

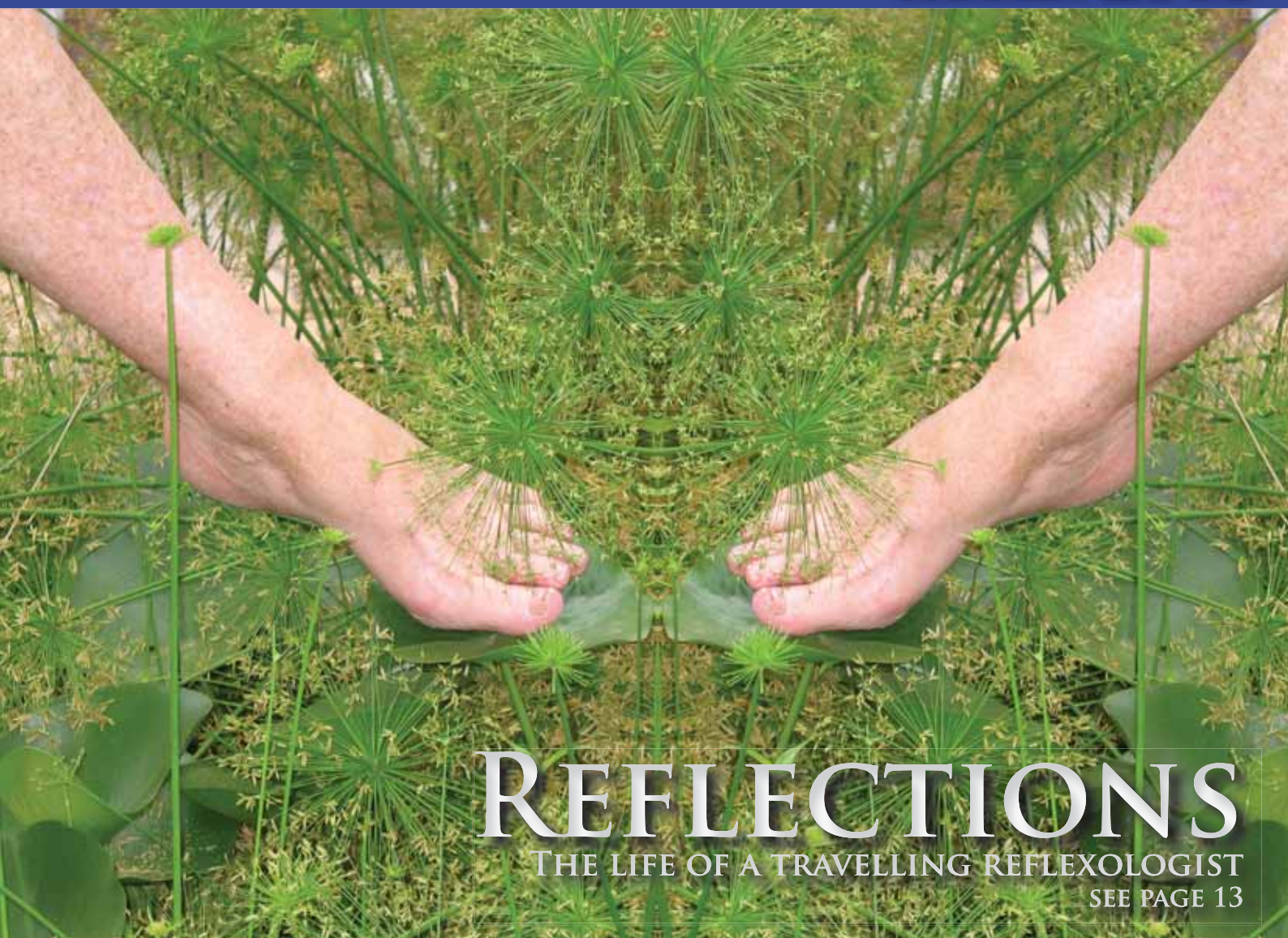


# FootPrints

The Journal of the Reflexology Association of Australia

VOLUME 14 No. 1

MARCH 2010



## REFLECTIONS

THE LIFE OF A TRAVELLING REFLEXOLOGIST  
SEE PAGE 13

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Three hands are shown in a circular arrangement, palms facing inward, framing the central text. The hands are rendered in a grayscale, semi-transparent style.

# A holistic approach to your insurance

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The logo for OAMPS Insurance Brokers. It features a stylized human figure icon above the word 'OAMPS' in a large, bold, sans-serif font. Below 'OAMPS' is a dark rectangular box containing the words 'INSURANCE BROKERS' in white, uppercase, sans-serif font.

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## From the President's desk...



Dear Members,

The new year is already well under way and what an exciting year it is proving to be. The Board is thrilled about the research project that is being coordinated by the Research Subcommittee and hopefully will be presented at the RAOA National Conference. This is the beginning of a new direction by the Research Subcommittee and, hopefully, over time more projects will be attempted.

Queensland branch are well under way with the planning of the National Conference in Brisbane in October this year. Application forms are now available online and included in FootPrints. You will have been receiving updates, newsletters and information via email and to those without email, by post. This innovation by the Queensland conference committee has been a fabulous way of keeping the news of the conference up to date and is saving the Association an enormous amount of postage and time. I congratulate them on their efforts.

During the National Conference we will be, as usual, having our Annual General Meeting. During that meeting we will be asking members to vote on changes to the constitution. This was planned to happen at the previous National Conference, but due to unforeseen circumstances this was not possible. The changes the Board are presenting are to bring the constitution up to date, clarify some confusing areas and to make consistent terms and genders throughout the document. It is not the intention of the Board to change the spirit or intent of the original document, the original founders of the company did a great job establishing these. You will be given plenty of time to examine documents and register proxy votes if you would prefer.

The Reflexology Association of Australia has become a very professional organization. I attend meetings with other complementary groups and am very impressed at what our Association has achieved in a few short years. Government and health fund pressure has changed the way we do some things, but members have embraced this change and together are working to impact the health of our country with the wonderful gift of reflexology.

Best Wishes

Anne Young  
President

**Correction**—'Reflexology in Australia' by Heather Edwards, September and December 2009 issues of FootPrints

*The state newsletters have continued over the years but it was in 1995 when Russell McAllister from New South Wales took on the responsibility of producing a national magazine that FootPrints was born. He published the NSW newsletter from 1992–1995 and the National Journal from June 1995–June 1996.*

*When Russell resigned from FootPrints, Graeme Murray and Sue Ehinger took over the editing with Val Wallington doing the desk top publishing. This they did for 9½ years from October 1996–March 2006.*

Apologies for any misunderstandings the original article may have inferred.

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**March 2010**

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**This issue:** Front cover courtesy of Jan Cullen. Feet supplied by Diana Tierney.

# 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)

## State Branches

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 Phone: 0403 888 756  
 Email: bradson@ozemail.com.au  
 Secretary: Robyn Senden / Blanche Pratt  
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 Email: robysenden@v2media.biz / blanche.pratt@hotmail.com
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 Chairperson: Helen Biggins  
 Phone: 08 8398 0665 or 0424 645 408  
 Email: helenbiggins@internode.on.net  
 Secretary: Simone Fitzgerald  
 Phone: 08 8346 6118  
 Email: simone@gdl.co.nz
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 Secretary: Michelle Hilder  
 Phone: 08 9354 9440  
 Email: km.hilder@bigpond.com

## Association Awards

	Life Membership	Outstanding achievements
<b>NSW</b>	Sue Ehinger Graeme Murray Cherel-Sue Waters	Joan Harwood Ronda Mackay Judee Hawkins 2009 Ann Jooste Jacobs 2009
<b>QLD</b>	Heather Edwards Sharon Stathis Tissa Hennig Joan Boardman Smith	Don Stretton Julie Bidwell Jan Williams Glenda Hodge Ian Gilbert Miranda Mann Irene Bull Patricia Maclean Margaret Coventy 2008 Catherine Lee 2008 David Wong 2008 Claire Siertsema 2009 Jan Kiss 2009
<b>SA</b>	Joyce Lockett Rosemary Urban (deceased)	Suzanne Pfitzner Susan Jean Ramsey 2006 James Flaxman 2008
<b>TAS</b>	Pamela Skeggs Dianne Yaxley	Gaylene Webb Vicki Delpero
<b>VIC</b>	Dee Leamon Carol McBain Josie Magazzu (deceased) Marion Bond Trevor Steele (posthumously) Emma Gierschick	Natalie Baker Samantha Landridge Karen Fothergill  Marion Bond
<b>WA</b>	Keith Solomon Brigitte Johnson Lynn Hatswell	Patrica Bell Flora Toft Gladys Duncan Chris Aubrey Des Bradley Lis Anderson Maried Spooner 2008 Catherine Chandler 2008

### State Branches

If there has been a change in the above directory, kindly advise Jan Cullen by email  
 jan.cullen@virginbroadband.com.au or by phone  
 0417 283 203.

### State matters

Please contact Jan Cullen to advise the contact for your State. Jan's email is jan.cullen@virginbroadband.com.au

The National Board has discussed various submissions and decided on the following description for 'Defining Reflexology'.

*'Reflexology is defined as an application of a stimulus or stimuli to a reflex point anywhere on the body. For list of variables refer to the Diploma of Reflexology Health Training Package in National Training Information Services.'*

# Reflexology in the Chinese medical system

by Nan Middleditch Dip Reflexology

During our reflexology tour of China in 2009 our group spent a day in Tai'an Central Hospital which is the largest hospital in Shandong province.

Tai'an has a population of 549,900. The hospital provides Westernised and Traditional Chinese Medicine to locals and surrounding regional areas.

On arrival we were met by the Hospital Manager, Dr Chi Lan Bao who made us feel very welcome and together with a group of doctors and specialists, we were invited into the Board Room where they eagerly showed us a video presentation on the hospital and the work they do there. We were also given a glossy book to keep of the Hospital they are so proud of. They were all very interested to have us as visitors in their hospital and to hear about our work as Reflexologists in Australia. We are the first group of Reflexologists from a Western country to visit this hospital.

After our initial overview of the hospital, the Manager and doctor of the Acupuncture Department gave us a tour of the main outpatient wards of his department. Here we were able to observe many patients receiving Chinese Tui Na massage and acupuncture treatments. After our tour of the outpatient wards we were taken to another section of the department where we were met by the head doctor of this area where Reflexology was also included in the treatments. Here we were shown rooms where specialists work with private patients, in modern consulting rooms, plus a Chiropractic room with an adjustment table. We saw a steam room with an amazing steam capsule for the whole body that is regulated by a nurse with blood pressure equipment with the use of herbs in the machine to create medicinal steam all over the patients body—state of the art equipment!

The head doctor of the department and his team of practitioners had made themselves available to spend the day with us. We were shown around a very modern, well equipped department where patients were happy for us to view the treatments they were receiving. We were told about how in a modern Chinese hospital a blend of Traditional Chinese Medicine and Western Medicine is



used to achieve the very best possible outcome for their patients. One example given was that of a man who, with the use of acupuncture, was cured of Parkinson's disease – true story.

