

STUDY FOR THE IOWA GENERAL ASSEMBLY

Massage Therapy Modalities

January 15, 2004

IOWA DEPARTMENT OF PUBLIC HEALTH

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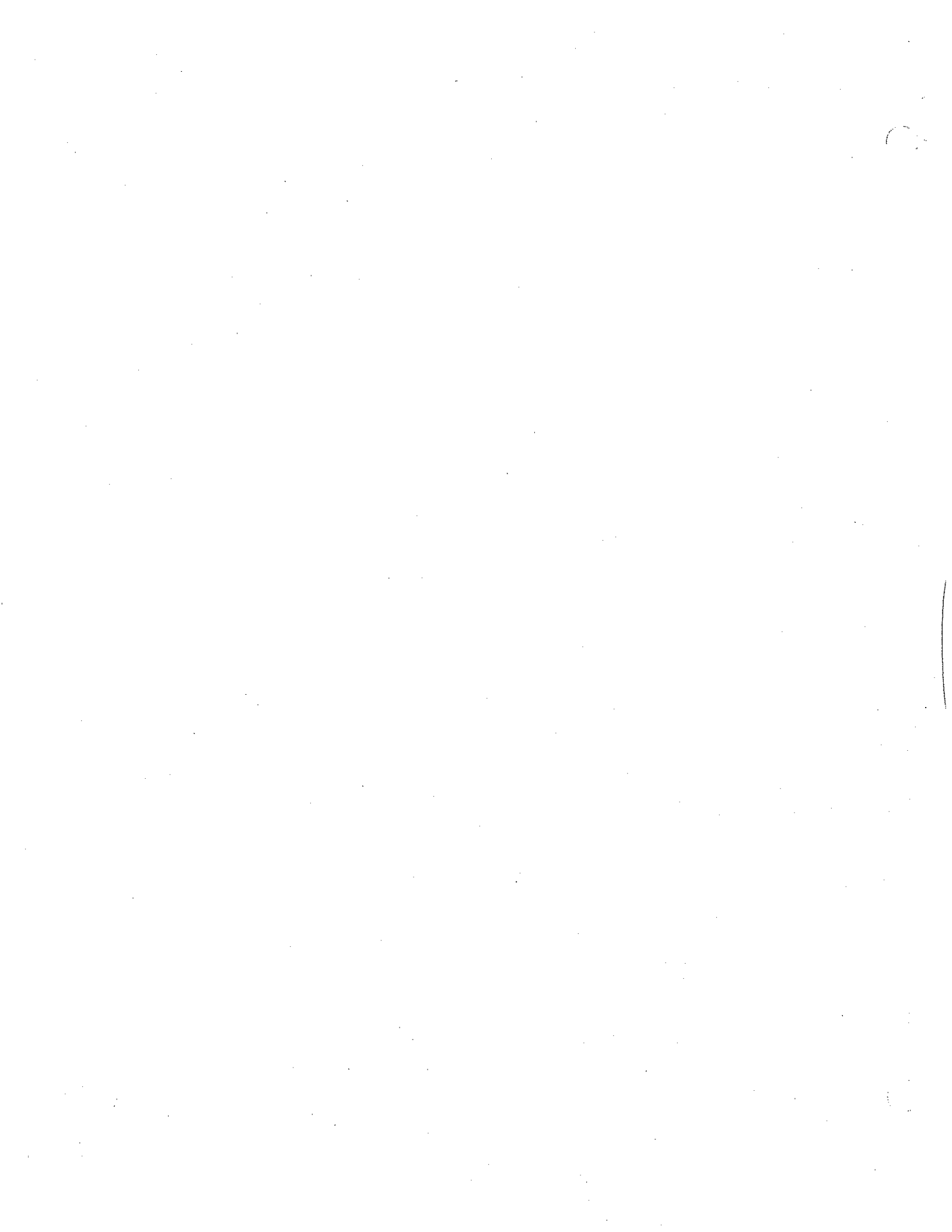


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Executive Summary



MASSAGE THERAPY MODALITIES STUDY

Executive Summary

Purpose of the Study

House File 204 (80th General Assembly) directed the Iowa Department of Public Health (IDPH) to conduct a study of massage therapy modalities. The bill also provided that an individual who is engaged exclusively in the practice of reflexology or an unlicensed individual who is practicing a modality related to massage therapy, but whose practice does not incorporate aspects of massage therapy as defined in Code section 152C.1, is exempt from licensure for a period beginning on July 1, 2003, and ending on June 30, 2004.

