



# *The* RMTBC REVIEW

*Massage Therapy in BC*



SPRING/SUMMER 2024




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### THE RMTBC REVIEW | SPRING/SUMMER 2024

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ASSOCIATION OF BRITISH COLUMBIA

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The RMTBC Review is published twice a year for Registered Massage Therapists (RMTs). It provides a voice for RMTs and acts as a source for the latest research. It is a vehicle for the general population to understand and respect the valuable work of RMTs. Funding is provided by the RMTBC and through advertising revenue.

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# SAVE THE DATE

2024 RMTBC & CMTA NATIONAL CONFERENCE

COMING TOGETHER:  
MOVING THE PROFESSION  
**FORWARD**

MORE DETAILS TO COME!



SEPTEMBER 6 - 7, 2024  
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MEET OUR PRESENTERS

# COMING TOGETHER: MOVING THE PROFESSION FORWARD

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REGISTERED MASSAGE THERAPISTS ASSOCIATION OF BC  
*Safe, Effective Healthcare*



Canadian Massage Therapist Association  
Association Canadienne de Massothérapeutes



# DR. MICHELLE JOHNSON-JENNINGS



## Indigenous Embodiment of Trauma and Love: Addressing Healing Through Reconnecting to Land, Ancestral Teachings, and Self.

Dr. Michelle Johnson-Jennings, a Choctaw Nation-enrolled tribal member, is a professor and director of the division of environmentally based health and land-based healing at the Indigenous Wellness Research Institute. She holds a joint appointment at the University of Colorado School of Public Health.

Johnson-Jennings received her doctoral degree in counseling psychology from the University of Wisconsin-Madison and a master's degree in education from Harvard University where she specialized in human development and psychology and contemporary Native issues. Johnson-Jennings holds the Canadian Research Chair in Indigenous Community Engaged Research. She was an associate professor

in community health and epidemiology in medicine and associate professor in Indigenous studies as well as the scientific director of the National Indigenous HIV/AIDS Centre at the University of Saskatchewan. In 2020, she received the Faculty Presidential Award from the University of Saskatchewan. Earlier, she was on the faculty at the University of Minnesota and an affiliate with the University of Colorado School of Public Health.

Her therapeutic expertise lies in working with Indigenous communities and decolonizing healing while rewriting narratives of trauma through land-based healing. She has partnered with many international and national Indigenous nations, organizations and

communities to prevent substance abuse, food addiction and obesity. She co-developed health interventions rooted in ancestral guidelines to encourage a renewed commitment to health and the revitalization of medicine, food and land-based practices.

Johnson-Jennings founded and directed the Research for Indigenous Community Health Center at the University of Minnesota and was awarded a U.S. Fulbright scholarship to conduct research in New Zealand. She has been invited to present her research at numerous professional conferences held in the Czech Republic, New Zealand, Mexico, Canada and the U.S. She is on the editorial board of the Indigenous Policy Journal.

# MARCUS BLUMENSAAT



## The Cornerstones of Modern Musculoskeletal Health Care

Marcus Blumensaat is currently in his 18th year of clinical practice as a Registered Massage Therapist in Victoria, British Columbia, Canada. In addition to his private practice, he also works in high-performance sport alongside Canada's premier Olympic athletes. This branch of his career is highlighted by working at three consecutive Summer Olympic Games.

In his practice, he uses much more than manual therapy to help a person reach their goal, whether that goal is being able to get down on the floor to play with their grandchildren or winning an Olympic gold medal. Using an

evidence-based approach, he utilizes patient education along with exercise and movement prescription to reassure, create confidence and stimulate change that leads to desired outcomes. He does this within a biopsychosocial framework, which recognizes the multifactorial nature of health and pain.

Over the past 18 years he has been blessed to work with and learn from some of the world's leading experts in musculoskeletal health care. He reads their research papers, books, and blogs. He listens to them on podcasts. He watches their videos and webinars. He completes their

courses. He also continues to build his database from hundreds of case studies he see in his clinic.

He is dedicated to his practice, but he is also passionate about moving musculoskeletal health care forward and delivering education to health care professionals who see promise in modern, evidence-based musculoskeletal health care. He decided to start sharing all the great information and knowledge he has compiled over his career. He spent several years putting it into a presentable format and then launched his continuing education courses in 2021.

