Chapter 2 PROTECTIVE CIRCLES: BOUNDARIES AND THE PROFESSIONAL RELATIONSHIP

Boundaries are like protective circles surrounding the professional relationship. Rather than being barriers that separate us from our clients, good boundaries safeguard both practitioner and client. Boundaries separate what is appropriate in professional relationships from what is not. When used well, boundaries clarify limits and expectations, helping to keep both client and practitioner secure.

In theory, the idea of staying within professional boundaries may sound simple. The client comes to us for massage therapy or bodywork. We do what we are trained to do and what we have contracted to do. The client pays an agreed-on amount or completes a prearranged trade. Although this may not sound complicated, it can be all too easy to lose our focus and overstep these boundaries. In understanding how to establish healthy boundaries, we first need to consider our role in the **therapeutic relationship**.

Understanding Our Professional Role

Taking on a role does not mean that we pretend; rather, it means that during our interactions with clients, we behave in ways that are appropriate to the therapeutic **contract**. The contract is determined by what we have been trained to do and, more importantly, by what the client is paying us to do. We may have training in clinical psychology, for instance, but if clients are coming to us for acupressure, we should not take on the role of psychological counselor.

We always have two roles with our clients: a specific role as a certain kind of somatic practitioner and a more general role as a professional. The first role—and the one most commonly recognized—is defined by our specific training, such as massage therapist, Certified Rolfer, or Trager practitioner. In this role, we use a certain method of massage therapy or bodywork to help a client. The broader role that we must learn is that of a professional

Therapeutic relationship:
A relationship between client and practitioner that is focused on the wellbeing of the client.

Contract:

An agreement between practitioner and client that is often implied rather than being explicit about what each will or will not do. An ethical contract must be within the bounds of the practitioner's training and the ethical standards of her or his profession. The client agrees to give specific fees, goods, or services in return and agrees to be respectful of the practitioner's guidelines for appropriate behavior.

person—that is the role that has been traditionally neglected and that can cause the most confusion. When we take on a professional role, for example, we keep our personal lives, opinions, and needs out of our sessions. Also, as part of that role, we expect to be treated as a professional with all that it entails.

To have a solid and rewarding practice, every somatic practitioner needs to be comfortable in these two roles—both as a certain type of practitioner and as a professional. However, learning to be at ease with our roles takes time. We may be able to learn a couple of massage strokes in a weekend, but it takes a much longer time to develop a solid sense of ourselves as professional somatic practitioners.

The Professional Therapeutic Relationship: What Stays In

If boundaries form a protective circle around the professional therapeutic relationship, what is reasonable to include in that circle? The following sections give a brief description of the most basic elements of the professional therapeutic relationship, all of which are discussed more fully in later chapters.

Client-Centered Actions and Words

The concept of being "client centered" is central to the therapeutic relationship. Client centered means that our actions and words should be motivated by what is best for the client. Being client centered means that we put aside our personal egos, interests and needs, and likes and dislikes and act in the best interests of the client. At the same time, this doesn't mean that "the customer is always right" or that we should let clients take advantage of us. After all, it's also in our clients' best interests to provide them with clear limits.

Being client centered means, for one thing, that clients have a right to ask for what they want. We don't want to become dictators, ordering clients to be quiet if we decide they're talking too much or becoming upset if they dare to ask us to vary our massage routine for their comfort. Clients need to be free to make requests as long as the requests are not abusive, destructive, or inappropriate. They should be encouraged to make their needs and wishes known. When clients do speak up, it's our job either to adjust and meet their needs or to explain why what they are requesting is not appropriate, in their best interests, or within the scope of our training or abilities.

A practitioner complained about a client: "When I came back into the room after giving her time to get undressed and on the table, she had taken all the pillows in the room and arranged them around her on the table—under her knees and her neck and different places."

In this story, one wonders why the therapist is complaining: it sounds as if the client is doing the practitioner's job for her. Unless the client was destroying property, there's no reason why she shouldn't make herself comfortable.

There are instances when we would not want to adjust to clients' wishes or automatically honor their requests. If the client's arrangement of pillows might interfere with the session in some way, the practitioner could always explain why the arrangement needs to be altered and ask the client's permission to make the change. Or, for instance, if a client has a pain in his neck and asks that we spend the whole hour working on his neck, we might want to suggest that because neck pain often reflects tension throughout the body, he might receive greater benefit from a more complete massage.

