

Chapter 5

ETHICAL BOUNDARIES: FROM THEORY TO PRACTICE

We can look for simple answers about ethics—what are the rules, and how do we stay out of trouble? However, there are few black-and-white absolutes to which we can cling. To make wise decisions, we usually have to thread our way through the gray and uncertain areas of the therapeutic relationship with all its details and nuances, its transference and countertransference issues. Also, to decide the “right” thing to do, we have to consider not only the details of the particular situation but also the broader picture of how an action will affect our clients, our own reputation, and the reputation of our profession.

Ethical Questions

The following questions will help you determine whether an action may lead you down the wrong path. They can help you avoid harm to clients, to your relationship with clients, and to your reputation and the reputation of the profession.

- Would this action take advantage of the power, affection, or goodwill that clients give me because of my role (transference)?
- Would it violate the client’s privacy or confidentiality?
- Would it create a dual relationship (a relationship with the client outside that of client and practitioner) and, therefore, make the professional relationship less clear?
- Would it exceed the boundaries of the original implied contract—going beyond either my area of expertise or what the client has agreed on?
- Would it be an exception to my usual policies?
- Regardless of how an action appears to me or my client, would it look inappropriate to others?
- Would the action be disrespectful of the client?

It may be obvious why some of these questions are included and less apparent why others are. Let’s take a closer look at these questions, grouped by their ethical intentions.

Protecting Clients' Vulnerability

- Would this action take advantage of the power, affection, or goodwill that clients give you because of your role (transference)?
- Does it violate the client's privacy or confidentiality?

Most ethical standards are aimed at keeping practitioners from taking advantage of the power difference between them and their clients—using a client's affection and goodwill to benefit themselves personally.

Respecting clients' privacy and confidentiality is also a central part of what it means to be professional and to be sensitive to a client's vulnerability.

You can overstep boundaries in small ways—for instance, taking advantage of transference by talking too much during a session or breaching confidentiality by advising someone who has referred a client that the client has made an appointment. Such actions are not usually unethical; however, the more disciplined you are in honoring the boundaries of transference and confidentiality in even small ways, the less likely you are to err in more serious ways.

Problems arise if you work for an employer who does not honor clients' confidentiality or respect clients' vulnerability. For instance, there may be spas where the owner may allow and even participate in gossip about clients. And some spas ask their massage therapists to take advantage of their relationship with clients by pushing them to buy spa products. Working with these problems will be discussed later in the chapter.

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Keeping Small Boundary Mistakes from Leading to Big Problems

- Would this action create a dual relationship and, therefore, make the professional relationship less clear?
- Would it exceed the boundaries of the original implied contract—going beyond either your area of expertise or what the client has agreed on?
- Would it be an exception to your usual policies?

Significant ethical mistakes rarely come out of the blue. These questions relate to the fact that the more you bend boundaries, the more likely you are to get into serious ethical problems. Many boundary transgressions, such as having dual relationships with clients, aren't necessarily unethical by themselves, but they can become bigger problems if you make a habit of doing them without being alert to the difficulties.

A massage therapist who often socialized with her clients had a hard time keeping her roles straight. One of the clients she socialized with had told the massage therapist during a session that she had multiple

sclerosis (MS) and wanted to keep it a secret. However, one day, another friend was criticizing that client and the massage therapist said, “Don’t be so hard on her. She has MS.” The client with MS found out about the confidentiality violation and, understandably outraged, filed an ethics complaint against the therapist with her professional association. A breach of confidentiality that would have been disturbing enough had it simply occurred between friends became a violation for which there were serious professional consequences for the massage therapist.

Avoiding the Appearance of Inappropriateness or Impropropriety

- Regardless of how an action appears to you or your client, would it look inappropriate to others?

“Impropropriety” may sound like a prim and proper word to the often-free-spirited members of this profession. As long as you know you’re a good, conscientious professional, you may not want to concern yourself with how something looks to an outsider or, in effect, what the neighbors think. However, you can’t ignore the fact that massage continues to be linked in the public’s mind to sexual services. Although it’s unfortunate that our culture often equates nudity and touch with sexual behavior, that’s the reality that you have to live with. It’s not fair that the manual therapy profession is sometimes misjudged or that good professionals may have to contend with offensive assumptions, but if you want to help your own reputation and that of the profession, it’s best to be cautious.

Consider these statements from well-meaning massage therapists:

I tell my clients that as long as they’re comfortable with it, they don’t have to be draped.

I’m interested in dating Bob, so I invited him to come to my office and get a free massage. Since it’s free, it doesn’t affect my professional image.

You can imagine how these situations could have a negative effect on the reputation of both the professional and the profession. Suppose a prospective client heard that a massage therapist doesn’t require draping. It could color this person’s opinion of the massage therapist and, if they weren’t familiar with the fact that draping is supposed to be a standard protocol of massage, could color their opinion about all massage therapists.

In the second example, bringing a social and possible sexual element into your work and into your office—off hours or not—is a bad idea. It can

give the client or anyone who hears about it the idea that you regularly mix your romantic life with your work.