# RICHARD LEBERT



## The Power of Massage Therapy: Exploring the Effectiveness of Massage for Musculoskeletal Conditions

Richard Lebert is an educator and health care professional with a focus on digital literacy, interprofessional collaboration and person-centred care.

In addition to his training as a Registered Massage Therapist, Richard has certification in Medical Acupuncture from McMaster University and a Certificate of Online and Open Learning from The University of Windsor.

Recently, his paper "Massage Therapy: A Person-Centred Approach to Chronic Pain" was published in The International Journal of Therapeutic Massage & Bodywork.

# AMANDA BASKWILL



## Charting the Course: Leadership and Innovation in Health and Wellness

This presentation highlights the role of leadership and innovation in advancing massage therapy. Dr. Baskwill draws from her experiences as an educator and administrator to inspire massage therapists to become leaders in their field and agents of change in healthcare.

Dr. Amanda Baskwill is an educator, administrator, researcher, and advocate with a PhD in Health Research Methodology from

McMaster University. Amanda holds the positions of Interim Senior Vice President, Academic, and the Dean of Health, Human and Justice Studies at Loyalist College where she champions health, wellness, and social innovation, inter-professional education, and academic integrity. She has been a Registered Massage Therapist since 2003.

Amanda is the Executive Editor and Editor-

in-Chief for the International Journal of Therapeutic Massage and Bodywork. Her research interests include innovative teaching and learning strategies in health care education, the professional identity of healthcare providers, the application of evidence-informed practice, and the safety and effectiveness of massage therapy in the treatment of various conditions.

# TRACY GAUDET



## The True Transformation of Healthcare Shifting from Disease Based to Purpose Driven Aligning with the Integrated Value of Massage Therapy and Future Opportunities.

Tracy Gaudet, MD is a leader in the development of Whole Health through decades of radically re-envisioning and implementing new approaches to address health outcomes and costs. She is co-founder of a new organization called the Cornerstone Collaboration for Societal Change. Prior to this, she served as the founding Executive Director of the Whole Health Institute. Dr. Gaudet was also the Founding Executive Director of the Veterans Health Administration's National Office of Patient Centered Care and Cultural Transformation. This Office led VHA's transformation to Whole Health, an approach to healthcare that empowers and equips people to take charge of their health and live their most meaningful life. Under her leadership, VA health care delivery has been re-envisioned and is being implemented in the U.S.

Previously, Dr. Gaudet was with Duke University Health System, where she served as Executive Director of Duke Integrative Medicine until 2010. Under her leadership, Duke Integrative Medicine created a state-of-the-art healthcare facility dedicated to the transformation of medicine through the exploration, demonstration, and research of new models of patient-centred care. Prior to her work at Duke, Dr. Gaudet was the Founding Executive Director of the University of Arizona Program in Integrative Medicine, leading the design of America's first comprehensive curriculum in this new field and launching the distant learning fellowship. In addition, Dr. Gaudet co-founded the Academic Consortium for Integrative Medicine and Health. Dr. Gaudet, a board-certified obstetrician-gynecologist, was featured in the acclaimed

PBS special entitled "The New Medicine," and named by Shape magazine as one of the eleven women who shape the world. Dr. Gaudet has been recognized as one of the "Top 25 Women in Healthcare" by Modern Healthcare and featured as a Game Changer in Fortune Magazine. She was honored with the Bravewell Leadership Award for her significant contributions to advancing the field of medicine, recognized for her significant leadership that benefited the nation's Veterans with the Exemplary Service Award, and most recently was honored with the Visionary Award from the Academy of Integrative Health & Medicine for her leadership in transformative healthcare. Dr. Gaudet is also the author of *Consciously Female*, a book on integrative medicine and women's health, and *Body, Soul, and Baby*.

# DR. PAUL HODGES



## Topic: To Be Announced

Paul W. Hodges DSc MedDr PhD BPhty (Hons) FAA FACP APAM (Hon) is a National Health and Medical Research Council (NHMRC) Senior Principal Research Fellow, Professor and Director of the NHMRC Centre for Clinical Research Excellence in Spinal Pain, Injury and Health at The University of Queensland (UQ). He is lead chief investigator on an NHMRC Program Grant that includes colleagues from the Universities of Melbourne and Sydney. Paul is a Fellow of the Australian Academy of Science, which is a Fellowship of the nation's most distinguished scientists, elected by their peers for outstanding research that has pushed back the frontiers of knowledge. He is also a Fellow of the Australian College of Physiotherapists and was made an Honoured member of the Australian Physiotherapy Association, their highest honour.

