

Symphony of Soles, October 08 Sydney Conference



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Report on the Conference 'Symphony of Soles'

by Jan Cullen
(with lots of help from Misha Frankel)

Hello everyone, this is a bit of a change from the usual. Libby Stark approached me after the conference and asked if I would like to write an article on the conference in place of the President's report. I gratefully accepted this offer so here I sit with my trusty pen in hand, while Libby is on a flight to Israel to attend the First National Symposium on Reflexology and Cancer.

The Sydney Conference Committee organised a thoroughly informative and entertaining conference. From the colourful vests worn by the Conference Committee members (making it so much easier to find them) to the actual name of the Conference—it was a very professional affair. The Conference Abstract and Proceeding volumes gave background information on the speakers and their topics as it is always good to leave an event with a summary of the talks.

Attendance was good with 168 on the Friday, 185 on Saturday and 165 on Sunday. With so many reflexology colleagues in one place we were finally able to put names to faces, catch up on old friends and make new ones.

There was an excellent range of speakers who came from near and far to share their knowledge with us and tantalise our senses with new experiences and practices.

Mary Masselos spoke about her Seven Tone Healing Method which was based on different musical sounds to deepen physical, emotional and spiritual awareness. Mary asked delegates to sound a particular note. She then improvised the basic sound to produce a beautiful melody on the violin. It was a beautiful way to start the conference—especially as the theme was 'Symphony of Soles'.

Marie-France Muller introduced us to Facial Reflexology based on a Vietnamese technique called 'Dien' Cham'. Her belief was that it was more important to give us and our clients the ability to help heal ourselves through simple processes. Using reflex points on the face she taught us a quick way to rub them to dispose of the common cold. It was interesting to note that this form of reflexology can also be used on animals.

Jan Williams spoke to us about Reflexology and the Older Practitioner. What could one say about this talk? We laughed, we sang, we did a quiz!!!! It was an inspirational talk by an inspirational person.

Jane Elworthy introduced us to the frame drum and her topic 'The Space between the Beats' was somewhat tantalising—what did this mean? She sang certain sounds and accompanied herself on the drum to build up the energy. She distributed other musical instruments and

we all joined in and sang a Hawaiian chant. The silence between the sounds has the ability to take one to a deeper inner depth so that it acts to build up the energy in the room.

Petrea King was an exceptional speaker. Her talk on 'The Sole Purpose of Human Existence' was intense as she described her own life story and the importance of assessing the whole person—emotional and mental, not just physical. She told us two stories about two very special children she had helped in the dying process and we were moved to tears by these two beautiful souls and their courage, love and understanding that they passed on to their families and friends.

Pauline Wills introduced us to the 'Integration of Colour with Reflexology' and what an interesting talk this was. Colour is such an important part of our life and can impact on our senses as a direct result of the intensity and combination of certain colours. Each colour has a different vibration and is associated with different feelings or actions.

Grandmaster Gary Khor talked to us about living with Chi energy. He explained how Feng Shui, Qigong, Tai Chi and Reflexology are based on Chi which is the universal energy of life.

Glenda Chapman's talk on 'The Continuum of Touch' discussed the armouring we put around ourselves as a protective force and how this impacts on the way we stand, hold ourselves and act out our lives.

Lyndall Mollart discussed the 'Incoming Soul on the Sole'. This was an extremely interesting talk that highlighted how important it is for the mother to have a loving and positive attitude towards her child whilst still in the womb as it could affect the incoming soul. Outside influences impacting on the incoming soul were those from various levels—cosmic, karmic, genetic, environmental, geographical. It is really interesting how much goes into the development of a soul prior to birth.

Christopher Dean talked to us about our Universe as a Hologram and his topic of 'Tuning into the Matrix' expanded our senses to include various new discoveries about the field of energy that connects all of creation. He discussed the Resonance and String Theories and the power of the mind through group thought. This was a particularly intriguing subject and, understandably, was difficult to condense into a 45 minute talk. He explained how scientific study is now catching up to complementary therapies.

Continued on page 2

September 2008

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This issue:

Cover photos courtesy of Judee Hawkins.



Nurrudin (Chris) Masuak was the final speaker. He felt it was very important that Medical Sciences and Holistic esotericism be integrated to take on board the whole being—physical, emotional, mental and spiritual. He then demonstrated and played his Tibetan Singing Bowls which he said had been specially selected by his teacher and mentor, Chris Catsanis.

The Board held its AGM on Sunday and it was very worthwhile to have the interaction between the Board and the members where many questions were raised and answered. NSW member, Joan Harwood was given a special award at the ABM for all her years of service to the RAoA.

Graeme Murray proposed that the Board consider an award to be known as the Trevor Steele award for excellence in reflexology. The new award will be for excellence in reflexology. The Board accepted the proposal and it was a unanimous vote that saw this vision of Graeme's become a reality.

The trade tables were particularly busy covering various products such as books, oils, acupressure shoes, herbal teas, essences, reflexology implements, courses, jewellery, health products and general merchandise. There was a wide range of services and it was very pleasing to hear the comments made by the exhibitors such as:

'This was the most professionally run conference we have ever been to.'

'The atmosphere was electric the whole time.'

'There was such a good interaction and feeling between the different trade stands.'

'Everything and everyone was so positive.'

The **social activities** were well attended and a great success. The cocktail party on Friday night saw everyone chatting and networking, re-connecting with old friends and making new ones. There was a regular flow of finger food and hum of excitement.

The dinner on Saturday night was held at the Sydney Tattersall's Club. The food was excellent and the music brought nearly everyone onto the dance floor. It was a case of 'let your hair down', have fun and enjoy yourselves and I'm sure everyone who attended did just that.

It took the Conference Committee 20 months to organise this conference but it was well worth the effort. As with all committees, each member has particular skills and strengths and when they are combined the team spirit shines. Organising these events means many hours



taken out of a person's working day and/or night. We truly appreciate all that the committee has done to make this such a successful conference. I would like to pay homage to the following people who formed the Conference Committee: Barbara O'Keefe (Chairperson), Cherel Waters (Treasurer), Misha Frankel, Joan Harwood, Dorothy Stitt, Judee Hawkins, Melanie Parsons, Sue Ehinger, Sarah Sinclair, Doris Gordon and Graeme Murray. You all did an extraordinary job.

How could a conference run without volunteers to help out on the day? A special thanks goes to Gwen Dean, John Bancroft, Janet Burgess, Cathie Bromwich, Marijke Wester, Wendy Wallin, Virginia Fotiadis, Mel Jordan, Doris Litski, Aynsley Thomas and Jenn Cooper.

The MC for the 3 days was Gretel Spiegel from the NSW branch who did a wonderful job introducing the speakers, informing us of 'announcements' and arranging many lucky door prizes to be drawn.

There were quite a few Door Prizes which were drawn at various times over the weekend. Raffle tickets were sold during the conference and the major draw for the Raffle was held on Sunday morning. Thanks to Sue Ehinger who negotiated with Athlegen for this major prize, which was a top of the range massage table. Martin and Pleasance donated the second door prize of a basket of various products and Sue Ehinger donated a Meridian Clock.

Major sponsors were Subtle Energies, Enlightened Therapies, Nature Care College, Brumby Books & Music, OAMPS Insurance Brokers Ltd.

We would also like to acknowledge the following companies and organisations for their support of the conference: Art Gallery of NSW, Athlegen, Australian Bush Essences, Australian School of Reflexology, BioNatural, Dave Randall Photography, Historic Houses Trust, Jewish Museum, Kali7 Studio, Lynne Booth, VRT (UK), Martin & Pleasance, Melrose Health, Mental Health Association NSW, Museum of Sydney, Ros Couper, Select Botanicals, SNAP Printing Blacktown, Sperling Enterprises, Springfields, Sydney Aquarium, Sydney Opera House, Sydney Tower, Sydney Wildlife World The Art of Healing, University Co-op Bookshop and What's On in Sydney.

Finally, thank you to the wonderful delegates from all around Australia and to our New Zealand friends for your attendance at this conference. The NSW members will look forward to meeting up with you all again at the Brisbane Conference in 2010.

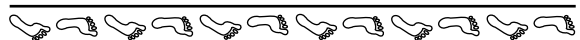
And in parting, we would like to leave you with the following comments from delegates:

'It was the most exhilarating weekend I've been to.'

'I was on a high the whole weekend.'

'Beautiful flow of energy.'

'Excellent speakers with topics all flowing one into another following the theme of the conference.' 🙌



REFLEXOLOGY ASSOCIATION OF AUSTRALIA LIMITED

The Reflexology Association of Australia Limited was incorporated in 2002 as a company limited by guarantee (ACN: 101 412 319)

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The Team at FootPrints
would like to wish
all our readers and their
families a very
happy Christmas and a
peaceful New Year



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Board Report—October 2008

Anne Young, Vice President

The Board of the Reflexology Association of Australia had very fruitful discussions prior to the Annual General Meeting in Sydney. Two new members were welcomed to the Board; Patricia Turner who is now the board secretary and Kim Rusten who will be looking after the education portfolio. Ruairi O Duil our fabulous publicity officer has resigned from the board. We are sorry to see Ruairi leave, however we respect that family and work must come first. Ruairi has promised to still help with promotion ideas and has a great one for a new brochure next year.

It was resolved to strongly encourage all professional members to obtain or maintain provider status with health funds (even if on leave) as this would enable them to stay in the loop if more strenuous requirements are prescribed by the Health Fund Industry. In order to maintain provider status, members will need to fulfil the requirements of Professional status as lists of professional members are requested regularly by the health funds.

