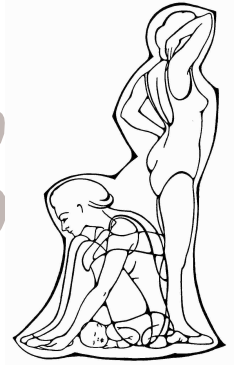


Scoops



The Newsletter of the Guild of Postnatal Exercise Teachers
Issue 10 - March 2002
www.postnatalexercise.co.uk

THIRD AGM FOR THE GUILD!

Gosh! Its hard to believe we are already three years old! Eighteen members attended our third birthday celebrations and AGM and as a treat had an excellent Pilates Study Day led by Rachel Swindle!

This being our third AGM, we recorded the fact that the Guild has grown from a base of 30 founder members to nearly 100 associate and full members. We have welcomed 7 new students to this year's teacher training course and a further 3 will come on board shortly. We have been fortunate to have had two generous donations of £4,750 and £2,000 from a private individual who believes in the value of exercise and the need for support for postnatal women. This has enabled us to run the three teacher training courses, but effectively they have been very much subsidised by the donations.

We now need to look for funding to keep the cost of the course at a level that enables student and women returners to undertake this kind of distance learning course. If anybody has knowledge of funding or even better wants to help try and get some could they get in touch with Meg.

We also want to increase the number of students in training. There is a Luton Graduate Apprenticeship scheme that is likely to provide student numbers for the GPNEX course but it will be a while before these students reach the relevant stage of the course. So if you know of anyone, or can advertise the Guild's course locally, please help by passing information and contact details on. There is a flyer in this copy of Scoops for your use.

At the AGM there were no changes to the Committee

and there was a vote of confidence in the existing team. The main change which will affect everybody is that subscriptions will go up for the first time in three years to £25 for a full member and £15 for an associate member. Your support is greatly appreciated.

Congratulations to **Ruth Barrett** who has completed a further 3 core modules with the University of Luton These, when added to her Certificate to Practise as a Postnatal Exercise Teacher from the Guild, will give her the award of a full Diploma in Higher Education (Sport and Exercise Science).

The Pilates study day was great by the way! A variety of people attended. One person had trained with the original NCT course before the Guild was formed (**Sally King**), one had trained on the first Guild course (**Anette Holtmeyer**), one person is on our current course (**Sarah Pearce-Higginson**), and one is the course about to start (**Camilla Mottram**)! There was even one person who is completing the University core modules first and is then planning to complete the Diploma with the Guild's five modules (**Steve Treanor**). Everybody enjoyed Rachel Swindle's presentation and it was great to meet everybody and share their enthusiasm.

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PILATES AND POSTNATAL WORKSHOP

The sight of snow did not deter any of the sixteen Guild of Postnatal Exercise Teachers from getting to the University of Luton for a Pilates study day led by Rachel Swindle. Rachel has over twelve years of teaching Pilates and embraces a holistic approach to the sound principles behind Pilates and the exercise requirements for the post-natal



woman.

Joseph Pilates (pronounced Pi-lah-tis) was born in Germany in 1880, and it was during World War 1 when he was confined to a camp that he began to develop and teach his holistic regime of exercises to others. It was 1918 and there was an influenza epidemic that killed thousands, however Joseph Pilates and all those who followed his regime survived. The exercises had transformed Joseph from a frail and sick child, to a fit, and healthy figurehead of total well-being for many dancers, actors, artisans and others, who later died in New York trying to save his own Pilates Studio from a fire.

So why is Pilates such a perfect choice of exercise for the postnatal women?

- Its use of diaphragmatic breathing (also referred to as lateral or rib breath) this technique (when standing) allows more blood to become available for oxygen exchange in the lower parts of the lungs. The breath is intimately connected to the mind, so to quiet the mind in order to direct its attention, we should first learn to regulate the breath.

Rachel clearly and skilfully demonstrated diaphragmatic breathing; on an exhalation she could primarily use her left rib cage (in isolation) through the intercostal muscles and then the right side and then the thoracic back muscles. When we started to practice and participate in diaphragmatic breathing it became apparent that this type of breathing feeds the internal organs of the body, which is why, it is a perfect starting point for a postnatal exercise class.

