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# HOW WOULD YOU CHANGE YOUR MASSAGE IF A CLIENT BECAME DISABLED?

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# There are many types of disabilities, or differing abilities.

There are cognitive, or mental, disabilities; emotional disabilities; and physical disabilities, to name just a few.

A [disability](#) is any abnormal condition an individual has that interferes in some way with her abilities to perform normal activities of daily living without some form of accommodation or assistance.

This article provides an overview of challenges and considerations related to providing [massage therapy for people with disabilities](#), for those massage therapists interested in pursuing this rewarding specialization.

## Challenges

Mental, or cognitive, disabilities may include depression, autism, severe attention deficit disorder, dyslexia, post-traumatic stress disorder and other mental health issues.

Physical disabilities range widely, from congenital and birth defects to acquired disabilities such as spinal cord injury, closed head trauma, disease and amputation.

Other physical disabilities include vision impairment, hearing impairment, and less-visible disabilities such as heart disease, severe arthritis, Lyme disease and chronic fatigue syndrome.

Each disability is accompanied by challenges an individual faces in his day-to-day existence.

Depending on the severity of disability, individuals may be able to go about their daily lives by adapting to their circumstances in unique ways. In many cases, they endure mental and physical stresses, discomfort and social stigma as a result of disability.

Isolation and loneliness may be an issue for some people with disabilities. Depression is a common companion to the restrictions and life-changing circumstances associated with acquired disabilities.

## Accommodate

Benefits of massage to people with disabilities include stress relief, mitigation of pain, improved range of motion and improved self-image.

[Compassionate touch helps relieve isolation and loneliness](#), and may dramatically improve quality of life for a disabled person.

Massage may also reduce the effects of depression and brighten a person's experience—even temporarily.

It is important to remember you are providing massage services to a person who has a condition, rather than massaging a disability.

It is important to take time before the initial consultation to learn about a client's particular disabilities and health-related issues common to that disability in order to provide services to best benefit the individual needs of the client.

Learning about conditions related to a particular population enhances the therapist's ability to provide services that will benefit the client while reducing the chance of doing any harm.

The Internet, as well as texts such as Ruth Werner's *A Massage Therapist's Guide to Pathology*, provide rich sources of information about many health-related conditions.

A person with a disability often has attendant mental or physical conditions that may indicate or contraindicate massage. Information gained during a client intake and medical history will help determine indications, contraindications and the client's goals to help formulate the session.

Depending on the type of disability, there are special accommodations or implications that need to be considered for the comfort and safety of the client. Different types of disability require different accommodations to provide the most effective massage therapy services.

For example, accommodations may need to be made during both intake and massage if the disability affects the client's ability to communicate. In some cases, it may be necessary to consult with the client's primary caregiver to help determine goals for the session.

If the disability is newly acquired and in the acute stages, it is preferential to work with the health care team in order to determine and provide massage services that are most beneficial.

## **Communication**

If a client is not able to communicate clearly, it may be necessary to make additional accommodation. For instance, an individual with a closed head injury, cerebral palsy or stroke may not be able to speak.

However, she may be able to understand and use gestures or other ways of communicating. It will also be useful to discuss treatment options with her caregiver.

If a client is not able to communicate through speech, accommodations must be made in the treatment to stay well within her tolerance and comfort. If the client cannot communicate clearly, it becomes the responsibility of the therapist to interpret nonverbal signals and proceed with caution.

## **Limited Mobility**

Many factors can limit mobility. These include injury, illness, [aging](#) and paralysis. Disabilities that limit mobility include spinal cord injury, multiple sclerosis, muscular dystrophy, traumatic brain injury, cerebral palsy, stroke and lower-extremity amputations. Each of these conditions comes with its own concerns.

Additionally, individuals, regardless of their disability or condition, have their own specific concerns to be addressed that may or may not be directly related to disability. For example, many times, individuals with long-term mobility impairments may have other conditions that contraindicate massage.

These concerns can be identified during a thorough client intake and medical history.

## **Access**

An individual might use crutches, a cane, a walker or wheelchair, and may need some assistance navigating the massage room and getting on and off the table. Make sure there's adequate wheelchair access into and throughout your place of business.