The Board discussed the Continual Professional Training program (CPT) and it was resolved that CPT was to remain as is: 20 pts per year. In line with the provider requirements by Health Funds, members are reminded that all providers are liable to an audit by Health Funds. Don't forget that the Members Forum on the website can count for CPT points.

The Board wishes to advise that the Powerpoint presentation on the members website is unlocked. This means members can adapt and personalise it for their own use. This is a valuable resource for those members giving community talks.

Much discussion took place on the guidelines for the awarding of Life Membership. These Guidelines/ Procedure are to be added to the by laws:

1. minimum 10 years or more membership of RAoA Ltd;
2. not currently elected or serving on Branch or Board;
3. doesn't have to be every year, limited to one a year;
4. nomination doesn't guarantee award;
5. has served at least one full term on Board of RAoA.

The audit of financial records and the Treasurers report show that the Company has made a loss of approx.

\$32,000. Losses have been made on workshops, festivals and promotions. Costs have increased in administration, wages and printing and postage of Footprints. We have raised fees and increased merchandise in anticipation of this loss.

The company has a good cash flow and is solvent.

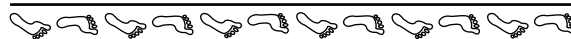
Since the inception of the Company our Membership Administrator has handled all the business of administration from her home. Due to the increase in work, the addition of part-time staff and the fact that Jenn Cooper is now moving house, it has been decided that RAoA is going to have to get a separate office. This new office will become the business centre for the Company. Jenn is currently looking at premises within a tight budget.

The Board discussed the issue of Health Fund rebate to our clients. Through talks via FNTT with the account managers of the major health funds it has been decided that lobbying all the funds by the RAoA is not going to be effective. Rather a policy of asking all professional members give at least 10 of their clients a letter to sign and posting this on their behalf would create a flood of letters to health funds from fund customers. This flood of letters will attract more attention than just one letter from RAoA. There is a letter available for downloading on the web for members to use. Clients may sign this more than once.

The board is very interested to know what reasons the funds are giving for not giving reflexology cover to their customers. To this end we are asking that if clients are not getting a rebate from their fund to find out from the fund why, and practitioners inform the Board.

A letter of thanks to a health fund that supports reflexology for clients to sign, will soon be on the website as part of the campaign.

Gift vouchers will be available before Christmas. These will be on the website for download and also available from Jenn Cooper in the membership office. Please keep an eye on the website to see when these are available. ☺



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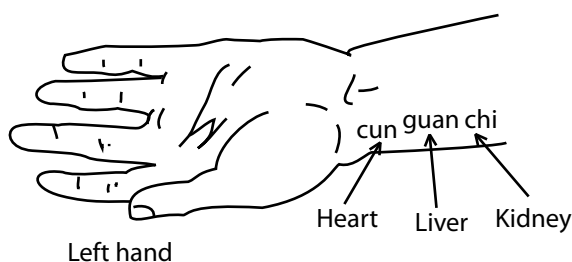
Pulse taking and Reflexology

by Philippe Mathon, MBRA

One of the main diagnosis tools that acupuncturists have at their disposal for their treating a patient has been for centuries taking their patients' pulses.

Most people already know that the pulse reflects how the heart pushes blood through our arteries and most of us will have had our heart rate taken by our GP. It should normally be between 60–70 beats per minute on average. Whether it is too slow, too fast or irregular can indicate a possible heart problem, clogging of arteries, etc. What most of us don't necessarily know is that according to Traditional Chinese Medicine, our pulse, or I should say pulses, show the state of all our major organs/meridians.

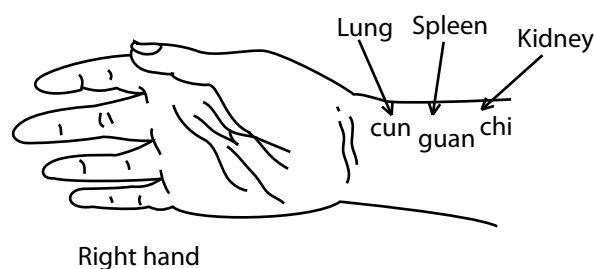
Pulse diagnosis is important for two reasons—it can give very detailed information on the state of the internal organs and reflects the health of every part of the body. It gives the Chinese doctor an indication of the overall constitution of a person. Just as the tongue can reflect these phenomena (see my recent article in FootPrints), so does the pulse. The main difference is that the tongue takes longer to change and show a more long-term picture of health, whereas the pulse can change very quickly, depending on how the flow of Qi and blood has been affected by our treatment, by stress and by external factors.



Left hand

LEFT WRIST

Front: heart / small intestine
Middle: liver / gall bladder
Rear: kidney / bladder



Right hand

RIGHT WRIST

Front: lungs / large intestine
Middle: spleen / stomach
Rear: gate of vitality fire

Pulse diagnosis is a very subtle skill. It is taken on the radial artery, placing your middle finger just beyond the head of the radius, dividing it into three sections on the wrist and detecting it at three different levels. The three wrist sections of the pulse on the radial artery are the front, middle and rear, respectively. The three levels are superficial (pressing lightly), middle (pressing a little deeper) and deep (pressing even deeper). The three levels at each of the three sections on the wrist are referred to as the 'Nine Regions'. Those Nine Regions each correspond to an organ and the quality of the pulse, to its state of health.

Each pulse position can reflect different phenomena in different situations. For example, in a state of health, the left middle pulse (liver) will be relatively soft and

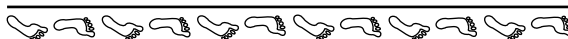
smooth, neither superficial nor deep. Therefore, we can say the liver and gall bladder energies are balanced or that the Yin and Yang within the liver/gall bladder sphere are balanced. If a patient is experiencing migraine headaches, the pulse feels wiry (harder or tighter than normal) and more superficial and pounding.

As mentioned before, pulse taking is an art form and a hard skill to learn. But well worth it! There are well over 25 different kinds of qualities to a pulse that a very experienced Chinese doctor will be able to identify. However, in the beginning, the inexperienced pulse taker will probably only recognise between 5 and 10. When I first started to learn Chinese medicine, I used to practice on my reflexology patients and used to take the pulses of every one of them before and after the treatment to get some practice. Most patients were fascinated by it. Even then, I was amazed by the change in quality (for the better) after a reflexology treatment. Even though the paradigms of Acupuncture or Chinese Herbs and Reflexology are different, I think tongue diagnosis and pulse taking can still be used as tools to help assess improvements in your Reflexology patients and highly recommend taking the time to try and learn how to read pulses. There are a number of books on the topic. You don't always need to understand

everything about TCM to understand them. A very simple and easy book is: 'Pulse Diagnosis' by Li Shi Zhen, available at <http://www.amazon.co.uk/exec/obidos/ASIN/0912111062/4bodyhealth>. Alternatively, another good one is: 'The Secret of Chinese Pulse Diagnosis' by Bob Flaws available at <http://www.amazon.co.uk/exec/obidos/ASIN/0936185678/4bodyhealth>.

I hope this short article gives you a bit more of an insight on pulse diagnosis, as I think it could be a useful tool for western trained doctors as well as other therapists like reflexologists.

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The benefits of networking

Meet Shayne Hughes—Broome WA

*Shayne Hughes & Kim Rusten, Education Officer to the Board
Broome August 2008*

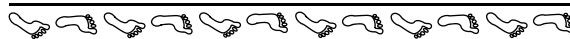
Before I packed my bags for Broome, I checked in with the RAOA membership office to see if there were any reflexologists in Broome that would like to meet for a professional exchange. I made contact with Shayne and we agreed to meet at his stall at the Broome markets.

Shayne is the only registered professional reflexologist in Broome (population 15,000 in the quiet season). He and partner Christine are worked to the bone under their reflexology/massage tent every Saturday and Sunday at the markets. Unfortunately for me, Shayne was booked out—so the treatment opportunity I was looking forward to slipped by. Shayne and Christine operate a busy clinic from home the rest of the week and, by the sounds of it, have plenty of regulars.

Shayne supports local organizations with fundraising ventures and reflexology support—the ambulance officers of Broome, greatly appreciating his efforts.

We met a couple of days later in a café to talk about training opportunities outback. Formal courses are chosen very carefully as they are expensive, exacerbated by travel and accommodation costs for regional reflexologists. It appeared to me that reflexology exchanges using techniques from courses held in the major cities could help these reflexologists make decisions about the training they wish to undertake. The major disadvantage of being the sole practitioner in a town is the lack of networking opportunities and professional support. Thanks to the internet, Shayne has developed close relationships with other professionals thousands of kilometers away—but you know, there's nothing like a face to face discussion and a treatment.

I've found the reflexology community very warm and welcoming wherever I've travelled in the world—so don't be shy, try some networking and remember to claim a few dollars for the effort on your tax return!!



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Reflexology and the nadis

by Sharon Stathis

‘Energy-based medicine’ is currently a buzzword amongst reflexologists. However, for many practitioners, the focus for a clinical session of reflexology is based solely on the physiological and anatomical aspects of body function. The role of energy in these processes is often less understood. Let me introduce you to some of the energetic components of Ayurvedic philosophy and how they impact on reflexology therapy today. The energy channels (nadis) are of particular interest.

Ayurveda is the ancient, complete medical system of India. Ayurveda provides a multidimensional approach to wellness. It includes surgery and medicine, as well as healthy daily living and spiritual practices. When referring to health or disease, the word ‘energy’, is the most important underlying principle involved. This energy can take many forms.

Within the Ayurvedic philosophy, our body and mind functioning is completely dependant on receiving a healthy energy flow. In a healthy individual the supply of energy is sufficient to maintain a healthy state. In one suffering physical and/or mental illness the energy has been disrupted in some way.

