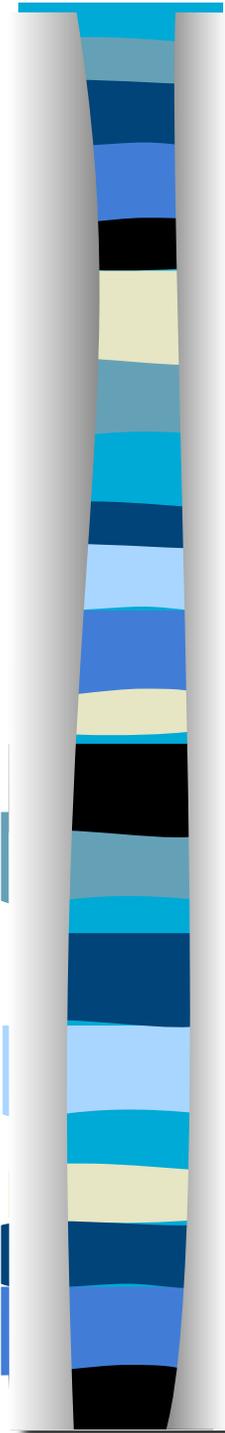
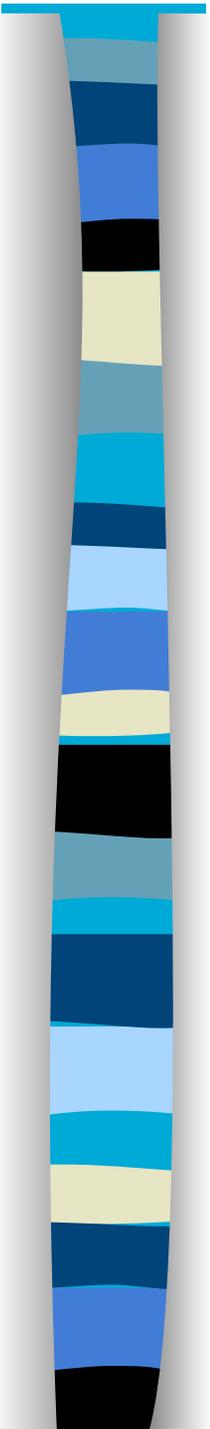


## 77a Special Populations: Introduction





# 77a Special Populations: Introduction

## Class Outline

5 minutes

Attendance, Breath of Arrival, and Reminders

10 minutes

Lecture:

25 minutes

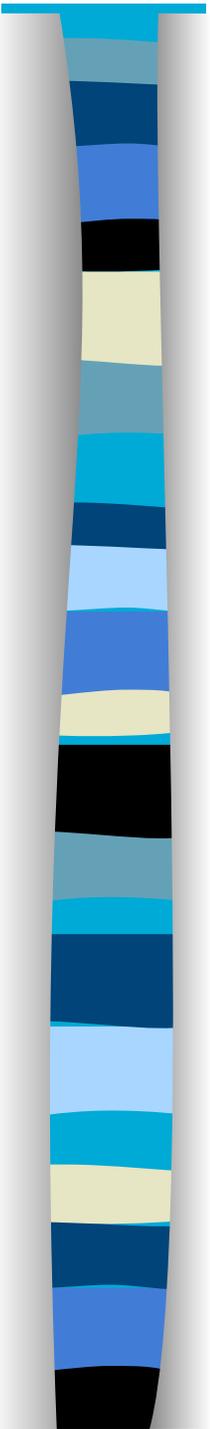
Lecture:

15 minutes

Active study skills:

60 minutes

Total



# 77a Special Populations: Introduction

## Class Outline

### Quizzes:

- 78a Kinesiology Quiz (erectors, lats, quadratus lumborum, multifidi, rotatores)
- 81a Kinesiology Quiz (supraspinatus, infraspinatus, teres minor, subscapularis, flexor digitorum superficialis, extensor digitorum, flexor pollicis longus, flexor digitorum profundus)

### Spot Checks:

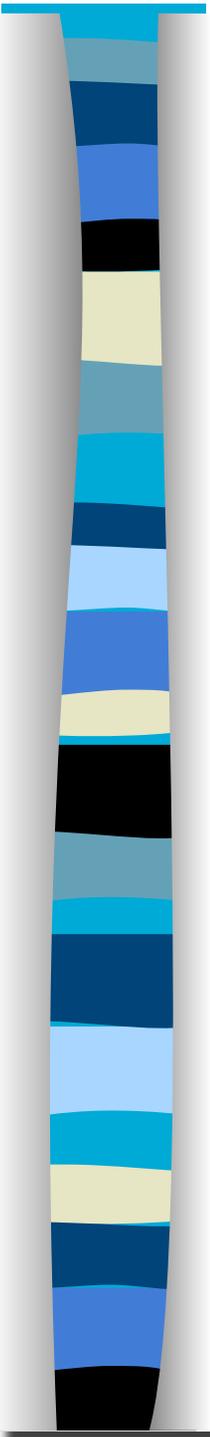
- 78b Orthopedic Massage: Spot Check – Low Back Pain
- 81b Orthopedic Massage: Spot Check – Rotator Cuff & Carpal Tunnel

### Assignments:

- 85a Orthopedic Massage: Outside Massages (2 due at the start of class)

### Preparation for upcoming classes:

- 78a Special Populations: Psychiatric Disorders
  - Werner: Pages 170-187.
  - Packet K: 15-22.
- 78b Orthopedic Massage: Spot Check - Low Back Pain
  - Packet J: 77-78.