Study Design

To obtain input from licensed massage therapists, reflexologists, and unlicensed persons practicing modalities related to massage therapy, the Iowa Department of Public Health (1) held a public hearing and (2) provided the opportunity for people to participate in a written survey. Input was also obtained from the Iowa Board of Examiners for Massage Therapy.

Conclusions and Recommendation

Conclusions

The risk of harm from the practice of massage therapy and massage therapy-related modalities is relatively low. In fact, the Iowa Board of Examiners for Massage Therapy has never had a complaint filed alleging physical injury from massage therapy or the practice of massage therapy related modalities.

Many massage therapy-related modalities have national, and in some instances, international certification and set their own standards of competence, continued competence, and professional conduct. Most of the respondents do not feel that other modalities should be included in the definition of massage therapy and require licensure.

Many consumers feel they have the right to choose the type of health care they wish to pursue. Ultimately, the responsibility is on the consumers to make such decisions for themselves.

Recommendations

The Iowa Department of Public Health recommends that the practice of reflexology be specifically excluded, in 152C of the Iowa Code, from licensure under the Iowa Board of Examiners for Massage Therapy. This report is meant to provide recommendations on licensure. It neither provides nor denies approval of reflexology and related modalities.

The Department further recommends that language similar to that proposed by the American Massage Therapy Association be adopted in Iowa. The full language is found on page 12 of this report.

Currently, exemption language is provided under the definition of massage therapy in Iowa Code 152C.1(3). The Legislature may want to consider adding a "general exemptions" section to 152C, thus moving the current exemption language from the definition and incorporating the new language suggested above.

Study

MASSAGE THERAPY MODALITIES STUDY

House File 204 (80th General Assembly) directed the Iowa Department of Public Health (IDPH) to conduct a study of massage therapy modalities. The bill also provided that an individual who is engaged exclusively in the practice of reflexology or an unlicensed individual who is practicing a modality related to massage therapy, but whose practice does not incorporate aspects of massage therapy as defined in Code section 152C.1, is exempt from licensure for a period beginning on July 1, 2003, and ending on June 30, 2004.

Major Constructs of the Study

The legislation specified the following:

- The Iowa Department of Public Health shall conduct a study with input from the Iowa Board of Examiners for Massage Therapy.
- The study shall be conducted with the input of licensed massage therapists, reflexologists, and unlicensed persons practicing modalities related to massage therapy.
- The objective of the study shall be to determine the modalities to be included under the definition of massage therapy and require licensure. The study shall include, but not be limited to, a recommendation on the licensure of reflexologists.
- The study shall focus on the health, safety, and welfare of the public regarding the modalities reviewed.
- The department shall submit a report summarizing the results of the study and making recommendations on modality inclusion to the general assembly by January 15, 2004.

Definitions

Massage therapy is defined in Iowa Code Chapter 152C.

"Massage therapy" means performance for compensation of massage, myotherapy, massotherapy, bodywork, bodywork therapy, or therapeutic massage including hydrotherapy, superficial hot and cold applications, vibration and topical applications, or other therapy which involves manipulation of the muscle and connective tissue of the body, excluding osseous tissue, to treat the muscle tonus system for the purpose of enhancing health, muscle relaxation, increasing range of motion, reducing stress, relieving pain, or improving circulation. *"Massage therapy"* does not include diagnosis or service which requires a license to practice medicine or surgery, osteopathic medicine and surgery, osteopathy, chiropractic, cosmetology arts and sciences, or podiatry, and does not include service performed by athletic trainers, technicians, nurses, occupational therapists, or physical therapists who act under a professional license, certificate, or registration or under the prescription or supervision of a person licensed to practice medicine or surgery or osteopathic medicine and surgery.

