Course Title: Ethics: Ethical Principles and Standards of Practice

Course Description: This course focuses on ethical principles and standards of practice in massage therapy. Ethical guidelines and standards developed by state and national massage therapy associations will be reviewed within the context of a professional framework to enhance the professionalism of a massage therapy practice. This course meets the state of Florida standards for ethics courses and the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) requirements for continuing education under the title of ethics.

Learner Objectives:

At the completion of this course, the participant will be able to:

- Define ethics and standards of practice
- Name specific factors that relate to the professional framework for massage therapists
- Discuss 3 dimensions of ethics
- Identify the purpose of an ethical massage therapy practice
- List 8 principles that guide professional behavior
- Compare and contrast the scope of practice for massage therapists and other healthcare professionals
- Identify how to determine limits of practice
- List 3 outcomes that may occur during complex situations and describe how to handle them
- Recite the types of boundaries necessary in massage therapy
- State the guidelines for safe and ethical conduct
- List 15 warning signs that indicate that boundaries may be at risk
- Trace the sequence for obtaining informed consent

Content/Outline

Hour 1

- Background
- Definitions
- Realities of Healthcare
- Professional Framework
- Ethical Principles
- Quality of Life Issues
- The Aging Population
- Prevention of Medical Errors
- Code of Ethics
- Principles that Guide Professional Behavior
- The Dimensions of Ethics
Background
The realization of the responsibility and role of a new massage therapist comes with a healthy dose of reality. Often it takes the new therapist some time to make the transition to become a true and ethical professional. For other seasoned professionals, professionalism and ethics may be an accepted way of life, but for others, it may not be so easy to explain what ethics really means in the massage field. Most of us know that sexual encounters are unethical, but there is much more to professionalism and ethics than sexual misconduct.

The art and science of being a massage therapist means more than clean sheets, a clean uniform, an education, and a massage table. It means being a healthcare professional at all times. Some therapists who are in the field or new to the field were attracted to the casualness of massage. They saw massage as a way to relax and provide a relaxing experience for their clients without the regulations imposed by healthcare organizations. While many therapists frowned upon the encroachment of the restrictions and regulations of medical care to the massage field, many others saw the importance of professionalism and acceptance.

Many things enter into the professional relationship between client and therapist and some of these things are visible, while others are invisible. Massage is both an art and a science. In order to learn the art, it is important to first learn the science so that no harm is done to the client. Today the well-educated and well-trained professional massage therapist is accepted and respected in the healthcare field.

Definitions
The following definitions apply to this course of study:

**Boundaries** = a set of parameters that indicate a limit or border; may be personal or professional

**Code of Ethics** = a set of guiding moral principles that govern a professional’s course of action

**Confidentiality** = non-disclosure of privileged information

**Counter-transference** = a reaction of the therapist to the client (patient)

**Ethics** = the science or study of moral values or principles, including ideals of autonomy, beneficence, and justice

**Informed Consent** = permission obtained by a client to perform massage (voluntary)

**Professional standards** = a set of parameters that define and distinguish one profession from another

**Scope of Practice** = defines the working parameters of a profession according to state law

**Standards of Care** = the duty of reasonable care as defined by state and national associations

**Transference** = the unconscious tendency to assign in others (clients or patients) the same feelings and reactions associated in early life with others

Realities of Healthcare
Massage therapists are not practitioners functioning alone on an island. Massage therapists are healthcare professionals. Because of this healthcare
association, there are certain realities and responsibilities inherent in the profession. The new massage therapist learns early on about the realities or realization of healthcare. Other therapists who are more experienced and have been in the field for more years have seen the transition from “feel good” therapies to medical therapies. Seasoned massage professionals have gained a respect for medical modalities and for the place of massage in the broader healthcare field. Likewise, medical professionals have shown mutual respect for massage therapists. While there is still much to learn for both, massage therapists have continued to learn more about the human body from a medical point of view and about the history of the medical field. Therefore, it behooves massage therapists to understand the realities of working in the professional field of healthcare so that boundaries are not crossed and patients receive the quality of care intended and expected.

The following factors describe the dynamic, changing environment of the medical field that contribute to the realities of healthcare:

- **Economics**—The cost of providing healthcare has skyrocketed. With the advent of DRG’s (diagnostic related groups) in 1983, the entire healthcare arena was changed and became more complex. DRG’s is a classification system that was adapted by the Health Care Financing Administration (HCFA), which is the single largest payer of healthcare costs, to control the cost of healthcare to its Medicare beneficiaries. Third-party payors now make the decisions about healthcare, rather than physicians. Prior to 1983 most medical procedures were performed within hospitals and physicians decided what and how procedures or test needed to be conducted on patients. This was very costly. This fact was brought to the attention of the federal government by leaders of business and industry who complained about the high cost of healthcare. After the advent of the Medicare program in 1967 and before DRG’s, hospitals were reimbursed on a cost basis. This became too expensive. The federal government listened to the needs of the consumer and business and that is when DRG’s were implemented. Lee Iacocca, who was president of Chrysler at the time, was instrumental in getting the president to recognize how much business was paying to insure their workers. This concept changed how hospitals and medical professionals were paid. No longer were insurance companies obligated to pay all claims submitted by their participants. They were obligated to pay only within managed care systems. The sole purpose was to limit the spiraling cost of healthcare. Today an increased number of patients without health insurance coverage has placed an additional burden on healthcare and on taxes. There is no easy solution for this, but important for everyone in healthcare to be aware of economic and professional impact.
• **Decreased length of stay** - DRG’s caused a change in the site for the delivery of healthcare. Patients were no longer able to stay in hospitals for long periods of time. No longer was it a requirement to be hospitalized for an X-ray or lab tests. This change in the healthcare system resulted in early discharge. Early discharge from hospitals caused the patient to be sent back home “quicker and sicker.” No longer could patients remain in hospitals for long periods of time for recuperation or extensive, expensive tests. This gave rise to home care and out-patient services, since this was more cost effective.

• **Out-patient delivery of care** - As a result of decreased length of stay, there has been an increase in the preferred site for the delivery of care. Today many more procedures are performed as out-patient rather than in-patient. DRG’s made it more profitable for certain procedures to be done out of the hospital. Suddenly there was an increase in out-patient centers, such as, ambulatory surgery centers, urgent care centers, laboratories and many other centers that cater to a variety of patient needs. These were more affordable, more efficient, more convenient and more appealing both to patients and to managed care systems who were seeking to reduce their expenditures for healthcare.

• **Litigious society** - Lawyers made all of us in the healthcare field concerned about malpractice and law suits. The cost of liability and the potential loss of a medical professional’s license or property has made us practice medicine in a different way. Today we practice “defensive medicine” so that our licenses and our property are not at stake for loss. Risk management, also referred to as quality improvement, is the term used in healthcare to determine risks of potential or actual harm to patients. Healthcare organizations spend time reviewing documentation to determine if risk is involved in patient care. If it is determined that the medical professional or the organization has actually harmed a patient or there is risk for harm, studies are conducted and changes are made (e.g., patient falls, medication errors, surgical errors). Documentation helps to protect us from malpractice, protects the patient, and gives us information helpful in the prevention of errors in the future. We make sure that we maintain our professional liability and follow the law to assure quality of care at all times. This is not just as a result of managed care or DRG’s, but is also a result of the opportunistic desire to sue and reap rewards from “deep pockets.” Specific emphasis on legal and risk management issues include:
  • Malpractice
  • Consent to treat
  • Informed Consent
  • Negligence
  • Employment issues
The burdening cost of legal issues in healthcare has impacted all of us both personally and professionally.