You should not give people any room for their imaginations to run away with them. Maybe an action seems innocent to you and to the client involved, but how will it look to the public? Your colleagues won't appreciate it if you lower the reputation of massage therapy and bodywork in the community. It means they will have the indignity of fielding many more phone calls from prospective clients who expect sexual services; they will have the annoyance and perhaps danger of many more clients who arrive in their offices anticipating sexual relief; and they will have to endure more rolling of eyes when they tell others what they do for a living. Why risk offending colleagues and promoting harmful misconceptions about the profession?

None of us works in a vacuum. Whether practitioners belong to a professional association or not, their behavior reflects on the profession and the other practitioners in their community. It's safest to be above reproach. Behave in such a manner that your friends and colleagues would feel comfortable sending you both their elderly aunt and their teenage son or daughter.

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Respecting Clients' Dignity

- Would the action be disrespectful of the client?

Consider these cases:

The client of a deep tissue bodyworker left a message on the bodyworker's answering machine after his first session, complaining that the pain in his back had gotten worse since the session. The bodyworker decided that the client must be a chronic complainer and a nuisance and never returned his call.

A massage therapist's client complained that she still had discomfort in her knees even though she had been coming for regular massages for weeks. The practitioner curtly responded, "If you'd lose some weight and get off the sofa and exercise, you might feel a lot better."

Generally, it's easy to treat clients with respect if they are appreciative and pleasant. Clients such as the two above, who complain or are demanding, are the ones who are most likely to try your patience and test your professional diplomacy. As a professional, you are obligated to respond to complaints with kindness or at least with civility. Even if a client is being abusive, it's unethical for practitioners to be rude, insulting, or unresponsive.

Clients don't have a right to be personally insulting, call you names, or use harsh or vulgar language. (Of course, they also don't have a right to be physically threatening or sexually inappropriate.) However, they do have a right to complain about your work or question your professional knowledge, and you want to be able to respond to their concerns with care and objectivity. Complainers usually need education and reassurance. Depending on the situation, the client whose back was still hurting might need to hear, for instance, that it often takes a day or two before a client feels relief from pain. Or with the client whose knees still hurt, you could let her know you're on her side: "I'm sorry you're still having discomfort. Massage therapy often relieves joint pain, and I was hoping that it would help you."

Maintaining a good professional relationship with your clients also goes a long way toward keeping you out of major trouble. A small complaint handled poorly can balloon into a big problem; angry clients sometimes air their grievances in the community or, at the extreme, take them to your professional association.

Judgment Calls

We want to follow the standards of our state and national associations, but sometimes those standards are so generalized that it's difficult to know what they mean in practice. The goal is to learn how to make smart and ethical choices under any circumstance.

In any practice, certain situations require judgment calls on the part of practitioners who want to protect their clients, the profession, and their own reputations. Keeping in mind the questions and considerations already discussed, here are some examples of how to make good choices and judgment calls.

Sexual Relationships

THE ETHICAL STANDARD

It is unethical to have a sexual relationship with a current client. With an ex-client, it is unethical to use the affection, power, or intimacy of the client-practitioner relationship to create a sexual relationship. It is also unethical to sexualize the relationship with a client by dressing seductively, flirting, or making remarks that could be construed as sexual.

JUDGMENT CALLS

At a party, you are talking with someone you have just met, someone you find attractive. The person learns that you are a bodyworker (or massage therapist or movement teacher) and wants to make an appointment. Do you make the appointment?

You have been working with a client for several months, and you realize that you are starting to feel sexually attracted to him or her. What do you do?

Everyone should know that the absolute rule is not to date or have sexual relations with a client, but what about sexual attractions? The answer depends, for one thing, on how attracted you are:

- Is it just a passing thought?
- Is there a spark of sexual connection between you?
- Are you often aware of being sexually attracted to another person, or is this a rare feeling, so that the attraction takes on greater meaning?
- Are you feeling emotionally off-balance or needy, so that you might be more than usually tempted to act on an attraction?
- Are you feeling particularly open to a new attraction, even though you are married or in a relationship?
- Has it been your experience that you can be mildly attracted to a client without it interfering with your work?

You have to know yourself and your limitations. Sessions should always focus on the client and not on your personal needs. If you have strong romantic or sexual feelings about a client, the feelings usually intrude into the professional relationship. A strong attraction is a good issue to take to a consultant or respected teacher for discussion.

You should also consider the effect of transference. The decision to become someone's practitioner shouldn't be made casually. When someone becomes a client (and often before he or she arrives on the table), transference begins and feelings are heightened on both sides. In the client's eyes, you have already started to become a little larger than life—the compassionate caregiver, the heroic reliever of pain, or the nurturing parent figure. Under these circumstances, clients are not as free to refuse romantic invitations. It's unethical to take advantage of this vulnerability.

Once someone becomes a client, you may never be able to have a normal social relationship with that person. The effects of transference can be too deep. Once you become a person's practitioner, you have limited the relationship. Most associations' ethics standards require that practitioners wait at least 6 months before dating an ex-client. Regardless of the number of months that have passed, practitioners dating an ex-client could be a cause for concern and perhaps scrutiny in their professional circles. You're better off deciding from the beginning whether a relationship will be professional or social.