The Reflexologists we spent the day with work long 10 hour days, more than 5 days each week, usually seeing about 13 clients a day for a one hour treatment. Despite these long hours they were very enthusiastic and pleased to be involved in our visit.

Each of us experienced a reflexology treatment by the staff members who were all thoughtful and considerate. The treatments we received were very strong to the extent of being painful at times on our soft western feet. Far stronger than our clients in Australia would normally tolerate. The Chinese reflexologists regard a good strong



treatment as having a beneficial lasting effect for a week.

The style of reflexology practiced in the hospital was different again from what we had previously experienced at the China Reflexology Association -Training College we had visited in Beijing. Treatment started with a

herbal footbath to help open the meridians, after which we laid down horizontally on the treatment table. A lot of friction techniques were used on the feet that made the feet feel very hot, to increase circulation and, when working this way, the Reflexologist broke out in a sweat all over.

Chinese reflexologists use friction techniques to nurture and stimulate the meridians.

Towards the end of our treatment, rapid percussion strokes were used moving up the lower legs. When finished we had a second foot bath in plain water to finish off.

During our time at the hospital we also discussed with the staff the differences between Chinese and Australian reflexology practice. Our Chinese counterparts were surprised to hear that reflexology is not available in Australian hospitals as it is in China.

Another interesting aspect of medical treatment in China is the role of Daoism. Daoist belief is incorporated in Traditional Chinese Medicine and the departmental doctor

*Continued on page 4*

*Reflexology in the Chinese medical system  
Continued from page 3*

working with us was a good example of this. As well as his medical qualifications he incorporated in his medical practice energy work honed by many years as a Qi Gong practitioner and Master. He demonstrated on one of us how he uses his energy to help rebalance yin and yang energy that is out of balance. A traditional blending of the mind, body and spirit that is yet to happen in mainstream medicine in the west.

While we were being given our treatments, those of us watching were also discussing with the staff their use of energy in their treatments.

The reflexologists in the hospital are fully trained acupuncturists and herbal medicine doctors who have added reflexology to their qualifications.

It was a wonderful experience to be at the Hospital and to be able to see what TCM has to offer to heal and help preserve good health. We all couldn't help but feel that in Australia we are the losers – 'in a sense' - to not have access to the calibre of trained practitioners who have so much to offer. The hospital staff were so delighted that westerners were so interested in what they were doing.

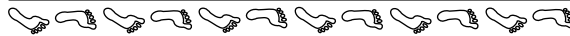
An interesting aspect of our time in China was the enthusiasm with which the Chinese people shared their knowledge and were interested in our work as Reflexologists in Australia. People of all walks of life were interested to meet our group. An example of this, is a



government official that was visiting the hospital during the afternoon on private business, who, when he heard we were there, came to meet us, smiling widely!

Our day ended with the presentation of certificates and an enthusiastic photography session with cameras appearing from everywhere. It was a wonderful experience to be received and welcomed as colleagues and equals within the medical system. Also we all felt honoured that the staff had given us so much of their time when they have such busy work schedules and long working hours every week.

The interesting outcome of this visit is that it showed how reflexology can be incorporated into the hospital system and that it has a role to play as an accepted part of mainstream medicine.🙏



## NEWS FROM THE FOOTPRINTS TEAM

.... Judee Hawkins

Jessica Wagner, our Advertising Co-ordinator, has relinquished her role and we are very grateful to her for her support over the past 18 months. Jessica's last issue will be March 2010.

I will resume the role of Advertising Co-ordinator and look forward to contacting previous advertisers and finding new people or firms who wish to advertise in FootPrints.

We have 'reciprocal' arrangements with overseas Reflexology Associations wherein we provide a complimentary copy of FootPrints in exchange for their country's journal. This, of course, means that FootPrints is not only distributed in Australia but reaches overseas organisations and individuals. This is another incentive for advertising.

Our prices have not changed since 1 July 2007 and the cost is most reasonable. We accept ads on most health/business related issues and I am listing the current prices below for your information.

Full page (26 cm deep x 18 cm wide)	* \$250.00 per issue
Half page (13 cm deep x 18 cm wide)	* \$137.50 per issue
Quarter page (13 cm deep x 8.5 cm wide)	* \$ 75.00 per issue
Business card size (approx.6.5 x 8.5 cm)	* \$50.00 per issue

◆ **All rates include GST.**

◆ **Members of the Reflexology Association of Australia receive 10% discount on the above rates**

These prices are noted in each issue of FootPrints but I ask you to be cognizant of them in the event you have an outside contact who would be willing to advertise in our journal. Your support would be sincerely appreciated.

I welcome all enquiries.

**Judee Hawkins**

**footprints@reflexology.au**

**0412 187 238**

# CPT Requirement Policy

Updated 29/3/09

**P**rofessional Members (PM's) are required to accumulate 20 CPT points per annum for the period 1st July to 30th June.

Newly Graduated Members joining the Association at Professional Member PM status are required to submit 20 CPT each year for the CPT program.

Members wishing to upgrade from Intermediate Membership IM status to Professional Membership PM status are required to submit 20 CPT Points for the CPT program.

Members rejoining the Association as Professional Members PM are required to submit 20 CPT points to have Professional Member PM status.

### Extension of time from the CPT program:

An extension of time to gain CPT points may be considered on application. Contact the National Administration for application form.

**Education Points** cannot be claimed for paid work (eg: teaching or presentation of workshops).

**CPT Education Points** cannot be claimed for First Aid.

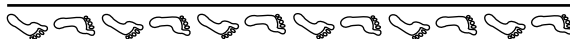
Post Graduate Workshops and Mini Workshops—1 point per hour (excluding lunch breaks).

### Educational Practicum Exchange:

Regional members wishing to claim CPT points for practicum exchange should advise the regional coordinator of the venue date, and time so that any interested members can participate. All other members wishing to claim CPT points for practicum exchange must inform the branch committee. To qualify for CPT Practicum Exchange must contain an educational component.

**Articles for publication:** Members wishing to submit articles for publication which may include case studies, book reviews or other articles may claim 3 points per article with a limit to 10 points. Articles should contain a minimum of 500 words. All submitted articles must be retained by the author for audit purposes.

**Audit:** Each renewal year 5% of Professional Members will be subject to a random audit. Those members must provide satisfactory evidence of their CPT activity for that membership year upon request. Failure to meet these requirements will result in the membership level being changed to Intermediate status.☺



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### In memory of Lorna Menzies— Tasmania

Sadly we have lost a valuable member from our branch: Lorna Menzies (4 January 1936–8 October 2009). Lorna has been a member of our association for many years and had attended most of our meetings over the years as well as workshops and other events relating to reflexology. She will be sadly missed but always remembered especially her lovely smile. Many of us have fond memories of her.



When there's light in the soul  
There'll be love in the heart.  
When there's love in the heart  
There'll be harmony in the home.  
When there's harmony in the home  
There'll be order in the Nation.  
And if there's order in the Nation  
There'll be peace in the World.

*Anon.*

## CAMELOT:

Complementary and Alternative Medicine, Economics, Lifestyle and Other Therapeutic approaches  
for chronic conditions

## An opportunity to participate in Research and earn CPT points!

**If you have clients who have Type 2 diabetes or cardiovascular disease  
(including hypertension), then you are eligible to participate in Phase 2!**

The CAMELOT study, at Monash University, is investigating the use of complementary and alternative medicine (CAM) and chronic disease self-management among people with Type 2 diabetes or/and cardiovascular disease (CVD). The focus is on the influences, costs and benefits of CAM use. The second phase of the research involves completion of a questionnaire due to be ready by April. It involves consumers mostly in Victoria, but will not exclude people from elsewhere in Australia, answering a questionnaire —by phone, online or on paper and posting it back. Assistance from practitioners will still be sought so that we can get a very broad cross section of the community to respond to the survey.

See [www.camelot.monash.edu.au](http://www.camelot.monash.edu.au)

**To participate:** The researchers need assistance to recruit consumers who:

1. have been diagnosed at least 12 months ago with Type 2 diabetes or cardiovascular disease (CVD);
2. have consulted any sort of CAM or integrative practitioner to assist in the management of their chronic illness or health more generally; and
3. speak fluent English.

The treatment you provide will not be evaluated or critiqued by the researchers who are looking more generally at consumer actions and preferences. *All participants remain anonymous in the research findings.* If you would like to contribute but you do not see clients with these conditions, contact the researchers anyway and let them know because that in itself is information of interest.

**Earn CPT points:** Participation in research activity is eligible for up to 20 continuing professional training (CPT) points at one point per hour. By encouraging eligible client

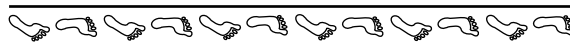
participation you are involved in the research recruiting process.

**Overcome limitations and medical dominance:**

Presently the majority of participants recruited have not previously visited CAM practitioners. Because of this, the study results indicate that very few people with CVD or Type 2 diabetes seek support from CAM practitioners. But is this really the case? By supporting this research and encouraging your eligible clients to complete the questionnaire, you will be helping to raise the profile of CAM therapies for the treatment of chronic conditions.

**Raise the profile of natural therapies:** This is a high calibre study, funded by the National Health and Medical Research Council (NHMRC) in their first ever round of CAM funding. A Reference Group comprising representatives from CAM, medical and consumer organisations will oversee the study. The study has the potential to help shape future health policy, acknowledging the complexity and pluralistic nature of the Australian healthcare environment including raising the profile of participating CAM professions. The research also contributes to a better understanding of the experiences of people living with CVD or Type 2 diabetes and so, may assist to improve related treatments and services.

**Note:** You will need to understand the CAMELOT study to be able to effectively recruit for the study. Explanatory statements and interview consent forms can be downloaded from the website, or delivered via post or email. See [www.camelot.monash.edu.au](http://www.camelot.monash.edu.au) for more information, or contact the project manager, Rachel Canaway, on 03 9903 4507 or email [rachel.canaway@med.monash.edu.au](mailto:rachel.canaway@med.monash.edu.au)



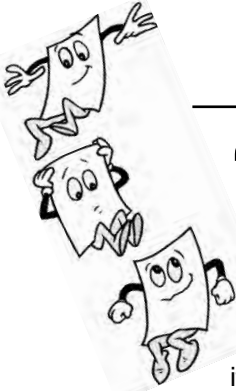
### CPT Opportunities for the current membership year 1 July 2009–30 June 2010

Practitioners wishing to source further opportunities for their CPT points can access some educational workshops via state newsletters listed on the website. Enjoy your further education! Good luck!

Libby Stark CPT Co-ordinator email: [cpt@reflexology.org.au](mailto:cpt@reflexology.org.au)

# A leap of faith

by Pam Allen



‘Good for self starters,’ read the course information published by the Reflexology training provider. Was I a self starter? Probably not, but I would worry about that later. ‘I’ll be right.’ It’s over 18 months since I finished the course and it’s been an extraordinary journey of self discovery. Promoting my own business

at the conclusion of the course was not something that featured largely in my thinking. Many people I have spoken to have struggled with this aspect of their journey. Converting new found skills into a business and becoming your own marketing director requires a leap of faith for those of us not imbued with buckets of self confidence.

