



Therapeutic Touch Canada News/Nouvelles

Volume 7, No. 1

Winter, January, 2017

- Content -

Editorial, Publication details	2	Incorporating TT into Nursing Practice	
Reports from the TTNC		by Cheryl Larden	13
and AGM Report	3	Book Reviews	14
Reports from Member Networks	4	Letters	14
The Energy Cure, by Gail Douglas	7	Witnessing Immortality	
If Someone Asked For Your Help . . .		By David Maginley	15
by Diane Kroeger	8	Therapeutic Touch Groups	
Our Experiences with TT	9	TTNO's "Branches"	17
"A Place of Practice"	10	My Therapeutic Touch Journey (So Far)	
Mary: A Therapeutic Touch Short Story		by Julie Boyse	18
By D. Juno-Johnston	10	Index, Vol. 6, <i>TTC New/Nouvelles</i>	19
Baycrest Study Published	11	TTNC Recognized Teachers	20
A Book Review Becomes a Life Review		TTNC Groups Across Canada	21
by Lynn Carscallen	12	TTNC Member Networks	22

Every Network member is supporting the growth & acceptance of Therapeutic Touch® throughout the world!

Thank you for being a member!

Be sure to read about TTNO's

Therapeutic Touch Awareness Week!

"CARE 150" is designed to promote the acceptance of Therapeutic Touch and to celebrate Canada's 150th birthday.

See page 5

Thoughts from your editor . . .

Welcome to the Winter/17 issue of your Therapeutic Touch Canada News/Nouvelles

1

I expect you are curious about the number 1 being here! Well, from the Numerology viewpoint, the year 2017 is a "1". Whether or not you agree with this 'nonsense', it is very 'auspicious' for our new year.

Number one is the beginning of things.

"The shape of the number 1 reflects its meaning; it walks upright with pride and purpose. Strong, determined, unwavering and with specific goals in mind, the 1 can turn dreams and ideas into reality. It pushes obstacles aside or simply drills right through them.

"The number 1 has a built-in perfection and balance and tends to have a simple, straightforward view of life and its many complexities. It does not hesitate when it senses a need for confrontation. The number 1 cannot witness injustice without jumping in and setting things straight.

"If you find yourself in the service of a 1, you will be pushed to the limit, but you will also, without a doubt, *become the best you could ever be!*"

In case you are wondering, Therapeutic Touch is a '4', which "implies great satisfaction in accomplishments and favors results over financial reward or public recognition and is *good at working with the hands (craftsman)*"!

From <http://www.numerology.com/>

So, as we consider our Therapeutic Touch "New Year Resolutions", it is a year for great beginnings and new ideas!

Now that we have your attention . . .

We'd like you to participate in the easiest survey you have ever done! Simply click on the Email of your regional newsletter rep (listed in the column to the right) and type "Reading" in the subject line.

(If that doesn't work, just 'copy and paste')

It will let us know how many readers we have!

Thanks so much!

The index to the four issues of the 2016 newsletter is on page 19. The index of [all issues](#) is now on the TTNC web site. Please take a look at the excellent articles which have been published over the years. Many of them can support your efforts to bring Therapeutic Touch to the attention of various organizations in your community.

We welcome our new webmaster, Julie Boyse. Passwords continue to plague us. Please ask your regional Network how to get these. Group leaders may also know.

Very best wishes for an amazing 2017!

Mary Simpson

If you are a Group Leader, please print this newsletter and take it to your meetings. Mention it as a benefit of becoming a Network member!



Therapeutic Touch Canada News/Nouvelles

is the quarterly newsletter of the Therapeutic Touch Networks of Canada. It is emailed to Member (Regional) Networks and is distributed by them to their members.

The opinions and ideas expressed by the writers in this publication are their own and are not necessarily endorsed by Therapeutic Touch Networks of Canada.



Next Issue: Vol. 6, #2, Spring, 2017

Publication date April 30, 2017.

Deadline for Submissions: April 8, 2017

→ **Please send submissions to:**

mary.simpson@cogeco.ca

Late submissions may be held for the following issue.

Written submissions may be in any format.

A one-page article is approximately 900 words.

Writers are requested to include a bio of up to 100 words.

→ **Pictures in "jpg" format only please.**

For their contributions to this issue we thank,

for the cover photo, Liz Corbet

Gail Douglas, Diane Kroeger, Dorothea Juno-Johnston,

Lynn Carscallen, Cheryl Larden, Julie Boyse,

Marlene George, Heather Wakeling, Judith V. Friedman,

Gina Freeman, Bellaruth Naperstek, David Maginley

and all the Regional Chairs!

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Your TTNC Newsletter Committee

If you have any questions, ideas or concerns about the newsletter, please contact your local representative.

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Correction Notice: Vol. 6, #4, Autumn/16

Page 12, under picture of 2016 Dialogue participants, Peggy Frank was listed as "TTNC's representative on Therapeutic Touch International's board".

She is a member of the TTIA board of trustees, (program office) but not a TTNC rep.

<http://therapeutictouch.org/board-of-trustees/>



The Therapeutic Touch Networks Canada

Update from the Therapeutic Touch Networks Canada



TTNC had its Annual General Meeting on November 20, 2016. Each of the Member Networks and TTNC committees were represented. All the reports for that meeting were asked to be shared with the membership of each Member Network.

The only change to report for the TTNC Board is Sheila Camp is now the TTNA rep, replacing Jean Gurnett. I would like to take this opportunity to thank Jean for her contribution, dedication, and commitment to TTNC.

With the New Year upon us, it feels appropriate to simply refer to my AGM report of TTNC's accomplishments and future goals for 2017, which has been included below.

I'm wishing you all Optimum Health, Peace, and Prosperity for 2017.

Sincerely, Paulette Deveau, TTNC President

Report from TTNC AGM 2016 – Accomplishments and Goals

Achievements for 2015-2016:

Advocacy:

- TTNC brochures were made available to delegates participating at national/international conferences
- Acknowledged the participation of TT'ers as teachers profiling Therapeutic Touch at Conferences
- Shared relevant information about Advertising Standards Canada; resulting from a complaint against a Member Network (MN) that Therapeutic Touch is not being supported by reliable, science-based evidence
- Developed points of reference for MN for such complaints with ASC; these were shared in the newsletter
- Continue to promote Therapeutic Touch sessions as part of extended healthcare plans with TT'ers providing the generic letter to clients, events, and so on.
- This generic letter was translated in French and is now available to TT'ers in French communities across Canada.

Communication/publicity

- MN reps on TTNC board related information back to their Boards
- Shared information among MN via TTNC News, website, committee work
- TTNC became a member of TTIA.
- Networking between TTNC and TTIA - at the President level - to continue as the need arises
- TTNC brochures distributed at conferences and in the community with financial support for printing
- Website committee was formed with a new webmaster; website underwent some cosmetic changes
- TTNC newsletter published quarterly and distributed to all members of the Networks

Education:

- The National Curriculum committee on Teaching Therapeutic Touch continued working on developing a basic national curriculum for teaching Therapeutic Touch
- Level One was changed to Beginner Therapeutic Touch and its new teaching guidelines were approved by the committee members at the end of 2015. The TTNC Board distributed these to the MN for their use.
- The guidelines for Intermediate and Advanced Levels are still in process.

Governance:

- Continue to develop policies to effectively manage the TTNC Board and the work of its committees
- Encouraged TT'ers to apply for the very reasonable National Liability Insurance
- Remittance of necessary government forms

GOALS for 2016-2017

Advocacy:

- Continue to connect with other professional groups and modalities on a national level to promote Therapeutic Touch
- Continue to connect with community and special interest groups
- Continue to assist MN where possible in their advocacy work through sharing info among MN, national and international affiliations



Reports, continued from page 3

Communication:

- Encourage the use of and readership of the TTNC News to share information among the MN
- Keep the TTNC website up to date and relevant for all TT'ers and the public
- Continue networking with International Therapeutic Touch organizations, i.e. TTIA
- Continue encouraging the connections among MN and their relationship to TTNC

Education:

- Continue to support and encourage the work of the National Curriculum committee on teaching Therapeutic Touch

Governance:

- Continue to champion the work done by the TTNC committees
- Maintain and improve the structure of the TTNC organization with review/establishment of new policies/procedures
- Update, maintain, and improve efficiency of TTNC's Drop Box; minutes, reports, etc.
- Determine the governance of the responsibility of the Therapeutic Touch Trademark once the transfer to TTNC from TTNO is completed. The filing of the application for this transfer is in process.

