinae. Worked deeply into buttocks by doing deep holds and slow drags finished with holds on back – rotated and mobilised shoulders.

What changed/didn't change during session?

Muscles on right side back felt tighter than on left; client's skin got quite red between the scapula; client fell asleep. Client didn't feel any difference in his stiff shoulder - perhaps I could have tried the shoulder rotations and stretches"

How did you feel?

Before?

Bit anxious as I haven't done any for a while but excited to do some

During?

Unsure of myself, relaxed, getting in to it. Tired

After?

Bit tired but ok, legs shaky but feel good

What did you do well?

Did well to remember what to do. Mobilising the shoulders was interesting as they got looser and more likely to relax as I proceeded. Checked in with pressure.

What needs improvement?

Feel confident – consultation – feel sure of myself
Practise, Practise, Practise!!

What aftercare idea(s) did /can you suggest relevant to this person?

Simple side stretches - raise arm and lean over to one side while reaching up/out - spending a little longer on the right side as this felt tighter.

Any Questions or discoveries to share?

n/a

MASSAGE PRACTICE SESSION: EXAMPLE 2

Client Name: TR

Date: 31st July 2012

Length of Session: 45 minutes

How is client feeling today? Massage plan?

Tina I think was feeling a bit anxious. She said that she was behind with course work and had missed the Saturday session at the weekend and was very keen to catch up on the work we had missed (breath work, abdomen massage and mobilisations).

Massage given? (speed, depth, strokes, areas of body covered etc)

I demonstrated to Tina the breath work we did and the diaphragm massage we did at the weekend. Tina mentioned that she had done herself an injury during a dance session and was feeling lower back and glute pain so we agreed to do some massage work there too. In listening to the Client during the initial consultation you can better understand the Clients needs and customise the treatment appropriately.

How did you feel - before/during/ after?

It was good for me to demonstrate what we had learned at the weekend to refresh myself too. Also I like having a specific purpose whilst giving massage i.e. Tina had specific pain in glutes and lower back. It gave me a goal. I checked in with Tina in terms of depth and pace. A lot of the massages I have given so far have been for general relaxation. This whole session had purpose which I liked.

How was client during & after session?

Tina felt very relaxed during the session. I knew by Tina's tissues that the massage into hamstrings, glutes and lower back were having some effect and that she was relaxing into the massage. She also used her breath with effect to relax further into some deeper pressure. And her tummy gurgled, indicating her parasympathetic nervous system was being activated!

What did you do well?

Massage of hamstrings and glutes. Using elbows on buttocks. Effectively checking in with client as to the pressure and pace.

What needs improvement?

My initial consultation...lots of practice needed. I can see the absolute importance of gaining information about Client's lifestyle and physical activities from the start. Also have a sketch of the human body and outlining the areas that you agree with client to work on is very beneficial visually. It sets a goal in your mind and again gives a purpose to your work before you start.

MASSAGE PRACTICE SESSION: EXAMPLE 3

CLIENT NAME: PD

DATE & TIME: 6/6/12 10.30am

LENGTH OF SESSION: 45mins

PRACTICAL ISSUES: 2nd massage in a row, so quick turn around. Peter's always early! (give them newspaper article on marathons and heart)

MASSAGE GIVEN (speed, depth, strokes, areas of body covered etc)

Prone: legs, thighs RH and then LH

- General oiling over all posterior of leg
- Strip V stroke, circling, kneading using knuckles and thumbs, wringing. Some deep pressure work on IT band, hamstrings and up into glutes
- Finished with some percussion on thighs

Calves

- Strip V stroke, then lifted lower leg, resting ankle on my shoulder strong v stroke down gastrocnemius and soleus
- Thumb and finger circling over all area quite deep and focussed, as calves felt 'tight'
- Gentle leg stretch, holding ankle to finish and long sweeps over all leg to complete

Back

- General large effleurage for oiling and some fairly quick work over scapular and across rhomboids, trapezius (upper)
- Slower work – wringing, pulling and double palm pressure in small circles over lower back RH and LH of sacrum/lumbar spine
- Deep holding pressure around RHS where he felt some pain, gently soothing lighter stroke after release.
- Work on either side of spine, erector spinae, multifids to link lower/upper back used elbow/forearm and vv slow stroke upwards

To finish

- Hold on hara and heart chakra
- Polarity sweep, finishing cross armed holding ankles

MY FEELINGS

Before: Prepared

During: This massage felt good and 'just right' for the client

After: Pleased

WHAT CHANGED/DIDN'T CHANGE DURING/AFTER SESSION?

During: very very relaxed. Nearly fell asleep.

After: Enjoyed firmer pressure and elbow on back! Helped to ease his tight erector spinae. But they still felt stiff in their right shoulder.

AFTERCARE

Suggest shoulder rotations or arm rotations to help free & relax the right shoulder

WHAT I DID WELL:

- Tried percussion as not done this for ages!
- Able to provide a massage that dealt with PD's specific needs at this moment

AREAS FOR IMPROVEMENT:

Uncovered both legs – not sure why I did this, room was warm though so he didn't seem to mind

MESSAGE RECEIVED SESSION: EXAMPLE 1

Practitioners Name: XX

Date:

24th August 2012

Length of Session: 1 Hour

Massage given? (speed, depth, strokes, areas of body covered etc)

The moment XXXX put her hands on me I instantly relaxed and went into a meditative state of mind. XXXX placed her hands lightly on my back and just below my neck (occiput). They then continued through drapes to gently push my body against the bed and held for moments from my neck to my feet. It was so releasing and calming. I had very few thoughts during the massage other than "this is amazing". XXXX strokes were varied and she moved around my body effortlessly. I thought it was great that XXXX intuitively knew (or maybe it's obvious :)! that my right lower back (sacro-iliac joint) and my left shoulder have caused me problems in the past. It was much welcomed to get attention there though I hadn't mentioned them during our consultation as I just wanted a relaxing massage from XXXX's imagination.

I particularly liked XXXX's strokes and mobilisations of my shoulders and when my arms hung loosely over the bed, XXXX massaged down my limp arms which felt amazing. The "Rag doll" effect was achieved by XXXX on my body so easily, my body felt like butter....when I turned over I could still feel the heat of the strokes on my back though at the time they didn't feel particularly deep. Whilst supine, XXXX spoke meditatively to me and continued to ensure that I was in safe hands and had permission to continue to relax deeper into the massage. The work to my neck and shoulders whilst XXXX turned my head to either side felt amazing. My head literally felt like it was sinking into bed. I told XXXX at the end I found her touch profound as it entered me into a meditative state so quickly.

How did you feel - before/during/ after?

I felt amazing after massage, a little tired, cycled home very pleased with the experience. I took a nap and practiced a yoga class later. I noticed that my concentration and body awareness was great. I find receiving massage a truly uplifting experience. It's so nurturing, however self-healing can be tiring sometimes as it is counter-acting habits that have been ingrained for many years. One of the worse habits I've probably nurtured over the years is overthinking and feeling like I need "to keep going" despite the costs. Ultimately if you look after yourself hopefully one will prioritise what is important and what is not and leave the rest...sometimes easier said than done. But a good massage leaves you realising don't sweat the small stuff □ ONE OF THE MOST IMPORTANT things I'd learned also was that it was clear that XXXX was such a professional at their job with a wide variety of techniques and strokes to choose from. Their effortless movement around my body was admirable but it was something I'm sure took effort, time and practice. The art of massage is an evolving practice...so if I want to get good keep practicing and learning through mentoring also.

MESSAGE RECEIVED SESSION: EXAMPLE 2

Practitioners Name: JB

Date: 8/5/12

Length of session: 1 hour

Practical Issues: (room layout, temperature, comfort etc):

Therapy room, Beacon clinic Malvern. Warm. V small (max 2 ft around table) Face hole no face cradle. Music on. Essential oils perfume room.

Parts of Body Massaged:

Back, shoulders, neck, head, face, abdomen

Style of Massage (soothing, vigorous, deep etc)

Swedish (based on) Deep

Quality of Massage:

Very thorough, strong. No preliminaries apart from oiling.

How you felt: (before, during, after)

I felt I was being 'treated'. I was worried 'I go deep' and it was painful at times and I had to ask for less pressure. I had felt fine beforehand but afterwards I was not in pain but not relaxed either.

Consider the massage and interpersonal skills displayed by your massage practitioner. In particular, whether there are any lessons/ideas for your own practice.

What might you take on board?

It was quite strong, but the work on the medial edge of the scapula felt beneficial, but time will tell. This done with my hand on my back and detailed work under edge of scapula against bone. Abdominal massage good along lower rib margins.

What would definitely NOT take on board?

I was given 2 page registration document to complete including medical history etc. This was not reviewed before treatment.

Massage was fast paced throughout, except for on head/face. It did feel a bit of an assault.

Need to vary speed/depth and check with client (I had to ask for less pressure)

I did not sense an attempt to build trust and make me safe. I was told it would be deep and it was.

Examples of Guidelines following Client Group Study

EXAMPLE ONE

XXXXXXX's Client Group Study

Clients with Back Pain.

Summary

The clients in this study group all suffered from back pain of some kind, although the type and cause of the pain varied, and therefore the associated massage treatment given also varied.



Physical symptoms

Client summary :

Short term muscle strain :

- 1) Patient 1- had pain and stiffness in lumbar spine caused by a sudden strain while playing sport. Lots of reference pain in buttocks and back of legs.
- 2) Patient 2 - also suffered pain, stiffness and a reduction in mobility in the lumbar region from muscle strain caused by a sudden strain.

Long term due to previous injury/disease :

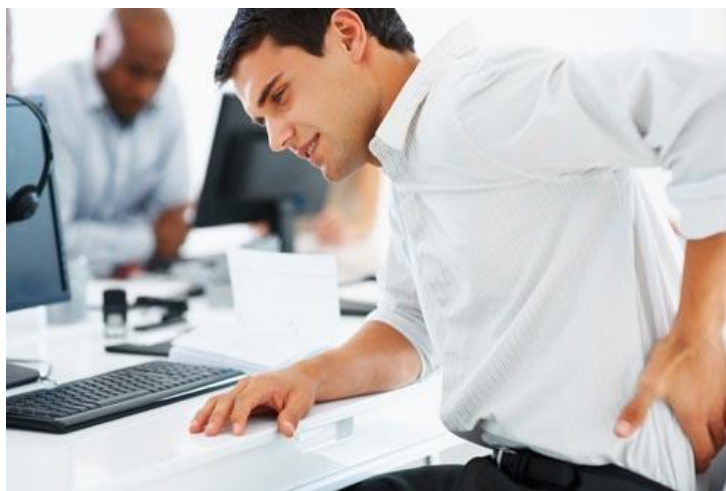
- 3) Patient 3 - suffers from long term back pain in the lumbar region following a slipped disk and resulting operation.
- 4) Patient 4 - has had many operations and her lumbar spine which is now fused with metal rods to stabilize the area.
- 5) Patient 5 - Suffers from congenital back problem, scoliosis in the mid thoracic region (T4 +T5), there is a lot of postural compensation and stiffness in this area and the rest of his spine.

Acute pain due to disease :

- 6) Patient 6 - recently diagnosed with cancer in her neck and lumbar spine. This has severely reduced her mobility and caused a lot of pain.

Causes

Back pain is a common symptom that may be acute or chronic. It can be caused by a variety of disorders and diseases that affect the spine varying from muscle strain (caused by both sudden strain or long term bad posture) to injuries caused by accidents and diseases such as congenital problems or cancer. Lower back pain is often accompanied by sciatica felt in the lower back, buttocks and legs.



Mental and Emotional symptoms

Back pain can cause tiredness and fatigue. It can also impact mobility, which can in turn lead to frustration and depression, especially as the back is involved in so many of the body's common movements.

Guidelines for massage

Contra Indicators: It is very important to ask detailed questions about the pain or injury before starting therapy due to the wide range and varying seriousness of back conditions. If you feel that the pain may be due to a more serious problem, do not start treatment and suggest they be referred to a doctor, chiropractor or osteopath. If there is evidence of swelling, the area local to the swelling should not be massaged.

It is most important to understand and follow to the client feelings/needs towards massage, especially no go areas.

Strategies

Dependent on the cause of the pain will depend on the strategy. For example

1) Short term problems e.g. Muscle strain. The problem area can be massaged as long as the client is happy with you massaging the affected area directly (avoiding any swelling) being careful to monitor and work with the client to ensure that the depth of the massage is not painful. There may be referred pain (e.g. buttocks and lower back for lumbar spine injuries). Postural changes due to compensation may cause strain in other parts of the body.