- **More complex care**- Healthcare professionals are caring for much more complex patients today. AIDS patients are living longer due to drugs that prolong their life and cost more. There are more premature babies being born and living longer because of the use of expensive equipment and care. Pharmaceutical companies have proliferated and added multiple drugs that patients hear about on TV and then visit their physicians and make demands on them for these expensive drugs. Consumers expect a “quick fix” from physicians and often take antibiotics or other medications that are not needed. This not only contributes to the high cost of healthcare, but also may contribute to the reduction of effectiveness for those medications at a later time. Some antibiotics lose their ability to be effective if used frequently.

- **Emphasis on quality in health care**- One of the primary duties of healthcare professionals is to place a value on meeting consumer needs in a safe and effective manner. Professionals concern themselves with patient outcomes and strive for quality in all that they do in healthcare. Quality assessment and quality improvement are concepts that medical professionals use to ensure that quality, in services and products, are maintained daily by tracking and evaluating quality indicators. This is not new in healthcare, but it has more importance today because patient outcomes are recognized as valid indicators of quality of care. Patients and third-party payors make decisions based on quality of care or on their “perception” of quality. The following are some of the reasons that the concept of quality is so important today and why pressures to ensure quality has intensified:
  - Cost-containment concerns
  - Emphasis on doing more with less (effectiveness)
  - Litigious society
  - Consumer awareness

- **Awareness of standards of care**- Healthcare professionals follow the standards of care for their particular profession because they understand that proactive consumers expect and are entitled to a high level of care. It is key to our reputation and ultimately to our survival in the healthcare profession. Professional standards are developed within the individual profession itself and govern the actions of each person within that profession. Sources of standards of care include the following:
  - Court decisions
  - Internal policies and procedures
  - Standards of professional organizations, such as, for nursing: JCAHO (Joint Commission for the Accreditation of Healthcare Organizations), ANA (American Nurses Association), NLN (National League for Nursing); for physicians: AMA (American Medical Association); for
massage therapists: NCBTMB (National Certification Board for Therapeutic Massage and Bodywork)

- State licensure statutes
- Requirements of third-party payors

- **Documentation** - Documentation has become extremely important in healthcare for both legal and quality reasons. There is a saying in healthcare, “If you didn’t document it, you didn’t do it.” Quality assurance committees and lawyers comb through patient records looking for potential problems that might cause harm to the patient and therefore loss of revenue through law suits.

- **Efficiency and effectiveness** - The increased awareness of efficiency and effectiveness in healthcare has created change in the healthcare environment. While large healthcare organizations continue to downsize and streamline, professionals are responsible for many tasks that were performed by others in the past. This has led to an expectation of efficiency, without the loss of effectiveness. DRG’s and managed care created an environment where tumultuous changes in healthcare forced everyone to be aware of cost containment and the resulting staff cuts. DRG’s caused a dramatic change in the way healthcare was paid- from retrospective reimbursement (hospitals were reimbursed for costs after treatment) to prospective reimbursement (hospitals were incented to decrease length of stay and to contain costs). Therefore, efficiency and effectiveness meant that healthcare professionals had to be flexible and adaptable to change or face loss of their jobs and careers. They had to be willing to do more work for no increase in pay and to use resources wisely.

- **The aging of society** - Our society is aging and that puts a burden on the healthcare system because of limited resources (people to work) and economics of caring (cost of providing care) for this aging population. Supply and demand for healthcare resources have changed with increased life expectancy. As the population continues to age past 65 and 85, costs will continue to increase dramatically. The aging population spends approximately three times as much on healthcare as a younger population. New technology prolonging the lives of terminally ill patients also contributes to the increased cost of an already burdened healthcare system.

- **Prevention of Medical Errors** - Sometimes healthcare professionals commit mistakes, from amputating the wrong leg to giving the wrong medication to using inappropriate equipment. Yet there are many programs in place to prevent these mistakes. An Institute of Medicine report entitled “Too Err is Human” indicates that 44,000 to 98,000 people each year die from medical errors. This is thought to be the “tip of the iceberg” since it is believed that many errors are not reported. One major reason for underreporting is embarrassment or fear of punishment. It is believed only 5% of potentially
life-threatening errors are reported according to the New England Journal of Medicine. The majority of errors are made by well-meaning clinicians. While it is reasonable to expect a successful outcome for medical treatments, it is not always the case. Medical errors have been categorized as the following:

- Medication errors
- Surgical errors
- Diagnostic inaccuracies
- System failures

Some states, such as Florida, mandated that all healthcare professionals complete a two-hour continuing education program on the prevention of medical errors for each licensure renewal. The goal of this program is to decrease the number of errors, enhance the safety environment, and to decrease the economic cost of these errors.

- **Ethics** - Ethics and quality of life have become two important concepts for healthcare professionals. The patient’s right to die, the idea of abortion, what medical professionals can and can’t do, and religious and other concerns have made their impact on the delivery of healthcare. Ethics are the rules that guide a professional’s behavior that is based on morals, values and standards of acceptable behavior. There is an expectation to be professional at all times, to be ethical, and to practice within personal and professional boundaries for the good of the patient. To do no harm is a professional requirement and ethical responsibility for all healthcare professionals.

In summary, this is an overview of the changes brought about by Medicare and DRG's and the resulting changes imposed on the healthcare system. These changes have a rippling effect throughout healthcare and impact patients as well as practitioners. The economic changes that first impacted hospitals have led to vast changes to all aspects of healthcare. Our society’s expectation that healthcare is a “right” and an “obligation” is in question because of the realities of economics. Our aging society has contributed to changes, not only in healthcare resources, but also in the aging of healthcare workers themselves. There is a dwindling supply of people to care for a growing number of aging people. At the same time, there are diminishing economic resources to provide for health care. This is not going to change.

The dynamic healthcare environment suffered from these changes, but also prospered because of these changes. The healthcare professional today must adapt to the changes, or be left “in the dust.” Each and every massage therapist must be aware of the background of the changes in healthcare and recognize that these realities impact their role as healthcare practitioners. The role of the massage therapist is an integral part of healthcare.

**Ethics**

Ethics is the philosophical study of morality. It is the study of conduct in humans and concerned with questions, such as:

1. What is right?
2. What is just?
3. When is an act desirable?
4. When is an act undesirable or harmful?

These questions help professionals to be accountable. Professionals are accountable for their behavior and actions. Accountability is an essential component of professionalism.

Professional ethics enhance the therapeutic relationship between the massage therapist and the client. The primary purpose for professional ethics is to prevent harm to the client. The right course of action with any client is to be aware that each encounter is done with the client’s needs foremost in mind. Nina McIntosh in *The Educated Heart* suggests further questions to determine if any action taken by a massage therapist is ethical. These questions are:

- Does the action keep the focus on safety and well-being of the client?
- Are you being respectful of the power imbalance and/or transference effect? Or are you using this power imbalance to your own benefit?
- Does the action create a dual relationship and make the therapeutic boundaries less clear?
- Does the action remain within the original contract with your client- or are you exceeding either your area of expertise or the client’s informed consent?
- Does the action create a safer environment for the client or detract from it?
- Could the action lead to future problems in the therapeutic relationship?

