## **1995 Somatic Practices Survey Results**

A report from the California Coalition on Somatic Practices (CCSP)

December, 1995

In January of 1995, the *California Coalition on Somatic Practices* (CCSP) printed and distributed more than twenty thousand survey packets to somatic practitioners throughout California. In the spirit of our commitment to continuously try to inform and involve the profession in the decision-making process, we are now following up with the results of that survey.

#### Background

In late 1991, the California Chapter of the American Massage Therapy Association (CMTA) organized a meeting of organizations, groups and individuals concerned with state policy toward the regulation of massage therapy. The purpose of the meeting was to begin to explore regulatory alternatives (including maintaining the status quo) and see if it was possible to reach a consensus about what should be done. Any organization or group that might be affected by any resulting decisions was invited to take part.

At that meeting we decided to be an open organization, fully independent of the CMTA or any other association, and open both to interested individuals and to representatives of interested groups. It soon became clear that the community likely to be affected by massage regulation included many forms of practice involving touch which were not massage, and that we needed to find an inclusive term acceptable to that larger community. We settled on the term somatic practice, and chose to call ourselves the *California Coalition on Somatic Practices* (CCSP).

We are a volunteer organization, meeting only three or four times a year. We function as a community in which all voices are considered and the vast diversity of our approaches and beliefs respected. We believe we have created an atmosphere of trust and cooperation.

Our intent at this time is not to push for or create the regulation of massage or other forms of somatic practice in California, but to understand the possibilities and support the development of consensus within the somatic community. In this way, we believe, we increase the probability that any regulation which does eventually emerge, from whatever source, will be more respectful of the needs of the somatic community than it might otherwise have been, and hence more acceptable to more of us. As a first step, we chose to identify and discuss some feasible regulatory alternatives and to distribute that information to as many California somatic practitioners as possible. We asked people to rate the alternatives, so that we could begin to understand how the somatic community feels about regulation. The survey was sent out in early 1995.

Our initial purpose was to study regulatory alternatives, but we have found it necessary to adopt a wider focus. We have begun to think about who makes up the larger community of somatic practitioners, whether we are one profession or several (or many), and how actions by one segment of our community may unintentionally affect others, among other issues.

We have also drawn interest from other emerging groups which are not likely to be affected by laws intended to regulate massage, such as the yoga teachers and dance therapists. These groups see themselves in similar stages of development, and feel aligned enough with us in the somatic field to be interested in our efforts. We find ourselves shifting from reactive problem solving to proactively creating the future as a part of a much greater field. This has been an exciting change for us, and appears to be unique amongst coalitions in other states which are looking at professional regulation.

### Statistical validity and rates of return:

A total of 1478 people responded to our survey. This was not a scientific sample, so we can't statistically project it to any larger group such as the class of all somatic practitioners in California, or even to the class of all the somatic practitioners on our mailing lists. We nonetheless believe that these results provide an indication of the range of opinion within the somatic community in California, and of some of the differences in opinion held by different subgroups of that community. (Our respondents did include a wide range of demographic variables, from minimal to high levels of training, from students to many years experience, from under 10% to 100% of their income from their practices. Similar preference patterns occurred across all these variables.)

There were delivery problems which make it difficult even to estimate the rate of return for the questionnaires we mailed. We mailed about 16,500 copies of the survey to a mailing list developed from the combined lists of a number of somatic organizations, schools and businesses, including the *California Reflexology Association, Rolf Institute, Trager Institute, Feldenkrais Guild, Massage Magazine* and others. This list contained many duplicates, which our mailing house unfortunately failed to purge. As a result, many people on the list received multiple copies of the questionnaire, sometimes as many as 5.

We have no way of knowing how many distinct people the list contained, because it was destroyed immediately after the mailing. This was called for because we had agreed that we would use these lists only for the survey and would not retain the names. We do know that many people who received duplicates passed them on to colleagues who had not received the mailing, so that the duplicate mailings did not all go to waste.

We also provided over 2,000 copies in bulk to a number of massage schools for

distribution to their students, and 4,000 copies to a major somatic organization who preferred to mail to its members directly. We do not know how many of these were actually distributed, nor how many of those may have been to people on our list from other sources.