There are three major types of energy centres to be considered in the Ayurvedic system: the chakras, the nadis and the marma points. They are all involved with the flow of vital energy (prana). Prana is the equivalent of qi (or chi) of the Traditional Chinese Medicine (TCM) system. According to Ayurvedic philosophy, the body (and mind) cannot remain healthy if the flow of prana is interrupted.

Prana flows within the body through micro energy channels called nadis (similar to the Chinese meridians). Situated along the nadis are vital energy centres called marma points which assist the flow of prana. The Prana flows from the chakras, through the conduit of nadis, to various points in the physical body.

The exact number of nadis within the body is not agreed upon among Ayurvedic scholars. However, there is general consensus that fourteen of the nadis are regarded as the most important. According to the Yoga system, these fourteen nadis emanate from the base chakra (Mulhadara). Each nadi is associated with a point or opening at the skin surface.

Two of the nadis are of particular interest to reflexologists due to their location on the hands and feet. Yashasvati is the nadi that terminates in the right hand and foot. Hastijivha is the nadi terminating in the left hand and foot. These nadis supply prana to the right and left sides of the body respectively and to the associated limbs.

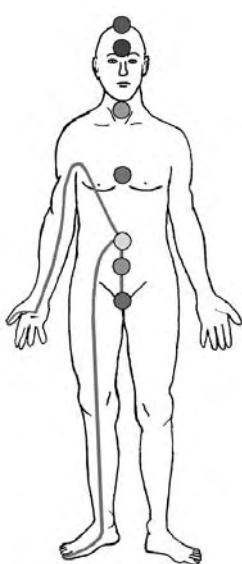
The primary apertures for these nadis occur at the ends of the thumbs and great toes, with secondary apertures at the ends of the other digits. Two of the five marma points occurring in each hand and foot are significantly associated with the flow of prana through these nadis.

If the flow of prana in Yashasvati and Hastijivha is maintained at peak efficiency, all marma points on the respective side of the body will benefit. Reflexologists, by means of working on the feet and hands are supporting the flow of prana in these nadis. Working on the thumbs and great toes is of particular significance due to the location of the primary apertures of these two nadis.

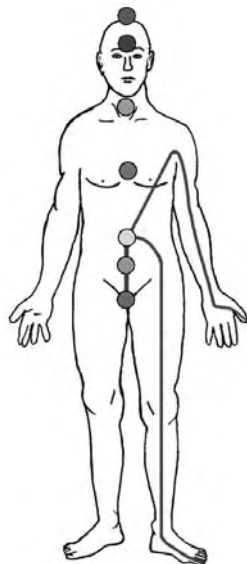
Put simply, working on the right thumb and great toe will support the flow of vital energy to the right side of the body. Working the left thumb and great toe will support the flow of prana on the left side of the body.

The great toes are also of significance in the Siddha system of medicine. The Siddha system is also from India. In the Siddha philosophy, two other major nadis (Pingala and Ida) begin at the interphalangeal joints of the great toes. Pingala nadi supplies energy to the right side of the body and Ida to the left side.

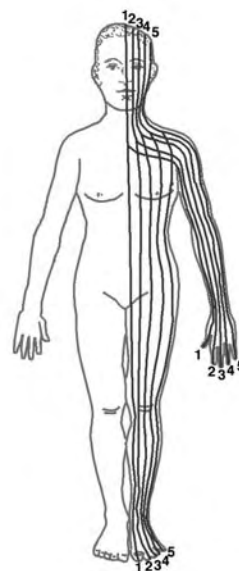
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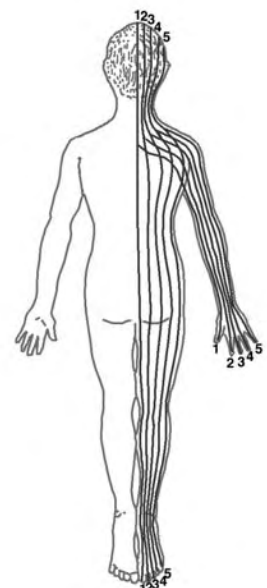
Yashasvati nadi



Hastijivha nadi



Fitzgerald anterior



Fitzgerald posterior



Healing pathways

by Deirdre Brocklebank

My journey along the healing pathways began in the late 1970s when I first experienced hands on healing. It was also the first time that I was instructed on how to give this type of healing. This was through a spiritual church in Canberra, the national capital of Australia.

I have formalised my healing activities since then with a Diploma of Reflexology and attendance at numerous workshops/seminars/conferences and public presentations. The work that I now do is the result of years of theory and practical application of Reflexology and other healing modalities. I work from a home-based clinic in Canberra which is convenient and offers me flexibility.

I now feel I have completed a circle in my healing activities. This is because the healing at the Spiritual Church was from Universal love energy (the Creator, or God, or whatever you choose to call the Source from which this energy flows) and I am now tapping into this energy with Theta* Healing.

In my practice I now combine elements from some of the modalities which I have studied including Reiki, Jin Shin Jyutsu, Shiatsu, crystal healing, Pranic Healing, Kinesiology, Reflexology, EFT and Theta Healing. My main modalities are the last three that I have listed. I have found my clients benefit greatly from the combination of those modalities. They generally experience rapid reversal and positive changes from what they have been experiencing in their lives on all levels, whether physical, emotional, spiritual and/or mental after our sessions.

I am currently working with several clients who are experiencing different degrees of depression ranging from paranoia and panic attacks to bipolar. I have had several other clients with the same conditions over the last few years but not in clusters like now. Practising therapists will no doubt identify with the phenomenon when they get several clients with the same conditions all seeking help at the same time.

I have documented the following short case summary to demonstrate how I combine Reflexology, EFT, Theta Healing and Kinesiology (muscle testing) in a session. This summary is for two sessions for a male client of mine with depression. I will call him Johnny. Johnny is 40 years old. He was diagnosed as a compulsive obsessive and a major depressive by his GP 2 months ago. He is taking the anti-depressant drug Luvox. He was diagnosed as having ADHD when he was a child but his mother refused to have him put on drugs and she dealt 'with it with love and discipline.' Johnny always felt 'different' at school. He

also has an intense fear of how he will die, rather than a fear of dying. His most pressing concern was that he has 'moderate' panic attacks which he believed came from being bullied in a previous work place situation a year before. He has also been agoraphobic for some time and has felt unable to leave the house. He regards himself as a hypochondriac and his fears about his health can also lead to panic attacks. He is overweight and this concerns him. He is quite proud that he has shown willpower by stopping smoking 2.5 years ago.

Johnny arrived at his appointment with his wife as he felt very apprehensive about seeking help for his problems. It was a big step for him as he had previously refused to seek help when his wife suggested it.

I use muscle testing with EFT and also for testing for Theta Healing beliefs. It was interesting to note that my client responded to 'Johnny' but also sometimes to 'John' when I was muscle testing him. He explained that 'Johnny' was for his close friends to use. I believe that it was an indication of the rapport that we built, that he responded only to 'Johnny' for the muscle testing in the latter part of the session.

This uncertainty about which name he responded to (and in a sense *who* he was), lead into valuable discussions about his main issue. He'd had a very uncomfortable situation at his former work place a year before and it had affected his self esteem. Apparently, a colleague whom he had supported had begun to say untrue things about him to his supervisors. He asked to meet with her to resolve the issues and to 'start again.' She agreed and appeared to respect this, but she later reverted to her former behaviour. He felt betrayed and unsupported, particularly when she got a position for which they had both applied. According to his wife, 'he is not able to move forward in his life and is being held back by his attachment/anger towards what happened in his previous work environment'.

As mentioned previously, Johnny had not sought help with this problem before, despite his wife's urging. He only agreed to see me because his feelings of lack of self worth had so escalated that it was affecting his new job and sometimes he was unable to face leaving his house. This was happening despite the fact that his new manager is very supportive and understanding of his depression. His low self esteem had contributed to his weight gain and the belief that he was only safe and supported at home.

I decided to apply Theta Healing to clear self-sabotaging beliefs around the work incident, before doing the EFT. I used muscle testing to confirm which beliefs he held and later to test whether or not the beliefs were cleared. The beliefs that were cleared were: *I mean nothing; I don't exist and I am not good enough.* He believed that his life would be good if he was happy. Before clearing sabotaging beliefs around happiness the following beliefs were cleared: *I deserve to be worried and I don't deserve to be loved* (because he had equated love with happiness).

* **Theta Healing** is a spiritual healing technique which enables us to transform limiting beliefs that may be holding us back from living the life we desire. This applies to all aspects of our life including our appearance, health, happiness, spiritual development, creative abilities and relationships. Theta Healing gives us the choice, and the power, to change those beliefs and as a result, to re-create every aspect of our life. By identifying and releasing these deeply held blocks we can reprogram the unconscious mind. Instead of walking around *wanting* something, we can teach our unconscious what it feels like to have it—and attract that energy into our life.

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Reflexology Association of Australia

Healing pathways
Continued from page 8

I downloaded *I have the Creator's discernment and understanding of love*, and cleared, *I am afraid of love*. After clearing these beliefs the following beliefs about happiness muscle tested as positive: *I affirm my desire to be happy; I believe I can be happy; I choose to be happy and I deserve to be happy*.

Johnny was much more visibly relaxed after the above work and in order to shift his focus from the conditions and perceived weaknesses with which he has associated himself for years, I asked him to tell me what he liked about himself. He listed the following: *I'm honest, funny, happy, loving, I can be moody, I tell jokes and I'm easy going*.

I explained EFT to him and we both tapped on ourselves for the following setup for the work incident. 'Even though I felt betrayed by L.... after I helped her to get a position where I worked and it was great initially, but then she changed, probably because she saw me as a threat. I felt like a pariah and rejected. Even so I deeply and completely accept myself unconditionally with love and gratitude.' He rated his feelings of being betrayed and unsupported at that work place as 9.