For the purpose of this study:

"Reflexology" is defined by the Reflexology Association of America, as a science based on the premise that there are zones and reflex areas in the feet and hands, which correspond to all glands, organs, parts and systems of the body. The physical act of applying specific pressure using the thumb, finger and hand techniques to these reflex areas results in the reduction of stress, which promotes physiological changes in the body.

Background Information

The use of complementary and alternative medicine (CAM) in the United States has increased dramatically over the last decade. A growing number of people are using alternative approaches to health promotion and medical treatment.¹ To augment conventional care, many licensed health professionals use CAM in caring for their patients.² This rapid increase has led to many questions about safety, efficacy and the need to protect the public through the process of licensure. The list of “therapies” or “modalities” is endless with more than 40 defined at the web site for NaturalHealers (www.naturalhealers.com). The National Center for Complementary and Alternative Medicine classifies the major types of complementary and alternative medicines into five categories, each containing a multitude of therapies and techniques. See Appendix A. For definitions of massage, bodywork and somatic therapies currently in practice, see Appendix B.

This study will focus on reflexology, its relationship to massage therapy and whether, to protect the citizens of Iowa, it is necessary to require the licensure of reflexologists. The study will also examine other modalities and therapies, which are related to massage therapy, to determine if they should require licensure when they are practiced exclusively.

Differences between massage therapy and reflexology

Both massage therapy and reflexology enhance the well being of the client through touch. However, each has its own unique characteristics. Massage therapy is applied to large muscles of the entire body using the hands and sometimes the feet, arms, and the elbows; the purpose is to improve the function of the tissue contacted through direct stimulation by causing those muscles to relax and to improve circulation.

Reflexology is the application of on and off pressure with the thumbs and fingers to the feet, hands and occasionally the ears to reduce stress. Organs respond to the pressure through reflex action of the nervous system. According to theory, the effect of reflexology takes place at a distant point in the body from where the pressure is applied. Additional differences are provided in Appendix C.

Licensure status in Iowa’s contiguous states

Table 1 provides the current regulatory status for reflexology in Iowa’s contiguous states.

TABLE 1

State	Status	Other
Illinois	Reflexology exempted from licensure.	Also exempted are (1) Rolfing, Trager Approach, Polarity Therapy and Orthobionomy, if approved by governing body based on minimal training and demonstration of competency, (2) members of the American Organization of Bodywork who provide Asian body work, (3) and persons treating ailments by spiritual means through prayer.
Minnesota	Enacted a law creating the office of Complementary and Alternative Health Care Practitioners. The office investigates complaints and takes enforcement actions against unlicensed CAM health-care providers and provides objective information to consumers.	
Missouri	Reflexology exempted from licensure.	Exempted are persons who restrict their manipulation of soft tissue to the hands, feet or ears; persons who use touch and words to deepen awareness of existing patterns of movement; persons who manipulate the body above the neck, below the elbow, below the knee and do not disrobe the client in performing manipulation.
Nebraska	Reflexologists must hold a massage therapy license or be licensed in another discipline, which authorizes the practice.	
South Dakota	Neither massage therapists nor reflexologists are licensed.	
Wisconsin	Licensure not required for either massage therapy or reflexology	

In North Dakota, reflexology has its own board. As of 2001, reflexologists are required by law to be registered by the state. Additionally, in the following states reflexology is exempted from

licensure: Arizona, Maine, Maryland, North Carolina, Kentucky, Washington, as well as the District of Columbia. See Appendix D.

Risk of harm

To determine the possible risk of harm, the incidence of malpractice claims was examined. Associated Bodywork and Massage Professionals provides malpractice insurance for its membership. The association reports that it has 2,742 members who practice reflexology and that they have never had a professional liability claim related to reflexology.

