

So You Want To Be a Practitioner

by John F. Thie, DC

TOUCH FOR HEALTH FOUNDATION

6162 La Gloria DR, Malibu, CA 90265. USA.

Phone: 310-589-5269 Fax: 310-589-5369

website: www.touch-4health.com e-mail: thie@touch-4health.com

It was 1964, when I first read about Applied Kinesiology in the Journal of Chiropractic Economics. That was also the year that I investigated giving up my chiropractic practice, taking my family with me and going to work in rural areas of Mexico with the poor after completing Medical Training there. In that year after spending time investigating what it would mean to me personally and to my family the decision to remain practicing in California as a Chiropractor became obvious. Even before we were married, Carrie and I knew that we wanted to devote our lives to helping others to live healthier lives. This was the primary reason I chose to become a chiropractor and focus on the value of posture.

Because of the our daughter's fatal accident in 1962, the political intrigues in chiropractic and the tragic course of our country at the time we decided to investigate another way of achieving our goals. Thus in our investigation of the practice of orthodox medicine we discovered that it was very different on the inside than it appeared from the outside. Sometimes the medical business decisions that had to be made versus the patient betterment were at cross purposes with our ultimate goal of making the world a better place for families and humans in general. We found that the freedom offered in the practice of chiropractic and the safety and efficiency of the methods outweighed the lower social status of a chiropractor at that time as compared to the orthodox medical practitioner. What was the most shocking revelation to us were the restrictions placed on the orthodox practitioner and the lack of freedom to do what the individual practitioner felt was the best for the unique patient. For the allopathic biomedical model, now and then, the prescribed protocols must be followed, the time spent is regulated,

and the fees are regulated by insurance, facilities and government regulations. None of these were present in the practice of chiropractic in the early 1960s. We had freedom to do what we felt was best for our patient in the protocols we followed, in the fees for service, and the way we described the conditions that the whole person came to us to change for the better. All these steps to wellness were up to our individual judgment with the cooperation of the patient. We returned from Mexico wiser and grateful for the freedom and vision that chiropractic offered the practitioner and patient. We became very enthusiastic about our chiropractic license and private practice in Pasadena California. We were more open to God's guidance to help those wanting a better way of living than ever before.

My meeting George Goodheart in 1965 and becoming an applied Kinesiologist was a perfect fit for the basic goal of Carrie and myself. From 1965 to my retirement from Chiropractic practice in 1992, the Touch for Health program developed and it was our constant desire that the ICAK (International College of Applied Kinesiology) would see the light and adopt Touch for Health as an official lay and paraprofessional program. Even after my retirement we have continued to encourage AK practitioners to cooperate and be a part of the worldwide Touch for Health movement. Although we began the Touch for Health approach for all the lay public it became clear that professionals appreciated the Touch for Health teaching approach as a tool to assist them through the rather complicated, continuing to be developed, AK protocols. George Goodheart was not interested in making AK a lay program, however he challenged us to write a book for lay people and he did enthusiastically endorse the idea.

When the Touch for Health Foundation (TFHF) was formed he served as Vice President for a number of years. It has been the foremost TFH desire that everyone in the world would be able to use manual muscle testing (MMT) as a tool to help families have better lives.

The medical laws in the 1960's were such that if you did anything to help another person it could be classified as the practice of medicine. Exceptions to these all-encompassing regulations were also passed by state legislatures for chiropractic, naturopathy, osteopathy, optometry, etc. Touch for Health was not meant to teach a protocol that could be classified as the practice of medicine or any other licensed or regulated health profession its purpose was to share hygienic, rehabilitative, preventive, health enhancing protocols that were safe, efficient, effective that families could use with their friends and family members. In addition that health care givers working as professionals (that is being paid for services rendered) could use the TFH methods to help their clients and patients to have healthier lives.

At the close of 2002, on December 27th, Carrie and I celebrated our 50th anniversary. In the months leading up to that event and continuing now through 2003 we are praying and considering the best way to use our energy and time God has for us on this plane. We are both convinced that there is a higher power that guides us to continue to be "on target" for the needs of others with the gift God has given us through the blessings of elder hood and the wisdom to manage our personal passage.

At the moment new beginnings are stirring for Touch for Health people and others. There is a door opening in California and we wonder how best to approach and go through it. It is the door of Touch for Health Practitioner. In California a new law went into effect January 1, 2003. The law Health Freedom Bill S577, Which passed with no negative votes in either the state Senate or Assembly allow complementary and alternative practitioners to help people without fear of being arrested for practice medicine or other licensed or regulated violation under certain circumstances. Section 1 (c) The Legislature

intends, by enactment of this act, to allow access by California residents to complementary and alternative health care practitioners who are not providing services that require medical training and credentials. This is then what you could do as a Touch for Health Practitioner. You do not need medical training or credentials for what you do in energy balancing.