*Submitted by Paulette Deveau,
TTNC President*

TTNC Budget for year ending Aug. 31, 2017

	<u>\$ 3,685.94</u>
Projected Revenues 2016/17 dues from- Member Networks: Note :Based on \$2.00/member	
British Columbia BCTTNS	\$ 204.00
Manitoba MTTN	\$ 36.00
Quebec TTNQ	\$ 116.00
Alberta TTNA	\$ 58.00
Ontario TTNO	\$ 972.00
Atlantic ATTN	\$ 200.00
Annual dues from member networks	\$ 1,386.00
Total Revenues and Bank Balance	\$ 5,071.94
Projected Expenses 2016/17	
Bank charges & postage	\$ 40.00
Annual Incorporation fee	\$ 40.00
Telephone cost for meetings	\$ 223.00
TTIA membership	\$ 62.00
Web site housing (paid q5 year,pd 20/11/16)	\$ 90.00
Improvements to Website	\$ 282.00
Trademark (costs?)	\$ 500.00
Brochures and Advocacy	\$ 500.00
Conference Attendance	<u>\$ 500.00</u>
Total Expenses	\$ 2,237.00
	\$ 2,834.94

Reports from Member Networks Across Canada

British Columbia Therapeutic Touch Network Society

BCTTNS is lucky to have a Board of dedicated and enthusiastic members who work hard to continue the growth and development of Therapeutic Touch in BC.

One of our successful events which assist our members to achieve their Recognised Practitioner status is the Practitioner Days, where practitioners can receive up to 4 supervised sessions from 4 different supervisors. This has been very successful and we have seen an increase in TTRP's in our membership.

We are currently in the planning stages of our **20th Anniversary AGM/Conference** to be held on May 6, 2017 and we are honoured to have Crystal Hawk as our Guest Speaker. We will also have a Teachers evening on the Friday and a Practitioner Day on the Sunday. Details and Registration forms are on our website (bctherapeutictouch.com).

Thank you to the Board members of TTNC – you are doing a great job connecting our “family” of TTers across the Networks of Canada.

Stay warm and cozy through the winter months.

Jacqui Saran, President BCTTNS

This newsletter is for you as a member of your regional Network.

Its intent is to bring you information about what's happening in Therapeutic Touch® across Canada.

To help us with this, we'd like to know • What you really like in this newsletter? • What could be more helpful?

What would be helpful to you as a TT practitioner, teacher, Group Leader/Member?

Talk to your regional Network Newsletter Committee member ~ See Page 2

The Therapeutic Touch Network of Ontario

We are delighted that all of the TTNO Board positions are filled. This will allow us to accomplish the changes that we have been given the mandate to make.

Our Membership Renewal Form has been simplified and includes two new membership categories, *Associate Member* – anyone who supports Therapeutic Touch®, and because keeping their experience and wisdom within the Network is an honour and a privilege we now have *Retired Member*.

The *Recognized Practitioner (RP)* category now has two sub-categories to reflect the type of service that the RP is providing - *Volunteer RP* and *Professional Practice RP*. Recognizing that many RPs confine their practice to volunteer work, we have reduced the annual fees to keep them in line with a General Member. General Members, who may have seen the annual fees of an RP as a disincentive to continuing education, can now work towards that status without seeing an increase in their fees.

We also recognized that many of our members have established a professional practice and charge a fee for service. These members were asking the TTNO to provide more workshops that would assist them in growing their practice. Our goal is to recognize both these areas of service for our RPs.

We overhauled the New Member program and offered the first year of a new membership for half price. As a result we are continuing to offer this incentive to any person who has received a minimum of Level 1 TT study.

"Practice Groups" have become "TTNO Branches" (See page 17), and "Practice Day" has become "Professional Development Day".

⇒ **We have planned a *Therapeutic Touch Awareness Week* called "CARE 150" to promote the acceptance of TT and to celebrate Canada's 150th birthday. Branches and teachers will actively promote TT in a community outreach project that will allow us to offer Therapeutic Touch and information sessions in conjunction with a community partner.**

The goal is to schedule 150 events during the first week of May. Participants who schedule an event will receive the necessary training and tools from the TTNO in Ontario as well as any other Network through the TTNC. The committee is working hard to roll this out in a very big way. We hope that it will become an annual event that networks and community partners will look forward to it in Ontario, Canada - and perhaps one day, globally!

Stay tuned for more on this... *We are dreaming BIG!*

Peace and Light, Shirley Boon, Chair

Please contact Peter Cheshire for further details:
pcheshire@primus.ca

The Therapeutic Touch Network of Manitoba

Hello from Manitoba

Currently we have level one and level two TT courses taught by Laura Carroll. We also welcome Tanya Sabourin as a teacher.

We offer one year membership to the Manitoba Therapeutic Touch Network for new members.

Blessings to all.

Steele Pruden, Chair

Atlantic Therapeutic Touch Network

Practice Groups in the Atlantic continue to volunteer at various public venues and provide mini-sessions of Therapeutic Touch® and the TTNC information brochures. The response to the brochures is quite positive as they are "inviting" and so professional looking! The brochure committee under the wing of Mary Simpson have done a great job (and I'm not saying that just because I'm on the committee!). Our own ATTN teacher Cherry Whitaker is working on a draft of one for "athletics" which she will submit to the TTNC Committee.

The TTNC brochures look so good in the plastic "holders" one can buy at stationary stores, so our Charlottetown Practice Group has several in strategic areas of the Hospice facility - right at the front door/ reception area and by the piano. It may have helped make it more "visible" to family, volunteers and staff that we are there to provide a session, as our volume has increased including some "general public" coming to receive on Thursday mornings - so we are busy as are the ATTN members in Prince County Hospital Hospice in Summerside.

Recently Stratford PG Leader Mary Hughes and I were kept busy at the UPEI Health Fair with requests for information and/or a session of Therapeutic Touch. We also presented at a Cancer Caring Day sponsored by the Canadian Cancer Society-PEI Division which was well received

Education Chair Cherry Whitaker and PG/Practitioner Liaison Barbara Stone had to postpone the trek to Stratford, and Kensington PEI to meet with practice group members on December 1, due to the first snow storm of the season! A component of their presentation will be a review of the work presented by Dr. Mary Ann Hanley at the annual ATTN Conference/Fund Raiser held in PEI in May; working in pairs/quads and dialogue.

Our December raffle ticket draw was won by past ATTN Board member Sandra Fraser, Stratford, PEI! The lovely lap quilt was made by ATTN member in S.W. Nova Scotia, Lillian Cunningham and finished by 92 year-old Evelyn Arsenault, an Acadian woman in Tignish, PEI. Huge thanks to both women!

Our condolences to Janet Rowe and family on the sudden death of her daughter. Distant loving TT is sent her way

May 2017 be good to each of us!

Judy Donovan Whitty, Coordinator

Therapeutic Touch Network of Quebec

Therapeutic Touch is one of the holistic complementary services offered at the West Island Cancer Wellness Center (www.wicwc.org) available to people undergoing cancer treatments and their caregivers.

Monique Gregory, RP, approached the center in 2010 and after an interview was welcomed to offer sessions. Response from the participants was very favourable, keeping her schedule full. When Monique was no longer able to give of her time she asked me, Dolores MacKenzie, RP, to keep Therapeutic Touch sessions going at the center. I started there in February of 2011, and with an existing waiting list for these sessions we can say that the results are very positive.

Submitted by Dolores MacKenzie, RP

The Therapeutic Touch Network of Alberta

I find myself feeling very grateful to have learned Therapeutic Touch®. There seems to be an increased incidence of workplace injuries as well as injuries as a result of falls on ice among my family and friends this season. It is a comfort for me to be able to offer Therapeutic Touch at a distance to those who are too far away for me to give other assistance.

This past November, Sheila Camp and Linda Terra gave a Therapeutic Touch presentation at the "Good Companions 50+ Club" here in Calgary. The group of 22 senior ladies were very interested. It lasted 1 hour and was organized by Karen Komanac.

Linda Woznica attended Wellness Day in September at Ardrossan and handed out Therapeutic Touch brochures from her table. She also handed out brochures at the Millwood Seniors Centre this past October and at the Allen Gray Conynuing Care Center in November. All of these activities have given Linda the opportunity to answer questions from the public about Therapeutic Touch.

Our practice groups started up again in September after a break over the summer. Should anyone wish to join us when they are visiting Alberta, information can be found on our website; www.therapeutictouchalberta.com.

Thank you TTNC for your support to our Network in our endeavour to communicate about Therapeutic Touch to other professional organizations .

Sherry Crann-Adair, TTNA

Toucher Thérapeutique du Québec

Le toucher thérapeutique est un des services complémentaires en santé holistique qui est offert au Centre de bien-être de l'Ouest-de-l'Île pour personnes atteintes de cancer (www.wicwc.org) et leurs soignants.

Monique Gregory, praticienne reconnue, a approché le centre en 2010 et suite à une entrevue a pu offrir des sessions de toucher thérapeutique. La réaction des participants a été très favorable ainsi gardant son horaire assez chargé. Lorsque Monique s'est retrouvée incapable d'offrir ses services, elle m'a demandé, Dolores MacKenzie, praticienne reconnue, de continuer à offrir des sessions de toucher thérapeutique au centre. J'ai débuté au centre en février 2011 et les résultats furent très positifs au point d'avoir une liste d'attente pour ces sessions.

Novel Idea from Annual TTNO Conference Offers Opportunity to Open Dialogue!

Each participant received a button



Think of all the possible venues where your button could raise awareness and offer an opportunity for people to ask questions or to start a conversation.

Your group could wear them to Wellness Fairs, or in schools and churches, or any place where people gather!

However . . .

once you put on your button be prepared to field any number of questions!

