







About Nina McIntosh

Nina McIntosh, the author of The Educated Heart, was a dear friend to me. She passed away in June 2010 from ALS and made arrangements with Lippincott that I am to write the future editions of The Educated Heart. I also inherited her website, which you can visit at www.educatedheart.com

The Educated Heart



The 3rd edition

Nina McIntosh



THE NEED FOR PROFESSIONAL BOUNDARIES

Professionalism: An Educated Way of Being Kind

- Doesn't mean acting stuffy or aloof
- Focusing on client
- Being sensitive to client's vulnerability
- Helping clients feel safe by keeping appropriate boundaries
- Making expectations clear

The Need for Boundaries

Success depends on how we handle professional relationships

- Educate public about massage therapy
- Disassociate massage from sex
- Create a safe setting in which client can relax & heal
- Be sensitive & nonjudgmental about clients' appearance

The Need for Boundaries

Acknowledging Power and Responsibility

- Clients give us power by letting us massage them
- They are often in physical or emotional distress & dependent on us to alleviate it
- Our words & actions carry more weight & authority for them
- This built-in authority brings responsibilities
- We must meet client's vulnerability with respect & kindness

SEVEN COMMON MISCONCEPTIONS ABOUT BOUNDARIES

mis·con·cep·tion

/ˌmɪskənˈsepʃən/ *n*

mis·con·

a view or opinion that is incorrect because it is based on faulty thinking or understanding.

Misconception #1:

“I want to be natural with clients; boundaries create barriers”

- Be careful what we reveal to clients, to keep focus on them
- Sharing about our love lives, religion, or political beliefs can lessen client’s sense of security
- Sharing struggles can cause clients to question our capabilities
- Sympathize with clients about *their* concerns, but don’t ask them to do the same for us

Misconception #2:

“I’ll just use my common sense.”

- Making good judgments doesn’t necessarily come naturally
- We are swayed by our upbringing, biases, ego, & control issues
- Be aware of our own personal histories & biases
- Have clear, thought-out guidelines
- Avoid deciding based on a hodgepodge of conflicting influences

Misconception #3:

“I’ve learned technique, and that’s all I need to know.”

- Humans are a complicated mix of psyche, spirit, body, emotions
- In past, many massage schools have emphasized anatomy & technique, ignoring relationship dynamics
- Now, boundaries, ethics, & relationship dynamics are taught

- We must pay even more attention to boundaries than doctors do
- Clients expect to be able to relax & drop defenses with us
- Training & skills in boundaries are needed to provide this

Misconception #4: “I don’t need to know anything about psychological dynamics; I’m not a psychotherapist.”

- It is not our role to analyze clients’ psychological problems
- But it is our role to create a safe emotional environment
- Understanding the client-practitioner relationship helps us appreciate our clients’ vulnerability & need for safety
- We don’t have to be psychotherapists to be sensitive to our clients’ needs

Misconception #5: “I have needs too.”

- Avoid allowing *personal* needs to interfere with work
- Focus instead on *professional* needs
- Ask clients to treat us as professionals & respect boundaries
- Set limits & standards that both therapist & client will honor

Misconception #6:

“My connection with my clients is through the healing energy in my hands, and that’s what’s important.”

- “Healing energy” & intuition are important aspects of massage
- However, don’t overlook clients’ basic needs
- Remember practical considerations:
 - Keeping massage room at a comfortable temperature
 - Being punctual
 - Remembering client’s name

Misconception #7:

“But I know practitioners who are careless about boundaries and still are successful.”

- Some practitioners may enjoy success while disregarding many professional standards & boundary concerns:
 - Making friends of clients
 - Carelessness about confidentiality
 - Messy treatment rooms
- But don’t rely on forgiving clients
- Paying attention to professional boundaries only improves practice & makes clients happier

**PROTECTIVE CIRCLES:
BOUNDARIES AND THE
PROFESSIONAL
RELATIONSHIP**



Understanding Our Professional Role

Therapeutic Contract

- Agreement between therapist and client
- Therapist performs treatment that he or she has been trained to do & for which the client is paying him or her



The Professional Therapeutic Relationship: What Stays In

Client-Centered Actions & Words

- Actions & words are motivated by what is best for client
- Put aside personal egos, interests, needs, likes, & dislikes
- Clients have a right to ask for what they want
- Therapists should not be dictators
- Therapists should strive to meet client's expressed needs
- If client's request is not in his or her best interests, explain why



The Professional Therapeutic Relationship: What Stays In

Confidentiality

- Don't breach clients' confidentiality by:
 - Gossiping about what they said
 - Complaining about what they did
 - Bragging about how much they liked the massage
- Begins with 1st phone call & continues through entire relationship
- If you talk about your clients to other clients, they will wonder, "What will she say to other people about me?"