Paul is a recognised world leader in movement control, pain and rehabilitation. His unique comprehensive research approach from molecular biology to brain physiology and human function has led to discoveries that have transformed understanding of why people move differently in pain. His innovative research has also led to discoveries of changes in neuromuscular function across a diverse range of conditions from incontinence to breathing disorders. These observations have been translated into effective treatments that have been tested and implemented internationally. Paul has received numerous national and international research awards that span basic and clinical science. These include the premier international award for spine research (ISSLS Prize) on four occasions; three times in Basic Science (2006, 2011, 2019) and once in

Clinical Science (2018). International awards in basic science include the Susanne Klein-Vogelbach Award (2010) and the Delsys Prize for Innovation in Electromyography (2009). National medical research awards include the NHMRC Achievement Award (2011). He has also received national community-based leadership awards including the Young Australian of the Year Award in Science and Technology (1997), Future Summit Australian Leadership Award (2010), and Emerging Leader Award (Next 100 Awards, 2009). Paul is a past president of the International Society for Electrophysiology and Kinesiology and has been the Chair/Co-Chair for several major international conferences. He has led major international consortia to bring together leaders from multiple disciplines to understand pain.

# JOELLEN SEFTON



## Massage Research: Building A Better Future

JoEllen Sefton, Ph.D, ATC, LAT is the director of the Auburn University Warrior Research Center, with the mission to assist the US Armed Forces in improving the physical and technical skills, equipment, health and performance of our Military, Families and Veterans. Dr. Sefton developed and led the Warrior Athletic Training Program at Ft. Benning which provided sports medicine care and injury prevention, and

performance improvement across most of the Ft. Benning units across 8 years. She is currently a Professor at Auburn University where she develops and teaches courses related to neuromechanics, research, and sports medicine. As the Director of the Auburn Neuromechanics Research Laboratory, Dr. Sefton studies neuromuscular and physiological effects of orthopedic and neuromuscular

injury; and the rehabilitation and therapeutic methods used to treat these injuries. Dr. Sefton has 25 years experience as a Nationally Certified Massage Therapist and has been a Certified Athletic Trainer for 20 years. She has worked with high school, college, Olympic and professional athletes, Broadway performers, professional musicians and military and other tactical athletes.

# PANEL PARTICIPANTS

## Coming Together: Moving Our Profession Forward

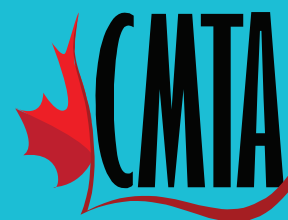
Chaired by Gordon MacDonald, Executive Director of the Registered Massage Therapists Association of BC  
Monty Churchman, Canadian Sports Massage Therapy Association  
Garry Lavis, Massage & Myotherapy Australia  
Christian Vulpe, Canadian Massage Therapy Council for Accreditation  
Brandy John, Canadian Council of Massage Therapy Schools  
Tricia Weidenbacher, Canadian Massage Therapist Association

## INTERVIEW

# WENDY THIENES



As we continue to profile our sister associations across the country, we are pleased to shed light on our umbrella Canadian Massage Therapist Association (our partner in our upcoming September conference) and Executive Administrator **Wendy Thienes**.



Canadian Massage Therapist Association  
Association Canadienne de Massothérapeutes

**Please briefly tell us a bit about yourself – where were you born, where did you grow up – passions and hobbies while growing up? Please tell us about your role for the CMTA, when did you start with the CMTA and what are your duties.**

I began my role as Executive Administrator with the CMTA in May 2022. This was a newly established part-time, remote position. I perform my duties from my home office in Shaunavon, Saskatchewan. Shaunavon is in the southwest corner of the province. If you are familiar with hockey great Hayley Wickenheiser, you may have heard of Shaunavon as she grew up here and our local arena is named after her. I had been working remotely long before the pandemic and was seeking a new part-time opportunity so that I could balance caregiving duties that I had for my aging Mom.