2) Long term problems e.g. previous operation/accident or congenital problems. In this situation the client may or may not be happy to have direct massage on the affected area. Always check first. As above work with the client around the area aiming to improve mobility and help relieve any referred pain, due to long term mobility or postural problems causing muscle tension in other parts of the body. Massage is unlikely to change the posture, but will usually help to regain some mobility.

3) Acute Pain due to injury or disease. In this case it is contra-indicated to work directly on the area of pain. However, the client may benefit very much from gentle massage to other areas of the body as an aid to relaxation, and reduce stress. It can also help to reduce muscle spasms and increase mobility in joints which have become under utilized due to general lack of mobilization, or to relieve muscle spasm.

Practicalities

When working with people with reduced mobility, it may be that you also have to work around the client in a position that they are comfortable in, sitting in a chair, lying on a bed or on their side etc. For clients with spinal curvatures it may be necessary to provide additional support, cushions etc.

EXAMPLE TWO

xxxxxxx-Case Study-BCMB

Clients with Chronic Pain

Summary

The clients all experienced chronic pain. Chronic pain is defined as being experienced for a month or more. It is acknowledged that no two people experience pain in the same way and therefore careful consideration has been given in choosing the candidates of this group. They all vary quite different in terms of their presenting physiological symptoms.

Two common features are that the clients were unable to carry out all of their ideal daily tasks due to the chronic pain being a barrier and all presented as low in their mood.

Physical symptoms and causes:

Client A: Relapsing and Remitting Multiple Sclerosis. This causes muscles deterioration, pins and needles, burning sensations, tingling, numbness, stabbing pains, and sensitive skin. This causes her to become very tired and prone to body temperature loss.

Client B: Osteoarthritis, Halux Valgus and recovering from prolapsed inter-vertebral disc. This causes the client to limp and put more pressure on her right side. She is unable to walk for any length of time and cycles for transport. She is also arthritic in several of her inter phalangeal joints and has a painful base of thumb which becomes inflamed with damp weather.

Client C: Severe lower sacrum pain following the posterior birth of her baby. This causes her pain during the night and day and causes her to avoid taking part in exercise except for cycling. She experiences numbness and tingling in her lower back at times.

Client D: A 98 year old man in constant pain in his knees and experiencing leg cramps. He also experiences pain in his left wrist after a fall.

Client E: A woman who has undergone a hip replacement three times. She is in constant pain with limited mobility.

Mental and Emotional Symptoms:

All of the clients described feeling low. Some of the clients thought they might be depressed. Chronic pain can cause exhaustion. All of the clients spoke of having disturbed sleep patterns although Client C had a young baby so there were other factors to consider for her.

Leading a life that changes due the lack of ability in one's body can be frustrating and demoralising. In the cases of Clients A, D, and E they have had to come to terms with the fact they have changed from fit people to those who have become dependent on others. Client B used to trek mountains and run, but has adapted her exercise as have the others to cope with what life has dealt them. Keeping positive is difficult but exercise releases endorphins which help the body naturally cope with depression.

Considerations for massaging clients with chronic pain:

Adapt your massage environment and be welcoming. I found that in massaging this client group, the key was the initial consultation and then setting the scene to make sure the clients felt comfortable, and if they did not they were able to say so. Working with people with additional needs means adapting the environment to include them. Breaking down barriers that usually exclude people such as stairs, massage beds might be an issue, room temperature is problematic for the MS client. (It needs to be very hot usually) Also consider massaging in a recliner chair for less

able people with towels under their legs and a stool on the side for the practitioner or leaning on one knee. (As I did with Client D) Consider changing your massage room or going to the client. Some people are sensitive to noise and do not like music during the massage session.

Contra-indications:

Osteoporosis

Three of the client group risk osteoporosis as they are women who cannot undertake weight bearing exercise. One more risks this if she does not begin to undertake weight bearing exercise, although she is significantly younger. I was aware of this when I was massaging them and was especially careful around their spinal area.

Painful Joints

It is not advisable to massage directly on an inflamed joint but rather on the surrounding muscles to that joint. Be careful when mobilising the limb of a painful joint. Ask for feedback.

The Massage Plan and Recommendations:

This links with the importance of taking time to listen to the client during the initial consultation and during the massage itself. This means picking up on non-verbal cues also. Holistic massage means taking in all the elements so I think this is the basis for a good massage. Be careful to listen to the physical and emotional needs of your clients. Massage can help chronic pain management at least in the short term. It is helpful to have some after care suggestions that are achievable like simple stretches that the client can do between sessions.

Massage the muscles surrounding the inflamed joints and mobilised the joint to increase circulation, decrease stiffness, and promote cartilage repair.

Massage the superficial sacroiliac ligaments for lower back stiffness. Side-lying stretching so that the deeper ligaments would can be reached is recommended but ask for feedback throughout..

Use mobilisation and stretches with the client while on the couch or the chair. Bone tapping is recommended here also. Make sure to include the problem areas identified by your client and work 50-50 with them throughout the massage.

What I felt was important was to give this group a sense that they were being taken care of, that they were 'whole', as self esteem appeared to be low. So I made sure that I grounded them with pressure holds on their feet. I did some breath work with all the clients and I did hand and foot work with this client group as this is where many people hold much tension.

I also did some stretching to even the side that was injured, or was the 'problem side' and massaged more deeply the side of the body that was compensating for the injured side of the body.

I ended the massage on a light note. I did face massage work to end the massage. I hold the temples lightly to give a feeling of floating and enable the client to really relax.

After the massages mobility was much improved and moods were generally better.

In a brief report on '*Evaluating Mindfulness-Based Stress Reduction and Massage for the Management of Chronic Pain*' it concludes that MBST might be more effective and longer lasting for mood improvement, but massage may be more effective for reducing pain.
(Reference: *Journal General Internal Medicine* Volume 20 Issue 12, September, 2005)

PERSONAL JOURNAL

Extracts from a PERSONAL JOURNAL 1 – a year with massage.

NB. Note how these entries include:

- Ups & downs; Feeling responses;
- Self-development learning; Honesty!!

February - 1st Weekend.

Why am I here? For myself. The pleasure that I get from doing massage, giving and receiving all at the same time. And I fancied it.

March - 2nd Weekend.

What a relief to be here instead of just worrying about being here. Lovely to be here again, to see people, to catch up, with them and with myself. I love to touch. I love to massage. That's why I'm here. To feel that joy, that openness, ****REMEMBER THIS !****

Lunch time: Time to talk together and learn about one another. The massage is great, I'll learn technique here but that's not really my issue. It's the meeting together with people that's my challenge. The 50/50 thing, sharing space with others.

April – 3rd Weekend.

I feel with some clients, a great level of care and tenderness. It is interesting to me that this is not so present with others. Why? Is it me or them, or the two of us together that makes or does not make this bond. I'd like to get a flannelette sheet to work with, they feel so lovely.

April – Home.

For the first time I question my doing the course – how can I when I suddenly don't want anyone to touch me, get close to me.... I feel my feelings are unfair on my course partners – the responsibility for them of helping me to cope with my feelings is too much to ask of them.

May.

Today I did a wonderful swap with a colleague. Faith restored.

September.

Massage seems to be the last thing on the agenda at the moment. A&P and client study groups fill my life. I WANT A MASSAGE !!!

October.

Tonight is my last night with this little book as tomorrow it is handed in. This year seems to have focussed so much on ME and everyone else has had to take a back seat. They are very loving, my children, and have taken on my need to do this in an extraordinarily generous way. They make me feel important enough to take the time to do this properly – I could never have noticed how important I am in our little world if I didn't have them to tell me I'm worth making time for. I would have stayed just little me instead of moving into being bigger, growing, glowing me.

Extract from a PERSONAL JOURNAL 2: Weekend One

25th and 26th February

The Journey Begins

Overall my feelings of the first weekend of the course are very positive!!!

I found it very exciting getting to know my new class mates – everyone being so friendly and attentive made me feel relaxed and at ease straight away.

The one thing that stood out to me was that when we had group discussions – I became aware that almost everyone had the same question marks and insecurities hanging over them. I am a strong believer of talking and communicating to make your feelings known and understood to get a more positive solution so I found it very pleasing to know everyone was being honest right from the start.

This carries through to the massage side of things as well as again from the very first massage we got into action – everyone was checking in and being honest which was great.

What worked well for weekend 1?

DEFINITELY THE TEA BREAKS! HeHe!!

- ❖ The way that there is no faffing – you just dive into the deep end so people like myself who was nervous about massaging strangers didn't have the time to get too anxious about it – you just got stuck in.
- ❖ There is always a chance to ask questions or ask for direction and you don't feel out of place doing so.
- ❖ I have already mentioned how important it is to check-in – for someone like me who likes re-assurance, acceptance and appraisal – its important for me to know I'm doing a good job.
- ❖ Its fantastic that you get to change partners now and again as obviously when becoming professional no client will ever be the same.
- ❖ Learning how different bodies can present themselves or react is very beneficial for learning purposes.
- ❖ Even checking out different table styles and heights was hugely beneficial for me as I was looking for one to buy at the time.

What did not work well for me @ weekend 1?

Honestly can't think of anything I didn't enjoy or didn't work.

I didn't find the bone naming particularly enjoyable but that was down to me not knowing any to name and not feeling 100%.

I also couldn't see myself being a meditator but actually sitting and being conscious of your body really does help you to relax and take yourself out of the demands of everyday life.

MENTAL HEALTH EXPLORATION & MASSAGE BENEFITS - EXAMPLE

Introduction - The Importance of Massage

Massage provides an immediate way to affect another person, to reassure and relax them, to help reduce pain, influence our ability to build relationships and even fight off disease. Even though touch is an absolutely primal, vital requirement, it is sadly neglected in many of our societies. In the last thirty years, researchers have looked at the therapeutic effects of touch. Regular physical contact lowers anxiety levels and enhances the quality of life. Also, psychological processes are affected too, such as lowered blood pressure, less arteriosclerosis, and reduced brain cell deterioration and memory loss with ageing. Musculoskeletal disorders are most often helped by manipulative treatments. Pain levels and pain tolerance can be aided by massage and bodywork therapies.

Apart from all these psychological and physical benefits, massage can help to redress the balance of our very busy lives. It can help us to address the need to gain/regain an awareness of how we are feeling emotionally and spiritually, as well as physically. It is important for everyone to relax and regain a sense of our own being, especially as being in touch with ourselves is something that can get lost as we get older. The art of touching is often directed towards our closest next of kin – a loved one, or a child. However, it is a universal language that can help to heal, reassure, relieve pain and soothe tension.

Part1- Mental Health Exploration

Mental Health – my thoughts

Mental health is when you feel comfortable and content within yourself. In good mental health you are able to quickly bounce back from stressful or emotional situations so that you feel like your 'self' again.

Mental ill-Health – my thoughts

In mental ill-health it is much harder to regulate emotions and often we might feel lost or sad or disoriented, not really know what to do to feel better, or not being able to do what you think you need to. There are many ways that mental ill-health manifest.

Further thoughts from research

Mental ill-health can be seen as a natural response to help us cope with experiences we have had over the course of our life. As with health generally, there are different degrees of illness and it can affect any of us at any time in our lives or, for some, throughout their whole lives.

Also like physical health, mental health can be maintained through looking after ourselves as best we can and seeking support as we would for physical conditions.

Mental ill-health can sometimes be very complex and difficult to manage and there is increasing research that shows support with bodywork, as well as mind based therapies, can really help people improve their mental health.

Main causes of mental ill-health

- Abuse or neglect
- Loneliness
- Pressures of poverty or social disadvantage
- Excessive stress – from work, family, life circumstances, etc
- Head injury
- As a result of a very stressful situation, i.e. war, serious injury

Places to refer people

1. Their GP (doctor)
2. A mental health organisation such as Mind

Part2 - The Benefits of Massage to different areas of the body

Obviously individuals will benefit in different ways from massage, depending on their specific needs, health, lifestyle etc. However, for different areas of the body, there are general benefits that can be considered relevant to all.

The Back

Often a massage can begin with the back as it is the single, most largest area of the body and demands a little more time. It is the main supportive area of the body and an area of great mobility and strength. It is a less vulnerable area for many people, than the torso for example, and a good place to start in order to gain the trust of the receiver.