Confidentiality

If we want to be respected as professionals, we have to honor our clients' privacy and confidentiality. We cannot gossip about what they said, complain about what they did, brag about how much they liked our work, or in any way discuss or relate what clients said or did during our sessions (or during any professional contact). Confidentiality is at the core of professional relationships. It begins with the first phone call and continues for the entirety of the relationship.

A friend relates this breach of confidentiality:

I recently received a massage from a practitioner I hadn't been to before. I was surprised when she began telling me how one of her clients, a man we both knew, was responding well to her work. She talked about the physical problems he had had and what relief he'd gotten from her massage. I think I was supposed to be impressed by this report, but all it did was make me uncomfortable. I thought, "What will she say to other people about me?"

If you work for someone else, a problem can arise if your employer doesn't enforce confidentiality. Here's how one massage therapist dealt with that issue:

After I began working in a spa, I discovered that it had the atmosphere of a gossipy beauty salon—both the owner and other massage therapists chatted casually about clients and repeated personal information clients had told them. I was tempted to join in, but I found that when I did, I didn't feel good about myself as a massage therapist. It also colored the way I felt about the client when I saw them again because I felt guilty. Now I stay away from those discussions. I don't want to work in that atmosphere and am looking around for a more professional setting.

Confidentiality is at the core of professional relationships. It begins with the first phone call and continues for the entirety of the relationship.

Consistency

When asked what keeps clients coming back, many experienced therapists put consistency high on their list. Clients are reassured by consistency and reliability (assuming that we are consistently good about professional standards and not, for instance, consistently flaky or insensitive). After clients have gotten used to our settings and styles, they can be rattled by changes in routine, in the office space, in session times, and in any other part of our work with them. For instance, if a client has a regular time slot, it's important to try to keep that time slot for him and not move him to a different time. If we do have to move our office or change a regular client's hour, we can be careful to keep other elements of our work the same.

Of course, if we work for others, we don't always have control over when a client is booked or even what therapy room we will use. And even practitioners who work for themselves have to make changes. (Helping clients adjust to changes is discussed further in the next chapter under "Sessions Occur at the Same Time and Place at Regular Intervals.") Clients can trust us if we are professional and attentive to the details of their comfort, and they can relax more deeply if they can trust us.

Informed Consent and Right of Refusal

Informed consent is a formal term meaning that clients have a right to understand all that is involved in our work with them, and we must have their educated, informed consent for our work with them to be ethical. It means that there should be no surprises for our clients.

As much as possible, we should spell out verbally and in writing our contracts with clients. They need to know what our training is, what methods we will be using, and the possible benefits and risks of those methods. We also have to let clients know that they can ask us to stop at any time and for any reason. They have what is formally called the right of refusal. It's never appropriate for us to be impatient or annoyed by clients who question our work or credentials or who don't want to take part in any aspect of our work. Clients need to know that we are offering our expertise but that they are ultimately in control of the session.

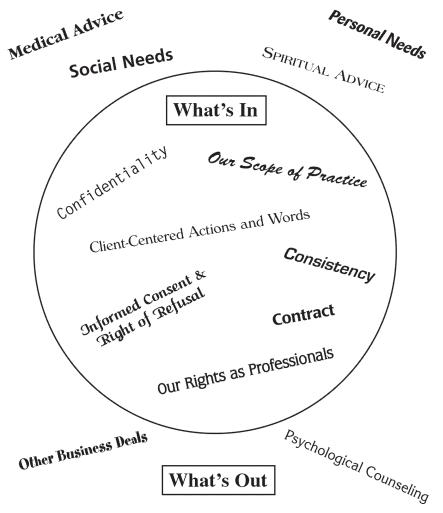
Our Rights as Professionals

Along with spelling out to clients what they can expect from our work and getting their consent, we need to be clear about what we expect of them. Upholding our rights as professionals is an important basic principle for a healthy therapeutic relationship. We can, for instance, expect our clients to show up on time and leave when sessions are done. We can expect them to give us adequate cancellation notice and pay our fees on time. We should not work with abusive or disrespectful clients, and, indeed, we can decline to

work with any client when we do not feel it is in our or their best interests to do so. (However, we need to be familiar with the codes of practice in our state or province that pertain to refusal to work with a client.) Also, those who wish to work for a spa or for another professional need to find out in the interview process their prospective employer's policies concerning the rights of massage therapists.