I am a small-town Saskatchewan gal, having been raised on a mixed farm near Central Butte, Saskatchewan, population 500 people. I have now lived in Shaunavon (population 1700) for the past 30 years. My husband and I have two grown children who are finishing and/or in the midst of their post-secondary journeys. My previous work has been in the administrative field with various health and health profession organizations, and I spent about half of my career in the Arts & Culture sector with our local museum/art gallery and at the T.rex Discovery Centre in Eastend, Saskatchewan. I also worked with a national arts charity that gave me the opportunity to connect with people in more than 100 communities across the province and across Canada. My leisure time is filled with family activities, walks, reading, piano, curling, camping, baking, and writing. I write a weekly column in the local newspaper entitled 'Views from an Empty Nest.' You can follow my page by that same name on Facebook.

**What led you to the profession of association management – what was your background and where did you get your education?**

I hold a diploma in Business Administration which has served me well through a variety of administrative, fundraising and leadership positions over the past 30 years including with the MS Society of Canada, Saskatchewan Library Trustees Association, our local health region, and various cultural groups as mentioned above. For a good portion of my life, I was also a piano teacher and Kindermusik instructor. I've been a volunteer on the local credit union board, local and provincial music festival associations, arts council and have helped organize many events in our community. Management of a health profession association is a new challenge for me. Over the past year I also completed a one-year term as Executive Director/Registrar with the Saskatchewan Dental Therapists Association. I'm now re-directing my attention toward other areas of health care as the provincial coordinator for Age-Friendly Saskatchewan with Saskatchewan Seniors Mechanism and as a Patient Family Partner with the Saskatchewan Health Authority, in addition to my part-time role with CMTA.

**Where do you see the Canadian Massage Therapists Association fitting in with other health care associations in Canada. How do values, ethics, codes of practice align - or do they?**

In my experience, all health professionals are enthusiastic about their chosen vocations. They believe in the value of their practice for the well-being of individuals. Their values and ethics are client-centred and are closely aligned. However, massage therapists struggle to have their work recognized in the same circles of care as other healthcare professionals. With services being provided in a variety of different settings, it has been a challenge at times for massage therapy to gain the same recognition as other similar healthcare providers.

Ongoing continuing education is important for all health professions and massage therapy is no exception. I'm very excited about the upcoming National CMTA and RMTBC conference in Vancouver in September where practitioners from across the country will come together for a time of continuing education opportunities. It is vital that the national and provincial associations continue to provide these opportunities for members.

As a national organization, the CMTA does hold a seat at a national table of health profession associations (HEAL) and is committed to furthering the recognition of massage therapy as a valued health care service through advocacy and communication. In contrast with other national associations, CMTA's capacity is limited due to its current fee structure and staffing. It will be important to build capacity moving forward to conduct any programs or projects that can help to achieve goals.

**How do you perceive the growth of the association and its goals. Is it difficult aligning different provincial goals/associations as a cohesive unit in a country as big as Canada?**

The greatest struggle in aligning associations across the country is the fact that some associations are still serving a dual purpose as both regulator (concerned with public protection) and as association (focused on advocacy of and for the profession). Massage therapy is not regulated in every province which creates unique dynamics and issues when trying to bring together leaders and practitioners across provincial boundaries. Some associations function as pseudo-regulators and will have considerable work ahead when divestment of the regulatory and advocacy roles begins. British Columbia, Ontario, Newfoundland, Prince Edward Island and New Brunswick have separate regulatory Colleges. Saskatchewan is in the process of establishing a separate College. Other provinces are still in the process of trying to establish regulation through their provincial governments. Until such time as all provinces are regulated, it is a little bit of an apples and oranges scenario. Having said that, I do believe that everyone has the best interests of both practitioners and the public top of mind, but these roles can also be in direct conflict with one another.

Massage therapy research in Canada should be an area of focus moving forward. We are in the second year of a partnership between CMTA and the Massage Therapy Foundation in the United States. Until such time that CMTA has capacity to build their own research portfolio, this partnership can provide valuable information and resources. Members are encouraged to peruse the resources available at [massagetherapyfoundation.org/resources](http://massagetherapyfoundation.org/resources)

**What excites you most about your work?**

The opportunity to meet and collaborate with people from across



the country is a great privilege. My work with CMTA has introduced me to many kind, competent and passionate individuals who want to move their profession forward. The potential for growth, through collaboration, is great. CMTA undertook a strategic planning process last fall and I am excited to build on that to create improvements to move this national association forward with strength and purpose.

### What is your current assessment of the RMT profession and the association.

We can always accomplish more together through more ideas and more resources. Synergy is a powerful vehicle: 1+1=3

One goal of the national association and its provincial member associations is to ensure that individual massage therapists realize the excellent work that is happening on their behalf through this collaborative work at the CMTA.

