

California Currents

NEWSLETTER FOR THE CALIFORNIA CHAPTER OF THE AMERICAN MASSAGE THERAPY ASSOCIATION SPRING 2020

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President's Message

It is time. There are many things we need to accomplish and that begins today.

First, let us welcome Karl Reid-Cramer as the new California Board Secretary and Breanna Christenson as our new California Delegate.

Secondly, congratulations are due to Jen Hartley, our recipient of the **Community Service Award** and Favi Camacho for receiving the **Myk Hungerford Sports Massage Award**. (see page 4 for more details)



We truly appreciate everyone that was present for the business meeting that was held on May 4th and we are looking forward to the time when we can all meet in person again.

AMTA is continuing to advocate for massage therapists at the state and national levels. These efforts are far from easy and we need your help. It would be valuable for the public officials to hear your questions, concerns, struggles, and in some cases desperation.

It is disconcerting for any group of professionals to believe someone is advocating for their needs when there seem to be so few tangible results. We tend to feel helpless and powerless, but we are not. We have power, not just as an association, but as an active participant in the democratic process. Reach out to your local Assembly person and tell them how you are directly affected at this time. The more they hear from us, the greater results we all will have.

We were caught off guard by this pandemic; we can plan appropriately to be fully prepared to open our practices and places of employment if we start planning now.

Check the guidelines provided by the CDC, State Government, city, and your local Chamber of Commerce. (see Resources on page 7)

We need to be good citizens and ensure the safety of ourselves and our clients. This may mean new steps have to be implemented in our practices when considering sanitizing practices and procedures, social distancing, and booking. We are formulating suggestions to help you be ready when we are allowed to practice again.

The California Board had plans to provide additional continuing education this year. Because our ability to congregate has been limited, I strongly recommend utilizing the AMTA Website to find free and low-cost options to broaden and refresh your knowledge, sharpen your skills, and potentially learn something new. (quick link for classes on page 2)

(President's message concludes on page 2)

(President's Message concludes from page 1)

Our clients are experiencing side-effects from working at home, are you prepared to help them manage these issues? There are free classes to learn how to protect yourself from malpractice, massage practice branding, dealing with ethical gray areas in massage, growing a thriving practice, addressing the opioid epidemic, anxiety disorders, arthritis, and low back pain.

We are therapists, just like you. We are experiencing the same struggles and difficulties. Because our industry is relatively isolated in practice, be sure to reach out for support. You are not alone; we feel your pain and struggle; we understand the frustration and anxiety. The longer we focus on the challenges, the more daunting and overwhelming the negativity becomes.

Let us be active in the resurgence of our industry. Communicate with your clients, leadership, and government. Get the gears moving. We are responsible for our practices; we need to take action and not wait for someone to do it for us. Let us all dig in and move our profession forward.

Phíl Okazakí

FREE Online Massage CE Courses

As the largest nonprofit massage therapy association, the American Massage Therapy Association (AMTA) is the most respected name in the massage therapy profession. Further your career with these FREE massage CE credits.

AMTA offers free courses in:

Self-Care
Business & Marketing
Ethics
Master the Classroom
Research

Please note that these courses are offered to ALL, members and non-members alike.





National Convention

To keep our massage therapy community as safe as possible, AMTA has decided to cancel our 2020 National Convention.

We'll Miss Seeing Everyone in Phoenix

We feel this is the best course of action considering input from health experts on the ongoing COVID-19 outbreak, the unknown duration for social distancing for groups our size and hardships our community is facing at this time.

If you already registered for Convention and/or reserved your hotel through the AMTA hotel block:

- All attendee registration fees are automatically being refunded to your original form of payment. Look for that refund to be applied to your credit card statement. (Refunds should have been processed by the time of this publishing.)
- If you booked hotel accommodations in the AMTA hotel block at the Sheraton Phoenix, your reservation is automatically being canceled and any deposits will be refunded to your original form of payment. (Please confirm cancellations for yourself and peace of mind!)

Save the Date AMTA 2021 National Convention

We look forward to bringing everyone together again for the AMTA 2021 National Convention in Tampa, Florida **August 26-28, 2021** to celebrate the massage therapy profession.

