Explore the origins of massage and principles of complementary and alternative medicine

In this unit you will learn about the differences and principles of complementary, alternative and allopathic (conventional) medicine. This theoretical unit will provide you with an understanding of government guidelines, self-regulation and the integrated approach to healthcare and wellbeing.
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<thead>
<tr>
<th>Level</th>
<th>3</th>
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<tbody>
<tr>
<td>Credit value</td>
<td>7</td>
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<tr>
<td>GLH</td>
<td>60</td>
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<tr>
<td>Observation(s)</td>
<td>0</td>
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<td>External paper(s)</td>
<td>0</td>
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Explore the origins of massage and principles of complementary and alternative medicine

**Learning outcomes**

**On completion of this unit you will:**

1. Be able to understand the development and diversity of massage
2. Be able to distinguish the popularity, scope and availability of complementary and alternative medicine in your local area
3. Be able to understand the differences between complementary, alternative and allopathic medicine
4. Be able to understand the progression routes when working in complementary and alternative medicine

**Evidence requirements**

1. **Knowledge outcomes**
   There must be evidence that you possess all the knowledge and understanding listed in the ‘Knowledge’ section of this unit. This evidence may include projects, assignments, case studies, reflective accounts, oral/written questioning and/or other forms of evidence.

2. **Tutor/Assessor guidance**
   You will be guided by your tutor/assessor on how to achieve learning outcomes in this unit.

3. **External paper**
   There is no external paper requirement for this unit.
Developing knowledge

Achieving knowledge outcomes

You will be guided by your tutor and assessor on the evidence that needs to be produced. Your knowledge and understanding will be assessed using the assessment methods listed below*:

- Projects
- Observed work
- Witness statements
- Audio-visual media
- Evidence of prior learning or attainment
- Written questions
- Oral questions
- Assignments
- Case studies
- Professional discussion

Where applicable your assessor will integrate knowledge outcomes into practical observations through professional discussion and/or oral questioning.

When a criterion has been orally questioned and achieved, your assessor will record this evidence in written form or by other appropriate means. There is no need for you to produce additional evidence as this criterion has already been achieved.

Some knowledge and understanding outcomes may require you to show that you know and understand how to do something. If you have practical evidence from your own work that meets knowledge criteria, then there is no requirement for you to be questioned again on the same topic.

*This is not an exhaustive list.
Knowledge

Learning outcome 1

Be able to understand the development and diversity of massage

You can: | Portfolio reference/ Assessor initials*
---|---
a. Explain the origins of massage |  
b. Explain the development of the different forms of massage |  

*Assessor initials to be inserted if orally questioned.
Learning outcome 2

Be able to distinguish the popularity, scope and availability of complementary and alternative medicine in your local area

<table>
<thead>
<tr>
<th>You can:</th>
<th>Portfolio reference/ Assessor initials*</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Implement a market analysis to ascertain the popularity, scope and availability of complementary and alternative medicine</td>
<td></td>
</tr>
<tr>
<td>b. Describe the importance of analysing data collected from market analysis</td>
<td></td>
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*Assessor initials to be inserted if orally questioned.
## Learning outcome 3

**Be able to understand the differences between complementary, alternative and allopathic medicine**

<table>
<thead>
<tr>
<th>You can:</th>
<th>Portfolio reference/ Assessor initials*</th>
</tr>
</thead>
<tbody>
<tr>
<td>a. Interpret the terms complementary, alternative and allopathic medicine</td>
<td></td>
</tr>
<tr>
<td>b. Explain the concepts of complementary and alternative medicine compared to allopathic medicine</td>
<td></td>
</tr>
<tr>
<td>c. Critically compare the differences between complementary, alternative and allopathic medicine</td>
<td></td>
</tr>
<tr>
<td>d. Explain the importance of government guidelines in relation to education, training and regulation of complementary and alternative medicine</td>
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</tbody>
</table>

*Assessor initials to be inserted if orally questioned.
Learning outcome 4

Be able to understand the progression routes when working in complementary and alternative medicine

<table>
<thead>
<tr>
<th>You can:</th>
<th>Portfolio reference/ Assessor initials*</th>
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<tbody>
<tr>
<td>a. Review training and career pathways in the complementary and alternative medicine field</td>
<td></td>
</tr>
<tr>
<td>b. Explain the importance of identifying related sectors in terms of further career progression</td>
<td></td>
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*Assessor initials to be inserted if orally questioned.
Learning outcome 1: Be able to understand the development and diversity of massage

The origins of massage (VTCT recommends the study of one of the sections below):

**Body massage** – history and development of massage therapy, China (3000 BC), Japanese shiatsu, Indian ayurvedic medicine, Greeks, Romans, modern Swedish pioneer (Henrik Ling, physiotherapy), ongoing research and development of massage techniques.

**Aromatherapy** – history and development of aromatherapy, Egyptians, Greeks, Romans, Chinese, Indians, herbal and other influences (for example, Culpeper Gerard, naturopathy, the influence of allopathic medicine, First World War and Professor Gatofosse, Jean Valnet, Marguerite Maury, modern pioneers such as Eve Taylor OBE, Robert Tisserand), ongoing research and developments.


The development of different forms of massage and therapies (VTCT recommends the study of three of the below): Acupressure, amatsu therapy, aromatherapy massage, craniosacral therapy, deep tissue massage, holistic massage, Indian head massage, Lomi Lomi/Hawaiian massage, lymphatic drainage massage, myofascial release therapy, neuromuscular technique (NMT), oncology massage, reflexology, remedial/therapeutic massage, pregnancy massage, seated massage, shiatsu, sports massage, stone therapy, Swedish massage, Thai massage, trigger point therapy, tui na.