These questions help the therapist make ethical decisions and prevent role and boundary confusion.

**Professional Framework**

The role of the massage therapist is based on ethics within the healthcare profession and the massage therapy profession. A professional framework contributes to the understanding of our role in healthcare and in the practice of massage therapy. A professional framework helps to clarify our role.

Ethics and standards of practice are essential components of a professional framework. Personal and professional ethics are required for each encounter between client and massage professional. Ethical guidelines and standards of practice provide the professional framework that assures the client of a high quality and professional massage and at the same time gives the massage therapist a healthy and rewarding professional practice free of illegal or immoral conduct.

Standards of care provide specific guidelines and rules that form a concrete professional structure while ethical principles formulate a code of ethics that leads to a professional practice. No matter what techniques massage therapists use, all must be delivered within a specific professional framework.

**This framework includes the following:**

- The way the therapist practices massage on a daily basis.
- Meticulous hygiene and a professional appearance.
- Adhering to existing regulations in the area where the practice is located.
- Understanding the needs and expectations of the client.
- Maintaining a professional relationship between therapist and client.
- A professional treatment environment.
- Respect for dignity and privacy.
- Confidentiality.
- Code of ethics.
- Practicing within the law.
- Professional touch with clear boundaries.
- Clear time boundaries.
- Usual and customary charges that are not excessive.
- Clear interpersonal boundaries.
- Practicing within the scope of practice.
- Obtaining informed consent.

All these factors combine to shape how a client experiences his or her massage and how the therapist feels about his/her work at the end of the day. Massage therapists are constantly being judged – both by others and by themselves. Lack of attention to any of these areas can diminish the therapeutic results and increase the likelihood of ethical pitfalls and create unhappy clients and an unhappy therapist. Through diligence and a desire to maintain these ethical essentials, a healthy and rewarding professional practice can be cultivated.

**Ethical Principles**

Important terminology used in codes of ethics to describe the relationship between massage therapist and client is defined below:

- **Boundaries:** The client has physical boundaries, invisible barriers that separate the client and therapist, and emotional boundaries that the therapist needs to consider. Receiving permission to enter into those boundaries is important to the therapist because it helps to establish the mutual trust in the client-/therapist relationship.

- **Confidentiality:** All client information is private. Trust can be destroyed when client information is shared without the client’s permission. HIPAA also dictates that confidentiality in healthcare must be strictly enforced.

- **Informed consent:** The client must be given enough information to make a knowledgeable decision to receive the “right” treatment. The role of the therapist is to educate the client about the massage session and discuss its effects and any contraindications.

- **Disclosure:** Reasons for refusing to work with a client must be explained. Honesty and directness help with communicating disclosure.

- **Right of refusal:** The client has the right to stop the treatment or to refuse treatment at any time. That is a basic patient right.
- **Safe touch**: Touching must be done so that the client experiences no harm or fear. Trust is built when the client feels safe. Safe touch respects boundaries and ethics.
- **Sexual impropriety**: Any behavior, comment, expression, or gesture that is seductive or sexually demeaning to the client is inappropriate. Inappropriate behavior and sexual improprieties are considered patient abuse. This is a violation of ethics, professionalism and the law.

A code of ethics and standards of care provide a professional framework for massage therapists. The code of ethics requires massage therapists to uphold professional standards that allow for the proper discharge of their responsibilities to those served, protect the integrity of the profession, and safeguard the interest of individual clients.

**Professional Ethical Behavior**
According to Sandy Fritz, B.S., author of *Fundamentals of Therapeutic Massage*, there are **8 principles that guide professional ethical behavior**:

1. **Respect** - Esteem and regard for clients, other professionals, and oneself
2. **Client autonomy and self-determination** - The freedom to decide and the right to sufficient information to make the decision
3. **Veracity** - The right to the objective truth
4. **Proportionality** - The principle that benefit must out-weigh the burden of treatment
5. **Nonmaleficence** - The principle that the profession shall do no harm and prevent harm from happening
6. **Beneficence** - The principle that treatment should contribute to the client’s well-being
7. **Confidentiality** - Respect for privacy of information
8. **Justice** - Equality

These broad ethical principles direct the development of standards of practice. Ethics defines the behavior we expect of ourselves and others and society’s expectations of a profession. Ethics is the study of morals and behavior. Culture, time, events, politics, location, scientific knowledge, religion, and many other factors affect the way we interpret behavior and morals. Our society determines that a person has acted ethically when the right thing is done. It is difficult to define and determine “what is the right thing.” Often the best that can be determined in discussing ethical questions and guidelines is based on principles of conduct established by a group.

**The Dimensions of Ethics**
Ethics has several dimensions:
- a. Social
- b. Professional
- c. Personal

It is not easy to separate these elements. We behave according to a complex and dynamic set of rules, customs and expectations that are continually changing
and evolving. Because of this, ethical behavior is an on-going process of reflection and revision. Reflection helps us look at our behavior and make changes when necessary. Revision is the actual change. Conflicts are inevitable. That is why a set of guidelines and standards of practice are helpful. They help us set priorities and assist us with decision making. Even though ethics is ultimately a personal concern, it is also a reflection of an individual's professional and social moral character.

Why is it important to maintain an ethical massage practice? The answer is to maintain and promote the welfare of the client. Laws reflect the minimal standards necessary to protect the safety and welfare of the public, whereas codes of ethics represent the ideal standards set by a profession. Ethical behavior by a professional demonstrates compliance with both law and professional codes.

“Less is more” is not always our objective in massage therapy. If compliance to the law is our only motivator, the therapist is referred to as practicing “mandatory ethics”. On the other hand, if the massage professional strives for the highest good and welfare for each client, the professional is practicing “aspirational ethics”.

Hour 2

- Unethical Conduct
- Code of Ethics
- Standards of Care
- NCBTMB Standards of Practice
- Limits of Practice
- Communication
- Complexities of Massage Practice
- Scope of Practice
- Boundaries
- Guidelines for Safe and Ethical Conduct
- Client Impropriety
- Red Flags
- Personal, Professional and Emotional Boundaries

Unethical Conduct
Massage professionals must be constantly alert for gross violations of ethical principles, but also for the subtle ethical violations that occur when the client’s welfare is not our highest priority. For example, a massage therapist has been treating a client for a time and receiving payment. When the therapist knows that the client should be referred to another healthcare professional and doesn’t because of loss of income, this represents unethical conduct. The therapist may not recognize this subtle break in ethics, yet the client’s welfare is compromised. Professionals need to monitor their behavior by constantly asking themselves if they are doing what is best for the client and if their behavior is ethical.
Code of Ethics
A professional code of ethics is a set of moral norms adopted by a peer group to direct choices that are consistent with professional responsibility. In the field of massage, the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB) developed the professional code of ethics. Ethical codes historically were general in nature, but today are more specific. This is as a result of malpractice suits. Many professions have their own code of ethics, such as, medical physicians, nurses, realtors, builders, etc. Their codes were developed with their profession in mind and refer specifically to them. The first ethical code was the Hippocratic Oath, developed in the fifth century B.C. and still in use today. Codes of ethics are not concrete. They can be changed and adapted according to changing needs. Sometimes the beliefs and values held by one therapist differ from another. Therefore, it is difficult to create a value system that is acceptable and workable for all. For example, one massage therapist might not want to work on any client with AIDS or cancer or some other disease. On the other hand, another therapist might feel that all persons in need should be treated. A code of ethics for the massage profession respects both these people and their beliefs. Members of society have a personal code of ethics that governs their behavior. We learn this personal code from our family, religion, and from other members of our community. If a massage therapist is acting unethically, he/ she is acting in contradiction to a generally accepted standard of conduct designed by peers in the profession or in contradiction to an accepted personal code. There are various professional organizations that publish codes of ethics for massage therapists, such as the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB), the American Massage Therapy Association (AMTA), and the Associate Bodywork and Massage Professionals (ABMP). There are many points in common in these codes of ethics because they are based on safe practices within principles of ethical, professional and acceptable professional behavior in a therapeutic relationship between therapist and client. Some of these points in the code of ethics include the following:

- To provide the highest quality of care in the practice of massage therapy
- To practice with honesty and without misrepresentation of qualifications
- To provide accurate and honest information to the public about the effects of massage therapy, the scope of practice and limitations of massage
- To refer clients to appropriate health professionals as needed
- To acknowledge the contraindications of massage
- To maintain and enhance knowledge by participating in continuing education
- To provide treatment when there is reasonable expectation that massage will aid the client
- To recognize that all clients and other professionals deserve respect and agree not to discriminate
• To Maintain confidentiality
• To obtain informed consent
• To respect the client’s right to refuse, modify or terminate treatment
• To practice with ethical boundaries including draping and treatment that ensures safety, comfort and privacy
• To refuse to treat any person or part of the body that demonstrates a lack of respect for professionalism
• To refrain from sexual misconduct
• To avoid any activity that does not keep the client’s best interests in mind
• To respect boundaries of privacy, disclosure, exposure, emotional expression, beliefs, and the client’s expectation of professional behavior
• To refuse any gifts that imply influence of referral for personal gain without the client’s good in mind
• To follow the guidelines of the professional organization

These codes of ethics do not have legal power, but they do contain ethical guidelines that once transgressed, could lead to legal problems. All medical professionals work within the context of their own professional code of ethics designed for their particular profession. A profession cannot be successful without a code of ethics and a profession cannot design a code of ethics without guidelines developed within the profession. That is why most professions work under a national association and a state association. Together, with input from a national association and a state association, they develop the code of ethics for that particular profession. A code of ethics is not the only ethical guide for professionals. There is also standards of practice that help guide professionals in their field.

Standards of Practice
Standards of practice evolved from professional organizations within massage therapy, licensing requirements, and the standards of practice from other health professions. Standards of practice guidelines direct quality of care and provide a means of measuring the quality of care. They are more specific than ethical principles. For example, in standards of practice, the ethical principle of respect translates to professional behavior, such as maintaining the client’s privacy, providing a safe environment, and being on time for appointments. Another example is the ethical principle of client autonomy and self-determination, which requires specifically informed consent and ready access to client files. Standards of practice foster high standards of ethical and professional practice by credentialing practitioners within the massage therapy field and by assuring the public that high standards will be followed by the members who are properly certified. Standards of practice provide a guide for professionals within the massage therapy field in their day to day practice. The principles stated in a standards of
the practice agreement establish high standards, responsibilities and statements of accountability, sanctions and appropriate disciplinary actions.

The purpose of the NCBTMB Standards of Practice include the following:

- To ensure that the professionals who attain the certification are aware of the existence of high standards of practice
- To ensure that professionals uphold the high standards
- To assist the general public, consumers, other healthcare professionals, and State and Municipal Regulatory Agencies or Boards with understanding the duties and responsibilities of NCBTMB certificants

The NCBTMB covers various standards, including:

- Professionalism
- Legal and ethical requirements
- Confidentiality
- Business practices
- Roles and boundaries
- Prevention of sexual misconduct

If these standards are not respected, severe breeches may occur. Consider the following:

Standard I: **Professionalism**

Massage therapists who fail to comply with professionalism may have committed the following acts:

- acting unprofessionally by drinking or taking drugs
- failing to treat client with respect and dignity by calling them inappropriate names
- documenting inappropriate comments
- practicing in an unlicensed or approved location
- failing to wash hands and provide clean sheets
- wearing clothing that is revealing and inappropriate
- failing to obtain informed consent when necessary, failing to develop and update a plan of care
- inappropriate draping, practicing beyond their ability or scope of practice
- failing to refer when necessary
- failing to seek advice when needed
- failing to respect the parameters of other healthcare professions
- falsely talking about other practitioner’s reputation
- using the credentials without competency
- failing to use the NCBTMB logo and certification number appropriately
- failing to return the certificate if revoked or suspended

Standard II: **Legal and Ethical Requirements**

Massage therapists who fail to comply with legal and ethical requirements may have committed the following acts:

- failing to obtain license to practice
• failing to obtain city and county licensure
• filing to accept clients of a different race or theft or performing illegal acts such as prostitution
• failing to accept responsibility for something they did
• failing to report others when you know they did something outside the law or violating massage law
• failing to keep accurate records on clients,
• failing to report any criminal convictions in the part of the therapist or other certificant
• failing to report pending litigation or outcome related to massage practice
• failing to respect publishing rights and copyright laws

Standard III: Confidentiality
The massage therapist who does not adhere to the standards of confidentiality fails to protect the client’s confidentiality by
• discussing his/her client in the grocery store or where others can hear the client’s name
• failing to safeguard clients in advertisements
• failing to get permission to treat any underage client
• asking for more personal information than necessary
• failing to give information to other healthcare professionals when required
• failing to keep client records for 4 years
• failing to store records in a safe, locked cabinet

Standard IV: Business Practices
The therapist who does not adhere to these standards fails to practice with honesty, integrity and within the law. Examples include:
• practicing in an unsafe and unlicensed area
• failing to carry liability insurance
• neglecting to maintain progress notes
• misrepresenting his/her qualifications and affiliations
• failing to practice with integrity
• failing to respect conflicts of interest
• advertising illegally without proper licensure and is misleading in content
• failing to comply with sexual harassment laws
• exploiting the trust and dependency of clients and co-workers
• failing to display fee schedules or discuss fees prior to treatment
• failing to follow acceptable accounting procedures, does not file taxes, does not maintain appropriate financial records for at least 4 years
• failing to comply with all applicable municipal, state and federal taxes

Standard V: Roles and Boundaries
The therapist must comply with the roles and boundaries standard for the protection of the client, the practitioner to safeguard the therapeutic relationship. This standard include the following:

- failing to recognize the practitioner’s ability to practice massage and the limitation of his training and education,
- failing to recognize his position of influence with the client
- exploiting the relationship between client and therapist
- failing to understand the impact of transference and counter-transference
- failing to avoid dual relationships or multidimensional relationships with clients and co-workers
- engaging in sexual activity with clients
- failing to respect the client’s freedom of choice in the therapeutic milieu
- failing to respect the client’s right to refuse the massage session
- practicing while under the influence of drugs or alcohol
- failing to terminate the session with an abusive client or client under the influence of drugs or alcohol.

