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Niche of Need

~Jeff Rutstein trains people's psyches

By Suzanne Hildreth

Jeff Rutstein may be the fitness industry's best advertisement for the mind/body benefits of regular exercise. Several years ago, Rutstein, then an economics major at the University of Massachusetts at Amherst, had a drug problem. An avid body-builder, he used steroids to help him bulk up. He drank hard liquor and took street drugs to help him mask a low sense of self-esteem. By the end of his first year out of college, Rutstein was addicted to half a dozen different drugs, feeling physically sick, and becoming desperate for a way out.

"Toward the end, I was on steroids almost constantly. I was drinking and doing all kinds of other things. I'd try to stop, but it never worked. My cholesterol level was sky-high from the steroids. I knew I had a big problem."

On New Year's Eve, 1987, Rutstein made a last-ditch promise to himself that he'd never do drugs again. On New Year's Day, 1988, he began to keep that promise. He quit cold turkey an extremely dangerous step for someone who'd been using drugs so heavily. His body went into shock and, after more than a week of alternating between chills and fever, of being unable to eat or sleep, he entered a hospital.

It was a year before Rutstein could even think about exercise; he didn't have the energy or the desire. But when he finally did go back to the gym, he realized he had to approach it from a very different perspective.

"I used to have a no-pain/no-gain philosophy. But then, instead of emphasizing my build, I explored the psychological side of working out, he relates in his quiet, friendly manner. "I started focusing on each muscle feeling the contraction and stretch. It became almost like meditation for me. When I felt lousy, I'd go exercise and feel so much better. It really changed my attitude."

Rutstein is the owner of a one-man, personal training firm called Custom Fitness, which he operates out of the basement of his Quincy, Massachusetts, home. His business is unique: unlike the generally fit clients that most trainers work with, at least half of his 50-60 clients have been through treatment for depression, or for drug and alcohol abuse. Rutstein a certified personal trainer and a member of both the American College of Sports Medicine (ACSM) and the National Strength and Conditioning Association (NSCA) - ardently believes that these are

the people to whom exercise can offer the most. "A lot of these people never knew there was anything in their bodies at all," he explains, "but once they do once they begin to feel their muscles and start to feel stronger it really wakes them up."

The National Institute on Alcohol Abuse and Alcoholism reports that an estimated 15.3 million Americans abuse alcohol (another 1.5 million are recovering alcoholics), while the National Institute on Drug Abuse notes that 12.8 million Americans abuse illegal drugs. And finally, approximately 30-37 million Americans, or 12-15% of the population, suffer from depression, a condition that can manifest itself in drug or alcohol abuse. These millions upon millions of people include vice presidents, construction foremen, social workers, housewives, sales reps, lawyers, secretaries, journalists and college students.

It's a group of people that few in the health club industry have attempted to reach, but one that as Rutstein would attest can reap tremendous benefits from regular exercise. A National Institute of Mental Health consensus panel concluded that long term exercise can decrease depression in moderately depressed people, as well as boost self esteem. The International Society of Sports Psychology recently released a position statement crediting exercise with reducing feelings of depression and anxiety. In *The Exercise Prescription for Depression and Anxiety* (Plenum Press), Dr. Keith Johnsgard credits exercise as being as effective as psychotherapy in reducing the symptoms of moderate and major depression, and notes that it may be the only treatment which offers immediate mood elevating effects. And drug rehab centers, such as the Betty Ford Center in Rancho Mirage, California, include exercise and sports in their rehabilitation programs:

"We weave exercise throughout our program to relieve stress and tension, to get our clients to develop leisure skills, and to help with feelings of low self esteem," explains Activities Coordinator Rae Thrift.

Natasha Ford, executive director of the American Fitness Institute in Greenwich, Connecticut, believes that, since many clubs already serve members with physical problems, it's likely that more will begin reaching out to those with psychological problems. "I think this represents a window of opportunity for health clubs. Psychologists have already learned that, if you're suffering from depression, exercise can help."

"There's a real awareness among mental-health professionals about the physical and emotional benefits of physical fitness, as well as the social benefits of just putting that person in contact with others," observes Ellen Jessee, general manager of the Fort Sanders Health and Fitness Center in Knoxville, Tennessee, which frequently gets member referrals from area psychologists.

Perhaps, however, the best proof of what exercise can do for the mind, body and spirit is the testimony of someone like Frank, a hardware salesman and recovering alcoholic who's been working out with Rutstein for the past nine months: I'd gone to different doctors and group therapy, but it wasn't enough. Then I heard about Jeff in an Alcoholics Anonymous meeting. Now, working out is almost as important to me as going to work. When I walk out of Jeff's place, I feel good. For me, it's almost like a miracle."