What do you need to do to meet the requirements of this legislation? SECTION 3. Section 2053.6 is added to the Business and Professions Code, to read:

2053.6.(a) A person who provides services pursuant to Section 2053.5 that are not unlawful under Section 2051, 2052, or 2053 shall, prior to providing those services, do the following:

(1) Disclose to the client in a written statement using plain language the following information:

A) That he or she is not a licensed physician.

(B) That the treatment is alternative or complementary to healing arts services licensed by the state.

(C) That the services to be provided are not licensed by the state.

(D) The nature of the services to be provided.

(E) The theory of treatment upon which the services are based.

(F) His or her educational, training, experience, and other qualifications regarding the services to be provided.

(2) Obtain a written acknowledgment from the client stating that he or she has been provided with the information described in paragraph (1). The client shall be provided with a copy of the written acknowledgment, which shall be maintained by the person providing the service for three years.

2053.6.(b) The information required by subdivision (a) shall be provided in a language that the client understands.

What is legal for you to do?

2053.5.(a) Notwithstanding any other provision of law, a person who complies with the requirements of Section 2053.6 shall not be in violation of Section 2051, 2052, or 2053 unless that person does any of the following:

- (1) Conducts surgery or any other procedure on another person that punctures the skin or harmfully invades the body.
- (2) Administers or prescribes x-ray radiation to another person.
- (3) Prescribes or administers legend drugs or controlled substances to another person.
- (4) Recommends the discontinuance of legend drugs or controlled substances prescribed by an appropriately licensed practitioner.
- (5) Willfully diagnoses and treats a physical or mental condition of any person under circumstances or conditions that cause or create risk of great bodily harm, serious physical or mental illness, or death.
- (6) Sets fractures.
- (7) Treats lacerations or abrasions through electrotherapy.
- (8) Holds out, states, indicates, advertises, or implies to a client or prospective client that he or she is a physician, a surgeon, or a physician and surgeon.

2053.5.(b) A person who advertises any services that are not unlawful under Section 2051, 2052, or 2053 pursuant to subdivision (a) shall disclose in the advertisement that he or she is not licensed by the state as a healing arts practitioner. So what is the "theory of treatment upon which the services are based"?

This vague wording leaves it up to the individual practitioner to determine what they are doing is

1. Not licensed by the state already.

2. The reason and explanation of the reason they are offering the services they propose to render to the client/patient.

- 3 State these things in understandable language for the client/patient in writing.

The following is what I am using when asked for how I would describe the theory of Touch for Health to meet the requirements of the law.

Touch for Health is a model of natural health enhancement that has as its basis, the existence of a meridian system in addition to the known systems of anatomy and physiology. It is hypothesized that this meridian system can be evaluated by the use of gentle muscle testing protocols. Further it is theorized that by balancing this meridian energy as evaluated by muscle testing that the client/patient will be better able to reach their personal goals and have a more effective, efficient life. This system is available to all people and professions, is not dangerous to use, and does not require a license by the state or medical training.

So now for the first time in California I can with confidence say that if you have a gift of healing and find that you can use that gift by opening an office legally. You can help people change so they can have what they want better in their lives

Why do I recommend that you do so? The need is so great please consider the following.

"Chronic health conditions can lead to significant health problems if left unchecked, and their incidence is rising: By 2020, 157 million Americans (or nearly half the population) are expected to suffer from one or more chronic conditions. The elderly are particularly prone to having multiple chronic health problems.

"Utilizing a national sample of over 1 million people age 65 or older and enrolled in Medicare in 1999, data were obtained on chronic conditions including hypertension and diabetes. Data showed that 82% of the Medicare beneficiaries had at least one chronic condition, increasing in prevalence with age to nearly 90% in those 85 and older. On average, there were more than two chronic conditions per person. Over half of the subjects had a

circulatory system-based chronic condition. Also, two-thirds of all individuals 65 or older had two or more chronic conditions; 43% had three or more; and 24% had four or more.

"This study in the *Archives of Internal Medicine* additionally found that individuals with four or more chronic conditions were approximately 100 times more likely to have been hospitalized for a condition that could have been averted through proper primary care. Per-person Medicare expenditure increases coincided with the number of chronic conditions, from about \$200 for seniors with no chronic conditions to nearly \$14,000 for beneficiaries with four or more."