The third bedroom in our home was largely unused and it was perfectly suited to convert into a treatment room. I had fun setting it all up and it looked fantastic. Now all I needed was a few clients. My heart sank. What was I to do to entice people along to my business? This felt profoundly challenging. I had to sell myself and my services to others or this whole experience could be wasted. This was going to require courage and persistence. At least I have the latter in some quantity. Courage would just take practice.

I took my cards and flyers to the local bakery and set them up on the counter with the consent of the staff. Leaving them behind that day left me feeling a little odd; kind of vulnerable and exposed. People would take them and read them. What would they think about me and my services? What sort of people would I attract into my house? A few days later the phone rang. My first client! ‘Yes, I can see you on Thursday at 10am,’ I said. My ‘first’ client is still a regular and pops in every couple of months for a maintenance session.

The next promotional opportunity arrived in the form of a fair at the local Steiner Primary School. Three beautiful Reflexology friends, Katie, Thea and Cec accompanied me. We weren’t terribly busy as it was a very hot day and there were a limited number of fair goers. We all had a great day through sharing our love of this modality with our customers and each other. However, this day heralded the arrival of a beautiful soul who became a regular client. She contacted me a month after the event saying that the week following the fair she had felt uplifted which was an enormous boost, as her health was poor with numerous and quite complex issues. Our work together over the months has been very positive. Her mental and emotional state has improved and one of her errant body functions has normalized.

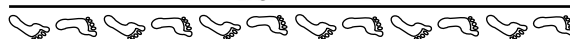
Client numbers also increased with a letter box drop. I typed up a little flyer and trotted off around my local suburb and two adjacent ones,

distributing about 800 flyers. Although I probably only got about 5 clients from this exercise I wouldn’t necessarily dismiss it as a course of action. You only need these 5 people to love it and then they tell 5 people etc. Word of mouth is the most satisfying form of advertising available. Often one client can introduce numerous members of their family as well as friends.

Suddenly a new motivating factor appeared on the scene. My beautiful friend, Thea Brown, was now a fully qualified Reflexologist too. In her confident ‘just do it’ style the next thing I knew was that we were lined up to do a talk and demonstration to her mother-in-law’s Probus group in West Geelong. My days as a secondary teacher are long gone, along with my confidence for public speaking, but with each other for support and shared responsibility it was actually a lot of fun. One sweet old dear snored a little, but overall we were very well received and generated a great deal of interest. So much so that before we had departed we were invited to do the talk again to another Probus group in Belmont. We were polished performers by the time we saw Belmont Probus and had a PowerPoint presentation as part of our delivery. We have both gained numerous clients from this exercise. Many were keen to take us up on our special offer for a ‘first session—discounted treatment.’

This entire process was heaps of fun once I got past the initial fear. Some of the other challenges/fun that I have had along the way included volunteering for the Homeless World Cup; a pamper evening at a local gymnasium (I donated my services for the evening to gain publicity); free 15 minutes sessions at a local café for 2 hours over their lunch period (their clients love this so much it’s become a regular monthly appointment); filling in as a locum for my lovely friend Maria in Essendon; publishing my details in numerous local directories both holistic and traditional; advertising on the internet’s ‘natural therapy’ pages. My cards and flyers are now plastered all over Geelong—notice boards, friends and neighbours’ office tea rooms and local business counters. My current clients are all employed by me as recruits—‘Here. Put these up in your tea room at work – it’s a great special offer for a month—you will get one discounted treatment too!’

Every single activity that I have done to promote myself has resulted in new clients coming along. I am now seeing 8–12 people a week and have been doing so for the last 3 months. It has taken time, perseverance and self belief. One of the best things that I can advise is that you don’t have to do it alone. Network. Join up with your old class mates and do something together. It’s not as daunting when you are surrounded by friends and colleagues. Go on. Get out there and do it. People are waiting for your healing assistance and expertise. Along the way, you may just find that it helps to heal you too. 🙌





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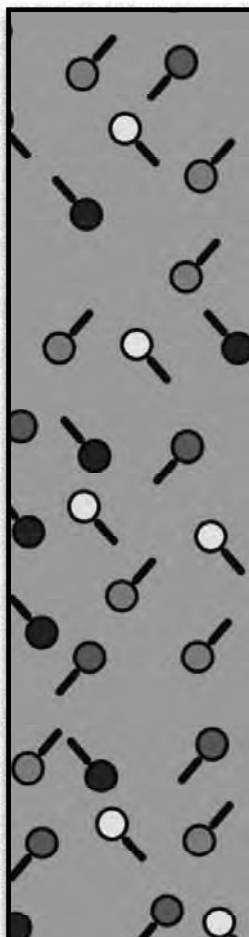
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[2010brisbaneconference@reflexology.org.au](mailto:2010brisbaneconference@reflexology.org.au)

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# Reflexology in a dementia aged care facility

....a Practitioner's perspective

Judee Hawkins



Several years ago I was invited to provide reflexology treatments to residents in a Dementia-specific Aged Care Facility, in the northern suburbs of Sydney. Prior to this I had spent some time volunteering at another Aged Care Facility providing reflexology treatments for residents in a hostel setting.

To expand my knowledge of Dementia I extracted a description from the excellent website of Alzheimers Australia—[www.alzheimers.org.au](http://www.alzheimers.org.au). For general information it is recommended that a visit to this site would be useful—view their 'help sheets'.

*'Dementia is the term used to describe the symptoms of a large group of illnesses which cause a progressive decline in a person's functioning. It is a broad term used to describe a loss of memory, intellect, rationality, social skills and what would be considered normal emotional reactions.'*

On my first interview with the Care Manager I supplied a copy of my professional qualifications and current insurance details. When working with the aged it is necessary to supply a Police Clearance which can be obtained from any local Police Station. Interestingly, the Police Clearance was forwarded directly to the Care Manager and not to me!! I asked for a copy for my records.

Other reflexologists have worked in this centre and I was 'shown the ropes' by colleagues. As I was being paid by the centre, my time (2 hours per week) had to be fairly distributed between all residents. I try to treat about six residents—I say 'try', because this is a high dependency dementia unit. A resident may welcome me one day, could then totally forget who I am, or even be quite adamant he or she may not want to be touched.

As with all aged people it is essential to approach them, face to face, slowly and preferably lowering your body to be in contact with their eyes. For ease of explanation I ask them if they would like a 'foot massage' or a 'hand massage'. As mentioned before, I am occasionally totally rebuffed, but those residents who can remember me are only too willing to experience 'touch'.

If necessary I ask the staff to return the residents to their own beds and commence my treatment. Towels and pillows are provided. I take my own cream. Some residents can only use particular creams which are provided.



A usual treatment involves relaxation techniques, spinal, lung, large intestine and brain reflexes, together with endocrine balance. An aged person's feet can be fragile (mostly females) or strong and hard (as in a male). At the end of my treatment, 90% of residents are asleep!!! I take specific note of feet conditions and report any concerns to the Care Manager who is grateful. As the nails on the elderly grow quickly, I note in the Podiatry book if they need attention.

Hand reflexology is given in the common areas and is well received by men and women alike. With the emphasis of 'touch' in my mind I ensure that I touch all residents in the room with a greeting (using their name), a quick head or shoulder massage—more for touch than reflexology.



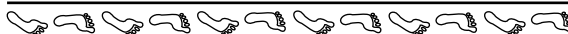
At this centre there are extensive grounds and those residents who are able to walk have a wonderful opportunity to explore the grounds and be with nature.

They are invited to participate in music, art and guessing competitions—again with the response achievable 'at that particular time'.

Record keeping is very important. I have full access to the residents' files as it is necessary to record the result of each treatment but I also keep my own comprehensive details. The Care Manager asked me to list my treatments under the 'Doctors' tab in each folder, which certainly made me realise that reflexology is seen as a valuable treatment. On occasions I have spoken to doctors visiting residents and they are understanding and appreciative of my work.



In conclusion, my visits at this Aged Care Facility are very rewarding; I can see positive responses with some residents; but to leave with a request to 'come and see me again', a soft touch or wave on leaving or a 'smile' makes me feel so good 'inside'—just as I hope the residents feel. 🙏



## Poetic Feet

"Lives of great men all remind us  
We can make our lives sublime.  
And departing leave behind us  
Footprints on the sands of time."

(Henry Wadsworth Longfellow, Psalm of Life.  
Concise Oxford Dictionary of Quotations 1981)

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Feedback from the

# 'First International Conference on Maternity Reflexology'

held in Israel on October 11th-13th 2009

Lyndall Mollart

*Midwife / Reflexologist / Approved Authentic trainer of Susanne Enzer's Maternity Reflexology**www.maternity-reflexology.net*

I had the great opportunity to travel to Israel for the first International Maternity Reflexology Conference organised by Mauricio (Moshe) Kruchik (President of the Israeli Forum of Reflexology). Around 120 delegates came from around the globe—Denmark, Spain, Holland, Greece, Hungary, Slovenia, Israel and UK. I was the lone representative from Australia! The conference ran from Sunday to Tuesday.

As some of the conference presenters would be speaking Hebrew we were supplied with headphones for translation. This translation was generally very effective. The only time we were 'lost in translation' was when the delegates asked questions without the microphone and the translator could not hear the question, which was not very often. These translators were amazing and were almost instant with their translation! There were two translators and they rotated every 10 minutes or so. One of my memorable moments was Sivan Ofiri (Doula<sup>1</sup>) describing her experience at a Stillbirth birth (which is when the baby has died in the womb prior to birth) which was naturally very emotional and as the translator was repeating the words of the speaker she was brought to tears by the words she was translating to us. The whole conference membership was in tears as we were drawn into Sivan and the couple's experience.

The program had a good systematic approach and over the two day conference the speakers worked through stages of Maternity Reflexology. Generally the presenters included a demonstration via camera with the 'demo' being projected onto the conference screen to ensure all the delegates could see. The demonstrations highlighted areas of therapy that each individual lecturer had found effective in their sphere of expertise. This was an effective way of reinforcing learning.

## Reflexology for preconception and sub fertility

Speakers were Shirley Tidhar from Israel (In-vitro fertilisation and hormonal influences), Frank Berger from Denmark and Nili Noam from Israel.

Frank Berger's talk on the 'Effects of reflexology in the treatment of male and female sub-fertility and the improvement of sperm count' included the five elements and energies in the Taoist philosophy. This looks at the seasons and the elements such as fire, earth, metal, water and wood and effects on fertility. The energy cycles show us how our energies operate through the different phases of our life and how they operate during the different seasons. Frank described how to use these theories in practice in order to optimise fertility.



Nili Noam brought in the mind-body connection and discussed the Chakra systems in her presentation 'The body-mind scope of reflexology and its contribution to the treatment of sub-fertility'. Mind and body being as one and the effects of blockages of the Chakras reflecting on the body and, of course, the feet. Nili suggests that in the treatment of infertility, we have to create space for the emotional experiences of patients.

## Reflexology for pregnancy

This section of the program included five excellent speakers. Hanna Almagor (Israel), Moshe Kruchik (Israel), Irit Landau (Israel) spoke on the first day—Teresa Huelga (Spain), and myself (Australia) spoke on the second day.

