

# Entry Level Massage Education's Preparation for U.S. Healthcare Settings: Perspectives from Experienced Massage Therapists

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## INTRODUCTION

Massage therapists work in a variety of settings including healthcare centers (organization, business, or institute providing preventative and/or medical care services). Little is known in the scholarly literature about massage therapists who practice in U.S. healthcare center settings. Reliable data is needed to understand existing educational preparation for those working in healthcare center settings and medical care settings, specifically to better inform educators and practitioners for increasing healthcare integration opportunities.

## PURPOSE and AIMS

The **objective of this study** is to understand the educational and practice experiences and needs of massage therapists who work in U.S. healthcare center settings.

**Specific Aim 1:** Explore and describe the experiences and educational preparation of massage therapists working in U.S. healthcare centers.

**Specific Aim 2:** Explore and describe field educational needs opinions of massage therapists working in U.S. healthcare centers.

**Specific Aim 3:** Explore and describe the extent to which experiences and education opinion differences exist between healthcare center massage therapists who do and do not have medical healthcare setting experience.

**These aims and related research questions are best addressed using a mixed methods research approach. The efforts reported here are those from the first, quantitative phase of an ongoing multi-phased mixed methods research study supported by the American Massage Therapy Association through the Healthcare Operational Committee.**

## METHODS

### Design

Cross-sectional, online survey study.

### Participants

Massage therapists who self-identified as practicing in the United States and currently or has practiced massage therapy in a healthcare center setting. Massage therapy was defined as "... the application of massage and non-hands-on components, including health promotion and education messages, for self-care and health maintenance within a patient-centered framework which includes assessment and evaluation/reassessment and reevaluation, care planning, treatment, documentation, and session closure." Healthcare center was defined as an "organization, business, or institutions that provide preventive and/or medical care services to the public," (e.g., chiropractics, physical therapy, hospitals, integrative clinics, outpatient centers, rehabilitation, therapeutic massage clinic with a physician, or other health provided help). Those who indicated ever working in an in- or outpatient medical clinic, hospital, doctor's office or nursing home were coded: **medical care setting experience**.

**Recruitment:** word-of-mouth, social media, 2 waves of mass email blasts to 20,000 AMTA members. Efforts invited eligible participants to access the REDCap survey via a secured survey link.