Let's look back at the two examples. In the first example, how do you decide whether to make the appointment? To start with, it's never a good idea to

make an appointment or do business at a party. Just offer the person your business card. That would also give you time to sort out your feelings, either on your own or with outside help. If you know you're not in danger of acting on your sexual attraction, you can take the person as a client, knowing that you are thereby eliminating the possibility of having a sexual relationship with him while he is a client and possibly forever. If you're not sure whether you want to exclude that possibility, it's smart to buy time. For instance, when the person calls, you can simply say you don't have any appointments available and tell them to call back after a certain time. Given enough time, you can find your ethical bearings and decide whether to take that person as a client.

In the second situation, in which the practitioner becomes attracted to someone who is already a client, it's probably best to seek out help before making a decision about whether to continue to work with that client. As previously noted, any time you have strong feelings about a client, whether it's strong attraction or strong dislike, it's a good idea to talk with someone trained in psychological dynamics to help you sort it out. If you come to understand the reasons for the attraction, the feelings may dissipate. If they don't, then you probably need to stop working with the client. There's no set way to deal with either situation; each calls for a careful examination of the strength and motivation of your feelings and of what is best for that particular client. Such a judgment call can best be made with outside help.

Negative Judgments

THE ETHICAL STANDARD

We owe clients our care and attention. We may not connect with a person right away, but if we can't imagine ever having a caring attitude toward a particular client, we shouldn't work with him or her. We need to be on the alert for anything that interferes with our ability to touch a client in a respectful, non-judgmental way. We are not just touching bodies—we're touching spirits.

JUDGMENT CALLS

Your new client reveals that he belongs to a group that offends your belief system. (For instance, he is a member of the National Rifle Association, a gay rights advocate, a fundamentalist, or pro-choice.) Or he belongs to any group about whom you have general prejudgments (prejudice).

Your client does something you find very annoying. For example, she talks constantly, never talks, has a whiny voice, or talks very loudly. You find yourself dreading her sessions.

Everyone prejudices other people. It's common for people to make snap judgments based on how people look, the way they dress, or their beliefs. No one is completely untouched by negative attitudes about groups of people that they may have been taught as children—whether by the family, the community, or society at large. In addition, everyone has personal likes and dislikes. The question is how much these negative feelings interfere with your work.

Working with people you don't care for can seriously compromise the safety of the therapeutic environment. You may be inclined to be late, to be less than present, to tune them out, to shortchange them on time, or to lack compassion. Practitioners cannot totally hide their personal feelings from clients. What client wants to be touched by uncaring hands?

Regarding the first example of a client who belongs to a group that you have judgments about, you want to decide what is best for the client. You must first be honest with yourself about your own prejudices. If you have a thought such as, "Uh oh, here's one of those kinds of people. They are all so lazy/immoral/rigid," do you believe the statement to be true? Or do you recognize it for what it is—a stereotype that may or may not be true



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for the individual in front of you? As professionals, we are obligated to come to our sessions with an open mind, and opening our minds usually takes some effort.

The same holds true for a client you may find annoying or dislike for no good reason—the client isn't being abusive or disrespectful. You have to try to find something in you that connects with that person, something you can open your heart to.

If soul-searching doesn't work and your negative feelings are so intense that you can't find compassion for a client, then you need to suggest that the client see someone else. However, even if you refer that client on, once you have identified your own feelings of prejudice or personal dislike, then you are obligated to find a way to work through those feelings, perhaps with the help of a mentor or consultant. If you work for someone else and your employer does not allow you to be selective, then you have to get help with keeping your negative feelings out of the session. (Gritting your teeth doesn't work.)

If you are in private practice and have the freedom to be selective, you can make it clear during the initial conversation with a client that either party can bow out at any time. Nan Narboe, a psychotherapist who consults with massage therapists and bodyworkers, suggests one way to make it easier:

When you make the first appointment, tell your prospective client that the first few sessions will allow the client to decide whether she or he can effectively work with you and also allow you to decide whether your work is the most effective for this client. If you decide that you should not continue working with the client, you can say, "I don't think my work will be as beneficial for you as X or Y" (other methods or other practitioners).

Taking Financial Advantage of a Client

THE ETHICAL STANDARD

It is unethical to use the privilege of the client–practitioner relationship to profit financially beyond our fee-for-service charges. It is not ethical to exploit the relationship by using it to influence the client to buy a product or service or to make any investment.

JUDGMENT CALLS

Your friend is a distributor for a supplement you believe is of high quality and is said to boost energy and help certain physical problems. You have taken these vitamins and feel very enthusiastic about their value. Your friend encourages you to become a distributor and sell them to your clients.

Is it ethical to sell products to a client? Some professional bodywork associations ban their members from doing so. Others don't put restrictions on this practice. Some practitioners have no qualms about selling vitamins, blue-green algae, or magnets to clients. Others don't think it's a good idea. How do you decide what is right? And what do you do if your employer encourages or requires you to try to sell products to clients?

Looking back at the list of questions that you want to keep in mind, you can probably see a number of potential problems with selling goods to clients. The main ethical issue isn't whether it may benefit the client to use the product that you sell; it's whether you are unfairly using the power of the therapeutic relationship. Is the client really free to refuse, or would they make a purchase mainly to please you? Even if a massage therapist merely has products on display, a client could get the idea that it would please the practitioner if she bought them. Aside from the ethical considerations, even subtly attempting to sell products to clients could make some clients feel pressured and uncomfortable.

