

# BODYWORK FOR THE HOMELESS

## Massage Therapy Foundation Funds Seattle Organization Alternative Healthcare Access Campaign

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Homelessness is, in itself, extremely stressful," says Debbie, when asked about her experience receiving massage therapy. "I had so much stress and pain in my body. Massage lowered the pain level and the stress at the same time, helping me to relax. I was tensing up all the time; this really helped." Debbie received massage sessions at the transitional housing program where she lived. The massage therapist and naturopathic physician who worked with her were volunteers for the Alternative Healthcare Access Campaign (AHAC).

AHAC was founded 8 years ago by a group of students and homeless advocates concerned about the lack of access to alternative and complementary therapies. AHAC was created to develop and coordinate direct service programs to provide alternative healthcare to homeless and low-income individuals in Seattle. A volunteer-run non-profit organization, AHAC now offers alternative therapies at six sites serving this population. These sites include Angeline's, a drop-in day center for homeless women; Peace on the Streets by Kids from the Streets, a center for homeless youth; the Frye Building, a hotel converted to permanent low income housing; Compass Cascade, a transitional housing program for homeless women; Roots, an overnight shelter for young adults; and Tent City, an emergency housing project in King County. At each of these sites, licensed practitioners regularly volunteer their time, providing massage therapy, acupuncture and oriental medicine, naturopathic medicine or chiropractic care. Additional volunteers, along with a couple work-study Bastyr students, keep the organization running. The various non-practitioner tasks include; for example, Steering Committee oversight of the organization, coordinating scheduling, maintaining records, compiling data related to services

rendered, volunteer recruitment, fundraising and seeking supply donations.

The individuals who seek AHAC services are in vulnerable situations. They are either living on the streets or, as was the case with Debbie, actively striving to stabilize their lives and make a fresh start. Many are challenged with chronic health problems, addiction, mental illness and trauma. Additionally, they struggle with a lack of healthcare services and the lack of consistent providers who know and care about them. Debbie struggles with post traumatic stress disorder (PTSD), diabetes and depression. One of the common features of PTSD is a profound sense of fear and the absence of feeling safe in the world.

Debbie talked about the impact of receiving massage and naturopathic care from therapists she saw consistently over a year's time. "Having PTSD, it comes down to trust. Trust is a big issue for a lot of women, some us have had really bad parents—criminals or abusers. For me it was abuse with men. Getting help for PTSD in a safe setting and with practitioners who I could trust, helped me to trust others. It was a wonderful blessing and a kindness to get these services."



Pamela Alt, LAc, LMP, treats an AHAC client.



*"We haven't taken care of ourselves for so long. It's rough on the back to sleep outside in a tent or in shelters. I go to a massage therapist once a week to feel new again. That's what a lot of us are looking for—to feel new again."*

*—a Tent City resident*



The focus of alternative and complementary healthcare is to prevent disease and restore the body's natural balance. As such, alternative therapies can be powerful tools for re-establishing and maintaining health. Seattle and King County 2008 estimates are that there are 8,300 homeless people on any given night.<sup>1</sup> There is tremendous need to meet the healthcare needs of this population. One of AHAC's primary goals is to establish onsite clinical services at social service centers for low-income and homeless people to help address this need.

As one Tent City resident explained, AHAC "teaches us to take care of our bodies, teaches us to start over again. We haven't taken care of ourselves for so long. It's rough on the back to sleep outside in a tent or in shelters. I go to a massage therapist once a week to feel new again. That's what a lot of us are looking for—to feel new again."<sup>2</sup>

Since its foundation, AHAC practitioners have provided approximately 4,500 treatments, delivered to 1,633 patients with a 46% return visit rate. This is remarkable given that AHAC is a volunteer-run organization with limited person-power and budget to develop the organization infrastructure. This fall, AHAC received a community service grant from the Massage Therapy Foundation to provide administrative support. The goals of the grant are to increase outreach to the bodywork

community in Seattle, to design a referral brochure of sliding scale alternative therapy services, and to develop a half-day training for potential and new LMP volunteers to learn about the issues that may come up in practice and how to work with this vulnerable population. If you are interested in volunteering with AHAC, please visit the website: [www.ahacseattle.org](http://www.ahacseattle.org) where you will find a link to the volunteer application as well as email and phone contact information. The first training will be offered in May; if you are interested in learning more about the training, please check the AHAC website or call AHAC at (206) 925-3322.

AHAC is a non-profit organization and tax deductible donations are welcome.



*—Cynthia Price received her massage training in 1981. Research faculty at the University of Washington School of Nursing, Cynthia's clinical and research expertise is in body-oriented therapy for trauma recovery. A member of the AHAC Steering Committee, she was awarded a Massage Therapy Foundation community service grant.*

<sup>1</sup> Public Health Seattle and King County (March 2007). *Healthcare for the Homeless Network*, URL <http://www.metrokc.gov/health/hchn/homelessness.htm>

<sup>2</sup> Griffey, T. (2001). *Housecalls to the Homeless*. *Real Change*, 5(17).