We know that we distributed approximately 22,500 questionnaires and received almost 1,500 responses. If each questionnaire had reached a distinct individual (which we know didn't happen), that would give us a 6.5% return rate. If half the questionnaires reached distinct individuals, which is probably closer to truth, our return rate would be 13%. Our actual rate of return is probably somewhere in between those figures, and may be in excess of 13%. (The known return rate is about 11% for *Trager* practitioners, 17% for CMTA members, about 20% for *Aston-Patterners*, and about 20% for *Feldenkrais* Practitioners.)

Even a 6.5% return rate is quite respectable for a survey of this type. In any case, it seems reasonable to conclude that we reached and received responses from a significant segment of the California somatic community.

### **Survey Results**

Seven options were developed and discussed in the survey packet. Respondents were asked to rate each of these on a 5-point scale as "Strongly Disagree," "Disagree," "Undecided," "Agree," or "Strongly Agree." The options can be briefly summarized as follows:

**Option A1: Accept the current regulatory situation.** 

**Option A2: Work toward improved and consistent local regulation.** 

**Option A3: Develop and unite the somatic professions.** 

**Option B1: Work toward a State law creating exemptions from local ordinances** 

**Option B2: Work toward State registration providing exemption from local ordinances** 

**Option C: Work toward State licensing with specialty subtitles.** 

Option D: Develop a broad private certification program.

The basic ratings are summarized below. Ratings were coded from -2 (strongly disagree) to 2 (agree). Each entry represents the average score given to that option. A negative number (in parentheses) indicates disagreement (on the average) while a positive number indicates agreement.

OptionA1 OptionA2 OptionA3 OptionB1 OptionB2 OptionC OptionD

(1.0) (0.1) 0.2 (0.0) (0.3) 0.4 0.7

Overall, respondents rated option A1 (*status quo*) negatively, were relatively neutral to options A2 through B2, somewhat positive to option C (*licensing*), and most positive

toward option D (certification).

These results indicate a strong dissatisfaction with the *status quo* (generally seen to involve restrictive local ordinances aimed primarily at controlling prostitution, though some people saw it differently), a moderate degree of support for state *licensing*, and somewhat stronger support for the development of a statewide system of (non-governmental) *certification* for somatic practitioners. On the basis of those results, we will focus our attention principally on certification and licensing.

### **Certification and licensing**

A further breakdown of the ratings for private certification (rows) vs. licensing (columns) is shown below.

Approve	503	255	5 1	176
Disapprove 1	46	116	1	9
Indifferer	nt 143	; .	40	80

(To help read the chart, note that 255 approve of certification but disapprove of licensing, while 146 approve of licensing but not certification.)

Of the 934 respondents who support *certification*, 54% also support *licensing* while 46% disapprove or are indifferent to it. Of the 792 respondents who support *licensing*, 64% also support *certification*, while 36% disapprove or are indifferent to it. Overall, 63% of all respondents support private *certification*, while 54% support *licensing*.

These results suggest the existence of distinct points of view with respect to *certification* and *licensing*.

Some people want *licensing* and approve of *certification* as an evolutionary step in achieving that goal. This appears to be the largest subgroup in the sample, though far short of a majority. When combined with those indifferent or opposed to *certification*, the group favoring *licensing* constitutes a slight majority (55%).

A significant minority (28%) oppose or strongly oppose *licensing*. The majority of these people find *certification* a desirable or acceptable alternative, but a minority (about 8% of all respondents) oppose both *licensing* and *certification*.

# **Responses by organizational affiliation**

There are some differences amongst organizational membership. We have not completed our analysis of the difference in opinions by somatic discipline, since most respondents checked more than one discipline in techniques used. At this time, we do have information based on membership in the major organizations, whether general membership, or specialty. Amongst the two largest general membership groups, CMTA and ABMP (CA. respondents), 72% of the nearly 300 CMTA members who responded support state licensing, 60% support certification, and 41% support both. 44% of the nearly 400 ABMP members who responded support state licensing, 57% support private certification and 28% support both. CMTA members had little support for the other options, while ABMP members voted about equally for and against the exemption options. Members of the specialty organizations such as *Reflexology* and *Feldenkrais* tend to favor certification slightly more strongly, and lean even less favorably toward the options for exemption from local ordinances or registration at the state level. *Reflexologists*, for instance, have about equal support for and against licensing, but support private certification strongly. Over 80% of both *Feldenkrais* and *Trager* practitioners favor certification, with less support, especially amongst the former, for licensing.