2020 AMTA California Chapter Community Service Award

It is my great honor to share a little background of our California Chapter **Community Service Award** recipient. She has worked tirelessly since graduating from massage school to help those living with burn scars, their families and care givers While educating Massage therapists in Burn Scar Massage therapy. She her self is a burn survivor having been burned by scalding water to 56% of her body when she was 15 months old. She brings a shared experience to her work and instruction.

She has trained over 1500 Massage Therapists throughout the US, Canada, South Africa and Nicaragua. These graduates make up the Handle with Care Massage Team. Since 2015 our recipient and the Handle with Care Massage Team have organized and ran the team serving in the Wellness Center at the annual World Burn Congress, the largest Burn survivor support conference in the World. Having grown from 30 attendees in its first year to now topping over 1500 participants.



Handle with Care Massage Team members have gone on to work for burn units, burn foundations, adult burn retreats, young adult retreats and Children's burn camps.

Having worked 2 of the World Burn Congress' I can attest what this work does for the Survivors, and the profound effect it has on the massage Therapists that have the honor of doing this work.

It is my pleasure to present the **California Chapter's 2020 Community Service Award** to **Jen Hartley** for her contributions and community service. The world's a brighter place from her work.

Submitted by Bonni Kelley

2020 AMTA California Chapter Myk Hungerford Sports Massage Award

This year, the American Massage Therapy Association, California Chapter's **Myk Hungerford Sports Massage Award** goes to an individual who has made a difference within the community near and far. This person has also given greatly to the Best Buddies Challenge – Hearst Castle. This annual ride, from 15-100 mile, begins at Carmel, to finish this coastal scenic ride in San Simeon. The ride, which raises funds and awareness dedicated to ending the social, physical and economic isolation of the 200 million people with intellectual and developmental disabilities.

This person also gives their service to the Aids LifeCycle Challenge where each year, more than 2,800 people from across the nation and world come together. Over the course of a week, they make an epic 545 mile journey down the coast of California, from San Francisco to Los Angeles. In AIDS/LifeCycle 2018, 2,300 Cyclists and more than 650 volunteers raised a record \$16.6 million for critical HIV/AIDS services provided by



San Francisco AIDS Foundation and the Los Angeles LGBT Center. Not only has this person provided massages for those athletes, this person had planned to participate this year in the ride, until it was cancelled.

Beyond those sports focus events, this person has also provided massage services within the Handle with Care group and Phoenix World Burn Society, lending services to burn survivors and their support team.

This year, the California Chapter of the American Massage Therapy Association acknowledges and honors, **Dinga Faviola "Favi" Camacho**, with the **Myk Hungerford Sports Massage Award**.

Thank you for your service! for our profession and our community!

Submitted by Michael Roberson

Better Business

Safely Moving Forward Together (dated April 23, 2020)

From your National Office

Dear AMTA Family,

We realize the last several weeks have been incredibly challenging and that you have been coping with changes to your employment, education, and everyday life. It's during tough times like these that our AMTA community matters more than ever. We have been working tirelessly to advocate for your needs during this crisis. And, as states begin the phasing process to reopen, we will be with you every step of the way.

We understand that many of you have questions about when and how you can begin practicing again. We want to assure you that AMTA's Government Relations team is actively engaging with federal and state agencies for the most <u>up-to-date decisions and orders</u> that affect you and your massage therapy practice. And, we have been actively engaging with state agencies on what their reopen processes will look like, understanding they will be different region-to-region and state-to-state.

10 Important Considerations for Reopening

Knowing that every state will restart in its own way and will likely provide varying specifics for how and when you can begin to practice, here are 10 important considerations as you plan for when your state will allow you to begin seeing clients again.

- 1. Gain a full understanding of any new laws and ordinances at the local, state, and national levels and adjust your practices accordingly.
- 2. Institute thorough cleaning, disinfecting, and sanitizing protocols in your massage room as well as any communal areas and of any objects clients touch.
- 3. Consider the laundry policy for your clothes, linens, towels, and other washable objects.
- 4. Think about your own use of Personal Protection Equipment (including masks, gloves, and clothing).
- 5. Practice proper handwashing and hygiene protocols.
- 6. Consider your booking practices and make any changes to allow for sanitization procedures and recognizing social distancing recommendations that may limit the number of people in one space. Evaluate your cancellation policy and protocols if a client shows signs of illness.
- 7. Implement an enhanced intake process and demonstrate your commitment to the health of your clients and yourself.
- 8. Minimize contact during check-ins and check out (make use of virtual tools).
- 9. If you work with other massage therapists or service providers, consider any necessary updates to your HR and staffing policies. If you are an employee, carefully review any guidelines you will need to follow.