The Professional Therapeutic Relationship: What Stays Out

As somatic practitioners, we have to stay within the limits of our scope of practice, that is, the traditional knowledge base and standard practices of the profession. Staying inside those boundaries sometimes requires us to walk a



The professional therapeutic relationship: what's in and what's out.

fine line. Is it psychological counseling when we comfort a recently divorced client? Are we giving medical advice when we suggest that a client might not need his shoe lift anymore? When are we overstepping the line between friend and client? When are we giving too much personal information?

It's fair to assume that every somatic practitioner has violated boundaries, if only in some small way. Keeping good boundaries is a little like steering a car—it takes constant correction. Just when we think we're on a smooth path, we hit a bump. It's not a question of whether we make mistakes; we're human and we're bound to make mistakes. It's more a question of knowing when we've made mistakes and then being willing to change our behavior.

A colleague who often gave advice to an unhappily married client realized that he was in over his head. He told the client he would gladly continue to be a sympathetic ear for her, but if she wanted to work on changing her relationship with her husband, he would help her find a good marriage counselor.

A bodyworker became aware that when he talked too much during a session, he literally would have a bad taste in his mouth. Now when he gets that taste, he knows it's time to be quiet.

After a too-short vacation, a colleague realized she was dragging in just a few minutes late to all her sessions. As soon as she noticed this, she began making extra efforts to be on time and to take better care of herself.

The challenge is to be aware of boundaries and value them, yet be tolerant of our own imperfection. However, because our mistakes are usually at the client's expense and can hurt our practices, we don't want to be too tolerant of our shortcomings.

There are three common ways that we venture outside the safe boundaries of the professional relationship: bringing in our social and personal needs, going outside our scope of practice and expertise, and mixing our work with other businesses. The following sections give a brief overview to highlight these major problem areas. All of these areas are discussed in more detail in later chapters.

Social and Personal Needs

Perhaps the most frequent boundary confusion is between our professional and our social lives. Ways that we can overstep those boundaries range from

the relatively harmless, such as an occasional lapse into chatting during a session, to the more problematic, such as socializing with clients and befriending clients, to the downright unethical, such as dating a client.

Some of us don't understand why it's important to draw a boundary between our social and professional lives. What's wrong with sharing something personal about ourselves with our clients? What's wrong with a friendly cup of tea with a client? Maybe nothing is, but these actions might interfere with our professional relationships with our clients. Our boundary slipups usually have an innocent motivation. Some common reasons that we may want to bring our social needs into our professional lives are discussed in the following sections.

THE NEED FOR SOCIAL INTERACTION

Probably the most common complaint clients have is about practitioners who talk too much. Clients are trying to relax and drift away into their own world, and we keep pulling them out of that world with our demands for their attention. Clients rarely ask us to be quiet. They won't say, "I don't want to hear another word about your new boyfriend." Clients are both too polite and too influenced by the power imbalance inherent in the relationship. Rather than asking us to stop talking, they usually respond politely and then perhaps complain to their friends—or worse, not come back.

On the other hand, we don't want to have a rigid "no-chat" rule. Our main goal is for clients to trust us and feel comfortable working with us. In some instances, clients themselves have a need for social interaction with us. Here's an example from a colleague:

I work with a chiropractor who is warm, friendly, and very informal with his patients (whom he often refers to me). He has known many of these people for a very long time, and during his treatments he talks with these patients as you or I might talk with a coworker—sharing stories, information, or opinions about family, vacations, politics, etc.

When I began working in his office, I tried to maintain a firmer professional and personal boundary, keeping my conversation with patients focused strictly on the work. This confused and baffled many of them, as they were accustomed to a more chatty level of interaction, and some of them misinterpreted my behavior as emotional distance, personal coldness, or a rejection of their desire to get to know me. In the end, I have chosen to adapt my style so that it more closely matches the doctor's. I still maintain a professional demeanor, honor patient confidentiality, and uphold ethics and standards of practice; at the same time, I have come to realize that every clinic or group practice has its own distinct dynamic, and there are many ways to express professionalism and maintain good boundaries.