## Subpopulations and felt needs

We are not dealing with a homogenous population, but with a heterogeneous population made up of different sub-populations who have different felt needs and want different outcomes. Without trying to assign numbers to any of these specific subpopulations, we will try to identify a few of them. This portion of the analysis draws on comments people made on the survey form and in letters as well as on the data broken down by organizational membership.

#### Practitioners favoring licensing.

The largest single group in the sample probably consists of massage therapists who want to see massage therapy become a licensed profession in California, although massage therapists who don't belong to associations have far less support for *licensing* then those with professional affiliations. The comments accompanying the survey reflect different views on what licensing should entail.

Some massage therapists who favor *licensing* have little interest in the larger somatic community. They want a massage license, and see no reason to worry about the needs or desires of other somatic practitioners. Many in this group see no need for non-governmental certification. They would prefer to go directly to a massage license based on the *National Certification Exam for Therapeutic Massage and Bodywork* (NCETMB). Some are actively hostile to certification, seeing it as a power-grab by interests they don't identify with. (How they identify those interest varies, but it included the trademarked practices such as *Rolfing* and *Feldenkrais*, the AMTA, or the individuals who would set up and benefit from such a system).

Others recognize that there is a larger community of somatic practitioners in California who will be affected by whatever regulatory actions are taken regarding massage, and prefer a more inclusive approach taking the needs of that community into consideration. These practitioners favor continued professional development leading to a non-governmental system of *certification* for somatic practitioners, and to *licensure* at some point in the future.

Most of the non-massage somatic practitioners who favor state *licensing* also like the idea of developing a system of *certification* first, as a step in defining the structure

necessary to provide licensing for a community as diverse as ours. A few people see a natural progression from *professional development* (Option A3) through *certification* to *licensing.* 

Some of those favoring *licensing* felt that nothing less will provide sufficient professional status and protection from local ordinances and other licensed professions (PT, etc.). If they favor *certification*, they see it as a necessary precursor to *licensing*, a first step to define the structure under which *licensing* will operate. Others see *licensing* and *certification* as two different alternatives; they generally prefer one but would find the other acceptable.

Among all those favoring *licensing*, opinions varied on issues like the level of training that should be required and whether or not the license should recognize different levels of training or different somatic specialties. Some wanted to require a high level of training (500 or even 1000 hours) specifically to exclude those with less. Others wanted lower levels of formal training, recognition of on-the-job experience, and "grandfathering" (or in one case "grandmothering") of current practitioners.

Some wanted a single license, others thought the license should recognize tiered levels of training, or specialties in various forms of somatic practice. A few people saw *licensing* and *certification* as having complementary roles. The state could issue a single state license in somatic practice (as it does with physicians), they suggest, and nongovernmental *certification* could play the same role in recognizing specialty qualifications that board certification does for physicians.

#### Certification as an alternative to licensing.

Not everyone who favored *certification* saw it as a step on the way to *licensing*. Some see *licensing* as an undesirable government intrusion into their lives, but still view private *certification* as desirable. Many in this group expressed concerns about state bureaucracy, costs, and the idea that government can't do anything right. A few were concerned about not having the formal training they assume a license will require, and did not want to have to go back and get that.

People saw *certification* as a way of accomplishing a range of positive goals and actions, including community building, developing a common code of ethics, and recognizing a wide range of modalities. These people like the idea of self-regulation, and find it much more acceptable than regulation by an outside government agency.

A few people see the National Certification Exam (NCETMB) as a good starting point for a system of certification, and want essentially the same *certification* for everyone. Most people prefer that the process reflect (and respect) the diversity that exists in the field, perhaps by recognizing a number of different certification processes for different specialties.

Even among those who expressed disapproval of *licensing*, some view it as a desirable goal which they see as impractical at the present time. Some think we're not together yet as a profession and need to do that first. Others see state budget problems, etc., as limiting what could be realistically accomplished at a state level.