Hanna Almagor is a nurse/reflexologist and educator. She explained the hormonal responses of the body during pregnancy and the massive changes leading to the minor disorders of pregnancy. She explores the safety of using reflexology in the first trimester of pregnancy. We know this is controversial. Hanna presented her personal thoughts and observations that appears to make it 'safe' and she encourages reflexologists to work with ease within the first trimester. Gill, Jenni and I were hesitant of this view and felt that many reflexologists would take this on board without gaining further knowledge or training in maternity reflexology. We also have to work with research based evidence not personal belief. Hanna's practical demonstration of her reflexology techniques were very interesting with a combination of massage and painful looking 'hooking in'!

Moshe Kruchik's presentation spanned the 9 months of pregnancy and beyond. He talked about the three trimesters of pregnancy and explores the domino effect of the disorders of pregnancy, e.g. anaemia in early pregnancy. Moshe is obviously very passionate about maternity reflexology and his work.

Irit Landau is a Reflexologist and doula and specialises in Bach Flower remedies. Her talk was entitled 'Reflexology and Bach Flower remedies for accompanying pregnancy, preparation for birth and the postnatal period'. Irit presented an insightful paper about the pain/fear/adrenaline production cycle and how these destructive elements have massive effects on labouring/birthing women both physically and emotionally.

*Continued on page 11*

The second day—Teresa Huelga started the conference with a powerful pictorial 'Africa, maternity and reflexology: an experience in Malawi'. She provided an incredible account of women having babies in Africa: lack of facilities and provisions and how birth and death are normal parts of the midwife's work. She described how she introduced reflexology to birthing women.

I presented next with 'Issues in the tissues: unresolved emotions on the pregnant feet'. I had presented this talk at the 2009 RAoA NSW Conference and as it received such a warm welcome and interest, I thought I would submit it for this conference as it addresses the physical and metaphysical aspect of foot oedema in pregnancy. I demonstrated the Lymphatic Reflexology Technique (I teach to reflexologists in Oz) which created much interest and many questions.<sup>2</sup>

### Reflexology in labour and birthing

Cheryl Cole (UK community midwife/reflexologist) talked about the fact when all is working well, then leave things alone, however, reflexology does come into its own when things slow or become out of control emotionally. At the end of her seminar Cheryl amusingly showed how to access areas on the feet such as pituitary gland, uterus, acupuncture points, etc., with labouring women. She had a 'labouring Lyndall' on the stage on her hands and knees (no better position) working those points.

We were given the opportunity to hear Moshe Kruchik again, this time speaking on the effectiveness and benefits of reflexology during labour. Utilising case studies, Moshe demonstrated to the audience the areas to work on the feet and the reasoning behind the manoeuvres—spinal reflexes, hypothalamus, uterus, bowel and the endocrine system, to name a few. Lots of reflex stimulation and 'hooking in' for positive intent to mother and feet was demonstrated.

Rita Zatlman (Israel) spoke on 'The experience of giving birth: where does it start and how does Touch empower the process' focusing on the emotional processes, the client's personality and beliefs, cultural and social associations, her support networks, self expectations, family expectations, etc. Rita discussed how we can help change a woman's thoughts especially in the 3rd trimester when she is receiving reflexology. Therapists can help her make new images and to have positive thoughts and to discuss her fears. Very powerful and SO very true. Listening skills and positive reinforcements are a large part of our role as Reflexologists.

### Reflexology for puerperium

Mireia Marcos, a Spanish Midwife/ Reflexologist, provided an enthusiastic and powerful presentation 'Reflexology in puerperium: a glimpse of what reflexology can do for the new mother'. Mireia discussed reflexology in the postnatal period—such as mastitis (inflammation of the milk ducts), haemorrhoids (piles), anxieties/fears, pain, etc. She gave a glimpse of what reflexology can do for new mothers. Her presentation was very entertaining,



using balloons to demonstrate engorgement of the breasts and the problems with breast feeding and how reflexology can help these conditions.

### Reflexology and the Newborn

Iris Yossef (midwife, S Africa) was the final speaker for the conference. She specialises in working with children within a clinic setting—following before and after photos of therapies of childhood conditions and how she worked through the feet. Diet and lifestyle are also discussed and explored. Good tips for working on small people and their feet.

### Panel on homebirth from different countries

To finish off the conference presentations, there was a panel of speakers who discussed homebirth in their countries and questions were put to them from the delegates—UK, Israel, Spain, Australia and Netherlands.

**Workshops.** Two workshops were conducted on the morning of the third day.

*Reflexology treatment after pregnancy loss/miscarriage—*Lyndall Mollart

I facilitated a 4 hour workshop which included information about the causes, how they present and the management. I included possible reasons for miscarriage such as hormonal deficiency, blood disorders, anatomical abnormalities, chromosomal abnormalities, infection and unknown reasons.

I also included the physical and emotional impact on the woman and her partner. Post-miscarriage treatments including diet, exercise, supplements and reflexology were discussed. I demonstrated Susanne Enzer's Endocrine balance technique and discussed the use of the technique in relation to hormonal imbalances (so many).<sup>2</sup> Indeed, it can be used at any stage in life with both male and female clients. Then it was time to practice on each other. Moshe became a client and fell asleep during his endocrine balancing. He snored throughout! Truly relaxing—he did wake up before the end of the workshop though!

*Reflexology treatment to improve male sperm and female infertility—*Frank Berger

I was unable to attend Frank's workshop (run at the same time as mine) but the feedback was good with reflexology-enhancing therapies. Frank explored the energies of the five elements in the Taoist philosophy in more depth than his conference presentation—looking at the seasons and the elements such as fire, earth, metal, water and wood and effects on fertility. The energy cycles show us how our energies operate through the different phases of our life and how they operate during the different seasons.

These can have a massive effect on fertility both male and female. There was a Bach Flower workshop in the afternoon but I didn't attend.

This was the end of the conference and an incredible journey for all with the best speakers in the world on Maternity Reflexology. To finish off this adventure, Gill Thompson, Jenni Grant and myself (Susanne Enzer trainers in the UK and Australia)

First International Conference on Maternity Reflexology  
Continued from page 11

went to the beach by our hotel and watched the sunset as it slipped into the sea—with a glass of wine. A truly fitting end to the Israel experience!

**Final Words**

The conference provided the first leap towards recognising Maternity reflexology worldwide with reflexologists, midwives, doulas and natural therapists coming together to share ideas and skills.

Pregnancy and Maternity Reflexology is my world, my language, my passion. I have been a midwife (meaning 'with woman') for over twenty-five years and am as passionate now as I was when I started back in the 1980's. Reflexology and Maternity Reflexology is becoming much more recognised and popular worldwide (about time!!). In my view, Reflexologists play a very important role in caring for Maternity clients before, during and after pregnancy. They will generally have longer consultations and time with that pregnant woman at each visit and within this relaxing environment the reflexologist



can educate and reassure and primarily 'listen' to fears and anxieties the pregnant woman may have.

For these very reasons I feel passionate about Reflexologists needing post-registration training before they work on 'pregnant' feet. Reflexologists need relevant up-to-date information and research based knowledge, so they can then feel confident within this specialist field. Maternity reflexologists can be so valuable at picking up deviations from the normal, referring back to primary caretakers as needed and initiating appropriate reflexology on physical and emotional levels which is invaluable.

Where will the next Maternity Reflexology Conference be held? Watch this space!

**References**

1. www.doula.org.uk/about doula
2. Enzer S. Maternity Reflexology Manual 2004. ☞



## From the visitors' perspective

Misha Frankel and Joan Harwood

Some years are more challenging than others and last year Jan Cullen (our esteemed Editor of FootPrints) experienced every type of emotion and pain possible with the passing of her mother and sister. Then when she thought she could not cope with anything more, her own health fell to pieces.

Jan is not someone who asks or even accepts help. I knew she was going into hospital for an operation so without 'asking for permission' Joan and I simply pitched up at the hospital. The excuse was to deliver a get well card and plant from the RAOA branch committee.

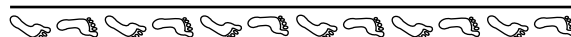
To be honest it was a shock to see her—pain was written all over her face, there were dark rings under her eyes, her head was throbbing unnaturally and she had hardly any voice to speak of. After a few minutes of chatting and trying to cheer her up we decided that the only thing to do was to tell her to shush and let our hands do what comes naturally. Energy healing can be so powerful, when we push our personality aside, have pure intentions and open up to receive and channel universal energy. I suspect Jan allowed us to work on her because she had no strength to refuse.

With Joan on one side of the bed and me on the other we directed energy towards her throat, head and chest. Physical contact was minimal. A signal was being sent

energetically to Jan's body and the answer came through very quickly. The shift happened and it was like a dry sponge soaking up water. Discomfort around Jan's throat eased but her head was still throbbing so Joan moved away whilst I worked on her. Don't think Joan wasn't also contributing. Actually she was concentrating so hard on helping that when the headache released from Jan it moved across the room to Joan. So I moved over to her and cleared her head.

This was a really good learning exercise as it showed that at all times when working with someone who is ill or in pain, you have to remain strong and be aware of your own needs so you don't deplete your own energy or pick up any negative vibes from the client. One can have good intentions and want to help, but it is important to remain somewhat distant and not become emotionally taken over by the situation.

We then proceeded to chat normally for a while and when we left Jan was a different person. She was smiling, her eyes were clearer and her voice was stronger. It was so heart-warming to see the change happen before our very eyes. ☞



# The life of a travelling Reflexologist

by Mandy Johnson

Hello, my name is Mandy Johnson. My first experience of receiving Reflexology was in 1979 when I was 21 and lived in the UK. I am now 51 and have lived in Australia for 15 years.

Going back to the UK, in my late teens I suffered extreme pain from severe endometriosis. In a nutshell I was so desperate for pain relief and had read a lot about Reflexology. I found a Reflexology practitioner called Jill Sutar who had trained in the Ingham Method (not that 'Ingham' meant much to me then) and to put it really briefly, throughout my treatments, I felt so much better—amazing pain relief more than anything. Well from that day on I was absolutely sold and fascinated with Reflexology. I sent all my family and friends along with their various ailments and they all seemed to get relief from their problems. I wanted to train and practice there and then, but life wasn't ready to let me. Back then in the UK, it just wasn't possible for me to work and study at the same time. But patience is my definite virtue.

In 1994 I met my Australian husband in England and he whisked me off to Australia. Lo and behold! I found that everything that I always wanted to study was available in Australia—also whilst you worked. I was overjoyed to see the International Institute of Reflexology charts that Jill had used so I knew I was on the right track. I enquired into the study and it went from there.

Considering I had married a man who worked in the construction industry, little did I know, that even though he was Victorian based, life would mean travel, travel, travel and yet even more travel. It was always my choice to travel around with my husband but the puzzling question in my mind was how to incorporate travel with Reflexology.

Having discovered that apart from the Reflexology training, seminars, clinic hours and case studies involved, there were other components involved in finally achieving accreditation. The only course of action was to just trust that it would all work out over time.