Another issue is that selling anything to a client other than the professional services you have contracted for creates a dual relationship, which is inherently problematic because it complicates the interaction between you and the client. Suppose a client to whom you have sold vitamins doesn't benefit as much as you led her to expect. That could damage your working relationship.

If your employer wants you to push clients to buy products, you might try getting them to change their policy by arguing that a hard sell will surely offend many clients. Working for someone who has different professional standards puts you in a bind between your obligation to your employer and your wish to be a conscientious professional. As noted before, it's wise to check out such policies before you agree to a job.

Refusing to Work with a Client or Stopping Work with a Client

THE ETHICAL STANDARD

Practitioners in private practice have a right of refusal. They can refuse to work with a prospective client or to discontinue working with a client if they think that they cannot form a therapeutic alliance with that client or if they do not have the training or physical capabilities to work with that client. If you are not self-employed, your employer may not think you have that right—yet another reason to choose your employer carefully.

JUDGMENT CALLS

Your regular client arrives, having spent the afternoon doing yard work, and is uncharacteristically dirty and sweaty.

You have worked with a couple on outcall basis several times. While you are alone with the husband, he makes suggestive remarks.

You weigh 100 pounds. Your prospective client weighs twice that and has requested deep work. You don't think that you can give the depth of massage that he wants.



You weigh 100 pounds. Your prospective client weighs twice that and likes deep work. You don't think you can give him the depth of massage that he wants. Do you still work with that client?

There are many reasons you may choose not to work with a client. Poor hygiene, inappropriate sexual behavior, or a physical mismatch for you are three reasons. (Granted that a small massage therapist can, with good body mechanics, handle deep work with any size client; however, it's up to each therapist to decide his or her physical boundaries.) There are other reasons clients may not be appropriate for your work or may be beyond your abilities. They may be mentally ill or may have physical conditions that make the kind of work you do unsuitable for them. You want to be aware of what those conditions are and of what your own physical and emotional limitations are.

In addition to not taking on clients with conditions that aren't appropriate for your kind of work, you also may want to limit the number of clients you see who present special difficulties, whether emotional or physical. These include clients who need extra help or reassurance and who take extra time in terms of phone calls and consultations outside their sessions or clients who are in acute physical distress.

Regarding the situation with the sweaty client, most practitioners probably wouldn't mind working with an occasionally grimy client. Those who do mind need to make their policies clear up front to avoid the embarrassment of turning away a client. Spelling out these policies on an intake application form is a good way to get the point across. For instance, some massage therapy clinics post a notice or have clients sign a statement that says the therapists can refuse to work with someone or can terminate work because of a client's poor hygiene or inappropriate sexual behavior or comments.

In the case of the husband who made inappropriate remarks, it depends on your prior relationship with that person and the degree of offensiveness of the remarks. If, for instance, a client makes obvious offensive or degrading remarks, you should stop working with him at once—both stop the session and decline to make another appointment. If you are not clear about the person's intent or think he may just be testing you, you can give him a warning that you will not continue working with him unless he stops being suggestive. (Exceptions can be made for a regular client who makes a sexually oriented joke that's clearly not meant to be disrespectful and that doesn't offend you.) In this case, if the husband had never been inappropriate before, you could say, "I don't work with clients who don't treat me with respect. I'll end the massage if you make any more remarks like that." If he continues, you need to end the massage and let him know you won't work with him again. You might lose the wife's business also, but there's never a good reason to work with a disrespectful client.

When you decide not to take on someone who you think taxes your physical capabilities, you can be straightforward about your reasons: "I can't do justice to someone your size. May I give you the names of some practitioners who would be more appropriate?"

Sometimes you may not want to work with clients because they have emotional needs that you are not trained to handle—perhaps they are deeply depressed or working with issues of childhood abuse. Even if clients are working with a psychotherapist, you may still feel you would not be suited to work with them; for instance, you may feel overwhelmed about working with someone who frequently cries. It takes sensitivity to refer such clients to another massage therapist without them feeling rejected (see "Clients Who Are Emotional or Want Advice" in Chapter 6).

Confidentiality

THE ETHICAL STANDARD

Nothing a client says or does—and no information we have about a client—should be revealed to others without the client's permission unless disclosure is required by law or court order or is necessary for the protection of the public. Situations in which we can—and, in fact, are often obligated to—legally breach confidentiality are those in which there is clear and imminent danger to the client or others, there is suspicion of abuse or neglect of a child or incapacitated person, or there is a medical emergency.

JUDGMENT CALLS

Specific procedures for keeping patient information private are discussed in Chapter 3. However, there are some common ways that practitioners can violate confidentiality if they don't understand the finer points.

For instance, in the situation discussed above in which the husband made sexually inappropriate remarks, what do you say to his wife if you decide not to continue to work with the husband? She's also your client, and you've been scheduling their appointments back-to-back at their home. The standards of confidentiality dictate that if the wife asks why you stopped seeing her husband, you can't tell her the reason. You can't even imply or suggest it. You have to say, "Even though he is your husband, I can't ethically talk about another client." If you've told her about your standards at the outset, it makes reinforcing the policy easier.

