

Footnotes

A publication of the Nova Scotia Association of Reflexology Practitioners

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www.NSARP.org

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Hanne Marquardt Review Day



Gabriele Domes Giebel, Melany Rand, Melissa Mitchell, and Hanne Marquardt at the end of the study days in Kentville, Nova Scotia (May 2008)

By Cheryl Gaul

On April 25th, NSARP hosted a workshop with Gabi Domes Giebel who flew in from Toronto to join us. The event was successful with a good turnout of participants. Throughout the day, Gabi conducted a review of the information from Hanne Marquardt's Study Day Level 1, and introduced new techniques during the session. Everyone was able

to play the roles of therapist and client and had lots of opportunity to practice the scar tissue release technique, as well as the many stabilizing and harmonizing grips.

The workshop was especially helpful in reinforcing the basic principles of the grips and therapeutic impulse with plenty of insight and practical advice along the way. By the end of the day, participants had a

deeper understanding of methodology and new information to incorporate into their therapeutic practices.

Thank you to Melissa Mitchell, NSARP's Educational Events Chairperson, for all of her hard work and efforts that went into making the day a big success.

From the President's Desk



It's time for our spring edition of Footnotes and I do hope that everyone is enjoying the spring like weather that we have been having! Most recently in the news, our friend Gabi Domes Giebel from Toronto joined a group of Reflexology therapists in Kentville on April 25, 2009. She conducted a review day of materials covered in Hanne Marquardt's Study Day 1. Not only was I grateful to have been in attendance, but was also very impressed with Gabi's thoroughness. The day proved to be an asset to my personal practice as it provided all participants a generous amount of time to practice the techniques we learned with Hanne and Gabi in May 2008.

A wonderful idea was presented over open discussions during our review day lunch break. It was suggested that our association speak with union leaders from various employment facilities throughout the province to discuss the opportunities that they

have with respect to the choice of therapeutic modalities that are being offered through their extended health care benefits package. Most employers do have control in deciding which health therapies are included in their specific benefits package. However, they may not be aware of this opportunity. To follow up on this project, we need the help of all our members. Anyone who has ideas of specific workplaces and union officials to approach, please contact NSARP's head office by phone or email. We are also looking for a volunteer to investigate and oversee this project in order to begin compiling information as soon as possible.

With respect to where things stand on the legislation project for the practice of Reflexology therapy, I would like to relay that ongoing efforts are being made to research all of the requirements that would need to be met if we are to be successful with this goal.

Once again, a note to say that your Board of Directors and member volunteers have been working on the creation of NSARP's power point presentation to serve as an educational tool for both the public and other

"Most employers do have control in deciding which health therapies are included in their specific benefits package. However, they may not be aware of this opportunity."

health care professionals. The initial stages of this presentation are well underway and we hope to have it up and running in time for the fall AGM. Not only will this presentation serve as an educational and promotional tool for Reflexology therapy, it will also be available for purchase by members for use during their own presentations.

There is so much we can accomplish as an organization by having the "people power" to do so! An association is as strong as its volunteers. Therefore, NSARP continues to express this need and request your support by having more members become involved in both Board and committee work. All collaborated volunteer efforts help all of us build a strong and successful future in Reflexology Therapy within Nova Scotia.

Melany Rand
NSARP President

Editor's Corner

Welcome to the 8th issue of Footnotes, NSARP's bi-annual publication. My name is Catherine Whittaker, and I'm the newsletter editor for NSARP. The past six months has proved itself to be full of exciting events and I am pleased to be including some of them in the newsletter. Not all articles get printed, but please consider contributing any stories that are related to Reflexology.

If you would like to start receiving the publication, or if you have any comments, ideas or submissions that you would like to see included in our publication, we welcome your input.