# Classroom Rules

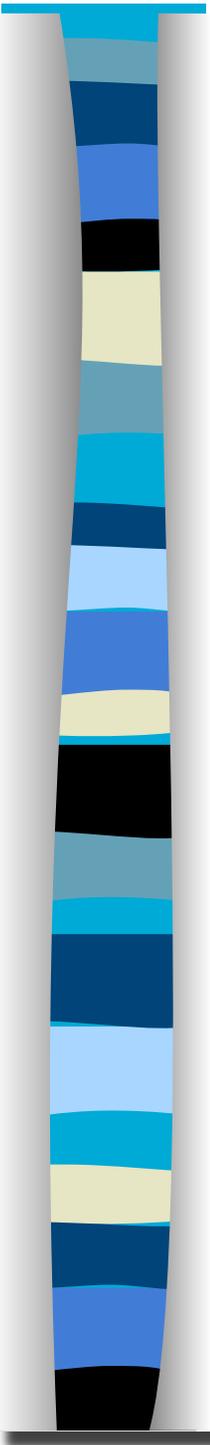
**Punctuality** - everybody's time is precious

- Be ready to learn at the start of class; we'll have you out of here on time
- Tardiness: arriving late, returning late after breaks, leaving during class, leaving early

**The following are not allowed:**

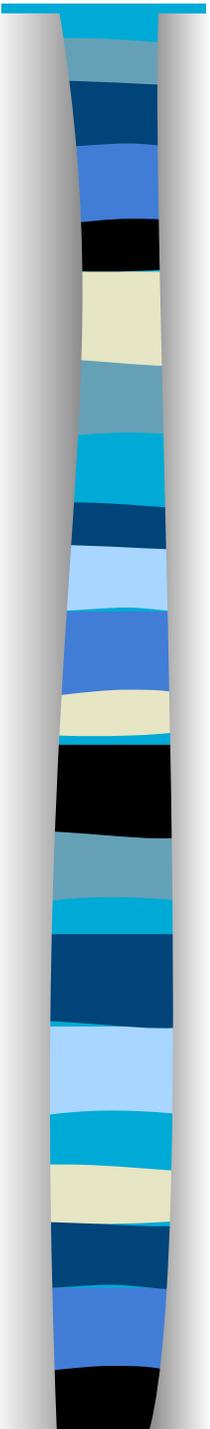
- Bare feet
- Side talking
- Lying down
- Inappropriate clothing
- Food or drink except water
- Phones that are visible in the classroom, bathrooms, or internship

*You will receive one verbal warning, then you'll have to leave the room.*



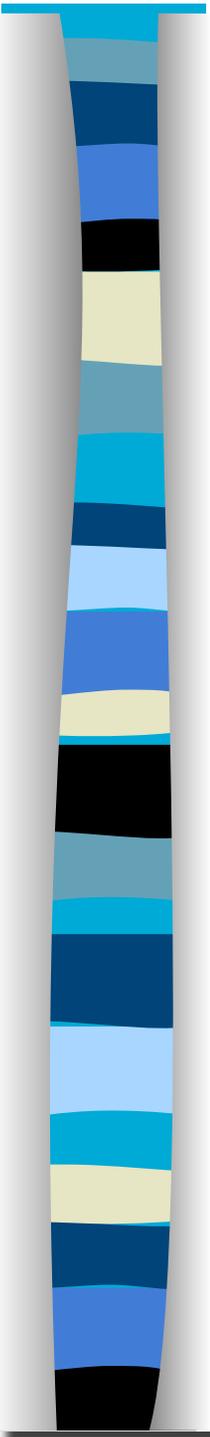
## 77a Special Populations: Introduction

K - 1



## Special Populations Classes:

- 77a Special Populations: Introduction, the usual A-class instructor
- 78a Special Populations: Psychiatric Disorders, David Lauterstein
- 83a Special Populations: HIV and AIDS, Steve Stump
- 95a Special Populations: Seniors, Mary Duvall
- 96a Special Populations: Hospice and End of Life, Roni Kendall
- 97a Special Populations: Cancer, Kazuko DeVirgilio



## Guest Speaker Names and Contact Info:

- Steve Stump
  - HIV and AIDS
  - [steve.reese9@gmail.com](mailto:steve.reese9@gmail.com)
  - 512.447.8994
  
- Mary Duvall
  - Seniors
  - [marylduval@att.net](mailto:marylduval@att.net)
  - 512.636.0759
  
- Roni Kendall
  - Hospice and End of Life
  - [roni@thecarecommunities.org](mailto:roni@thecarecommunities.org)
  - 512.459.5883
  
- Kazuko Devirgilio
  - Cancer
  - [KazukoLMT@gmail.com](mailto:KazukoLMT@gmail.com)
  - 512.507.2854

## Introduction

- Therapists will encounter unique individuals with special needs and challenges.