(Safely Moving Forward concludes on page 6)

(Safely Moving Forward concludes from page 5)

10. Post signage in waiting rooms and common areas to emphasize social distancing, handwashing, and any protective equipment you expect your clients to use.

We encourage every massage therapist to use their best professional judgment about their ability to accept and care for clients in a way that follows their <u>state</u>, <u>CDC</u> and <u>OSHA</u> guidelines. And, we are working to get more concrete answers from healthcare experts, governments and massage therapy licensing boards and will be providing you with resources for protecting both yourself and your clients.

Your Liability Coverage

We also know many of you have questions about your liability insurance coverage when you begin to see clients again. As long as you are practicing legally and in accordance with federal, state and facility guidelines, your AM-TA liability insurance will cover you as it always does.

Lastly, we continue to encourage you to check our <u>COVID-19 webpage</u> for the latest updates and guidance. We believe in our massage therapy community and our collective resilience, and we will navigate how to safely move forward together.

Your AMTA Team

We would love to hear what you are planning to do once you are able to open.

What safety procedures and practices are you putting into place?

Are you planning to incorporate any of the above (article, Safely Moving Forward) 10 considerations into your practice?

Will you be adding new equipment or supplies to your practice?

Will you have new or updated intake forms?

What will you do new to sanitize your room?

How will you make sure you are doing your best to keep you and your clients healthy and safe?

Let us know. We may include some of your plans with our members in the next issue of the California Currents or on our Facebook page.

Send your plans to editor@amta-ca.org

When we work together, we can make a difference for everyone!



State of California Resources

Small Business Owner's Guide to the CARES Act (https://www.sbc.senate.gov/public/cache/files/2/9/29fc1ae7-879a-4de0-97d5-ab0a0cb558c8/1BC9E5AB74965E686FC6EBC019EC358F.the-small-business-owner-s-guide-to-the-cares-act-final-.pdf)

SBA Disaster Assistance in Response to the Coronavirus (https://www.sba.gov/funding-programs/disaster-assistance/coronavirus-covid-19)

SBA Disaster Assistance Disaster Assistance Available (https://www.sba.gov/funding-programs/disaster-%0Aassistance?
utm_medium=email&utm_source=govdelivery)

CA EDD Work Sharing Program (https://www.edd.ca.gov/unemployment/Work Sharing Program.htm)

CA EDD Covid-19 (https://www.edd.ca.gov/about_edd/coronavirus-2019.htm)

CA EDD Pandemic Unemployment Assistance (https://www.edd.ca.gov/about_edd/coronavirus-2019/pandemic-unemployment-assistance.htm)

CA Department of Industrial Relations Covid-19 (https://www.dir.ca.gov/dlse/2019-Novel-Coronavirus.htm)

Governor Newsom Executive Order Providing Relief to California Small Business (https://www.gov.ca.gov/2020/03/30/governor-newsom-signs-executive-order-providing-relief-to-california-small-businesses/)

US Dept of Labor Paid Sick Leave & Expanded Family and Medical Leave Under the Families First Coronavirus Response Act (https://www.dol.gov/newsroom/releases/whd/whd20200324)

You may also need to look at other social services to help in the short term for you and your family: WIC (www.dss.cahwnet.gov)

MediCal (https://www.dhcs.ca.gov)

CalFresh (https://www.cdss.ca.gov/food-nutrition/calfresh)

CalWORKs (https://www.cdss.ca.gov/calworks)

CoveredCalfornia (https://hbex.coveredca.com)

Terminology

Understanding Passive Range of Motion

By Whitney Lowe

Despite the increased use of high-tech diagnostic procedures, assessing the function of soft tissues involved in locomotion is still best done through physical examination. We derive some of the most valuable assessment information from relatively straightforward procedures like active and passive range of motion tests. While you may have learned the basics of performing active and passive range of motion tests, you might not have fully explored how to use this information effectively in a clinical environment. This article focuses on passive range of motion (PROM) evaluations and the valuable information you can derive from these procedures.

