



PEDIATRIC MASSAGE

A MASSAGE THERAPIST'S
GUIDE TO GETTING STARTED

Written by:

Tina Allen

LMT, CPMPT, CPMT, CIMT

Why pediatric massage?

Babies and children simply love to be touched. In fact, they thrive on it and it is a crucial part of their development. Children need physical contact for healthy growth and development. Nurturing touch promotes physiological, neurological and psychological development and function.

Healthy children receive the benefits of touch from many sources, but just as with adults, the symptoms of physical and emotional stress can often be alleviated by massage therapy from a trained professional. Some of these can include

- ▶ *strenuous athletics or exercise*
- ▶ *physical pain from injury or medical treatment*
- ▶ *family difficulties, including death, divorce, or moving*
- ▶ *difficulties in school, either academic or social*
- ▶ *natural disasters or other traumatizing events*

Sadly, not all children receive the basic, necessary touch in their everyday lives. This can sometimes happen when children

- ▶ *live in an institutional environment (hospital, nursing home, orphanage)*
- ▶ *have a medical condition that makes people afraid to touch them (legitimate or imagined)*
- ▶ *have a condition that makes untrained touch dangerous*
- ▶ *have been neglected or abused at home*
- ▶ *have a condition that makes them averse to touch*

As you can see, a wide variety of children can benefit from massage, from all-star athletes to premature infants to teen runaways. Pain, anxiety, loneliness, and fear are not unique to adults, so it only makes sense that those who serve children, including families, medical facilities, and nonprofit organizations, are looking to pediatric massage as a source of relief.

Unfortunately, not everyone currently has access to the services of those trained in pediatric massage. A pediatric client's vulnerability both physically and emotionally makes training vital for those who plan to work in this specialty. It is also important to communicate with the child's attending physician in order to ensure her safety. Neither standard medical training nor basic massage therapy education provides this kind of specific background, so the need for more trained practitioners is very great. Numerous studies demonstrate the effectiveness of pediatric massage therapy when safely provided by trained healthcare practitioners. The possibilities in the field continue to grow!

How is pediatric massage different from massage for adults?

Children are more than just small adults. Physically, mentally, emotionally, (and yes, legally), they have unique needs, wants and limitations. In addition, there is far more variation in childhood than in adulthood. Imagine if we went through as many physical changes between the ages of 30 and 40 as we did between two and twelve! Having a basic understanding of child development is important, but even more essential is the willingness and flexibility to meet each child at his or her own level of development, wherever that might be.

Several facets of this flexibility that must be apparent when providing massage therapy for children can be expressed as the Five Ps: permission, pace, pressure, positioning, and parents.

PERMISSION

Always, always, always obtain permission from the child before engaging in any form of touch therapy. Children, especially very young children, do not always understand that they have a right to disagree with an adult who has come to provide treatment. This is especially true for hospitalized children, who may undergo uncomfortable or painful treatments that cannot be refused. Empowering a child to have a voice in her medical care can not only reduce her stress, but can also improve her entire experience as a patient who takes an active role in her own health.

What do you do when a child is unable to verbalize her consent? If a child is able to understand you, asking yes or no questions may be effective if the child can respond with gestures such as nodding. Parents and caregivers who are familiar with the child's communication can often be a great help in determining what she is



trying to say. When working with infants and children who may have difficulty understanding your questions or are unable to respond, you may have to rely on body language. Pulling away, shallower breathing, or sudden tightening of the muscles can all indicate pain, fear, or unwillingness to continue and should be taken just as seriously as if the child had told you outright, "I don't like that."

Understand that, while some children may warm up to you in time, there are others who simply will not want to work with you, ever. Accept this graciously. It is neither a failure on your part, nor on that of the child.

When dealing with a child who is under a doctor's care, it is also important to receive approval from the child's attending physician in order to ensure her safety. The contraindications for massage therapy may not always be the same as those for adults, so even a practitioner with experience working with medical patients should exercise caution. It is best to receive permission prior to each session, in case any medical changes have occurred.