## Introduction

- Massage is safe during all stages of life if tailored to the client's health and particular situation and circumstance.



## Introduction

- Modifications usually involve reduced pressure over an area, positioning the client for comfort, or limiting the sessions to 20 to 30 minutes.



## Introduction

- As with all clients, approach those with special needs with attitudes of loving kindness, reverence, and acceptance.



- Fear may arise as you contemplate working with these clients, but knowledge combined with loving kindness, reverence, creativity and acceptance will overcome fear.

## General Suggestions

- Spend time in advance preparing for the session – review textbooks and websites.

**Study  
Material**



## General Suggestions

- The client is your best source of information. Each client will teach you if you remain open-minded, patient, tolerant and flexible.



## General Suggestions

- Keep facilities as barrier free as possible, removing clutter such as throw rugs and wires.



## General Suggestions

- Have tissues and drinking water handy.



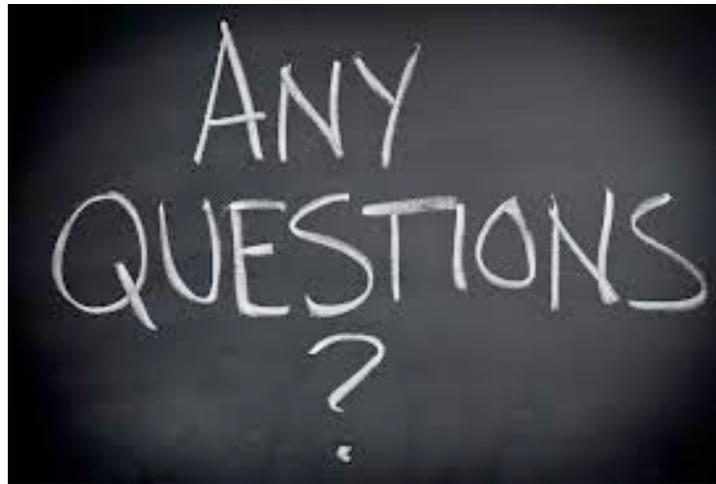
## Other Strategies

- Sit near the client at eye level.
- Sit in a well-lighted place but avoid sitting with your back to the light source.
- Speak naturally, not more slowly or loudly, and enunciate clearly.
- Use the client's name.



## Other Strategies

- Be sure the client understands, and allow time for questions.
- Rephrase anything the client does not understand, rather than repeating the same words.



## Other Strategies

- Inquire about accommodations that can be made.
- Explain clearly which parts of the client's body will be massaged.
- Be alert for signs of issues not disclosed on the health form, or changes in the client's health status.





## Infants

- Infant massage is done by the parents and care-givers, under instruction from the therapist.
- Infant massage may foster bonding, relieve discomfort from teething, congestion, gas or colic, and promote deeper and longer sleep.



## Infants

- Depending on the age and developmental stage of the baby, positioning may be lying beside, holding, placing between your knees or draping across your lap.
- If bottle-fed, the baby should not be massaged for at least 30 minutes – breast milk is predigested so this delay is not necessary in that case.



## Infants

- Most commonly used strokes are touch-holds, thumb-over-thumb gliding, thumb spreading and full-hand gliding.
- Rather than applying strokes as a routine, use them to enjoy time with the baby, modifying or creating according to its response and tolerance.

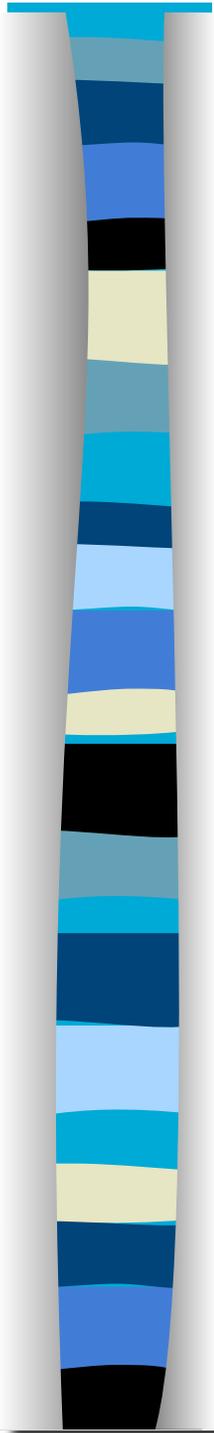


## Infants

- Other suggestions:

- Keep the baby warm.
- Use natural or low lighting.
- Sounds such as soft background music, the parents' voice singing, talking or humming, can promote the relaxation response.