Types of complementary and alternative medicine (VTCT recommends the study of three of the below): Acupuncture, Alexander technique, allergy testing, art therapy, auricular acupuncture, autogenic training, ayurvedic medicine, bee venom therapy, Bowen technique, chelation therapy, chiropractic, colonic hydrotherapy, colour therapy, counselling, craniosacral therapy, crystal therapy, dream therapy, flower essence therapy, herbal medicine, homeopathy, hydrotherapy, hypnotherapy, iridology, juice therapy, kinesiology, light therapy, light touch therapy, magnotherapy, marma therapy, microwave resonance therapy, mindfulness based stress reduction, music therapy, naturopathy, Neurolinguistic Programming (NLP), Neuroskeletal Realignment Therapy (NRT), nutritional therapy, osteopathy, oxygen therapy, panchakarma therapy, reiki, spiritual healing, structural integration therapy/Rolfing, subtle energy/vibrational therapies, Tai Chi, tens therapy, therapeutic touch, Traditional Chinese Medicine (TCM), transcendental meditation/meditation, vertical reflex therapy, watsu, yoga. This list is not limited, as the classification of complementary and alternative therapies/medicine is constantly evolving.
Learning outcome 2: Be able to distinguish the popularity, scope and availability of complementary and alternative medicine in your local area

Market analysis to ascertain the popularity, scope and availability of complementary and alternative medicine (VTCT recommends the use of one method of research): Define and evaluate market placement, provide information regarding future trends, identify customer needs and requirements, discover what potential clients think of the business and available therapies, provide an evaluation of advertising and promotional strategies and their content, reveal opportunities for business development and improved competitiveness, discover opportunities for increasing profit.

**Desk research:** Internet, social media, creation of own online surveys, sector/published surveys, professional associations, professional journals, trade magazines and other publications, industry information, public library searches, press clippings, books.

**Field research:** Telephone research, written questionnaires, street interviewing, face to face interviewing, treatment/therapy/product tests, consumer panels, focus groups.

**Data collected from market analysis:** Competitors and current business landscape, viability of the project, objectives, budget forecast, start-up costs, set-up phase, for example, hiring consultants/advisors, preparing questionnaires, samples, purchasing mailing lists, reporting, and reference document to support any banking applications or for investors, business plans.
Complementary and alternative therapies:
The Greek term Holos, the concept of the holistic approach to care, supporting the person as a whole – physical, emotional and spiritual needs. Complementary and Alternative Medicine (CAM), use of a non-mainstream therapy alongside conventional medical treatments prescribed by client’s doctor – considered complementary. Use of a non-mainstream therapy instead of conventional medical treatment – considered alternative.

Definition of allopathic medicine – refers to the broad category of medical practice that is sometimes called Western medicine, biomedicine, scientific medicine, or orthodox/modern/conventional medicine, the separation of healing the mind and body from the spiritual aspects of health, medical search for physical causes of ailments and treat acute situations.

Features of complementary/alternative therapies: Homeostasis/equilibrium, homeodynamics, placebo effect.

Concept of balance and harmony in the body and how this may be achieved using the following (VTCT recommends the study of three of the below):
Acupressure, acupuncture, Alexander technique, ayurvedic medicine, Bowen technique, chiropractic, craniosacral therapy, crystal therapy, homeopathy, hydrotherapy, hypnotherapy, Indian head massage, iridology, kinesiology, Lomi Lomi/Hawaiian massage, lymphatic drainage massage, mindfulness based stress reduction, Neuromuscular Technique (NMT), Neurolinguistic Programming (NLP), Neuroskeletal Re-alignment Therapy (NRT), osteopathy, reflexology, reiki, remedial and therapeutic massage, spiritual healing, shiatsu, sports massage, stone therapy, subtle energy/vibrational therapies, Thai massage, therapeutic touch, vertical reflex therapy, Traditional Chinese Medicine (TCM), yoga.

Definition of stress: Any factor that can affect mental or physical health, the body’s response to physical, mental or emotional pressure, short and long term effects.

Comparisons between complementary and alternative medicine and allopathic medicine: Differences/similarities, methodology of research/study, availability, choice, personal beliefs, cost, benefits and effects (including side effects).
The importance of government guidelines in relation to education, training and regulation of complementary and alternative medicine (VTCT recommends that you should gain an awareness of legislations applicable to your area from the list below): Regulated therapy qualifications (VTCT), National Occupational Standards (NOS)/professional standards, codes of ethics, professional practice and insurance – professional associations/membership bodies, voluntary regulation – Complementary and Natural Healthcare Council (CNHC), accredited registers - Professional Standards Authority (PSA), statutory regulation - Health Professions Council (HPC), EU Directive on Traditional Herbal Medicinal Products, Medicines and Health Care products Regulatory Agency (MHRA) guidelines on aromatherapy, London Local Authorities regulations (massage and special treatments licence), House of Lords, Science and Technology (Sixth report, 21 November 2000 on CAM), Department of Health report on CAM, World Health Organisation Traditional Medicine Strategy 2014-2023.

Learning outcome 3: Be able to understand the differences between complementary, alternative and allopathic medicine
Learning outcome 4: Be able to understand the progression routes when working in complementary and alternative medicine

Examples of training and career pathways in complementary and alternative medicine: VTCT regulated qualifications – progression routes, Continuing Professional Development (CPD), professional association membership, employment (spas, salons, cruise liners, sports and events massage, complementary therapy clinics, sports rehabilitation, physiotherapy, health care centres, hospice and palliative care centres, chronic health care centres and support groups), self-employment.

Further career progression: CPD – required by professional associations, may be obtained by attending lectures at exhibitions/conferences organised throughout the year, additional training courses/workshops or contribution to research or published articles.