PACE

Do you remember being a young child, when half an hour was an agonizing wait, and an hour was the end of the world? While many adults find a massage lasting an hour or longer to be heavenly, it can be too much for even a patient child. Healthy children can find it difficult to be still for such a long period, while children with some medical conditions may find longer massages tax their already limited energy.

When working with younger children, massages that last 15-20 minutes may be the best fit for their attention spans. Sometimes, shorter massages may be provided to the same child multiple times a day, resulting in a similar amount of total treatment time provided to an adult or teen who receives a longer, once-daily massage.

PRESSURE

There is no general rule for the amount of pressure to use with pediatric clients. One might find a firm touch comforting, while for another it might be painful. The same light pressure that soothes one child to sleep could be agonizing to a very ticklish child. As always, it's important to meet each client, case by case, day by day, where she stands.

Allowing children to have control over the amount of pressure is very important. Be prepared for children to test out this control, asking for more, then less pressure in order to gauge whether you will actually respond. Building this trust with the child is just as important as what you might consider the treatment itself, and you may spend entire sessions just working on this trust. Only after you have developed trust and rapport between you will the child be able to relax and enjoy the many benefits of your massage.

POSITIONING

What may be comfortable for you might not be comfortable--or even possible--with a child. This is especially true of children who are confined to a bed, are attached to IVs or other medical equipment, or who experience chronic pain.

It's good to practice different positions, including supported side-lying, supine, and semi-reclined. These positions allow you to keep eye contact and notice any facial movements that could alert you of any discomfort. Of course, you're not limited to these positions. Be creative in making your



client comfortable! Sitting, standing, or lying in another position might be most effective. Very young children might prefer to be held by a parent, especially if they are shy and have never received a massage before. In general, most pediatric massage is performed fully clothed, so draping is not an issue when considering positioning. This allows you to focus exclusively on the comfort and safety of your client, rather than juggling issues of modesty as well.

PARENTS

Caring for a child, whether she's a wannabe stunt-double with a strained muscle or a toddler with leukemia, can be a nerve-wracking process. Parents are under constant pressure to make the right decisions to ensure that their children are healthy, happy, and prepared for their next stage of life. Introducing massage therapy into their child's life, while increasingly common, is still an unusual choice, which can

lead to additional tension. Because of all this, it's doubly important to work with the parents (or guardians) and not only the child.

At the beginning of the session, remind the parent that your focus will be on the child, but that you will be happy to discuss the session or answer any questions at the end of the treatment. Show parents some simple techniques to help them relax, such as taking some deep breaths or rolling their shoulders. The massage session is a great time for parents to practice a little self-care while you tend to the needs of their child. Explain the importance of relaxing prior to touching their child. Then show them some simple techniques they can use without harming their child.

In many cases, you will not be able to provide all the massage that the child needs or could benefit from. In this situation, teaching the parents a few massage techniques to use with their children will not only ensure that the child receives additional massage, but will also encourage healthy, positive interaction between parent and child. In addition, many parents feel helpless when faced with a child's injury, illness, or anxiety. Empowering parents to be an active part of their child's healing process can help alleviate their own anxiety, which will lead to a happier, healthier environment for your young client.

When providing pediatric massage it's vital to have a thorough understanding of mandatory reporting laws in your state. Massage practitioners are in a unique position to see indicators of both mental and physical abuse, and confidentiality rules surrounding minors are complex. Consult the regulating body in your state to learn and understand the laws.

Settings for Pediatric Massage

HOSPITALS

The type of work you do with pediatric patients in a hospital will depend on the scope of your job description: some massage therapists in hospitals are strictly for emotional support, while others are focused on specific pain relief or rehabilitation goals. Although hospitalization of an adult is stressful, hospitalization of a child



can be even more so, and to family and friends as well as the patient. Pediatric massage in a hospital setting requires extra communication to alleviate everyone's worries, but also provides many opportunities for education and increasing awareness.