Sincerely,
 Catherine Whittaker
info@CozyCornerHolistic.com

Advertising and submissions:

Deadline for submissions are October 31 and April 30. Advertising rates range from \$20 - \$120 per issue. This is a great way to support NSARP and grow your business at the same time. For more details, please contact Catherine at info@CozyCornerHolistic.com or leave me a message at (902) 463-2699

Reflexology Therapy News

Upcoming Reflexology Therapy Training

Footsteps School of Reflexology Hand Certification Course	June 16, 2009	Charlottetown or TBA, Prince Edward Island, Canada
Footsteps School of Reflexology Hand Certification Course	September 9, 2009	Halifax, Nova Scotia, Canada
Footsteps School of Reflexology Professional Certification Course	September 10 - 14, 2009	Kentville or Halifax, Nova Scotia, Canada

Earn Valuable CEUs Volunteering for your Association

CEU Credits are important in keeping your professional membership up to date. Ways of obtaining credits certainly include participation in an activity as a student or instructor. But did you know that you can also earn CEUs with other activities such as writing book reviews, case

studies, articles, etc. regarding Reflexology Therapy? Furthermore, volunteer hours with your association also contribute to your CEUs, and lots of volunteer options are available, just ask and find out how your skills and background can be put to good use.

The nomination forms for the Board of Directors will be distributed to the membership by June 15th. For example, you could earn 5 CEUs by volunteering for a board position.

For full details of events, training, member directory, CEUs, visit us online at www.NSARP.org



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Carol Strong, Owner, is an experienced Natural Health Consultant with a Certificate in Nutrition. With more than 14 years experience in the industry, she knows what people need.

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Carol extends sincere thanks to her customers who have supported the business over the past eight years.



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International Perspective

RESEARCH STUDY: REFLEXOLOGY AND EPILEPSY

SUBJECT:

Nerves, Epilepsy

CITATION:

Gong, X., "Treatment of 7 Cases of Epilepsy with Electrotherapy on Foot Reflex Areas." 1998 China Reflexology Symposium Report, Beijing: China Reflexology Association, page 92.

CONCLUSION:

Foot reflexology was found to be effective for the relief of epilepsy.

COUNTRY WHERE STUDY CONDUCTED:

China

(Article reprinted with permission from ICR Newsletter, Vol. 18, No.1, March 2009)

"One patient with uncontrolled neck tremors and winking for 8 years was initially given Western and Chinese drugs that was unsuccessful. Then after 6 treatments of foot reflexology, all symptoms were gone."

SYNOPSIS OF STUDY:

7 cases with focal epilepsy were given 20 minutes of foot reflexology with electrotherapy on the reflexes of the brain and adrenal gland daily.

One patient with uncontrolled neck tremors and winking for 8 years was initially given Western and Chinese drugs that was unsuccessful. Then after 6 treatments of foot reflexology, all symptoms were gone.

A second patient with facial tremors for 6 months was given 12 sessions of reflexology and the tremors ceased. After 18 treatments, they were fully recovered. A third patient with a tremor on his left shoulder for 6 months, was given 6 treatments of reflexology and the tremor disappeared. Results: All seven cases had 100% relief.

Client Treatment Study

Maternity Reflexology

By Rebecca Cassidy Rose, RRT

Note from the author:

From time to time, I am reminded of the healing power reflexology can bring to a life. Since the RAC AGM in November, 2008, I have opened myself, and my practice, to another aspect of reflexology. When I first began reflexology, I carefully heeded all warnings concerning maternity reflexology and didn't openly look for opportunities to educate in this area. Meeting Moshe Kruchik – Biderman created a huge shift, not only in my perspective, but also in recognition of the benefits of a responsible application of maternity reflexology.

Moshe, a very friendly and professional male reflexologist from Israel, has a solid maternity practice which began with his wife's first birth. Since then, his promotion and development in this area of reflexology has taken off and is now a passion for him. Moshe, president of the Israeli Forum of Reflexology, is organizing the first international conference of Maternity Reflexology to be held October 11 to 13th, 2009 at Hotel Kibbutz Shefayim, Israel. (www.isreflexology.com) Moshe's passion is infective.

I returned in November quite excited about this yet untapped area of reflexology. As usual, once I opened myself to this potential, it seemed as though there was about to be a population boom! I began receiving inquiries from pregnant women who were eager to find out what I had to offer them. The following case study is meant to provide an example, but it is by no means the only "success".