It is important to build cohesiveness and collegiality between individual massage therapists and among provincial associations to highlight the important benefits that massage therapy provides to individuals and to continue the profession's evolution within the current healthcare environment.

### If any, what legislation, regulations and education would you change to improve the profession?

Striving towards regulation in each province is crucial. Standardizing education programs and content across the country should be a priority. In some ways, the wide availability of training programs and the presence of a variety of associations who focus on massage therapy and other types of modalities leads to a fractured network for the profession. Cohesiveness and standardization regardless of your location (geographic or practice setting) should be a priority for associations and individual members alike. Education standards should be established with mandatory business and communications training included to assist massage therapists, many who are self-employed, in managing day-to-day business operations and to help combat issues such as sexual harassment.

CMTA has been working diligently to try and address the issue of GST/HST being charged on massage therapy services. The degree of interest in this issue varies across the country due to varying tax rates. For example, GST in Saskatchewan is 5% but in Nova Scotia and other

jurisdictions it is a combined HST model that sees clients paying 13% tax on these services. While impact of policy may vary province to province, it is crucial that individuals and associations support each other on issues of importance for the greater good. A client-centred lens is crucial regardless of whether an issue is focused on regulatory or advocacy issues.

My understanding is that work on an updated Standards of Practice and Interjurisdictional Competency Profile is overdue. Regular review and updating of these types of documents is crucial to building the profession and creating a collective understanding about standards and competencies required for a successful career in this field.

### What advice would you give yourself if you were just starting out in your career?

After 30 years my resume has become eclectic and, while I am grateful for all my varied experience and where it has brought me at this stage of my life, I have great admiration for those who have dedicated their entire careers to the same vocation and/or same job. I've noticed that healthcare professionals, including massage therapists, tend to fall into this latter category. So, my advice to my younger self might be to 'pick a lane' and stick with it! Although, if I had done that, I would not have met all of the wonderful people that I have or have had all of the great experiences either. Therefore, 'be resilient and adaptable' might have been better advice. Most importantly, I would remind myself that it is important to 'do something that will make a difference.'

### If you could have a conversation with any person living or dead, who would that be and why?

Oh gosh, I always love this interview question. My default answer is always Dolly Parton; she oozes charm, charisma, and compassion and I could listen to her accent and that giggle all day long. However, having lost several dear family members in the last 5 years, I must say that a coffee party with all of them would be my dream. We'd be sure to invite Dolly, though.