After doing the setup he tapped on himself while I tapped on myself from the Top of Head to the Karate Chop points using phrases from the above setup. The phrases he said included the following: *she betrayed me; she saw me as a threat; she turned others against me; she made me feel worthless; she told others I was a liar; she hated me and they hated me*. I tapped on his Collar Bone point for emphasis when he became emotional and teary. After one round I felt his energy shifts and he was aware of relaxation through his throat and chest. When I asked him to rate the intensity of the issues he said, 'Who cares. It's her problem.' When I asked him to retell the story he had no reaction but merely observed of his antagonist that 'She changed'. The incident occurred almost a year ago and muscle testing confirmed that 'there are no other incidents relating to the incident with L.... that now need to be addressed.'

Other beliefs that I identified (and then either cleared or confirmed with muscle testing) which could have affected his work situation were: *I am understood (no); I choose to be supported (yes); I am pulling my weight at work (yes); I am letting them down at work (no); I am appreciated at work (yes) and I now choose health, balance, joy and happiness (yes)*.

As often happens when using EFT, either after a problem is cleared, or while it is being addressed, Johnny recalled another incident at another previous work place (in Western Australia). It was to do with himself and a drug addict. He thought he had dealt with that situation and was surprised that it came to mind. I cleared the charge around this by clearing the following belief: *I am carrying the trauma of that incident in Western Australia*.

Johnny agreed that he has fallen into the habit of acting out his diagnosed conditions. He believes he is a hypochondriac as he believes that he has whatever condition he sees on television or reads about. This

is something that we will address more in future sessions along with other beliefs around his obsessive compulsiveness, depression, agoraphobia, panic attacks, ADHD childhood experiences and weight issues, plus anything else that becomes apparent during sessions.

He was very excited by how relaxed he felt during the Reflexology and how good he felt at the end of the session. He felt excited by the future and was looking forward to our next session.

Johnny arrived on his own for his second visit. He looked and sounded more cheerful and confident. He also felt 'recharged'. He had been to work all week since the last session and he had no hesitation in leaving the house or being at work. He also noticed that when he came home from work he was eating much less than normal but still feeling satisfied.

He still regarded himself as an obsessive compulsive because he felt compelled to wash his hands at least 10 times a day if he handled anything dirty. He thought that this obsessiveness started when his family moved interstate (from Queensland to Victoria). As they moved regularly for his father's work, he did not see the move itself as creating a problem. To test his response and degree of compulsion, I handed him a clod of dirt to rub into his palms. He did this without any hesitation and didn't feel the need to wash his hands for the rest of the session and even before he went home. Muscle testing confirmed his belief that he developed this compulsion after an incident at school when a school mate told him that cats choke on hair balls. It was interesting to note that his hand washing compulsion appeared to have cleared even though we had not addressed it directly.

Johnny realised that his allergy to cats also started soon after his friend told him that cats choke on hair balls. He tapped on the Karate Chop point while talking about the incident. We cleared the belief that *I am carrying the trauma of what A.... told me about hair balls in cats*. He then tapped on the Karate Chop point again while he retold the story. Muscle testing confirmed that more work needs to be done in the future on his allergy to cats and that his allergy is to their saliva not their fur. To assist with further work on this allergy at another session I used Theta Healing to clear *I now know how to live without being irritated by cat's saliva*.

Johnny didn't feel the need to do beliefs on depression or panic attacks because he was feeling so good. However, we used Theta Healing to clear the following beliefs around agoraphobia as this had been one of his big concerns last session. The beliefs were: *I am afraid of being alone; I will lose control if I go outside; I will be hurt if I go outside; if I go outside I will be betrayed; people are dangerous; I can't do anything; I am afraid of my own power/strength; I am weaker than everyone else; I can't defend myself and others are stronger than me*.

He was very pleased that muscle testing confirmed *I now choose balance/harmony/health/wealth in my life*. He was excited about the work we were doing and he described it 'like reading a book you can't put down'. He didn't feel 'in my core I am depressed or melancholy or anything like that'.

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Healing pathways
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I then used a combination of EFT and Theta Healing to clear the belief *love hurts*. I cleared the belief with Theta Healing after Johnny had talked about the relevant issues around this belief while he tapped continually on his Karate Chop point. One of the main issues was that he doesn't believe that his parents should be together as his father is verbally and mentally abusive to his mother.

Another belief that both he and his wife thought that he had was *I'm scared of how I'll die*. It was interesting that muscle testing indicated that he no longer has this belief even though we had not worked on it directly.

In future sessions with Johnny I will check the intensity of his hand washing compulsion, the intensity of his allergy to cats and any sabotaging beliefs he may hold around hypochondria and weight loss. Meantime, I have suggested that he do one-hand tapping while doing his compulsive acts such as washing his hands or overeating. (This is a technique suggested by Dr David Lake.)

I find that the changing of beliefs, plus the teaching of new feelings and the downloading of new emotional states with Theta Healing both complements and expedites the

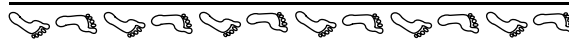
efficacy of EFT. EFT is still, in my opinion, one of the best self-help, energy therapy techniques and I teach it to my clients to use for themselves.

I always tailor my sessions to meet the individual needs of each of my clients. Therefore, the modalities I use in a session will depend on the issues and conditions that they have. For example, I may apply more EFT than Theta Healing in some sessions or vice versa and I may not always use Reflexology. Sessions are 1, 1 ½, or 2 hours.

I don't believe that any healing modality is superior to another, but I work with those with which I feel most comfortable. I feel very fortunate to have found an excellent combination with Reflexology, EFT and Theta Healing supported by muscle testing techniques from Kinesiology.

For further information see www.thetahealing.com and www.thetamagic.com

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Father Josef's New Foot Reflexology

by Father Josef Eugster and Dr Eugene Cheng
Published by Cosmax Publishing
ISBN 10: 957-663-483-0

For those interested in broadening their knowledge of traditional Chinese medicine this is the book you have been waiting for.

Father Josef was ordained as a priest and sent to Taiwan. He suffered from rheumatism and was introduced to reflexology.

He then started to study reflexology for himself and used it on the people in his parish thus discovering its great benefits.

In 1979 he met Dr. Cheng, an expert in Chinese medicine. Together they combined their knowledge from 25 years of research to write this book. The book is a combination of Western reflexology concepts and Eastern theories of the ECIWO bio-holographic law and those of traditional Chinese Medicine.

The book starts with some great points on the difference between 'foot massage and reflexology' and ends with some interesting case studies. Along the way the book includes various chapters of western reflexology with great ideas on how to incorporate Eastern Medicine and also the new idea of ECIWO Bio-Holographic Law. ECIWO is an acronym for embryo containing information of the whole organism. It is a new branch of biology which studies the law of the holographic correlation in biological properties between the parts and the whole and between the different parts of an organism to each other. The book explains how to incorporate this into your reflexology practice.

A great chapter is the 'application to specific reflex locations'. It is very well organized. Each reflex area of the foot has been given its own page with great illustrations and photographs. The photos help with the placement of hands on the foot reflexes and for those who are interested in learning how to use the stick—pictures depicting this technique are also included.

The reflex areas are well explained by showing the reflex location, disorders that are found in the body in relation to each reflex area and an explanation on how to work the reflex area using the hands and stick (where applicable.)

The information in this book is well laid out and easy to understand. The pictures are great and very useful and the reflexologist can gain an understanding of how reflex points manifest in the body from a Chinese Medicine perspective.

This book is a great buy for anyone wanting to learn a few new and different techniques i.e. using the stick, and for anyone wanting to gain a greater understanding of Chinese Medicine and how it relates to reflexology.🙏



Let's Read our Feet

by Jane Sheehan

My first impression of this book was its compact, handy A5 size—a book easy to pick up—ideal to read on a long trip or waiting for a bus!! It contains only 67 pages with an inviting cover which could attract both a lay person and a professional reflexologist.

As it transpired it was an interesting read and even though I am a reflexologist, I learned about things I didn't know.

The comprehensive Contents page shows there are many short chapters on a variety of 'feet' issues, such as:

- ◆ meaning of the toes;
- ◆ gaps between toes;
- ◆ webbed toes;
- ◆ bunions;
- ◆ temperature of the feet;
- ◆ meanings of toe shapes; and
- ◆ relationships and the feet.

An interesting paragraph in this last chapter says '*Do you value fidelity and loyalty in your relationship?*' If yes, look for someone who is completely unable to wiggle their little toe independently from their fourth toe. However – just because the person cannot do this could mean they may be fickle and need new challenges. They hate getting stuck in a rut and need lots of new challenges and interests. Mmm?

After studying the feet and during a treatment, you can 'read' the feet silently to yourself then use this knowledge to carefully phrase questions for the client to help them to arrive at their own answers.

'*How do you feel about your feet?*' One answer could be 'I love being barefoot and do so at every opportunity'—this could indicate freedom, being restricted, free to walk where you want in comfort and connecting with the earth. How you feel about your feet is how you feel about yourself.

Did you know that white feet show exhaustion, drained, washed out; whereas flesh pink colour reflects balance and health? The short chapter on Colour discusses other colours and their connection to the body.

There is a wonderful chart under 'Skin' discussing, for instance, callouses and their meaning—good for a novice to obtain information. I read this several times.

There are 10 pages on the meanings of toe shapes—lots of drawings, intriguing, weird toes. The sketches are particularly good.