A perfect place to practice possible answers would be at your local Group – a great resource and a fun way to 'practice your response!'

Diane May's new book *Teaching Therapeutic Touch*, has a challenging question/answer exercise that could be practiced in your Group

If you are interested in purchasing a button contact the TTNO office for informationton .

ttno.membership@bellnet.ca

At every moment in every person's life there is work to be done, always work to be done, some of it small, some of it Great. The Great Work, in a sense, always has to do with healing the world, changing the world, and, as a necessary predicate to that, understanding the world. You rise every morning aware that you are called to this work. You won't live to see it finished. But if you can't hear it calling, you aren't listening hard enough. It's always calling, sometimes in a big voice, sometimes in a quiet voice.

~Tony Kushner ~ (in The Great Work)

Mary: A Therapeutic Touch Short Story

Dorothea Juno-Johnston

She lived her life in service to others.

Her service included forty years as a Catholic Nun, time spent in the ghetto in Roxbury, Massachusetts teaching children of color during the difficult times of the 1960's, and traveling to Peru to be with the native people there in any way that would be helpful.

Mary has lived 93 years and recently has been diagnosed with Alzheimer's. Sometimes she doesn't remember lots of things; including some of her family and friends. In the middle of a visit she says to me,

"What should we do now?"

"How about you get a rest and some Therapeutic Touch?"

"Oh, yes, let's do that". Her face lights up and she smiles.

We help her to bed, she closes her eyes: a peaceful look comes over her face as previous TT experiences creep into her consciousness. Clearly some part of her brain and/or heart has held onto the feelings that come with a Therapeutic Touch treatment.

The energy of Therapeutic Touch gets through to her and comes back to her, even as the rest of her memory fails her. The above outcome is worth all the years of training and work that allows me to be competent at this modality and bring it to my sister.

When the treatment is finished, my daughter and I quietly leave the room as Mary sleeps peacefully.

© Dorothea Juno-Johnston, MA, September 2015 (Printed with permission) *Reprinted with permission from Cooperative Connection – Winter March, 2016*

**Plan now for your 2017
Therapeutic Touch studies . . .**

In 'the East' at

Pumpkin Hollow Retreat Centre, NY

www.pumpkinhollow.org

~ ~ ~ ~ ~

In 'the West' at

Camp Indralaya, WA

www.indralaya.com

***"an experience forever
in your memory"***

The Energy Cure

By Gail Douglas, BA, RP, TTNO

After seeing the book review in the Autumn/16 issue, I read "The Energy Cure" by William Bengston, PhD. He is a renowned healer and scientist, and, in this book, he chronicles his journey from his early academic life until thirty-five years later, when he had become an established researcher in an American university. His memories are sometimes humorous, occasionally angry and bitter, and frequently full of awe and wonder.

I was particularly interested in an experiment he described which had been conducted in the 60's by Cleve Backster who attached polygraph electrodes to a plant in his office and proceeded to threaten it with fire. The polygraph recording pen registered "extreme alarm".

In 1973, as a student at the University of Guelph I took a course in Parapsychology. I performed this same experiment as part of the course. I attached the electrodes to a plant and threatened it with fire. Imagine my reaction when a response registered on the polygraph. I was stunned! I couldn't believe my eyes. Again and again, I threatened the plant, and each time a response was recorded. I wrote up my experiment and submitted it to the prof. The class was to meet with the professor the next week in his office. I was a little late arriving, and as I walked in the door, there was a lab technician sitting in on the meeting. I heard him say "There's no way she could have faked this polygraph reading". They all turned and stared at me with surprised looks on their faces.

This was NOT the beginning of a scientific revolution at U of G. Thirteen years later I was considering a career change and I returned to U of G to take a few more courses. One of the courses was Experimental Psychology. I had a number of interesting discussions with the prof about Psychic phenomena and Extra Sensory Perception. He was adamantly against the whole idea of it. He finally said to me "Psychic phenomena is subjective, like a religious experience. If you can't design an experiment that will yield predictable and reliable results, no one will believe it."

We are well on our way to doing that with the work that Dr. Bengston has done. A number of pioneers have published works in this field. They have been met with scorn, disbelief, and accusations of fakery. Academia has been united in their resistance to this reality, despite all kinds of evidence. However, cracks are beginning to appear in the facade.

Therapeutic Touch® and other energy modalities are becoming more and more accepted, and Therapeutic Touch is part of the curriculum in many universities. Our concept of energy is gradually evolving and becoming an acceptable part of our daily lives. It has taken forty years to reach this stage, and Therapeutic Touch is very much a leader in this changing face of our culture.

What will the next forty years bring?





Early Bird Registration: February 15!

**The Fourth
International Congress
on Therapeutic Touch®**

**“Deepening Our Practice As
Compassionate Healers”**

April 21 to 23, 2017

**Eaglewood Resort & Spa
Chicago Area**

**TEACHERS INTENSIVE
open to all interested
in teaching Therapeutic Touch
April 20th and 21st.**

The 2017 Congress will be special because
we will be in the company of . . .

**Dolores Krieger, PhD, RN, now 95,
“COMPASSION AS POWER IN THERAPEUTIC TOUCH:
A HIGHLY HUMAN FUNCTION”**

Researcher **Gloria Gronowicz, PhD, QTPP
“UNDERSTANDING THE HUMAN BIOFIELD”**

Pres. of the American & Internat’l Theosophical Society
**Tim Boyd, BA,
“SCIENCE OF THE HEART”**

*“The capacity to heal is inherent in all, awakened in some
and trained in very few. More than a science, greater than
an art, healing and the intention to heal opens the door
to our potential to be fully human. It is a science that
demands the participation of the deeper dimensions
of our being – a Science of the Heart
Tim Boyd*

Concurrent Seesion presenters include:

Serbulant Bicer moderating an International Panel.
Cheryl Larden, BSc, RN, • Mary Anne Hanley, PhD, RN,
Denise Coppa, PhD, RN • Deborah Shields, PhD, CCRN,
Tama Recker, TTRT • Debra Jo Whitcomb, BSN,
Kathleen Barnett, MSN • Tamara Wadell, PhD,
Peggy Frank & Peninah of Rwanda • Sylvia Weber, PCNS,
Janet Wehr, RN • Diane May, RN

**If YOU are interested in attending,
tell your local TT Group and arrange to go together**

As an Albertan, seafood is not part of my regular diet.

I am walking on Seaview beach north coast of Prince Edward Island. I see a trap lying above the tide. As I approach I see that not only is it undamaged but it is not empty!

What colour are dead lobsters? There are four heaped along the far side, one upside down draped over the others. I stand back and as is my custom for the dead, I do a Therapeutic Touch clearing and apologize.

“Wait, what’s this?” I feel a solid energy rising to meet my hands. I go to the far side of the cage and peer at the lobsters; eye stalks pop out! I feel/hear a plea “Let us out”.

I have no knife or other tools to cut through the cord. I wiggle slats, try and pull on staples. What can I do? Wiggling metal bars at the top, something gives – oh a door! I open it, tip the trap/cage on its side and a big lobster falls out.

I pick it up behind its head and take it to the waves. It flips over so I right it and move it in the water. It starts to move a bit. I do this with the next two, moving them forward as the tide recedes.

I feel a calling and return to the last one in the trap. This upside-down limp one needs to be shaken out. I’m not going to reach in there, just in case. It is a dead weight, flopped over my hand but I take it to the sea anyway. Its one claw is partially severed. Like the others I do TT clearing, and talk to it. It needs more, it moves into the waves but it starts to revive. The two other big ones are wiggling hollows in the sand. The smallest has disappeared in the waves.

I wish all of them good luck – hope you make it into the deep waters when the tide turns. The last one needs one more move to the waves. I feel a connection to all those who inhabit Mother Earth.

I attended Kensington’s Therapeutic Touch practice group that evening and shared my TT story. They exclaimed “we would have put them in the pot!” They excused me as “someone from away” and a tourist. But if someone asked you for help would you eat them?

Thank you for such a warm welcome to the PEI TTers. I felt enveloped in a warm sisterhood at the Thursday night practice and at Saturday’s potluck.



Our Experiences With Therapeutic Touch

From Marlene George, RT, TTNO

"This is the third year that I have been asked as a volunteer to organize along with another woman, the "Wellness Zone" at the October, 2016 two day Zoomer Show in Toronto. Each year we have seen 500 or more people come through to the Wellness Zone to sample free holistic/complementary treatments offered by 30+ practitioners. At times, we were so busy that we could not accommodate everyone and had to turn them away.

Over the course of the show, we had 20 Reiki Practitioners, 5 Therapeutic Touch® Practitioners, 6 Reflexologists and a Kinesiologist. I am very pleased that this year we had a stronger presence of Therapeutic Touch Practitioners.

The interest in Therapeutic Touch and other healing modalities was overwhelmingly positive. The booth was continuously busy with participants standing in queues, waiting to sign up for the opportunity to try out many of the skills being offered.

Mini sessions of Therapeutic Touch were offered to literally hundreds of Zoomer Show participants. Many were receiving it for the first time, and remarked that it was a positive experience for them. I found it gratifying that several participants *returned to the booth on Sunday* to remark on the benefits they received from these sessions! Two reported feeling pain free and being able to sleep through the night.