NURSING HOMES

When it comes to adults, nursing homes are most likely to be used for two reasons: short-term, to recover from a medical emergency or injury, or long-term when they can no longer function independently and cannot be adequately cared-for at home. Children typically go home for recovery, and are not expected to function independently to begin with. So children who live in nursing homes, either special pediatric or general, are often those with the most severe medical issues. For this reason, it's especially important to communicate frequently with the Director of Nursing in order to provide the safest, most appropriate care.

OUTPATIENT CLINICS

Unlike an adult, a child will not drive herself to her therapy appointment. Most often, a parent or other adult will be present during the session, especially when a new treatment is being added, such as massage. Visits to outpatient clinics have a specific purpose, and goals are set by the therapist. In this case, you may be dealing with three different people with different goals in mind: the physical therapist (for example), who wants the child to be able to walk three laps around the room unassisted, the child, who just wants to feel better, and the parent, who wants both of those things and also for life to be as normal as possible. It can be tricky to try and accommodate these related-but-different goals while staying within your scope of practice, but it can be a very rewarding experience when you strike the right balance.

HOSPICE

Working with dying children can be emotionally difficult even for the most experienced hospice workers. If you decide to take on this kind of work, make sure you have your own emotional support system firmly in place. Also, consider making the hospice setting (which may be an actual facility or take the form of home visits), only part of what you do. Prenatal massage or short-term rehabilitation both offer an atmosphere of progress and hope to balance out the inherently sad nature of working with children for whom there will be no recovery.

PRIVATE PRACTICE

Since the majority of massage therapists work in some form of private practice, it makes sense that this would be a common setting for all kinds of massage, including pediatric. With some adjustments, most private practices can be excellent settings for pediatric massage. Can the child get on and off the table? Is there seating in your treatment room for a parent to be present if she wishes? Do you have information printed about your policies specifically about children? Do you have any kid-friendly reading materials in your waiting room? Each child who visits your practice is one more child who has grown up integrating massage into her everyday life. And that's good for everyone!

HOME VISIT

For some children, especially those who struggle with anxiety, the most therapeutic environment is the safety of their own homes. Massage therapists who regularly provide in-home massage will find this to be a natural outgrowth of their business, while those who don't may be nervous about packing up their entire kit to visit a child who may only want 15 minutes of massage ... or none at all! However, if you view education and building rapport to be just as much a part of the job as the hands-on time (and you keep your prices fair accordingly), home visits can be a great way to reach children that you wouldn't have the opportunity to work with in any other setting.

Education and Training

As in all specialties of massage, advanced training matters. You should choose your continuing education carefully and consider the following factors.

LOCATION

Are you near a massage school that hosts continuing education classes, or are you out in the middle of nowhere? Choosing an ideal location for your CE class also means factoring in your budget. If you're near a school, congratulations, you've got it easy! Pack a lunch, gas up the car, and you're all set. If you've got to travel just to find a good cup of chai, chances are you'll need to pack a bag to get to a good class, too. Keep in mind that many instructors will travel to you if you can gather enough colleagues to take the class! Don't be shy about contacting an educator to ask about hosting a class.



INSTRUCTOR

It can be frustrating to get all settled into your seat, have the class begin, and instantly realize that you don't 'click' with the instructor. Maybe it's their speaking style, their sense of humor, or just the pace of the class. You can avoid this mishap by doing your homework. Does the instructor have any videos or clips online of a class? Check them out! Or if the instructor has participated in webinars, you can usually purchase a recording for a reasonable price. That's a smart expenditure (and may get you CE hours!) if it ensures you choose the right class for you. If you're active on social media, reach out to your colleagues for feedback, a friend may have taken a class and have some great pointers for you.

QUALITY OF MATERIAL

Many education companies are individuals, so determining the quality of the education is often just a continuation of researching the instructor. Some factors to consider are:

- ▶ *how long the company/instructor has been practicing and teaching this specialty*
- ▶ *if they are published in magazines and journals you read and respect*
- ▶ *if the instructor is connected with other educators you like and respect*
- ▶ *if the instructor uses research to inform and teach their specialty*

If you investigate the program and instructor, but still aren't sure, just email or call the instructor! Ask your questions directly and get a sense of the program before you commit.