- It strongly emphasises the use of the pelvic floor and perineum muscles (the area between the vulva and anus) which after the delivery of a child needs to be healed and reconstructed as soon as possible.
- It has a mantra ("naval to spine") which focuses the mind of the postnatal mother to within her body.
- The exercises emphasise relaxing and lengthening of postural muscles. This is so important as the postnatal mother has for months experienced a change in her centre of mass, which often leads to an anterior tilt of the pelvis. Carrying the child during pregnancy may also have

developed an exaggerated lordotic curve of the spine or rounded upper back.

Rachel clearly and concisely explained 12 exercises while they were being demonstrated with correct alignment. All the participants had time to discuss and practise each exercise. Rachel explained the purpose for performing each exercise and presented an anatomical evaluation including a starting position, breath patterns and execution of movement. Rachel also explained which muscles were being worked and which ones were inactive. (a copy of these notes are available from The Guild for £5 - contact Meg Walker).

The study day not only provided a reminder of various muscle actions, but also provided a complete set of exercises to use in a class situation. It gave all the teachers from across the country an ideal arena to discuss, develop and exchange ideas and information.

This was wholeheartedly encouraged naturally through Rachel's relaxed and engaging approach.

The study day proved beyond reasonable doubt that Pilates is a safe and effective form of exercise for the postnatal mother. Through its functional movement and core stability it exercises the body and mind. It starts from the inside organs first which enables the women to reconnect and heal internally thus giving her confidence to progress towards the external muscles, together this gives greater self-esteem and an improved body image for the postnatal women.

Pilates is 'thoughtful' exercises for the body and mind that fuses Eastern and Western philosophies, providing optimum health for the

PILATES AND POSTNATAL WORKSHOP

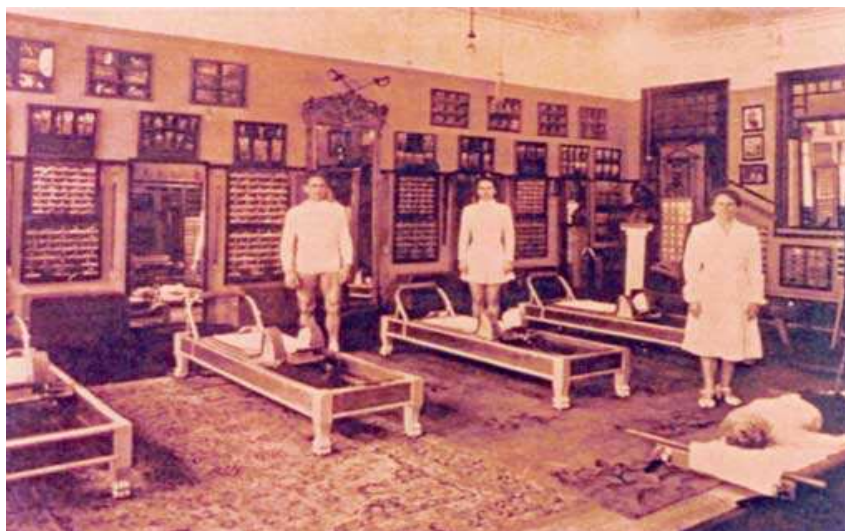
I guess like most people, I came with a rough idea of what Pilates is about but no idea of how it applies to post natal exercise.

This workshop showed how Pilates techniques can be incorporated into a postnatal exercise program. Rachel started with breathing techniques, expanding the diaphragm and rib cage downwards and sideways. She then introduced the imprinting technique, combining contraction of the diaphragm and pelvic floor muscles with the breathing pattern.

In my previous experience of Pilates, muscle awareness and breathing control were used but not explained, so it was useful to explore the different ways in which we breath. I found the hands on technique for seeing how the rib cage and shoulder blades move a little tricky at first but eventually got the hang of it. My apologies to my partner on this exercise - trying to breath consistently is even harder as you start to think about it!

Rachel then demonstrated a sequence of exercises for the trunk and limbs which build on the pattern of breathing and combined contraction.

