Abstract

Watsu services, one-on-one bodywork in warm water, were provided in 30-minute sessions twice a month for eighteen months to sixteen residents in their 70s and 80s who lived in a continuing care retirement community. The residents’ histories included various physical ailments: arthritis, fibromyalgia, multiple sclerosis, hip and knee restoration and/or replacement, cancer, spinal fusion, and Parkinson’s disease with associated neck, torso, and limb rigidity. Some had mild anxiety.

After eighteen months of services, self-assessments of (1) aches and pains, (2) emotional stress, (3) body flexibility, and (4) ability to relax before a typical Watsu session were compared with self-assessments after the session.

These assessments plus anecdotal reports indicate a substantial improvement in reduction of aches, pains, and emotional stresses. Also indicated are enhanced body flexibility and ability to relax at the conclusion of each session. No undesirable side effects were reported.

Further, participants reported three days or longer relief from pains (25%) and stress (57%).

Implications for this study lead to consideration of Watsu’s inclusion in wellness programs in institutional retirement communities, including exploration as an adjunct to established physical, occupational, and psychological therapy programs.

Introduction

This study is an outgrowth of a service project to provide residents of a continuing care retirement community with regularly scheduled Watsu sessions. The author volunteered to provide Watsu sessions from March 2003 through August 2004 to any resident who wished to participate in this first-time service.

The author, a student in training with the Worldwide Aquatic Bodywork Association, initially undertook a literature review but did not identify any other programs for this older population in an institutional setting and for this extended period of time. Services to younger populations were anecdotal only, indicating general feelings of well being following a Watsu session.

Watsu (WATer shiatSU) is aquatic bodywork, one-on-one, involving a trained “provider” and a recipient, the “receiver.” While standing in warm water the “provider” floats the “receiver” on his/her back, the “receiver’s” eyes, nose, and mouth always above the surface of the water, ears below, and eyes closed. When necessary, floats are wrapped around each of the “receiver’s” legs to provide them buoyancy necessary to maintain their legs just below the water’s surface.

The “provider” guides the body through movements that offer gentle resistance from the warm water against the torso and limbs. The “provider” incorporates gentle stretches, bending, and flexion of the “receiver’s” torso and limbs, with application of pressure points (shiatsu) to the face, head, torso, and back. Interspersed are periods of stillness, in which the subconscious and physical effects of these moving dynamics can integrate. Slowly, connective tissues within the body stretch, relieving compression and creating increased suppleness across the body’s skeletal framework. Control of subconsciously held muscle tension is released. Eastern thought explains that energy centers, or chakras in the head and torso, become balanced along the meridians, diminishing many physical pains, creating emotional calming and centeredness, and often fostering a feeling of self-affirmation and connectedness with others.

Harold Dull conceived, developed and pioneered the Watsu concepts in the 1980s. Watsu is a trademarked word owned by The Worldwide Aquatic Bodywork Association (WABA), based in Harbin, California. WABA is approved by that state to train people to become Watsu practitioners. Such training occurs in seventeen countries.
Methods

In February 2003 the author demonstrated principles of Watsu to any residents of Westminster Canterbury Richmond (WCR) who were interested. Sixteen residents, in their 70s and 80s, chose to become the core of regular “receivers” of the free sessions. Fourteen residents lived independently in apartments and two lived in the Health Care Center.

These residents came with a history of various physical ailments. Included were arthritis, fibromyalgia, multiple sclerosis, hip and knee restoration and/or replacement, cancer, spinal fusion, and Parkinson’s disease with associated neck, torso, and limb rigidity. (When needed, a hydraulic chair lowered residents into the pool). Occasionally there was mild anxiety either alone or concomitant with some of these conditions. All participants were continent and oriented to person, place, and time. Fourteen were women and two were men.

Their personal physicians approved each one’s participation in the aquatic programs. Before every Watsu session they signed a document and indicated any physical, psychological or other limitations that would preclude their participation in the session. Further, they affirmed that there have been no medical claims made for the outcome of the session and that they hold harmless the provider and employees of WCR for any subsequent discomfort or injury following the session. The medical/psychological history and liability release forms were maintained in accordance with the HIPAA Privacy Rules (effective April 11, 2003.)

Each resident was provided two 30-minute sessions monthly in the WCR therapeutic pool. (Optimally, one-hour sessions in 94 - 98 degree F water are recommended by WABA; but the temperature of water in the WCR pool was 91 degrees F). “Receivers” chilled when sessions approached 45 minutes, but were comfortably warm for the 30-minute sessions.

After eighteen months of providing twice monthly, 30-minute sessions, the author developed and distributed a series of self-assessment questions regarding perceived changes experienced during a typical Watsu session.

Each “receiver” was asked to self-assess him/herself at (1) the beginning and (2) the conclusion of a typical session. The questionnaire requested a self-assessment on four measures: degrees of pain, stress, flexibility and relaxation based upon a scale of 0 (being pain- and stress-free, being most flexible and being very able to relax) to 6 (greatest pain and stress, least flexibility and least ability to relax). Further, each participant was asked to assess how long any benefits lasted. Finally, each was asked to provide anecdotal comments about the effects of the sessions. To encourage these “receivers” to be forthright, they were asked to not sign their name to the survey.