Pediatric Massage for Specific Conditions

AUTISM

For children with autism, research has been published indicating that massage may provide relaxation, stress reduction and calm muscle spasms. Research has also demonstrated that this type of intervention may promote more on-task and social relatedness behavior during play, children with autism spectrum disorders show less erratic behavior, and are more attentive after receiving massage therapy. This safe, nurturing touch, along with regular sensory integration, is beneficial in reducing inattentiveness, touch aversion and withdrawal. Over time, touch therapy also helps the child to become more accustomed to tactile stimulation and aides in body awareness. Often by incorporating massage therapy into daily routines, children with autism experience fewer sleeping problems.

CANCER

Complementary therapies are being increasingly integrated into mainstream cancer programs and centers. Although most studies have reported the effects of massage in adult patients, pediatric cancer patients also experience reduced pain after massage therapy. Massage is one of the most commonly used pain management strategies for pediatric patients newly diagnosed with leukemia. For oncology patients, studies also indicate that many complementary therapies control treatment-related physical and emotional symptoms including pain, fatigue, nausea, xerostomia (dry mouth), anxiety, and depression.

A recent study took a close look at the effect of massage on cancer patients. In a study of 380 adults with advanced-stage cancer and at least moderate pain, the re-

searchers found that those who received massage therapy had greater improvement in pain and mood than patients who were touched in a manner similar to massage but without the precise motion and the specific pressure a trained massage therapist uses.

For cancer patients, especially pediatric cancer patients, even just a little relief can mean a lot. In general, about a third of all cancer patients experience significant pain. According to the National Cancer Institute, 15% to 25% of cancer patients become clinically depressed at some point during their illness. And, of course, the stress of hospitalization, isolation, and treatment for this very serious illness can make all these symptoms worse.

During massage, levels of feel-good neurotransmitters such as serotonin and dopamine spike, oxytocin (the nurturing, cuddle hormone) is increased, while measures of the stress hormone cortisol drop. When using massage therapy for children with cancer, your work does not need to be aggressive to achieve its maximum potential. Trained, gentle touch can be just the treatment these children need.

CEREBRAL PALSY

Cerebral palsy (CP) is a term that refers to many possible injuries to the brain usually occurring during fetal development; before, during, or shortly after birth; during infancy; or in early childhood. CP is not a disease: it's neither progressive nor communicable. The United Cerebral Palsy Research and Educational Foundation estimates between 1 ½ - 2 million children and adults have cerebral palsy in the United States. 10,000 babies and infants are diagnosed with cerebral palsy annually, and

1,200-1,500 preschool-age children are also recognized to have cerebral palsy each year.

There are several types of cerebral palsy which involve damage to different parts of the brain, and affect body movement, posture and muscle coordination. These types are categorized into four types: spastic, athetoid, ataxic, and mixed.

Without question, massage therapy can have a valuable role in improving the quality of life of a child with cerebral palsy. Research performed by the Touch Research Institute has indicated children affected by cerebral palsy receiving massage therapy showed fewer physical symptoms including reduced spasticity, less rigid muscle tone overall and in the arms, and improved fine and gross motor functioning. In addition, the massage group experienced improved cognition, social, and dressing scores on the Developmental Profile and showed more positive facial expressions and less limb activity during face-to-face play interactions. Massage may also be helpful in decreasing tone in spastic muscles, relieving tension and spasms, and improving digestion.

UNDERSERVED POPULATIONS

Children in orphanages around the world may have food, clothing and shelter, but often they lack an essential ingredient for basic health and happiness—touch. Without it, children often feel discarded, forgotten, and even untouchable, especially when their circumstances are complicated by being sick or having a disability.

Orphans have many physical needs, and because these needs are the most immediate, they are the most urgent. However, children have significant emotional needs as well. Experience has shown that orphanages find it a challenge to meet the emotional and developmental needs of children, including personalized care and attention. Massage therapy can provide not only physical stimulation to underused bodies, but also gentle touch, social interaction, and the knowledge that someone cares, fostering the hope and confidence needed to take their place in the world as part of society.