"What does all this information mean to you? Heed these numbers to avoid major health problems and big bills as you age, by simply maintaining wellness, through exercise, a good diet and doing nothing to excess."

Reference: Wolff JL, Starfield B, Anderson G. "Prevalence, expenditures, and complications of multiple chronic conditions in the elderly." *Archives of Internal Medicine* 2002:162

As I have aged and observed over the last 52 years that I have been active in delivering health care in one way or another, one of the best ways to stay healthy is to have our meridian systems in balance and have goals that we want to accomplish. Touch for Health protocols can do this for people. When you are helping people get what they want and most of the time they feel immediately better, it gives you a reason for getting up in the morning and a joy in going to your work. You know that you are making the world a better place by doing good and giving love to all those you touch. You can do this for all ages, but especially for those elderly with chronic problems.

Another reason for my advocacy of Touch for Health practitioners programs relates to my belief in these practitioners ability to enhance by using Touch for Health as hygiene such as brushing your teeth and bathing regularly, the health of the all people but especially the over 65 population. The physical touching helps and the use of the TFH energy balancing protocols will reduce the use of unnecessary

drugs and the need for hospitalization. In an article by Los Angeles Times Staff writer Jane E. Allen March 10 2003 she said "A new report has found that at least 1.9 million drug-related injuries, ranging from minor rashes to death, may occur each year among Americans older than 65. In more than a quarter of the cases, patients are simply given the wrong medication, the wrong dose or a drug know to interact with another they are taking—error that could have been prevented.

"Of the 180,000 life-threatening or fatal side effects, more than half might have been prevented according to estimates from researchers form the University of Massachusetts Medical in Worcester and Brigham and Women's Hospital in Boston." Can a person that knows TFH help prevent any of these? I believe that if the people in the USA could get balanced daily by asking each other for help and being guided by TFH Instructors and practitioners some of these bad situations could be avoided.

Another quote from Larry Dossey, MD from the 2003 Jan/Feb Vol. 9 No. 1 *Alternative Therapies* "The modern hospital is an exceedingly dangerous place. It is currently estimated that around 225,000 Americans die in hospitals annually from the side effects of medications and because of error of hospital personnel. This makes hospital care the third leading cause of death in the United States, behind heart disease and cancer.

"Experts attribute these hospital deaths to idiosyncratic physiological reactions within patients, resulting in fatal drug reactions; to poor judgment and negligence among hospital personnel; to bureaucratic complexity and miscommunication between departments; or to just plain goof-up."

Can we by training more people to use TFH as hygiene and prevention in reaching their goals prevent some of these deaths and reduce the suffering for the people and their families? Can we reduce the need for hospitalization? I think we can! Thus we can keep people safer and prevent the dangers of being hospitalized or just needing to take drugs.

A further quote from Dossey in the same editorial "healthcare professionals have been drawn to their work have an innate desire to

be healers. Yet through the process of their professional education, this instinct is devalued and often snuffed out as a result of the overwhelming emphasis on a materialistic approach to health and illness."

"Millions of physicians and nurses in America know they are living a lie. They are required to deliver a soulless, mindless, materialistic form of patient care that contrasts dramatically with the ancient art of healing, which has always been rooted in compassion, love, and the spiritual side of life that attracted them to their profession in the first place. Of 296 family physicians at the 1996 annual meeting of the American Academy of Family Physicians it was found that 99% were convinced that religious beliefs can heal and 75% believed that prayers of others can help a patient recover, though few of their physicians ever recommended these interventions."

I hope that will not be said of the TFH practitioners of the present and future. I believe that using TFH protocols can be a prayer ritual that is very effective, as I have proven for myself in the past 6 years I have been using it in this way at the Malibu United Methodist Church's Prayer and Healing Ministry as a volunteer. Can we help some of the nurses, physical therapists, physicians and surgeons to be able to live more of their truth by teaching them TFH?

What we have known for a long time as exemplified 40 years ago and equally as true today when a former drug company executive, who was also a physician, noted while testifying before the U.S. Senate that the pharmaceutical industry is "unique in that it can make exploitation appear a noble purpose" We have just gone through just such an episode with the attempt to reintroduce smallpox vaccinations, which have had disastrous results. It is estimated that the public in general in the USA has over 1 million people die or suffer from dangerous drug-induced illness every year. Can we by having more people learning TFH prevent some of these fatal or serious side reactions, that is unintended deaths and serious suffering? IATROGENIC is the name given diseases induced by doctors and their treatments. Do we see these mistakes made public? Rarely!