So my biggest challenge was completing all the different components required to finally obtain a Diploma of Reflexology whilst all the time having to relocate. But this is how it worked out perfectly: In 1995, whilst still in Victoria I completed the AIPC Professional Counselling course. In 1996 we relocated to WA and there I completed Physiology and Anatomy. 1997 saw us relocate to Townsville where I found Heather Edwards at the Queensland School of Reflexology and so I went on to attend and complete Reflexology I and II in Townsville and Mackay. I couldn't believe my luck when my husband said we had to go to Brisbane because I knew Heather was based there and I was able to attend and complete the Reflexology III and IV with her. So along with other studies I had completed, I was finally an accredited practitioner.

In Brisbane, knowing never to get too settled, I had a small client base at home and also did Reflexology at the Manly market for a while. I have found that with leading such a transient life, markets, fairs and public events are always a good way to get out there with Reflexology.

Well, as predicted, my husband informed me that we were back to Townsville again, so out went my cards and leaflets and, yet again, I set up a part time practice at home as well as doing mobile Reflexology. Well that was only to be for 8 months as we had to relocate to New South Wales. I referred my clients on to my Reflexology colleagues in Townsville where I had originally trained. By now I'm only up to about 2002. We then moved back to Townsville for a third time, then off to Gladstone, QLD, then Karratha, WA. Wherever I went I always set myself up (albeit temporarily) offering Reflexology either at home and/or hiring a room in pharmacies, health shops or salons. Also I would often write a short article for the local newspaper when I arrived at a new location as it would generate interest quickly. I have always been so passionate about Reflexology that being a roving Reflexologist was no longer a problem. There is always a way to get involved and at least I felt that I was promoting the modality. Well in 2004 we found ourselves back in Victoria—we settled in Port Melbourne for a few years where I was mighty glad to be back in the land of civilization as far as Reflexology networking was concerned. I was able to mix again with Reflexologists—go to the meetings, footswaps and receive plenty myself. Again, I set up a part-time practice at home, worked weekends in a health shop in Albert Park and went to Sue Ehinger's Chinese Reflexology course, which I loved.

In 2006 life took us back to Newman, WA in the Pilbara—a harsh desert-like place in the middle of nowhere, where I vowed I never wanted to go again but spent two years there. But such is life and again I put my cards around and spread the word about Reflexology as I always have done. Newman has a good community core and I quickly acquired a thriving practice—slaving to the bone every day as the service was gratefully received. I gave talks and mini-sessions to the local CWA and other groups, did Reflexology fund-raising sessions at the local kindergarten to raise money for toys and introduced Reflexology to other community groups in Newman. Apart from the long term residents there, it is very itinerant so I made a lot of use of the RAoA website (as I always have) to find my clients' practitioners in their home areas or when they went to Perth.

Because of the way I work as a Reflexologist I don't have the luxury of being part of a network where I can join footswaps and CPT points are readily created. So I have to create my own. My membership status alternates between Intermediate and Professional. I am Professional when I can stay in one place long enough to earn CPT

*Continued on page 14*

*Life of a travelling Reflexologist*  
Continued from page 13

points and do my First Aid. Other times I have to revert to Intermediate but it doesn't seem to be a problem—I just can't offer health rebates.

Well I am now in Singapore, can get my feet done as often as I want as there are Reflexology shops on every corner but very different to how I am used to having a treatment in Australia. The shops are usually noisy, no privacy, very little communication and nobody ever displays any type of qualification or takes a client history. They often use tools as well. Some treatments can be extremely painful. Although I am familiar with Chinese techniques, this is different again. It seems Singapore has its own mixture of techniques, but I still have a treatment every week.

Having said all that, whilst walking up Orchard Road a few months ago, I found a salon offering Reflexology and a fish nibbling foot spa. I booked in and for SD\$83 I settled in to receiving my Reflexology treatment and was amazed to find that the Malaysian lady delivering the treatment was using an Ingham based method. I was in heaven. I then had a 30 minute shoulder massage then dipped my feet in the tank for the fish to nibble. It was like sticking your feet in a bath of worms. I persevered a while but my squeamishness overcame me. Great experience though.

When I got home I looked up the salon on the internet and discovered the owner, Dr Jimi Tan, who trains his own staff had studied Reflexology in America and China, probably hence the Ingham method. His course content for Reflexology was 5 hours theory, 27 hours

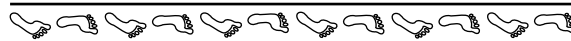
practical and 9 hours assessment. Just goes to show how comprehensive our RAoA Diploma is. I know he's very respected in Singapore because he has had government approval to conduct training for a Reflexology Certificate under the national skills recognition system and has a string of salons around Singapore.

Whilst we are in Singapore (possibly 6–12 months) I concentrate on working the feet of the ex-pat community and am also learning Mandarin\*.

My passion for Reflexology is as strong today as the first time I received a treatment back in 1979 and as I look back, my earlier frustrations of how to mix Reflexology with travelling were unnecessary as I have always been busy and, if anything, it has made me get out there and out of my own comfort zone by publicly promoting Reflexology by myself. Now I just say to myself when the time is ready we will go home to Gippsland and I will be able to, once and for all, settle down to a home practice.

\*The desire to learn Mandarin was triggered by an experience I had whilst receiving one of my first treatments in Singapore. I was trying to explain to the Chinese therapist that I have pins and plates in my left ankle from an old accident which is why my foot won't flex or bend. He didn't really understand at all and I assume he thought I was being uptight. He then proceeded to throw his arms up in the air and in sheer exasperation wailed at me 'If you don't give me your heart I cannot help you'. After that I always carried a diagram with me of my ankle.

Hello to all the Reflexologists I have met around Australia on my travels and if you would like to contact me please email on [colmin1@bigpond.com](mailto:colmin1@bigpond.com). 🐾



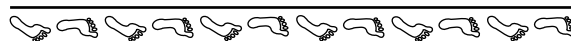
### Travelling Feet

**Footloose**—free to go or do as one chooses. Dates from the times when slaves had their fetters removed and they became free men.

**Foot loose and fancy free**—a person unencumbered by a spouse or partner. Metaphorically had their fetters of wedded slavery removed.

**Itchy feet**—the urge to travel comes from the days when elegant young men had to wear court shoes which like today's trainers got very sweaty, smelly and created fungal infections that itched. So when they had itchy feet they shed their court shoes and went travelling with more sensible footwear

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I guess there are some things that the brain cannot handle ...

#### HOW SMART IS YOUR RIGHT FOOT?

Please try this ... it takes 2 seconds. Unbelievable! It is from an orthopaedic surgeon ...

This will confuse your mind and you will keep trying over and over again to see if you can outsmart your foot, but, you can't. It is pre-programmed in your brain!

1. While sitting at your desk in front of your computer or sitting anywhere, lift your right foot off the floor and make clockwise circles.
2. Now, while doing this, draw the number '6' in the air with your right hand. Your foot will change direction!

We all know how stupid this is, but before the day is done you will try it again, if you've not already done so.



# CPT Education and World-Wide Conferences —Calendar of Events

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2010	Presenter	Title	Location
24 March	Australian College of Chi-Reflexology	Lymphatic Drainage Reflexology	Contact Moss Arnold *Details below
10 April	Australian College of Chi-Reflexology	Sports Reflexology	Contact Moss Arnold *Details below
11 April	Australian College of Chi-Reflexology	Feng Shui for Practitioners	Contact Moss Arnold *Details below
17–18 April	Australian School of Reflexology	Auriculartherapy	Sydney Contact Sue Ehinger <a href="mailto:sue@reflexologyaustralia.com">sue@reflexologyaustralia.com</a> (02)4976-3881 <a href="http://www.reflexologyaustralia.com">www.reflexologyaustralia.com</a>
17–18 April	Australian College of Chi-Reflexology	Chi-Reflexology 1: Basic Theory and Treatment Techniques (3 & 4)	Contact Moss Arnold *Details below
23–25 April	Reflexology New Zealand	National Conference	Auckland, New Zealand Contact Stephanie Gowan <a href="mailto:gowan@xtra.co.nz">gowan@xtra.co.nz</a>
21 April–10 May (19 days)	Deborah Johnson and Mr Jing Zhang	Chinese Reflexology and Study Tour	China Contact Deborah Johnson 0402 065 684 <a href="mailto:feetsanctuary@optusnet.com.au">feetsanctuary@optusnet.com.au</a>
15–16 May	Australian College of Chi-Reflexology	Chi-Reflexology 2: Balancing & Diagnosing Techniques	Contact Moss Arnold *Details below
29 May	Australian College of Chi-Reflexology	Hand (Acupressure in) Reflexology	Contact Moss Arnold *Details below
30 May	Australian College of Chi-Reflexology	Vibrational Reflexology	Contact Moss Arnold *Details below
26 June	Australian School of Reflexology	Facial Reflexology Revision	Sydney Contact Sue Ehinger <a href="mailto:sue@reflexologyaustralia.com">sue@reflexologyaustralia.com</a> (02)4976-3881 <a href="http://www.reflexologyaustralia.com">www.reflexologyaustralia.com</a>
27 June	Australian School of Reflexology	Extension Day	Sydney Contact Sue Ehinger <a href="mailto:sue@reflexologyaustralia.com">sue@reflexologyaustralia.com</a> (02)4976-3881 <a href="http://www.reflexologyaustralia.com">www.reflexologyaustralia.com</a>
3 July	Australian College of Chi-Reflexology	Sound Reflexology	Contact Moss Arnold *Details below
17–18 July	Australian College of Chi-Reflexology	Australian Bush Flower Essences & Chi-Reflexology	Contact Moss Arnold *Details below
21–22 August	Australian School of Reflexology	Maternity Reflexology II	Sydney Contact Sue Ehinger <a href="mailto:sue@reflexologyaustralia.com">sue@reflexologyaustralia.com</a> (02)4976-3881 <a href="http://www.reflexologyaustralia.com">www.reflexologyaustralia.com</a>
18–19 September	Australian College of Chi-Reflexology	Reflexology for Women	Contact Moss Arnold *Details below
10 October	Australian College of Chi-Reflexology	Astrological Reflexology	Contact Moss Arnold *Details below
15–17 October	Reflexology Association of Australia	National Conference 'Reflexology Celebrating Research'	Brisbane, Queensland Holiday Inn, Brisbane Contact Kate McKnight, Chairperson <a href="mailto:2010brisbaneconference@reflexology.org.au">2010brisbaneconference@reflexology.org.au</a> <a href="http://www.reflexology.org.au">www.reflexology.org.au</a>
16-17 October	Australian College of Chi-Reflexology	Biomechanics	Contact Moss Arnold *Details below
27–28 November	Australian College of Chi-Reflexology	Therapeutic Ethics	Contact Moss Arnold *Details below
18 December	Australian College of Chi-Reflexology	Spiritual/Crystal Reflexology	Contact Moss Arnold *Details below

\* All courses at Springwood NSW. Contact Moss Arnold: [moss.arnold@chi-reflexology.com.au](mailto:moss.arnold@chi-reflexology.com.au); [www.chi-reflexology.com.au](http://www.chi-reflexology.com.au); (02)4754-5500



# Book reviews

## The Foot Reading Coach

by Jane Sheehan

Reviewed by Sue Rusden

**T**he Foot Reading Coach follows on from Jane's first book 'Let's Read Our Feet'. In her second book you will discover in greater detail more information about each of the toes.