The back is often a place where people feel pain or tension, possibly due to poor postural tendencies. A sedentary lifestyle can cause tightness in the lower back, which may become 'chronic'. Work related stresses and strains such as sitting at a desk or computer, or lifting and carrying heavy items, can lead to muscular problems in the upper back and shoulders. Therefore the back muscles are an important group to understand in massage due to their role in balancing the posture of this large body area. Also, by massaging the back you are reaching nerves that spread to the whole of the body (from the spinal column) and this usually creates a deep feeling of release and relaxation. Since the lower back is linked to the *hara*, massage can help with a stronger sense of security and grounding.

The Legs

Massaging the legs also gives the client a feeling of stability and of being grounded. We stand on our legs much of the time, therefore there can be stiffness and pain which can be eased by massage. The largest nerve – the sciatic nerve runs from the base of the spine (Lumbar region) right through the buttocks and supplies the hamstrings, and can be painful. Many amateur athletes do not stretch sufficiently after exercise and large muscle groups such as the quadriceps or hamstrings as well as the calf muscles (soleus, gastrocnemius) can be affected. Massaging can help to remove the lactic acid from the muscle fibres.

The feet and ankles should not be neglected. They carry the entire weight of our bodies and act as our shock absorbers. Gentle rotation of the ankles can aid flexibility and massage can help to ease any build up of fluid. Also massaging the nerve endings and reflexology pressure points over the base of the foot can almost be like a 'mini massage' in itself.

The Arms

Our arms and hands are probably the most overworked part of our body. They can reflect how we relate to the outside world. They are multi functional and are our means of expression as well as our tools of so many daily tasks. Linked via the shoulders and chest to the throat chakra, tension is common in relation to difficulties in communication or self expression. Repetitive and strenuous work is likely to cause muscular pain which can be eased through massage. Massaging the hands is intimate yet reassuring. The elderly especially could benefit from a gentle, caring hand and arm massage.

The Torso

Our deepest feelings can be contained in our torso, for example in our belly. Our essential organs - heart, lungs etc are surrounded by our rib cage. Also it is our torso that we present to others every day of our lives. Yet it can be rather a vulnerable area for massage. Gentle clockwise pressure on the lower abdomen can ease digestive disorders. Main muscles of the trunk can effect breathing and tightness can make it harder for the ribs to move. Co-ordinated breathing by practitioner and receiver can be soothing in itself and establish a strong bond.

XXXXXXXXX 16/05/12

References:

AP&P for the Massage Therapist
Natural Healing
The New Book of Massage
Anatomy & Physiology in Health & Illness
Course Massage Manual

S Fox & D Pritchard
Mark Evans
L Lidell & S Thomas
Anne Waugh & Alison Grant
A Fagg

EXAMPLE 1 OF A HALFWAY REVIEW

Halfway Review

1.

Self-awareness

Impact on me - this principle is fundamental. It is about having made the decision to research and sign up for this course in the first place. That was an enormous step and as I have now found out, the step was equally ground-breaking for everyone here. It is based on a recognition that whatever life we have been living up until this point- there was something missing. A lot of soul-searching later and I realised that I have something to give in not just a physical way but also something more subtly. I realise that this is part of an 'empty-nest' feeling, a 'loss of my own parents' impact and an awareness that I don't want to waste any precious time.

My relationship with clients - it means that I haven't arrived here lightly. I really want to be here and am fully-motivated to learn the skills and use them well for the benefit of each client.

What I wish to offer through massage - as touched on above, it will be lovely to be in a position demonstrate real care for the clients who come for massage, because they definitely will have expectations and they will be booking because they need something. It will be amazing if I can help meet that need or make a small difference.

Quality of touch

Impact on me - establishing the optimum quality of touch creates a mutual connection which is equal on both sides, which means that it isn't all about me - there are two of us. This takes some of the responsibility and autonomy and presence away from me and shares it with the client. This is a healthy 'grown-up' way to approach therapy; after all - it is their body and soul. I have considered where my boundary ends and theirs begins.

My relationship with clients - continuing this thought, this 'power-sharing' 50:50 ideal touch is educating them and their bodies to self-manage and creates a holistic awareness of themselves. They don't surrender to a therapist to be fixed, they become part of the fixing process. This way they know where their boundaries lie.

What I wish to offer through massage. By achieving a grounded, connected touch, the massage becomes a conversation, each party responding to the other.

Posture and movement

Impact on me - this is new to me, although I wish it wasn't. I have a couple of months of very basic tai chi experience, and some yoga and am very aware of posture and how important it is for maintaining the body's structural and physiological integrity. But - performing a kind of dance to give a beautiful massage is not what I expected. I know that it is going to save me though. I am older and creakier than most here and I have come to the party late. These movements are fluid and natural, and once they become second-nature my body will benefit by being supple, flexible and strong.

My relationship with clients - On every occasion during giving massage where I have 'drifted off course' and then adjusted my body position back to the correct posture whilst touching a client, they have commented saying 'ooh that feels lovely' or similar. In every case they have had their eyes closed and I've moved imperceptibly, a subtle sinking down or widening of my stance. Yet they have felt it. And in a very positive way.

What I wish to offer through massage - I need to be the best I can be physically to give the best therapy. The way the massage is received is enhanced by my good posture and free movement.

Rapport and communication

Impact on me - considering this principle makes me more self-aware, mindful. Everything I do, my body language, my words, my responses are involved to create excellent communication. If I respect and accept and remain open and non-judgemental, I can build a relationship, achieve a greater rapport and so hopefully have deeper understanding of those around me.

My relationship with clients. All of the above should prompt a kind of reciprocation, meaning that our relationship will be based on trust. By encouraging their honest feedback, and acting on it, this again helps to empower the client and know that I am receptive to what they or their body is telling me.

What I wish to offer through massage - is a flexible approach that is arrived at between us, and is always evolving in the moment if that is what is needed. Or can be a safe, warm, familiar process if that is what is needed. It is 'what is needed' that remains to be discovered through effective and meaningful rapport and communication.

2. The therapeutic relationship in holistic massage is one where the four principles above have been achieved to their greatest effect and a relationship exists where there is now a positive benefit to both the therapist and the client.

It is where each feels comfortable with the other to communicate, not as friends but through a professional regard: the client has absolute faith in the knowledge and skill of the practitioner, and the practitioner has complete respect and empathy for the client physically, emotionally and spiritually.

It is developed by following codes of conduct, keeping professionally updated and trained, and through effective communication of information by each and checking this is understood.

3. Business skills essential to a private massage business are:

financial, marketing, administrative, adaptability, knowing the market, problem-solving, good communication, familiarity with relevant technology...

I have administrative skills, some IT skills, I'm adaptable and am articulate.

I need to develop all the rest listed above.

4. see table - actions to take

* * * * *

EXAMPLE 2 OF A HALFWAY REVIEW

Halfway Review

1)

Self-awareness:

A constant reminder to be aware of my physical self, and any mental baggage that I am carrying, to leave behind and not let it interfere with the session. Using my pre and post massage rituals of centering / meditation and hand washing to get my mind and body ready. This ensures that the client has all of my attention and intention. It also ensures that I am taking care of myself in between sessions, and not letting energy from a previous client into a session with the next. The more self-aware I am, the better I am able to take care of clients. This also fits with what I want to offer through massage. Working with post-natal people who may have experienced birth trauma (physical or otherwise), I can be careful not to push my own issues on to them, and can cleanse myself of anything they have unburdened onto me during the massage.

Quality of touch:

This gives me a comfortable and clear boundary in my work and sets a professional tone which will be reassuring to clients and project the image I want people to see. It will help to gain a good reputation as a trusted professional. I will feel confident and the clients will be confident that this is a professional relationship with clear boundaries that they can rely on, particularly if they are in a vulnerable emotional state, which many post-natal people are (again fitting in with what I wish to offer, a safe space where people are taken care of in a professional manner).

Posture and movement:

Looking after my physical self, taking care not to over-reach or crowd the client by streaming / tea potting. Looking after myself so that I do not get injured and can continue to work. This will help clients in that I will be less likely to injure myself and not be available for massage. It also further creates an image of a professional therapist, with longevity and reliability for my clients, and for myself.

Rapport and communication:

This is essential to creating a good relationship with my clients, being able to be empathetic and also firm in my boundaries will help me to keep a good work life balance, and will also help my clients to know where they stand. Making sure that in building rapport I am not over sharing or going into detail that is irrelevant to them, will help them to trust me and to feel that it is safe for them to talk to me about their medical history etc. This fits right into the birth debrief / reframing trauma aspect that I want to work towards, as the more comfortable they feel, the more likely it is that they will be able to open up and trust me with their truth.

2)

The therapeutic relationship as it relates to holistic massage, is the relationship between client and therapist. It is made up of more than the words said between the two, it also consists of the touch, the ongoing back and forth of seeking and giving consent, checking in with regards to pressure etc. The way to build this relationship is by doing the things mentioned above. Ensuring that the client feels heard and also that you are keeping a professional tone, advising where needed and keeping boundaries in place so that it doesn't stray into a friendship or something else. This can be done in many ways, by being friendly but not slipping into chatting throughout the massage. Thinking before you speak – will what I am about to say be helpful / relevant to this client or do I just want to say it to sound clever or get something off my chest? It's also about the quality of touch, making sure that they are giving consent on a rolling basis, checking in to see if they are comfortable, checking pressure, requesting permission to sink deeper into tension.

3)

Essential business skills:

Good massage technique / skills

Good self-care, keeping active

Imagination and vision

Focus

Knowing your limits and when you would be better seeking the help of a professional (e.g., accountancy, social media, marketing etc.)

I have excellent massage skills, and I am self-aware enough to know that I will need to keep developing and improving by taking additional courses in pregnancy massage, deep tissue etc. I am getting good at self-care to ensure I can have a long career. I have a big imagination, and am a very creative person, so with the right help I should be able to create a good marketing pack and social media presence, I have contacts who are experts in these fields and will be able to help me. I do need help with finances as I am not very good with this. I have found a few apps that can help me to setup this side of the business, the more straight forward the better. I have ADHD tendencies and find it difficult to take on big tasks (a lot of the homework assignments have been very overwhelming to me) and I need to recognise when I am procrastinating or putting off something that needs doing because it feels too difficult. I also need to get better at self-promotion which I find awkward. This will take time and persistence.

4)

See action sheet from Manual

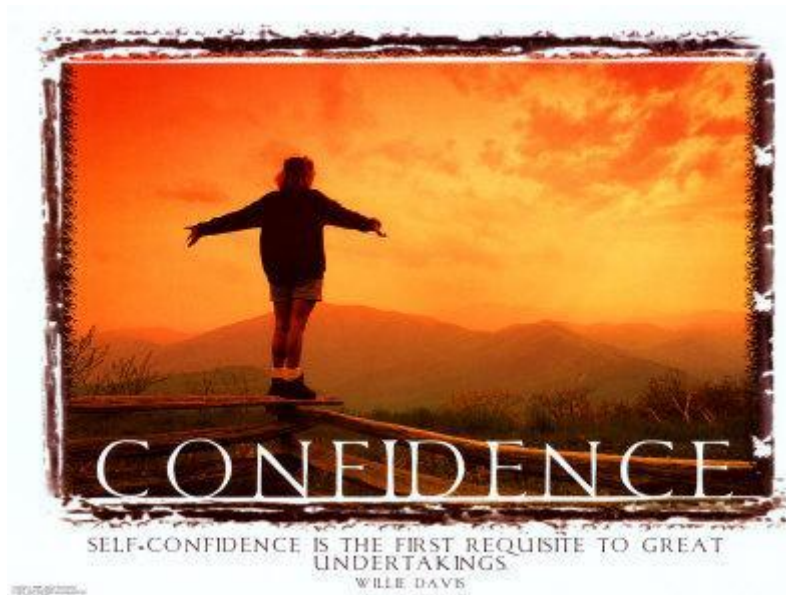
* * * * *

EXAMPLE 1 OF AN OVERALL SUMMARY

Personal assessment of development and massage skills

'Being in a group with people as just myself, not as a mother or in my role at work was very challenging. Having been a part of this course, I will now be able to join another group, in a different setting with the confidence that I do have something to offer that group and that it doesn't matter one bit that I don't know what it will be.'

'In the early days of the course, we massaged with our hands, as time went on, we have moved on to massage with our whole bodies and our energies, feeling our way around the client, working with knowledge and intuition rather than following a learnt repertoire.'