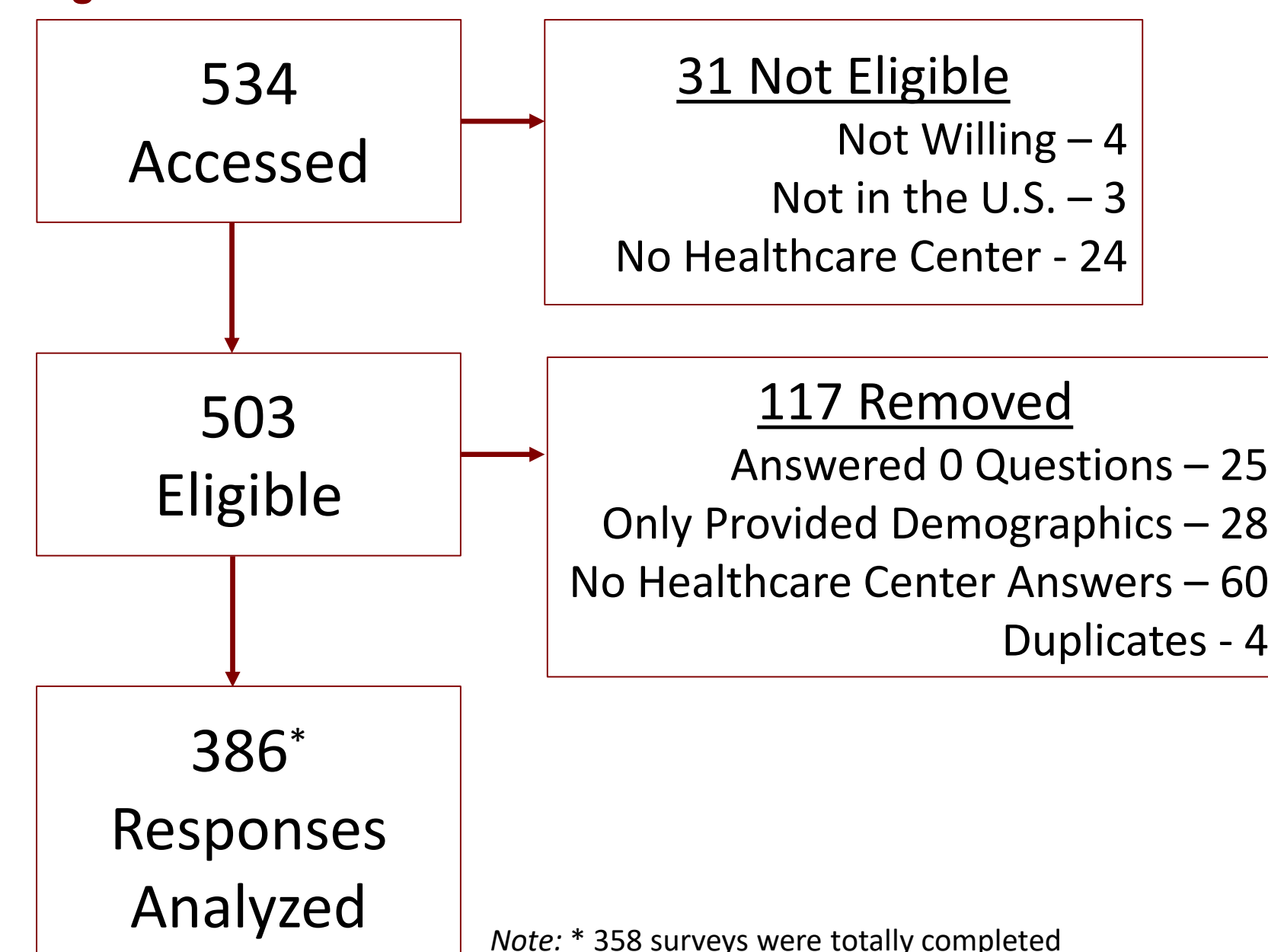
### Measures

A unique, four part survey was developed and used for this study.

1. Study description, eligibility screening, and consent.
2. Participant personal demographics (6 questions: age, gender, education, etc.)
3. Professional characteristics (7 questions: years in practice, hours of training, etc.)
4. Healthcare setting experience & educational opinions needs.

All data were collected electronically through Research Electronic Data Capture (REDCap).

Figure 1: Enrollment Flow



- Survey development occurred April – June 2017.
- Recruitment began July 17, 2017.
- The survey closed September 7, 2017.

Data were collected July 17 – September 7, 2017. **Table 1** displays participant descriptor characteristics and mean and proportion responses for all and by medical setting status. Between group analysis were conducted with chi-squares and t-tests as appropriate.