Violations of confidentiality can happen quickly. Here's an example: Mary and Susie are friends, and both are clients of Joe, a massage therapist. Mary says to Joe, "I haven't seen Susie in a while. How's she doing?" It's easy for Joe to say, "Oh, she's still having a hard time with her marriage." But if he does, he's broken confidentiality with Susie. To make it worse, now Mary knows that Joe passes on clients' private information to other people. Even "Susie's feeling great" is a violation. To keep clear framework, Joe can say lightly, "Oh, you know I can't talk about my other clients." Clients who are friends with other clients may sometimes test you—usually not consciously—to see if you will talk about their friend to them (and, therefore, talk to the friend about them).

Here's another way that practitioners can easily violate confidentiality. Quite often, if one client has referred a friend who then also becomes a client, the practitioner thanks the referrer, thereby letting them know that their friend is now a client. Although this is a common practice and it seems both harmless and good business manners to express gratitude, you might want to rethink it. Doesn't it violate the new client's privacy? If a client says, "I told Dave about you. Did he ever call?" You want to thank the client for

making the referral, but you shouldn't reveal whether Dave called or not. Just because the client made a referral, Dave's interactions with you don't become his business. You can say, "I appreciate your referral, and I understand why you want to know if he followed up. However, all my interactions with clients are confidential, so I can't tell you whether Dave called or not." When you first talk with a prospective client who has been referred by a friend or another client, you can ask permission to thank the friend for the referral.

Clients may want to keep private the fact that they are seeing a manual therapist for all kinds of reasons, such as not wanting to let their spouse know how they are spending money or fearing that someone else might think having a massage is a shady or self-indulgent practice.

If you see clients (past or present) in an outside setting, standard protocol is to not be the first to approach. Some clients may not have told their friends or family that they are seeing a massage therapist, and they may not want to have to explain to their companion who you are. If they acknowledge you, then you can match their level of friendliness. For instance, if a client merely nods to you, you can nod back but don't engage them in conversation. Even if the client is alone, they may not want to have their privacy invaded.

Sometimes you may be tempted to name-drop when a well-known or famous person is or has been a client. Famous people appreciate their privacy and have a right to it. Name-dropping is rarely impressive and only reveals the practitioner as someone who does not safeguard clients' privacy.

There's another aspect of confidentiality that relates to your own self-care. Amrita Daigle, a Trager approach instructor, has noted that it can be difficult to maintain confidentiality unless we have a legitimate outlet for the feelings that build up in us during the work week. Many of us need a way to deal with the emotional stories that people tell us. Daigle suggests that we find a healthy outlet for our feelings, such as drawing, dancing, or meditating, and use it regularly. Consultants or supervisors, as described earlier, are also excellent and appropriate outlets. Getting ongoing bodywork for yourself also helps with emotional overload.

However, talking with friends or colleagues about clients as a way of venting, even if you don't use names, isn't a good idea. The possibility of giving away information or identifying a client by accident is too great.

It may be difficult to be strict about confidentiality if you are not self-employed. In a spa or even a physician's or chiropractor's office, policies about when it's OK to share information about clients can be unclear or careless. In a spa, both staff and massage therapists may see nothing wrong with gossiping about clients; therapists may readily disclose information they learned during a private session. Your choice, then, is to

participate or not, keeping in mind how you would feel if you were the client. It may seem sometimes like harmless venting about a difficult client, but it's disrespectful of both the client and professional standards.

Sharing information relevant to the work is a different matter. It's useful to the client if therapists share, either verbally or in chart notes, what kind of massage a client prefers, for instance. The management still needs to get permission from clients for any information being revealed about them between therapists.

Other Ethical Standards and Implementation

Some ethics guidelines are fairly straightforward; we just need help with implementing them.

False Claims

THE ETHICAL STANDARD

Making false claims or inflated promises is unethical. It is unethical to obtain clients by persuasion or influence or to use comments about our services that contain untrue statements. It is unethical to create inflated or unjustified expectations of favorable results.

IMPLEMENTATION

In describing your work to prospective clients, be honest about your work's limits and about any possible negative side effects. Never guarantee results. You can speak of the benefits that you know to be true. For instance, you could say (assuming that it is true to the best of your knowledge) that "many people" have felt calmer, more flexible, more energetic, and so forth after having a massage or a certain kind of bodywork. You can state that "many people" have experienced alleviation of general symptoms. But be aware of the dangers of even subtly leading clients to expect specific cures or fixes. The causes of physical problems are complex, and the outcome of treatments can't be predicted. A colleague says:

Any time I've done an oversell about the benefits of my method of bodywork, it comes back to haunt me. My reasons are usually well intentioned. Sometimes I'm tempted to do a "hard sell" because I really like a prospective client and *want* to be able to help him. I believe strongly in my work, and sometimes that makes me promise too much. I think it always backfires on me. That will be the client who doesn't get any relief from the treatment.

Scope of Practice

THE ETHICAL STANDARD

Exceeding our **scope of practice** is unethical and often dangerous to our clients. It is unethical to represent ourselves as having training or expertise that we do not possess, such as suggesting that we are skilled in handling serious medical conditions.