## Children and Adolescents

- Defined as young people between 3 and 18 years of age.
- Because these clients may have smaller stature and shorter attention span than adults, session times may be shortened to 30-45 minutes.
- The extra time may be used to establish a rapport.



## Children and Adolescents

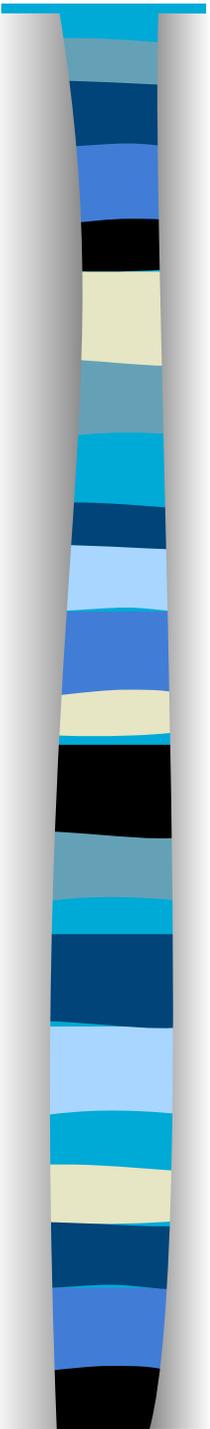


- Those under the age of 18 (in Texas the significant age is 17) must have a parent or legal guardian consent to the therapy on their behalf.
- Be sure that the parent or legal guardian is present during the treatment planning and discussion of policies and procedures.
- Parent or legal guardian must sign documents requiring a legal signature (such as intake or consent forms).

## Children and Adolescents

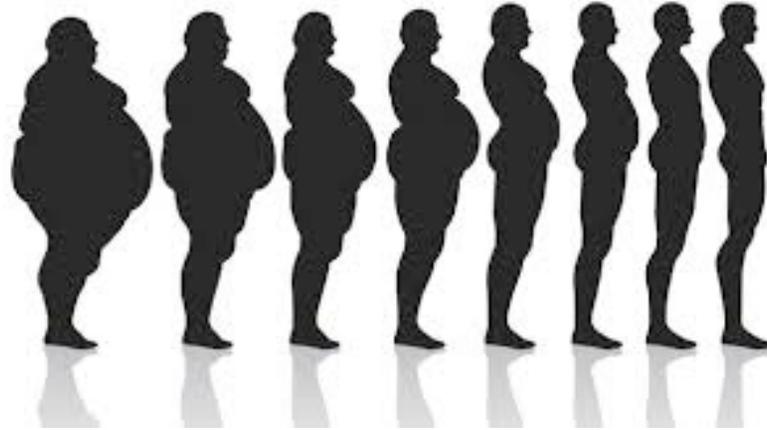
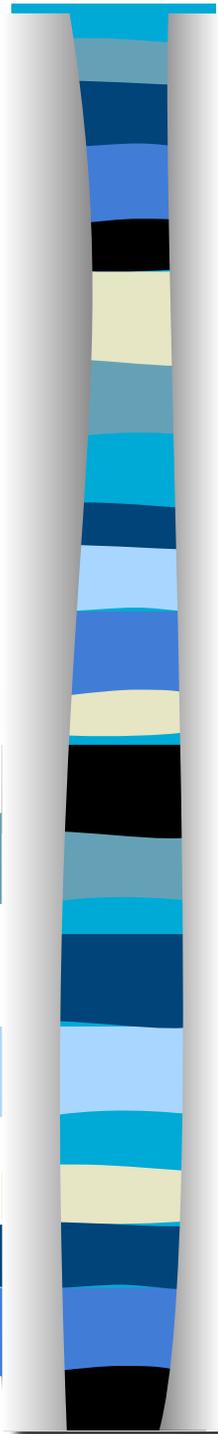
- During intake, be sure the child understands all the procedures and willingly gives consent.