Table 1: Participant Characteristics and Between Group Comparisons

Variable	All N=386 (%)	Non-Medical Setting n=204 (53%)	Medical Setting n=182 (47%)
<b>Age</b>			
Mean Years (SD)	49.2 (12.3)	47.1 (12.8) <sup>a</sup>	51.4 (11.4) <sup>a</sup>
Younger (22-39)	94 (25.5%)	62 (32.3%) <sup>b</sup>	32 (18.1%) <sup>b</sup>
Middle Aged (40-59)	178 (48.2%)	88 (45.8%) <sup>b</sup>	90 (50.9%) <sup>b</sup>
Older (60-76)	97 (26.3%)	42 (21.9%) <sup>b</sup>	55 (31.1%) <sup>b</sup>
<b>Massage Credentials*</b>			
City or County	49 (12.7%)	22 (10.8%)	27 (14.8%)
State	363 (94.0%)	194 (95.1%)	169 (92.9%)
National	163 (42.2%)	65 (31.9%) <sup>a</sup>	98 (53.9%) <sup>a</sup>
None or No Requirement	14 (3.6%)	5 (2.45%)	9 (5.0%)
<b>Massage Therapist Experience</b> (range 0.5 – 46 years) Mean Years (SD)	13 (8.9)	12.4 (8.5) <sup>a</sup>	15.6 (9.2) <sup>a</sup>
<b>General Healthcare Experience</b> (range <1 – 42 years) Mean Years (SD)	10.5 (9.1)	8.8 (8.4)	12.5 (9.5)
<b>MT in Healthcare Center</b> (range <1 – 35 years) Mean Years (SD)	7.9 (7.1)	7.4 (6.5)	8.6 (7.7)
<b>Healthcare Center Entry</b>			
Immediately – Less than a Year	145 (37.7%)	128 (62.8%) <sup>c</sup>	95 (52.2%) <sup>c</sup>
Year or More	163 (42.3%)	76 (37.4%) <sup>c</sup>	87 (47.8%) <sup>c</sup>
(range: 1-30 years) Mean Years† (SD)	6.2 (5.7)	5.5 (5.3)	7.0 (6.1)
<b>Label for Massage Recipients</b>			
Clients	165 (42.8%)	102 (50.0%) <sup>b</sup>	63 (34.6%) <sup>b</sup>
Patients	209 (54.2%)	98 (48.0%) <sup>b</sup>	111 (61.0%) <sup>b</sup>
<b>Healthcare Center Environments*‡</b>			
Hospice	51 (13.2%)	0 <sup>a</sup>	51 (28.0%) <sup>a</sup>
Massage Clinic or Office	172 (44.6%)	81 (39.7%) <sup>c</sup>	91 (50.0%) <sup>c</sup>
Chiropractic Office	236 (61.1%)	147 (72.1%) <sup>a</sup>	89 (48.9%) <sup>a</sup>
Dentist Office	13 (3.4%)	5 (2.5%)	8 (4.4%)
Interdisciplinary Clinic	60 (15.5%)	23 (11.3%) <sup>c</sup>	37 (20.3%) <sup>c</sup>
Psychologist's Office	9 (2.3%)	4 (2.0%)	5 (2.8%)
Physical Therapy Clinic	60 (15.5%)	31 (15.2%)	29 (15.9%)
Occupational Therapy Clinic	8 (2.1%)	1 (0.5%) <sup>c</sup>	7 (3.9%) <sup>c</sup>
<b>Employment/Work Delineation*</b>			
Independent Contractor	206 (53.4%)	96 (47.1%) <sup>b</sup>	110 (60.4%) <sup>b</sup>
Full-time Employee	100 (25.9%)	53 (26.0%)	47 (25.8%)
Part-time Employee	136 (35.2%)	74 (36.3%)	62 (34.1%)
Self-Employed	102 (26.4%)	47 (23.0%)	55 (30.2%)
Volunteer	31 (8.0%)	3 (1.5%) <sup>a</sup>	28 (15.9%) <sup>a</sup>
<b>MT Payment Arrangement*</b>			
Hourly	161 (41.7%)	68 (33.3%) <sup>a</sup>	93 (51.1%) <sup>a</sup>
Per Session/Service	246 (63.7%)	143 (70.1%) <sup>b</sup>	103 (56.6%) <sup>b</sup>
Salaried	22 (5.7%)	9 (4.1%)	13 (7.1%)
Direct from Recipient	111 (28.8%)	55 (27.0%)	56 (30.8%)
By Recipient through Employer	50 (13.0%)	26 (12.8%)	24 (13.2%)
Therapist Billed Insurance	48 (12.4%)	28 (13.7%)	20 (11.0%)
Employer Billed Insurance	70 (18.1%)	38 (18.6%)	32 (17.6%)
Volunteer / No Payment	39 (10.1%)	5 (2.5%) <sup>a</sup>	34 (18.7%) <sup>a</sup>
<b>Employee Benefits Received*</b>			
Health Insurance	71 (18.4%)	25 (12.3%) <sup>a</sup>	46 (25.3%) <sup>a</sup>
Sick Leave	65 (16.8%)	21 (10.3%) <sup>a</sup>	44 (24.2%) <sup>a</sup>
Vacation	77 (20.0%)	28 (13.7%) <sup>b</sup>	49 (26.9%) <sup>b</sup>
401K or Comparable Contributions	72 (18.7%)	24 (11.8%) <sup>a</sup>	48 (26.4%) <sup>a</sup>
Bereavement Allowance	31 (8.0%)	6 (2.9%) <sup>a</sup>	25 (13.7%) <sup>a</sup>
Training	88 (22.8%)	29 (14.2%) <sup>a</sup>	59 (32.4%) <sup>a</sup>
Dependent Care Assistance	9 (2.3%)	0 <sup>b</sup>	9 (5.0%) <sup>b</sup>
Education Allowance	60 (15.5%)	22 (10.8%) <sup>b</sup>	38 (20.9%) <sup>b</sup>
No Benefits Indicated	243 (63.0%)	145 (71.1%) <sup>a</sup>	98 (53.9%) <sup>a</sup>