'In times of personal crisis where my confidence has been sorely tried, not by any negative massage experience but from within myself, as I lay my hands upon the client and begin to work, the messages from the body under my hands are too strong to miss and I am again confident with my abilities.'

'I have learnt so much from all my clients and massage partners, sometimes in terms of technique or strategies, sometimes more subtly about sensitivity, confidence and overall, who promotes health and healing in whom.'

I have found just recently that my body has learnt to adjust itself to my work in a way I am not always conscious of. I have recently been experiencing severe shoulder pain, even when passive. As I have had clients booked, I work with them even though I would prefer not to, not wishing to let them down. I have found that as my body works it's way around theirs, keeping itself safe with weight, balance and positioning, that it can soothe and heal itself also, if only I allowed it the chance.

I can finish a massage with greater energy and greater flexibility within my body than when I began, and no pain. A revelation.'

* * * * *

EXAMPLE 2 OF AN OVERALL SUMMARY

MESSAGE PRACTICE DIARY – SUMMARY

This diary records my progress as I have learnt, practised and developed my massage skills. The process of recording each practice session has proved extremely useful as the discipline of reflecting on each session has helped to continually identify both successes and areas that need improvement.

At the beginning of the course the diary details practice sessions that are entirely focused on learning and practising specific strokes and techniques. As my repertoire of strokes and confidence builds my sessions demonstrate more creativity and I begin to work more intuitively.

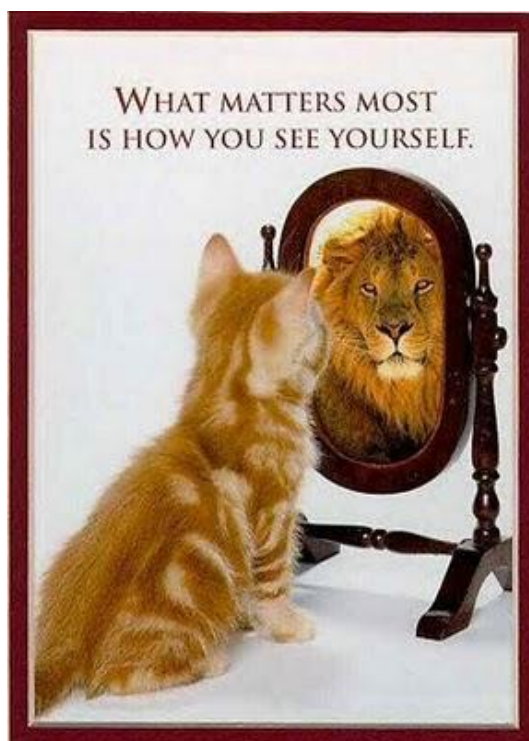


In the early stages of my practice the emphasis was very much on the physical and specific parts of the body tended to be identified for massage. I then acquired a greater appreciation of how bodywork can offer support to people on an emotional level and how valuable to the individual the space and relaxation massage delivers can be. The next building block was to realise the extent to which the physical and emotional body interact. In my more recent massages I have begun to explore the impact of the physical on the emotions and vice versa.

I have learnt how the ability to quickly build rapport and ask good open questions during the initial consultation facilitates the process of developing a treatment strategy that meets both the physical and emotional needs of your client. Prior to spending time discussing the dynamics of the initial consultation I felt under a lot of pressure due to my perception that it was entirely my responsibility to decide exactly what the massage should involve. Understanding that the client is the expert in terms of what they need and that we will collaborate in order to plan the massage together represented a significant step forward for me.

Initially I struggled to grasp the concept of the 50/50 relationship but gained an understanding of what it was through massage practice. First I became aware of the sense of having created that partnership. During my practice I have also experienced sessions during which I have become aware that I have not achieved a 50/50 relationship. These occasions have highlighted the importance of achieving an interface with my partner during the session.

In addition to the quality of touch I realise that my personal preparation and that of the massage environment will have an impact on the dynamics of the session. When I have begun a massage having had no time to relax or prepare myself I have not been completely focused from the start. However in the situation I have been amazed by how quickly any stress has disappeared and I have become in tune with the individual once we have begun to work. The experience of receiving



massage and feedback from clients has also highlighted how significantly the environment affects the enjoyment of the overall massage experience. My first practices took place on the floor. Now I am able to work on a table with the appropriate supports and fluffy towels in a softly lit room. I burn essential oils and can play music if my partner wishes.

The practices I have conducted with fellow course members have been invaluable, especially at the beginning of the course when it was great to be able to work out new strokes and practise them together. The massages I have received from professional practitioners have also been extremely useful. During these sessions I have picked up new ideas for strokes but I have also tried to switch off from learning mode in order to fully appreciate the sensation of receiving a massage. Observing how the experienced practitioner manages the session, gives practical advice and asks for feedback has also been very beneficial.



During my practice I have worked with quite a diverse group of individuals. The age of my clients ranges from early 20's to late 60's and includes both close friends and people that I do not know very well. In my special study group I worked with a number of people carrying specific physical injuries and I also worked with a pregnant lady. Four of my partners had never received a massage before and it was immensely satisfying to have introduced them to the joy of this form of bodywork and hear them express their enthusiasm and delight after the experience.

As my massage skills have progressed I have also been aware of an increased sense of awareness of my own body, posture and emotions. I have also noticed that outside the sphere of massage, I am now more receptive to being touched and am more inclined to offer my touch to others.

In conclusion I feel that this diary represents a considerable amount of learning about both how to work with others and myself. I have found the practice totally fascinating and absorbing and believe that it has been an invaluable tool in terms of facilitating my own personal development.

ASSESSMENTS WITHIN COURSE FOR MTI

BCMB FULL BODY MASSAGE (QC4)

Date:

Practitioner:

Client:



Write specific comments overleaf if you wish

| Choose √ or x as appropriate | Pr | Cl | Tu |
|---|----|----|----|
| (1) Preparation for massage: Practicals - table correct height, clean hands, oils etc ready Practitioner grounded/centred/ready | | | |
| (2) Practicals during massage: Drapes used effectively/smooth turning Supports used well | | | |
| (3) Massage technique: Full body massage performed Touch sensitive and effective Range of techniques used well Appropriate strokes for different areas Smooth, unhurried, completed in time Rhythmic and flowing | | | |
| (4) Body Use Straight back, bent knees, relaxed shoulders Moves weight from foot to foot Hands and body kept aligned during massage Breathing relaxed | | | |
| (5) Energy Grounded and balanced throughout | | | |
| OVERALL: PASS?? | | | |

MASSAGE PRACTICE DIARY ASSESSMENT (QC5)

This form is used by the Course Leaders to complete the in course assessment of your folder of work. It is externally verified by the assessors at the final practical exam i.e. 20% of folders are closely scrutinized to ensure that MTI standards are being maintained.

QC5 JOURNAL & COURSEWORK ASSESSMENT

Centre:

Practical Tutor:

Student Name:

U.I. Number:

Please complete this form for each student and submit it, with the student's journal and coursework, to the examiner at the external practical exam.

Send this form together with QC4 and QC8 to the MTI office when the student has **successfully** completed all aspects of the course.

1) Journal presentation is clear, legible and attractive.

Y/N

Comments:

2) Student has demonstrated the ability to record comprehensive case histories. Y/N

Note to tutor: Centre's differ as to where on the course this skill is taught. It is expected that clear case histories are recorded towards the end of the practical record sheets.

Comments:

3) Student has demonstrated the ability to record what occurred during the massage sessions.

Y/N

Note to tutor: Can the student record factual information, about what was done in the session, what was felt or seen, and any changes that occurred? For example: practiced all massage strokes for back; muscles on right side felt tighter than on left; client's skin got quite red between the scapula; client fell asleep.

Comments:

4) Student has demonstrated the ability to reflect upon what occurs during the sessions.

Y/N

Note to tutor: Does the student show evidence of making connections between massage and observable changes or reactions? Is there evidence of thinking about changes, or lack of change, when massaging the same client over a number of sessions? Is there evidence of self reflection, of the ability to record thoughts and feelings about what happens in sessions. For example: Client didn't feel any difference in his stiff shoulder. Perhaps I could have tried the shoulder rotations and stretches; When I first massaged Mrs X, she talked all the way through. Now, after 5 treatments, she's quiet and sometimes dozes off. I think her talking may have been nervousness.

Comments:

5) Student has demonstrated the ability to recognise and assess his/her strengths

Y/N

Note to tutor: This overlaps to some extent with the previous item but asks that the student can both assess his/her progress throughout the course and can record intentions to remedy perceived weaknesses. For example: My posture has really improved. I no longer get lower backache at the end of a massage and the strokes seem to flow better; I couldn't remember which sort of arthritis was which, and felt really unsure how best to massage her. Must look up pathology notes.

Comments:

6) Student has demonstrated the ability to recognise, assess and respond to their areas to improve. **Y/N**

Note to tutor: As above.

Comments:

7) Journal shows evidence that the student has worked with a range of clientele. Y/N

Note to tutor: This should include men and women, young and elderly clients, well and "unwell" clients with some pathology, which includes musculo-skeletal problems and skin disorders) and ideally clients from a diversity of cultural, religious and ethnic backgrounds and sexual orientations.

Comments:

8) Students' journal shows evidence that, out of a range of clients, some have been given a series of treatments. **Y/N**

Note to tutor: It is a requirement that some (the number depends on the centre) practice clients are treated over time, for a minimum number of massages, and that the practical record sheets reflect progression, or lack of it, for these clients.

Comments:

9) The journal shows evidence that the student has demonstrated knowledge and awareness of approaches to working with clients presenting with and/or living with mental health and/or neurodiversity. **Y/N**

Note to tutor: This should be included in the massage journal in the form of: recorded reflective practice and/or reflective essay or other relevant assignment.

10) Student has completed a minimum of:

| | | |
|----------------------------|---|------------|
| Holistic massage | 40 hours massage given and 10 received, or | Y/N |
| Indian head massage | 25 treatments - minimum 5 clients | |

10) Student has attended three hours' of supervised clinic sessions and recorded the treatments given Y/N

11) Journal shows critical appreciation of received massage. Y/N

12) Student has demonstrated an understanding of professional practice management, or a date is given when this will be completed: Y/N
...../...../.....

Note to tutor: please reference example/s of how the student has evidenced this. E.g. business plan, marketing strategy to attract particular clients. Intentions for future massage practice if student does not intend to go into business.

13) Student has completed all other required coursework to a satisfactory standard. Y/N

Journal satisfactory (all 12 items ticked Yes) Y/N

Recommendations:

Course Tutor _____ Date: / /
Signed

External Practical Examiner _____ Date: / /
Signed

* * * * *

ASSESSMENTS BY MTI AT END OF COURSE

ANATOMY, PHYSIOLOGY AND PATHOLOGY EXAM

Guidelines and Marking Policy

Length of exam: 3 hours; 10am – 1pm

REGISTERING STUDENTS FOR AN EXAM

Entries for the APP exam are finalized 30 days before the exam date. In practice, that usually means in BCMB that we make a final decision during Workshop 9 – when you have had your mock exam marked.

EXAM FEES

| | |
|--|----------------------|
| Exam fee | £80 |
| Resit | £80 |
| Student is registered but fails to sit the exam | No refund |
| Student cancels no less than 14 days before exam | £40 cancellation fee |

INVIGILATION

It is the training centre's responsibility to arrange a venue and invigilator and to pay the invigilator's fees. Exam papers are to be sent to the invigilator or the centre's administrator.

VISUALLY IMPAIRED/SEVERELY DYSLEXIC STUDENTS

Students who are visually impaired or severely dyslexic are entitled to an oral exam. If this applies to you, let us know **as soon as possible**. BCMB will organise a separate examination room and an oral invigilator; MTI will pay the training centre £60 towards the cost of oral invigilation, on receipt of an invoice.

STUDENTS WHOSE FIRST LANGUAGE IS NOT ENGLISH

These students are entitled to use an English/other language dictionary.

PAST EXAM PAPERS

Copies of past exam papers are available to students to download from the Members Area of the website: www.massagetraining.co.uk.

MARKING POLICY

| | |
|----------------|-------|
| Maximum marks: | 100 |
| Pass: | 65 |
| Borderline: | 60-67 |

All borderline papers are sent to a moderator for second marking.

Papers are marked as pass or resit (there are no credits given).

Examiners are given a marking scheme (by the person who sets the exam paper), which sets out the information/answers expected and how marks are to be allocated.