The diagrams are perfectly presented—clear and easy to follow. It is obvious that the author, Jane Sheehan, has spent a lot of time ensuring that her book is 'just right' when it comes to content, attractiveness and a 'need to read'.

This is one book that could be referred to often and is a welcome addition to a reflexologist's 'tool kit'.🙏



Coloured nails—What do they mean?

by Sharon Tay

When most people think of coloured fingernails or toenails it generally refers to the colour varnish used to enhance the fingernails or toenails. However, to a health-care practitioner the words 'coloured nails' can mean a lot of things.

In the Footprints issue March 2002 Volume 6, No 1, pages 12-13, I wrote an article on fingernail disorders and in September 2005 Volume 9, No 3, pages 6-7, an article on Coloured Nails. I have the pleasure of revising this article with a few minor alterations. The problems I have encountered with fingernail and toenail disorders are many when working with frail older people in-care. In latter years I have educated older people on how to take care of their fingernails and toenails. Pedicures have become popular among older people who visit my clinic. Pedicure treatments are not advisable for frail people in-care, because of the many problems they have with their feet and legs. Treatment for the toenails on frail persons is left up to the podiatrist.

During the years that I have treated older people with a manicure, I have found it important to observe the colour as well as the deformity or disorder of the hands, nail bed and nail plate—this gives me an idea of what may be the cause. In some cases, the fingernail can change colour very quickly, especially in frail people. The colour of a nail may also indicate an internal imbalance long before the person is aware that something is going on. Having an understanding of colour hues related with nail disorders will be an advantage to any health-care practitioner in their treatment, especially for the reflexologist working close to the hands and feet.

The following disorders are some of the common problems I see when working on older clients and clients who overlook the need for nail-care maintenance.

White nails

I have noticed that with some older women on blood-thinning medication their fingernails can be brittle and the nail plate white. At the top of the nail near where the nail starts to grow over the top of the finger (the free edge), a thick pink line may show across the nail. The client can become sensitive especially around the cuticle area. White nails with pink near the top of the nail may indicate a liver or heart problem.

Other problems related to white nails

White spots (leukonychia) showing through the nail plate may be caused by an infection, injury or improper manicure or pedicure procedure. Internally, white nails may be caused through lack of protein, a liver or kidney disease, poor circulation or anaemia. White lines across the nail may indicate a liver disorder, and white nails with dark spots or streaks at the tip of the nail may relate to a kidney disorder.

Frail older persons and those with poor circulation may show white nails and in some cases, the Lunula (half moons) of the nails is not visible. The lunular show a

lighter appearance because the blood vessels are less than the rest of the nail plate. When they are not visible, the rest of the nail plate is lacking in adequate circulation giving the appearance of a white nail plate.

Pink and pink streaks

In people who have a heart problem, their fingernails may be either soft and flexible, or hard and brittle. The nail bed may show a very bright pink along the top of the nail with a white free edge. In some cases, when the circulation is poor, the bottom of the nail plate near the cuticle can show a pale blue in colour or white with no colour.

The colour of the nail bed in healthy fingernails is pale pink with a lighter pink around the cuticle.

Blue nails

A bruised nail is dark blue with a touch of maroon, while light blue nails can indicate poor circulation. Blue nails can also relate to some other internal disorder. In my work, I am only familiar with the first two.

Yellow nails

When fingernails look yellow, streaky (due to the prominent ridges longways) and the nail end near the cuticle appears thick, flaky and coming away from the nail fold, this could mean defective lymphatic drainage. Other problems that may relate to yellow nails are as follows:

Jaundice. The nail will show a pale yellow hue and the nail itself will appear weak and split at the free edge. (Some diabetic persons can show the same symptoms.)

Psoriasis. This problem can be common in frail older people. I have seen this condition range from mild to severe in the fingernails. People who are on long term medication can often develop psoriasis especially when they are unable to use their hands properly. (Sufferers with arthritis in the hands may also develop this problem.) The nails become pitted and weak and the free edge of the nail does not grow properly and flakes away. The skin underneath the nail (hyponychium) becomes crumbly (like breadcrumbs) and can cause discomfort to the person. If left untreated, psoriasis can develop into a fungal infection.

Yellow nails can also relate to diabetes and respiratory problems.

Fungal infections

Fungal infections can occur in the fingernail and toenails and on the hands and feet. In the hands and fingernails, frail older persons who have suffered a stroke or who have a severe form of arthritis are more prone to getting fungal infections because of their inability to take care of themselves, and the affected hand becomes moist and warm due to inactivity, causing the fungal spores to grow and spread if left untreated. Older people living alone are often prone to fungal infections. This is due to the fact that these individuals are no longer able to bend over to dry their feet properly, leaving feet moist and damp. In

Continued on page 13



cooler weather this can be worse as feet are kept warm in stockings, socks and shoes leaving little space or time for airing, therefore allowing the warm, dark, damp space between feet and shoe to be an ideal area for fungi to multiply. On the feet I have seen where the fungal spores have taken over the dead skin cells on the dorsal area of the foot and grow into a green and yellow plaque. You are not mistaken when you come across a fungal infection in the hands or feet as there is a distinct mouldy sickly smell. Fungal infections can vary in colour from yellow to brown and green to yellow. Severe fungal nail infections will damage the nail in which it will flake away and fall off. This condition must be treated by a medical person.

Red nails

Redness in the nail or around the fingernail and finger can indicate an inflammation or the beginning of an infection. Infections are often caused through external injury such as improper manicure procedures, poor hygiene care in manicure equipment and hand washing, careless gardening procedures and from unsafe practices in other manual activities.

Brown and black nails

Any pigmented longitudinal streaks that appear in a nail could indicate a melanoma and the person should have their nails on the feet and hands checked out by their medical practitioner. If a dark brown or black spot appears at the base of the nail near the cuticle, and the nail plate begins to peel away, this should also be checked. Dark brown spots could also indicate an external stain from smoking or from constant use of coloured nail varnish. External marks or stains caused through neglect and improper use of nail-care products are most noticeable on the nail plate where, as in internal disorders, they show through the nail plate coming from the nail bed. Brown nails can indicate that a person may have been using coloured nail varnish without giving time or space for the nails to breathe. Constant use of coloured nail varnish can weaken the nails causing them to split and become very discoloured. Coloured nail varnish can cause allergic reactions to a frail person and may leave them with a red rash on the neck and chin. The ingredient toluene sulphonamide-formaldehyde resin found in some nail varnish can cause an allergic reaction, especially those with skin sensitivity.

Other fingernail disorders

Beau's lines

Shows a ridge in the fingernail with a prominent line across the nail plate. This may be caused by a severe illness, interruption of protein formation, chemotherapy or external damage.

How long should fingernails grow?

Nails normally grow about .05 to 1.2 millimetres a week. They can grow faster in the spring and summer seasons. Fingernails grow quicker than toenails. Nails are made up of keratin, protein and sulphur. Nail abnormalities are often caused by nutritional deficiencies. To maintain a healthy length of a fingernail is to allow the fingernail to

grow above the top of the finger so that when you have the palm of your hand facing you, you can see the top end of each nail like the sun rising up behind the mountain. If you cannot, your nails may be too short. Short fingernails become weak and can cause them to split and flake, and the top layers of the nail plate to shed. Short fingernails are a common problem among frail older people as some prefer their nails to be very short and they will continue to cut them or have them cut poorly by untrained persons. These poor methods can contribute to some of the nail problems I have previously mentioned.

(Review article *Fingernail Disorders*, Footprints, March 2002 Vol. 6, No. 1, pages 12–13)

Vitamin and mineral deficiencies

Lack of vitamin B Fingernails may show a dark hue and are either thin, flat or spoon shaped.

Iron deficiency Fingernails look and feel brittle. Brittle nails may also relate to a thyroid or kidney problem and poor circulation. The nails may appear white.

Zinc deficiency Fingernails will have furrows running across the nail.

Lack of protein and minerals in a diet will cause nails to split, peel and chip easily. This is very common among frail older people as many suffer through nutrition impairment. Some of the problems I have listed below can relate to people suffering from *nutritional impairment*.

1. Living alone and unable to shop or prepare food properly.
2. Poor fitting teeth and sore gums.
3. On long term medication that impairs the taste of foods.
4. Unable to feed properly.
5. Depression.
6. Dementia.
7. Illness.
8. Medication.
9. Lack of appetite.
10. Unable to eat sufficiently.

With so many problems among the frail, fingernail and toenail disorders will always be an on-going problem. However, in my experience, people who have regular manicure treatment continue to maintain a satisfactory outcome in nail-care and remain free from injury caused through improper manicure procedures and a safe-guard against infections.

To help to maintain healthy fingernails and toenails, I have found using essential oils in a vegetable base oil will help give strength and shine to the fingernails and toenails and protect them from infections and weakness. Essential oils have an affinity with the nails' natural oils which gives them strength and maintenance.



Coloured nails
Continued from page 13

Essential oils for fingernail and toenail treatment
Help strengthen the nails and cuticles and helps combat infections

- 2 tablespoons of almond base oil
- 3 drops of jojoba oil
- 1 drop of sandalwood oil
- 1 drop of lavender oil (omit if allergic)
- 1 drop lemon oil
- 1 drop carrot oil
- 1 drop calendula oil

Keep the oils in a dark bottle, out of sunlight and they will keep well for months. Once the oils change in colour and smell, discard and make up a new supply.

Caution: Do not use any essential or vegetable oils if contraindicated to a medical problem, allergy or sensitivity.

One drop of oil should be enough to rub over each fingernail on one hand or for each toe on one foot. Only a very small amount is needed to give the full benefits of nail-care enhancement.

Structure of the nail

Nail plate. This is the visible part of the nail that protects the nail bed on the toes and fingers. The nail plate is used for enhancing the nail with coloured varnish.