HEALTHY CHILDREN

Massage isn't just for big, bad medical conditions with intimidating names. The little troubles of childhood respond just as well. Constipation. Tension headaches. Growing pains. Massage therapy can improve the quality of sleep, enhance body image, decrease anxiety, and reduce aggressive behavior. These aren't earth-shaking issues, but what parent wouldn't appreciate the person who could help a hyperactive six-year-old sit through story time, or 12-year-old feel like her changing body was

actually pretty okay? It may not seem like much, but to the loving family of a child, it can mean the world. Don't ignore healthy kids when looking for pediatric massage clients!

Community service ideas within pediatric massage

FOCUS ON CHILDREN WITH A SPECIFIC MEDICAL CONDITION

In 2009, Congreso de Latinos Unidos received a grant from the MTF to provide [chair massage for individuals living with HIV and AIDS](#). In the US, HIV+ children now receive treatment and are living longer, but often still deal with stigma. Abroad, particularly in Asia and Africa, the number of children with HIV and AIDS continues to grow. Research has shown that massage can help children with conditions ranging from asthma to cystic fibrosis and a host of conditions in between. Who knows? Perhaps your program will be the first to show promising results in using massage therapy as a part of a certain condition's treatment in children.

FOCUS ON CHILDREN BELONGING TO A SPECIFIC POPULATION IN NEED

In 2008, Family of Woodstock joined forces with Healthcare is a Human Right to provide [massage therapy, bodywork, and wellness education to homeless individuals](#) in their region.

Given that there are 1.6 million homeless children in the US, this is a group that is not only large, but very much in need of physical and emotional support. Other groups to consider are children who have experienced some form of trauma such as a natural disaster, child refugees, or children with

family members who are hospitalized, in prison, or being treated for substance abuse. In 2012, Family of Woodstock and Healthcare is a Human Right received another grant, focusing on individuals affected by Hurricane Irene, so this method is clearly succeeding!



FOCUS ON CHILDREN IN A SPECIFIC SETTING

The 2012 Massage Therapy Foundation grantee Reid Massage Therapy Senior Outreach program focuses on providing [massage to individuals who frequent several community centers in rural Indiana and Ohio.](#) Working with a specific setting, such as a hospital, school, or resource center that is already serving children provides not only a simple way to reach those in need, but also the sorts of strong partnerships that make a program sustainable in the long term.



FOCUS ON TRAINING OTHERS

In 2008, a Community Service grant was made in order to support [training families and caregivers of the elderly in massage techniques](#) to alleviate common issues such as muscle pain, insomnia, abdominal discomfort, depression, and anxiety. By focusing on or including training in your community service, you can ensure that your program will be able to reach more people over a longer period of time. Caregivers of children include parents, grandparents, foster families, nurses, and professional childcare providers. Who do you know that could improve the lives of the children around them with some basic training in massage?

THE OPPORTUNITIES IN PEDIATRIC MASSAGE ARE LIMITLESS

Enjoy exploring your interest and education in pediatric massage!

References

Ali S, Drendel AL, Kircher J, Beno S., Pain management of musculoskeletal injuries in children: current state and future directions. *Pediatr Emerg Care.* 2010 Jul;26 (7):518-24; quiz 525-8. Review.

Beider, S., Moyer, C., Randomized Controlled Trials of Pediatric Massage: A Review, evidence-based complementary and alternative medicine, vol. 4, no. 1, pp. 23-34, 2007

Escalona, A., Field, T., Singer-Strunk R., Cullen, C., & Hartshorn, K. (2001). Brief report: Improvements in the behavior of children with autism following massage therapy. *Journal of Autism and Developmental Disorders*, 31, 513-516

Evans S, Tsao JC, Zeltzer LK., Complementary and alternative medicine for acute procedural pain in children. *Altern Ther Health Med.* 2008 Sep-Oct;14(5):52-6. Review.