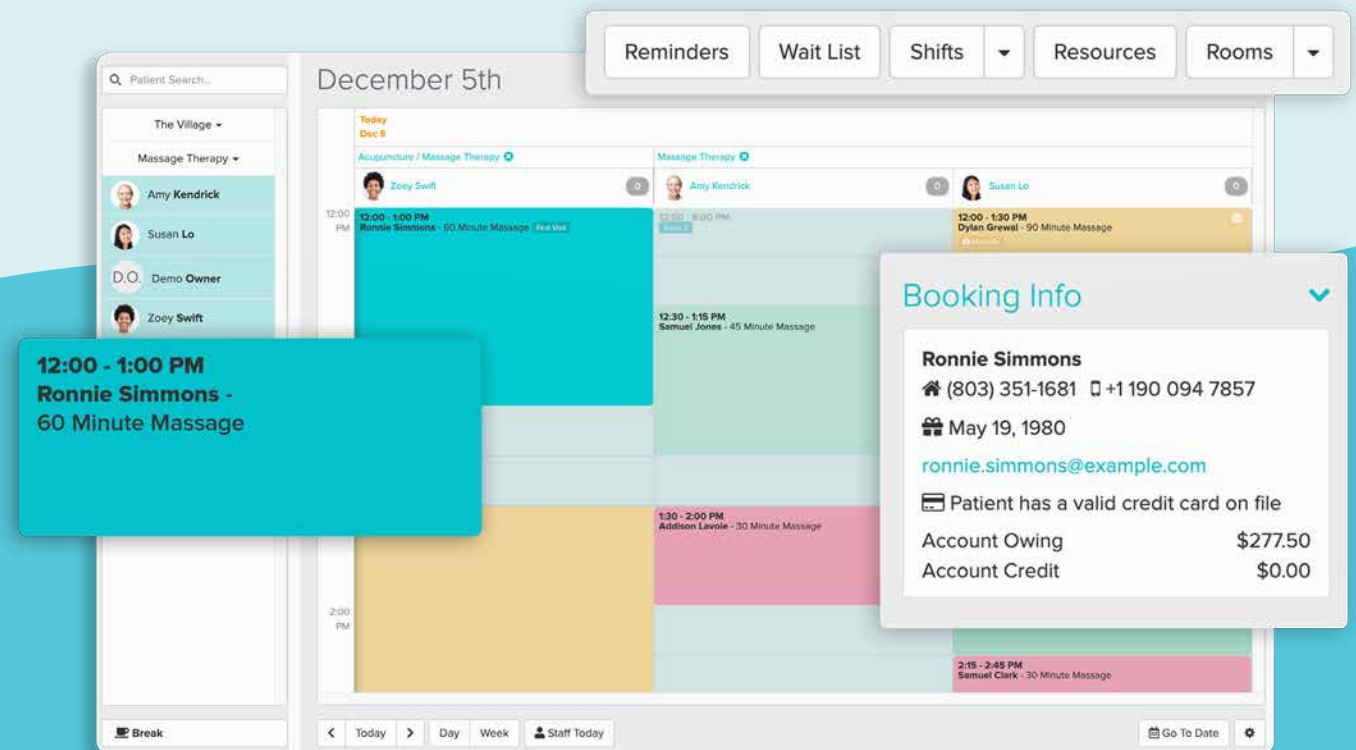
CMTA members, left to right: Michael Feraday, ED-RMTAO; Offer Kuban, President-MTAM; Gordon MacDonald, ED-RMTBC & President-CMTA; Anne Horng, Chair-RMTBC; Wendy Thienes, Executive Administrator-CMTA; Shelly Dalling, Vice President-NBMA; Tricia Weidenbacher, ED-MTAM & Treasurer-CMTA; Amy-Lynne Graves, Vice President-CMTA; Camille Lapierre, President-MTAS; Monica Miller, President-MTANS.



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# WATCH FOR US DURING THE CBC BROADCAST OF THE PARIS OLYMPICS THIS SUMMER

As part of our ongoing efforts to showcase Registered Massage Therapy as safe, effective healthcare, we will be broadcasting our recently shot commercials during Olympic coverage on CBC. These 10-second commercials will be broadcast throughout the entire province and portray everyday people in everyday situations where injuries or overuse have been resolved by an RMT. The scenarios are:



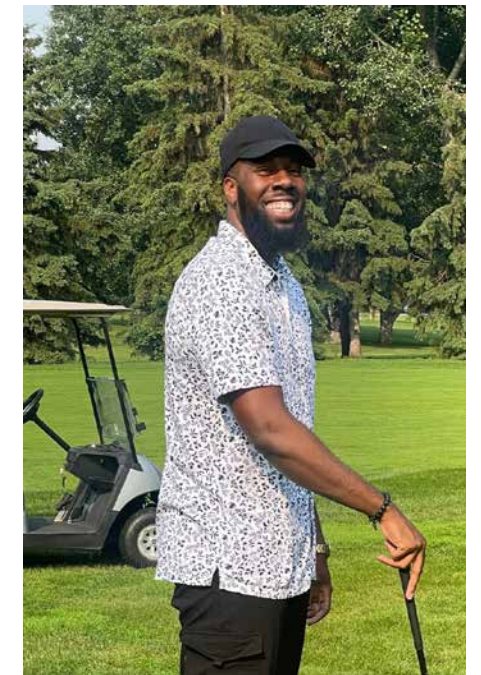
## PROGRAMMER

My RMT got me back to my keyboard.



## CYCLIST

My RMT got me back on my bike.



## GOLFER

My RMT got me back on the course.



## SERVER

My RMT got me back to my guests.



## VETERINARIAN

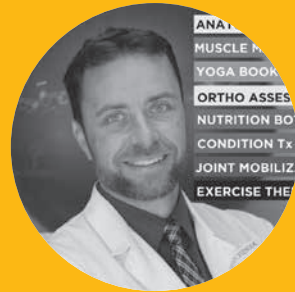
My RMT got me back to my patients.

Each spot is spoken by the individual and is tagged with our logo and the line:  
**See a Registered Massage Therapist for Safe, Effective Health Care.**  
The Paris Olympic Games take place July 26 – August 11, 2024.