The book starts with a detailed introduction about the author in an 'interview style' which goes into detail about the author's career path and experiences as a foot reader. Questions are highlighted which allows the reader to quickly take what information you want or need. At the end of the introduction there is a reference guide for more information.

Chapter 2 is an in-depth guide to the 'Do's and Don'ts of Foot Reading'. Each one is labelled and highlighted and comes with an example (again highlighted) allowing the reader quick reference to information. This chapter also concentrates on how to communicate the interpretation of the foot reading in a positive way, always taking into consideration the client's physical and emotional needs. At the end of this chapter is a map of the feet outlining briefly the meaning of each section of the foot and each individual toe.

Chapters 3 to 7 go into more detail about each of the toes outlining their significance. Case histories examples inform the reader how important it is to be careful how you tell the client about what you have seen in the toes. Key paragraphs are also numbered to the chapter which also helps for quick referencing.

Chapter 8 takes a look at the toenails in more detail when they are decorated or varnished. It is an interesting interpretation of different colours and their meaning which will be refreshing for any person who has studied colour therapy.

In chapter 9 the author touches on the subject of using 'Oracle Cards'. There are many on the market by such authors as Louise Hay and Doreen Virtue. The cards are beautifully illustrated and have a positive affirmation for the person choosing a card. The author explains how these cards can enhance a foot reading allowing the client to talk about a subject that maybe did not come up in the foot reading.

Chapter 10, 'Looking After Yourself' restates how important it is for 'Therapists' to take time out; a message I think is important for all of us to hear. As the author points out, you should book in your diaries a couple of days off a week, schedule in that annual holiday and find an ongoing leisure activity that is loads of fun.

Chapter 11 talks about 'Foot Reading Parties', a short brief on how the author organises foot readings at social gatherings.

The book concludes with the author's interpretation on 'Goodbye' and 'Recommended Reading and Further Learning' reference guide. You will also find an Acknowledgements and Index at the end of the book.

On conclusion I found this book very interesting to read. It is not huge, it is light and subtle and you feel very relaxed with what the author is saying. It allows the reader to source the information wanted very quickly. For me it was refreshing to, once again, take a different view of the feet and, if I do see something interesting in a client's feet, the importance to consider 'will my client be interested in what I have seen?' or 'do I keep it to myself, taking into consideration the client's feelings and emotions?'.<sup>1</sup>

## The Carers Cosmetic Handbook: Simple Health and Beauty Tips for Older Persons

by Sharon Tay

Reviewed by Sue Rusden

**T**he Carers Cosmetic Handbook is just what the title implies.

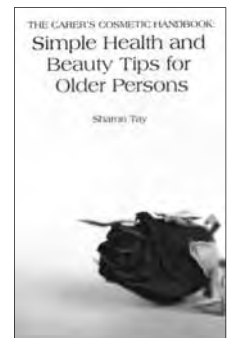
This book is a very useful guide for all carers who assist people with everyday hygiene.

The book starts with a quick introduction and I found the contents pages at the front of the book very helpful if the reader requires a quick reference check. On the first page of each chapter there is a list of chapter topics for quick referencing, then in detail the topic is discussed. Most chapters also include a 'question and answer' section which also makes for easy referencing. At the end of each chapter there is a website reference and a glossary of terms.

Chapter One is a very in-depth look at cosmetics including their ingredients, absorption, skin care for the face, sun safe, cosmetic hygiene, basically everything you need to know about cosmetics and skin types.

Chapter Two looks at fingernail and toenail disorders, manicures and pedicures. I really enjoyed the author's 'Q & A' style to nail disorders, described in lay persons terms allowing carers to easily understand the subject at hand (pardon the pun). This chapter includes a step by step guide to giving a manicure (this information can also relay to a pedicure as well) and there are a couple of black and white photos as a visual aid.

Chapter Three concentrates on Herbal Remedies and Essential Oils with great advice and recipes including herbal infusions, oil mixtures for nail treatments and a clay mask formula. This chapter also includes a list of herbs/oils and their botanical name and beneficial properties.



*Continued on page 17*

Chapter Four takes a more in-depth look at hair removal for women with a 'Q & A' style look at various hair removal techniques. This chapter also covers waxing contraindications and facial hair disorders. There is a step by step guide to eyebrow shaping with a couple of black and white photos for guidance.

Chapter Five deals with the importance of nutrition and health and takes a look at vitamins and minerals, nutrition for older people and the importance of water intake. An in-depth glossary of terms at the end of this chapter makes for valuable information for any carer.

Chapter Six discusses everything one needs to know about the skin - skin structure, the aging process (looking at each decade from our 30's to our 60's and beyond) and how we should care for our skin throughout each decade. There is also a 'Q & A' style section that discusses skin problems in great detail.

The last chapter in this book takes a very in-depth look at skin care and make up. Topics include cleansing, moisturising and exfoliating. There is a very interesting section on makeup for people of different origins with colour tips. There are lots of really useful questions with answers about different types of makeup, i.e. foundations versus face powders, how to apply blusher, how to prevent mascara smudging. There is also a detailed list of information regarding cosmetic accessories. At the end of the chapter there is a step-by-step guide to makeup application from light day makeup to full application. The book concludes with a note from the author and a bibliography.

I personally found this book an informative and enjoyable read. For someone not overly confident with makeup, manicures and skin issues I feel after reading this book that I would have the confidence to take this information and, not only apply to myself, but would find it rewarding to pass this information and its practical applications to my elderly clients, family and friends. This book would be a great adjunct to any caring therapist's reference library. 🐾

## **Vertical Reflexology for Feet & Hands**

by Lynne Booth

DVD Review by Sue Rusden

**T**he Vertical Reflex Therapy (VRT) DVD runs for approximately 57 minutes and is aimed at anyone from novice to experienced reflexologist and is presented by the author, Lynne Booth. The DVD is very easy to browse through with the main menu giving you 6 selection choices with each section titled for quick choice/referencing. There is also a separate section on products available and course information. The viewer will also find reference to Lynne's web details. Whichever section or chapter you choose, you can easily stop or pause throughout that chapter to either make notes or practice a technique.

### **Section 1—Introducing Vertical Reflex Therapy**

Starts with an introduction to VRT. Lynne is very welcoming and explains that anyone at any level can practice VRT. Within this section there is a brief outline of the history of Reflexology, diagrams of the locations of the reflexes on the feet and a list of contraindications are also outlined.

### **Section 2—Basic Reflexology Relaxation Treatment**

Demonstrates and discusses how the body is reflected in the feet and the referral area theory. Also in this section Lynne explains how to thumb, finger and knuckle walk correctly—she also introduces the VRT nail on nail technique which she discovered. At the end of this section Lynne explains and demonstrates relaxation techniques with the client on a massage table.

### **Section 3—Basic VRT for the feet**

This section starts with an outline of the simple rules that apply to VRT and how to position you and your client correctly for a VRT session. The DVD continues with a visual explanation of the VRT foot chart. From here Lynne takes you through the VRT workout for the feet including Metatarsal Glide to stimulate the whole body, Pituitary Pinch and The Harmonizer which is a technique to help bring the body back into balance. Another interesting technique that is demonstrated and discussed is the diaphragm rocker which is beneficial for insomnia.

### **Section 4 –Advanced VRT for the feet**

Section 4 takes you through the advanced techniques for VRT including Synergistic Reflexology which demonstrates how you can work on the hand and foot simultaneously. Other techniques explained and demonstrated are as follows:

- ◆ Zonal Triggers which activates an entire zone.
- ◆ Knuckle Dusting which has a stimulating effect on the Central Nervous System, regulates breathing and is helpful to clients with fatigue.
- ◆ Metatarsal Pressure which is beneficial for stiff backs and spasm and is a good First Aid treatment.
- ◆ Diaphragm Rocking is also demonstrated for self help and can be used in a regular session of reflexology.

At the end of this section First Aid for sports injuries and ankle injuries is also demonstrated.

### **Section 5—VRT For the hands**

In this section the viewer will learn an adaptation of the foot techniques that were shown in the previous sections including some precautionary tips for working the hands. An explanation of how you can work the hands in any environment and a brief improvised hand treatment are also demonstrated. There is also a self help sequence for working the hands which is beneficial for any reflexologist whom may want to utilize this therapy themselves and also pass on some self help techniques for their clients to do in between sessions.

DVD review—  
Continued from page 17

**Section 6—Complete VRT foot reflexology treatment**

This section explains how VRT and 'Classical' Reflexology, as Lynne describes it, can be incorporated together. There is a complete demonstration of the sequence including VRT, 'Classical or western reflexology', Advanced VRT and working the referral areas. This section concludes the DVD with a summary of the benefits of VRT.

At the end of the DVD Lynne's other products including her books and charts are shown. These are also available to be reviewed on the main menu selection as well where you can also obtain more information about Lynne's courses.

The DVD was a pleasure to watch with calming music and demonstrations performed in relaxed settings. As Lynne outlined, this DVD is basically for anyone at any learning level. This DVD is great for any Reflexologist wanting to learn some new techniques and would be a great adjunct to Lynne's VRT courses.



## trevor steel e award

The RAOA is looking at setting up a Trevor Steele Award.

This award will be for forwarding the cause of Reflexology within Australia and/or a Research Award.

If members have any comments or suggestions could they please forward them to Margaret Watson at [reflexol@dcsi.net.au](mailto:reflexol@dcsi.net.au).

We are looking for feedback rather than nominations at this point.



**April 23-25, 2010**  
Vaughan Park Conference & Retreat Centre,  
Long Bay, Auckland

Connect  
in Auckland  
in 2010

The Auckland Reflexology Group warmly invites members of Reflexology Association of Australia to the sparkling shores of the Hauraki Gulf for this 3 day Annual Reflexology Association of New Zealand Conference focusing on the theme of 'Connection'.

**Key Speakers include:**

- **Dr Robin Kelly** - an Auckland based doctor integrating Western, Eastern and modern mindbody concepts within his medical practice. Award-winning author and Co-president of the Medical Acupuncture Society (NZ), Dr Kelly will captivate you with his workshop on the Human Hologram, Consciousness and much more.
- **Tony Boyce** - a Sunshine Coast based leading intuitive and alternative healer, Tony delivers motivational workshops on spiritual development. At the Auckland Conference his practical approach will show you connective techniques to help you connect your abilities, open up your energy and stay connected to what you've learnt as a practitioner.
- **Denise Boston** - certified Master NLP practitioner and trainer, Denise's seminars empower people to re-energise and re-ignite, increasing performance levels, attitudes and results. Denise will give a presentation on Marketing - focusing on attracting people to your practice, including web site and search engine expertise.

★ Develop new skills & brush up on old ones

★ Connect with new & old friends

★ Broaden your mind

Plus

2 Day post conference workshop April 26-27  
with Tony Boyce  
'Developing The Intuitive Practitioner'



**Visit [www.reflexology.org.nz](http://www.reflexology.org.nz)**  
for programme and presenter profiles,  
including registration details

Don't delay, take advantage of the strong Aussie dollar and book a great kiwi holiday today!