PROM evaluations help identify various kinds of problems in the soft tissues. It is best to perform PROM after evaluating active movements. This order is primarily for the efficiency of the evaluation. If there is no pain with active movement in the motion you are testing, it is unlikely that there would be pain with passive motion. Therefore, performing specific passive movements may not be necessary. Also, when you evaluate active movements first you can see the client's self-imposed limitation on movement.

To perform a passive movement evaluation, have the client relax as much as possible preceding the movement. You want to have the greatest degree of muscular relaxation before beginning the movement. That will improve the accuracy of the evaluation as less muscular effort is involved.

One of the most important factors to investigate with passive range of motion testing is the end-feel. The end feel is the quality of movement that is perceived by the practitioner at the very end of the available range of motion. The end-feel can tell a great deal about the nature of various pathologies. There are often different categories of end feel. These are six different commonly used end feel descriptions.

Bone to bone- this is the sensation where motion is stopped by two bones contacting each other. An example is the end-feel for extension of the elbow.

Muscle spasm- when muscles are in spasm, they may abruptly halt motion before what should be the normal range of motion. The client may feel pain near the end range of movement due to stretching of the spasming muscle.

Capsular or Tissue Stretch- this end-feel describes motion limited at the end range by the joint capsule or other soft tissue becoming taut. This end feel is frequently described as a "leathery." A capsular end feel is evident at the end range of external rotation of the shoulder in a normal shoulder. This end feel is also called the tissue stretch end feel to extend it to other tissues, such as (Lowe continues on page 9)

(Lowe continued from page 8)

muscles, that stretch at the end range of motion. An example of the tissue stretch with muscles would be hip flexion with the knee held in extension where the hamstrings limit the movement.

Springy block- this end feel is the sensation of motion stopping short of where it should be, accompanied by a rubbery or springy feeling at the end. It occurs most often in joints where a piece of loose cartilage (like the meniscus in the knee) may be blocking full motion.

Tissue approximation- this is the end-feel where motion stops by two masses of soft tissue pressing on each other. An example is in flexion of the elbow.

Empty- this end-feel is one where there is not a mechanical limitation to the end of the range, but the client will not let you go any farther because the pain is too much.

Passive motion evaluations are essential to help identity which tissues might be the primary source of pain for the client. The locomotor soft tissues of the body can be divided into two categories: contractile and inert. Contractile tissues are those that transmit force in the contraction process (muscle and tendon). Inert tissues are all the others that may get moved during the process of joint motion but do not actively produce contraction forces. Passive motion testing focuses mostly on inert tissues since there is no muscular action. However, if a muscle is hypertonic, it may be painful when stretched in the direction opposite that of its action. For example, lateral rotators of the shoulder that are hypertonic may be the source of pain at the end of a passive medial rotation movement because they are stretching.

Passive motion evaluation is described in great detail in the osteopathic literature with the concept of motion barriers. Motion barriers are a means of clarifying where there is a pathological limitation to movement. Figure 1 shows a schematic representation of motion barriers.

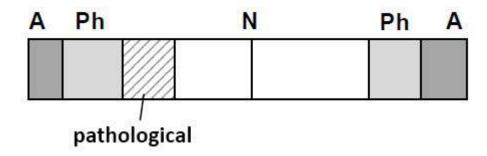


Figure 1: Motion barriers

In Figure 1 N represents the normal mid-range of movement for a particular joint segment. There is an equally available range of motion on each side of that point. Ph represents the physiological barrier to motion. The physiological barrier is the point where resistance to motion is first felt. The physiological barrier is generally the end range of movement available with active movement. Note that there is an elastic nature to the physiological barrier because you will feel resistance to motion (Lowe concludes on page 10)

(Lowe concludes from page 9)

begin, but you can still achieve more motion in that direction to a certain degree.

The anatomical barrier is represented in this diagram by A. It is the end of available motion that you can't pass without causing tissue damage. For example, in performing a lateral rotation of the shoulder, the client can get to a specific end range of motion that will usually indicate the physiological barrier. However, during passive stretching, the clinician can increase the degree of motion in the shoulder a little more to the anatomical barrier.