Participants remarked that Therapeutic Touch is not as well known as Reiki, and the most common question I heard was: "What is the difference between Therapeutic Touch and Reiki?"

Heather Wakeling, RP, commented,

"As a Practitioner, I found the event a marvelous way to introduce the modality to potential clients

Judith V. Friedman, enjoyed her volunteer experience.

"It is an opportunity to introduce folks to Therapeutic Touch who would not ever think of exploring this healing modality were it not *placed conveniently in their path, and offered gratis.*

"I get a real kick out of 'waking' someone from such a brief demonstration, when they look at me in amazement at how relaxed and calm they can feel in the midst of all that surrounding hurly burly and noise. That this positive state was achieved with just a few minutes of TT treatment is invariably noted and appreciated."

Marilyn Mighton, RT, commented,

"The flexibility of Therapeutic Touch never ceases to amaze me and I was made aware of this again as a volunteer at the October Zoomer Show in Toronto. This awesome experience reminded me of a time many years ago when I was an insecure beginner and we were all sent outside to do our sessions at the TT Retreat in Aurora. The day was sunny but the fact that gale force winds were blowing (at least that is

what it felt to me) seemed not to concern to the instructors. Dolores Krieger was walking around asking us " What are you doing now?" It made me very confused, but then I felt cues from the field despite the inhospitable environment for subtle energy work. I was very excited. So, at the show, when I saw the people lined up for treatments, bagpipes playing loudly, and the work stations very crowded, I just began trusting all would be well, and it was. I introduced TT to my clients, offered a mini treatment, and sat with them as they rested. I think it was beneficial for each of them and I enjoyed the experience as well as having fun!

Watch for Zoomer Show in Vancouver, March 11-12/17

<http://www.zoomershow.com/splash/>

~ ~ ~ ~ ~

Post-Operative Therapeutic Touch

In May, 2016, I was diagnosed with a blocked aorta and underwent surgery in June. I had made arrangements with Albert Crouse, RP, to come to the hospital as soon as he could after my surgery, to give me a Therapeutic Touch session that would help to 'move' the anesthetic and to restore balance so that the natural healing process would kick in faster. I was not disappointed.

It was amazing how having sessions helped me heal faster, both physically and emotionally. I barely remember Albert treating me, but I can remember how good it felt to have the energy flowing more smoothly during the session and after.

As soon as I came out of the recovery room my mother asked the surgeon if it was okay for me to receive Therapeutic Touch. He didn't know what it was, nor did my mother really understand it.

The surgeon replied, "I don't care what he does as long as he doesn't touch her!" Another *plus* for Therapeutic Touch.....no touch!!

I was fortunate to be in the Valley Regional Hospital in Kentville, where the staff – from the cleaning staff, to the nurse and doctors – are so caring and considerate of the patients . . . and then to have a Therapeutic Touch practitioner in the area was simply great!

Thank you Albert!

Gina Freeman, RP

Bridgewater Practice Group, ATTN

In each issue we will bring you the experiences of Therapeutic Touch® practitioners working with specific conditions.

For the Next Issue . . .

Your experiences with edema?

Let us know your experience... if you need help please contact your Regional Newsletter Representative (p.2)

Baycrest Article Re Therapeutic Touch Use in Dementia Published

Helen Senderovich MD, MCFP, (COE), (PC) a physician at Baycrest Health Science System with a practice focused on Palliative Care, Pain Medicine and Geriatrics, was responsible for the information on the excellent posters *Therapeutic Touch in Geriatric Palliative Care* and *TT in the Management of Responsive Behaviour in Patients With Dementia*. These posters were published in previous issues of this newsletter.

In December, 2016 she shared the news that the TT in Dementia article was published in the *Advances in Mind Body Medicine*, a peer reviewed journal¹, pages 8 to 13.

http://innerdoorway.com/advances/digital/adv30_4/.

In addition, the poster was published on *Canadian Virtual Hospice* as well.

http://www.virtualhospice.ca/en_US/Main+Site+Navigation/Home/For+Professionals/For+Professionals/The+Exchange/Current/REVIEW+Role+of+Therapeutic+Touch+in+the+management+of+behavioural+and+psychological+symptoms+of+dementia.aspx

With the intent of making a decision as to whether Therapeutic Touch® would be a useful component in patient care at Baycrest, the two studies were however, done in different ways. The PC study was done at Baycrest and consisted of Therapeutic Touch practitioners giving sessions to residents and recording the outcome. The study on TT and Dementia was done through a 'review of the literature' (research).

With great excitement I went to the article in the *Advances* journal. The authors listed were Ananthavalli Kumarappah, MSc., who is on the Faculty of Medicine at the University of Toronto, and Dr. Senderovich.

My excitement was short-lived. Thirty eight References were listed. The second was to the infamous 1996 "Emily Research" sponsored by the skeptics and printed in the *Journal of the American Medical Association*². Even though it was not TT, it continues to plague Therapeutic Touch research searches and is always the first article to appear on a Wikipedia search for Therapeutic Touch.

Further reading revealed other 'challenges'.

- there were a surprising number of typos and spelling errors which one would not expect in a publication of this type.
- the modality was referred to as 'therapeutic touch' - all lower case and without the trademark symbol.
- the authors refer to TT as a "touching modality".

So, although a decision was made that TT would be beneficial in dementia, it revealed the challenge of a person who does not know details of Therapeutic Touch doing a research review.

Although the description of the process was basically correct, it pointed out that many of the studies "lacked a definition of the TT procedure used". To me, this emphasized the

importance of an *International Curriculum* – with common terminology – being absolutely essential for Therapeutic Touch to have validity. (e.g. the term 'intervention' being used instead of 'rebalancing').

Another criticism leveled was "The results were not detailed and consisted of *brief lay descriptions* of behavioural changes". That's a bit of a challenge!

Feedback is now absolutely essential in Therapeutic Touch, and the 'lay terms' need to be translated because, as the article says, "*Understanding the specific behaviours that are improved with Therapeutic Touch will be important in bringing it into clinical practice.*"

An additional challenge appears to be whether or not actual touch is used in the research on people. With Touch in the title an uninformed person could compare it to massage.

The conclusions reached included,

- TT can be explored . . . with dementia because it is associated with the absence of negative sequelae. and,
- It indicates a need for a decreased methodological inconsistency in recording behavioural symptoms".

1. What does "peer reviewed" or "refereed" mean?

<https://library.mcmaster.ca/faq/what-does-peer-reviewed-or-refered-mean>

"Peer review is the process used by publishers and editors of academic / scholarly journals to ensure that the articles they publish meet the accepted standards of their discipline."

2. The 'Emily Research' (done by a 9 year-old) declared itself to be Therapeutic Touch. It was testing the ability of TTers to sense the bio-field in ways that were not TT-related. For an updated review visit:<https://www.ncbi.nlm.nih.gov/pubmed/12564352>

Submitted by Mary Simpson, RN(Ret), RT

Att'n TTNC Members and Groups . . .

The excellent posters on Therapeutic Touch® in hospice palliative care and in dementia from Baycrest Hospital in Toronto (printed in previous issues of this newsletter) could be a real highlight of your displays at presentations, conferences and health fairs, as well as used for teaching..

To receive a 'pdf' of the posters . . .

1. TT in Geriatric Palliative Care

2. TT re Dementia

please contact your Newsletter Rep on page 2 or the editor

Staples store will print copies on heavy glossy paper which can be fastened onto poster board

18"x 24" for under \$20.00,

2' by 3' for about \$35.00

A NEWLY MINTED PRACTITIONER HANGS OUT SHINGLE AND PROMPTLY LOSES ALL CONFIDENCE

by Bellaruth Naperstek - from her newsletter.

Advice to Amy

Your status has changed from 'trainee' to 'finished product'. This can be a scary proposition, and you're not the first person to drag her heels on a real-life roll-out, feeling paralyzed and inadequate. It's actually a pretty natural part of the process. Ask anyone who just successfully got through a Ph.D. dissertation defense, and is supposed to be feeling happy.

This is no huge lapse. This happens to humans all the time.!

It can also help to know that no one ever achieves "finished product" status. *To stay good at what we do, we're all continually learning, refining, mastering and developing.* The best clinicians I know are the veteran practitioners of twenty plus years who still attend weekly peer supervision sessions.

So you may just have to power through this. It's not enough to put up a web page. You have to let people know it's there. That's done through networking, social media, blogging, and buying digital ads.

You may need to do some volunteer work to build up your confidence and expose your work to others who can then refer to you. So, why not break the logjam by helping somebody out who could really use your newly minted skills? Maybe at a domestic violence shelter or vocational rehab agency... or with some kids who need help with test anxiety, or focus and concentration at school.

In fact, why not help somebody out who has the same challenge you're facing – lack of confidence? Wouldn't that be a kick, and a vicarious win for you, too! You'd be fabulous at it and super-empathic, too, don't you think?