# FIVE RULES TO CHOOSING THE RIGHT IASTM INSTRUMENT FOR YOU

by Dr. Nikita Vizniak



Instrument assisted soft tissue mobilization (IASTM) is a safe and effective technique that every practitioner should have in their repertoire. However, learning the technique and buying the correct tool for you are two different things. Buying an IASTM instrument is like buying a new car – research must be done! You have to “test drive” these instruments to determine which one fits your treatment approach, your hand size, and your budget. It has to be practical, affordable, and effective.



With the largest known IASTM instrument collection in the world, we have definitely “test drove” enough tools to come up with these 5 rules to choosing the right IASTM instrument for you.

## **Rule #1: Ensure the instrument is suitable for the type of IASTM you want to perform.**

Every IASTM instrument is designed differently and every design dictates the efficacy of your treatment protocol.

Choosing the right design is like choosing whether you want a sports car or a minivan. There's no right or wrong, it all depends on what you need it for—zipping around the countryside at 100 km/h or packing up soccer balls and the kids to drive them to soccer practice.

Generally, the design optimizes the instrument for two different categories:

### **1. Diagnostic feedback/mechanical force transmission**

Just as a stethoscope improves vibration sensation from the heart, IASTM improves your tactile feedback. For this purpose, you will want

to choose an instrument that gives you feel and precision.

Generally, lighter instruments give better feedback and heavier instruments or sharper edges give better force transmission.

Note: Biomechanics and technique also play a huge role!

### **2. Neurological stimulation/myofascial mobilization**

For this purpose, the treatment goal and outcome is more important than a possible subtle loss in tactile vibration. Often instruments with slightly heavier designs have better feeling of quality and reduce practitioner fatigue by letting the tool do the work.



## **Rule #2: 'All-in-one instruments' can work for you.**

All-in-one tools are best suited for soft tissue mobilization/neurological stimulation.

Generally, more organic shapes tend to better fit body parts and offer a larger number of treatment edges. However, it is important to ensure you have safe and effective biomechanics during your treatment application.

An example of this tool can be:







All decent instruments are highly polished which provides a slicker look, smoother features, and excellent curves and bevels (i.e. they look pretty!). As wonderful as that is, this makes many tools extremely hard to grasp—especially when you apply emollients during your treatment—leading to a natural increase in grip and thus hand fatigue. They neglect the most important thing—YOUR HANDS. The only way to decrease hand fatigue with these tools is to relax your grip on the tool and have biomechanical forces transmitted through different regions of your hand that are not normally used.

To truly save your hands, choose techniques and instruments that have been ergonomically designed and can be used either right or left handed (i.e. has not neglected the importance of your hands). The most important instrument in your practice is YOU! So let's ensure that your hands are protected for the longevity of you and your practice.



**100% Efficient Treatment Edges**

**Pro:** Single instruments are easier to carry around and lower cost (vs. carrying around a whole instrument set) and you become extremely proficient with that instrument

**Con:** You may be limited to very specific uses and patient body shapes, however it has been our observation that most practitioners who buy multi tool sets typically only use their 1 or 2 favourites—why spend money on something you do not use?

**Rule #3: Watch out for cheap materials.**

Plastics, jade, ivory, “training tools” all fall under the category of cheap materials.

Although they can still give some result, they cannot provide the efficacy that a precision-made stainless steel instrument can provide. This is because the materials cannot provide the same feedback, durability, and consistency of application.

**Pro:** Cheap

**Con:** Will not provide good feedback, will not provide quality, effective treatment, will not allow you to learn proper IASTM technique

**Rule #4: Treatment edges count! Not all stainless steel IASTM instruments are made the same.**

The more treatment edges and variability of bevels results in more treatment options.

- Single bevels give better penetration but are generally used in one direction
- Double bevels give slightly less penetration but can be used in both directions.

Many of the lower quality instrument sets sold by companies offer 1 or 2 treatment edges per tool, this greatly limits the usefulness of the instrument. More edges and variability give you more options for different regions and different sized patients. Some instruments are less than ~10% efficient based on this measure.

**Pro:** More edges and ergonomic design gives more therapeutic options and should be able to be used right or left handed (a very important feature to reduce practitioner strain)

**Con:** With more treatment edges it may be hard to find comfortable holding positions for some practitioners and may cost more to manufacture.

**Rule #5: There's no guarantee that your hands will be saved when using IASTM instruments.**

Choose instruments that are designed for your hands, ambidextrous in nature (right and left usability), and give better treatment options. There are a lot of companies that sell IASTM instruments and they all state that their products help save your hands. Unfortunately, this isn't necessarily true.