The barrier concepts are most valuable for looking at various soft tissue pathologies that limit motion. For example, in Figure 1, a pathological barrier is represented. For some reason, the person can't move beyond this point. Therefore when performing a passive range of motion evaluation, the clinician will encounter the pathological barrier before either the physiological or anatomical barrier. Depending on the cause of the pathological barrier, soft tissue treatment aims at moving the pathological barrier in the direction of the physiological and anatomical barriers until the client has full and normal motion restored.

Concepts used in passive range of motion evaluation such as end-feel and motion barriers are beneficial for evaluating the nature of various problems. Knowing which tissues are most likely the cause of various issues aids us in choosing the most appropriate treatment methods.

Whitney Lowe, directs the Academy of Clinical Massage, offering certification and advanced training to therapists worldwide. His career spans two decades and includes extensive clinical work, research, publication and teaching in advanced and orthopedic massage. He is the author of Orthopedic Assessment in Massage Therapy. His Academy of Clinical Massage can be found at: https://www.academyofclinicalmassage.com/ Where workshops, blogs (like this one), books and other resources are available for your use. *This article was published on his September 2019 blog.





Community Outreach Events

Date TBA Stand Down San Diego, San Diego High School Upper Athletic Field

For Veterans who have lost everything and are living on the streets of San Diego, this event provides and opportunity to meet with representatives from Veterans Affairs and with representatives from many community services. Massage therapists will join other allied health professionals, providing massages to participating Veterans. Note that all participants are freshly showered before services. This is a 3-day event. You can volunteer for 1 –3 days.

Kevin Whitfield is the contact person resettherapyfitness@gmail.com 858.668.9710

Date TBA Camp Pendleton Family Day Massage Event, Del Mar Beach, Camp Pendleton, San Diego

This is the 13th annual event with some 3,000+ Marines and their families from 3rd Track. Arrive on base by 10 am and you will be off base by 5pm. Bring your tables and supplies. You will be working on the beach, on top of platforms, with a great view of the festivities and the ocean. Other community organizations will be participating with free food, fun, games, music, and more. This is a great event celebrating "FAMILY". **This event requires your contact information ahead of time for access on base. Please commit to **Michael Roberson**, the current coordinator for this event, handsonoc@aol.com, as soon as possible if you are planning to attend.** (the date has not been set; it is usually at the end of August or first of September)

Saturday, September 12 Best Buddies® Challenge, Hearst Castle, San Simeon

This is the 12th year we have participated in this event. We will be providing post massage to the athletes who complete cycling100 miles (or less). Volunteers are guaranteed 1 nights shared room accommodations, car pooling stipend, T-shirt, door prizes, free food and SWAG bag. All of this and a great location near Hearst Castle, on the coastline.

Cynthia Sykes is the coordinator, <u>cynsykes46@gmail.com</u> 781.588.0864 (She lives in MA, 3hrs ahead of CA time, DO NOT CALL AFTER 7PM)

Sunday, September 20 SuperFrog® IRONMAN®, Imperial Beach, San Diego

This IRONMAN® is one that allow members of the military to qualify for the World's Championship and has about 80% military participation. We will be providing post-event massages to those athletes and service men/women on the Boardwalk of Imperial Beach. Parking is provided to early arrivals. Arrive by 8am – Done by 5pm. Food, T-shirt, music and ocean view are there for all of us to enjoy.

Kevin Whitfield is the contact person resettherapyfitness@gmail.com 858.668.9710

TBA Oceanside IRONMAN, Oceanside

This is a popular IRONMAN event for Southern California. We will be providing post-event massages to those athletes who have completed a swim, ride and run 70.3 miles, on the Boardwalk of Oceanside Beach. Arrive by 8am – Done by 5pm. Food, T-shirt.

Kevin Whitfield is the contact person resettherapyfitness@gmail.com 858.668.9710

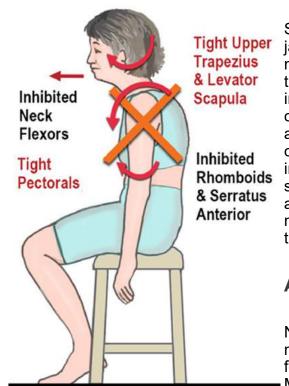
First Rib Fixation

Erik Dalton, Ph.D.