The Professional Therapeutic Relationship: What Stays In

Consistency

- Reassures clients & keeps them coming back
- Clients can be rattled by unexpected changes in:
 - Routine
 - Setting
 - Session times
- Fosters trust in clients

The Professional Therapeutic Relationship: What Stays In

Informed Consent & Right of Refusal

- **Informed consent** means:
 - Clients have a right to understand what is involved in work
 - We must have clients' educated, informed consent to work with them
- Communicate the contract with clients verbally & in writing
- Inform client of training, methods used, risks, & benefits
- **Right of refusal:** client may stop session at any time & for any reason

The Professional Therapeutic Relationship: What Stays In

Our Rights as Professionals

- We can expect clients to:
- Show up on time
 - Leave when sessions are over
 - Not be abusive or disrespectful
 - Pay the agreed-upon fee

**The Professional Therapeutic Relationship:
What Stays Out**

Social Needs & Personal Needs

The need for social interaction

- Don't talk too much during session
- Let clients relax & drift into their own world
- Clients annoyed with a therapist's chattiness will likely not return
- Some conversation, if initiated by the client & conducted with sensitivity to his or her needs, is fine

**The Professional Therapeutic Relationship:
What Stays Out**

Social Needs & Personal Needs

The need for friends

- Remember to distinguish between clients & friends
- Clients, unlike friends, won't likely:
 - Put up with our lapses & flaws
 - Listen patiently while we ramble about ourselves
 - Let us know & forgive us when we hurt their feelings
- Keep a clear boundary between social & professional relationships, to avoid damaging the therapeutic relationship

**The Professional Therapeutic Relationship:
What Stays Out**

Social Needs & Personal Needs

The need for romance & excitement

- Be extra careful in maintaining professional boundaries with clients you are attracted to or who have a crush on you
- Dating or flirting with clients is unethical
- Avoiding social interactions with clients is especially difficult in small towns or communities
- Use great care in navigating any dual relationships

**The Professional Therapeutic Relationship:
What Stays Out**

Going Outside Our Scope of Practice or Expertise

The weekend workshop syndrome

- "A little knowledge is a dangerous thing"
- Attending a weekend workshop on a topic does not make us experts on it
- Don't claim expertise in areas that you are not thoroughly trained in
- Provide an honest & accurate picture of your training & expertise to your client

**The Professional Therapeutic Relationship:
What Stays Out**

Going Outside Our Scope of Practice or Expertise

Medical advice

- Somatic practitioners are not medical experts
- Don't give medical advice to clients
- Don't work on clients with serious medical conditions without consulting with their physicians

**The Professional Therapeutic Relationship:
What Stays Out**

Going Outside Our Scope of Practice or Expertise

Psychological counseling

- Obtain only the information from a client needed for treatment
- Don't pry into a client's private life
- Listen patiently when clients volunteer private information, but avoid giving advice
- Counseling requires specific training & education & is not just common sense

Spiritual advice

- Likewise, avoid providing spiritual advice to clients

The Professional Therapeutic Relationship: What Stays Out

Mixing Other Businesses With Our Practice

Mixing business transactions can lead to problems

- Taking on business associates as clients can confuse roles
- Involving clients in other kinds of business transactions can lead to harmful & unethical results

It's unethical to use client relationships to benefit ourselves in ways other than our standard fees

CLIENT-PRACTITIONER DYNAMICS: BOUNDARIES AND THE POWER IMBALANCE

Transference and Countertransference

Overview of Transference

- Process of how clients react to power imbalance
- Intimacy of bodywork may bring up unconscious issues that make clients feel dependent on us
- Old hurts, longings, & conflicts toward past authority figures are unconsciously transferred to practitioner
- Clients may defer & never question judgment
- Client demonstrates adoration toward or crush on practitioner