# Referral areas in reflexology

by Deirdre Brocklebank

When I first studied Reflexology with Sue Ehinger in 1997, one of the most significant concepts for me was that of referral areas. I still find this to be the case.

As you all know, a referral area is an anatomically related area which can be worked instead of, or in addition to, the affected area. For example, the right and left hands are referral areas for the right and left feet respectively. The palm of the hand is facing forward in the anatomical position, so this will make the arm bend in the opposite direction from the leg. Therefore, for example, the inner forearm refers to the calf of the leg and the other parts relate accordingly. Furthermore, the wrist refers to the ankle, the elbow refers to the knee and the shoulder refers to the hip/sciatic and vice versa.

I have found that one of the great benefits of referral areas is that clients can be taught to use the referral areas on themselves between follow-up sessions. By doing that they will, of course, reinforce the benefits from the reflexology sessions.

I frequently apply the concept of referral areas in my sessions but also whenever I think of it, both on myself and for others, for whatever we are dealing with.

It is so rewarding to see the relief in someone's eyes when the effects of applying pressure to the anatomical equivalent to the source of the pain takes effect. One of the most memorable occasions when I used this was for my cousin's daughter, whom I will call Fiona. Fiona had a cancerous eye removed on a Monday and I saw her on the Friday of the same week. She was an amazing young woman and very positive about her future. (Her teddy sported an eye patch just like hers.) However, she was quite distressed because she was very sore in her right, lower leg where a drip had been inserted for the surgery and then removed a day or so beforehand. Physiotherapy had aggravated the pain and nothing the doctors prescribed or recommended seemed to relieve it. I got her permission for me to apply pressure to her right lower arm in the anatomically equivalent position to where her leg hurt. In literally minutes the pain had gone. Her smile said it all.

On another occasion I had noticed a friend was sweating and in obvious pain. He said he was in agony with his left ankle and he was unable to stand without pain. He had had his knee reconstructed several months before, but the doctors told him there was nothing they could do about his damaged ankle and he would have to learn to live with the pain. I applied pressure to his left wrist and within minutes he felt immense relief. I continued to work on the site and to do a few other techniques including: Theta healing\*—to clear beliefs such as: *'I'll have to suffer as there is nothing more that can be done for my ankle'* (this is what the doctors had told him) and EFT (Emotional

Freedom Techniques)\*\* to address the residual pain. He could not believe the speed and effectiveness of the treatment. The great thing about this was neither could a friend of mine who was watching the whole process. He is a scientist and couldn't believe the rapid change in our friend who had gone from being in agonising pain to being able to put weight on his ankle and then to swing around on it with his full weight.

This same scientist friend that I mentioned above, is still getting over the time when I worked on him for a severely burnt, swollen hand. His fingers were like sausages. I worked on his corresponding foot and before too long his fingers were almost back to normal and he could bend them into his hand. His scientific mind obviously still can't believe what happened, going from the following note which I received from him recently. *'I always will remember the amazing result when I had the burn at Gill's house. Reduction in pain from pressure point I can understand from the viewpoint of endorphin release, but I didn't expect such a dramatic decrease in inflammation as we evidenced. Any ideas on how that may work?'*

I have also used referral areas for many other conditions including bunion pain, stubbed toes, broken ribs and to release tension in hamstrings when doing yoga.

I love to teach people techniques which empower them to be able to help themselves. Consequently, using the referral areas for self-help is a secret I share whenever I can.

*Deirdre Brocklebank BA, Diploma of Reflexology, Diploma of Facial Reflexology, Cert. IV Assessment and Workplace Training, EFT Practitioner and teacher, Theta Healing Practitioner.*

*d\_brocklebank@hotmail.com*

*<http://www.ntpages.com.au/therapist/452>*

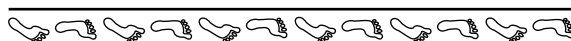
*<http://bodyandsole.wordpress.com>*

\* **Theta healing** is a 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.

\*\* **EFT** is a meridian, energy therapy and it is highly effective for resolving negative emotions such as anger, grief, fear, guilt, stress, jealousy and depression and it can also reduce physical pain. It can also be applied to "feeling stuck", energy and motivation, attracting abundance and enhancing performance in work, sports and creative pursuits.

The premise on which EFT is based is that emotional distress is due to a disruption in the meridian energy system and this can give rise to physical as well as emotional symptoms. EFT balances the disrupted meridians by tapping into the system through specific acupuncture points. This assists in releasing stress from both the body and mind (conscious and subconscious), as the meridian system communicates with every organ and physiological system in the body.

**Reference Point Therapy** is a new therapy based on years of research of healing technologies. It can allow for the quick clearing of underlying traumas that cause our problems.🙏



# Ganglion cysts

by Julie Hart

## Definition

Ganglion cysts are lumps that form next to tendons or joints which can also be referred to as a mucous cyst, mucinous cyst, synovial cyst or 'Bible Bump'. They are benign sacs filled with synovial like fluid only thicker, that has leaked from a nearby tendon or joint. Small tears in the tendon membrane or joint capsule allow fluid to be squeezed out filling up a balloon like sac next to the area of the leak.

The fluid contains proteins which make it thick and hard for the body to absorb after it has leaked out. The body tries to absorb, but may only be able to draw out the water, leaving it an even thicker substance. By the time the lump is big enough to see, the liquid is as thick as jelly.

The backs of the hands and the wrists are most commonly affected, but ganglion cysts can grow on the feet, knees and ankles. A ganglion cyst is the most common lump on the hand and tends to target women between 20 and 40 years of age for reasons unknown.

## Possible causes

No-one knows why these cysts occur, but the possible causes are:-

- ◆ Injury
- ◆ Trauma
- ◆ Overuse
- ◆ Arthritis
- ◆ No reason

## Common sites on the hands

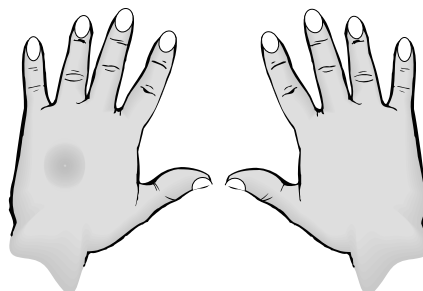
- ◆ Wrist: on the back—'dorsal wrist ganglion' or 'dorsal carpal ganglion'  
on the front—'volar wrist ganglion'  
or, sometimes, on the thumb side

These come from one of the wrist joints, sometimes aggravated by a wrist sprain

- ◆ The palm at the base of the finger—'flexor tendon sheath cyst' and are often due to tendon irritation—tendonitis
- ◆ The back of the end joint of the finger—'mucous cyst', next to the base of the fingernail. These can cause a groove in the fingernail, or rarely can become infected and lead to a joint infection. These are usually due to some arthritis or bone spurs in the joint.

## Symptoms

- ◆ Noticeable swelling or lump
- ◆ Lump is able to change in size
- ◆ Lump is usually soft and immobile
- ◆ In some cases the lump can be painful and aching



- ◆ The ache is made worse by moving nearby joints
- ◆ Can cause muscle weakness
- ◆ Depending on the location may cause sensations of numbness or pins and needles and may interfere with the mobility of the area

## Possible treatment

- ◆ Over the counter non-steroidal anti-inflammatory medication (NSAID).
- ◆ Drain the cyst with a needle and inject the area with cortisone—more effective for cysts coming from the tendon. However, the gelatinous fluid within the cyst does not always come through a needle and this treatment leaves behind the cyst lining and the ganglion will return in about 50% of cases.
- ◆ Surgery to remove the cyst and clean out the area. While this is usually effective, a small percentage of wrist ganglion will return. The recovery period is from 2–8 weeks and up to 3 months to regain normal strength.
- ◆ Smash the lump with a heavy book—traditionally referred to as smashing it with the 'Holy Bible' hence the reference to the 'Bible Bump'. A barbaric measure that pops the cyst and ruptures the lining of the cyst. Not a good idea though, as it could cause further injury.
- ◆ Wait and watch.

Sometimes wrist ganglion cysts go away with no treatment; most of the time they linger around or grow even larger. Some cysts form a one way valve that fluid enters easily but cannot escape and over time this fluid becomes gelatinous. When the ganglion cyst becomes large enough it will begin to put pressure on surrounding structures. This pressure can cause painful symptoms and is usually the reason these ganglion cysts are surgically removed.

## My story

As a Reflexologist my hands are my most valued tools, so when a lump appeared on my left wrist about 2 years ago I was a little concerned. Not one to visit the Doctor often, I was quick to make an appointment to find out what this lump was.

After examining and palpating the dorsal side of my wrist he diagnosed a ganglion cyst and said I could either follow the traditional remedy and bash it with the Holy Bible (in jest I hoped) or just leave it and see what happens. He assured me it was benign and nothing to worry about. I left feeling relieved albeit a little perplexed.

Continued on page 21

Not much more thought was given this lump until it started growing and becoming the focal part of my wrist. Not a very pretty or healthy look for anyone—particularly a Reflexologist whose hands are very much on display. At this stage I made enquiries with various practitioners and consulted all the reflexology and related texts in my clinic—it seemed no-one had an answer or even knew very much.

More time passed and being the bigger lump that it now was, started getting in the way of things until finally an accident happened. My wrist hit our dog Simba's teeth while we were sparing and the pain was excruciating. Not making the connection till the next day, I noticed the lump had disappeared. Wow, I thought have I discovered the cure ... Not sure if I could go through that pain again voluntarily.

A couple of weeks later my ganglion cyst had returned, only growing to be even larger this time and giving some pain and discomfort as well. A couple of months later a similar incident and a similar result only now it was worse than ever. I had to do something as it was now unsightly, painful and my wrist was being restricted in certain positions.

I consulted a couple of doctors and practitioners, tried their suggestions, still to no avail. I knew the options and was not going to entertain the thought of surgery and the possible 3 month recovery until I had given some of my

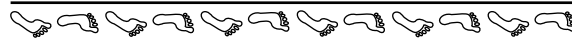
own treatment. For so long a little voice inside had been hounding me to do auricular therapy and, though it was not mentioned in my texts, I did just that.

With the help of my husband, I located the points and he helped place the magnets—Posterior Wrist, Posterior Thoracic Spine, Posterior Cervical Spine, Apex, Darwin's Point, Shen Men and Point Zero. The following day my big lump had seemingly dispersed. I could see and feel the swelling now across my wrist—all along the dorsal wrist crease instead of concentrated in a lump. This was a definite change in less than 24 hours. I kept these magnets in place for a couple of weeks, worked them regularly and observed the swelling slowly lessening. I then followed up with a second treatment, applied magnets and kept these on for another 2–3 weeks.

It has been several months now and there has been no return of the ganglion cyst. I have become more aware and am more careful on how I use my wrists. My family and friends are amazed at the results and continue to 'watch this space'. For myself, I am ever so grateful that auricular therapy has proved its effectiveness yet again.