Case Study:

A 36 year old mother of a 2 ½ year old daughter finishing her demanding 4th year nursing program. Her first pregnancy coincided with the first year of her program. Her daughter was delivered in May after she was induced at 41 ½ wks. Her blood pressure had just begun to climb and she had "lost sight of her ankles" around 32 weeks. She was able to complete her exams that year but required adding her clinical rotation on to her second year due to edema and blood pressure. She was not put on bed rest.

Her first labour was typical of a chemical inducement – hard, fast, very painful and her milk came in at the end of her fourth day. She had been pressured to supplement by her medical support due to negative weight gain in her daughter. After the second week, she was able to wean the baby off the supplement and maintain nursing although the stress of the past 2+ weeks had taken their toll on her, and her self confidence was greatly suffering. It was a difficult first 3 months, but by the time classes began in September she was in better spirits.

After discovering she was pregnant again in her fourth year, she was determined not to repeat her first experience. She contacted me and had decided that, due to the increased stress she was currently under in her 4th year, with one toddler at home, self care would be very important. So after her 12th week, we began treatments.

Treatment Plan:

Her treatment schedule began on a monthly basis, focusing on gentle sessions, very relaxing in nature. No over



About the Author:

Rebecca Cassidy Rose practices reflexology from her studio attached to her home in Yarmouth, Nova Scotia. She is also trained in CranioSacral Therapy, Auricular Medicine, acupuncture and is a Reiki Master. Rebecca will be returning to school full time this fall to pursue her massage therapy certification and will continue her business part-time until her studies are completed. She can be contacted at rebecca.rose@hotmail.com or (902)742-7483.

"Her first labour was typical of a chemical inducement – hard, fast, very painful and her milk came in at the end of her fourth day."

Client Treatment Study

Maternity Reflexology - Continued

work of reproductive reflexes was done but endocrine treatment oriented on balancing that system as well as lymphatics. At **16 weeks**, we re-located treatments from my massage table to my Lafuma, to assist in extremity drainage and back comfort. We continued at this pace until **week 30**, at which point she requested more frequent treatments, fearful of water retention and seeing an increasing need for quiet time from home and studies. With no sign of edema or other symptoms of pregnancy (nausea, heartburn, constipation, mood swings etc.), we continued this treatment schedule until **week 38**. Due to major time restraints, treatments were temporarily postponed at this time when she started working a condensed schedule to ensure completion of her practical nursing rotation, just in case the baby came early.

After finally finishing her last rotation with only one night shift causing swelling in her ankles/feet, it was **Week 41**. She had seen her Doctor on Monday, who strongly suggested inducement, since she did not go into labour on her own during her last pregnancy. Not pleased with the prospect, she called and we set up a treatment for the next morning, Tuesday am. When examined by her physician on Monday, she had not begun to dilate.

Pre-Natal Treatment:

I proceeded carefully Tuesday morning. Her blood pressure was normal, she had not been experiencing any Braxton Hicks contractions, and she had not had any "burst of energy". She was concerned by her body's lack of

apparent readiness. Treatment was a standard foot reflexology treatment, with added emphasis on gentle stimulation of the endocrine system, particularly pituitary, as well as gentle consistent work of the uterine areas. She left my office at 11:30am. By 3:00pm, her labour had begun. She was comfortable and not distressed. It proceeded in a very orderly fashion, and she laboured at home until 3:30am.

Post-Natal Observations:

I had shown her and her husband how to work her hand reflexes to help with pain management, and by 6am, they had another beautiful daughter with no pain medications, no stitches, and no unusual distress. She reported feeling very much in control and in tune with her body during the entire process. Her milk was in by noon the same day! She left the hospital the next day, and aside from some very mild jaundice, baby and mom are doing very well, which in turn means that the entire family is adjusting well to the new addition.

Additional Comments:

While this case was certainly very successful, there is no way to know how things might have gone had she not received reflexology during her pregnancy. But in her opinion, it made all the difference in the world, and that's enough for me. Many of my maternity clients share stories of their own, but have also offered to be contacts for other new moms curious about maternity reflexology.

For more information:

www.maternityreflexology.net

"She left my office at 11:30am. By 3:00pm, her labour had begun. She was comfortable and not distressed. It proceeded in a very orderly fashion, and she laboured at home until 3:30am."