The Americans with Disabilities Act provides guidelines for public accommodations for wheelchairs. They include barrier-free, no-step access from the street or parking area, into and throughout the facility, with a minimum 36-inch-wide pathway and doorways with a minimum 32-inch-wide opening.

There are also specifications for accessible bathrooms. If the massage facility is not wheelchair accessible, it may be a better idea to go to the client's home or a mutually agreed-upon, accessible establishment.

A determination must be made to transfer the client onto a massage table, work with him while he remains in his wheelchair, perform massage with the client in bed, or make other accommodation.

The client might need assistance transferring to a massage table. Ask the client if he requires assistance, and then follow his instructions if it is within your ability and safety considerations.

[A hydraulic or electric table that can adjust in height](#) works well in these conditions. The table can be lowered to the same level as the seat of the wheelchair, so the client can easily transfer to the table and then the table can be raised to the correct height for the therapist to perform the treatment.

Once the client is on the table, use plenty of bolsters to support him in a comfortable position. At the end of the session, lower the table so the client can easily transfer back into his chair.

Mobility aids such as walkers, crutches and wheelchairs are helpful and necessary; however, they also cause their own specific types of stress and compensation patterns in hands, arms, shoulders and neck that can be addressed during massage.

Massage may also address conditions directly related to disability, such as circulatory and movement restrictions. Massage can offer a comforting and relaxing experience to a population with a history of more invasive and possibly traumatic medical procedures.

## **Paralysis**

Several disabilities that limit mobility involve paralysis. Paralysis is usually due to an illness or an injury that affects the nervous system. The extent of paralysis and the effect that it has on the body differs depending on the type of illness or injury.

Stroke, traumatic brain injury, cerebral palsy, multiple sclerosis, muscular dystrophy and spinal cord injury all involve a disruption to the nervous system. The disruption could affect motor neurons, sensory neurons or both.

When motor neurons are damaged, muscular activity is affected and may result in contractures, spasms or paralysis. If sensory neurons are damaged, sensations may be blocked or altered, resulting in numbness, tingling or pain.

Massage for people with paralysis deserves some special consideration. Paralysis usually affects only a portion of the body, limiting mobility or sensation. The rest of the body may have relatively normal muscle and nerve activity.

Areas not directly affected by paralysis may experience compensation patterns accompanied by tension or discomfort as a result of using such mobility devices as wheelchairs or crutches.

These compensating patterns may result in back or shoulder pain and tension in the neck and arms.

Massage for nonparalyzed portions of the body is essentially the same as regular massage, concentrating on relaxation or addressing pain or tension caused by compensating movement patterns.

Massage to paralyzed areas requires some special considerations. Paralysis may be accompanied by joint stiffness, spasms or contractures, or limited joint mobility.

Range-of-motion techniques and light stretching techniques help maintain flexibility, but must be used with great caution. Long-term paralysis also may be accompanied by osteoporosis, so joint movements must be gentle.

Due to long-term muscle inactivity, paralysis is often accompanied by edema in lower extremities.

Elevating the feet, [gentle Swedish massage or lymph massage](#) that enhances lymph and venous circulation are beneficial.

If paralysis is accompanied by loss of sensation, meaning the client does not have feeling in paralyzed areas, the therapist should avoid any deep techniques or excessive joint movements that may cause pain or injury.

Since the client cannot feel these areas, it is the therapist's responsibility to stay well within the client's tolerance to avoid injury. Because of lack of sensitivity, also avoid using heat or cold therapies on these areas.

## Good Judgment

Likewise, if the client's communication ability is compromised, the therapist must be very aware of facial expressions and body language or other nonverbal signals, and use good judgment to provide services that are beneficial and not injurious to the client.

Sometimes doing less is more. Compassionate touch and the presence of another caring person are often more appropriate and supportive of the client than any deeper mechanical techniques.

### About the Author



[Mark Beck \(1947–2016\)](#) is the author of *The Theory and Practice of Therapeutic Massage*, currently in its fifth edition. He was a massage therapist for more than 15 years before he broke his neck in 1990. Beck served on the inaugural board of the Alliance for Massage Therapy Education from 2010 to 2013.

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