Field, T., Cullen, C., Diego, M., Hernandez-Reif, M., Sprinz, P., Beebe, K., Kissel, B. & Bango-Sanchez, V. (2001). Leukemia immune changes following massage therapy. *Journal of Bodywork and Movement Therapies*, 3, 1-5.

Field, T., Lasko, D., Mundy, P. & Henteleff, T., Kabot, S., Talpins, S. & Dowling, M. (1997). Brief report: Autistic children's attentiveness and responsivity improved after touch therapy. *Journal of Autism & Developmental Disorders*, 27(3), 333-338.

Field, T., Lasko, D., Mundy, P., Henteleff, T., Talpins, S., & Dowling, M. (1986). Autistic children's attentiveness and responsivity improved after touch therapy. *Journal of Autism and Developmental Disorders*, 27, 329-334.

Field, T., Morrow, C., Valdeon, C., Larson, S., Kuhn, C., & Schanberg, S.(1992). Massage reduces depression and anxiety in child and adolescent psychiatric patients. *Journal of the American Academy of Child & Adolescent Psychiatry*, 31, 125-131.

Field, T., Morrow, C., Valdeon, C., Larson, S., Kuhn, C., & Schanberg, S. (1992). Massage therapy reduces anxiety in child and adolescent psychiatric patients. *Journal of the American Academy of Child and Adolescent Psychiatry*, 31, 125-30.

Field, T., Quintino, O, Hernandez-Reif, M, Koslovsky, G., (1998). Adolescents with attention deficit hyperactivity disorder benefit from massage therapy. *Adolescence*, 33: 103-8.

Field, T., Seligman, S., Scafidi, F., & Schanberg, S. (1996). Alleviating posttraumatic stress in children following Hurricane Andrew. *Journal of Applied Developmental Psychology*, 17, 37-50.

Haun JN, Graham-Pole J, Shortley B, Children with cancer and blood diseases experience positive physical and psychological effects from massage therapy, *Int J Ther Massage Bodywork*. 2009 Jun 29;2(2):7-14.

Hernandez-Reif M, Shor-Posner G, Baez J, Soto S, Mendoza R, Castillo R, Quintero N, Perez E, Zhang G., Dominican Children with HIV not Receiving Antiretrovirals: Massage Therapy Influences their Behavior and Development, *Evid Based Complement Alternat Med*. 2008 Sep;5(3):345-354.

Hernandez-Reif, M, Field, T, Krasnegor, J, Martinez, E. (1999). Children with Cystic Fibrosis Benefit From Massage Therapy. *Journal Pediatric Psychology*, 24:: 175-8122

Hernandez-Reif, M, Field, T, Lergie, S, Diego, M, Manigat, N, Seoanes, J, Bornstein, J, (2005). Cerebral palsy symptoms in children decreased following massage therapy. *Early Child Developmental Care* , 175:445-456

Hughes D, Ladas E, Rooney D, Kelly K., Massage therapy as a supportive care intervention for children with cancer, *Oncol Nurs Forum*. 2008 May;35(3):431-42. Review.

Parlak Gürol A, Polat S, Akçay MN, Itching, pain, and anxiety levels are reduced with massage therapy in burned adolescents, *J Burn Care Res*. 2010 May-Jun;31 (3):429-32.

Procianoy RS, Mendes EW, Silveira RC., Massage therapy improves neurodevelopment outcome at two years corrected age for very low birth weight infants. Early Hum Dev. 2010 Jan;86(1):7-11. Epub 2009 Dec 22.