Study Design

Input from the Iowa Board of Examiners for Massage Therapy

The Chairperson of the Board was asked to provide input and expertise on modalities associated with the practice of massage therapy, in the development of the survey.

The individual Board members were asked to provide input regarding House File 204. The consensus was that reflexology could be exempted from licensure under the massage board without compromising the health and safety of Iowans. Members of the Board would support exclusion language as proposed by the American Massage Therapy Association (AMTA) model.

Public Hearing

IDPH sought input by holding a public hearing on September 26, 2003. IDPH staff, the chairperson of the Iowa Board of Examiners for Massage Therapy and the vice-president of the Iowa Reflexology Association were present. Seventeen people provided oral comments. Also, speakers were asked to provide a written copy of their comments. The breakdown modalities and type of therapy addressed is found in Table 2.

TABLE 2

Modality	Number of speakers
Reiki	5
Reflexology	4
Massage	1
Essential Healing and Massage	1
Alexander Technique	1
Body Healing and Unlimited Body and Breath	1
Essential oils	1
Breema	1
ISMETA	1
Spiritual Healing	1

The department also accepted written comments from people who were unable to attend the hearing or who did not wish to provide an oral presentation. The breakdown of the additional written comments is provided in Table 3.

TABLE 3

Modality	Number of written comments
Multiple therapies, such as healing touch, Reiki, therapeutic touch, craniosacral work, Polarity, Magnetic therapy, Qi Gong, Mind and Body Interventions; Biologically Based Therapies and Energy therapies	2
Feldenkrais	1
Somatic Movement Education	1
Natural Healing	1
Spinal Stabilization/BEFE and Radionics	1
Trager	1

Summary of oral and written comments

None of the people providing comments recommended that the modalities and therapies listed be included in the definition of massage therapy and require licensure. Furthermore, exemption for licensure was recommended. Several recommended using the exemptions recommended by the AMTA Model State Code Proposal. The recommendations were based on the following points:

- Reflexology has its own specialized National Education Boards; the American Reflexology Certification Board (ARCB) and the American Commission for Accreditation of Reflexology Education and Training (ACARET).
- Reflexology is a specialization quite different than massage therapy in nature and practice.
- Reflexology, Touch for Health, Professional Kinesiology Practice are safe and effective techniques for health care without manipulation or drugs.
- Reflexology and other modalities are extremely important resources and are of great value to the public because they have some of the answers that are missing from traditional medicine.
- The specialized training required for massage therapy is not necessary in order to be a good reflexologist or to practice many other therapies and modalities safely and effectively. Furthermore, the cost of attending a massage therapy school is thousands of dollars and requires months of time.
- There does not seem to be a need for regulation of reflexology or other types of alternative and complementary therapies because these therapies have not been shown to pose a risk to the public.
- The goal of energy-based therapeutic approaches is to restore wholeness through harmony and balance assisting the person to self-heal. Therefore, these therapies bring only positive results and do not impose any type of harm.
- Reiki is not used in place of responsible health care, but as an adjunct to it and is frequently used by other professionals, such as massage therapists, physical therapists, dentists, nurses and physicians.
- The Feldenkrais Method of somatic education is an extremely gentle, noninvasive way of working with people to help them function better through learning about themselves. There is no significant risk to the public from the practice of the Feldenkrais Method.
- The Feldenkrais Guild of North American (FGNA) controls who may call themselves *Feldenkrais* practitioners in North American and they have many built-in protections to assure that those claiming to practice *Feldenkrais* are qualified to do so.