Notes: <sup>a</sup> p<0.001; <sup>b</sup> p<0.01; <sup>c</sup> p<0.05; \* Percentages do not equal 100% because respondents could indicate all that apply. † Calculation only includes those who entered a year or more after their initial training. ‡ Between group differences only indicated for non-group defining variables; Other Healthcare Center Settings included Wellness Center, Acupuncture Clinic, Fitness/Weight Control Centers, Assisted Living, etc.

### General Descriptors & Non-Significant Comparisons:

- Majority Female (88.2%) & (84.5%) with lower proportion of non-White therapists reporting work in Medical Settings approaching significance (p=0.09)
- Majority (66.7%) with Associates (19.2%) or higher degree (47.5%)
- Median Entry Training Hours = 720 ; Median CE Hours / Year = 18
- Mean Massage Hours / Week = 17.8 (hands-on massage time only)
- Nearly half (49.2%) - no additional health related credentials beyond massage
- Other health credentials beyond massage included nurse or aide, EMT, health educator, personal trainer, Yoga instructor, Athletic Trainer, PT, etc.

## RESULTS

Table 1 – Significant Comparisons

- Therapists in medical healthcare settings:
  - older
  - national credentials
  - more years of therapy experience
  - higher proportions of independent contractors, volunteers, and hourly wage agreements
- Similar average years until healthcare setting entry (5-7 years) may suggest similar service employment environments at professional entry for therapists.
- No non-medical setting therapists indicated a Hospice work environment.
- Most respondents received **no benefits** from their work in healthcare settings but those in non-medical settings had higher proportions of no benefits while those in medical settings had higher proportions receiving every type of benefit.
- 67% of those who indicated receiving benefits from their employers received two or more benefit types.

Table 1 excludes environment proportions for medical setting participants. Figure 2 graphically depicts reported medical setting environments.