The next target was the pelvic floor muscles, which I'm sure have a mind of their own. This was more a lesson in visualisation and patience. Coordinating the diaphragm and floor muscles reminded me of the first time I tried aerobics - it can only get easier. Rachel's description of massaging the organs was useful, they don't normally get a workout



Joseph Pilates studio - he died in a fire trying to save it.

and we take their function for granted. Rachel also interspersed the talking and practicals quite well, so no chance to get bored and we covered at least 12 different exercises. Most of these combined arm exercises with the core stability, although she did introduce legs at the end, to be used when the abdominal muscles are ready for such intensity. She used terms 'connecting' and 'disconnecting' in each exercise to describe which muscles play an active part and which should be relaxed. It takes a while to get used to using some muscles to stabilize the body, some to move the arms, whilst keeping others relaxed.

The exercises are designed to work all the major muscle groups in the body and also to improve spatial awareness, joint alignment and stability. Ordinary Pilates (for the non postnatal) would normally work the Rectus Abdominus quite strenuously. Rachel chose exercises which engage the Transverse Abdominus instead, using the 'Easy Abdominals' to gently work the Rectus Abdominus - a more advanced exercise for use after the initial 6 weeks. Most of the exercises

demonstrated were quite low intensity, the emphasis being on technique and coordination with breathing. This provides safe exercises to use from day 1. The exercises can be made more intense, by combination of moves or use of external weights.

Rachel also covered joint stability, an important consideration since some of the exercises use a wide range of joint movement. One thing that I found is that the movements show up any muscle tension, for me, in the upper back. Since the movements are performed fairly slowly, this does not cause any problem and the breathing helps to relax the body.

STEVE TREANOR

Editor's note: I included the two write ups of the Study Day because they give a different slant on the day. And you can see how both attendees found it helpful in different ways. What I am especially delighted about is how enthusiastic and willing to learn our members are and many thanks to Sarah and Steve.

If you would like to know more there is a huge amount of

A PNEX TEACHERS LIFE - POST QUALIFICATION!

Where to start? I was accepted for training with the Guild in April 2000 and gained my Certificate in May 2001. I have to say it was the steepest learning curve of my entire life, as prior to training I had never set foot inside an aerobics studio! Not only were there all the moves to learn but it was many years since I had studied and the theory, as we all know, takes up many hours. However, I have never regretted the hard work and, although I hate to admit this, I actually miss the buzz from the successful completion of an essay! Sad, isn't it?

I started teaching in January 2001, how I wish I had a video of my early attempts - but then again maybe not! - and really enjoyed the interaction with clients from the start. Easter 2001 saw me set up a Follow-on class for the mums due to demand. Both classes continue to thrive today.

I have twice tried setting up classes in another area of the West Midlands, thus reaching out to more postnatal women, but neither has been successful. I have taught short-term in a local gym, a body-conditioning class, but I have concluded that I prefer working as a solo instructor.

I found it hard to build up any kind of rapport with clients in the gym, there was no opportunity to get to know them, they wanted to work out and go, whilst in my classes I feel that we have an important 2-way communication process. There is the chance to chat with the mums who arrive early to feed their babies, they are always eager to give feedback when I look for

it - and often when I don't! - and we have fun, which I felt was sadly lacking in the gym setting I was in. (I realise this will not be true for all gym-based instructors, I am only talking about my experience here!)

I gained my OCR (RSA) Exercise to Music Certificate in July 2001, NVQ Stage I and am currently completing my portfolio for NVQ Stage II. I am now at the point where I am considering "Where to go from here?"

I cannot believe where starting on the PNEX course has taken me, I am thirsty for knowledge and there are not enough weeks in the year for all the courses I would love to do. I think my final path will be more inclined towards Sports Therapy and Sports Massage which I hope to study from September, or working with GP referrals to Exercise on Prescription through the local council leisure centres. I have recently discovered Pilates which I would like to eventually teach, however, I also hope to continue with the postnatal exercise courses for as long as the need is there and this body is

A NOVEL WAY OF RUNNING A CRECHE USE THE MUMS!

willing!