Not everyone should be a health care practitioner; one that is paid for helping someone have better health. Neither should everyone be any other professional unless they have special gifts in that profession. The problem is that in most professions like the arts, health care is an art, people do not get paid unless their performance is superior to the general public, because the public can judge the performance and know if they want the work of a particular artist musician, muralist, painter, athlete, engineer etc. But with health care workers this information is kept from the public, even though it is available on government records. The hospital and medical lobbies work very hard at keeping the dangerous practitioner names from the public. It not the case in the professional athlete, or other artist whose performance is on display every day they perform. It is my belief that we need people to do surgery, give drugs and attend those of us that are sick, injured and have the need for hospitalization and drugs, but I believe that these people ought to have a gift of healing like other professionals have gifts in performing their specific tasks of music, art, athletics, mathematics etc. It is time we offered TFH courses to everyone so that those that have the gift of healing can go on to be our health care professionals.

The wonderful thing about this goal is that it is already happening. Many people who have started out in TFH have gone on to be chiropractors, medical doctors, naturopaths and special Kinesiology practitioners. These are the people that have special gifts in healing and you can tell by the outcomes of their interventions.

Times are changing. A quote from the Chiropractic Report of November 2002 tells something about chiropractic in Australia, which may pertain to Kinesiology today. It quotes two chiropractors that graduated from Palmer Chiropractic College 40 years ago and have been practicing in Australia since. "The review the profound changes in chiropractic practice during their professional lives. When they entered practice there was no communication with other health professionals, the notion that health insurance would ever cover chiropractic care 'was pretty

far fetched', and Australian chiropractors were free to run their practices as they liked, "answerable to no one but our patients."

That has all changed. First came government recognition and regulation of chiropractic practice, then inclusion of chiropractic care in worker's compensation and motor vehicle accident legislation, government funding for chiropractic services for veterans, the expectation that chiropractors would participate in mainstream health care teams, the growth of patient rights and all of the new clinical record-keeping, and communication skills that these things demand.

I am like those two practitioners I graduated from Chiropractic College 47 years ago in 1956 getting my license to practice in California in March of 1957. I have also had the opportunity to watch the changes in the last 30 years of my desire to share Touch for Health Kinesiology grow from a patient education tool to a profession. Now how will the recognition of TFHK be affected by its continued growth in use and practitioners? Will the desire for third party payment and limitation of the number of practitioners by registration and licensure put a break on the wonderful creativity that is now present?

The ultimate goal of the practitioner in giving a client a TFHK balance is in some indefinable way, to impart the truth that s/he is a treasure to the entire world community, as a child of God. Our desire to the client/student know and achieve what they were created to be gives us the same realization of ourselves.

It is a mark of the best practitioners that they see the inherent value of the client by understanding that the human beings value lies within them and not with what they can do. If we authentically seek to understand the wholeness of the client we then can realize they are a mystery, to which we can listen, and help them find meaning for themselves by balancing their energies to be in harmony with the universal.

It is a certain unavoidable phenomenon that no matter how much we think we know about the client there are always some limits to our understanding.

We can enjoy our work more when we realize that we will encounter surprises in the goals clients chose and the mystery of why these choices were made gives us a way of articulating the numinous presence in our universe.

When we open ourselves to the otherness of our clients we invite our own encounter with this mystery. We can become aware of a pervading presence when confronted with the incomprehensibility. In this we come to know the sacred as different from the secular. Secular solutions alone are recognized as insufficient. Once you can realize that the client has a presence that is not defined by the physical, mental, emotional characteristics and complexities, what the client does for recreation or work and what family the client has, but by something more deeply profound we can have the joy and meaning of being a practitioner/instructor.

This will mean that the practitioner will remain a physical helper, but also becomes something else, a unique manifestation of the numinous presence that pervades all life. The teacher/practitioner's physical presence becomes a celebration of a more profound reality capable of transforming our present consciousness into sometime more. Once we encounter the client in this manner we awake to a world of wonder and pervading presence that is so much more than just helping a person get rid of symptoms and complaints. We enter into a deep sense of within-ness and a profound beyond-ness. We come to understand the client as a great celebration, a unique articulation of existence and a communion of our relationship with the individualization of the oneness of all.

So you can see we have a lot we can contribute and we can have a lot of joy, meaning and purpose in our lives as we become more efficient as instructors and practitioners of Touch for Health.

I am enjoying my working with students as an instructor and coach; I am enjoying helping people find greater meaning in their lives. I know you can also have more meaning, more joy, and more abundance by teaching and using Touch for Health. Thank you for allowing me to share with you.