Figure 2: Employment in Medical Setting Environments

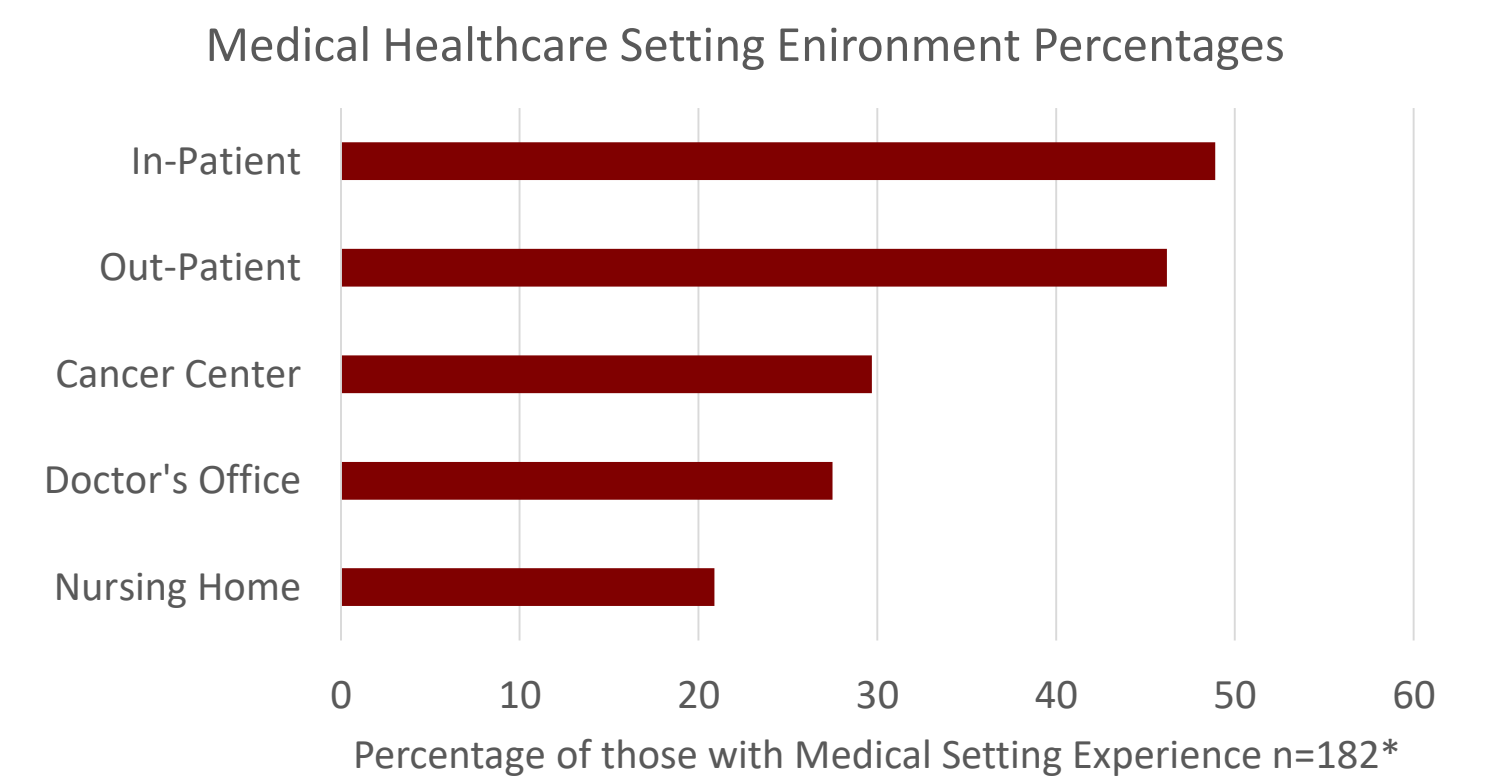
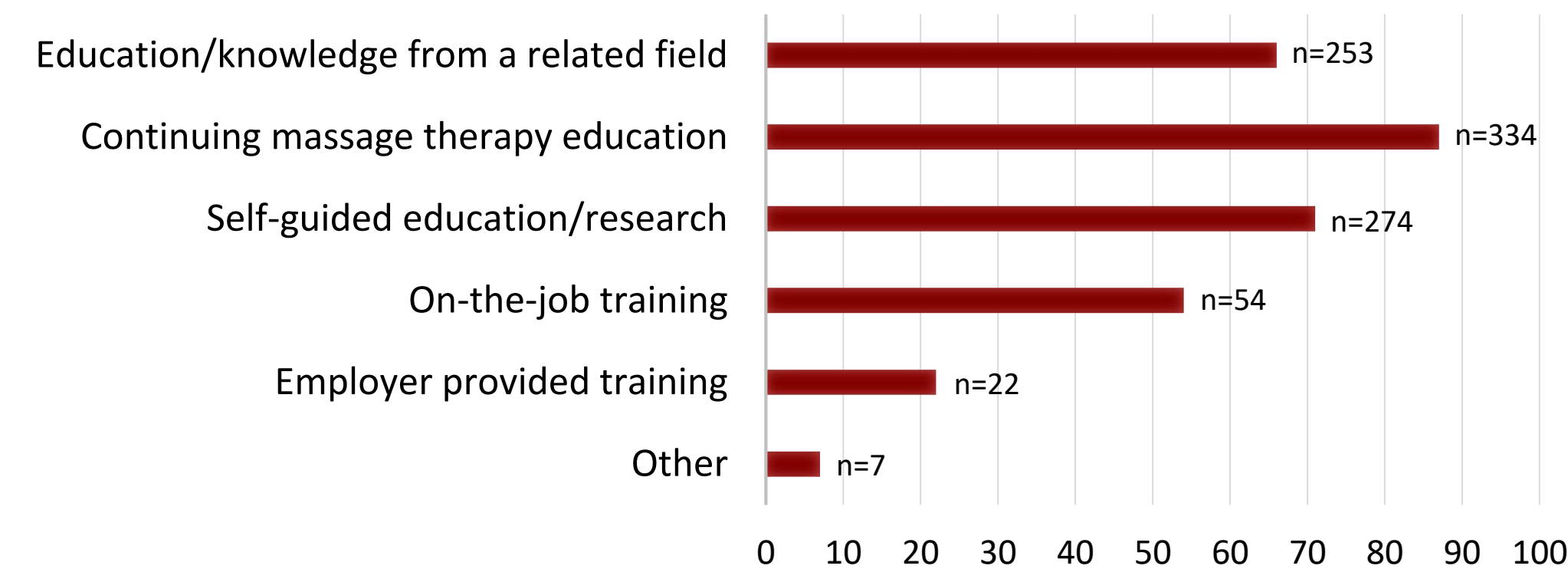