This is a great example of adjusting one's style for the sake of the client. The key here is that the therapist didn't lose sight of her professional role and her focus on the client's well-being. When you step outside boundaries, be careful that your aim is to meet the client's need for social interaction and not your own.

THE NEED FOR FRIENDS

Some practitioners may say their clients are like friends. We may be on friendly terms with our clients, but are they really like our friends? Do we have friends who come to see us and immediately throw off their clothes and describe all their aches and pains?

There's a difference between a client and a friend. (And if our friend becomes our client, then the client role comes first during the session hour.) Personal friends put up with our lapses and our flaws; they listen patiently while we go on for 10 minutes about what somebody said to us and what we said back. They can let us know—and forgive us—when we hurt their feelings. Friends aren't paying us.

As soon as someone becomes a client, we need to be aware of our therapeutic role, both in and out of sessions. The more we muddy the waters between the social and the professional, the more likely we are to do or say something that will interfere with having a professional, healing relationship.

A female bodyworker used a male client's sessions to lament the woes of her divorce and the problems of being single. This was confusing to the client—he wondered if she wanted a romantic relationship with him. When he asked her out on a date, however, she refused him. He felt hurt and rejected and stopped making appointments with her.

This client ended up feeling wounded or betrayed by a relationship that should have been therapeutic. We usually cheat our clients when we put the focus on ourselves, when we ask them to listen to us and take care of us.

THE NEED FOR ROMANCE AND EXCITEMENT

There's another reason to avoid the temptation to socialize with our clients. Let's be honest—when the wish to socialize is there, isn't it sometimes because we're attracted to that client? Or perhaps the client has a crush on us that we are enjoying. If we socialize with that client, what kind of message are we sending? Even if we are not flirting, the client may think we are. Because it's unethical to date clients or even to flirt with them, we'd be better off keeping the relationship strictly professional—and perhaps seeking some outside advice or discontinuing our work with a client for whom there is a strong attraction.

Some of us can't avoid social interactions with clients. Those of us who live in small towns or are involved with small communities within a large town may have a difficult time keeping that boundary firm. We may frequently run into clients at outside events, friends and acquaintances may become clients, or clients may become friends. How to navigate these different relationships is discussed more fully in Chapter 10 on dual relationships.

Going Outside Our Scope of Practice or Expertise

We go outside boundaries when we make exaggerated claims about the effects of our methods or when we behave as if we are experts in areas in which we have either no training or only a relatively small amount of training. For instance, we are on thin ice if we guarantee that massage will lower a client's cholesterol level. Likewise, if we tell clients what foods to eat or why they should divorce their spouses, we have ventured into territory for which we have neither training nor contract.

Perhaps the wish to inflate our work comes from the general insecurity of the profession. We don't live in a culture where ads on the bus read, "Got aches and pains? Consult your bodyworker first." The benefits of our work are becoming more widely known, but many people still don't know how it can help them. For the most part, manual therapies are relatively unacknowledged by a culture accustomed to a traditional medical viewpoint. For many of us, there is a vast gap between what we know to be the value of our work and the value given to it by much of the public. Perhaps in our frustration with the lack of recognition, we swing the other way and promise too much.

Bragging, promising too much, and inflating the merits of our brand of work are all signs of insecurity, as is speaking negatively about other methods or practitioners. Our motivations for becoming somatic practitioners are complex, but generally, we have a desire to help people feel better. It can be difficult to tell them the simple truth—to say to someone who is in pain, for instance, "Maybe this will help, and maybe it won't. You might even feel worse before you feel better." It may be harder to say, "I don't have enough training (or skill) to help you. Let me refer you to a more advanced practitioner (or another kind of health professional)." But all professionals, no matter how advanced their skills and knowledge, need to know their limits.

THE WEEKEND WORKSHOP SYNDROME

Many of us are constantly looking for ways to advance our knowledge of ourselves and our work. We go to workshops to add new techniques to our repertoire; we attend seminars that help us with personal discovery and spiritual growth.