.....Rutstein's niche is unique in the club industry-at least for the time being. So is his understanding of that niche and of the needs and challenges of the people who comprise it: Using the body to help the mind: According to Rutstein, addiction affects three parts of a person – the spiritual, the emotional and the physical. Too often, he feels, the physical part is overlooked. "At many 12-step meetings, such as those conducted by Alcoholics Anonymous, you'll see people loading up on coffee and cookies and donuts. That's what I was doing; I was looking for

a high through coffee and sugar. The physical part of recovery can be overwhelming," he explains. So Rutstein has his clients concentrate on strength training exercises, which he calls body shaping exercises, to get them to focus on their muscles and, hopefully, feel better about their bodies.

"Many of the people I work with feel numb in their minds and bodies," he says. "So if have them doing a bicep curl, I'll have them focus on that bicep. Often, I'll tap the muscle and say, 'Feel it stretch out, and feel it shorten up.' A lot of my clients never realized they had muscles in there."

J. Alexander Bodkin, M.D., an instructor in psychiatry at Harvard Medical School and assistant psychiatrist at McLean Hospital in Belmont, Massachusetts, works with people suffering from mood disorders, such as depression. A member of Rutstein's advisory board, Bodkin has discovered that exercise -particularly strength training - can have a very positive effect on his patients: "You want to get the brain to release endorphins-the chemicals that make you feel energized and good. Weight training does that. So does a cardiovascular activity such as running, but it takes longer."

One big difference between Rutstein's approach and that of many health clubs is that he doesn't conduct body-fat tests or any other kind of physical measurements (he always checks with a client's physician, however, if he thinks they're in poor health) It's not that he doesn't want and expect his clients to lose weight, gain muscle tone and make other kinds of physical progress; It's just that he believes the emphasis should be on enjoying the feeling of working out. The results will follow eventually. "I don't want to stress the appearance aspect at all," he explains. "My main goal is to make a person feel good. If they're comfortable with the routine and feel refreshed afterward, the rest will come."

Choosing the right setting: A deconditioned individual is often wary about going into a health club. A deconditioned person who's also battling an addiction or psychological problem may be twice as leery. Bodkin notes that people who are suffering from depression frequently find a club setting embarrassing or frightening.

"These are people who've spent a good part of their lives tuning out their bodies. They're very stressed out and don't feel good about themselves. If they walk into a gym filled with fit people, they'll be more stressed out," says Rutstein. Which is what he's very flexible about where he'll work with a client. For a fee (which he frequently discounts or waives), he'll go to a client's home, office, health club or, if they prefer, they can come to his private gym.

He understands the reluctance his clients feel about entering a club because of the way he felt upon returning to his old gym after quitting steroids: "The doctors were saying I should exercise - they all say that. I knew how to exercise, but I was hoping there was someplace I could go other than a gym where you had to get all dressed up; it almost felt like going to a nightclub. I needed a place where there was someone who understood where I was coming from."

Not all of his clients are gym-shy, however, so he also offers sessions at the person's health club. He works out with some individuals once or twice a week on a regular basis; others just want a fitness program and a few introductory lessons. Whatever they want, he's willing to provide. Scott Baker, the owner of one of the fitness centers that Rutstein uses - Gold's Gym Plus in Braintree, Massachusetts - believes having such a service available is an asset to the gym. "He probably has half a dozen or more people he works out with here. It works well for us. We try to surround ourselves with a ring of professionals; we have a chiropractor here, for instance, and a physical therapist. We want to be able to deal with a

range of people - not just the average fitness enthusiast."

Many fitness centers already devote some square footage to programs for specialized populations - pregnant women, for instance, or obese members, or orthopedic and cardiac rehab patients. So there appears to be no reason why clubs couldn't also make space available for qualified trainers to work out with people being treated for mood disorders or drug addiction. As Wayne Westcott, Ph.D., fitness director for the South Shore YMCA in Quincy, Massachusetts, and strength-training consultant for the National YMCA, observes: "We have an area here where we work with wheelchair-bound people. A club could designate a part of its facility for any population that it wants to work with, be it cardiac rehab or the mentally challenged, or any other type of group."

Lending extra support: People often need as much emotional handholding as they do physical guidance. That's particularly true of Rutstein's clientele. Many come to him both for the one-on-one exercise and for the extra empathy he provides. "These are people who are often very lethargic, feeling hopeless. They often won't do things on their own," says Bodkin. "Jeff is very empathic and supportive; he can coach people to do things they wouldn't do otherwise."