A clear nail plate is best for diagnostic purposes.

Nail bed. This is the skin beneath the nail plate. Internal disorders indicate problems through the nail bed.

Matrix. Part of the area under the cuticle, the hidden part of the nail unit where growth takes place. This includes the blood vessels and nerve supply.

Lunular. This is part of the matrix, the moon shape at the base of the nail, usually more visible on the thumbs. The lunular has fewer blood vessels.

Cuticle (eponychium). The skin tissue that overlaps the nail plate and rims the base of the nail protecting the nail from infection.

Nail folds. These are the folds of skin that frame and support the nail on three sides of the finger and toe. (These folds are prone to splitting—hangnail.)

Free-edge. The visible part of the nail which grows above the top of the fingerpad.

Hyponychium. The skin underneath the nail plate close to the free edge of the fingernail.

Pull back the finger pad from the free edge and you can just see a faint line which is the beginning of the Hyponychium. Many older people refer to this as the 'Quick'.

Daily nail-care for the practitioner

It is important for a health-care practitioner (especially working in body therapies, e.g. reflexology and massage) to have clean healthy nails. For the therapist, keeping fingernails in good order is a simple daily task which can be carried out before, or between client appointments. Using a long file (not metal) will help prevent the nail from splitting and flaking.



1. File the fingernails with a large file or emery board



2. Apply essential oils to each nail



3. Criss cross fingernails for buffing



4. Apply hand lotion

1. File along underneath the free-edge of the fingernail in one direction using the rough side of the file, then file again using the smooth side of the file until the nail feels smooth.
2. Apply either a cuticle cream or essential oils (with a base oil) around the fingernail folds, over the nail plate and cuticle area. This will help strengthen the nail, shed dead skin from the cuticle area and maintain a healthy nail.
3. Buff the nail in a criss-cross movement to give a shine to the nails and stimulate the fingernail's own natural oils which help to keep them from forming deep ridges (furrows) and from splitting and flaking.
4. Apply hand lotion or a base oil to moisturise hands and arms to help prevent the skin from becoming dehydrated and dry.

References:

Dermatology, 3rd Edition by David Gawkrödger, (Published: Churchill Livingstone, 2002) pp.64-65.

Photography by Pam Campbell. 2006 ©

Model. Sharon Tay.

(Revised October 2008)

(Sharon Tay works as a reflexologist and beauty therapist from her clinic in Lenah Valley, Tasmania. For the past fourteen years Sharon has visited older people in care residing in nursing homes, hospitals and private homes on a regular basis. The core of her work has been dealing with problems in fingernails and researching for ways to overcome the difficulties that occur in the nails on frail persons. Internal disorders, the effects of medication, illness, injury and nutrition impairment, are often the main problems associated with fingernail disorders. As well as manicures, Sharon incorporates hand reflexology and face reflexology in beauty treatment when working on her clients.)



Reflexology Association of Australia

Reflexology and the Nadis—
Continued from page 7

I find it fascinating that Dr. William FitzGerald's zone theory has similarities with the Yogic and Siddha philosophies, in that emphasis is placed on working the thumbs and/or great toes to support physiological function on the respective sides of the body.

Unbeknown to most reflexologists, they are supporting body/mind function in meaningful ways according to the abovementioned Indian traditions. There is still much to discover about the energetic components of our beloved reflexology. Knowledge of the nadis, is but one. ☺



Did you know?

In your dreams ...

If injured on the left foot, you are not allowing yourself to receive.

If injured on the right foot, you are giving away too much energy without replenishing it.

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Research study: Cardiovascular action of reflexology

by Dr. Marc Piquemal, M.D., E.E.

Introduction:

In past publications it has been shown by means of infrared thermography, the existence of a vascular response of the reflex zone as a result of the digital stimulation of certain areas in the soles of the feet.^{1,2,3} Thermographic images were captured in the area of the posterior region of the trunk from neck to pelvis (i.e., the back) pointing to a response to the mechanical stimulation of the foot. The question for the current study is: would vascular motility be the only response of the body after digital stimulation of reflex areas of the feet?

Materials:

Model 504 Criticare machine for measuring ox metric pulse. This is an electronic device for determining the oxygen concentration in arterial blood.

Method:

Fourteen people of different ages, sex, social-economic and cultural backgrounds participated in this study. The protocol consisted of reflexing for 2 minutes 30 seconds each one of the following different reflex zones of the foot:

- | |
|----------------------|
| 1. Lung reflex |
| 2. Heart reflex |
| 3. Kidney reflex |
| 4. Intestines reflex |

These zones correspond to those in the chart (see Drawing 1).



Drawing 1. Chart of the reflex points of the feet and correlated organs

As reflexing of the feet is taking place, the amount of oxygen in the blood and the heart rate are monitored and recorded so changes in cardiovascular activity can be measured.

Results:

The reflexology protocol takes into account two standard deviation variables: pulse rate and oxygen 'saturation' for all of the zones and for each patient. The pattern of varying data as it refers to pulse rate and oxygen 'saturation' was quite different (see Table 1).

TABLE 1.
Standard deviation pattern for the four reflexed zones for each one of the patients

Patients	Standard pulse deviation	Standard deviation of the Co2
1. Agnes	4.8	0.0
2. Alix	3.8	0.4
3. Bruno	4.8	0.4
4. Elisa	2.0	0.5
5. Eric	7.6	0.4
6. Estela	5.3	1.2
7. Leticia	3.2	0.4
8. Lise	3.0	0.4
9. Luz	2.7	0.4
10. Marc	14.0	0.7
11. Marcela	4.9	0.4
12. Maria	5.9	0.4
13. Marta	1.8	3.6
14. Oliver	4.8	0.4

After establishing the base metabolism before the reflexology session for each patient, a comparison of the values for both variables can either go up or down after the pressure points are worked in each one of the different zones. The pulse variant seems to indicate more sensitivity than the 'oxygen blood level'. What is surprising is the observation that even the pressure points that are not painful might have an effect on the pulse and the oxygen blood level of the entire body.

A more in-depth study of each zone as it relates to the oxygen level in the blood indicates that:

1. In 50% of the cases the oxygen blood level improves as it relates to the initial relaxed state after working the first reflex point.
2. In 5 out of the 14 patients, after working a specific zone, a reaction as it relates to the initial relaxed state, a de-saturation of oxygen in the veins, is observed.
3. Change of saturation of oxygen in the blood shows that it is the zone of the kidneys that more often intervenes with the blood oxygen, followed by the zones of the heart and the intestines.

Continued on page 17



- It should be remembered that a change in the oxygen blood level in the body occurs in a different way as it relates to each organ. This means that if an organ is affected in a pathological way, the cardiac effect is going to be shown in a different way (Table 2).

TABLE 2
Effects on the heart as it relates to certain organs

Organ	mL/Min/100g	%	mL/Min
1. Brain	50	14	700
2. Heart	70	4	200
3. Lungs	25	2	100
4. Kidneys	22	1100	360
5. Liver	27	1350	95
6. Inactive muscles	15	750	4
7. Bones	3	5	250
8. Skin	3	6	300
9. Thyroid gland	1	50	16
10. Adrenal gland	0.5	25	300
11. Other tissues	3.5	175	1.3

Correlation with the variable cardiac pulse:

In 43% of the cases, no matter what area is stimulated, there exists a pulse rate reduction as compared to the initial one prior to the beginning of the session.

In 28.5% of the cases, there exists an overall lower pulse rate except for one correlated zone where cardiac frequency increases; however, researchers were unable

to isolate the specific organ responsible for this higher pulse rate.

In 28.5% of the cases each time a zone is reflexed there is a higher or lower pulse rate as compared to the initial one; however researchers were unable to find a common reactive pattern between the foot reflexed and the change in cardiac pulse rate.

Conclusion:

By means of a device for measuring ox metric pulse in a non-invasive, passive, non-painful way, the regulated action of reflexology on cardiac expenditure could be proven. The physiological mechanism, though not clarified but participating in a neurological way, points to an intervention of local vascular motility. This specific, adapted and individual regulation, allows a reduction of costly interventions of deficient homeostatic mechanisms as it relates to blood flow of organs whose metabolism is altered and re-establishes a good tissue perfusion.

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**Cranio-sacral reflexology with
Dr Martine Faure-Alderson
AUGUST 2009**



This may be the last opportunity to study cranio-sacral reflexology with the founder of the technique. Martine has been to Australia several times since 2003 and due to the distance, 2009 could be her last time here.

There are three levels of the cranio-sacral course, each level being a 2-day course:

- ◆ *Level 1* : Basic—where you learn the standard protocol
- ◆ *Level 2* : Advanced—where you learn the applications to the stress response, balancing the parasympathetic and sympathetic nervous systems, new hip/shoulder; elbow/knee concepts; and look into somato-emotional release.
- ◆ *Level 3*: where you learn cardio-vascular and lymphatic protocols, applicable to the two biggest health problems in the western world—heart disease and cancer.

The programs for Sydney and Melbourne have not been finalized yet. To best help meet your needs make contact with state representatives and register your interest in the level/s that you'd be interested in. Numbers are strictly limited so register your interest now!