We have an obligation to refer clients to appropriately trained professionals and, with the client's permission, to consult with other professionals who are treating our clients. If we have a client who is ill and currently receiving medical treatment for a serious problem, we should consult with the client's primary practitioner (with the client's permission) before beginning working.

IMPLEMENTATION

Practitioners who exceed the scope of their practice are a cause of concern for their colleagues because they reflect poorly on the profession. Some bodyworkers claim to work with emotional and psychological issues, but they have had no training or supervision in these areas. Some bodyworkers claim to have the skills to perform a complex manual technique with only limited training in it. One weekend workshop (or even a few) doesn't make one an expert in physical manipulations—cranial work, visceral manipulation, or whatever is currently the popular practice. It's unethical to advertise ourselves, either on our business cards or verbally, as proficient in a method for which we have only a superficial knowledge or training.

We need to respect the time and training it takes to become a psychotherapist, cranial osteopath, medical doctor, chiropractor, and so forth. At the same time, we need to respect the value of our own skills. Dianne Polseno, ethics columnist for the *Massage Therapy Journal*, says of massage therapy and bodywork, "We are better at what we do than any other health care professional. Other professionals say, 'Tell us what your hands feel.' That's the gift we bring—what we feel under our hands."

Another of our unique gifts as health-care professionals is the amount of time we spend with our clients and the level of attention and care we give them. There is plenty of healing in simply being with people in a conscious, attentive way—listening to them, listening to their bodies. If we appreciate the strength and value of our own work, we won't feel the need to pad our resumes.

Informed Consent

THE ETHICAL STANDARD

We need to have clients' informed consent for (1) the basic treatment or kind of manual therapy that we offer, (2) any work that is near clients' genitals or anus

Scope of practice: The traditional knowledge base and standard practices of the profession.

If we appreciate the strength and value of our own work, we won't feel the need to pad our resumes.

Informed consent: A client's authorization for services to be performed by a practitioner. The client or the client's guardian must be fully advised of what the service will entail and its benefits and contraindications, and he or she must be competent to give consent.

or a woman's breasts, (3) any work that is near an area that we know to be sensitive or triggering for a particular client, and (4) anything we do that is different from the work we have contracted to do or that the client expects from us.

This means that clients are aware of both the possible benefits and the possible side effects of our work. For instance, they may need to be told that when the body is healing naturally, sometimes they feel worse before they feel better. Clients also need to know the reasons for a specific treatment or why we need to work in a sensitive area. They also need to be capable of understanding our explanations at the time—they cannot be deeply in an altered state, for instance.

IMPLEMENTATION

Some practitioners obtain written consent from new clients before they begin work. They use a form that explains what the general benefits of the work are, assures clients that there are no guarantees, and states that no medical treatment or diagnosis is involved. Having a client sign such a form also is excellent protection for practitioners. Although it isn't a legal document, it can be a deterrent to lawsuits.

In an intake interview, clients should also be told, either in writing or verbally, about any contraindications to the type of work you do. As you are working, explain and get agreement for any work that is potentially threatening, such as work near the genitals. If you decide to use a different method than what has been agreed on, explain the method and get the client's consent.

A key to the idea of consent is the understanding that because of transference, clients are not as free to say no as they would ordinarily be. This is especially true if they are already on the table. For this reason, it's best to get clients' consent for new methods before sessions begin and to be clear with clients that they can ask you to stop or can refuse a treatment at any time. If you have an urge to try something different after the session is under way, find a way to ask permission that isn't disruptive and that as much as possible allows the client to refuse.

A friend relates:

In the middle of a session with a massage therapist I had seen before, I was jolted out of my relaxed state by a noisy and teeth-rattling large electric massager on my back. The massage therapist had never used it before, so it was an unpleasant surprise. I suffered in silence for a while and finally asked him to please stop. He said, "Oh, sorry, I couldn't remember if I'd used this on you before." I didn't say anything, but I was thinking, "So, why didn't you ask me?"

That therapist could have said, "Some clients like for me to use an electric percussive massager on their backs because of the strength of it. Others

find it to be too much. It's fine with me if you don't want me to use it. Would you like to try it?" (And the massage therapist could have noted in the client's records whether electric massagers were part of her treatment.)

We need to obtain permission from clients for any addition we make that may be unexpected or unfamiliar. Here are two complaints from clients:

Before he began working, my massage therapist began chanting. I didn't understand what he was doing. Although it freaked me out, I didn't say anything.

My massage therapist held her hands over my body for several minutes without doing anything. I had come for a relaxing massage and felt like she was wasting my time and money.

In both cases, the massage therapists could have avoided problems if they had asked the client's permission to add their own personal rituals to the massage. That includes saying (out loud) any kind of prayer, which may be offensive to some. If you have such a ritual, explain what you want to do in simple, nonmystic terms, letting the client know how long it will take and assuring them that it won't cut into their massage session time.

For instance, you could say, "I find that chanting can help me get centered before a massage. It'll only take a few minutes but if it makes you at all uncomfortable, I don't need to do it. Of course, you won't be charged for the extra time." Or "Sometimes holding my hands over a client's body helps me get a better sense of what your body needs. It may not look or feel like I'm doing anything, but the few minutes it takes won't take away from your massage time. Do I have your permission to try that or would you rather I just get started with the regular massage? It's up to you."