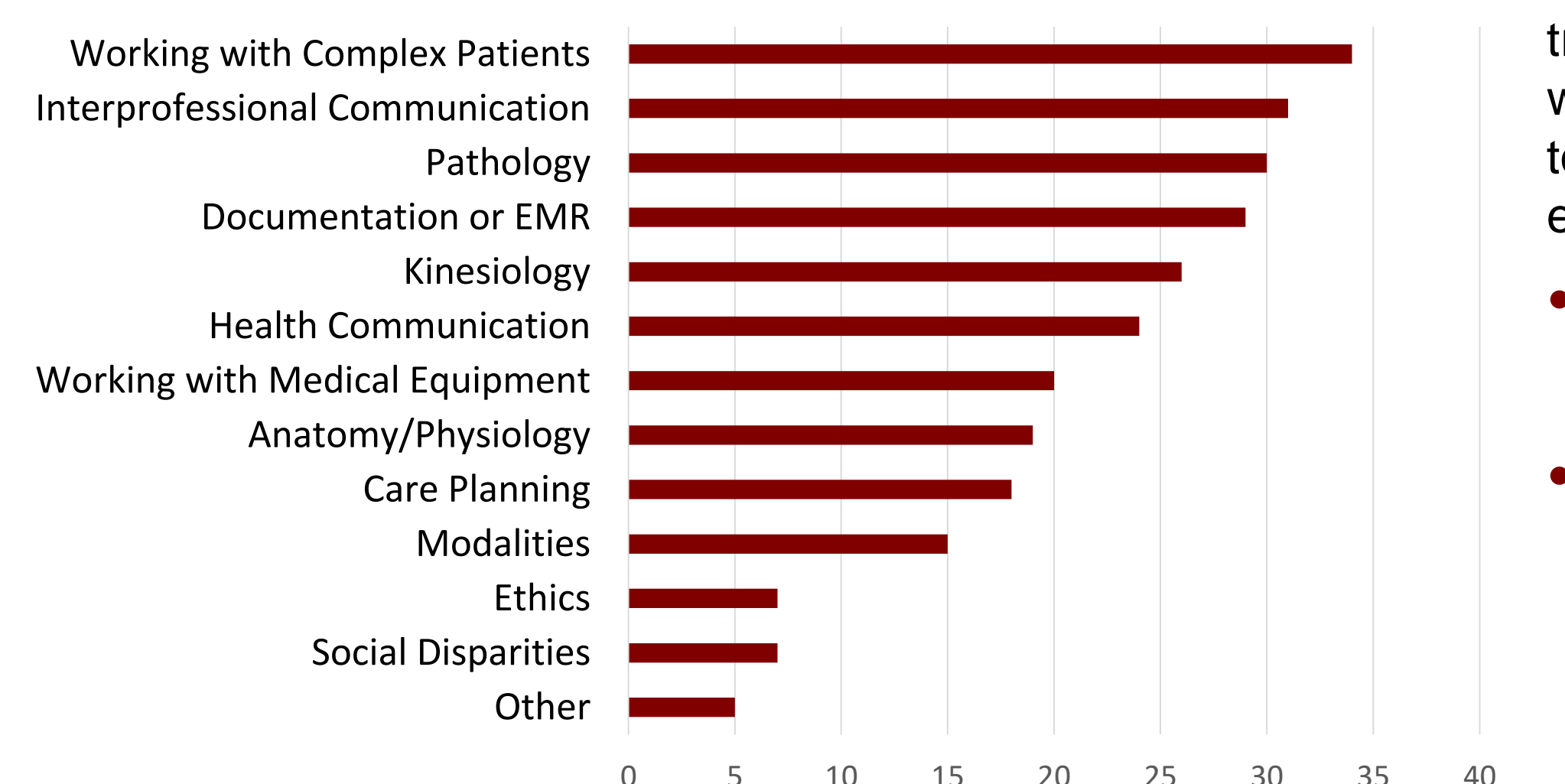
Figure 3: Education Readiness for Success (Percentage of N=386)