SHELAGH MUSGRAVE

Phyll Buchanan, a local Breastfeeding Network Supporter, had for some time been helping me by running a weaning discussion as part of my course in Camberley. It was her idea to start a PNEX group in Finchampstead, her local village, and she and her friends volunteered to run the creche for the first course to get it all going. It is a great success and mums are



A reliable creche worker can be a valuable asset!

now coming from the Reading and Bracknell areas too.

I have always operated a creche, which relied upon volunteer mums coming back to help. There wasn't always a commitment though, and I became fed up of being let down. About 18 months ago I redesigned my creche policy to make it clear to mums that I would be looking for their help in the future, but at the same time allowing for those returning to work, or simply unable to help. The course is now more expensive for those mums who are unable to help in the creche in exchange for using it themselves, but then they are getting 6 creche sessions for their babies!

It seems to have been a good move and I am often told it is a good system by the mums. Everybody is asked to pay a separate cheque for £12. They know that they will be asked to help for 3 sessions and I have frequent offers of additional help from those who have enjoyed the experience! After they have helped for 3 weeks, their £12 cheque is returned. If they cannot help for any reason then the money ends up in a creche 'kitty' and is used to pay for additional help. Anyone offering to help more is paid £4 for each extra session from the kitty. I do not take any kitty money as profit.

It does take a few minutes each week to phone all helpers to double-check they are indeed coming, but it's worth it to know

ONE TEACHERS EXPERIENCE

Pam Mattos has been generous in giving information about the courses she runs for publication in **Scoops** and this may help you in your courses by giving you an idea of costs and charges.

VENUES: Both courses run in church halls, with rooms for creche being nearby. Rent £7.50/hour plus PPL.

COST: £30/ £35 plus returnable £12 creche deposit.

NUMBERS: Ideally minimum of 8 up to max 12 mothers.

DURATION: 6 consecutive weeks. 9.45am start, approx 12noon finish.

PROGRAMME:

- 15mins 'creche-settling' time.
- 75mins exercise and relaxation.
- 45 mins discussion/socialising with refreshments.
- Includes 'hands-on' baby massage and weaning discussion with qualified Breast-Feeding Network Supporter.

LOCAL: Numerous local health clubs and leisure centres. Mostly aquanatal classes on offer to ante and postnatal mums.

COMPETITION: No courses like mine on offer I think. Some mums commented that they didn't fancy the creche facilities at other places.

For over four years I really enjoyed teaching follow-on aerobic classes, but the uptake was so variable and paying helpers to run a creche was costing me a fortune! Trouble is, I still get regular requests for it and it would be easy to give in and try again!

So many mums take up a gym membership, which is good after all, or return to work. I have reluctantly concluded that my particular niche is PNEX and people do have lots of choices if they want more.

ADVERTISING:

- Quarter page ads in 3 local NCT newsletters (approx £107/year so not cheap!).
- Posters and fliers to Health Visitors, Midwives and GP surgeries. (local NHS hospital refuses !!).
- General PNEX talks given free to local HV's postnatal groups. Fliers given to all class participants for their friends, posters for their HVs.
- Have tried posters in shop windows and ads in parish newsletters too, the latter usually too expensive.
- I ask everyone who phones to tell their postnatal friends!

INDIVIDUAL: I ask tactfully about individual's health and fitness during initial phone contact. I have found that people often already know what type of exercise they should avoid with old injuries and existing conditions, so I ask about that. I then give any appropriate advice. I may phone after receiving screening form back if I have any worries over safety.

NEEDS: Inviting comment in class and using my observation skills helps to ensure the exercise is safe.

MOANS: Still often difficult to promote. I'm sure most mothers are unaware my course is there. I always plan my start-dates well in advance, but often, not always, struggle to fill the class. It frustrates me that most local health professionals are not more

supportive.

SMILES: Love meeting people, love teaching exercise, enjoy the very positive feedback from

Northern Fitness & Education Ltd presents... An Introduction to Modern Pilates with Cherry Baker

A series of one-day workshops is back by popular demand throughout May, June and July. The workshops include:

- 6 hours of theory and practical
- an abundance of exercises for the abdominal and spinal muscles
- Modern Pilates Masterclass
- Certificate of attendance
- £50 discount voucher towards full Modern Pilates course.