Students are told their mark and are given feedback on overall strengths and weaknesses in their paper. For students who need to resit the exam, where appropriate, the examiner will suggest areas on which to focus or areas that need further study.

Students will receive their exam results at latest 6 weeks after the exam.

MARKING POLICY - GENERAL PRINCIPLES

1. Absolutely correct spelling and grammar are not essential, as long as the sense of the answer is communicated. Common (permissible) spelling errors are: a) incorrect vowels b) use of single consonant for double or vice versa c) phonetic spellings (e.g. "Dawsae" for "Dorsi"). Two-word names can be in either order (e.g. "Tibialis Anterior" or "Anterior Tibialis").

Half a point will be deducted for: a) one word incorrect of a two-word name b) missing or additional syllables (e.g. "Elevator Scapulae", "Lat-imusDorsi", "Gluteus Maxismus") c) incorrect ending of an otherwise correct name (e.g. "Trapezium", "LatissimumDorsis").

2. Some questions merely ask for factual information gained from study, others ask the student to apply this understanding to the concerns of massage, stress, etc. (e.g. contributions to particular muscle tensions).
3. All the material in the exam is based on the "Anatomy, Physiology and Pathology for the Massage Therapist" book.

MARKING POLICY - SECTION BY SECTION

Section 1: Long answer question

1. There are 3 pairs of questions and students are asked to answer 1 from each pair. 3 questions in total to be answered, worth 15 marks each.
2. Each question will ask for some anatomy & physiology information, followed by some pathology information and the considerations for massage. Questions should be answered as fully as possible, putting down as much relevant information as students know. If preferred, answers can be given in note form and labelled diagrams can be used to show knowledge.
3. Examiners will choose the 15 main points that are needed to answer the questions and award 1 mark for each of the points covered in the answer. Where there are more than 15 points to be covered, ½ marks will be apportioned to some or all of them.
4. Each of the necessary points may have more than one piece of information (e.g. in an answer on bones, the examiner might assign a total of 1 mark to the name compact bone and a word that indicates that it is solid compared to spongy).
5. Points will be assigned for a diagram if it is specifically asked for in the question, or if it seems essential to the answer.

1st pair of questions: Bones, joints and muscles - types, structure, functions, aerobic and anaerobic muscle physiology, pathology and considerations for massage.

2nd pair of questions: Physiology of stress and relaxation - the stress/fight or flight response and the relaxation response - how these are controlled by the autonomic nervous and endocrine systems. The effects of chronic stress and the benefits of massage in relation to these.

3rd pair of questions: Skin - detailed structure and functions, pathology and considerations for massage. Other systems (cardiovascular, lymphatic, immune, respiratory, digestive) - basic overview of structure and functions, pathology and considerations for massage.

Section 2: Short answer question

1. 35 short answer questions, worth 1 mark each.
2. Questions cover all systems and ask for straightforward factual information about anatomy, physiology, pathology and massage considerations. Questions on muscle actions will be included.

Section 3: Identification of bones and muscles

Students will be asked to identify 20 bones and muscles from a diagram provided. Worth 1 mark each.

* * * * *

The next section is a sample exam paper. Please note that in the BCMB course, we provide a comprehensive revision guide in Workshop 8 of the course, which spells out exactly what you need to know in order to succeed at this exam.

There are 3 example papers available on the MTI website – just log in using your student log in details, which you have been sent by MTI's national office.

* * * * *

EXAMPLE EXAM PAPER

Time allowed: 3 hours

SECTION 1

Answer three questions, one from each pair. You may use diagrams / illustrations where appropriate.

1 Answer either a) or b) **(15marks)**

a) Describe the structure of a typical long bone. **(5 marks)** Explain the function of each of the parts **(2.5 marks)**
(½ mark for each label on an accurate diagram if no other information given).

Describe how you would massage someone, with reasons, if they had the following conditions

a. osteoporosis b. fracture c. kyphosis **(2.5 marks each)**

b) Explain how skeletal muscle functions in each of the following conditions using as much detail as possible.

a. aerobic conditions **(6 marks)**

b. anaerobic conditions **(3 marks)**

What happens in a muscle during muscle fatigue? **(3 marks)**

How could massage help speed recovery time when muscle fatigue has happened? **(3 marks)**

2 Answer either a) or b) **(15marks)**

a) Explain the functions of the following in the stress response **(A diagram of the stress response with no attempt to connect information to the question- ½ mark for relevant facts)**

Describe the possible effects of long-term stress on the following systems **(1.5 marks each)** and explain how massage might encourage these effects **(1 mark each)**

Explain how massage stimulates the PNS **(2 marks)**

b) Explain the role of the nervous system in the stress response. **(8 marks)**

STRESS RESPONSE (diagram acceptable if all parts clearly labelled and relations between parts correct)

3 Answer either a) or b) **(15marks)**

a) Describe what happens to the nutrients in food on a plate as that food travels to cells and tissues. Refer to the digestive **(5 marks)** and cardio vascular systems **(5 marks)** in your answer.

Describe how you would massage someone with the following conditions and give your reasons **(2.5 marks each)**

- a) Constipation
- b) IBS

b) List the structures found within the dermis of the skin **(3 marks)** and explain the functions of each **(6 marks)**

(Diagram with label only 1/2 mark each label)

Describe how you would massage someone with the following conditions and give your reasons **(2 marks each)**

- a) Ringworm
- b) Psoriasis
- c) impetigo

* * * * *

SECTION 2

Please attempt to answer each question, writing your answers in the spaces provided.

1. Fill in the missing words:

anterior - posterior

superior -

medial -

2. What is the function of osteoclasts?.....

.....

3. What is the main difference in structure between a cartilaginous joint and a fibrous joint?

.....

.....

4. What is a function of hyaline cartilage?

5. The function of synovial fluid is to and the joint.
(Fill in the missing words.)

6. Which of these are conditions that affect the skeletal system (underline)

Kyphosis, dementia, rickets, osteoporosis, cystitis, fibrositis, Crohn's disease.

7. Name one difference between skeletal and cardiac muscle

.....

8. Why do muscle cells have more mitochondria than other cells ?

.....

9. What are the names of the two protein myofilaments found in muscle cells?

a).....

b).....

10. What is the difference between motor and sensory nerves?

.....

11. What is the main function of the cerebellum?.....

12. What is a nerve cell called?.....

13. Which of the following are disorders of the nervous system (underline)

Epilepsy, sciatica, psoriasis, multiple sclerosis, tuberculosis, neuralgia, piles.

14. What is the name of the membrane(s) lining the thoracic cavity?

.....

15. Why is the left lung smaller than the right one?

16. Across which structure in the lungs does gaseous exchange take place?

.....

17. Name the main muscles involved in respiration:

a).....

b).....

18. Which branch of the autonomic nervous system is active when breathing slows down?.....

19. Which of the following are disorders of the respiratory system (underline)

Oedema, bronchitis, thrush, emphysema, asthma, eczema, pharyngitis, lice.

20. What is the function of antibodies?

21. List the four signs of inflammation

a).....

b).....

c).....

d).....

22. What are your massage recommendations for inflammation and why?

.....

23. Name a condition that adversely affects the lymphatic system

.....

24. What is the function of the sinoatrial node?

25. What is the function of the ureters?

26. Name three functions of the kidneys?

a).....

b).....

c).....

27. Which of the following are disorders of the urinary system (underline)

Colitis, gout, cystitis, hepatitis, indigestion, neuralgia, incontinence, renal failure

28. Where is testosterone produced?

29. Which of the following are disorders of the female reproductive system?
(underline)

Fibroids, prostate cancer, period pain, meningitis, gallstones.

30. Name two structures made of dense connective tissue:

a).....

b).....

31. Where in a cell would you find the genes/DNA?

32. What is homeostasis?.....

33. Which system provides the body with defence mechanisms against attack and disease?.....

34. Name two locations of lymph nodes

a).....

b).....

35. What is an effect of oxytocin?

.....



SECTION 3

Using the diagrams given, answer the following questions.

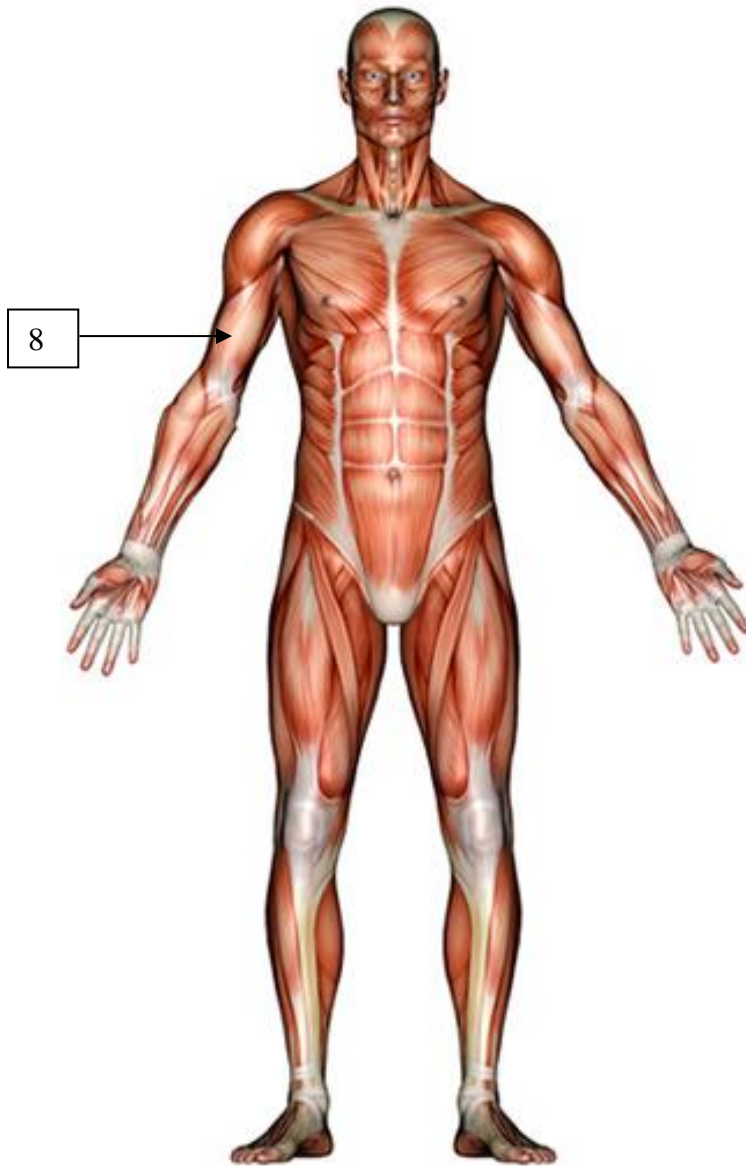
(2 marks for each question)

Draw an arrow to indicate/identify the structure and number your arrows where needed.

1. Identify with an arrow and number
 - a. a fibrous joint (example)
 - b. a ball and socket joint
 - c. a hinge joint
2. Name two bones that are irregular bones.
 - a.
 - b.
3. What bone does the clavicle articulate with at a) the medial end and b) the lateral end?
 - a. Medial....
 - b. Lateral.....



4.
 - a. Identify a flat bone
 - b. What is the name of this bone?.....
5. Name two bones that make up a pivot joint.
 - a.
 - b.



6. Name two muscles of mastication

a.

b.

7.