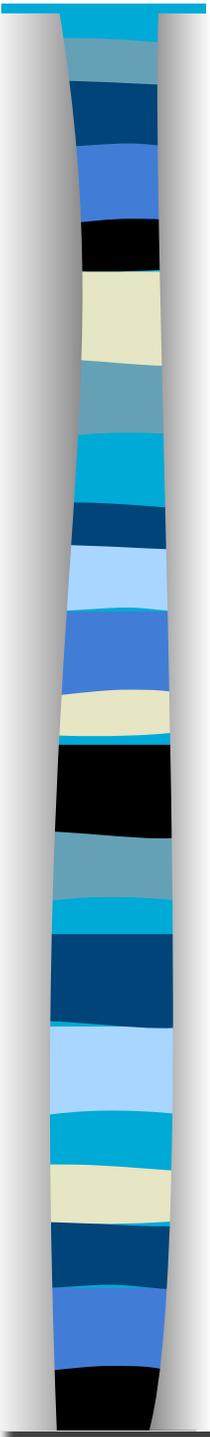




## Children and Adolescents

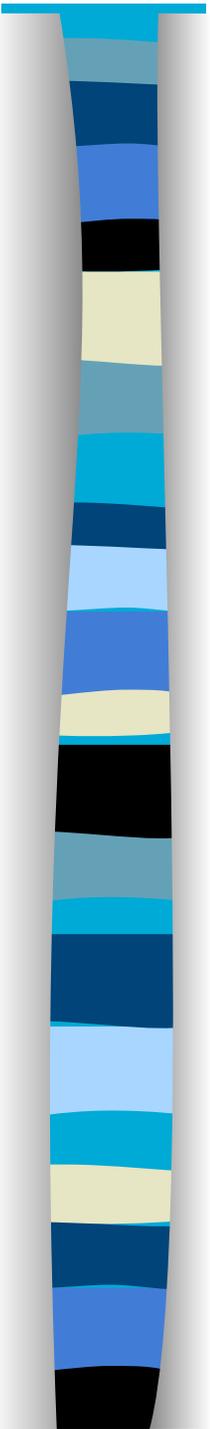
- Reflexes may be overly sensitive in adolescent boys, sometimes causing erections.
- Keep the top drape bunched in the groin area, and use a blanket over the top drape.
- If an erection occurs, ask a few questions about a mundane topic, such as school – this often reduces the “tent effect”.





## Obese Individuals

- A person is regarded as obese when his or her Body Mass Index is 30 or over (range is 22-27 for most middle-aged adults).
- Many serious health problems are associated with obesity.



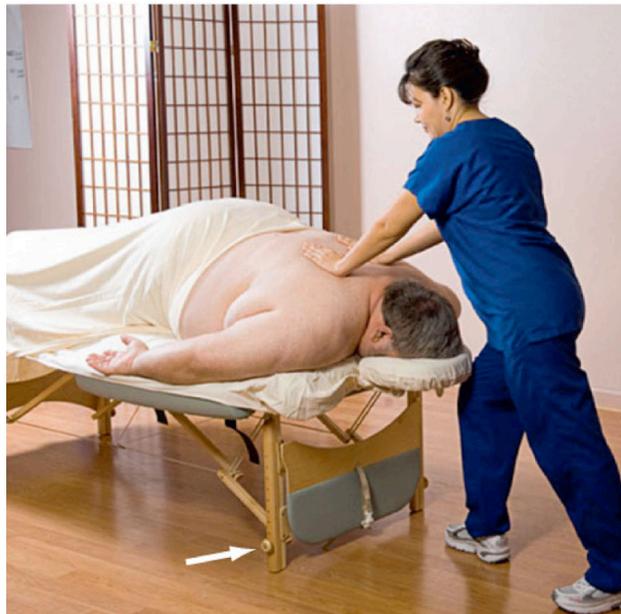
## Obese Individuals

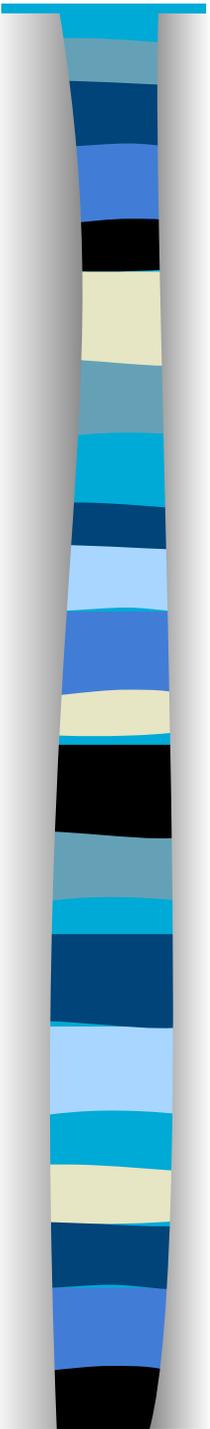
- As they may have suffered criticism and prejudice, these individuals may feel vulnerable and sensitive.
- Some may feel uncomfortable within their bodies, and may elect not to disrobe. In this case, be willing to work through clothing.

## Obese Individuals

- Other suggestions:

- Consider lowering your table or having a small platform to stand on
- Elevate their upper body when supine, and limit time spent prone



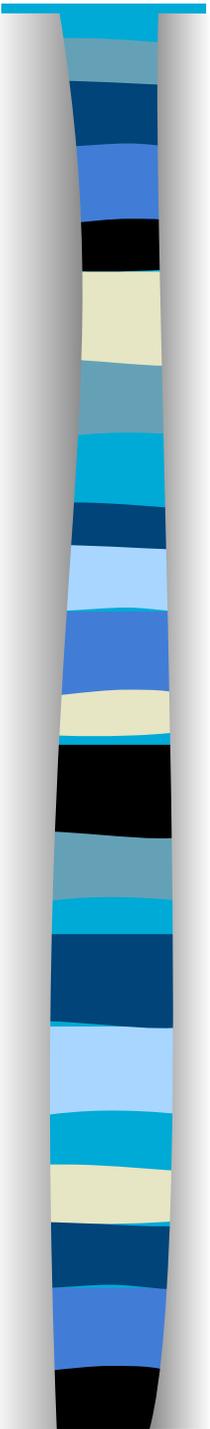


## Obese Individuals

- Other suggestions:

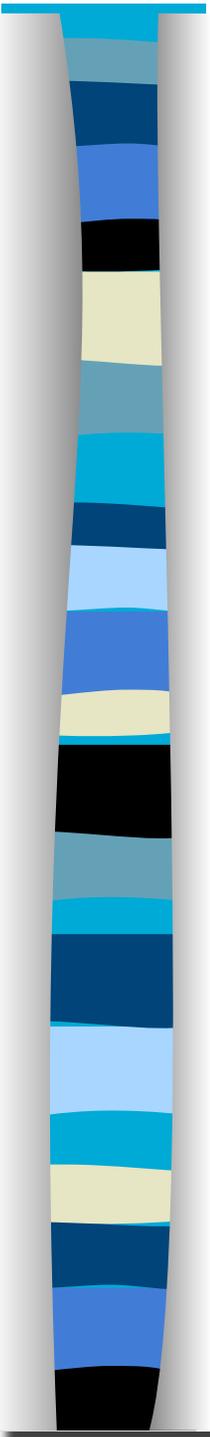
- Drape with a large flat top sheet, even if the client is clothed.
- Avoid deep pressure in areas that contain excessive fat or edema.





## Survivors of Sexual Abuse

- You will likely encounter these individuals, as sexual abuse crosses all population barriers.
- Massage can help heal the wounds of sexual abuse by making touch emotionally and physically safe.



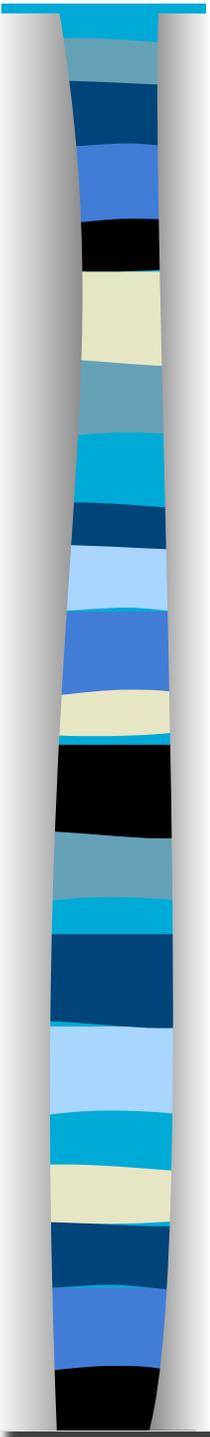
## Survivors of Sexual Abuse

- Many survivors become people of extremes, often developing compulsive habits, such as overeating or compulsive dieting and exercising.
- Extreme behaviors may include sexual inappropriateness, and it is important that the therapist possess and enforce appropriate boundaries.
- Many survivors of sexual abuse develop addictions.

## Survivors of Sexual Abuse

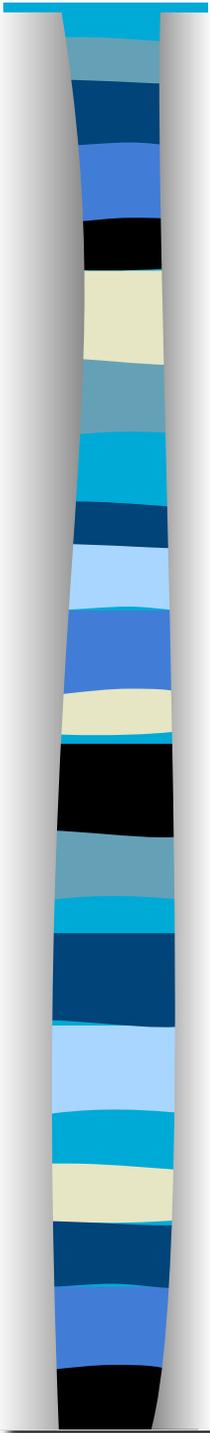


- Begin with shorter sessions to see how the client responds to touch.
- Let the client have a lot of control over the massage environment.
- Be sure he or she understands the client is in control of the session, and honor requests to alter the massage without asking for reasons why.



## Survivors of Sexual Abuse

- Emphasize that draping will be used at all times, and that level of disrobing is entirely based on client comfort.
- Heavier draping may help client feel more safe and secure.



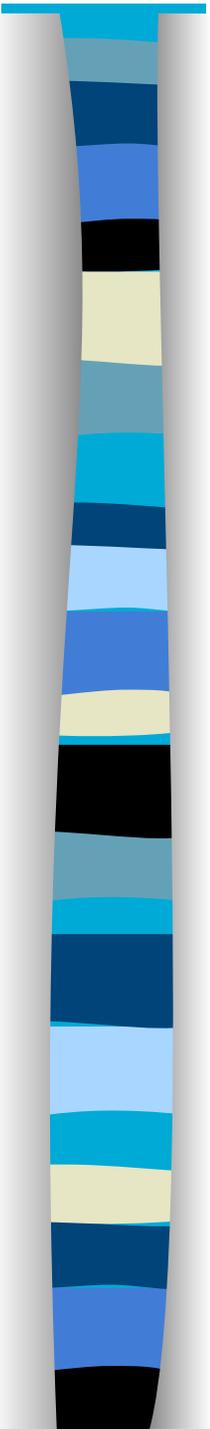
## Emotional Release

Occasionally, clients may sigh deeply, laugh, shake, and/or cry.