As a fan of Vladimir Janda's provocative body of work, I have highlighted his research throughout my teachings and hopefully integrated his wisdom into mainstream bodywork. I have written extensively on aberrant postural patterns associated with his infamous upper crossed syndrome, such as a protruding neck, rounded shoulders, kyphotic t-spine, jutted chin, hyperextended O-A joint, and internally rotated arms (Fig. 1). Yet one overshadowed gem of

Janda still exists- the humble pain generator deeply hidden within his upper crossed pattern — The Fixated First Rib.



Symptoms of a first rib fixation range from head, neck, jaw and shoulder pain, to breathing difficulties and arm numbness. The first rib is a relatively unstable structure that acts as the attachment site for several muscles including the scalenes. In the upper cross forward head carriage, the scalenes can often become hypertonic and exert an upward pull on the rib (Fig. 2). In chronic cases, the first rib can become so "jacked up" (fixed in inhalation) that it is painfully frozen into inaction. Thus, the stage is set for possible brachial plexus compression and accompanying thoracic outlet syndrome that leads some naïve and pained individuals to opt for surgical removal of the first rib.

Assessment and Treatment Options

Ninety percent of fixated rib assessment can be determined from the client's history. The palpation exam that follows will typically confirm the client's history findings. Make it a routine to examine lifestyles leading to episodic injuries. Give full attention to the "mundane" such as sleeping habits, work demands, computer hours, posture,

Fig. 1 and all injuries from the innocent to the life-changers. Like family genetics or nurture (Dalaton continues on page 13)

Courtesty of Craig Llebenson from Dynamic Body

(Dalton continued from page 12)

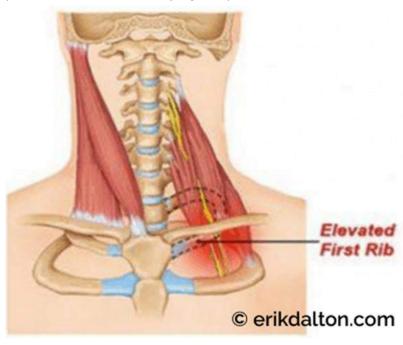


Fig. 2 from first rib fixations.

To assess, simply stand or sit behind the supine client, and with soft finger pads, grasp the anterior aspect of the upper traps and gently pull posteriorly (Fig. 3). With the upper traps retracted, allow your fingers to wade through the tissue searching for the bony feel of the superior shaft of the first rib. Ask for a deep inhalation and let your fingers resist any upward movement produced by the scalenes. If the rib does not rise during deep inhalation efforts, it could already be elevated and stuck. To test, palpate bilaterally by gently springing the rib inferiorly and observe for motion dysfunction. Check for areas of tenderness, ipsilateral scalene hypertonicity, and pain upon exhalation. Both pain and asymmetry can indicate first-rib dysfunction. During palpation, expect some swelling and tenderness in the upper trapezius area. Chronic cases

vs. nature idiopathies, the body is literally a manifestation of its imbalance, either subconsciously through subtle movement patterns, to traumatic body game changers.

Elevated first ribs commonly occur in the stomach-sleeping population or those who sleep with one arm tucked under their head. Extensive computer work with poor mouse ergonomics may hyperexcite cervicothoracic joint and ligament mechanoreceptors adding to the distressed upper crossed muscle imbalance pattern. These people typically complain of constant dull, aching pain and tightness in the upper shoulder girdle. Additionally, many whiplash-type injuries have first rib involvement. Tennis players, golfers and weight lifters seem most susceptible to neurovascular compression



can result in self- guarding due to myospasm. Assure your clients that this "jump sign" Fig. 3 is a typical response to the "touchy" fixated rib and encourage their feedback. Address any of their concerns as you work this highly sensitive area.

The scientific data currently isn't completely there yet.¹, ² Research findings are definitely lagging behind the success of the bodyworker's hands-on treatment. Regardless of scant scientific clinical trials, utilizing various manual therapy techniques, such as those shown in Mike's treatment video below will usually relieve the symptoms. First rib fixations are painfully exhausting and interfere with one's quality of life, so bodyworkers are encouraged to "mine out" this hidden pain generator and (Dalton concludes on page 14)

(Dalton concludes from page 13)

assist the client in their journey "to take a deep breath and smell the roses."