Results

The author chose to count the number of persons who rated at each level, 0 - 6, in each of the four areas. The graphs display groupings where the majority (>50%) responded at the beginning and at the conclusion of the sessions.

Survey Results

Degree of Aches and Pains

60% of receivers rated their pains within the top 34% of the pain level at the beginning of the sessions. By the end of the sessions, 73% rated their pains in the lowest 17% of the pain level.

Degree of Emotional stress

67% of receivers rated their emotional stress within the top 50% of stress level. By the end of the sessions, 87% rated their stress in the lowest 17% of the stress level.

Degree of Body Flexibility

60% of receivers rated their body flexibility within the top 34% of flexibility level at the beginning of the sessions. By the end of the sessions, 73% rated their body flexibility in the lowest 17% of the flexibility level.

Degree of Ability to Relax

53% of receivers rated their ability to relax within the top 34% of ability to relax at the beginning of the sessions. By the end of the sessions, 100% rated their ability to relax in the lowest 17% of the ability to relax level.

Endurance of Effects

Number of residents judging the duration of relief from pain and stress.

<table>
<thead>
<tr>
<th>Number of residents</th>
<th>Diminished pain</th>
<th>Diminished stress</th>
</tr>
</thead>
<tbody>
<tr>
<td>Less than 1 day</td>
<td>1</td>
<td>2</td>
</tr>
<tr>
<td>One day</td>
<td>4</td>
<td>1</td>
</tr>
<tr>
<td>Up to three days</td>
<td>7 (44%)</td>
<td>3 (21%)</td>
</tr>
<tr>
<td>Three days or longer</td>
<td>4 (25%)</td>
<td>8 (57%)</td>
</tr>
</tbody>
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Anecdotal comments from receivers

• Physical:
  “I have noticed an improvement in my posture that lasts for about a week. Relief from pain lasts for different lengths of time; the pain in my hand goes away for a few hours; other pains stop for about a day.”
  “Not pain-free at the end of a session but feeling so much better and knowing that I will sleep better than any other time.”
  “Since I began receiving Watsu my white blood cell count, for 5 years double the normal reading due to cancer, has steadily decreased.”
  “It is wonderfully relaxing and has helped my back.”
  “I am profoundly relaxed at the conclusion, much more so than at the end of having a table massage, having had table massages for 32 years.”
  “I experienced some chronic leg pain before I began receiving Watsu. It has almost disappeared.”

• Emotional:
  “I sleep better. I have a sense of well being. My blood pressure is so much lower that my medication has been cut in half.”
  “It is the most relaxing experience I’ve ever had.”
  “To have the closeness and the movement of the session is most satisfying.”
  “Touch may be the most important element in all forms of massage, especially among old people whose partners are gone and whose families are scattered. Calling Watsu ‘return-to-the-womb’ therapy is not without reason. The holding, the rocking, and bending into the fetal position is relevant to a sense of well-being.”
  “I don’t know how to explain an additional benefit I’ve noticed. Maybe I’ve found my ‘inner child’ again or maybe I just understand myself better. I do feel a new self-confidence and a sense of being grounded.”
• General:

“I wish more bed-ridden patients had access to this treatment. Treating old people in warm water is as old as the history of mankind, and rarely has the unfortunate side effects that are often the result of medication.”

“It helps physically and mentally to keep the body and spirit connected and useful.”

“This is the most wholesome activity I can experience because it treats my whole body, mind and spirit. It helps my aches and pains, calms my mind and lifts my spirit. This is Holistic Health.”

“Let me count the ways that it has helped me: Watsu has improved my quality of life. There is a euphoria that lingers and as it fades it is replaced by a feeling of well-being and a sense of peace that is delicious.”

Discussion

It’s obvious that these 70 and 80-year-old “receivers” report feeling much reduced pains and stress and greater flexibility and ability to relax as a result of their twice-monthly Watsu sessions. On the four measurements recorded, 73% to 100% report an end-of-session reduction to no-to-minimal level of pain and stress and a much greater flexibility and ability to relax. Also, and equally important, is that the majority of “receivers” (69% - 78%) report diminished pain and stress up to three days or longer.

No undesirable side effects of the Watsu services were reported.

As a service to older and disabled residents in long-term residential facilities, it is the author’s opinion that Watsu services should be an integral offering in any general wellness program. Further study should be undertaken to determine the physical, occupational and psychological value that Watsu services may add to traditional therapy services. Lastly, residents’ reduced stress and pains and greater feeling of well being provided added benefits for the staff that cares for these individuals.

In general, an investment of Watsu services for one hour each month per resident has paid great dividends in the overall health and well being of these older citizens.

For additional information
• Worldwide Aquatic Bodywork Association: http://www.waba.edu
• Westminster Canterbury Richmond: http://www.wescanric.org

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