Standard VI: Prevention of Sexual Misconduct
The therapist who does not comply with this standard participates in any behavior that sexualizes, or appears to sexualize, the client/therapist relationship. This includes:

- refraining from a sexual relationship that displays sexual conduct with a client, with consent or otherwise from the beginning of the relationship to a period of six months after the termination of the client/therapist relationship
- refusing to terminate a session even if the client initiates sexual behavior
- refusing to recognize that sexual activity with clients, students, employees, supervisors, or trainees is prohibited even if consensual
- touching the genitalia
- performing ear canal, oropharynx, anal canal treatments without informed consent or within the specific framework of the law of the state where performed
- failing to provide therapeutic breast massage as indicated in the plan of care without receiving informed voluntary consent for treatment or within the specific framework of the law of the state where performed

Along with ethical principles and standards of practice, there are other important elements to include in the therapeutic massage session. These are scope of practice, limits of practice, boundaries and informed consent.

Scope of Practice
The scope of practice for massage is derived from the legal definition of massage. It defines the working parameters or limits of the massage therapy profession. The scope of practice is derived from state law, educational training,
competency, and accountability. Therefore, it may vary state to state in small ways. The scope of practice defines minimal standards. These standards may include the following:

- What services may be provided by massage therapists
- What services may not be provided by massage therapists (to prevent infringement on other professions)
- The definition of massage
- Assessment of clients
- Licensure requirements
- Entry level and continuing education standards and requirements
- The use of other therapies, such as hydrotherapy, aromatherapy, and other therapies

Some states will add more to their scope of practice, while others will keep the scope very limited. It is important for each therapist to be aware of the scope of practice within their state so boundaries are not crossed.

In most states it is against the law to practice massage without a license. Some states certain modalities are legislated to be outside the scope of practice for massage therapy.

Most states require a minimum number of hours in education to become licensed. Many require the successful completion of state and national massage therapy exams prior to licensure. Many states also require continuing education approved by the state, and others require continuing education approved by NCBTMB. States have rules for continued licensure and the requirements of completion of continuing education.

Competency, another component of scope of practice, differs from state to state. However, the requirements both for entry level education and continuing education are mandated in many states. Competency requires continued inquiry to enhance the therapist’s skills and performance.

Accountability refers to the therapist’s acceptance of responsibility. It includes meeting standards of care, being the best practitioner that we can, being open to new learning, and respecting our limitations by referring out when necessary. This helps to assure a therapeutic relationship with our clients.

**Limits of Practice**

The seasoned massage therapist knows his/her limits of practice and knows when to refer clients as required by the code of ethics and standards of practice. Each professional has limits on his ability to practice massage. Limits of practice prevent us from falling into the trap of believing that we are all things to all people.

Each professional has limits on his personal ability and also has personal limits on his/her scope of practice defined by education, personal bias, life experience, specific interest in types of clients served, and any personal physical limitations. For example, a massage therapist who chooses to work in medical massage settings will need advanced training in disease processes, dysfunction and complex circumstances. A new graduate must respect his/her limits and not undertake a massage that is beyond his/her limits of practice or ability. Another
massage therapist only interested in Swedish massage does not need such advanced training.
Another example is the therapist who will work on the same sex in massage. Not each therapist wants to work on the opposite sex. Knowing this information or self-disclosure will help to set limits. Some therapists are biased and choose not to massage one or the other.
A properly trained massage therapist can recognize subtle changes in the client’s health and functioning and is better equipped to work as a team with other professionals when treating patients with complex medical problems. Therefore, it is important for each massage therapist to understand and recognize limits of practice and individual limits.

Communication
As a massage professional, all communication with clients must come from a body and massage perspective. That means that therapists must filter all information from the client knowing their limits of practice from a body and massage perspective and not from any other perspective. Knowing limits of practice helps to ensure that therapists are within their scope of practice. Massage therapists are not psychotherapists and cannot solve the client’s personal problems. For instance, your client has been coming to you for frequent visits for the last two weeks. Each visit she has told you more and more personal information about her marriage. From the information that she has given you, you see that she is unhappy and wants to get out of the marriage. On the last visit, she asked you what she should do. This is not your role to play psychotherapist or marriage counselor. The best advice is to refer her to a professional and do not discuss what she “should” do. Inform her of your scope of practice.
To understand limits of practice means to acknowledge that the body, mind and spirit of a person share a definite connection. These connections work together to make us a whole human being. See the following:

- **Body**= The physical biologic functions involve all the anatomy and physiology and the chemical responses of the body. Feelings are body functions.
- **Mind**= The cognitive process interprets physical sensations and sets physical responses in motion. Emotions are the result of the interaction between body and mind. Behavior then is the action that results from the emotional, physical, and cognitive combination.
- **Spirit**= The spirit provides strength, hope, faith, and love that leads to a fulfillment or reason for being. Each of these areas is interdependent.

The body, mind, and spirit cannot be separated. People cannot become experts in all levels of functioning. However, it is beneficial for massage therapists to determine if they are within their scope of practice by looking at these different areas. If a client expresses distress, shares personal information, or requests specific information, it becomes necessary to determine if the issue is most specifically body, mind, or spirit.
If the situation is physical (body), decide whether the information falls within the scope of therapeutic massage and respond accordingly. You will be safe if you remain in this area because the body is within the scope of practice.

If the situation is mental (mind), use active listening skills and refer if necessary to the proper professional. Mental may infringe on another professional’s domain. Be careful not to allow yourself to become the client’s therapist. It is outside the scope of practice to offer guidance in this area. Active listening can help you identify what specific issues are at stake. Remember to refer out if in doubt.

If the situation is a spiritual (spirit) issue, once again use active listening skills to acquire more information and acknowledge the situation but do not attempt to solve the problem or provide problem intervention. Refer if necessary.

**Remember, refer out when in doubt.**

**Complexity**
The complexity or severity of a situation determines whether listening- without advice being given- is enough or whether a professional referral is indicated. Often the physical stress of the situation can be addressed by massage while the client seeks additional help from other healthcare professionals. Your therapeutic relationship with the client must be honored and you must refer to other professionals when needed. These referrals can be beneficial to the practice of massage, because other professionals may refer to you in the future. Many other healthcare professionals are unfamiliar with massage techniques, but realize the importance and power of touch. Other professionals can be educated to understand that massage therapists bring touch skills that they are unable to provide because of the nature of the therapeutic relationship with the client. It is important for the massage therapist to be able to communicate, not only with the client but with other healthcare professionals. This communication begins with knowledge of limits of practice and an understanding of scope of practice. To maintain a cooperative, multidisciplinary philosophy of care, massage therapists must respect the dedication of other professionals by maintaining their appropriate scope of practice.

**Scope of Practice**
Standards of practice evolved from professional organizations within massage therapy, licensing requirements, and the standards of practice of other healthcare professions. Massage therapy does not have a formalized scope of practice like other healthcare professions. That is why it is important to know the scope of practice of other healthcare professions in order to respect those professions and to maintain appropriate boundaries. Defining the scope of practice in massage therapy is an on-going, active process.

The scope of practice of any healthcare provider means the limits or boundaries that the law or national standards place upon a provider. For example, a physician may diagnose disease, a nurse can carry out the physician's order, but cannot diagnose. A physician, chiropractor or trained technician may take X-rays, but a massage therapist and a nurse cannot.
The type of education, the certificate or diploma received, and the development of national standards by the profession usually defines the type of practice a person in healthcare may have. Most healthcare professionals have licenses and certifications that exceed that of the massage therapist. The more education and the higher certification a person holds, the more the professional is allowed to do by that profession or by law.