Queensland contact: Heather Edwards 07 3804 0128 reflexca@bigpond.net.au	Cairns Fri/Sat/Sun 14,15,16 August— Revision, Level 2	Brisbane Thurs/Fri 19/20 August— Level 3
New South Wales contact: Kim Rusten 02 9403 1910 krusten@optusnet.com.au	Sydney Sat/Sun/Mon/Tues 22/23/24/25 Levels to be confirmed based on your feedback	
Victoria contact: Lyn Fava 03 9898 1890 info@asrr.com.au	Melbourne Thurs/Fri/Sat/Sun 27/28/29/30 Levels to be confirmed based on your feedback	
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Chi-Reflexology—Part 2

by Moss Arnold

The strength of the Chinese philosophy is that the basic premise is change—nothing stays the same. With this as its basis, it is a fluid mosaic, which explains how it can be used to explain anything or everything (its strength and its weakness); and how TCM (Traditional Chinese Medicine) can be used in a multitude of ways. However, without this philosophical understanding, it is no longer the Chinese system, but something else.

Chi-Reflexology is an attempt to combine an understanding of the original philosophical basis of the Chinese system, including but not exclusively TCM and acupressure with Reflexology. Unlike western massage techniques, the Chinese acupressure approach is to move back and forth over the body (or feet) or effleurage, has the result of 'scrambling' a person's chi. So the Chinese would never use effleurage, but rather work back and forth as separate actions, i.e. move in one direction and stop and then move back in the other direction—as two distinct separate actions. This balances the chi. One can immediately see the correlations with reflexology, which also works one direction and then the other.

Anything and everything that occurs in a treatment has either a stimulating, sedating or balancing effect on the chi of the receiver. With such knowledge, the reflexologist consciously works with the chi of the receiver and themselves. Nothing is done without an understanding and reason for doing it! It is a deliberate mental mechanism and is an integral part of the treatment and the philosophy.

Therefore, as reflexologists, we can expand our senses by learning to work consciously with chi.

How do we do this?

Firstly, by cultivating our own chi through our own lifestyle, exercise and meditation and by consciously working with chi in our reflexology sessions. *'As ye give, so shall ye receive!'* As we work on others and their chi, we are also cultivating our own and working on our own imbalances! You cannot separate one from the other. As you give, you receive! Yin and Yang at work!

It is an often expressed popular attitude that the reflexologist (or therapist) has to have 'dealt with' their own imbalances before they can help others—this is again contrary to the Chi approach, for we all have imbalances for as long as we are alive! They are a natural part of our existence. The problem is not imbalance but the degree of imbalance! Remember, the key is to aim for balance and to avoid extremes, with moderation in all things and on all levels. A little bit of everything is 'good' for us, rather than an extreme of 'good' and 'bad' however you wish to define these concepts; for, once again, such categorization and classification is contrary to the philosophy. A 'good' thing taken to an extreme becomes 'bad'! Again a contradiction that is nonetheless true.

Health in the western allopathic medicine model tends to be defined in purely physical terms, leading to a misconception of fitness equals health—and that health is simply the absence of dis-ease! Thankfully, this trend is slowly giving way to a broader definition of health and

wellbeing. The Chi-Reflexology approach defines health in a holistic way—fitness is part of health, but health is not just fitness. It is rather the whole person and all aspects of that person, both internally and externally on all levels of existence. This is truly holistic! So this definition includes everything about the person on all levels—physically, emotionally, mentally and spiritually, and each of these aspects is much broader than the western definition of them. For example, the environment we are currently in is more than the physical composition of the air; it is all aspects of that environment, including such things as the emotional state, current and past mental activities, the chi of those present as well as the chi of the place itself, the local area, the region, the country, the hemisphere and ultimately the earth itself and, again, at this present time but also historically. The list is endless! And the majority of these factors are completely out of our control and, in fact, are quite natural to the local environ! So when we breathe in air, we are breathing in 'air chi', which is everything on all levels in that environment, which has either a yin or a yang effect on our chi and our state of balance/imbalance. We have all experienced entering a place and immediately feeling uncomfortable. It is not that the place is 'bad' or 'negative', but rather that the chi of the place on one level or another, is incompatible with our chi at that moment in time. You can see the complexity of this concept of health which is truly all encompassing and holistic.

How then do Reflexologists consciously work with Chi?

Most importantly, by consciously using chi! Simple! Also by learning and then using both the philosophy and the techniques of Chi-Reflexology! There are a number of aspects that need to be grasped here. Obviously studying the Chi-Reflexology approach (this article does not lend itself to a detailed analysis). There are a few aspects that can be briefly covered here, including understanding pain and its significance, Chi-Reflexology stimulation and sedating techniques and diagnosing chi imbalances through the feet.

Pain—a poorly understood dimension. Pain is simply a message; it is trying to tell us something, but what? There are many possibilities worth exploring on a variety of levels. There are a whole range of pains rather than a single entity. Initially there is a need to look behind the volume of pain. We tend to get caught in the volume which is really meaningless other than to indicate the degree of the urgency of the message! So we need to go beneath the volume, beneath the intensity of the feeling itself, to learn to define its characteristics for both the reflexologist and the receiver!

Basically there are two groups of pain—a yin and a yang group:

- ◆ **Yin pain** is an indication of deficiency (low or not enough chi). It is characterised by dullness or emptiness—a 'good' pain, an ache, a bruised or hollow feeling: emptiness! It tends to have a low pitched sound—'aahhh' and it is a pain that one can ignore!

Continued on page 20



- ◆ **Yang pain** is an indication of excess (too much) chi and this is the pain of dis-ease! It is characterised by sharpness, hardness, an 'ouch' feeling. It tends to have a high pitched sound and is a pain that cannot be ignored.

For the reflexologist, it is imperative to develop sensitivity to pain (and the reflexes), its message and the body through the feet. To do this, one first needs to understand the balanced state. In theory, a reflex or acu-point should yield beneath your pressure and then respond with equal pressure. This is rather difficult to explain, for it also depends on the location, the amount of tissue and muscle or lack thereof, as well as the closeness to the bone. All reflexes and acu-points yield and then respond once you know how to assess them!

A Yin imbalance tends to yield too much, giving a feeling of emptiness, of being hollow, sometimes as if there is absolutely no resistance at all. You could push right through the reflex/acu-point. While a Yang imbalance tends not to yield at all, but rather pushes back immediately, quite often being painful and hard, 'pea' like, a 'clunk', or an 'X marks the spot' under the skin. There is, in fact, a whole range of such feelings but the key is they all tend to be rather hard, solid, cause sharp pain and that they fight back! So the first step is to define the pain, learning to listen, and then educating the receivers is a significant step.

How does the Reflexologist connect to reflexes or acu-points?

This is done with sensitivity, intuition, an active silence and respect. Practically, find the exact point of the imbalance or pain (and it is always an exact point rather than an area) by pressing under the skin with the tip of your thumb or finger. You do this by connecting your breath with that of the receiver, breathe in and as you both breathe out **slowly**, press into the reflex/acu-point taking your time and the full out-breath to connect. With practice and being conscious of working with chi, the reflexologist will know when the connection is made.

Another aspect is working with chi rather than muscle strength by keeping yourself relaxed and using body weight. Flexed muscles actually block chi flow and so the key is to connect your chi to that of the receiver. It is a relatively easy process to demonstrate but rather difficult to explain, but the difference is quite amazing in that by using your chi the reflex/acu-point actually 'lets you in' to connect but, when muscle strength is used, the body rejects the invasion! Again, it takes practise with a sense of honour and respect for the person you are working with. To this end, it is advisable to work in silence as much as possible. This is a philosophical perspective. It is not difficult to master but it does take time and conscious effort. Once you have connected to the reflex/acu-point, your breath does not matter, until ready to release the reflex/acu-point when once more your breathing matters. So, to release, match breathing patterns, breathe out and as you both breathe in slowly release the reflex/acu-point, again taking your full in-breath to release.

Once you have connected to the reflex/acu-point, then what?

There are three methods used—stimulate a deficiency, sedate an excess or balance.

Deficiency of chi needs to be stimulated with strong pressure until you feel resistance and with sensitivity you will 'feel' the reflex/acu-point pushing back and so slowly release your pressure accordingly. Now this stimulation method causes no pain. There is no need for pain! Alternatively, you can press strongly and circle clockwise but this will cause intense pain immediately, which is not working with chi or with the body and is not used in Chi-Reflexology. Excess of chi responds to light and gentle pressure (but still under the skin) and with circling anticlockwise for six out-breaths (**Note:** six is the number of treatments!).

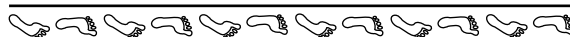
The final method is to balance the reflex/acu-point and is useful for a variety of reasons, such as Chi-Balance through the feet or when the reflexologist is unclear of what is needed. This is achieved by pressing on a reflex/acu-point; with united breathing, four (the number of physical and holistic balance) or twelve (the number of spiritual and holistic balance) times, pressing on the out-breath and releasing pressure (but not the point) on the in-breath. There are other methods of balancing and basically anything done an equal number of times, back and forth but as separate actions, has a balancing effect.

As can be seen constantly using either deep or light pressure in the long term will cause imbalance because you are either constantly sedating or stimulating EVERYTHING, when not everything is either DEFICIENT (Yin) or EXCESS (Yang), as each of us is made up of a unique degree of both. What is needed is a combination of both as required by the individual to achieve balance!

It is here that the Organ Chi points (on the plantar surface or sole of the feet) of Chi-Reflexology can be used in a variety of ways. They are used to—

- ◆ Balance the chi of each organ by pressing four times. A rather quick way to balance a person's chi, which can either be included during a Reflexology session as the relevant area of the feet is worked, or added at the end, as a concluding balance of each Organ chi.
- ◆ These acu-points can be used to diagnose the chi imbalance of the major organs of the body, and then, with the above mentioned techniques, bring the body back to a more balanced state of existence.
- ◆ Finally, they can be used in conjunction with an understanding of the Five Phases Theory to determine the underlying cause, i.e. which organ's chi is the underlying cause, and therefore to treat the underlying cause as well as the symptoms, both physical and energy.