Remember to integrate the myoskeletal mantra of using "bones as levers to mobilize muscles." Release spastic soft tissues as part of a comprehensive rehab program, and boost overall body function to new levels by incorporating corrective exercises such as those demonstrated by Paul Kelly in the video. Ideally, the bodyworker is taxed with balancing upper cross muscles prior to staving off any subtle hint of rib dysfunction. As Vladimir Janda beautifully observed, "If you chase pain, you will forever be lost."

References

1. Kamkar A, Cardi-Laurent C, Whitney SL. Conservative management of superior subluxation of the first rib. J Sport Rehabil. 1992;1(4):300–316.

DeStefano L. Greenman's Principles of Manual Medicine. Philadelphia, PA: Lippincott Williams & Wilkins; 2011.

Erik Dalton serves as Executive Director of the Freedom From Pain Institute, a school committed to the research and treatment of chronic pain conditions.

Dr. Dalton shares his wide therapeutic background in massage, Rolfing®, and osteopathy in his entertaining continuing education (CE) workshops, home study courses, books, and videos.

With over thirty years educating massage therapists around the world, Erik Dalton is among the best teachers a professional bodyworker could ever study with. He has worked tirelessly to develop a system of manual therapy that addresses and heals pain patterns at their very core. Armed with a comprehensive understanding of the



intricate interplay between mind and body, structure and function, massage therapists who've studied Myoskeletal Alignment Techniques with Erik Dalton are changing the face of chronic pain the world over. For more information on Erik Dalton and his Mayoskeletal Alignment Technique, please go to:

www.erikdalton.com

Do you have a topic, modality or technique you would like to know more about?

Send an email to editor@amthen.org and

we will do our best to get your choices into an upcoming California Currents

issue. This newsletter is a resource for you.

How can we make it work to meet your needs?

Let us hear your thoughts.

We want your feedback!

The National Certification Board of Therapeutic Massage and Bodywork (NCBTMB) is proud to partner with the Massage Therapy Foundation to introduce FREE Research Webinar Series.

1. Why Research: https://tinyurl.com/ya37h4kw

2. What is Research: https://tinyurl.com/y6w2rp6r

3. How to Find Quality Resources: https://tinyurl.com/yc52nsg7







2020-2021 CALIFORNIA CURRENTS PUBLICATION INFORMATION

The American Massage Therapy Association, California Chapter newsletter, *California Currents*, is scheduled to have 4 issues a year. Currently, the California Currents has a circulation of over 8,100, reaching our members and massage schools. All issues will be sent green, via email, posted to our Chapter website (www.ca.amtamassage.org) and to our Chapter Facebook page.

Last Date for Submissions Issue

Summer August 3, 2020

Fall November 2, 2020

Winter January 18, 2021

April 19, 2021 Spring

Summer August 2, 2021 Date to be Published

August 19, 2020

November 16, 2020

February 1, 2021

May 3, 2021

August 16, 2021

As of November 2019, per National AMTA policy, the California Chapter's newsletter, California Currents, will no longer be able to accept advertising or promotions within our newsletter. Articles are always welcomed. We will have opportunities to support our Continuing Education and Community Outreach Events. If you are interested in supporting our Chapter and members in this way, please send your inquiries to <u>info@amta-ca.org</u>.

^{**}dates are subject to change. All newsletter inquiries should be directed to Michael Roberson at editor@amta-ca.org. Thank you.

AMTA-CA CHAPTER Candidate and Volunteer Resume Form

Please print or type		Yr joined
Name	AMTA I.D. #	
Home Address		-
	(h)	
Email	CAMTC # Massage license? City/County	
Years in massage	CAMTC # Massage license? City/County	
Massage school atte	ended/# of hours	
Date of completion _	Other related schooling	
	olunteering in the following areas: (details can be found on the Chapter websit PresidentSecretaryFinancial AdministratorBoard Member cion Delegate	re)
Sergeant at Arms	AwardsExhibitorsParliamentarianBudget (Member At Large)Gov Committee on CandidacyNewsletter EditorSocial MediaConferen Education Chair (Region:NCS)WebsiteNorthern Rep Souther	nces/Workshops
	but not sure where? What skills do you have? and How much time do you wa ach out to you	nt to give? Let us
	y or professional experience	
Other Qualifications		
perform the duties of your duties? YES	A BOARD OF DIRECTOR POSITION How many hours a week do you estimate work this office? Are you currently able to commit the appropriate time NO ons and objectives for seeking this office?	•
the duration of the f	understand that I must be present, focused and courteous; that I must put as function; that I will refrain from introducing distracting influences to other Boatransact the business of the Association.	
Signature	Date	