Each professional has limits on his/her ability to practice massage. Respectful practice of therapeutic massage limits the scope of practice so that massage therapists do not encroach on the practice of other professionals. A scope of practice that has been legally adopted through legislation defines as well as limits a therapist’s ability to practice massage.

True professionals understand the limits of their technical skills and scopes of practice and choose to work with other professionals for the best possible outcome for the client. Currently much of the literature defines the scope of practice of massage by what cannot be done, to avoid infringing on the scope of practice of other healthcare and service professions.

**Boundaries**

There are many elements in the profession of massage therapy that enhance the lives of its practitioners, such as respect, prestige, and authority. In return, professionals must be willing to adjust their personal behavior for the professional good. It is important to adjust personal and professional behavior not only by what is right and good for us as individuals, but also what is appropriate for the client and the profession as a whole. This includes maintaining boundaries.

Boundaries are limits. They can be physical and tangible or conceptual and abstract. A physical boundary refers to one’s personal space. Most people maintain a physical boundary of comfort within 3 feet of them. Physical boundaries give us the right to determine when, where, how, and who touches us, or how close anyone comes to us. Boundary violations can have a profound impact on the dynamics of a relationship.

Physical boundary compromises can happen easily even if the massage therapist is well-intentioned. These compromises are not only about sexual impropriety with clients, but also about subtle compromises. Consider the hug when greeting someone. Before greeting anyone with a hug, ask for spoken or unspoken permission?

Compromises may also occur in the following ways:

- when the client is dressing or undressing
- during draping procedures
- when working too deeply or too long in an area
- when working on invasive areas, such as abdomen, groin, or anterior neck
- when applying heat or cold
- with smells and aromas
- with lingering touch
• when the therapist's body is used during the session (using the therapist's body for bracing the client)

None of these issues can be taken lightly. When touch is involved, trust is mandatory.

According to Daphne Chellos and Melanie Dunn-Deborski, guidelines help massage therapist honor the physical boundaries of the client. They suggest the following "Guidelines for Safe and Ethical Contact":

- Client dresses and undresses in private.
- Client has a clear choice as to whether he or she is nude, wears underwear or a smock during the treatment.
- Practitioner does not use inappropriate parts of the body for bracing.
- Appropriate draping procedures will always be observed.
- No sexual contact or dating between practitioner and client during the course of treatment.
- Practitioner seeks informed consent from the client to work on certain parts of the body. For example, high on the thigh, buttock, front of the hip near genital area, stomach, and on the chest around breast tissue.
- It is always the responsibility of the therapist to set clear boundaries.

**Client Impropriety**

Not only are the physical boundaries important for the client, but also for the therapist. Examples of actions that violate massage therapists include:

- sexual advances from the client
- client combativeness
- the initiation of an uninvited hug
- the insistence that draping be omitted
- the client’s beginning to undress prior to the therapist’s exit from the room.

These compromises are inappropriate in a professional setting, regardless of whether or not they cause uneasiness for the therapist. Yet, because a confrontation may be awkward, these situations may be overlooked and not be addressed. This leads to a situation of neglect. Neglect means to ignore the problem, which compromises the boundaries of both client and therapist.

Physical boundaries can also become a problem in the client’s home when the client is a new contact and the setting is isolated.

**Red Flags**

According to Dianne Polseno, LMT, the following 15 warning signs signal a red flag to massage therapists that boundaries may be at risk:

- Feeling overwhelmed by a person.
- Allowing someone to take as much as they can from you.
- Not noticing when someone invades your boundaries.
- Accepting unwanted food, gifts, or touch.
- Touching a person without asking.
- Going against personal values or rights to please others.
- Falling in love with anyone who reaches out.
- Letting others direct your life.
- Letting others define who you are or describe your reality.
- Experiencing feelings of dread at the thoughts of having to massage a certain person.
- Believing you can anticipate others’ needs.
- Believing others can anticipate your needs.
- Falling apart so someone can take care of you.
- Not saying ‘no’ because you dread the consequences.

Hour 3

- Personal Boundaries
- Professional Boundaries
- Emotional Boundaries
- Legal Boundaries
- Power
- Informed Consent
- Emotional Abuse
- Transference
- Counter-Transference
- Projection
- Conclusion

**Personal Boundaries**

Ethics and standards of practice also involve boundaries, both personal boundaries and professional boundaries. Boundaries refer to limits of behavior and those limits become much more important in a professional relationship.

Personal boundaries are limits that each individual creates for the following reasons:

- Protection: to protect the person
- Nurturing: to nurture the individual
• Reduction of stress: to make life less stressful
• Maintain a separate identity: to maintain a healthy sense of self and separateness from others.
Boundaries can be communicated to others by body language and by verbal communication. Some of our clients who have been affected by abuse, may not be aware of boundaries. In this instance, the massage therapist needs to spend additional time prior to the massage to ensure the client’s comfort level. Describing a massage session and what the client can expect will help allay any fears.
Personal boundaries include several privacy issues such as nudity, doors being closed, telephone conversations, mail, journals, and diaries. They permeate how we feel about friends, strangers, lovers, our family, people who smoke, those who wear too much fragrance, or who are noisy. Personal boundaries also include our spiritual, emotional and mental beliefs.
Boundaries can often be difficult to determine. On-going communication can facilitate a therapeutic relationship and prevent the crossing of boundaries. Those with unhealthy boundaries take on the belief systems, likes and dislikes and maybe personalities of those with whom they are in a relationship. These behaviors often lead to unhappiness, depression and self-dissatisfaction. Healthy boundaries lead to security and the ability to give and take in relationships. Personal boundaries determine our safety zones and are influenced by past experiences, values and beliefs.

Professional Boundaries
Professional boundaries lead to a relationship that includes integrity and character. These qualities are of utmost importance to massage therapy. If the therapist has character with integrity, there is honesty in the relationship. In a healthy therapeutic relationship there is a balance between safety and objectivity and between care and compassion with distance. There is no specific formula for achieving this balance, but healthy boundaries can provide the framework for a healthy client/therapist relationship.
Boundaries exist by individual context in each situation. They need to be interpreted in the individuality of each situation with the client. Each client and each situation is unique. Ethical boundaries may be difficult to define, but therapists must remember that we are responsible for our client’s safety and comfort. Professional boundaries are determined by the type of massage practice and the rules and practices of that practice. It helps if we have an understanding of our clients needs and wants. On the other hand, it is important for the therapist to understand his/her own needs and wants, too.

Violation of Professional Boundaries
According to Susan Salvo, there are several areas to consider where professional boundaries may be violated. If these are followed, the opportunity for boundary infringement is decreased. These are:
1. Schedule a minimum of 15 to 30 min. between appointments; you will then have the flexibility of dealing with late clients, time to extend
appointments from 60 to 90 min. when requested, and time to return calls or take a break.

2. Make house calls or out-calls to hotels only to clients who have been referred by an existing client, or set up some safeguards. You should only make out-calls to reputable hotels, and check in at the front desk when you arrive. Be sure and let the staff know that you will be coming by to check out when the session is complete. When you get to the room, call the front desk and let them know when you are starting the massage and that you will be checking back with them in about an hour. This should be done in the presence of your client.

3. Always provide a basket for the client’s jewelry and personal items so that nothing valuable gets misplaced or stolen.