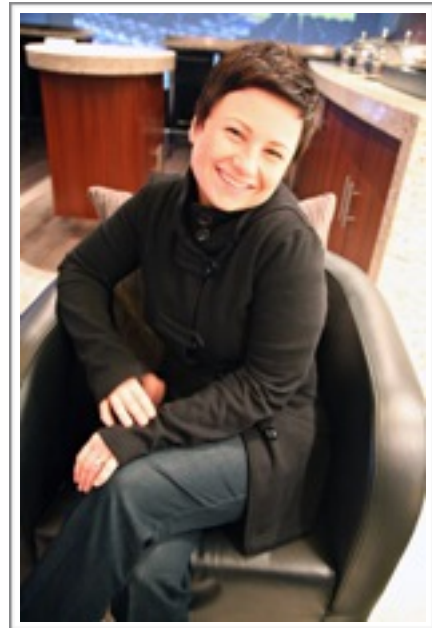
Vickers A, Ohlsson A, Lacy JB, Horsley A (2004). "Massage for promoting growth and development of preterm and/or low birth-weight infants". Cochrane Database Syst Rev (2): CD000390.

About the Author

TINA ALLEN, LMT, CPMMT, CPMT, CIMT

With over a decade of service to children and families, Tina Allen, founder of leading children's health and nurturing touch organization [Liddle Kidz™ Foundation](#), has become a respected international lecturer, educator, author and authority on infant and pediatric massage. She is a Pediatric Massage Master Teacher, Developmental Baby Massage Teacher, a Licensed Massage Therapist with specialized training in providing massage therapy for infants and children with special healthcare needs.

Ms. Allen managed the United States' first comprehensive pediatric massage program at Children's Hospital Los Angeles (CHLA), where she trained volunteer massage therapists and medical professionals to work with hospitalized Rehabilitation patients, medically complex infants in the Center for Newborn and Infant Critical Care (CNICC), Neonatal Intensive Care Unit (NICU), Children with Retinoblastoma, Spina Bifida and Cerebral Palsy. She developed pediatric massage programs at Mattel Children's Hospital at UCLA and Cedars-Sinai Medical Center, as well as developed a program focusing on introducing gentle compassionate touch to women and children who have survived domestic abuse. She is currently consulting on the development of comprehensive pediatric massage programs for several medical programs and hospitals.



Through Liddle Kidz Foundation Global, Ms. Allen regularly organizes groups of professional volunteers to travel to other parts of the world to provide global outreach to children and their caregivers. These children, often considered untouchable, receive much needed touch therapy and compassionate care. Caregivers are always trained to provide healing touch for these children, so they would continue to receive much needed “TLC” long after the volunteer group returned to the United States.

Global outreach focuses on vulnerable infants and children, especially those who are orphaned or have special healthcare needs. Liddle Kidz Foundation Global programs have been implemented throughout North America, Thailand, Japan and Vietnam. Children receiving nurturing touch have the effects of trauma associated with being isolated and abandoned, as well as a host of special healthcare needs.



She is featured as the Infant and Children’s Massage Expert on Canadian Parents and Parent Guide Canada. Ms. Allen has also received recognition as First 5 California’s Champion for Children, was honored with the Richard Ryder Award for her dedicated and passionate service, is a 2009 Massage Therapy Hall of Fame Inductee, 2011 International Massage Therapist of the year, and was awarded 2012 Massage Therapy Foundation/Performance Health Humanitarian of the Year.

This ebook was completed with editing assistance and contributions from [Kat Mayerovitch](#) and [Allissa Haines](#).

About The Massage Therapy Foundation

The Massage Therapy Foundation was founded by AMTA in 1990 with the mission of bringing the benefits of massage therapy to the broadest spectrum of society through the generation, dissemination, and application of knowledge in this field. We do this by receiving donations and granting funds for research, community service, educational initiatives, and conferences. We also do this by providing direct consultation to the medical and research communities, and by educating massage therapists about the world of research. To support ebooks and other work by the Massage Therapy Foundation, please consider making a [donation](#).



About Our Sponsor

Allissa Haines is a massage therapist with a full practice in Massachusetts. Her clients include desk jockeys, weekend warriors, and kids on the autistic spectrum. She is a member of both the ABMP and AMTA. Allissa's blog for massage therapists discussing marketing, business skills and all-around awesomeness in the field of massage can be found at www.writingabluestreak.com. She's also a contributor at [The Massage Learning Network](#), a private marketing consultant, and a future ukulele recording artist.