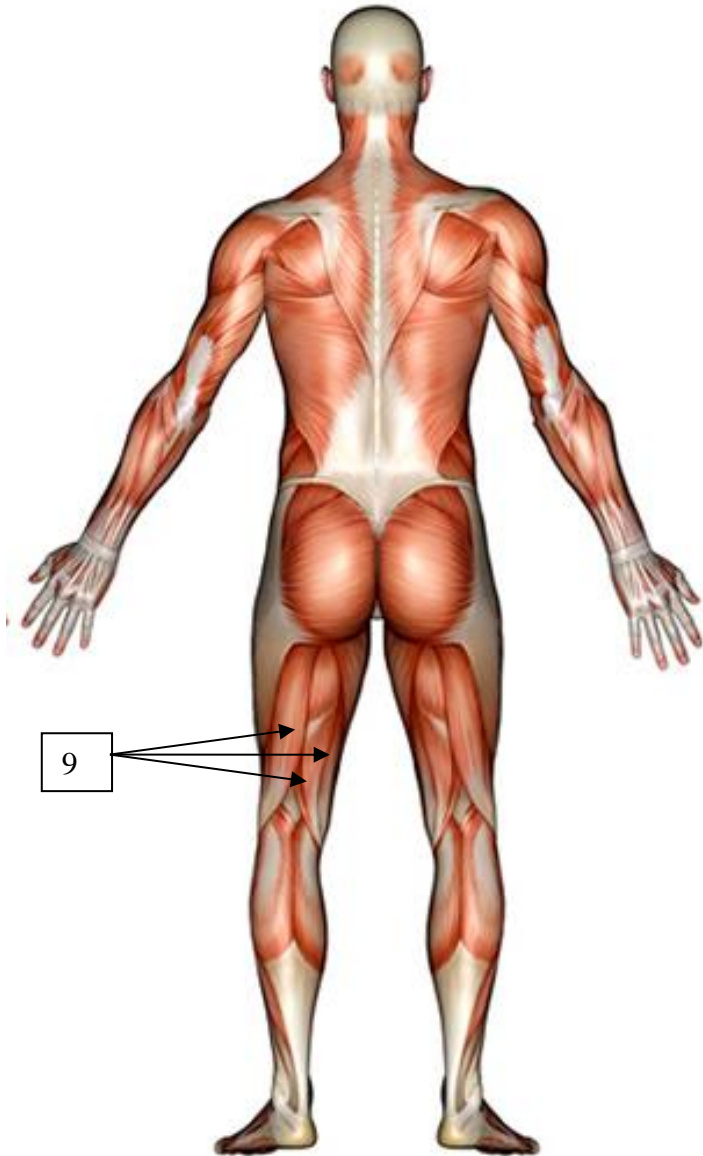
a. Identify a muscle that abducts the arm.

b. What is the name of this muscle?.....

8.

a. Name the muscle numbered.....

b. Name the antagonist of this muscle.....



9. Describe two of the actions of this muscle group

a.

b.

10. Name two muscles that attach to the illiotibial band

a.

b.

EXTERNAL PRACTICAL EXAMINATION GUIDELINES

Registering Students for an Exam

Form QC7 Practical Exam Booking Form should be completed and sent to the Exams Administrator at least 30 days before the exam date.

Exam Fees

| | |
|---|---|
| Exam Fee | £75 |
| Resit | £75 |
| Student is registered but fails to sit the exam | No refund |
| Student cancels less than 14 days before the exam | No refund |
| Student cancels after QC7 received by MTL office, but more than 14 days before the exam | £40 cancellation fee (and MTL keep the remaining £35 towards the student's next exam so that they only pay £40 for their next exam) |

Length of Exam: 1 hour

- 45 minutes – for the client consultation, treatment and aftercare (approx. 30 minutes hands-on massage time)
- 15 minutes – for feedback from the examiner

Examiners

Examiners are arranged by the Exams Administrator following submission of QC3 Student Registration at the start of the course. Examiners for resits will be arranged following submission of form QC7. For and assessor to travel outside their area there must be 3 candidates entered for the exam. Where there are 3 or fewer candidates the centre should arrange for the candidates to join the exams at another centre.

Documentation to be available at the exam

Forms QC4, QC5 and QC8 must be available for each student, together with all course work, to show the practical examiner. It is the responsibility of the centre and the student to ensure everything is present. In the event of course work not being complete the student will not be allowed to sit the exam and will be deemed to have failed to sit the exam and need to reschedule. In the event of the forms not being present the exam may not be able to take place or may be postponed. The examiner will assess 1 in 5 massage journals and sign the appropriate paperwork. Students resitting the exam do not need to show these forms or course work.

Clients

Must be aged 18 or over.

Format of the exam

1. The student meets an unknown client, takes a case history and gives an appropriate massage treatment.

2. The whole process is observed by the examiner, who will usually tell the student their result immediately at the end of the exam. The examiner will give detailed feedback on the observations recorded. Student who do not pass will be told why and will be offered a clear strategy on what improvements to make in order to pass next time. Occasionally, in a borderline case, an examiner may tell the student the result later, but no longer than 2 weeks.

The Exam

MTI is committed to a “person- centred” approach in which the way in which the massage is done is as important as the technical skills themselves. Hence the attitude displayed by students is very important and the examiner will be looking for this.

Broadly, it can be described in terms of two words – **compassion and awareness**. Students demonstrating these qualities are centred, grounded and aware of themselves as well as of their clients. The examiner will pay attention to such aspects as the student's tone of voice, body language and the atmosphere generated within the room.

In summary, students must show a satisfactory standard in the following areas:

- Client rapport
- Case history
- Information to client
- Client care
- Own body use
- Massage skills

HOLISTIC MASSAGE MTI EXTERNAL PRACTICAL ASSESSMENT

Note to examiner:

Examiners should fill in the spaces against each skill with a "√", "x" or a "n/a" if not applicable. Based on this assessment, the examiner should form an overall opinion by considering the 8 questions in the summary section at the front. In order to pass a student, the examiner must answer all 8 of these "yes". If the answer to any one of these is "no", the student should be asked to resit.

After the exam, the examiner should give detailed feedback to the student based on the observations recorded. Students who do not pass should be told why and offered a clear strategy on what improvements to make in order to pass in the future. Occasionally, in a borderline case, an examiner may tell the student of the result later.

Note to Centre:

Please retain this form until the course has been successfully completed for this student, and then send to the office with the QC4, QC5, and QC8 to prompt certification.

UI No.....Name.....

Centre.....Date.....

Practical Tutor.....Practical Examiner.....

RESULT: PASS/RESIT

Summary:

| | | |
|----|---|-----|
| 01 | Did student exhibit a clear, friendly professional manner? | Y/N |
| 02 | Did student create rapport with client? | Y/N |
| 03 | Did student take an adequate case history? | Y/N |
| 04 | Did student make a clear assessment of client's needs? | Y/N |
| 05 | Did student give a massage that met those needs? | Y/N |
| 06 | Did student demonstrate competence in an appropriate range of massage skills? | Y/N |
| 07 | Did student demonstrate effective body use? | Y/N |
| 08 | Did student give appropriate aftercare to client? | Y/N |

Feedback to student:

Brief here and use separate sheet for more detailed feedback

| Detailed assessment | | |
|---|--|--|
| A. Setting the environment: <u>Note to examiner:</u> Many exam settings preclude the possibility of the student having much effect on the room. This must be taken into account. Student demonstrates ability to provide appropriate environment for massage by: | | |
| 01 | arranging equipment (massage table, chairs etc) in a manner that enables easy use by student and client | |
| 02 | arranging lighting, ventilation and heating in a manner that provides maximum comfort and safety | |
| 03 | arranging towels/drapes in a manner that enables easy use by student and client | |
| 04 | adding individual items to enhance atmosphere of room | |
| 05 | taking into account good practice around hygiene procedures | |
| B. Personal preparation: Student makes appropriate personal preparation for massage through: | | |
| 01 | being centred and ready for work, physically and mentally | |
| 02 | personal hygiene e.g. short clean nails | |
| 03 | appearance, appropriate and in line with MTI recommendations | |
| 04 | clothing neat, easy to move in, and close fitting. Hair tied back if necessary | |
| 05 | Where indicated the student wears appropriate PPE e.g. a mask when working around the face. | |
| C. Establishing rapport with client: Student demonstrates ability to establish rapport with client by: | | |
| 01 | meeting and greeting in a friendly manner | |
| 02 | listening to client with interest and sensitivity throughout the initial interview | |
| 03 | using eye contact as appropriate | |
| D. Interviewing skills during case history: | | |
| 01 | student explains why case history is needed (eg "I'd like to check a few things so I can give the best possible massage and everything you share with me is confidential") | |

| | | |
|---|---|--|
| | | |
| 02 | student obtains information from client using <ul style="list-style-type: none"> • direct questions (e.g. "what is your address?") • open questions (e.g. "what can I do for you?") • conversational techniques (e.g. "how are you today") • a combination of the above | |
| 03 | student shows s/he has absorbed information from client through <ul style="list-style-type: none"> • feedback • follow-up questions • not asking questions twice | |
| 04 | student refrains from inappropriate personal disclosure ("oh yes, I get that too) and irrelevant comments | |
| 05 | student pays good attention to client throughout interview | |
| E. Taking an adequate case history: Student demonstrates the ability to obtain the following information (not necessarily in this order) and taking into account differences between Centres. | | |
| 01 | name, date of birth, address, and telephone number of the client | |
| 02 | reason for wanting a massage/how client is feeling today | |
| 03 | previous history of massage | |
| 04 | an appropriate medical history, including covid 19 screening | |
| 05 | current medical treatment and medication | |
| 06 | current complementary therapy treatments, including counselling/psychotherapy | |
| 07 | current occupation(s) and relevant leisure activities | |
| 08 | relevant lifestyle information | |
| F. Planning an appropriate treatment: | | |
| 01 | student asks client if s/he would like any specific areas worked on | |
| 02 | if client mentions aches and pains during interview, student follows this up by asking for further information eg, exactly where/when does this occur i.e. the nature of discomfort | |
| 03 | if client has no clear requests about treatment, student asks where client holds stress/tension in body | |

| | | |
|----|--|--|
| 04 | student relates information about occupation and lifestyle to possible treatment options | |
| 05 | student checks information about client's current psychological/emotional state and relates this to possible treatment options | |
| 06 | student relates information about client's medical history, where appropriate, to knowledge of pathology and massage, and makes decisions about safe treatment options | |
| 07 | student makes a clear proposal to the client about the intended massage treatment (i.e. both where and how to work) with reasons for his/her decision | |
| 08 | student obtains verbal consent from client | |

Treatment agreed with client:

Parts of body:

Type of massage (relaxing, stimulating etc):

Reasons for above:

G. Giving clear information to client before treatment:

Student gives the client the following information clearly

| | | |
|----|---|--|
| 01 | clear agreement on what clothing, jewellery, spectacles etc to remove and why | |
| 02 | where to undress and put clothes | |
| 03 | what the student will be doing while client undresses | |
| 04 | what to do with towels and whether to lie down or not | |
| 05 | requests for feedback during massage e.g. about comfort of strokes | |

H. Support & drape technique:

Student demonstrates competent use of supports and drapes during massage by

| | | |
|----|---|--|
| 01 | placing support under ankles, if needed, client lying prone | |
|----|---|--|

| | | |
|--|--|--|
| 02 | offering support under knees, client lying supine | |
| 03 | using supports when obviously needed (e.g. pregnant or injured client) | |
| 04 | offering additional supports for comfort if needed (e.g. under head or chest) | |
| 05 | negotiating with client about placement and height of supports | |
| 06 | initially placing drapes on body in such a way to provide warmth and covering for the client and ease of movement of the student | |
| 07 | moving drapes during the massage smoothly and confidently | |
| 08 | moving the drapes during the massage without exposing parts of the body that could cause embarrassment to the client | |
| I. The massage treatment: Student demonstrates the ability to perform client-centered massage by | | |
| 01. Using the strokes and techniques listed, that are appropriate to meeting the clients' needs: | | |
| Resting hands on: (stillness, holds) | | |
| Effleurage strokes: (spreading oil, tuning in, palpating, connecting other strokes, completing an area E.g. stroking, feathering, draining, superficial and deep) | | |
| Petrissage strokes: (to move soft tissues around E.g. heel of hand kneading, wringing, pulling, circling, knuckling.) | | |
| Deeper work: (To work more deeply into soft tissues. E.g. compression, Trigger point therapy (NMT), deep effleurage, deep knuckling.) | | |
| Tapotement/percussion: (to energise and soften tissues. E.g. hacking, cupping, pummelling, tapping.) | | |
| Vibration: (to shake tissues. E.g. shaking, rocking, fine vibration.) | | |
| Passive joint mobilisations: (basic movements to increase range of movement at joints e.g. passive movements, mobilisations) | | |
| Stretches: (basic stretches in flexion and extension) | | |
| 02 | combining an appropriate variety of the above strokes and techniques in smooth flowing sequences | |
| 03 | timing each part of the treatment in order to finish in the set time | |