### **Opposition to all regulation**

Some respondents oppose all forms of regulation, preferring to be left alone to run their practices themselves and seeing no need for any form of *licensing* or *certification*. Some expressed concern about the fees associated with *licensing* or *certification*, and some feared that the process would be dominated or controlled by a "select few." A few

expressed particular concern about AMTA domination. People from smaller specialties like *Feldenkrais* and *Alexander* expressed concern over being lumped with everyone else and forced to meet standards inappropriate for their specialties.

#### Perceptions of the status quo

Almost 75% of respondents rated the status quo as unacceptable, while about 15% were happy with things as they are. In reading the comments, though, it's clear that these two groups inhabit two different worlds.

The status quo that people are unhappy with includes local massage ordinances aimed at prostitution control, fingerprinting as a requirement for a massage license, different requirements in different local jurisdictions, and the like. Respondents find themselves faced with a maze of regulation that is confusing, demeaning, and sometimes expensive, and would welcome a statewide regulatory solution that got them out of this maze.

Those who are happy with the status quo, on the other hand, experience a status quo in which they are pretty much left alone and unregulated, and see no need to change that.

### SUMMARY

Non-governmental certification shows up as the most-preferred option in our survey, and we intend to explore the possibilities for such a system further. Our intention is to explore possibilities that will serve the somatic community in California. After lengthy discussions of the preliminary results, we voted at the last meeting to begin to look at development of a broad certification program, and the policies and organizational structure to support such a program. (We have no intention ourselves of becoming the so-called "certification council," or otherwise creating any position of permanence or power for ourselves.)

The preference for certification is by no means universal, so we will continue to explore other alternatives as well. No single regulatory option currently receives universal support among somatic practitioners in California. Moreover, the opposition to each option is sufficiently widespread to make it unlikely that a consensus will emerge around any single option, as we have currently defined them.

This suggests a need to explore a mix of alternatives. We may end up with a mixed solution -- state *licensing* for some, private *certification* for others, and an unregulated practice for those who prefer that. Taking into account the diversity of somatic practice within California, we do not wish to try to squeeze everyone into a "one size fits all" solution. However, we do need to consider the fact that many massage therapists and others are being severely impacted on a daily basis by the onerous local ordinances aimed at regulating prostitution.

Most of those favoring *certification* see it as a step on the road to state *licensing*; indeed, a slim majority of respondents favor *licensing*. At the same time, a significant minority of

respondents would like to be left alone, to practice free of external regulation. The dilemma facing us is to reconcile these conflicting desires, and to mold a consensus that most practitioners can support.

One possible way of accommodating these apparently divergent goals is a form of *licensing* called **licensing by title**, which confers the right to use a particular title (e.g., "Licensed Massage Therapist"). It does not restrict your right to practice so long as you do not describe yourself by that title. This might be a way of conferring the benefits of licensing on those who want them, without imposing licensing on those who don't. In contrast, a **licensing by practice** describes the scope of practice of the licensed profession and prohibits those without a license from practicing, even if they describe their work by some other title. (We also recognize that any form of state *licensing* is likely to be difficult to achieve in a time of tight budgets and trends toward smaller and less intrusive government.)

A substantial majority of respondents did not like the status quo, mostly seen from the perspective of the onerous local massage ordinances, aimed primarily at prostitution control. Only about a third of the respondents favored *Option A2*, a strategy aimed at revising local ordinances. We do not feel that approach warrants a major effort. It might, nonetheless, be worthwhile to endorse a model local ordinance and other supporting materials which could be used by local practitioner coalitions in communities which were creating or revising their massage ordinances.

### CONCLUSION

There is a wide range of opinion in the somatic community in California. However, we still believe that it is possible to craft a regulatory future that we can live with. (In the survey packets, we defined consensus as being a decision we can all live with, support, and agree not to undermine, even if it is not our preferred choice.) By honoring and listening to all opinions and perspectives, and being open to the possibility of more than one solution, we hope to continue to gain the trust and support of the somatic community in California. A major part of that is to involve as many of us as possible in the process.

To that end, we want to remind you that we are an open group. Our next meeting will be February 4, 1996 in Los Angeles, and the following meeting probably in late April or May in San Francisco. In February, we will begin the process of envisioning the goals and functions of a certification council and the other options we need to explore, and of clarifying our next steps. We invite you to attend or in any way participate with us in creating the future of our profession.

For more information on the meeting, or for comments, you can contact us at:

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