So that's my advice. Get moving. Do something. START. Give yourself permission to be awkward at first. Most of us were clumsy as hell starting out – but *our intention to do some good saw us through* until we became skillful and confident. And remember: paralysis just feeds paralysis. Don't get stuck there. Define success as getting moving again. And maybe listen to our guided imagery for Self-Confidence and Peak Performance, too.

Bellaruth Naperstek was a popular presenter several years ago at the TTNO conference in Toronto.

Visit her at:

Bellaruth <newsletter@healthjourneys.com>

THE PLACE OF PRACTICE

A monk recalled, "I remember once I was leaving just as Vimalakirti¹ was just entering the city. I bowed to him and said "Layman, where are you coming from?"

He replied, "I am coming from the place of practice."

"The place of practice, where is that? the monk inquired, knowing there was no temple or monastery anywhere near".

Vimalakirti replied,

"An upright mind is a place of practice.

A deeply searching mind is a place of practice.

Generosity is the place of practice.

Discipline and ethical conduct are the place of practice.

Patience is the place of practice.

Energy and Enthusiasm are the place of practice.

Meditation is the place of practice.

Wisdom is the place of practice.

Kindness is the place of practice.

Compassion is the place of practice.

Equanimity is the place of practice...

Responding with clarity and spontaneity is the place of practice.

Truth is the place of practice...

The very circumstances of our lives is the place of practice.

Earthly desires are the place of practice.

All living beings are the place of practice.

All phenomena in this human life is the place of practice

With cultivation, you will understand that everything one does, every lifting of a foot, every placing of a foot, will in effect be a 'coming from the place of practice.'

For any of us we can, wherever we are in a place of practice, recall: every lifting of a foot, every placing of a foot, every gesture of generosity and patience and kindness, indeed the very circumstances of our lives, not as we might wish them to be, rather as we find them.

This very breath is the gateway to being fully alive right where we are. I feel all the more clear how imperative are gatherings and cultivation as we share when opportunity presents itself.

Buddha: "Here is what you can take with you to protect you. When you are afraid, you can quietly speak these phrases, offering them first to yourselves and then expanding outward to all beings.

May you be well and joyful.

May you be free of greed, anger, and confusion.

May you be (and feel) safe.

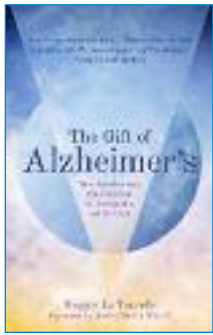
May you be peaceful and at ease."

1. Vimalakīrti is the central figure in the Vimalakīrti Sūtra and a contemporary of Gautama Buddha.

Submitted by Judy Donovan Whitty, RT, ATTN

Maggie La Tourelle's "The Gift of Alzheimer's"

by Lynn Carscallen, TTNO



Maggie La Tourelle, has worked in the field of holistic health care for 30 years, integrating psychotherapy, NLP, kinesiology and energetic healing.

The title of this book caught my attention, as both my father and my husband passed away from Alzheimer's disease and so I wondered how it could be a 'gift'. Going through the process of this disease with two loved ones was emotional and stressful for our families and left a mark for quite some time.

This book provides hope for those suffering from Alzheimer's and for the people affected by its impact. It is a culmination of all the notes the author recorded in a journal of the times she spent with her mother who was diagnosed with Alzheimer's. As the disease progressed, it seemed that her mom at times would slip out of this world and enter into another. She would talk of visiting with relatives that had long passed over, and in a psychic way seemed to pick up on what her daughter Maggie was thinking or feeling.

Maggie and her sister experienced a difficult childhood. Throughout her lifetime, their mother suffered from depression and her father was emotionally distant to both his wife and children. Tragically, Maggie's younger sister died at a young age from an alcohol addiction.

As the disease progressed, the relationship between mother and daughter changed. Her mother was able to give and receive love as she had never done before. It became a spiritual end-of-life journey. They reconciled, love grew between them, and there was a peaceful passing when the time of death came.

In the final chapters, the author gives her reflections on their journey together. Here is a quote from one of those chapters:

"My mother's experience when she had late-stage Alzheimer's was overwhelmingly positive and uplifting and she showed us the potential that there can be in this advanced phase of the disease. She informed us in great detail about what she was experiencing in the late stages of the disease. More importantly, her Alzheimer's was a vehicle for teaching us all about the power of being present in the moment, the freedom that comes from releasing emotions, the healing power of love, the intricate and intelligent process of dying and the mysteries of the life beyond."

As I reflect on my own experience with my husband in his progress with the disease, I recall that on several occasions, he mentioned to me that he heard beautiful music. He would ask if I heard the music, but I had not. It may be possible that he too, at times had one foot in this world and his other in the world beyond.

If I had read this book while I was going through the illness with my loved ones,

- I would have tried to be more present, listening and responding with very short replies.
- I would have talked about stories of our family who were living in the present, as well as loved ones who had passed on.
- I would have encouraged family and friends to do the same, believing that it could make a positive difference, even healing emotional wounds from the past for all concerned.
- If either my father or husband had mentioned that they saw Aunt Mary who died 20 years ago, I would have responded, "I am glad she came to see you", rather than dismissing it.
- I would have said I love you more often than I did.
- At the time, I didn't even consider the fact that in this illness 'consciousness' could be in two worlds – in the physical and in another dimension.
- Maggie's mother talked of her oncoming death to prepare her daughter for when death came so that it would be a peaceful transition. As much as Maggie did not want to lose her mother, she knew her time was coming and would be supportive until the end. Perhaps I would have been more tuned in to clues coming from my husband and father as to when their time was coming.

At the end of the book there are many helpful suggestions both for family and health care professionals to guide one through this disease.

Two years ago my husband died after many years of health issues including a kidney transplant and powerful drugs that had brought on Alzheimers. I eventually became absorbed in the downward spiral of total caregiver as well as decision maker in some difficult situations. Inevitably I crashed and spent some time in hospital. After several months of recovery, I began to find the 'real me'. It nudged me to reach out to my Therapeutic Touch community. I remembered how good I used to feel after attending group meetings and receiving a session and I realized that if had I reached out to this group, my life could have been different.

I also realized that we - as Therapeutic Touch practitioners – are *different people* in a way that others do not understand.

Now I have returned to the 'lifeway' of Therapeutic Touch wiser from my experiences, hoping that in some small way I can help others realize what a precious way it is.

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Lynn lives in Georgetown, Ontario.

She may be contacted at: lynncarscallen@yahoo.ca

Incorporating Therapeutic Touch Into Nursing Practice

Cheryl Larden, RN, BSN, TTRT, QTTT



Therapeutic Touch® can be a very natural and efficient part of nursing care. Some nurses have said to me that they just don't have time to do a Therapeutic Touch session. Well, in the business of health care and the demands placed on a nurse's time, that's understandable. What I have found however, is that although a complete Therapeutic Touch session is always optimal, a partial session can also be very effective. Even a two minute session can have amazing results.

Therapeutic Touch can easily be incorporated into nursing care. One of the most important things is to center yourself when you go into see a patient/client. As you do a nursing assessment of a patient you can do a TT assessment at the same time. This can be done using your hands or with your intention. You will find that you get more information than what the vital signs show or what the patient tells you. With this information and the information you gained from your non-energetic assessment you have information to guide your nursing care. Doing nursing care from a centered place is very calming and reassuring AND it's catchy!

I have used Therapeutic Touch in many ways while providing nursing care, incorporating it into the care I was already doing. I have used it:

- to prevent invasive procedures:
 - With patients who were unable to void (urinate) after childbirth. After trying all the tricks to get a patient to void I would do Therapeutic Touch on either my patients or other nurse's patients and *I always had success*. If it hadn't worked it would have been time for a catheterization and no one likes that. It is time-consuming and can be painful.
 - With someone who is unable to pass gas and/or have a bowel movement. Of course this can happen at any time but it is more prevalent after surgery. A paralytic ileus, which is quite uncommon, is basically when the bowel is 'asleep' – paralyzed, typically after an anaesthetic. In two cases which were fairly severe I performed Therapeutic Touch and you could hear the bowel gurgling as I was doing the session. For these two people it prevented them from having the very unpleasant procedure of the insertion of a naso-gastric tube (a tube that goes down the nose into the stomach relieving gas and allowing the bowel to rest).

In these cases giving Therapeutic Touch was just as fast, and sometimes faster than getting the necessary equipment and performing the clinical task. A big bonus is it is non-invasive and far more comfortable for the patient!

I have also used it to aid in treatments or procedures:

- starting an intravenous (IV). As the person or the area relaxes the veins also relax and it is easier to see and/or feel the vein and get the IV started.
- performing dressing changes. Doing TT seems to help decrease the inflammation in the area and promote healing. Dressing materials used can also be 'charged' with Therapeutic Touch. I have found a distinctive difference when Therapeutic Touch was done and when it wasn't; i.e. if I did TT the wound seemed to be pinker/have a greater healthy blood supply and there seemed to be a greater amount of healing than when TT had not been done when the dressing was changed.