| | | |
|--|--|--|
| 04 | staying present and attentive during treatment | |
| 05 | Being mindful of the direction of air flow between client and therapist and make any adjustments accordingly | |
| J. Relevance of massage to stated treatment option: | | |
| 01 | student performs the massage treatment that was agreed with the client beforehand | |
| 02 | any change in the previously agreed massage treatment plan should be: <ul style="list-style-type: none"> discussed with the client, with reasons and agreed with the client | |
| K. Body Use and Palpation | | |
| 01 | Posture and Movement: <ul style="list-style-type: none"> wide stance, moving from hips, straight back aligning hands and body to deliver pressure using body posture, weight and movement to vary pressure and depth of massage maintaining steady and regular breathing | |
| 02 | Hand use and Other Massage Tools: <ul style="list-style-type: none"> Variety of contact used – hands, knuckles, forearms, elbows – as appropriate and with sensitivity Supporting working hand/thumb/wrist/ forearm with other hand as required | |
| 03 | Palpation skills: <ul style="list-style-type: none"> Student is able to feel and adapt to client's soft tissues Adapting to body contours Feeling and adapting to tissues Identifying and responding to areas of tension with sensitivity Applying deeper pressure as appropriate and with sensitivity. | |
| L. Verbal interaction during treatment: During treatment student | | |
| 01 | negotiates with client about extra covering, if appropriate (e.g. drapes on exposed feet) | |
| 02 | asks client about general warmth and comfort | |
| 03 | informs client about movement of drapes, if appropriate | |
| 04 | communicates with client about moving limbs or head, if appropriate | |

| | | |
|--|---|--|
| 05 | seeks feedback, verbal and non-verbal, concerning pressure and speed of massage | |
| 06 | responds to verbal & non-verbal feedback in an appropriate way | |
| 07 | Amount of communication is appropriate to treatment and client's needs (student is neither completely silent, or excessively chatty) | |
| M. Sensitivity to client's needs (see also section on client care): Student demonstrates sensitivity to the client's needs by noticing and acting on | | |
| 01 | physical signs not mentioned at interview e.g. cuts, bruises | |
| 02 | signs of physical discomfort in the client as a result of massage, temperature change or position on table | |
| 03 | changes in client's emotional state | |
| 04 | client falling asleep | |
| N. After-care and advice to client: Student demonstrates after-care by | | |
| 01 | waking client appropriately | |
| 02 | communicating to client what s/he is expected to do now treatment is finished (e.g. 'get up slowly, get dressed and we'll have a chat when I return') | |
| 03 | allowing client time to dress in privacy | |
| 04 | requesting information about the effect of massage treatment (e.g. "how is your neck feeling now?") | |
| 05 | giving information about any relevant observations made during treatment (eg changes in muscle tone) | |
| 06 | giving information about possible effects of treatment | |
| 07 | offering suggestions for further massage treatment | |
| 08 | offering suggestions for alternative treatment, if appropriate (e.g. see a doctor about a skin rash) | |
| 09 | explaining, demonstrating and/or guiding client in appropriate self-care techniques | |

After the exams are over – Workshop 11 – we spend 2 days marking the end of the course and looking to the future. We will consider such issues as joining a Professional Association, getting insurance, legislation and Codes of Ethics. Further resources are made available at the time, but here is some important information to help you get orientated:

PRACTITIONER ASSOCIATION & INSURANCE

SIGNIFICANCE

Joining the MTI Practitioner Association is an important statement for the new practitioner of his/her professionalism. It also enables MTI to exert more influence over the development of national training standards for massage. Basically, the more registered practitioners we have, the more leverage we have over the development of national policy. Hence student membership of the Association's Register is now automatic for all students enrolling on MTI courses. They may also apply for student insurance whilst in training, which is strongly recommended.

STATUS AND ACCOUNTABILITY

Since 1993, MTI has operated a Practitioner Association (PA). In recent years, the PA has become clearly embedded within the structure of MTI, being governed by a Council of Practitioner Representatives from the regions. Each regional rep has a team of volunteers who organise events within their area – talks, workshops, charity or other promotional events. This provides a wonderful resource for MTI members within their own locality and helps strengthen and develop the sense of community within MTI. The PA Council is overseen by the MTI Board. There are other Councils within MTI, governing MTI Schools and exams respectively. The MTI website has automatic renewal of membership and listing of members' details in the "Find a Practitioner" section. You can add a personalized web page at no charge!

COSTS

BCMB students are automatically student members of the Practitioner Association, the fees involved are incorporated in your course fees. Joining as a practitioner member, once qualified **costs around £62pa** (a discount is given for first year after graduating). This is done online via the MTI website.

Insurance costs should be added to this. **This is also around £60-65pa** under the MTI Block Insurance Scheme. These total costs compare favourably with those of other Professional Associations and with the costs of getting insurance if NOT a member of a Practitioner Association.

BENEFITS OF BELONGING TO THE PRACTITIONER ASSOCIATION

Membership of the PA entitles students and practitioners to:

1. apply for insurance through the MTI group insurance scheme
2. access to the Members Area of the MTI website, from where past exam papers and guidelines for marketing, running a practice as well as working with clients can be found.
3. receive regular updates of events in their local area, via the regional rep structure. Also information on events in other areas
4. receive further information via regular social media updates

5. most local events are free to MTI members and can count towards your CPD (see next section). By attending regularly, it is possible to accrue one's 18 hours of CPD at no further cost – a very good use of the membership fee!
6. be listed on the "Find a Practitioner" section of the MTI website (once qualified)
7. add the title "MTI Registered Practitioner" to their publicity (once qualified).

STUDENT INSURANCE

BCMB requires all students to have insurance. The good value MTI block scheme insurance with Balens is available. BCMB will provide details of how to obtain this. This will set up your insurance for the year. Students also sign the MTI Student Code of Ethics.

STUDENT/TUTOR LIABILITY

The underwriters have advised that, during their 50 hours of massage practice, students carry the same professional and personal liability as they would if already qualified. The fact that they are not charging a fee has no relevance. Hence, a client could make a claim on the grounds of professional incompetence. If it can be proved that this was due to poor teaching, then the liability will fall to the tutor concerned; otherwise the student will be liable. For this reason, BCMB requires their students to take out insurance.

PRACTITIONER MEMBERS

Practitioners must agree to be bound by the MTI Practitioner Code of Ethics, Complaints and Disciplinary Procedures and, after their first year of membership, to undertake further training of 18 hours per year. This is known as Continuing Professional Development. See next section of this Handbook.

* * * * *

CONTINUING PROFESSIONAL DEVELOPMENT GUIDELINES

INTRODUCTION

MTI operates a policy of Continuing Professional Development (CPD) for all its Registered members. In keeping with national policy laid down by the Complementary and Natural Healthcare Council (CNHC), this policy will:

1. Enable the Massage Therapist to develop and enhance his/her skills, both in practice and theory.
2. Benefit and protect the public by having a more informed and learned therapist.

POLICY

With effect from 1 January 2006, MTI practitioners must complete a total of 18 hours of CPD per calendar year, subject to the following requirements:

1. At least half of the 18 hours must be in a shared learning environment. For MTI purposes, a "shared learning environment" is defined as a training course or a supervision group. All 18 of the hours may be accumulated in this way.
2. The remaining hours may also be accumulated through activities relevant to the development of a massage practice. These include attending branch meetings, research and teaching preparation.
3. The MTI Regional Council has taken on much of the day to day decision making for the MTI Practitioner Association. Attending regional meetings by practitioners will count towards their CPD hours total.

Where there is no regional structure in place yet, this will not be possible. Members in these regions will need to include some evidence of their personal contribution towards the development of MTI eg attending the Annual Conference; responding to emails; attending a regional meeting nearby. These activities also count towards the member's CPD.

Detailed guidance on these requirements is given below.

4. MTI practitioners must keep a portfolio of evidence of their CPD activities for the year. A form summarising this is attached. There will be spot checks by the MTI Registrar on CPD portfolios in January - at the time of practitioners renewing their registration.

The portfolio should contain such material as copy certificates, research summaries, and preparation work for presentations, receipts or tickets of attendance to conferences, workshops or lectures. Workshop leaders should be asked to provide certificates of attendance.

DEFINITIONS

1. **Seminar/lecture/workshop.** This may be any course designed to support the professional development of a massage practitioner. This includes: massage, aromatherapy, all other forms of bodywork, healing, counselling skills, business management and marketing.
2. **Professionally Facilitated Supervision.** This may be on a one to one basis or within a supervision group. A supervision group is a medium for the discussion of professional issues relating to massage therapists' work. This can cover many topics such as case studies, anatomical study, practice management and personal development issues relating to the practitioner's

professional activities. Peer-based supervision groups are not covered by this heading but may be counted under the "branch meeting" heading (see no. 7 below).

- 3. New Qualification.** A new qualification in a massage related field eg degree or further professionally examined training. This will carry a maximum of three years CPD hours i.e. 54 hours. To qualify for this exemption, the course must consist of at least 108 hours of study and practice. Practitioners should keep information on the course syllabus, study and examination requirements as well as their certificates of qualification.
- 4. First Aid.** MTI practitioners must maintain a current First Aid qualification. The minimum level is the "Appointed Person's Qualification", which requires a minimum of 4 hours training. This may be counted towards the CPD total.

NB. Items 1 to 4 above are counted by MTI as "shared learning environments." Half of the 18 hours must be accumulated in this way.

Other activities may also be counted for the remaining hours. These are:

- 5. Research.** This is defined as individual research leading to a clearly defined outcome e.g., an article being published in a reputable massage journal. It may count for a maximum of 6 hours CPD in any one year.
- 6. Extended research** and preparation leading to the publication of a book concerning areas in the field of massage will carry a maximum of three years CPD hours i.e. 54 hours.
- 7. Individual Study.** This is defined as individual research into relevant areas of Massage without a clearly defined outcome. Practitioners should keep evidence in the form of notes, bibliographies etc. It can count for a maximum of 4 hours CPD in any one year.
- 8. Attendance at local branch meeting.** Evidence here should take the form of an attendance confirmation, signed by the local branch secretary. For these purposes, "branch" refers to a local massage association eg the Northern Massage Association or Creating Massage Community based in the Bristol/Bath area.
- 9. Course preparation and presentation.** This applies to practitioners who are NOT tutors recognised by the MTI. It covers informal teaching situations such as a presentation to a local group. Evidence should be kept in the form of teaching notes, handouts and publicity materials. MTI tutors may NOT claim CPD hours for courses they deliver as part of existing professional activities.
- 10. Personal development courses** such as yoga, dance, Tai Chi or personal psychotherapy may be acceptable provided the practitioners concerned can explain how such activity has helped the development of their massage practice. Evidence should be kept in the form of confirmation of attendance plus a letter explaining the activity's usefulness. Practitioners may only claim a single activity for one year and for a maximum of half their CPD hours.

NB. Attending local meetings, talks and workshops organised through the MTI regional structure – see previous section of Handbook - is a highly efficient and economical way of accruing CPD hours.

CODE OF ETHICS FOR REGISTERED PRACTITIONERS

1. INTRODUCTION

The Massage Training Institute (MTI) is committed to ensuring that the highest standards of teaching and practice are maintained at all times. It has been set up by a group of experienced trainers and practitioners.

2. THE PRACTITIONER'S RESPONSIBILITY TO THE PROFESSION AND COLLEAGUES

- 2.1 Practitioners must ensure they are competent to give massage in the best interests of the client. If this is not possible, through ill health - mentally or physically - the practitioner should refrain from practising.
- 2.2 Practitioners should be aware of their limitations and refer clients to other appropriate qualified practitioners where their requirements appear to be outside the scope of holistic massage.
- 2.3 Practitioners should not make any kind of medical diagnosis of or prescribe treatment for a client unless qualified to do so.

Practitioners shall ensure that clients are aware of the complementary nature of the treatment and advise them to seek medical help wherever appropriate.

Practitioners must be aware of contra-indications to massage and have a responsibility to ask clients about any medical treatment and medication, and to be able to consult the GP, if appropriate.

If a patient is referred by a medical practitioner, the medical practitioner shall remain clinically accountable for the client and for any treatment given by the massage practitioner.

- 2.4 Practitioners must not make any claims to cure.
- 2.5 Practitioners should monitor their ongoing development and update their knowledge through professional literature, courses and supervision.
- 2.6 Practitioners should be aware of the laws prohibiting complementary therapists from treating certain medical conditions. It is an offence to massage a woman in childbirth, or for ten days thereafter, without the consent of a medical practitioner.