- The Trager Approach is a form of movement education that uses subtle directed movements and the skilled touch of the practitioner. It is not a form of bodywork, and is distinct from massage, Rolfing or other modalities that involve manipulation of the muscles or connective tissues.
- The United States Trager® Association (USTA) certifies *Trager* practitioners, maintains and enforces professional standards of practice and instruction in accordance with the standards of *Trager* International, and develops, coordinates and regulates the teaching of the *Trager* Approach and *Mentastics* movement education in the U.S.
- The F.M. Alexander's technique has national and international societies. The societies maintain bylaws, training requirements for teachers and teacher-training courses, professional conduct rules and regulations, including adjudication procedures, continuing education requirements for its professional teaching members, and standards required for international professional affiliation.
- Non-invasive biofield/energy therapies, such as Healing Touch, Reiki, Therapeutic Touch, Craniosacral work, Polarity, Magnetic therapy and Qi Gong are not in themselves organized or licensed professions. They do not belong to any singular profession.
- To categorize and place any of the alternative therapies under the legislation and regulation of a single profession is not only inappropriate, but is absolutely untenable and disregards the training and professional scope of other licensed health care providers.
- Although many alternative therapies are in the evolution stage in regard to standardization and definition, there is self-regulation as evidenced by the growth of certifications and number of associations.
- Therapeutic modalities using movement and touch, which do not fall under the specific definition of massage therapy, will be regulated by their respective certifying professional organizations (i.e. ISMETA, The Feldenkrais Guild, the Trager Institute).
- There doesn't seem to be a need for further regulation of reflexology or other alternative and complementary therapies because there have been no significant problems or complaints now.

One person recommended that massage therapy be returned to a title act. "Instead of trying to figure out what modalities to exclude from licensure under the massage licensure law, we should be asking the question, "so why do we need regulation of massage therapy through legislation at all?" the person said. This premise was based in part on the low percentage of massage therapists disciplined by the board during 2002 and 2003. A second person also expressed a need for "freedom to work in a field of choice, even massage therapy, since there is not harm done to the client."

Complete copies of the written comments received are maintained in the Bureau of Professional Licensure.

The Survey

IDPH staff collaborated with the chairperson of the Board of Examiners for Massage Therapy and the vice-president and founding member of the Iowa Reflexology Association in the design of a survey to obtain input from licensed massage therapists and unlicensed persons practicing modalities related to massage therapy. The survey was an open-ended questionnaire with 15 items. It was designed to seek information about the modality, educational requirements, certification, practice, professional association, and recommendations on licensure. A final section provided the opportunity for individual comments. Participants were invited to complete

the survey online at the Bureau of Professional Licensure web site. Persons who did not want to respond online could complete the survey and return it by mail.

Using a random sample, the survey was mailed to 10 percent or 162 people licensed as massage therapists in Iowa. It was also sent by electronic mail to all members of the state reflexology association as well as to people who contacted the Bureau office and expressed interest in participating. The survey is found in Appendix E.

Results

A response rate (a calculation of the number of persons responding in relation to the number of surveys sent) could not be determined since the survey was available on the professional licensure web site and any interested party was invited to participate. A space was provided for the name and address of the respondent, but this information was not required.

Seventy-four responses were used for the study. Seven were eliminated because they either addressed more than one modality or were duplicates, thus rendering them invalid.

Sets of questions

The first set of questions asked respondents to identify a modality or therapy and to provide their licensure status. From a review of the table it is apparent that the most frequently addressed modality was Reiki (21) followed by reflexology (18). Seventeen other modalities or therapies were addressed between one and four times. See Table 4.

TABLE 4

Modality	Count per modality	License in Iowa
Reiki	21	RN (2), Social Worker (2), Massage Therapist (4)
Reflexology	18	Cosmetology (2), Barber (1), Massage Therapist (5), Certified Nurse Aide (1)
Alexander Technique	4	0
Breema	4	Massage Therapist (2)
Somatic Movement Education/Therapy	4	0
Healing Touch	4	Nursing (2), RN (1)
Jin Shin	2	Massage Therapist (1)
Unlimited Body	2	0
Unlimited Breath	2	0
Body Harmony	2	LPN (1)
Brennan Healing Science	1	0
Embodiment	1	Massage Therapist (1)
Herbal medicine	1	Chiropractor (1)
Hypnosis	1	0
Laban Movement Analysis/Studies	1	0
Polarity Therapy	1	Massage Therapist (1)
Rebirthing	1	0
RESULTS	1	0
Spiritual Healing	1	0
Trager Approach	1	0
Zero Balancing	1	Massage Therapist (1)

The majority of the respondents (63%) reported that they were unlicensed. The breakdown in regard to licensure status is as follows:

Summary: Out of the 74 surveys:
 15 have a massage therapy license
 5 have an RN license
 2 have a social work license
 2 have a cosmetology license
 1 has a chiropractic license
 1 has an LPN license
 1 has a barber license
 47, or 63.5%, aren't licensed.