Reflexology News

Ask the Pro - Reflexology and the Digestive System

Dear Happy Toes,

I have had some digestive upsets lately. After I've eaten meals and sometimes after larger snacks, I've been experiencing a stomach ache and then an immediate episode of diarrhea. I can sometimes attribute these episodes to eating too much, too quickly, and sometimes it happens after I've eaten fattier foods. What could this be? Is this something Reflexology therapy can help me with?

Thanks from M.

Dear M.,

This is certainly troublesome for you. First of all, let me say that as a Reflexology therapist, it is not within my standards of practice to offer a diagnosis. However, it would certainly appear that there exists an imbalance within your digestive system. A few sessions of Reflexology therapy can usually help to settle this down. At the same time, you will need to do your bit to help out by monitoring for any adverse reactions to the foods that you eat and changing your diet appropriately. Over a longer period of time, usually 2 -3 months, treatment will often help you to become less sensitive to foods that bother you. It may also be wise to adjust the size of your portions and to eat your meals more slowly. This will allow time to properly digest your food.

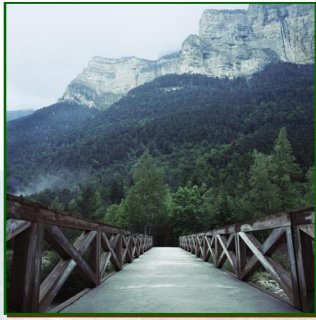
Good luck to you and I hope that you are feeling much better soon.

Happy Toes

“...as a Reflexology therapist, it is not within my standards of practice to offer a diagnosis. However, it would certainly appear that there exists an imbalance within your digestive system.”

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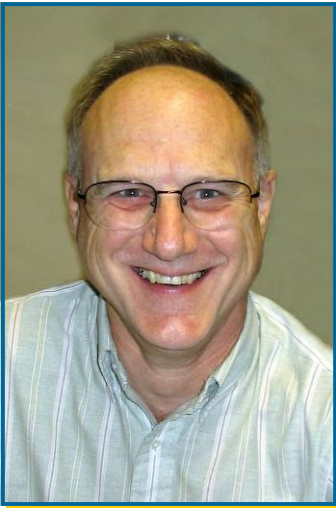
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Business Development

Occupational Health and Safety - An Employer's Friend



About the Author:

Terry Webber is a retired business man who works part-time for several local businesses.

Work place accidents happen every single day. Therefore it is important to take action to prevent accidents from happening.

Accident prevention and safety are important, no matter what field or occupation you are in. It is important for new workers to understand Nova Scotia Labour and Workforce Development's role in Health and Safety, as well as the scope and purpose of the legislative Act which covers workplace safety.

Occupational Health and Safety involves all workers in all fields or trades: it affects everyone. Each year in Nova Scotia, workplace accidents cost over 100 million dollars, injure about 9,000 workers, and indirectly affect thousands of other people.

Approximately 90% of the workforce falls under provincial jurisdiction, and health care is one of them. An organization that employs 5-19 people on a regular basis is required to have an Occupational Health and Safety Policy. An organization that employs 20 or more people on a regular basis is required to have an Occupational Health

and Safety Program. Information for setting up OH&S Programs and Policies is available from the Nova Scotia government.

Companies requiring OH&S Programs must set up a committee to develop and define policies that are specific to their industry. OH&S Policy is not a one size fits all. The guidelines set out by the provincial government require your policy to be custom made to your work place. It will require a commitment in time, resources and manpower. In the end, both the employer and the employees will know their responsibilities to themselves and to each other.

OH&S Courses are available through the Nova Scotia Community College and may be taken on line.

As an employer, it is in your best interest to encourage and promote safety, training and participation in OH&S Policies or Programs. The investment in work place safety is an investment in the well being of yourself, your company and your valued employees.

I'm Terry Webber for In the Black

"The guidelines set out by the provincial government require your policy to be custom made to your work place. It will require a commitment in time, resources and manpower."

"The investment in work place safety is an investment in the well being of yourself, your company and your valued employees."

Business Development

Client Confidentiality

"Should another practitioner be discussing a client when they shouldn't be, I would go so far as to suggest to them that this was something I shouldn't be listening to so as not to violate his/her client's trust."