Participants indicated any and all options in Figure 3 that contributed to their education and readiness for successful massage therapy work in the healthcare center setting.

- Those from medical care environments reported reliance on experience from other related fields in greater proportions (73% vs. 59%; p=0.003).

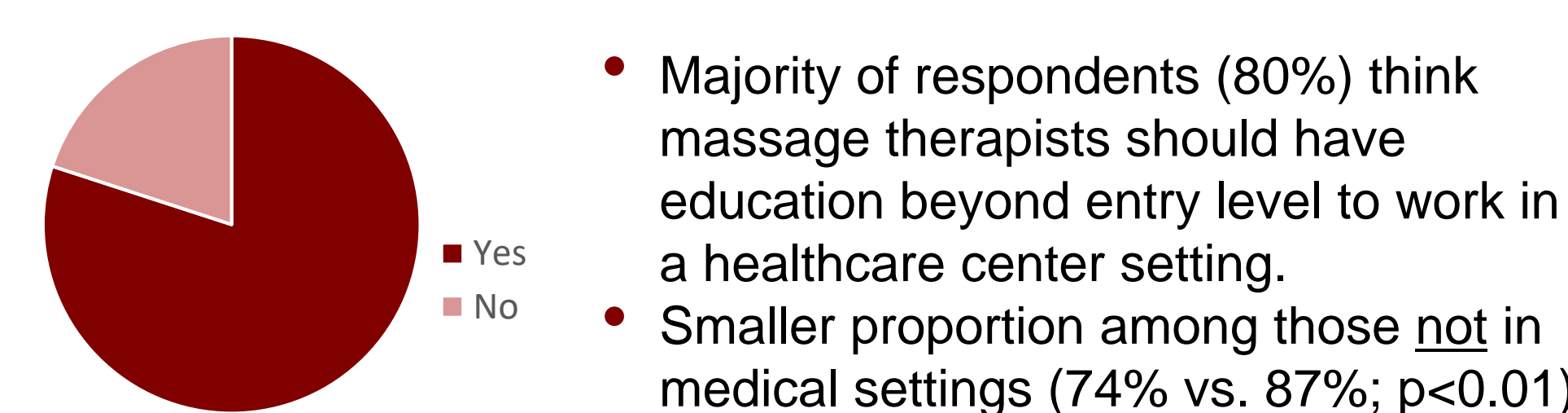
Figure 4: Education Readiness for Success (Percentage of N=386)



Participants indicated which additional training options in Figure 4 they thought would have better prepared them at entry to work in the healthcare center environment.

- 26% strongly agreed their initial massage training prepared them for healthcare environment.
- Greater proportions of medical setting massage therapists believe their initial massage education **did not** provide the tools and/or knowledge to work successfully in the healthcare center environment (44% vs. 29%; p=0.002)

Figure 5: Healthcare Center Therapists and Entry Level Massage Education



## CONCLUSIONS & NEXT STEPS

### Take Away Points

- Massage therapist employment experiences vary for those in healthcare center environments.
- Respondents generally agree that additional education is needed for therapists in healthcare centers.
- Healthcare center environment experience (medical vs. non-medical setting) influences education and preparedness beliefs and expectations for massage therapy professionals.

### Future Efforts

- Additional collected survey variables need to be cleaned and analyzed.
- Qualitative interviews of a participant subsample is pending (52% indicated willingness to interview).
- An overarching aim of these efforts is to generate recommendations for massage therapy stakeholders regarding the educational and practice needs of current and future massage therapists working/who wish to work in medical and non-medical U.S. healthcare centers.

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