While we are not counselors, we may support this process:

- Be accepting, and do not ask probing questions.





## Emotional Release

While we are not counselors, we may support this process:

- Remain in the room unless the client asks you to leave.
- Remind the client that such releases are normal, he or she is in a safe place, and offer to continue or discontinue the massage, as the client prefers.
- If the client asks what occurred, mirror back what you observed, without interpretation or analysis.

## Emotional Release

While we are not counselors, we may support this process:

- Provide a safe space for client to wind down after an emotional release.
- Afterwards, assess your level of comfort about working with the client again, seeking advice from counselors or peers if necessary.

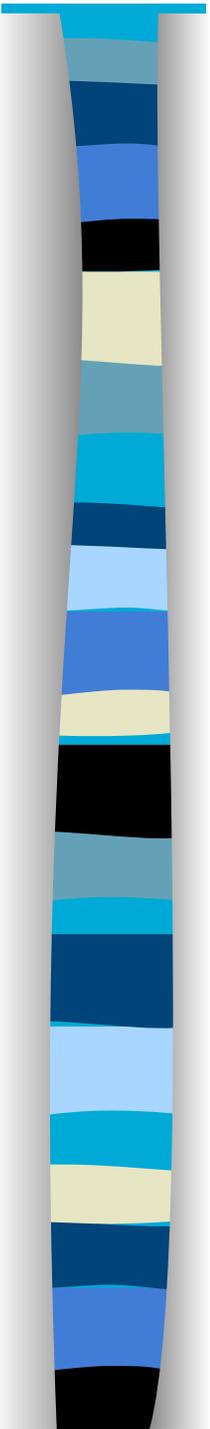




## Persons with Orthopedic Disabilities

- May be using mobility aids such as wheel chairs, canes or walkers.
- Provide barrier-free entrance to your facility, or schedule a home visit and perform massage off-site.





## Persons with Orthopedic Disabilities

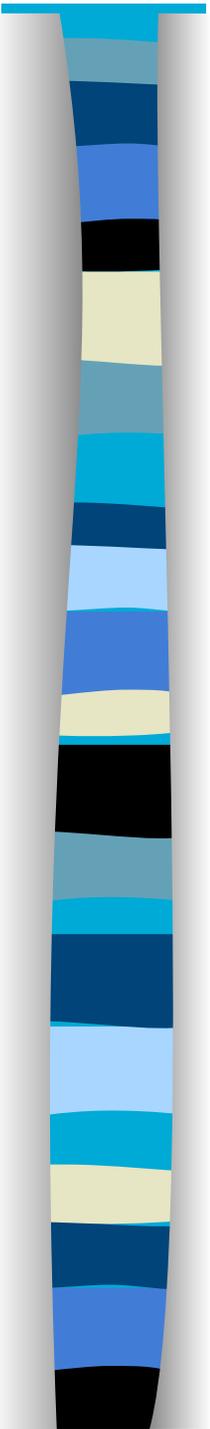
- In the interview, ask the client to describe the impairment and degree of limitation (including indirect limitations and medications with side-effects).
- Check for compensatory patterns resulting from the disability, that may point to areas of muscle tension.



## Persons with Orthopedic Disabilities

- You can massage the person in a wheelchair if necessary.