I have used it in so many circumstances and this article would be pages long if I really gave justice to these circumstances. I'll just list some of the other instances:

- preterm labour, dilation of cervix, transition,
- with breastfeeding to aid in letdown reflex and increase breastmilk supply,
- pain control,
- to decrease or relieve anxiety,
- increase movement/mobility,
- to decrease edema (swelling).
- decrease symptoms of withdrawal,
- stabilize vital signs in patients and in fetuses,
- in the dying, to have peace and to calm and clear the mind,
- to communicate effectively with patients who aren't able to communicate,

In March of 2016 I did a webinar on this very subject and it might give you a little more in depth knowledge about my TT experiences in nursing. You can watch it by following this link: <https://www.youtube.com/watch?v=gKiqwFVJp4k> .

About Cheryl Larden...

Founding Member and Past President of BCTTNS, Former president of TTNC, QTTT (TTIA), Member of Krieger's TT Dialogues, Primary investigator into the research study, "The Efficacy of Therapeutic Touch in the Treatment of Pregnant Chemically Dependent Hospitalized Women". She developed the Langara College Therapeutic Touch Practitioner Certificate Program

Cheryl is a presenter at the TTIA Fourth International TT Congress, April, 2017, in Chicago.

Also watch:
Therapeutic Touch Demonstration with CordyAndersonQTTT
<https://www.youtube.com/watch?v=1dUW-i4VwGY>

Therapeutic Touch Demo with client lying down
CordyAndersonQTTT
https://www.youtube.com/watch?v=Fx997e_Y2b4

What Is Therapeutic Touch? Jacqueline Kern, PhD, RN
University of Arizona College of Nursing



Bookworm's Food for Thought



Therapeutic Touch Loses a Friend

Tom Harpur's recent death at the age of 87, brought back memories for many TTers in the Toronto area, where he was a frequent visitor at various activities sponsored by TTNO.

We welcomed his book **The Uncommon Touch** which was "an attempt to examine the phenomenon of spiritual healing scientifically. Harpur, a Canadian religious writer, first explodes some stereotypes: TV evangelists who practice faith healing are simply charlatans; spiritual healing is an ally, rather than a critique, of conventional medicine; and spiritual healing includes in its definition those patients who simply believe they will get well, and do, as opposed to those who have given up, and die. Harpur cites testimony concerning historical figures such as the famous "blind healer," Geoffrey Mowatt, then alludes to the work of Wilhelm Reich, a physician and student of Freud who postulated "orgone energy." Orgone energy is a massless life force that is, perhaps, tapped into through the laying on of hands. The Canadian biologist Bernard Grad attempted to measure orgone energy in the laying on of hands of a contemporary healer, Oskar Estebany, with double-blind experiments involving mice. Wounded mice that Estebany had handled recovered more rapidly than the control group. There's much here, too, on what might be called the "positive thinking" aspects of prayer. Welcome evidence for those inclined to welcome it; for skeptics, Harpur will make fascinating reading. *John Mort, Booklist*

The book continues to be important reading and is available through Amazon where it has a five star rating.



The Therapeutic Touch Teaching Handbook-Outside the Box and Inside the Circle

by Diane May, RN, QTTT, RT

This handbook is a guide for teaching anything new (outside the box) within the basic parameters of how people learn (inside the circle). Building on the principles explored in The Therapeutic Touch Handbook series, it shows how to teach TT, while helping you become an effective teacher and communicator in every aspect of your life. Whether you're a teacher, therapist, or practitioner, new or practiced, you will learn to creatively apply experience-based principles to any topic you teach and to presentations you do for clients, individuals, small or large groups, or formal trainings. With information, inspiration, and encouragement from a gifted teacher, this book offers you the specific guidance she has developed teaching 68,000 people worldwide over the past thirty plus years. Price: \$30.00 plus shipping

To order: Eastern Canada - Laura Pokoradi peaceandlight34@gmail.com

Western Canada: Heather Meikle h_meikle@hotmail.com USA/Internationally: dianemay.com@gmail.com

We get Letters ... and Comments!

Re: "Perceptions of Expert Active Licensed Register Nurse Therapeutic Touch® Practitioners®", Autumn/16
Sue Conlin, TTIA president, just sent me a copy of the newsletter. Thanks so much for the lovely job you did with my abstract. The newsletter was full of useful and interesting information. You do such a nice editing job. Thanks again.

In peace and light, Tamara

Tamara Lynn Wardell, PhD, MSN, RN, Alumnus CCRN, Researcher, Author, International Presenter
Therapeutic Touch®, Critical Care, Administration, Oncology, Education
Terre Haute, Indiana tamwardell@frontier.com

Re Aviso Article, Fall, 2016, Issue79 [AVISO_Fall_2016_Issue79_FINAL_EN.pdf](#)

What a great article...thanks for sending and for taking the time to write it...on behalf of Therapeutic Touch.

Here in Windsor, ON, our Hospice Therapeutic Touch program has been going now for 12 years. We have about 50 volunteers and last year offered about 4000 hours of energy work.

We are in the Residential home, 2 hospitals, several long term care facilities, private homes and an onsite clinic. A new satellite Hospice Residential Home was opened in Leamington about 2 months ago. Flo Hartleib and I have been out to Leamington to speak. Many are very eager to learn Therapeutic Touch so they can offer sessions in the Leamington area. Because of that we had 20 in a Level 2 last weekend and 22 registered for a Level 3 at end of November! It is awesome work to do and partnering with Hospice/Palliative care is such a perfect fit. We all feel we get more than we give!
Sharron Parrott, TTNO

Surely God would not have created such a being as man, with an ability to grasp the infinite, to exist only for a day! No, no, man was made for immortality. - Abraham Lincoln

Witnessing Immortality

By David Maginley, M.Div, CSPC

This is an excerpt from David's forthcoming book,
Beyond Surviving: Cancer and Your Spiritual Journey

Josh

At fourteen, Josh was the youngest patient we'd had, one of our favorites, and not just because of his youth. Josh's spirit was contagious; his optimism a treasure, his graciousness... his graciousness humbled us all. Never did he complain. In fact, he made a point to try to brighten everyone's day. He'd invite me to join him to play Little Big World, a video game in which a small character made of sackcloth and yarn accomplishes grand adventures against insurmountable foes in a hand-stitched world that looks like a scrapbooker's dream. Little Big World - it suited him perfectly, with his diminutive stature, shrunken all the more by towering IV poles, laden with pumps and tubes. Because of his irrepressible kindness, Josh was the hardest to care for. Nurses, heartbroken by his grace and cheer, would quietly cry in the chart room. Doctors would pause in the hallway to collect themselves. We all knew his chances were slim.

Josh was having a MUD, a 'matched unrelated donor transplant'. An only child, he had no compatible donor in his family. And his match wasn't perfect: 8/10 variables - good odds, but still risky. We've seen others survive; we've bought them a few years. That's the hope: buying time until new breakthroughs come. Josh had no choice. Not to try meant death within a month. He was willing to face the perils, and seemed inspired by the spunk of the animated character on the screen.

"Besides," he said nonchalantly, "if I die, maybe I'll get another life."

Needles, implanted treatment access ports, weight loss, diarrhea, vomiting, chemo, chemo, and more chemo, all to eradicate his immune system so we could, at 3:00 a.m., infuse him with a new one. The procedure looks so much less grand than the name—it hardly feels like a transplant. The stem cells, chilled in their preservative, are warmed in a portable sink, which gently rocks them to distribute the heat. After administering drugs to prevent nausea and allergic reaction to the preservative, the cells are infused through the IV. The room is crowded—two doctors, a transplant technician, the nurse, and his parents—all silent as they watch for signs of reaction: rigors, fever, redness in the skin. And there lies Josh, small in the bed, smiling at his mother who rocks and silently prays.

"Don't worry, Mom, I'm a fighter."

It goes smoothly. No reaction, no bumps. Sighs of relief. It took barely twenty minutes. And now, the magic. Stem cells course through his body communicating with every vessel

and organ, seeking out the area most in need of repair. There they set up camp, analyze the situation, begin production of whatever the body requires at that moment—in this case, an entire immune system. Over the next few days the stem cells will travel to the bone marrow, the deepest core of the body, and within the skeleton build a new factory, new white blood cells that will defend Josh against the myriad microbial enemies that swarm not only the outward environment of our world, but the inner environment of our bodies. Health is a constant balancing act, and now the enemy within is the most dangerous. Bacteria, which normally exist in symbiotic truce with our biology, soon take the advantage we provide. With no immune system to protect him, they grow out of control. Josh's body is transformed into a war zone, while microscopically; a few newborn white blood cells take on the swarm. Little Big World—he is it.

Josh is fine for the first few days, as everyone is. We don't expect to see the struggle until about day fourteen, by which time the body realizes it has a foreign invader—a new immune system, and not of its own creating. The battle ensues between an infused ally and the flesh that does not recognize it. Graft versus host disease - the storm so many MUD transplants patients do not survive. It starts with a fever, then skin irritation. The liver is compromised, the gut takes a beating. Pneumonia, mucositis...the list goes on and on. Steroids are administered to combat these trials, and ironically, immunosuppressant drugs are brought in to tame the very stem cells we have infused. While this battle rages in Josh, he plays his game: a valiant and fragile rag doll of a character, going against dragons and robots and alligator-infested pits. It was the best therapy he could have.