4. Avoid asking the client personal questions that have nothing to do with the massage treatment.

5. Respect the client’s physical appearance. Large or unusual scars, tattoos, body piercing, birth defects, body hair, and body size should not be referred to rudely or disrespectfully.

6. Avoid using high-pressure tactics to sell the client vitamin supplements, to sell health foods, or to make commitments to long-term massage treatments. Many therapists believe it is unethical for them to sell products as it invites a dual relationship; one aspect is therapist and the other is salesperson.

7. Provide adequate draping to ensure the client’s privacy and your professionalism. Avoid drapes that are semitransparent, and respect the boundary of the drape.

8. Avoid hugging your client until permission is granted. Hugging is acceptable only when hugs are solicited by the client after he/she is dressed and off the table and only if the therapist also is comfortable with giving and receiving hugs.

9. Refrain from making sexual innuendos, sexual jokes, or propositions, and flirting or giving physical compliments.

10. Always respect a client’s comfort level. Respond immediately to his requests for a change in pressure applied to his body, for a change in the room temperature, for omission of a certain part of the routine, or for extra work in a problem area if there is time within the session.

11. Always dress professionally while engaging in the practice or promotion of massage therapy. Definitions of professional dress may vary greatly, from scrubs to casual wear, depending on the occasion. How we dress carries a message. There is a big difference between casual attire and revealing attire.

12. Avoid inflicting pain on the client in any way, especially after the client has made the therapist aware that the technique is painful. Once aware of client sensitivity, the therapist is legally bound by informed consent to lighten the pressure or change the technique. If a level of comfort cannot be found, then the area should be avoid altogether.
13. Avoid dating your clients. Don’t ask a client out on a date or accept a date if asked. If you are contemplating a possible romantic relationship with a client, it is best to terminate the therapeutic relationship first. Many professions require that a specified amount of time should pass between termination of the professional relationship and the beginning of a personal/romantic relationship. This may vary from 6 months to 10 years. Check the state law and code of ethics in your area to see if a specific time frame exists.

14. Never engage in sexual activities with any client. This means avoiding any activity that is directed at sexually stimulating either the client or the therapist. Additionally, the AMTA recommends that therapists avoid placing their own pelvis, breasts, chest, hair, lips, or face in contact or proximity to the client. For the purpose of therapeutic massage, the therapist should touch the client only with his hands, forearms, or elbows. Some Eastern forms may also make use of the feet and knees of the therapist. Occasionally you may use the sides of your hips to stabilize a client during mobilization.

15. Always respect a client’s confidentiality. Never reveal a client's name, physical condition, and any information from the client’s conversation while on the table or written on the intake forms. Do not leave the client forms out for others to read.

16. When purchasing client gifts, choose inexpensive to moderately priced presents that relate to massage therapy or relaxation.

17. Do not accept expensive gifts from clients. Expensive gifts often strain the therapeutic relationship.

These are excellent boundaries to follow to assure a professional and therapeutic relationship. Boundary violations usually begin slowly and often without cognitive recognition. Therefore, the therapist must look for the subtle signs that indicate that boundaries are being crossed.

Professional boundaries need to balance in the same way that personal boundaries balance. Look for the red flags in a therapeutic relationship and stop seeing the client if boundaries are compromised.

**Emotional Boundaries**

Emotional boundaries can be compromised in various situations. Client abuse and neglect can cause both emotional and physical pain. Client neglect is defined as physical or emotional harm sustained by the client due to lack of knowledge or sensitivity on the therapist’s behalf. Negligence occurs frequently due to ignorance.

Examples include:

a. Physical- therapist mistakes a cyst for a trigger point, causing tissue damage through prolonged pressure.

b. Emotional- therapist fails to provide emotional support to a client and instead tries to be a counselor and gives unsolicited and untrained advice.
Emotional Abuse
Emotional abuse occurs in a relationship that has an imbalance of power and when the person who holds the greatest amount of power does not recognize or respect the other’s boundaries. This can occur in massage therapy because the client may feel vulnerable both physically and emotionally when the client is lying down and draped and the therapist is standing and clothed. Because the client is vulnerable, the therapist must have good professional boundaries.

Legal Boundaries
The legal boundaries of a massage therapy practice are the rules and regulations developed by each state, city or municipality. The legal boundaries and legal limits of massage therapy are clearly defined by law and professional associations. Any deviation from the legal practice of massage therapy may compromise the boundaries of the client and the therapist and cause harm or loss of licensure. While some boundaries are easily recognized, others are not. What is a therapist to do? Recognizing your own boundaries and knowing the boundaries of your client helps, but it is not enough. Another way to establish the framework of a therapeutic relationship is to recognize the concepts of transference and counter-transference. These are red flags to become familiar with to reduce boundary confusion.

Transference and Counter-Transference
Psychotherapists have long been taught about a phenomenon of personalization that takes place between counselors and their clients called transference and counter-transference. Sigmund Freud was the first person to identify the psychological process of transference and counter-transference. He recognized that people who came to him had strong feelings and fantasies about him that had no basis in reality. Most of these were his female patients who fell in love with him.
Freud concluded that during his sessions, patients were unconsciously transferring the feelings and attitudes they assigned to early significant figures in their lives onto the analyst. He concluded that some of this transference was positive and some was negative.
Transference is “the unconscious tendency to assign to others in one’s present environment feelings and attitudes associated with significant persons in one’s early life, especially the patient’s transfer to the therapist of feelings associated with a parent.”
Transference can be seen when the client sees you as a warm and wonderful person without knowing you for very long. He may have had an abusive childhood filled with sexual and emotional abuse from his parents, and you remind him of what is missing in his life. In extreme circumstances, the client becomes overly attached to the therapist and will created conflicts without realizing how. This can be confusing for the therapist who is not familiar with transference.
Transference becomes a sensitive issue when there is a dual relationship with a client. When we become both therapist and “friend”, there is the possibility of role confusion and transference. Boundaries are compromised and our reactions become personalized rather than professional. Transference can occur with or without a dual relationship. Some clues that transference is occurring include:

- The client continually seeks your approval. For instance, he or she may ask what you think about personal issues.
- The client is concerned about how you feel about him. For instance, he frequently asks you what you think about him and does not want to do anything to make you dislike him.
- The client is overly curious about your personal life. For instance, he asks you about your marriage, your children, or your personal life.
- The client makes irrelevant comments about you outside of the session to others and relays them back to you. For instance, he discusses something he heard about you outside the session and seems troubled about comments that are innocuous to you. He takes your side because he wants to be your friend.
- The client expects you to be perfect and to have no problems of your own. This is a primary sign of transference because the client sees you as “the perfect friend,” “the perfect parent,” or “the perfect adult.”
- The client treats you as an authority on life and takes everything you say seriously. This may not be a problem unless the therapist feels a burden to accept this identity and it becomes too much responsibility. There can be envy and jealousy that may lead to a negative reaction.
- The client calls frequently after hours or between appointments. This becomes a problem if the client is asking you to make decisions for him.
- You have a hard time being yourself around the client. You are “walking on eggshells” around the client because you are afraid of how he will react to what you say.
- The client is overly concerned about how you look and doesn’t want to accept assurances that you are OK. For instance, he keeps saying, “Are you sure you’re OK?” What he is trying to do, is reverse roles with you.
- The client expects extra privileges. For instance, he wants you to accommodate your schedule to his last-minute changes and may feel jealous when you see other clients.
- In social situations, the client sees you as more than a therapist and gives you much more information than is needed for a therapeutic relationship.