When a new client crosses the threshold of your office for the first time, they have already placed a degree of trust and confidence in you and your abilities, one would hope, based on your reputation as a practitioner in the community, but maybe not. Maybe they just took a stroll through the yellow pages to find you. Whatever the case may be, the onus is on you to treat that trust and confidence placed in you with the utmost respect. Do not disappoint them and always be aware of the power of "word of mouth".

As a hands on practitioner, you will be privy to all sorts of chit chat over and above the problems that bring people into your office to see you in the first place.

It is imperative that under no circumstances do you betray the confidence placed in you by committing a breach of confidentiality. It is unacceptable to speak about a client or information that you have learned within the confines of your practice. The fact that you are treating this person at all is privileged information. While a client may choose to divulge such information, you may not. The only exception to this rule would be if required by law to do so or if contained within a report upon request by or referral to another health care practitioner. Insurance companies may on occasion also request a report about a mutual client. These reports may be sent upon receiving permission from the client and after having obtained their signature on a Consent to Release Information form. This form serves as protection for you against any accusation of wrongfully releasing confidential information. You should have these forms ready in your office for

when the need occurs.

Should another practitioner be discussing a client when they shouldn't be, I would go so far as to suggest to them that this was something I shouldn't be listening to so as not to violate his/her client's trust. Said practitioner should get the point. Occasionally, a person will ask if someone in particular is coming for treatment and fish for details. Once again, you will need to be polite but firm. It comes in handy to have a rehearsed answer ready and waiting to avoid any awkwardness in such a situation.

In closing, I'll share this tidbit that I have learned over the years. Whenever a client shared some upcoming event in their life with me, I always noted it on their chart so that I could reference it at their next appointment. They were always very impressed with my memory and I never did share the fact that I used cue cards!



About the Author

Sylvia Lent has been a chiropodist in Kentville, NS for the past 25 years. In addition to rotating through clinics and nursing homes on a regular basis throughout the province, she has been in much demand in private practice.

Upcoming Events

Upcoming Events

NSARP AGM	September 26, 2009	Kentville, Nova Scotia, Canada
Hanne Marquardt: Study Days Level 1	September 25 - 26, 2009	Kentville, Nova Scotia, Canada
Hanne Marquardt: Study Days Level 2	September 26 - 27, 2009	Kentville, Nova Scotia, Canada
ICR Conference	September 11 - 13, 2009	Los Angeles, California, USA
World Reflexology Week	September 20 - 26, 2009	
RAC AGM & Workshop	November 6 - 8, 2009	London, Ontario, Canada
RAC National Conference & AGM	November 4 - 7, 2010	Winnipeg, Manitoba, Canada

Letter to the Editor

Dear Editor,

As the media keeps emphasizing a weak economy, many clients are becoming scared financially and choosing to remove preventative health care expenses not covered by their health insurance plan, such as reflexology therapy, as long as they are not experiencing any major pain or discomfort. As a RRT in practice for 4 years, the clients I am

seeing are suffering from increased workloads in their jobs due to cut backs, and financial stress and worry at home. Over the last 4 months, these same individuals have reported symptoms such as racing heart, panic attacks, unusual headaches, digestive upsets, and extreme neck and spine discomfort. Reflexology treatments have been helpful in all cases after

just a few sessions. In these times of stress, the general population needs options such as reflexology therapy, and it is difficult to see many pre-existing clients choosing not to seek help due to coverage. We have to get the message out that NOT treating clients before it is too late is less cost effective than preventative maintenance.
NSARP Member



Let us know what you think! Please send any ideas, comments or thoughts to the editor at info@CozyCornerHolistic.com by September 30, 2009

Disclaimers

The views and opinions expressed in this newsletter are not necessarily those of NSARP or its Board of Directors.

Reflexology therapy is an adjunct to medical care but does not constitute the practice of medicine. Any information offered is not intended to replace the advice of your physician.

Footnotes is a publication of the

Nova Scotia Association of Reflexology Practitioners

PO Box 224, Centreville, Nova Scotia, B0P 1J0, Canada

Tel: (902) 679-4510, NSARP@ns.sympatico.ca



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