References

- The Complete Family Medical Guide by Dr. Warwick Carter  
orthopedics.about.com  
wesleyhandcentre.com.au  
betterhealth.vic.gov.au  
eatonhand.com



## STATE MATTERS



### NEW SOUTH WALES

In November 2009 an enthusiastic group of volunteers attended the Mind Body Spirit Festival here in Sydney once again. The eager group of volunteers were kept busy the whole time and even had to turn people away. One of the highlights came when two ladies in wheelchairs came by looking for information and ended up receiving a hand reflexology session there and then. Thanks once again to Graeme Murray for setting up such a splendid display and to Jess Wagner and Misha Frankel for organising the willing team of volunteers whose enthusiasm and effort make this the annual success it is. Well done!!

Our Branch Christmas party went with a bang and was held in December at the Green Gourmet in St Leonards. All agreed it was a super evening with excellent company and fine food. Thanks to Misha Frankel and Joan Harwood for the huge effort they put in to organise the evening and on the festive decorations around the room as well as on the tables. It was a great chance to relax and catch up with old friends and to make some new ones.

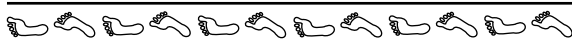
Having had the opportunity to all catch our breaths over the Christmas break the Branch is now revving up for another busy year. Opportunities are coming up for members to

volunteer at the Health and Lifestyle Expo at the end of April as well as attending meetings and workshops throughout the year.

The NSW Branch will celebrate its 20th Anniversary in October 2010 and we hope to make it a memorable milestone – so make sure you all have your details up to date so that you won't miss out on the Branch newsletter (FeetSpeak) or the National Journal (FootPrints) as well as the email newflashes. Remember additional information is always available on the RAOA website.

Wishing you all every success in 2010.

Jenny Arnott 





## TASMANIA

A new year has begun and no doubt our Tasmanian members will be geared up, ready to face another exciting and challenging year. For me I am delighted to be part of the Reflexology Research Team as I enjoy exploring the internet and searching for interesting information relating to reflexology.

Already our workshops for 2010 and the National Conference 'Reflexology Celebrating Research' have been pencilled into our diaries. Preparation and plans are in progress to bring these new and exciting 'skilled' events to our members. The Tasmanian Branch always welcomes guest speakers from other state branches, as well as overseas speakers sharing up-dated information on 'specialised' topics with our members.

Members of our branch welcomed Anne Young to our island in October 2009, to give a talk on: *Musculo-Skeletal Reflexology—Pathways to Good Health*. The nine members who attended found the workshop successful and the information

Anne gave very beneficial. At our next meeting in February our first presentation will be given by Rosa Cavaretta. Her topic is on: *Meridian Brushing*.

### Swap meetings

Swap meetings will continue throughout 2010 encouraging our members to take part in up-dating their skills with 'practical' exchanges incorporating various topics relating to reflexology.

### State delegate

Our state director, Janice Dance, has left our island (temporarily) to live in Victoria so that she can be near her 'ailing' parents. This has been a difficult time for Janice, and for her having to make this decision was not taken lightly. Janice will continue to be our State delegate while living in Victoria and will continue to keep contact with the Tasmanian Branch

Committee. If for some reason Janice cannot be available, Gaye Webb our state chairperson will stand in Janice's place. This has been approved by the national board of directors and by the majority of our members. We will miss Janice, and hope that she will return to our island in the not too distant future.

### Meetings

At our last meeting held on Sunday 15 November 2009, Mary Farr gave a talk on: *Self Care for Everyone*, an important topic to wind down for the end of year activities. After Mary's talk, members gathered for some Christmas cheer with a 'surprise' visit from Santa Claus.

Our first meeting for 2010 will be held on Sunday 28th February at Zeps in Campbell Town. Our topic for this meeting will be given by Rosa Cavaretta. At our May meeting, Michele Bailey will present her topic on: *Horstmann Technique*.

From our branch to yours, we wish you all a very happy and fruitful 2010.

Cheers,  
Sharon Tay



## SOUTH AUSTRALIA

With the 'changing of the guard' at the A.G.M., South Australia has gained several new committee members as well as retained many 'old hands'. All of the members are very committed to promoting Reflexology in the wider community as well as to encouraging and supporting practitioners to 'find their feet' in this therapy.

This may only be a small committee representing a comparatively small branch membership—but they bring energy and enthusiasm and many special skills to the table every time they meet. The committee particularly wants to focus on establishing good communication between all members, as well as encourage contact between Reflexologists and other health practitioners. One

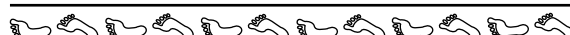
exciting example of their efforts in this area has been our informative and interesting 'Footnotes' newsletter which provides opportunities for professional interchange in a revamped, attractively presented format.

The committee has organized valuable ongoing training opportunities; in the latter part of 2009, a two day intensive workshop with Sue Ehinger examining the many ways TCM can be used to enhance Reflexology treatments

and a very useful followup TCM and meridian revision session with James Flaxman. We are also hoping that further planned training opportunities in 2010 will help to establish greater interaction between our members and podiatrists in S.A.

Some great social events have helped draw members together, with a wonderful night at the Bowling Alley (some of us would have welcomed a foot/hand treatment afterwards!) and a Last Muster after our session with James, where we enjoyed a good meal and great company as a conclusion to a busy 2009. We look forward to many more opportunities to involve our members and help them develop their skills in 2010.

Helen Biggins





There is a hive of activity up this way with the National Conference planning well under way. The conference team are having a wonderful opportunity using their new found skills for the promotion of this event. We have two members who drive from Toowoomba and Warwick to attend fortnightly meetings—this is great team work!

Shared Accommodation for the Conference: I have volunteered to be the contact for practitioners to share the expense of accommodation so I invite you to email me, Libby Stark [starkrags@bigpond.com](mailto:starkrags@bigpond.com),

together with your phone details to be passed on for you then to make contact with each other. This has worked successfully for previous conferences.

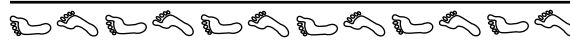
Our monthly meetings are well attended for the educational CPT opportunities, i.e., working with Personality Types, Introduction to Neuro Skeletal Therapy and the Pregnant Client. We also have some great CPT workshops organised for March, April and our ABM in May. Members have volunteered to work at the Health Harmony and Soul

Expos both in Brisbane and the Gold Coast. These Expos are always a good promotion for Reflexology to the wider community.

A Reflexology article will appear in the 'RACQ—The Road Ahead magazine' in their Feb/March edition—all good publicity for the RAOA and practitioners. The RAOA National Research Survey is well under way in QLD. Thanks to those practitioners taking part.

Till we meet again! As always ... stepping ahead with Reflexology!

*Libby Stark*



Firstly, congratulations to our Anne Young who has taken on the big job of RAOA President. Anne has been doing a great job as WA's State Director for some years now.

Locally run Study Days, Coffee Clubs and Skype are the methods that our Western Australian Reflexologists earn CPT points and network to continue their study and interest in Reflexology. Study days are also a great way to renew friendships and make new friends and, most importantly, encourage and mentor our new members.

The themes for the last three Study Days have been In House, Trauma – the aftermath and The Senses. 'In House for members only' was held in a beautiful old house in the Mundaring Hills of Perth where nine of our members talked and demonstrated about how they run their reflexology sessions and about the other natural therapies and modalities that they incorporate into their reflexology treatments. For 'Trauma – the aftermath' our keynote speaker was the Chaplain from WA's Fire and Emergency Services Authority. We included a session on Emotional Freedom Technique (EFT) and relaxation sessions on Laughter and ChiBall. We also had an open forum on the reflexology methods that we use to relax our stressed clients. The third Study Day



## WESTERN AUSTRALIA

was themed 'The Human Senses' when we started out with 'The amazing facts about the senses and awareness of the unborn baby' which was presented by one of our very multi skilled members who is also a Doula and clinical hypnotherapist. We followed up with speakers on all five senses of vision, hearing, smell, taste and touch which was a fantastic and creative walk path.

We are now gearing up for our next 'In House – members only' study day in March which will be 'hands on feet' as we have planned a full reflexology treatment for all participants and we plan to discuss and demonstrate methods of treatments from the various workshops that have been held in Perth in the past two years.

The Coffee Club sessions are held in lovely cafes in the Perth suburb of Como and now in the southern district of Mandurah as well. The relaxed atmosphere allows time to share information and experiences about reflexology treatments and problems. Subjects have recently

included necks, backs and shoulders; unexpected results; duty of care; referrals to other agencies; migraines and the lymphatic system.

The Skype discussions are held monthly and also cover interesting subjects. These discussions are great for those amongst us who don't often get to meet their fellow reflexologists face to face.

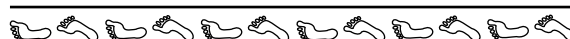
Every year our Patricia Bell organizes a group of reflexologists to travel to Fairbridge Farm to volunteer their skills to help relax and rejuvenate the mothers of children with disabilities. This is the Kalparrin Camp.

WA is a big state and our South West members are also active in their community by attending an expo for Mothers and Babies, promoting reflexology during Reflexology Week and volunteering their services with mini treatments for the tired feet of people participating in the Relay for Life held over two days in November.

Finally, our Perth members provide Reflexology each year at the EveryWoman Expo. We charge \$20 for 20 minutes and rarely have a vacant table.

A huge thanks to all of our branch Committee members who so cheerfully volunteer their time and services to make all of our events happen.

*Julia Boag*



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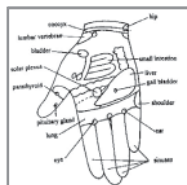
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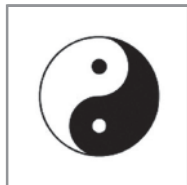
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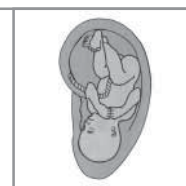
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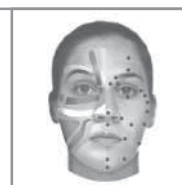
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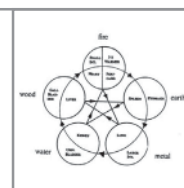
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The Reflexology Association of Australia has been in existence since 1989, when it was first incorporated in Victoria and subsequently in all other states. As a national body, the Reflexology Association of Australia Limited was registered in July 2002 to further the aims and objectives of the Association, namely:

- ◆ To develop and promote an awareness and understanding of reflexology within the Australian community
- ◆ To represent the interests of the reflexology profession within the public and political arena
- ◆ To establish and maintain uniformity and high standards of training within Australia
- ◆ To maintain a high level of professional practice
- ◆ To serve and protect the needs of all members within the national structure
- ◆ To act as a central information and resource body for all members
- ◆ To act as an advisory body within the jurisdiction of the national body
- ◆ To promote co-operation with international reflexology bodies
- ◆ To establish and maintain relevant national databases of practitioners
- ◆ To provide ongoing professional development for members and a supportive network for reflexologists
- ◆ To promote research and development which support reflexology

The national magazine “FootPrints” is published quarterly. It keeps members informed about developments in the field of reflexology both nationally and internationally, and provides a platform for their news and views.

**The Reflexology Association of Australia** is committed to the belief that reflexology can be of great benefit to the health of all Australians. It publishes a referral register on its website ([www.reflexology.org.au](http://www.reflexology.org.au)) and has a referral phone service (1300 733 711) for members of the public who wish to consult a qualified practitioner.