Please submit Candidate and Volunteer Resume Form to **info@amta-ca.org.** If you have any questions about the position, please ask any of the current board members. Additional information on all roles can be found on the chapter website, **www.ca.amtamassage.org**. Thank you for your submission.

Calendar of Upcoming Events

Saturday, April 4 Community Outreach Opportunity, IRONMAN® Oceanside, San Diego (*postponed until

October, Date to be Announced)

Tuesday, May 12 Chapter Board Meeting

Sunday, May 31 Last Day to submit for the Rick Boden Healer at Heart \$10,000 Student Scholarship

Friday, June 4 Community Outreach Opportunity, Family Day Camp Pendleton, Oceanside, San Diego

(*postponed until further notice)

Tuesday, June 9 Chapter Board Meeting

Tuesday, July 14 Chapter Board Meeting

Tuesday August 11 Chapter Board Meeting

August 27-29 National AMTA Convention, Phoenix, AZ has been cancelled

Tuesday, September 8 Chapter Board Meeting

TBA Community Outreach Opportunity, **Stand Down San Diego**, South County

*dates to be confirmed

TBA Last Day to submit for the AMTA \$2,500 Summer Student Scholarship

Saturday, September Community Outreach Opportunity, Camp Pendleton Beach Bash, Oceanside, San Diego

*date to be confirmed

Saturday, September 12 Community Outreach Opportunity, Best Buddies Challenge-Hearst Castle, San Simeon

Sunday, September 20 Community Outreach Opportunity, SuperFrog® IRONMAN®, Imperial Beach, San Diego

Tuesday, October 13 Chapter Board Meeting

October 18-24 National Massage Therapy Awareness Week

October TBA Community Outreach Opportunity, IRONMAN® Oceanside, San Diego

Tuesday, November 10 Chapter Board Meeting

Tuesday, December 8 Chapter Board Meeting

Note: Chapter Board Meetings are open to all members. Please contact our <u>Chapter President</u> for access to the call. Meetings are generally, the 2nd Tuesday of every month, 7.30pm-8.30pm and are subject to change.

California Currents Contacts

Appointees

Chapter Board

President Phil Okazaki president@amta-ca.org



Northern Representative northernrep@amta-ca.org

East Bay Far North Golden Gate Greater Sacramento Monterey Bay Napa Valley Redwood Empire Silicon Valley

Secretary Karl Reid-Cramer secretary@amta-ca.org



Southern Representative southernrep@amta-ca.org

Southern Regions

Northern Regions

Financial Administrator Michael Roberson treasurer@amta-ca.org



Government Relations Chair John Lambert gr@amta-ca.org

Newsletter Editor

Michael Roberson



Desert Resorts Gold Coast Inland Empire Los Angeles-South Bay Mid State Orange County San Diego

Board Member Megan Martin 1stvp@amta-ca.org



editor@amta-ca.org Appointee to CAMTC John Lambert gr@amta-ca.org

Board Member Bonni Kelley 2ndvp@amta-ca.org



Chapter Administrator **Jeff Milde** Calma Association Management, LLC

Elected Delegates 1) Stacey DeGooyer (2019-2020)

2) Breanna Christiansen (2020-2021)

Chapter Website

www.ca.amtamassage.org

California Chapter's Phone Number 916-382-8542 and EMAIL ADDRESS info@amta-ca.org

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and National: American Massage Therapy Association - AMTA

CA Chapter's Mailing Address: AMTA-CA 1721 Eastern Avenue, Suite 19 Sacramento, CA 95864

National Website www.amtamassage.org

> National's Office Phone Number 847.905.1638

National's Mailing Address: American Massage Therapy Association 500 Davis Street Evanston, Il 60201-4668