So, Chi-Reflexology combines the Chinese philosophy with Reflexology in a holistic way to expand the horizons of Reflexology. The practical implications of this approach are profound—working with the body rather than against it. An understanding and appreciation of the Chinese philosophy is imperative to any therapy that strives to be holistic. ☯



Diploma of Facial Reflexology with Lone Sorensen

by Gretel Ann Spiegel, NSW Branch of the RAOA



The thought of giving up my June long weekend, plus a day either side, totalling five days, was a tough decision for me to make. As a practicing reflexologist it is always

wonderful to have new tools and new techniques to add to the 'reflexology tool box'. I spent five wonderful days with Lone, Sue Ehinger and 27 other reflexologists, some of whom had travelled from Victoria and Queensland to share this experience. On reflection the course was worth every minute and every dollar, to have spent five days with Lone Sorensen to learn her unique facial reflexology system.



Facial reflexology class of June 2008

Lone is a gifted communicator and despite the fact that English is not her first language she was able to openly share with us her amazing life story. Her journey from a reflexologist in Denmark, to her life in Argentina and her meeting with the South American Indians, followed by her meeting with the Vietnamese inspiration, Dr Chow. All of these events led to the evolution of her seven-step facial reflexology system that she now teaches from her Institute based in Barcelona, Spain. Today her work is mainly concentrated on researching the effects of her system on autistic and handicapped children.

My first treatment during the course made me feel slightly nauseated, which Lone said is one of the side effects of the treatment. She always provides her clients with a list

of the various side effects that can be experienced such as nausea, dizziness and tiredness etc. When I went home that night I had had two treatments and my body experienced the constant need for elimination for several hours. The next day my body was struggling to stay warm, which was a new sensation for me as I am usually experiencing hot flushes. During my third treatment I experienced a sensation of a lightning bolt shooting down to the base of my spine. This sensation happened in a split second and for the first time ever, I was able to get up off the massage table without feeling a tweak in my lower back. As Lone explained, facial reflexology is so powerful because the face is richly supplied with nerves and blood vessels. Its close proximity to the brain—the control centre of the body—ensures that stimulus to the face has the shortest route to the important organs of the body in order to effect a re-balancing of health issues.

She also shared with us how to diagnose health problems prior to the treatment, just by looking at the different areas on the face that correspond to the various facial maps.

Lone also promotes facial reflexology as a mini facelift. My own face looked very relaxed post treatment and the lines were smoothed out temporarily.

I have become a devotee of facial reflexology and have had some fabulous feedback from several of my clients. Gratefully, their only side effect was a very deep sleep that night and don't we all wish we could have that?



Lone Sorensen working her magic

Thank you to Sue Ehinger from the Australian School of Reflexology for bringing Lone Sorensen to Australia for us reflexologists to improve our knowledge and skills.🙏



THE QUEST TO OBTAIN THOSE ELUSIVE EXTRA CPT POINTS

Are you looking to obtain extra CPT points at renewal time? Why not think about doing a book review or article for FootPrints? Book reviews score 3 points (must be 500 words) and articles also score 3 points (not more than 1,000 words). You can do as many book reviews and articles as you desire but please check with the Editor (Jan Cullen) before starting a book review to ensure there is no duplication.

If you are interested in discussing this further, please call Jan on 0417 283 203.



STATE MATTERS



NEW SOUTH WALES

Where do all those months go?? Time for another branch report from New South Wales.

At our general meeting in July our guest speaker was MS Ambassador, Maina Gordon. Maina has been living with Multiple Sclerosis ('MS') for some time and is now mostly confined to a wheelchair. Reflexology has been one of Maina's complementary therapies. Maina has a very positive approach to life and has not let her condition deter her in any of her life's challenges. Maina conducts a legal business from her home and has travelled extensively. A special *thank you* to Gretel Spiegel for providing transport for Maina for our evening with her.

Jessica Holmes was our September guest Speaker. Jessica introduced us to her Heavenly Rose Essences which have been lovingly prepared from her own beautiful garden in Wahroonga. Jessica offers Sclerology evaluation of the eyes and many other therapies along with guided meditational healings in the healing garden.

We are always looking for speakers for our General Meetings so if anyone out there has someone that they would like to introduce please contact our Chairperson, Jan Cullen.

October 24–26th was the National Reflexology Conference. Thanks to Barbara O'Keefe and her wonderful committee who worked tirelessly for many months to achieve such a successful Conference. Many thanks also go to the wonderful team of volunteers who assisted the Conference Committee on the day. The Swissotel in Market Street

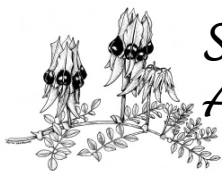
was a perfect venue. The speakers were varied, very interesting and entertaining. I'm sure we all came away feeling uplifted and positive that Reflexology will be a therapy of choice for the future. It was also a perfect opportunity to meet and put faces to names of many of our fellow members who came from near and far. It was especially exciting to have guests from New Zealand who offered an invitation to attend their conference next year.

We all look forward to our next National Conference which will be held in Brisbane in 2010.

November 6–9th is the Mind Body Spirit Festival at Darling Harbour which is a wonderful opportunity for volunteering at our Reflexology stand.

Take care and always *put your best foot forward!!*

Gwen Dean



SOUTH AUSTRALIA

Committee members have been networking away from their Reflexology clinics. Sue Ramsay drove through the Northern Territory to Broome. Along the way making contact with Reflexologists and Natural Therapists.

Simone Fitzgerald put in a proposal which has been accepted, to work in Oncology working on clients who are receiving treatments for cancer or a family member can receive a Reflexology session. This is a paid position for her. Simone was able to attend the First International

Symposium on Reflexology and Cancer. This will be most informative for Simone, as it is understanding and discussing the possible benefits Reflexology has as a complementary therapy for patients undergoing treatments for cancer.

James Flaxman our S.A. representative, Board member, and web site master, attended the National Conference in Sydney. Margaret Rowett also attended. Both members will be able to give a account of the guest speakers at the next meeting.

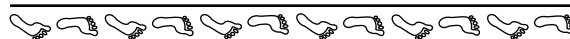
Committee members gave Reflexology sessions to visiting delegates at The Palliative Care National Conference held over two days at the Hilton Adelaide.

I attended the Port Adelaide Campus of Tafe opening of the new teaching centre for Nursing, Aromatherapy, Massage and Reflexology. The courses are to diploma level. The College is situated in a lovely setting overlooking the Port Adelaide River.

The Christmas meeting will be at Streaky Bay which is situated at one end of the Great Australian Bight. Fishing, oyster farming and agriculture are three main industries. And the town has a Reflexologist, Sue.

Happy Christmas to all readers and Reflexologists. Treasure your work, it is a special art, excellent value for health and happiness.

Jannette Kendall

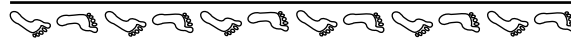


2009 CPT Education—Calendar of Events

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Date 2009	Presenter	Training title	Location
21 Feb	Lee Anthony Taylor	Conception, Pregnancy and Childbirth module	Auckland, New Zealand Contact: Karen McCann mccannclan@xtra.co.nz
22 Feb	Lee Anthony Taylor	Menopause module	Auckland, New Zealand Contact: Karen McCann mccannclan@xtra.co.nz
27, 28 Feb	Sharon Stathis	Ayurvedic Reflexology Smart 1	Sharon Stathis sharon@feel-good.com.au BRISBANE
1 & 2 March	Sharon Stathis	Ayurvedic Reflexology Smart 2	Sharon Stathis sharon@feel-good.com.au BRISBANE
4,5,6,7,8 March	Lone Sorenson	Facial Reflexology	Sydney—Contact: Sue Ehinger 02 4976 3881 reflexologyaustralia@gmail.com www.reflexologyaustralia.com
10, 11 March	Lone Sorenson	Nerve-Foot Reflexology	Sydney—Contact: Sue Ehinger 02 4976 3881 reflexologyaustralia@gmail.com www.reflexologyaustralia.com
12,13,14 March	Lone Sorenson	Advanced Facial Reflexology	Sydney—contact: Sue Ehinger 02 4976 3881 reflexologyaustralia@gmail.com www.reflexologyaustralia.com
28 April–19 May	Deborah Johnston	Reflexology Tour to China—19 days	Deborah Johnston feetsanctuary@optusnet.com.au MELBOURNE
16 & 17 May	Sue Ehinger	Chinese Reflexology	Sydney—Contact: Sue Ehinger 02 4976 3881 reflexologyaustralia@gmail.com www.reflexology.com
25,26 July	Lyndall Mollart	Maternity Reflexology 1	Sydney—Contact: Sue Ehinger 02 4976 3881 reflexologyaustralia@gmail.com www.reflexology.com
14,15,16 August	Dr Martine Faure Alderson	Cranio Sacral II	Cairns—Contact: Heather Edwards reflexca@bigpond.net.au
19, 20 August	Dr Martine Faure Alderson	Cranio Sacral III	Brisbane—Contact: Heather Edwards reflexca@bigpond.net.au



2009 WORLD-WIDE CONFERENCES

25–26 April **New York State Reflexology Association**
Biennial State Conference
Holiday Inn, 232 Broadway
Saratoga Springs NY 12866
mrcucchi@hotmail.com

22–24 May **Reflexology New Zealand**
Annual Conference
Wainui Park and Conference Centre
Banks Peninsular (near Christchurch)
secretary@reflexology.org.nz

11–13 September **International Council of Reflexologists**
Spotlight on Reflexology Biennial Conference
Los Angeles, USA
www.icr-reflexology.org





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June issue:	May 1
September Issue:	August 1
December issue:	November 1