Weekend workshops can reenergize us and give us new ideas and techniques to explore. Personal growth workshops can free us to have healthier

relationships with ourselves and our clients. But these short courses can also give fresh meaning to the phrase "A little knowledge is a dangerous thing." Sometimes weekend workshops produce "instant experts." I've seen people with a weekend workshop or two under their belts doing cervical adjustments, giving advice on neurological problems, or claiming to understand the causes of cancer. These are dangerous presumptions of expertise.

We need to feel secure in the value of our training and our work. We need to realize that the ability to give a good massage or bodywork session is as good as gold and a good somatic practitioner enhances the quality of clients' lives every day. We don't need to embellish our skills or knowledge. If we do what we're trained to do competently and with compassion, it's more than enough.

Some examples of what should stay outside the therapeutic circle are provided next.

MEDICAL ADVICE

Somatic practitioners' technical skills have advanced rapidly in recent years. Because of these advances, we can be confused about our role in dealing with medical situations. True, sometimes somatic practitioners have resolved physical problems that have stumped physicians, but that does not mean that we are medical experts.

A group of bodyworkers were discussing a colleague's prospective client who had a rare disorder of the thoracic spine. Much advice was given about which vertebra to work with, which to avoid, and how to help the client. Everyone's intentions were clearly good, but all these suggestions came from practitioners who had never seen the client and knew nothing of her history or the severity of her problem. Nor did any of them have the required training to work with a client with this rare disorder.

Within the profession, there is concern about practitioners who treat medical issues without sufficient training or without consultation with the client's doctor, chiropractor, naturopath, or other involved practitioner. Such boundary violations can be as simple as giving advice that is traditionally in the medical realm, for instance, advising a client to give up an ankle brace or to cut back on medication. Or these violations can be as dangerous as working with a client who has a serious medical condition, without permission and input from the appropriate medical practitioner.

If we give an opinion, we need to identify it as a personal opinion unless it is within our scope of practice and training. And we need to take care how we state an opinion. "I've known some people who used vitamin C for colds with very good results" is safer to say than "You should take vitamin C."

But beyond a concern for staying out of legal hot water, we want to honor the dictum "First, do no harm." Although we can sometimes relieve a condition that wasn't helped by the usual medical regimen of drugs or surgery,

We don't need to embellish our skills or knowledge. If we do what we're trained to do competently and with compassion, it's more than enough.



Avoid giving medical advice.

that doesn't mean that we can hang out a shingle that reads, "The Doctor Is In." Most clients already give us more authority than is rightfully ours. It's up to us to stay honest and within the bounds of what we know.

PSYCHOLOGICAL COUNSELING

The hardest judgment calls to make about boundaries are those that concern psychological and emotional issues. When are we being friendly, and when are we making a mistake by acting like amateur psychotherapists? As practitioners, it's appropriate to be sensitive to our clients and supportive of them. It can be helpful to get to know them. Such information as whether a client exercises regularly, is happily partnered, or has a stressful job can give us a broader picture of the client and help us know how to work with them better. Except for obtaining information necessary for treatment, though, it's never appropriate to pry into a client's private life.

Many clients volunteer information about their lives and concerns, making it difficult for us to know how to respond. But we have to watch that we don't stumble into the role of psychotherapist or counselor by giving advice or counseling when we don't have the training. In general, anytime our response goes beyond good listening, we're probably heading down the wrong road.

Counseling is more than just common sense. Without the appropriate education, we can't usually tell the difference between, for instance, a mentally disturbed person and someone who is reacting to a momentary or temporary crisis. We also don't usually have the training and fine-tuning it takes to keep our own biases and emotional reactions out of interactions with clients.

It can be easy to fall into the trap of naively giving advice about personal matters. Our motivation is good: we want to help our clients. After all, we have our accumulated personal experience, we've read books, and maybe we've been in therapy ourselves. We may have had emotional openings that were useful or even profound. We care about our clients; we see their unhappiness and want to share our experiences and philosophies with them.

Despite their good intentions, somatic practitioners who try to act like counselors are often clumsy—doing things that a good psychotherapist would not do, such as giving advice, confronting clients bluntly, or making hasty interpretations without really knowing a client. Even if we have training in these areas, we must look at the reason the client has come to us. If he comes to us for a painful lower back, it's not our business to tell him that he's angry with his boss. However, in our role as educators, we could say, for instance, "Muscle tension is often related to our anxiety about a problem. Perhaps you've been under stress at work or at home."