Workshops are £49.95 4 weeks prior, or regular price of £59.95 and are being held at:

11 th May	Leeds, Fitness First
12 th May	Lichfield, Esporta
18 th May	Guildford, The Spectrum
19 th May	London, Holmes Place, Oxford Street
8 th June	Basingstoke, Centre Court Health Club
9 th June	Bristol, Holmes Place
6 th July	Chelmsford, Cannons
7 th July	Stevenage, David Lloyd
13 th July	Sheffield, Greens
14 th July	Manchester, Holmes Place
20 th July	Oxford, Esporta
21 st July	Warrington, The Village

For further workshop information contact 0161 445 3908 or e-mail: energy-unlimited@ntlworld.com

CARPAL TUNNEL SYNDROME

From a purely personal point of view I logged onto the Internet and 'Asked Jeeves' about carpal tunnel syndrome. Having suffered from this to a minor degree towards the end my second and third pregnancies and I then completely forgot about it until these last few months I found myself suffering again but with no pregnancy to blame!

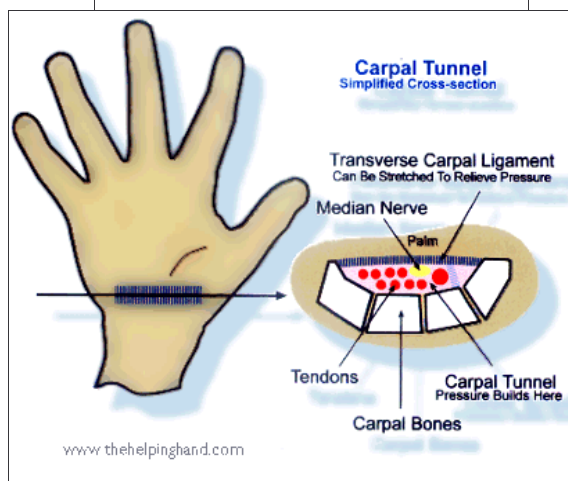
I also had a demonstration of the syndrome in the form of **Anette Holtmeyer's** (student on GPNEX first course validated by the University of Luton) visibly swollen wrists. She is now 39 weeks pregnant and has been suffering for a month or two. Her symptoms are similar to mine but also include weakness of grip, general stiffness and she is unable to put any pressure on her wrists - quite hard with a two year old in tow.

A recent copy of **ARTHRITIS TODAY** magazine January 2002 issue gives a good explanation by Dr Cathy Speed of Addenbrooke's Hospital Cambridge and she explains this common condition. The article can be accessed on www.ar.org.uk and is well worth the read or phone for more information 01246 558033.

The Internet site www.thehelpinghand.com brings up a basic explanation of carpal tunnel syndrome. A friend who was a district nurse had resorted to surgery called Carpal Tunnel Release Operation, which involves cutting the Transverse Carpal Ligament, and letting it heal back together. This gives more room for the soft tissues and therefore lowers the pressure. However, this

seemed very drastic with six weeks off work so she must have been suffering with more than just tingling fingers! I realized my frequent awakenings at night with tingling, numb and painful hands was not going to get any better unlike the 'self limiting' condition of pregnancy. Moreover the helping hand website states "by the time you feel any of them (the symptoms) in your hand, wrist or arm, cell degeneration is in process and should be taken seriously"

As shown, the Carpal tunnel (pink



area) is made up of several bones (white) connected by ligaments. The largest of which is the Transverse carpal Ligament (blue) these structures form the perimeter of a passage through its center called the carpal tunnel (also called the carpal canal). Through this tunnel run nerves, tendons, blood and other soft tissues. For a variety of reasons some of these soft tissues swell, especially the tendons (red) and the protective sheaths that cover them. Overuse (Repetitive Strain Injury or RSI), injuries such as sprains, friction between the tendons and their protective sheaths, fractures, fluid retention (common cause in pregnancy), forceful movements and infections are a few of the more common causes. However, unlike most of

your body where swelling simply protrudes, this swelling has no place to expand since it is encircled by bones and ligaments. Consequently, because the swelling is contained, pressure builds in the tunnel. This pressure then crushes the main nerve to your hand called the Median nerve (yellow), causing it not to function properly. The pressure also obstructs blood flow which retards healing and causes further cell degeneration until the cycle spirals out of control.