Part of what Rutstein provides is basic one-on-one attention during the workout - a service all personal trainers give their clients. The simple act of guiding someone, step by step, through a workout can ensure that the person sticks with it. Barbara, another of Rutstein's clients, didn't have much luck working out by herself at a club. Like many people, the 37-year-old secretary, who was under a doctor's care for hypertension and moderate depression, needed a personal trainer to help keep her on track. "I had never worked out before. The instructor at my gym gave me some assistance for the first five minutes and then went on to someone else. I needed Jeff's encouragement and one-on-one attention."

But the other, possibly more important, aspect of what he does goes far beyond standard personal training: Rutstein spends a good deal of time counseling his clients about their problems, offering sympathy and support. "I'm not a therapist, but sometimes I almost feel as though I were," he observes. Since he's been through the pain of addiction and recovery, clients usually feel less inhibited about sharing their emotional ups and downs with him.

"It's not just the exercise that's important," says Frank, the recovering alcoholic. "We relate to each other. For instance, I might tell him that I ran into some of my old friends, whom I used to drink with. So he'll talk to me about it and remind me that those are the kind of people I need to stay away from. He takes an interest in me and how I'm feeling."

Rutstein tells the story of one of his clients, Peter, who was severely depressed and drinking so much that he wasn't able to hold down a job. A college graduate, Peter had been inactive his whole life and had been in and out of rehabilitation centers. Their first session together started with a five minute walk and a heart-to-heart conversation. "The notion of exercise was intimidating to him. He'd just gotten out of the detox center, so we talked about his experience. I think he was surprised I could talk his language. I think that gave him hope." Peter's first workout was very light - just one set each of six or seven exercises. But that first workout led to another . . . and another. A year later, Peter works out with Rutstein two or three times a week, in addition to exercising on his own, and, more importantly, hasn't had anything alcoholic to drink in over a year.

Rutstein involves himself in his clients lives to the extent of buying groceries or fixing lunch for them when it seems necessary. The reason, he says, is because some people are so depressed or so stressed out that they don't take the time to eat well. Often, their diet consists

primarily of junk food. So Rutstein will pick up fruit, bread, juice or some other food he thinks they'll eat; or, after a workout at his place, he might fix them a quick, nutritious lunch.

"I think my approach is a lot different from those of other trainers, in the sense that most don't really think very much about how you should treat a client. That can be more important than the exercise," asserts Rutstein. "Maybe it would help if more personal trainers took psychology courses. A lot of the people I work with have been through a lot in their lives, and it's really important to let them know you care."

Building a referral network: In order to attract this specialized clientele, it's virtually mandatory to build up a network of referring physicians. Rutstein, who lectures at drug-treatment centers, built his up gradually, relying on word-of mouth referrals from people in Alcoholics Anonymous and other 12 step programs and their physicians. He's been successful at building a business based on referrals - rather than advertising - because he's so good at what he does. His certifications and personal knowledge of addiction recovery make him trustworthy in the eyes of physicians and clients. Over time, he's built up an advisory board of five medical and fitness professionals - including a psychiatrist in charge of a Massachusetts drug and alcohol abuse treatment center - which has further enlarged his referral network.

When working with mental or physical problems, credibility is always key. Jessee, of Fort Sanders, notes that she often has area psychologists refer patients to her, even though the club doesn't have a specific program for them. The reason is the good reputation her club has gained through its affiliation with the Fort Sanders Medical Center, "We get referrals because they know me and the professional staff we have here."

Since Rutstein has been receiving so much media coverage - including appearances on local TV stations, articles in a variety of print media, and inquiries from CNN and the Associated Press - his business will no doubt continue to increase. Currently, he's seeing 20-30 clients each week - a schedule that, he admits, is close to being more than he can handle. He has considered moving to a larger location or, preferably, joining forces with a clinic or hospital, and setting up his business at their facility. Convincing insurers to reimburse clients for his services is something else he's hoping to arrange in the near future.

Rutstein's success and growing number of referrals stem not only from his qualifications and background in addiction, but also from the fact that he makes a habit of putting his clients' needs ahead of his own. "The doctors have told me I ought to charge more than I do," he admits, "but I have a problem with that . . . I haven't gone out and advertised. People come to me because they trust me. The doctors trust me. After all, the people they treat are sick; they don't want just anyone working with them. Exercise helps people stay off medication and stay out of the hospital. I think it can really do that if it's approached in the right way and if you really try to understand where the client is coming from."

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