One company, Hope Lab, has developed a video game for kids with cancer. It's called Re-Mission, in which the player flies through the blood system blasting leukemic cells, powering up platelets, calling in reinforcements of white T-cells. I showed the game to Josh, but he preferred guiding his sackcloth avatar through the maze of fire and foes. Besides, he was way ahead of Re-Mission, for he was adding kindness, joy, and unflappable charm to his arsenal of resilience.

One day the nurse called. "David, Josh is having a hard time with GVHD. His skin is itchy and flaking off, he can't get much sleep. Can you try Therapeutic Touch? It might help."

Therapeutic Touch (TT) is essentially a non-contact energy treatment. Developed by nurses, it is based on the understanding that we not only have a biological anatomy but also an energetic one. The results are wonderful: accelerated healing, deep relaxation, and a subtle rebalancing that can boost the body's innate wisdom. The name is a bit of a misnomer; I rarely *Continued on page 16*

Witnessing *Continued from page 15*

touch the patient, instead moving my hands three to six inches above the body. While staff thought it controversial at first, over the years we've found it very effective in relieving the adverse effects of chemotherapy.

His mom was sitting by the bed, nervously rocking. Josh was not quite as chipper as usual.

"I hear you're going through one of those bumps we talked about," I said. Bumps. What an understatement! His body was rejecting the stem cell transplant. Josh looked like he was molting, skin flaking off head to toe.

I explained the procedure, and Josh agreed. Therapeutic Touch turned out to be very effective. It was one of the few things that could relax him and relieve the itching. But the infections were now overwhelming his diminutive form. Kidney failure turned his eyes the color of his sackcloth avatar. Limbs bloated with excess fluid. He became less and less animated. I treated Josh daily, watching him deteriorate, until one day I came in and the bed was empty.

The nurse's eyes were moist, her voice trembling. "He's in ICU. They were wondering if you could go down...things don't look good."

The curtain was closed. Another nurse sat pensively at the desk. She stiffly smiled as I approached. This case was clearly difficult for her, too. Kids usually go to the children's hospital next door, but Josh required a different level of care. And that care had run out. He was now on life support. The new stem cells, full of promise and potential, had been destroyed by the cancer; liver, kidneys, lungs, heart, bowels—they were all failing.

I pulled the curtain. Josh, so small in the bed, is dwarfed even more by the wall of monitors above him. His family gathered in grief; uncles, aunts, grandparents, cousins, mom, and dad. I stood alone on the other side of his bed, looking into their sorrowful eyes.

"Thanks for coming, David. We were wondering if you could give him one more treatment. It was the only thing that seemed to relax him."

"Of course. Of course." So many times I've given Therapeutic Touch to those in pain, with nausea, in distress. In this situation, at death, it is especially humbling. I am entering a soul's essence, the vital energy of a consciousness about to transition to the next world. When I close my eyes to center myself, there is a shift in the room. The family seems to recede as I move my hands above his frail body. Opening through the heart's presence, I listen and find fear. So alone, so overwhelmed. *We're all here, Josh.* I try to infuse my thoughts with compassion. *We're all with you, your whole family. Feel their love. Feel God's love. We're all with you.* And send the love in. As the tears well up, send the love in, and don't shrink back when it becomes hard. Hold the grief, hold the fear, and honor the humanity of it all. Honor the love. I look up. Across the bed from me is a face I know and would never have expected to see—my best friend, who is also the

family's pastor. He is looking into my eyes with great love and compassion as I quietly weep.

"It's all right, David. Keep going," he says.

With that affirmation, I close my eyes again and move into Josh's field. The fear is gone. A peace and depth fill the room, and I am able to send Josh the message he knew already. *God will receive you, the love and the angels will receive you, and you will be more safe and alive than you ever were here. We'll always be with you, Josh. Your family's love is always part of you. It's safe to go.*

The treatment over, I look up again. The room has shifted back to its normal proportions. My friend is smiling through his tears. The family waits in silence.

"I felt fear at first, but now I believe he knows you are here, that he is loved." There could be no greater message for them.

After embracing, Josh's parents asked if they could have a few minutes alone with him while the machines are shut off. We quietly left the room. It didn't take long.

They emerged trembling, aware, exhausted, and so, so sad. We all knew Josh was free, not only of suffering but also of the limitations of life on this level, but we sensed he was so much more as well. Just as the fragile character in Josh's game overcame insurmountable odds through the guidance of the player's unseen hand, we knew God had guided his course and shaped his character. Josh was now shining, enhanced and embraced by nothing less than the divine Love of the universe. Because Josh was—is—an emanation of that Love, he continues in the journey of evolutionary consciousness, encountering new challenges and adventures as a spiritual body, so unlike ours. He now understands how God had been within his humble human form all along. He is now one among the billions who travel this mystery, this little big world, becoming the hero of his journey and the hero of our hearts. We would walk with that assurance out of the valley of the shadow of death, but not out of the shadow of grief. That wisdom, that pain was for us to hold for quite a while, learning to allow it to shape us, to deepen our humanity, to help us live with renewed awareness of the gift of life.

We embraced. We gathered once again around his bed. We prayed, giving thanks for this young light. The family spent time with his body, the shell of what was. And I returned to my office to weep, before moving on to the next patient.

David Maginley, M.Div, CSPC is an interfaith spiritual counsellor for the cancer program at the QEII HSC in Halifax, NS. He has survived cancer four times, which led to a profound near-death experience and explorations in consciousness and the connection of body, mind and spirit. With degrees in philosophy and as an ordained minister, David has a deep sense of purpose in supporting others in their spiritual journey.

To receive a free chapter and updates on when the book is released and his speaking engagements please go to his web site, <http://www.davidmaginley.com/>

Therapeutic Touch Groups are an important aspect of your Therapeutic Touch learning and practice.

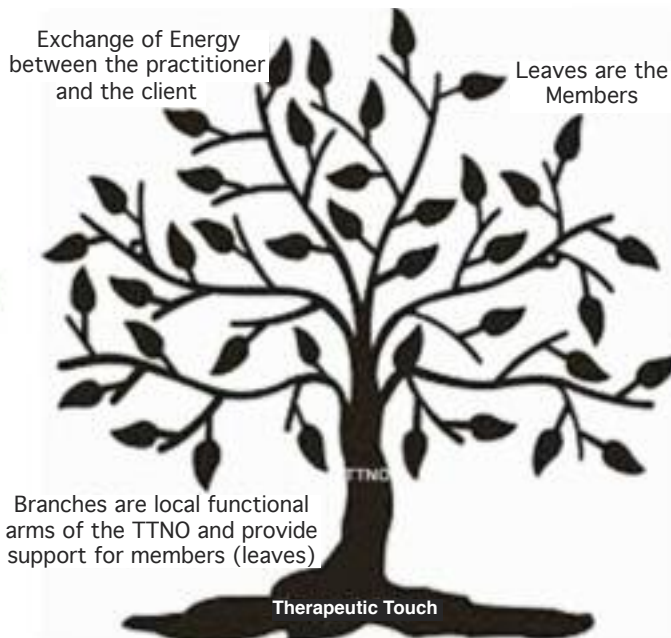
Creating a Dynamic Therapeutic Touch Group

TTNO Groups Have A New Designation!

BRANCHES OF THE TTNO

Symbolically the term “Branch” ties in with Dora’s tree

- The modality of Therapeutic Touch is the root of what we do
- The stem of the tree (TTNO) is the support network from which the branches grow.
- Branches provide local support to practitioners (leaves)
 - Practice
 - Sharing
 - Fundraising
 - Promotion
- Exchange of energy occurs between the practitioner and the field and the client



Dora’s Tree

A current focus of the Therapeutic Touch Network of Ontario is increasing membership and rebuilding the network. After some thought and investigation, the Public Relations Task Force presented a strategy to revise the professional image of the TTNO within the complementary therapy network. To begin the process of rebuilding, a new name for our Practice Groups was suggested. Formats of very prominent Canadian not-for-profit organization listings were looked at and they all list the organization first, followed by the branch, division, or regional office as is appropriate. The Board of Directors reviewed the suggestions made through consultations with the membership and overwhelmingly supported the name suggested by our members for our Practice Groups. The new name is “Branch”.

Dora’s tree is growing!

Finding Your Tribe ~ Your Allies On Life's Journey

Part of being human is the search for an individual identity. However, there is an equally intense desire for acceptance. It is when we find our individual tribes that both are satisfied. Our tribe members are those people who accept us as we are without reservation and gladly accompany us on our journeys of evolution. Among them, we feel free to be our imperfect selves, to engage unabashedly in the activities we enjoy, and to express our vulnerabilities by relying on our tribe for support. We feel comfortable investing our time and energy in the members of our tribe, and are equally comfortable allowing them to invest their resources in our development.

The individuals who eventually become members of your unique tribe are out there in the wide world waiting for you. You are destined to find them, one by one, as you move through life. If you look about you and discover that you are already allied with a wonderful and supportive tribe, remember that there are likely many members of your tribe you have not yet met.