On the other hand, sometimes we interpret our unspoken contract too strictly. For instance, some practitioners are uncomfortable when clients want to talk about their personal lives; they believe it isn't their job to listen to even the minor issues of a client's daily life. They want to interpret the contract very narrowly and say, "I only work with muscles."

But isn't it part of our professional role to provide an atmosphere within which clients can relax those tight muscles? Some clients unwind by talking. Although it's not our job to give advice or counseling, we can provide a sympathetic ear.

SPIRITUAL ADVICE

A client who was going through a rough time in her life complained to her new massage therapist about how difficult things were for her. The next time she saw the massage therapist, she was startled and a little put off when the therapist handed her a religious pamphlet of inspirational stories.

Regardless of how meaningful a spiritual path or religious group has been to us, it's not appropriate to set ourselves up as spiritual advisors. Sandy Fritz, author of massage therapy textbooks and a massage school director, teaches her students how to stay within boundaries with clients who seem to be dealing with bigger questions about life. She advises that when clients talk about their lives being empty and meaningless, for instance, practitioners can help them identify that their issues might be spiritual but should not give advice or deliver a sermon. Practitioners can say, "Your questions strike me as involving spirituality" or "You sound as if you're thinking a lot about your fundamental beliefs about life." Such reflections may help the client clarify their quest far better than any personal advice we may be tempted to share. If we have had a spiritual experience that has been important to us, rather than being preachy, we can use that awakening to be more compassionate with our clients.

Mixing Other Businesses with Our Practice

A massage therapist who had an outside part-time office job gave her boss a massage, not knowing that he was having marital problems with his wife, who also worked in the office. As clients sometimes do, during the massage, he began to confide in her about his unhappiness with his wife. The massage therapist felt awkward about hearing these confidences and didn't know if the boss was subtly expressing interest in her. After that encounter, she became uneasy in a work situation that had previously been comfortable.

Problems can arise from mixing business transactions—either taking on business associates as clients or trying to involve our clients in other kinds of business transactions. The former can lead, as it did in the above example, to a confusion of roles, and the latter can have results that are harmful and even unethical. We might sell a supplement to a client who then has an allergic reaction to it. Or, more likely, we may lose a client because he doesn't like being pressured to buy our magnets, supplements, or whatever other product we might be selling. Unfortunately, some spas ask (or even require) their massage therapists to aggressively sell spa products to clients. Be sure you know spa policies on this issue before you sign a contract.

The most serious consideration is that it's unethical to use our relationships with clients to benefit ourselves in ways other than our standard fees. Clients make themselves vulnerable to us and appreciate us because of the unselfish role that we take on as their practitioner. We take advantage of that vulnerability when we try to use our influence to persuade clients to buy certain products or engage in business with us in other ways.

Boundaries Aren't Barriers

Boundaries aren't barriers between practitioner and client. Every relationship in our lives has boundaries. These limits tell us what to expect and what's appropriate in a particular situation. Boundaries are a natural part of everyone's world.

Boundaries help keep us within the limits of our training. They keep our egos and our insecurities out of our sessions, and they keep us honest. By maintaining good boundaries, we can show the best of ourselves. Good boundaries are at the heart of being a skillful and compassionate practitioner. They are what makes us professional in the eyes of the world and bring respectability and credibility to our work.



Questions for reflection

1 Make a case for why keeping good boundaries helps clients feel safe and comfortable with us and why it matters that clients feel safe. If you don't believe that clients need to feel safe or that good boundaries help, defend that position.

- 2 A client tells you that she has been having an affair for the past several years with a married man who has repeatedly promised to leave his wife but has never done so. She says she doesn't know what to do and seems confused and upset. As her massage therapist, how can you respond without crossing boundaries?
- 3 Think back to your first professional massage. (If you haven't had a professional massage, stop right now and go get one.) Were you nervous? Did you know what to expect? Is there anything the practitioner could have told you either on the phone or when you first arrived that could have made you more comfortable or that would have helped you know what to expect?
- 4 Has a professional of any kind ever given you advice that was outside his or her level of expertise and also unasked for? How did you feel about that?
- 5 Imagine that your office has just been blown away by a tornado. As you stand in the rubble that was once your treatment room, your 4:00 client arrives. What can you say to the client that would be client centered?