# PILATES TEACHER TRAINING



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# INTERVIEW

# STEVE INABA



A conversation with RMTBC member **Steve Inaba**, a Certified Advanced Rolfer and Registered Massage Therapist. He is a graduate, as well as a past instructor, at the West Coast College of Massage Therapy.

Steve's background in massage therapy, and extensive training and experience in the foundations and training of the Dr. Ida Rolf Method is the basis of an extraordinarily busy practice based on organization, functionality and integrity coupled with an appreciation of wholism.

### **Please briefly tell us a bit about yourself – where were you born, where did you grow up – passions and hobbies while growing up?**

Born and raised in rural British Columbia, my relationship with my physicality and imagination developed early on in a rugged landscape and environment that nurtured exploration and introspection. This preoccupation continued into my teenage years and early adult life when my interests turned to competitive martial arts and firefighting.

### **What led you to the profession of massage therapy – what was your background and where did you get your education?**

Serendipitously a good friend thought my passion for physically demanding work and pursuits may be well suited to a career in massage therapy. I was very intrigued by the courses offered, which meshed with my interest in elevating my physical training and exploring ways to rehab injuries and rejuvenate my body more quickly. Without hesitation, I applied to the West Coast College of Massage Therapy and was accepted into the 1984 class.

### **What prompted you to move into Rolwing? We see you did some training in Sao Paulo, Brazil – why Brazil?**

After completing the course in 1986, I found work at a couple of gyms and eventually started at a clinic called the Massage Therapy Centre. The clinic was run by a Rolfer by the name of Barry Davison. It was here that I first experienced my 10-session series of Rolwing. "The hallmark of Rolwing Structural Integration is a standardized "recipe" known as the Ten-Series, the goal of which is to systematically balance and optimize both the structure (shape) and function (movement) of the entire body over the course of ten Rolwing sessions. Each session focuses on freeing restrictions or holdings trapped in a particular region of the body. A practitioner also maintains a holistic view of the client's entire system during each session, thus ensuring the transformational process evolves in a comfortable and harmonious way."\*

Although I had approached the work with more of a physical bent, the psychosomatic profundity was surprising, and I was eager to continue this path.

I did the first part of my Basic Rolwing training in Boulder, Colorado and completed my training in Sao Paulo, Brazil which meshed with my inherent interests in structural patterns in different races, ethnicities, and cultures. After another 20 years of practice and ongoing education, I did my advanced training in Berkley, California. The advanced training builds upon one's perception of the outcome of the basic ten series, and how to bring the body to the next level of integration using movement and additional modalities.

### **You talk about wholism as a basis of your practice – please explain what this means to you.**

Engaging into a person's fascial system allows one to not only affect the structural pattern, but also to activate the emotional resonance that resides with the fasciae. This is one of the reasons Rolwing was popular in the 60s and 70s when processing one's own personal experience was part of pop culture.

From a more clinical point of view, the structural pattern expressed by the fasciae causes the body to compensate and adapt. Any additional load or strain – i.e. habitual use, physical trauma or psychological trauma overloads the already maxed out system manifesting as pain and dysfunction. Taking a person through the ten series allows the structure to come back to a more biomechanical neutral, then allowing treatment and resolution of the areas of concern.

Throughout my Rolwing training, I was fortunate to have studied with instructors who were students of Dr. Rolf. The teacher who made the largest impact on me was named Jan Sultan. His explanation of fascial strain throughout the body, how to systematically evoke change while honouring the process have inspired me to involve other aspects of humanity into my work including structural difference, quality and composition of connective tissue, and body patterns due to race, ethnicity, and culture.

### **What is your current assessment of the RMT profession. What advice would you offer a new student thinking about entering the profession?**

The promotion of the RMT professional has improved greatly. The use of social media and current social and cultural slants have given a much-needed elevation in public awareness. For those entering or thinking about entering the profession, certain qualities are necessary for a long-term career: a strong work ethic, self motivation, good organizational skills, interest in continuing education and last but not least: You must honour the fact that you are engaging with another human being not only on a physical level, but also having the innate sense and awareness that you are entering into their psychosomatic history.

\*Quoted from the Dr. Ida Rolf website: [www.rolf.org/ten\\_series.php](http://www.rolf.org/ten_series.php)





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