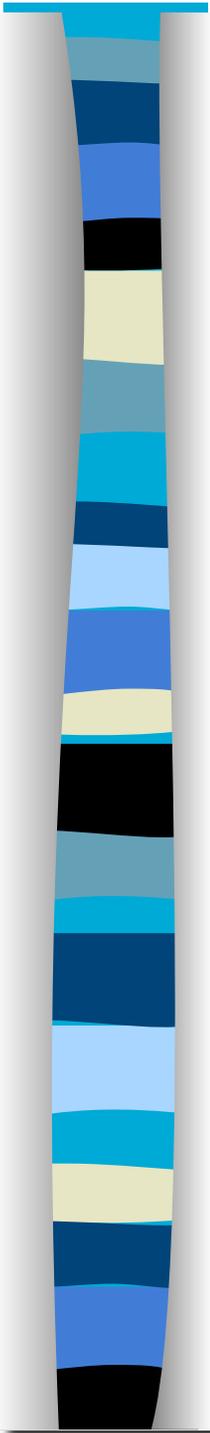


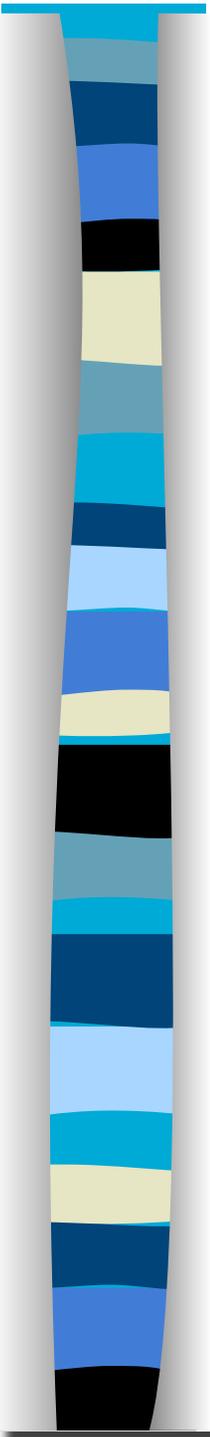


## Persons with Orthopedic Disabilities

### Other suggestions:

- Realize a wheelchair is part of the body space of the client, and avoid leaning on it or pushing it without permission.
- Use lighter pressure than normal, particularly in areas of paresthesia.
- Limit all stretching and joint mobilizations, particularly on the spinal column and hips.
- Carefully inspect the skin for ulcers, which are local contraindications.
- Check in with the client about temperature, making fine adjustments as needed.





## Persons with Speech and Hearing Impairments

- Speech and hearing impairments often coexist.
- When communicating, consider note writing or typing on a computer with Ariel or Comic Sans font and the zoom feature set to 200%.

## Persons with Speech and Hearing Impairments

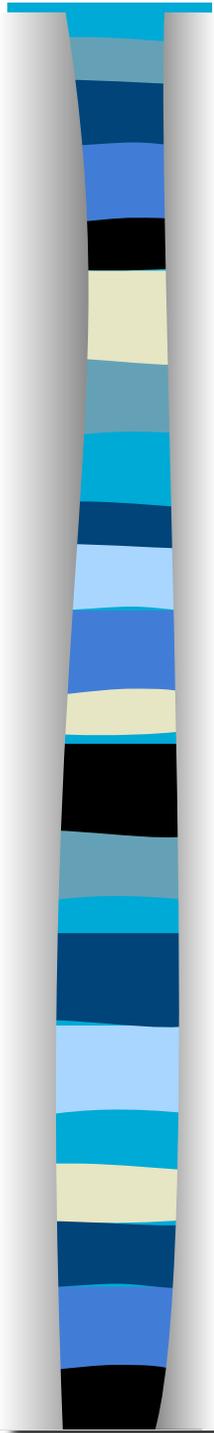
- If the client is wearing a hearing aid during the massage, avoid moving your hands close to the ears.
- If the client has removed a hearing aid, be sure you have their attention before communicating with them.



## Persons with Speech and Hearing Impairments

- Be expressive, and enunciate clearly, without exaggerating lip movement, which makes it more difficult for them to lip-read.
- If the client has a sign language interpreter, speak directly to the client.

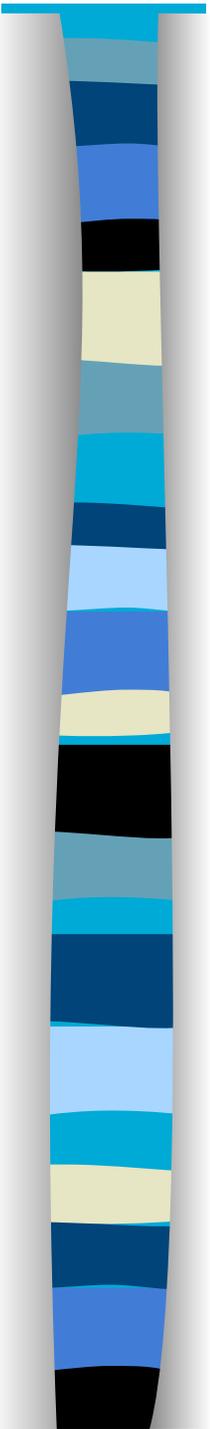




## Persons with Visual Impairments

- Visual impairments can range from partially sighted to total blindness.
- Keep facility barrier-free, and use bright ambient lighting.
- Use of contrasting colors to differentiate table from floor is useful.





## Persons with Visual Impairments

- Describe things in a normal tone of voice, using direct, precise language (clock-face, left, right, etc.) rather than imprecise terms (over here, etc.).
- When transferring the client from one area to another, offer to guide them, announcing any changes of direction in advance.
- Tactually familiarize the client with the massage environment.
- When handing the client something, touch it to their hand.
- Announce when you are entering and leaving, and turn the lights back up after the massage.

## Persons with Visual Impairments

- For printed materials, use large, easily-readable fonts.



## Persons with Visual Impairments

- If the client has a support person or animal, acknowledge that, but direct all conversation to the client.
- Do not touch the support animal.
- Provide a comfortable place for the assistant or animal during the massage.



## 77a Special Populations: Introduction