Extreme forms of transference have very negative consequences for the client and the therapist. Obsession takes over the client’s relationship with the therapist. This can result in accidents, dangerous choices, fantasies, nightmares, stalking, violence and psychotic reactions. It does not happen frequently in massage therapy, but it can happen in the person’s personal life.
Counter-transference is “a reaction of the therapist to the client; an emotional reaction that is generally a reflection of the therapist’s own inner needs and conflicts but also may be a reaction to the client’s behavior.” Transference and counter-transference are a two-way street. The therapist can be affected, too.

Massage therapists and their clients are vulnerable to this phenomenon. The therapist can feel that they are falling in love also. The feelings in both processes may be affectionate, which results in a positive transference situation, or they may be negative feelings of hostility and animosity which leads to a negative situation. It is the responsibility of the massage therapist to maintain a balance in the relationship with the client and to stop seeing the client if emotional abuse may occur. Set firm boundaries with all clients and maintain them to provide a therapeutic relationship- one without transference or counter-transference. The therapist who observes boundaries prevents client abuse, client neglect, becoming too intimate, or disclosing too much personal information to clients. There can be a huge and painful letdown when transference or counter-transference backfires. Sometimes either the client or the therapist will end up stalking, assaulting or killing someone (the extremes).

Projection

Transference is also referred to as projection. When this happens, the therapist is projecting his own feelings, motivations or emotions into the client without realizing that the reaction is really more about the therapist than the client. For instance, you fall in love very quickly with your client. Love at first sight is usually a projection- especially if it ends in disaster- and you could have seen it coming.

Also, projection is happening when one of your clients reminds you of your father or some other person from your past- and that relationship was filled with anger or resentment. You may think about your father or other person because of the client’s mannerisms, speech, or looks. This becomes a problem when you cannot communicate positively with this client and you feel emotions that have been dormant for a long time.

Transference and projection are reactions caused by unmet emotional needs, neglect, seductions or other abuses that transpired in childhood. If the person cannot recognize the difference between past and present can end up in same destructive patterns over and over again.

If you do not want a relationship with clients outside the massage session, tell them directly. In addition, you can develop policies that say in no uncertain terms that you do not establish relationships outside the massage therapy session because of the boundaries of the professional relationship. However, if a social relationship arises, it should be because of mutual choice. Don’t offer to have a personal relationship outside the therapeutic relationship unless you are absolutely sure that a social relationship will not damage the therapeutic relationship.
The professional relationship must come first. If you decide to establish a social relationship, end the professional relationship. In this way, boundaries are protected and respected.

**Power Differential**
Authority figures represent a power differential in a relationship. The authority figure in massage therapy is the therapist. Other authority figures include parents, teachers, healthcare professionals and employers. They become authority figures because others give them this power.

There is always a power differential in any therapeutic relationship. The practitioner, by virtue of his education and credentials, has more power than the client. In massage, it is even more powerful because the client is usually lying on a table. This is a vulnerable position. The practitioner works closely to the body and often leans over the client’s body. In addition, the client is partially clothed. Draping is used for privacy, but it increases the imbalance of power.

As the therapist moves his hands across the client’s body, the client’s safety is in his hands. For all these reasons, the power differential must be considered in the client/therapist relationship and must not be abused.

Each therapist must recognize this power differential, but not get caught up in its power. Recognition keeps power in check.

**What If the Therapist is Attracted to a Client**
Sexual feelings may arise during a treatment session. If the therapist feels an unusual sexual attraction to the client, certain questions must be explored.

Consider the following questions for self-discovery:
1. What am I feeling?
2. Is this a feeling that is likely to go away, or is it intense?
3. Does the client remind me of someone else?
4. Can I focus on the client’s needs?
5. Am I having fantasies about this client?
6. Am I aware of treating this client differently from others?
7. Do I want to pursue a personal relationship with this client?
8. What is at risk here if I tell the client how I feel?

If you decide you want to explore a sexual relationship with this client, you must discontinue the client/therapist relationship and you must not discuss the idea of a sexual relationship in the massage room. The NCBTMB suggests that an end of the therapeutic relationship must be established and a personal relationship should wait for six months. We must maintain our high standards and our professional conduct at all times. Be absolutely certain if you choose to go down this path. There can be some serious consequences as a result of a sexual relationship- even if both parties agree.

**Sexual Misconduct of a Colleague**
Massage therapists have a duty and a right to report sexual misconduct by other professionals. If we become aware of a breach of ethics by another colleague,
we must report this unethical behavior. Complaints may be filed with the state or national association.

**Informed Consent**

Another important component of ethical guidelines and standards of practice is informed consent. Each massage therapist is ethically responsible for providing information to their clients concerning the procedures to be performed and any risks to those procedures. Informed consent reflects the ethical principle of client participation and self-determination.

Clients have a legal right to choose from suggested options and to receive sufficient information to make a choice for the most appropriate approach for them. Clients also have a right to refuse the service at any time. This is a voluntary agreement with an action proposed by another. The client who gives consent must be of sufficient mental capacity and be in possession of all essential information in order to give valid consent.

Upon intake, the therapist must get the client to sign the informed consent and it should be kept in the client’s file. It is an important legal issue, and in most areas, touching a person without his consent can lead to arrest for assault. Clients must be given enough information to make informed, sound decisions about massage therapy. Such information includes the following:

1. What are the goals of the therapeutic massage session?
2. What services will be provided?
3. What behavior is expected of the client?
4. What are the risks and benefits?
5. What are the therapist’s qualifications?
6. What are the financial considerations?
7. How long is therapy expected to last?
8. What are the parameters of confidentiality?

The information must be honest and straightforward. Some information may be provided in a brochure. Be careful not to overwhelm clients by offering too much information, but give them enough information to make an informed choice.

Before your session, inform them about your treatment protocol. Discuss your sessions, your draping and the modalities you use. Answer any questions honestly and get permission to touch your client before proceeding.

During each session, get feedback from the client about your touch and watch for non-verbal feedback from your client. Treat each person with respect and dignity.

For clients who are seen only once, a modified informed consent may be used. Clients must be told during informed consent that client files may be ordered by the court or requested by other healthcare professionals. For this reason and because of HIPAA, the client must sign a release form. The therapist must keep a record of all requests.

Informed consent protects both the client and the therapist.
Client-Centered Care
Perhaps the best way to prevent ethical pitfalls is to recognize that all care must be client-centered. That means that all relationships in massage therapy must be therapeutic with the client’s needs foremost in mind. Client-centered also means that the client has input into his care and must agree to the course of treatment to proceed.

The client has a right to believe that the therapist will act in his best interest and that the client can feel safe in his care. In this way, boundaries are preserved, roles are clear, and the relationship can be therapeutic. That is the ultimate goal of treatment.

Summary
Ethical principles and standards of practice help to establish a specific framework for massage that benefit both the massage therapist and the client. There are many elements in the profession of massage therapy that enhance the lives of the practitioners, such as respect, prestige, and authority.

In return, professionals must be willing to exhibit professional behavior at all times for the good of the client and the profession as a whole. Ethical guidelines and standards of practice help the individual become a proficient and law-abiding professional where ethics and boundaries are protected and standards of practice are followed. If we practice client-centered care and have a respect for ethics and boundaries, our clients and our profession will benefit.

References