However your life develops after you come together with your tribe, you can be assured that its members will stand at your side. You will discover that your tribe grounds you and provides you with a sense of community that ultimately fulfills many of your most basic human needs.

by Madisyn Taylor, Daily OM printed with permission

MY THERAPEUTIC TOUCH JOURNEY (SO FAR)

By Julie Boyse, RP, TTNO

My Therapeutic Touch® journey began in 2004, when I joined the St Catharines Branch led by Margaret Deane, a beautiful person filled with knowledge and compassion. I attended the groups there until, in 2007, a work transfer took me back to Woodstock. In taking on this new position I felt I couldn't manage to get to the Therapeutic Touch (TT) practice groups in the area and I was distracted by feeling a need to prove myself in my new working role. So I wouldn't forget the teachings I did self-care treatments as a part of my meditation at night. I also treated family members.



I came to a point where my work 'became my life' and in April, 2014, the corporate world 'got the better of me', and I learned – the hard way – the importance of self-care and work/life balance. I had what some called a "nervous breakdown", including depression, anxiety, and burnout. Someone suggested however, that it was an 'awakening to find my true self'! Being off work, I spent a lot of time focusing on my recovery. I learned a lot of things throughout this journey and one of them was *how much I missed Therapeutic Touch!*

As a part of my self-care through my recovery I decided to get back into the Therapeutic Touch community. I reached out to a family friend who had been a Therapeutic Touch Practitioner for a number of years, and started attending the Group at the YMCA London Centre Branch.

In January 2015 I returned to work full time and began attending the London TT branch where I was welcomed with open arms. I continued to attend the monthly TT meetings. Inspired by a few people who had recently completed their Recognized Practitioner status, I began thinking about doing that. Our Branch leader Jitka Malec, RN, RP, was one of my greatest inspirations. Her devotion and love of Therapeutic Touch, as well as her extensive knowledge and stories made it even more intriguing, so I talked with her about starting on my RP journey. Those of you who knew Jitka can imagine how thrilled she was about my interest and she offered to help me, always taking the time to give me tips and supervise my sessions. She even invited me to her home to review my workbook before the final submission!

I started the RP process in May 2015 and a month later I was let go from my job. This gave me lots of time to 'do' my workbook! What an amazing journey it was! I became aware of how I was growing along the way, through every session – given and received – and every journal entry. Everyone came together to support me, willing to supervise my sessions, and acting as Healing Partner.

The experience of the Workbook sessions allowed me to see so many people actually benefit from Therapeutic Touch,

including those limited by arthritis, anxiety, unmanageable pain, headaches, cancer, tense muscles, grieving, and acute injuries. This insight inspired me to offer Therapeutic Touch in people's homes and offices.

I started a blog of my travels and the lessons I learned along the way in preparation for my first trip to India in March 2016. I write about my past travels and give answers to questions I receive, include inspirational quotes, or just what 'comes up' that day.

I became a Recognized Practitioner in May 2016 and returned to the St. Catharines Branch held at Margaret Deane's. I was thrilled to come back to 'my roots'.

In September 2016, I started my own business, "Journey 2 Balance" where I provide sessions in Therapeutic Touch in the comfort of clients' homes around Woodstock as well as the Niagara area. I coach motivated individuals to make positive changes in their lives and help them to meet their goals. In addition to life coaching, I also teach yoga and meditation in offices, individuals at home, and in the community of Fort Erie.



In my free time, you can find me practicing yoga, meditating, reading, spending time with family and friends, or volunteering with the Canadian Mental Health Association for Oxford and Niagara, (a retirement home in Woodstock), and at the TTNO. I have recently become the web master for the Therapeutic Touch Networks of Canada.

It has been an amazing journey. I truly believe that everything happens for a reason and after reflecting on my Therapeutic Touch journey I know this is something I was meant to do and share with others.

So many volunteers are involved in the process of a person becoming a Recognized Practitioner! *I have many people to thank for their mentorship, patience and encouragement.* In addition to my teachers and members of my TT Groups, there are the people who consented to receiving a session, the Practitioners who offer the 'Reverse Sessions', the Workbook session supervisors, and the TTNO volunteers who review the Workbook.

I was grateful I was able to thank Jitka Malec before she left her physical body this summer. This amazing lady has a special place in the hearts of all who knew her.

If you are considering becoming a Recognized Practitioner, I hope this has inspired you to get started.

Contact me at: journey2balance@outlook.com

The original article was in TTNO's inTouch, Winter, 2016

Therapeutic Touch Networks Canada News/Nouvelles

Index: Volume 6, No's 1 to 4, 2016

Each issue includes an Editorial and publication details, Reports from the TTNC and Member Networks, information about the Board of each Network, Letters to the Editor, and Groups and Recognized Teachers in Canada.

An Index to all issues may be found on the TTNC website: www.ttnc.ca

No. 1 Winter, January/16

New TTNC Board and Statement of Operations from Annual General Mtg.	4
Compassionate Presence: Covert Training Invites Subtle Energies Insights by Eric Peper	7
From Vision to Reality, a History of TTNC by Marion Cameron	9
Quantum Theory: Is 'spooky action at a distance' Real? By Mei-fei Elrick	10
Spotlight on TTNO's Sandra Dixon re Canadian Volunteer Award	12
TT Practitioners in Private Practice ATTN's Carol Evans, RP and Colette Thibodeau	13
Book Reviews: 3 Books by Lynne McTaggart	14
A Model of Healing Theory [Repeat from previous issue]	16
Questionnaire re Model of Healing	17
TTNC Newsletters Index of Issues, Vol. 5	18

No. 2, Spring, April, 2016

The 2015 CAIET in BC - Conference Details	7
TTIA President's Message	8
Therapeutic Touch as a Highly Human Function by Dolores Krieger	9
Edgar Mitchell, IONS Founder, Obituary	11
Therapeutic Touch as a Leading Edge of Change by Dolores Krieger	12
An Observation Re: The Model of Healing Theory, by Evy Cugelman	12
Therapeutic Touch: It's All in the Hands: Stirling Manor, ON, by Alison Cooke, RT	13
TT Practitioners in Private Practice TTNO's Pam Patterson, RP and Claire Massicotte, RT	14
Book Reviews	15
<i>A Most Unusual Life: Dora van Gelder Kunz</i> by Kirsten Van Gelder and Frank Chesley	
<i>Science of the Heart: Exploring the Role of the Heart in Human Performance</i> [Heartmath]	
<i>CD – A Guided Meditation to Help With Caregiver Stress</i> [Napersteck]	
Keeping Up With New/Old Information	16
Japan Welcomes Therapeutic Touch By Julia von Flotow, TTNO, RT	17
TT Coverage by Extended Health Providers by Cheryl Larden, BCTTNS	18
Letter to Extended Health Providers	19

No. 3, Summer, July, 2016

Discussion re "Advertising Standards Canada"	7
Meditation by Arlene Cugelman, RT, TTNO	8
ATTN Spring Conference	9
TT International Report	10
My Calling to Therapeutic Touch by Lynne Calnek 11	
Therapeutic Touch at HPC Ontario Conference	11
The Challenges of Wireless Radiation by Craig Niziolek, RT, TTNO	13
Book Reviews	14
<i>Hidden Talents</i> by David Lubar	
<i>A Far Reaching Thing: Tales of Healing with TT</i> by Annie Hallett	
Ebook - <i>On the Road to the Spirit</i> , by Janet Macrae, PhD. Ebook	
<i>The Energy Cure: Unraveling the Mystery of Hands-On Healing</i> by Wmm Bengston, PhD	
Living My Last Days in Hospice By Jitka Malec, RN, RT	15
Member in Private Practice Sid Wittmann, MTTN	16
Creating a Dynamic Therapeutic Touch Group BCTTNA Spring Conference	17
	18

No. 4, Autumn, October, 2016

Info re: Advertising Standards Complaints	7
CAIET Conference, Halifax	7
TTIA Chicago Congress, 2017 Details	8
Friend of TT - Helen Senderovich, MD	8
Baycrest Poster re Dementia	9
Information for TTNC Members	
TTNC Committees. Liability Insurance	10
Gloria Gronowicz' Research into Outcomes of TT, by Mei-fei Elrick, TTNO	11
Current Nursing: How TT is Fitting In by Patricia J. Connell, RN, PhD, QTTT	12
Therapeutic Touch and Nursing by Mary Hughes, RN, of ATTN	13
Book Reviews: <i>Beyond Surviving: Cancer and Your Spiritual Journey</i> , By David Maginley	14
My Barnyard Healing Partners By Betty Whitney, OT, RP	15
Perceptions of Expert Active Licensed Register Nurse Therapeutic Touch Practitioners by Tamara Lynn Wardell, PhD, MSN, RN	16
Creating a Dynamic Therapeutic Touch Group Paul Sugar Palliative Support Found'n, BC	17
by Alex Jamieson, RP	18
CCS and CBCF Merge	19

THERAPEUTIC TOUCH NETWORKS OF CANADA RECOGNIZED TEACHERS

Each network sets its own criteria for curriculum and teaching. Information is supplied by the individual networks.
Many teachers will travel to other areas on request.

* indicates a teacher of all levels.

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