In response to the question about multiple modalities, 44 respondents, or 59%, reported that they practice multiple modalities.

The second set of questions examined education and certification factors. The educational requirements vary greatly among the modalities. Certification by a professional association is available for most of them.

In the third set of questions, respondents provided a response to a number of practice topics. See Table 5.

TABLE 5

RISK OF HARM	Low for all modalities and therapies except herbal medicine, which was listed as moderate by one respondent.
AVAILABILITY OF MALPRACTICE INSURANCE	The majority of respondents reported that malpractice insurance is available.
DO YOU DIAGNOSE OR PRESCRIBE	Seventy respondents answered "no." Four answered "yes."
DO YOU REFER CLIENTS	The majority of respondents reported that they do.
DO CLIENTS SIGN A CONSENT FORM	The majority said yes.
WHAT IS THE LENGTH OF TIME RECORDS ARE KEPT	The majority maintain client records. Length of time ranged from one year to indefinitely.
ARE CLIENTS' RECORDS AVAILABLE TO THEM UPON REQUEST	The majority who retain records reported that they do.

In the fourth set of questions, respondents were asked if there was a professional association for the identified modality. Most respondents reported belonging to an association, which has a code of ethics.

In the fifth set of questions, respondents were asked if the modality should be included in the definition of massage therapy as provided in Iowa Code 152C.1 and asked for an explanation for the response. Ninety-five percent felt that the modality or therapy they addressed should not be included in the definition of massage therapy. The five percent who felt the modality or therapy should be included were licensed massage therapists.

The final question was open-ended asking for other information that the respondent felt should be considered. A summary of the comments follow:

- A modality should not be included or excluded by name alone.
- It would be difficult to standardize the practice of Reiki.
- The disclosure procedure is a good idea for both the client and the practitioner.
- There is considerable research and documentation about Reiki. The respondent provided a bibliography.
- Reiki does not harm anyone, but it makes a considerable difference in many lives.
- Adding a layer of government will not protect the citizens of Iowa. Incompetent people will be forced out of business when the word gets out about the incompetence.
- Since Reiki doesn't involve any pressure on the body and often can be given without touching the body, there is little chance of harm.
- Is this really a "turf" battle? Reiki and massage therapy are complementary modalities with entirely separate methods of holistic care.
- Exempt Reiki from regulation by the Massage Therapy Board.
- "As a reflexologist, I was asked to teach reflexology at a local massage therapy school. The class would have been for two half-day sessions. Why should a reflexologist be required to attend massage school when a massage school provides only the equivalent of one day of training in reflexology?"