Another Internet site www.gpmu.org.uk under its health and safety

section refers to Repetitive Strain injuries and work related upper limb disorders. They list some typical treatments

REST - This is generally thought to be the best treatment for work related upper limb disorders in the early stages

WRIST SPLINT - Controversy exists as to the effectiveness of splints and

whether they actually lead to muscle atrophy.

PAIN KILLERS, ANTI INFLAMMATORY DRUGS AND LOCAL STEROID INJECTIONS

- These may produce side effects and may encourage continued use, thus worsening the injury. Obvious contra-indication for pregnancy and immediate postnatal period.

PHYSIOTHERAPY - has proved helpful.

SURGERY - For carpal tunnel syndrome, an operation to relieve the pressure on the median nerve may be recommended. Surveys indicate a limited success rate. So, my husband has made me a stretch assuager and I'll let you

RUTH BARRETT'S EXPERIENCE AS A PNEX TEACHER

This year just gone has been my busiest yet, with some exciting developments, and a couple more still on the horizon. I have taught courses pretty much back to back all year, although not all to full capacity. February 2001 - February 2002 saw 6 eight week courses with 62 women in total. Of these 18 have continued onto one of my follow-on classes for at least 4 weeks, and one lady I gave several personal training sessions to, until she felt confident and able enough to join a local gym.

Another group I have been working with since last Autumn, is Swindon Asian Womens' Association. I am currently coming towards the end of my second course with them, and these women are also very eager to exercise. Different challenges present themselves with this group: all the windows and doors need to be shuttered, or curtains drawn for privacy, and sometimes the language barrier can be a problem. Most of the women who come speak very good English, but still I find myself talking practically non-stop throughout the routine to make sure that I'm being fully understood! You know how it is when you give teaching points which seem to be being ignored? So I rephrase it, and rephrase it again, in the hope that eventually by the end of the session they'll all be doing it correctly!! Another factor is their clothing - they will all come dressed in much more than western women will wear to exercise. We've had to ask for the heating to be turned off and windows opened to prevent us all from expiring! I'm really enjoying

working with these women - at the end of the day they may be from a different culture, but their exercise needs are identical. I have noticed that they generally seem to be a bit more flexible than other groups I've worked with, but just like everyone else, they all want a flat stomach!

In addition to these courses, I've also done numerous talks on exercise at postnatal support groups throughout the town, and I've facilitated 4 sessions on Baby Massage - 3 at groups and one in someone's home.

Many of you will already know that I've been studying with Luton for the upgrade of my GPNEX to diploma status. Well, I've finished that now and am waiting to be awarded the Diploma officially. I won't say that it's been easy and straight forward because it hasn't, but I am glad that I've done it, and the actual course material was very interesting.

This year sometime, I plan to do the YMCA ante/post module so that I can start holding antenatal classes which people have started asking me for. Other possibilities include doing more with the Asian group, setting up a group at Lyneham which is a bit far out for a Swindon class, and being involved with the introduction of an exercise class for mothers with postnatal depression in Marlborough. Also I know I've inspired another mother to start the teacher training. It will be good to have someone to support and to be supportive - maybe we will be able to provide each other

Copy date for next SCOOPS is 15th June. We welcome articles, diagrams (really useful!!!) and photographs. And don't forget to send in your profile - see back page!

FUND RAISERS URGENTLY REQUIRED

How can we fundraise as an organisation that is not yet widely known? We badly need more permanent funding. At present, we are highly reliant on one person's very generous donations.

So can you help raise some money?

One possibility might be to organise an event together with other local charities that support families e.g. Gingerbread, Roundtable or local Toddler group. If the Guild member explains to the fundraising committee the need for fundraising many local groups might be happy to support the Guild of PNEX, especially if they have mothers who have benefited from a postnatal exercise course.