Straddling the categories of both the need for informed consent and staying within our scope of practice is the all-too-common practice of telling clients our intuitive or "psychic" notions about them. Unless you advertise yourself as offering such services to clients, you want to avoid telling a client who has come for a comforting massage (or any other kind of bodywork) that, for instance, she holds anger in her belly. (Maybe a client would welcome hearing our intuitive sense that she holds cheerfulness in her belly, but for some reason, too often such psychic pronouncements about clients are negative and unflattering.) If you think you're intuiting something that might be useful to a client and that might help her, for instance, get more in touch with her body, you can find a way to ask her about it without setting

yourself up as the all-knowing guru. “This may not fit at all, but something makes me wonder if you’ve been feeling especially burdened/frustrated/sad lately.” If it doesn’t ring a bell with the client, best to drop it.

Remember that clients usually won’t tell us when we make them uncomfortable, so it’s up to us to be sure to obtain their permission before making unexpected or intrusive additions to the session.

Disrespect of Other Professionals

THE ETHICAL STANDARD

It’s unethical to imply that our skill level or our method of manual therapy is superior to either another practitioner’s or another kind of bodywork.

IMPLEMENTATION

We all have ex-clients who think we’re skilled and compassionate and those who do not. Take care with another practitioner’s reputation.

If you malign another practitioner, it could make you look insecure in your client’s eyes. Also, if you make critical remarks about a practitioner your client is seeing or has seen, you are questioning not only that practitioner’s competence, but also the client’s judgment. You want to avoid careless talk, gossip, personal remarks, and assessments about the skills of another practitioner. We all have ex-clients who think we’re skilled and compassionate and those who do not. Take care with another practitioner’s reputation.

The same goes for maligning other kinds of manual therapies or alternative health practices or being disrespectful of the medical profession. Doing so would make you look small and could offend clients who are loyal to that kind of treatment.

If a client speaks negatively about another practitioner, you need to stay objective. Either remain silent or make a comment related to the client’s feelings, such as, “It sounds as if it was an uncomfortable experience for you.” You might also ask the client if they think their feelings about the previous practitioner could interfere with their ability to enjoy your work. If so, you can suggest that they find a way to get closure with the other practitioner. You can say, “I can’t comment about another practitioner’s work, but I see that you are still upset and it might be useful to both you and the practitioner if you would write or call him and let him know why you were dissatisfied.”

The more you stay inside professional framework and boundaries and the more you honor the therapeutic relationship, the less likely you are to get into serious trouble.

Staying Out of Trouble

Lawsuits and Ethics Complaints

Ethics and the perception of what is ethical are not determined by impersonal rules. They are grounded in your relationship with your clients. In general, if you violate a rule of ethics, you cross a boundary—you go outside the

safety of the professional relationship. The more you stay inside professional framework and boundaries and the more you honor the therapeutic relationship, the less likely you are to get into serious trouble.

Lawsuits, Ethics Complaints, and the Therapeutic Relationship

Many ethics complaints and lawsuits against practitioners have little to do with the practitioners' technical skills and a good deal to do with whether the practitioners appear to care about their clients.

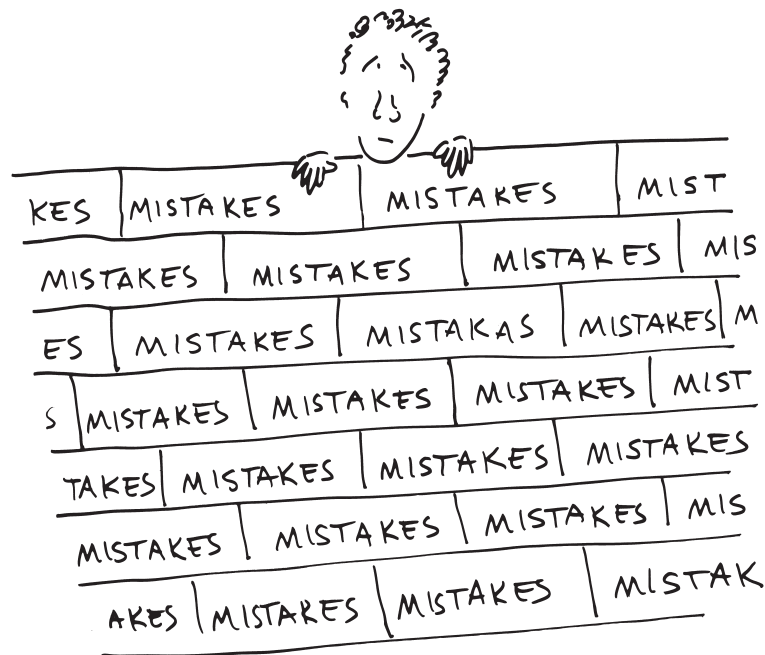
A study published in a medical journal showed that a doctor was more likely to be sued if patients felt the doctor was rushing visits, not answering questions, or being rude in some other way. A comparison between doctors who had often been sued and those who had not showed no difference in the level of competence of the two groups as perceived by their colleagues. However, the ones who had never been sued were more likely to be seen by their patients as concerned, accessible, and willing to communicate (Hickson GB, Federspiel CF, Pichert JW, et al. Patient complaints and malpractice risk. *J Am Med Assoc.* 2002;287:3003–3005).