3. PRACTITIONER/CLIENT RELATIONSHIP

- 3.1 The practitioner's obligation to clients is based primarily on the contractual relationship between them. Practitioners should explain the nature of the contract in particular the duration of treatment, amount of fees (including cancellation fees) and method of payment.
- 3.2 Practitioners should be mindful of the responsibility they have to their clients; shall not abuse the trust placed in them and shall at all times act with integrity.
- 3.3 Practitioners must ensure that confidentiality is maintained. Consent of the client must be obtained, if any information is disclosed, except in the case of professional supervision or when the law requires this.
- 3.4 Practitioners must not engage in sexual activity with their client.
- 3.5 In the case of a client under the age of 18 years, the parent must be in the room when the child is being massaged. See also Section 12.1 'Working with children' of the Tutor Handbook.

- 3.6 Practitioners shall have respect for the religious, political and social views of any individual irrespective of race, colour, creed, sex or sexual orientation.

4. ISSUES OF PRACTICE MANAGEMENT

- 4.1 Practitioners shall at all times maintain high standards of hygiene, both personal and in the work environment.
- 4.2 The work environment and the equipment used must be designed for the purpose of massage.
- 4.3 All advertising shall be informative, factually correct and not misleading.

Practitioners shall only advertise skills and services for which they are qualified.

Practitioners must not advertise in any way that implies that they are offering sexual services.

Practitioners shall not use the term 'Registered MTI Practitioner' in advertising and promotional material unless they are currently registered on MTI's list of practitioners.

- 4.4 Practitioners should not solicit or canvass clients of a colleague.
- 4.5 Practitioners shall insure themselves and the premises in which they work to cover professional treatments, professional indemnity and public liability.
- 4.6 Practitioners shall keep comprehensive records of all clients and treatments given, both for the benefit of maintaining continuity of treatment, reviewing treatment methods and in order to defend themselves in any action that may be brought by a dissatisfied client.

5. DISCIPLINE AND COMPLAINTS

- 5.1 Practitioners shall agree to observe this code of practice and agree to be bound by any disciplinary action that it may be necessary for MTI to take against them, by signing the declaration below.

6. DIVERSITY STATEMENT

MTI takes inclusivity and diversity seriously. MTI practitioners are expected to work holistically and without discrimination not excluding any groups of people. MTI works to support a client's physical, mental and emotional wellbeing. MTI practitioners are expected to assess a whole person and determine if the practitioner's skills, knowledge and experience enable them to competently support that person. If an instance arises where the practitioner feels they are not the most appropriate person to support a potential client, they should refer them on and clearly explain and document why they are suggesting the referral.

When a student members of the Practitioner Association becomes a full member, at:

www.massagetraining.co.uk/membership-become-a-member/join

then they agree to be bound by the Code of Ethics above. This is an important statement of principle for the practitioner member and for the general public.

MTI AND OTHER ORGANISATIONS

The world of massage politics gets rather complicated and can seem rather remote from the nurturing space we create in the treatment room with our clients! Here is an attempt to describe the main structures that MTI has had an involvement with, in straightforward terms:

Massage Training Institute (MTI): MTI is a tripartite body. It is a network of massage training schools; an awarding body for its massage qualification and a professional association for its registered practitioner members. As described, already, joining the MTI Practitioner Association provides you with valuable support in your professional career.

Regulation: the name of the game here is VSR – “voluntary self regulation”. This has been a labyrinth for over 20 years now! Especially in the last 10 years, MTI has been very active in the process of setting national standards. We have punched above our weight as the MTI policies and principles have been thought through in more detail than other bodies.

This process has led to the formation of the:

COMPLEMENTARY & NATURAL HEALTHCARE COUNCIL



The CNHC is the UK regulator for complementary healthcare practitioners. Its key function is to enhance public protection by setting standards for registration. The CNHC quality mark (above) is being recognised as the hallmark of quality for the sector.

WHY REGISTER WITH THE CNHC?

By registering with the CNHC, practitioners demonstrate to the general public and to other healthcare providers, that they meet national standards of practice in their work. This is the first time that this has been possible.

Registrants can use the CNHC Quality Mark on their websites and publicity materials.

It is backed by the Government. In November 2009, the Department of Health in stated: "CNHC is the only voluntary regulatory body for complementary healthcare which has official government backing. No other organisation has the same exacting criteria or focus on safety and quality".

There are employment advantages. An increasing range of bodies such as other regulators, the Department of Health, employers and insurers are working with the CNHC to use CNHC registration and the quality mark as an independent validation of standards. Registration is increasingly being used as a requirement for referrals.

HEALTHCARE PROFESSIONS REPRESENTED

Aromatherapy, Alexander Technique, Bowen therapy, **Massage Therapy**, Nutritional Therapy, Reflexology, Shiatsu, Sports & Remedial Therapy and Yoga Therapy and a range of others.

LEAD BODIES

There are also lead bodies for each profession, which set training standards and monitor the development of each discipline. The lead body for massage is the **General Council for Massage Therapy or GCMT**. MTI was active in GCMT during the early 21st Century and continues to play its part today.

HOW TO JOIN THE CNHC REGISTER

All members who trained through one of our approved/accredited schools will automatically be eligible to register with the CNHC. There is a £70 registration fee.

To apply to join the CNHC register, go to www.cnhc.org.uk

WHY JOIN THE CNHC AND THE MTI REGISTER?

The role of the CNHC is different to the role of professional associations. It has been set up to ensure public protection. Some of the key differences between CNHC and the MTI Practitioner Register:



| MTI | CNHC |
|--|---|
| Acts as a professional association – your trade union, if you like! | Acts to protect the general public |
| Has services for members – listing on the website, the regional group network, the Annual Conference | GPs who refer patients for complementary therapies must direct them to the CNHC Register |
| Promotes the MTI holistic style of massage | If voluntary regulation doesn't work, we'll probably get legislation – complex, expensive and compulsory |
| Develops the community of like minded holistic practitioners | Solidarity with other complementary therapies, in an increasingly hostile environment – eg Quackbusters and other negative campaigning groups |

LEGISLATION

LEGISLATION GOVERNING MASSAGE THERAPY

Massage therapy in the UK for the most part is governed by common law and there is little legislation.

Much of the work of the General Council for Massage Therapy (GCMT) is being undertaken with a view to anticipating any possible legislative provision governing massage therapy.

In some parts of the country, local authorities require massage practitioners to obtain licences to practise. The exact requirements and the cost of the licence varies from local authority to local authority. In some areas e.g. Nottingham, MTI practitioners have been granted exemption from this requirement on the grounds of being bona-fide health practitioners. In London, the London Local Authorities Act requires premises where 'special treatments' (including massage) take place to have a licence from the local authority. In August 2008 MTI was added to the list of exempted organisations. This exemption list is produced for recommendation only and may not be recognised by all London Authorities so practitioners should contact the Borough in which they work to check its requirements.

Equalities Act 2010

This act merged together a number of previous pieces of legislation including:

- the Equal Pay Act 1970
- the Sex Discrimination Act 1975
- the Race Relations Act 1976
- the Disability Discrimination Act 1995
- the Employment Equality (Religion or Belief) Regulations 2003
- the Employment Equality (Sexual Orientation) Regulations 2003
- the Employment Equality (Age) Regulations 2006
- the Equality Act 2006, Part 2
- the Equality Act (Sexual Orientation) Regulations 2007

There are two strands to think about here:

1. Specific duties under the Equalities Act.
2. General access for all - practical issues and the therapist's attitude/approach.

A Duty

As massage therapists/teachers we provide a service, (whether we charge or not) and we therefore already have duties under the Equalities Act.

The main one is not to discriminate in any way due to gender, race, age, and disability.

We also have to make *reasonable* adjustments to any physical barriers that may prevent people using our service – or provide the service by a reasonable *alternative* means, like bringing the service to the disabled person.

Remember, the more accessible our service is to any one person, the more accessible it is to ALL – this is good for clients and therapists alike.

Reasonable Adjustments

There is no rulebook here and you need to take a common sense approach. It is more about what is practical in your individual situation and what resources you have. Most importantly, if you are going to make changes, think about access by **all** before you decide how to achieve this change, e.g.

- You want a new massage table; consider one that is much more easily adjustable such as an electrically/pump operated one which can be lowered sufficiently for someone using a wheelchair to manoeuvre onto and which can then be adapted to your working level. This may sound highly expensive. However, it is not only good for **all** clients, but also for your business; you will be much more accessible to many more potential clients including those who might not define themselves as disabled, but who appreciate easier access, e.g. an older client who finds the static bed height difficult to get on to.
- Organising your room/centre to remove as many obstacles as possible for **any client**.
- Better lighting in hallways/waiting areas and clearer signs.
- Changing door knobs to lever handles – easier for clients, (and staff if at a centre) with disabling arthritis.
- Providing home visits if a disabled person cannot travel to you or if your room/centre is not accessible to them.
- Centres may need to look at lowering the height of the reception desk making it more accessible to people in wheelchairs.

The Act applies to those therapists working from home, (no matter how 'part-time') and also to complementary health centres. Naturally, if we do not feel qualified to massage someone with a particular condition, then this should be explained to the client. However, in the field of holistic massage, this is rare, unless the client has a clear contraindication.

Adapting the MTI Syllabus

Tutors should consider how the syllabus can be adapted with regard to:

- Specified techniques. A student might not be able to perform a particular technique, e.g. heel of hand hacking, but could perform a technique in a different way that achieved the same effect.
- Awareness of non-verbal communication. This could be through touch/palpitation as well as being visual.

More Information

Visit www.equalityhumanrights.com/en/equality-act-2010/what-equality-act or www.gov.uk/guidance/equality-act-2010-guidance for advice and information on the Equalities Act.

DATA PROTECTION ACT 2018:

The UK's implementation of the 2018 EU law of GDPR (General Data Protection Regulation)

What is the DPA?

The DPA 2018 supercedes previous Data Protection Acts and incorporates the requirements of European Union's General Data Protection Regulation (GDPR). It sets standards which must be satisfied when obtaining, recording, holding, using or disposing of personal data.

It covers information held on computers as well as most manual records. The standards can be summarised as follows:

Personal data must be:

1. Processed fairly and lawfully – always inform clients/students why you are collecting their information, what you are going to do with it, how long you will keep it, and who you will be sharing it with.
2. Processed only for specified purposes – only use personal information for the purpose(s) for which it was obtained as agreed with your client/student as stated in 1. above.
3. Adequate, relevant and not excessive – only collect and keep the information you require, e.g. not 'just in case it might be useful one day'. Implications; explain all abbreviations, use clear legible writing and stick to facts avoiding personal opinions and comments.
4. Accurate and kept up to date.

5. Not kept for longer than necessary – when disposing of information do so correctly to maintain confidentiality, e.g. shred it. Insurers tend to require information to be kept 7 or 8 years; worth a check!
6. Processed in accordance with the rights of clients/students – e.g. rights of clients/students to access personal information about themselves.
7. Kept safe and secure.
8. Not transferred outside the EEA, (European Economic Area) without adequate protection.

These standards are even tighter when dealing with the recording of sensitive personal data under which client health/medical history and session notes could be categorised.

Implications for Practitioners/Centres and Tutors/Schools

- We need permission from clients/students to record their information. Inform them why you need their information and, if you work in an organisation, who else it might be available to and why. Suggestion: add these instructions to your initial consultation record sheet and tick them to indicate that you have followed this process.
- Be able to justify the necessity for the information that you request.
- If a third party is named or could be identified within the notes, e.g. a letter from another professional such as a doctor, (the doctor's name is the third party) then their information cannot be disclosed without consent.
- If you use a computer to type letters, e.g. to GPs, other professions, students, clients etc, which includes personal information, (this includes details of qualifications as well as health history) you need to register with the Data Protection Office – this is the case even if you do not save the information on your computer. The alternative of handwriting or using a typewriter does not require registration as it is not accessible by outsiders, but you will need to comply with the 8 principles of the act as the DP office could follow up complaints about how you are using the information.

Always clarify the position with the DP Information Commissioner:

<https://ico.org.uk/global/contact-us/>

WORKING WITH CHILDREN

It may be necessary to be police-checked when working with children (and also vulnerable adults). Self-employed individuals are unable to get a DBS (Disclosure and Barring Service) check on themselves nor apply through an umbrella body. The only exception is if the individual is applying through an organisation that is itself DBS registered and has also undertaken to employ them pending approval e.g. a massage therapist working in a school would need to make their DBS registration through that school's local education authority.

In addition, when working with children as a massage therapist, ensure that this has been agreed with your insurance company and that the parent/guardian is present for the treatment.

See: www.dbs.gov.uk for detailed information. The law is slightly different in Scotland see: www.disclosurescotland.co.uk