- To offer some credibility, require a 75-100 hour course, with an internship and a state exam.
- It is important not to lump Breema bodywork in with massage as it is a completely different modality. This is probably true for other modalities that do not pose a safety threat to the public and whose purpose and effect is in the direction of wholistic healing.
- In every state where the Feldenkrais Method has previously been given significant review by a professional licensure body, the conclusion has been reached that this method is not a form of massage and need not be regulated by massage. Several states now include language in their code that exempts the Feldenkrais Method.
- I encourage the drafting of a definition of massage therapy that is as specific as the practice.
- If the law is changed to include ISMETA, then the law should also require training in ISMETA, the title of the board would need to be changed to “massage, bodywork and somatic movement practices,” and the makeup of the board would need to include trained movement therapists.
- Healing touch and other biofield therapies are not related to massage therapy other than that they can be used to support healing as does massage. Many other therapists besides massage therapists use these therapies.
- Many massage therapists can’t afford to take Jin Shin and other types of energy work courses because the massage therapy board will not recognize them for continuing education credit.
- Licensure has gotten out of hand. Massage therapy is not dangerous to the public and should not require licensure. It should be converted to a title act.
- Body Harmony is a spiritual-based healing and living system that recognizes that we are experiencing life as physical beings and utilizes bodywork in supporting and maintaining health. I could write a treatise on why it is not massage.
- Given the definition of massage therapy in the Code, Brennan Healing Science does not fit in any way. It is clearly not massage. It’s like asking dental hygienists to be licensed by the massage therapy board.
- There is no imminent risk of harm by doing hypnosis (contrary to urban legend). Reflexologists are not massage therapists any more that hypnotists are psychologists. Massage therapy should be returned to a title act.
- At the national level, Somatic Practice is recognized to be fundamentally different from Massage Therapy.
- Polarity Therapy should be exempted from the massage law.
- In general, licensure tends to restrict the number of people who can enter the licensed field. Spiritual healing harms no one. Do we need to limit the number of people who learn and practice spiritual healing?
- It seems reasonable to me that there be a classification for those who wish to practice a healing art that is not licensed and should not be required to have a massage therapy license to do so, if what they are doing is not technically traditional massage and they identify and represent themselves properly.

Copies of the surveys received are maintained in the Bureau of Professional Licensure.

Conclusions and Recommendation

Conclusions

The risk of harm from the practice of massage therapy and massage therapy-related modalities is relatively low. In fact, the Iowa Board of Examiners for Massage Therapy has never had a complaint filed alleging physical injury from massage therapy or the practice of massage therapy-related modalities.

Many massage therapy-related modalities have national, and in some instances, international certification and set their own standards of competence, continued competence, and professional conduct. Most of the respondents do not feel that other modalities should be included in the definition of massage therapy and require licensure.

Many consumers feel they have the right to choose the type of health care they wish to pursue. Ultimately, the responsibility is on the consumers to make such decisions for themselves.

Recommendations

The Iowa Department of Public Health recommends that the practice of reflexology be specifically excluded, in 152C of the Iowa Code, from licensure under the Iowa Board of Examiners for Massage Therapy.

The department further recommends that language similar to that proposed by the American Massage Therapy Association be adopted in Iowa. That language follows:

Exemptions. The following practitioners are exempt from the provisions of the Article: *already*
(1) Persons who are licensed, certified, or registered under other laws of this State and who are performing services within their authorized scope of practice and do not hold themselves out to be massage therapists; (2) Persons duly licensed, registered, or certified in another state, territory, the District of Columbia, or a foreign country when incidentally called in to this state to teach a course related to massage and bodywork therapy or to consult with a person licensed under this Article; (3) Students enrolled in a program recognized by the Board while completing a clinical requirement for graduation that shall be performed under the supervision of a person licensed under this Article; (4) *rule 132.3*
A person giving massage and bodywork to members of that person's immediate family; *should have comparison*
(5) Persons who restrict their manipulation of the soft tissues of the human body to the hands, feet or ears and do not hold themselves out to be a massage therapist or do massage therapy; (6) Nothing in this Article shall be construed to prevent or restrict the practice of any person in this state who uses touch, words and directed movement to deepen awareness of existing patterns of movement in the body as well as to suggest new possibilities of movement while engaged within the scope of practice of a profession with established standards and ethics, provided that their services are not designated or implied to be massage or massage therapy. Such practices include, but are not limited to the Feldenkrais Method, the Trager Approach, and Body-Mind Centering; (7) Persons engaged within the scope of practice of a profession with established standards and ethics in which touch is limited to that which is essential for palpation and affectation of the human energy system, provided that their services are not designated or implied to be massage or massage therapy; (8) Persons incidentally in this state to provide services as part of an emergency response team working in conjunction with disaster relief officials. *compare*

The AMTA Model State Code Proposal appears in its entirety in Appendix F.

Currently, exemption language is provided under the definition of massage therapy in Iowa Code 152C.1(3). The Legislature may want to consider adding a "general exemptions" section to 152C, thus moving the current exemption language from the definition and incorporating the new language suggested above.