Practitioners need to respond in a professional, caring manner to clients who have complaints. Sometimes practitioners make the mistake of stonewalling these clients—not returning their calls or refusing to talk with them. Failing to respond to disappointed or angry clients usually makes things worse. Aside from being an unethical way to handle clients' grievances, this type of behavior usually makes clients angrier, sometimes to the point of filing an ethics complaint. Also, if you do not listen to clients with grievances, you deny yourself the opportunity to learn from their feedback.

An administrator for a bodywork school who handles complaints against its graduates agrees that practitioners need to be accessible and open. She says that quite often bodyworkers could avoid having complaints lodged against them if they would simply answer clients' phone calls and allow grievances to be aired. Clients have to be upset or angry in order to file a complaint. In many cases, practitioners who are complained against have followed normal ethical standards but have angered clients by seeming indifferent to their feelings or by emotionally abandoning them in some way. Unless clients are abusive or harassing, the best thing you can do, even if you feel you committed no error, is to allow them to speak their minds and let them know that you regret their dissatisfaction.

Framework Exceptions: A Red Flag

Practitioners who have made mistakes or have been complained against have usually had a pattern of making small boundary errors in general or have been careless about boundaries with one particular client. It should be



Small boundary mistakes can add up to big trouble.

a red flag for you when you're tempted to go outside your own standard policies or the standard practices in your community.

A colleague reports:

A new client wanted me to give her a discount simply because she said she couldn't afford my prices, although she was working and appeared to be driving a new car. I don't usually give discounts except to those who are physically not able to work, so I refused her at first but eventually gave in because she was so insistent. What a mistake! She turned out to be constantly demanding and complaining, and I never felt that she was satisfied with the work. Although I offered to refer her to another practitioner, she stayed with me through several sessions, complaining all the while. After she stopped coming to me, she filed a complaint with my professional association, saying that my work wasn't useful to her and that I had knowingly cheated her. I found out too late that she had had this same pattern with other practitioners in the area.

When There Are No Warning Signs: The Need for Documentation and Professional Association

There are instances of practitioners being sued or complained against when there were no significant warning signs. (Individual circumstances

of ethics complaints vary. Practitioners who have been officially complained against or threatened with a lawsuit should consult an attorney and work with the ethics boards of their organizations.) Two things saved them in court: they had carefully documented the client's presenting problems and course of treatment, and they had the backing of a professional association. You need to keep careful notes, especially when you feel uneasy about a client, when you work with clients with medical issues, and when you work with clients who have been abused. But since you never know which client may end up unhappy with your services, it makes sense to keep careful records on all clients. The importance of documentation cannot be stressed enough.

Belonging to a recognized and respected professional group is also helpful. Clients' attorneys will want to make a manual therapy practitioner look sinister, dishonest, or fly-by-night. Belonging to a respected national group enhances practitioners' image. In addition, professional associations often provide witnesses to back up the legitimacy of our methods.

The Right Thing

What's right may vary depending on the client and the situation. How strictly do we interpret the guideline, for instance, that it's not ethical to benefit personally from a client? No one is going to haul us into court if we have cleverly placed our dying ficus plant in the middle of the room, hoping our next client, a regular of many years and the owner of a plant shop, will notice it and give us good advice. If the plant shop owner was a new client and we met him at the door with a barrage of questions about our ailing flora, again, we probably wouldn't be sued, but we might lose him as a client or at least make him uneasy.

However, if we use our influence with a regular client to get him to invest in our plant business, we could end up in court with that client if the business fails (or even if it doesn't). To stay out of trouble and avoid taking advantage of our clients, we need a solid understanding of relationship dynamics and the rules of ethics that our profession asks us to follow.

Manual therapies are becoming increasingly popular, and respect for the profession is growing along with its popularity. Each new phase of our professional growth gives us opportunities to use our new power and strength in ways that will benefit our clients and enhance the image of the profession.



QUESTIONS FOR REFLECTION

- 1** Everyone has some kind of prejudice; your goal is to be aware of what yours are. Think about the ways that you prejudge people based on their appearance, skin color, clothes, or what you think their beliefs to be. Are any of your judgments so severe that you would not want to work with a particular group of people? What can you do to become more understanding of that group?
- 2** Has a professional ever violated your confidentiality in a small way, for instance, by letting someone else know that you are his or her client or that you enjoyed a session? How did that feel to you? Has a professional ever told you something about a client that violated the client's confidentiality? Did that influence the way you felt about the practitioner's professionalism? In what way?
- 3** Have you ever used the services of a professional (massage therapist, bodyworker, chiropractor, physician, or so forth) or any kind of service person (plumber or carpenter) who claimed to know more than he or she really did or who claimed to be able to help you in ways that he or she couldn't? What did you learn from that experience?
- 4** Have you ever been to a professional who bad-mouthed another professional or said that his or her own work was superior to that of another professional? What did you learn from that experience?