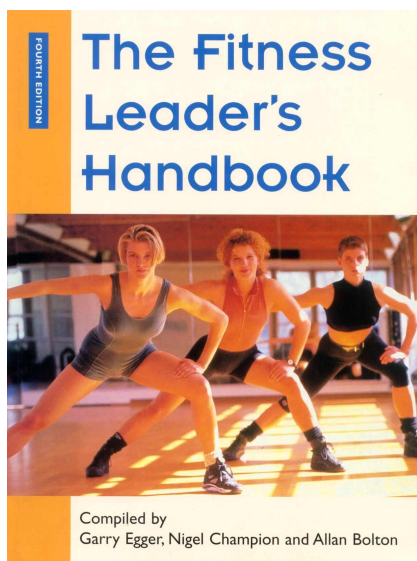
Here are a few other ideas.

- Most NCT branches organise a Nearly New Sale twice a year, the Guild of PNEX could **organise a refreshment stall** during the sale where drinks and slices of cake are sold
- There are currently many "chocoholics" **evenings** held (apparently very popular before Easter and Christmas)- it is possible to invite the last three or four postnatal groups to one.
- A suggestion of a **Power walk / pram pushing event** to raise money where people get sponsorship for walking so many miles or parts of a mile!

If there is any one with experience in writing the application forms for lottery funding or similar please come forward because there is a definite need to focus on the right way to put in an application for funding bid.

Either way, all ideas please to The Editor ABIRBarrett@aol.com
PLEASE SUPPORT THE GUILD!

A REVIEW OF THE FITNESS LEADER'S HANDBOOK



The Fitness Leader's Handbook
 ISBN: 0713650915
 Published by A.C. Black (1999) and compiled by Garry Egger, Nigel Champion and Allan Bolton, it offers good value for money at £13.99.

I've had to buy a good many books for the three core modules I've completed with the University of Luton, many of which I've confined to the top shelf of my bookcase probably just to gather dust. However, one book which I bought I would like to recommend to you as a very good overall text book for anyone involved in teaching or planning exercise programs.

Topics covered include:

- **An introduction to the human body and exercise** - good level of detail with lots of diagrams of useful things like joints and joint movement, and muscles.
- **The principles of exercise programming** - principles of training, and equipment examples.
- **Exercise programming for aerobic conditioning and for strength and flexibility**

training - all you would need for exercise prescription and planning a program. Gives a variety of examples of types of programs. Also covers screening.

- **Avoiding potentially dangerous exercises, back care and injury recognition and prevention** - lots of good photos of dodgy exercises with alternatives. Covers movement mechanics, and risk evaluation.
- **Exercise to music and aquafitness** - very good section on teaching methods and skills, cueing techniques, vocabulary, and a guide to moves and their variations.
- **Nutrition and weight control** - based on Australian guidelines and habits, but informative section on foods and their relative importance / energy value, with guidelines for weight control in association with exercise for fat loss.
- **Exercise and pregnancy** - gives up-to-date information on guidelines for exercising when pregnant - good diagram of rectus abdominis, and short section on pelvic floor strengthening.

I found the book very readable, and though it contains lots of technical and scientific information, it is presented in a very accessible format (ie, it doesn't send you to sleep, nor does it turn you off with lots of technical jargon). With this in mind it may be particularly useful for you trainees out there!

RUTH BARRETT



YOUR CHANCE FOR FAME!

Now's your chance to get your photo in the press!

For the next edition of Scoops, we would like to put together a brief portfolio of all the Guild members who are active teachers or therapists. **What we are after is a photo (not essential, but would be good if possible), with a brief but comprehensive description of what you / your exercise company offers, and where (ie, main geographical area covered).** The idea behind this is so that if we have enquiries from potential clients, or personal contacts outside of our own area, we can confidently recommend them to a teacher who offers what they are looking for. It also may be useful for your own networking purposes.

It would be really great to have everybody included in this, so unless you strongly object in principal to this idea perhaps you could get in touch.

Please email your details and photo to me at any time at:-

ABIRBarrett@aol.com

DON'T FORGET DATES FOR YOUR DIARY:-

Exploring Adult Learning with Gillian Fletcher on Saturday 15th June 2002

Revisiting Abdominals and Biofeedback with Judy DiFiore and Nikki Corrigan on Saturday 13th July 2002 (half day)

Chi Ball & Postnatal Exercise with Emma Backshall on Saturday 9th November 2002

Pelvic Floor, Physiotherapy and Biofeedback Techniques with Samantha Gillard in February 2003