Transference and Countertransference

Positive Transference

- Client has special affection, adoration, or deference toward us
- Clients feel small & insignificant, see us as large & benevolent

Negative Transference

- Clients mistrust us without good reason, expecting us to hurt or criticize them
- Remember that clients are reacting to past, not present; it's not about us
- Don't respond with annoyance or dismay

Transference and Countertransference

Transference, A Normal Process

- Normal part of everyday life to bring past into present relationships
- Magnified in manual therapy session due to:
 - Intimacy
 - Client's altered state
 - Similarity to parent/child roles
- Not a rational process & can't be avoided
- Practitioners acquire a responsibility to clients, as relationship is unequal

Transference and Countertransference

Countertransference

- Transfer of practitioner's feelings to a client that belong in practitioner's past or that are related to practitioner's issues
- Practitioners, like clients, are in intimate situation & altered state
- Unconscious loss of objectivity & clouding of judgment

Transference and Countertransference

Transference and Countertransference Together

- Client's emotional transference-driven response can elicit emotional countertransference response from practitioner
- Client who feels small & defenseless may react with anger or pickiness
- Therapist, now feeling small & defenseless, may react with irritation & defensiveness
- Both feel threatened, respond by acting critical or menacing

ETHICAL BOUNDARIES: FROM THEORY TO PRACTICE

Ethical Questions

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?

Ethical Questions

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?

Ethical Questions

Avoiding the Appearance of Inappropriateness or Impropriety

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

Respecting Clients' Dignity

- Would the action be disrespectful of the client?

Judgment Calls

Sexual Relationships

The Ethical Standard

- **Current client:** it is unethical to have a sexual relationship
- **Ex-client:** it is unethical to use influence of the client-practitioner relationship to create a sexual relationship
- It is unethical to sexualize relationship with a client by dressing seductively, flirting, or making sexual remarks

Judgment Calls

- Weigh the strength & significance of your attraction
- Know yourself & your limitations
- Consider effect of transference

Judgment Calls

- We owe our clients care & attention
- If we can't imagine ever having a caring attitude toward a client, we shouldn't work with him or her
- Everyone prejudices others & has personal likes & dislikes
- How much will your negative feelings interfere with work?
- Working with those you don't care for can seriously compromise safety of therapeutic environment

Judgment Calls

Taking Financial Advantage of a Client

- It is unethical to use client-practitioner relationship to profit financially beyond our fee for services
- It is not ethical to exploit relationship by influencing client to buy a product or service or make any investment—be especially careful about MLM companies

Judgment Calls

- Is the client really free to refuse, or would they make a purchase mainly to please you?
- Selling goods to client creates a dual relationship
- Consider employer's expectation of you selling products to clients before you take a job

Judgment Calls

Refusing to Work With a Client or Stopping Work With a Client

- Practitioners in private practice have a right of refusal
- If you are employed, employer may not allow you this right

Judgment Calls

- **Reasons you may choose not to work with a client:** poor hygiene, inappropriate sexual behavior, physical mismatch, mental illness, physical conditions, special needs

Judgment Calls

Confidentiality

- Nothing a client says or does & no information about client should be revealed to others without client's permission, unless required by law

Judgment Calls

- Making your confidentiality standards clear at outset makes it easier to maintain them
- Tell clients, "I can't ethically talk about another client"
- When out, don't be the first to approach client, & match his or her level of friendliness, to protect client's privacy

Other Ethical Standards and Implementation

False Claims

The Ethical Standard

- Making false claims or inflated promises is unethical
- It is unethical to obtain clients by making false claims
- It is unethical to create inflated or unjustified expectations

Implementation

- Be honest about your work's limits & side effects
- Never guarantee results
- Speak of benefits you know to be true, but not in absolutes

Other Ethical Standards and Implementation

Scope of Practice

The Ethical Standard

- Exceeding scope of practice is unethical & often dangerous
- It is unethical to claim training or expertise we don't have
- We have an obligation to refer clients to & consult with other professionals (with client's permission) when needed

Implementation

- A weekend workshop does not make one an expert
- Respect time & training required to become a psychotherapist, cranial osteopath, medical doctor, etc.
- Respect value of your own skills as a bodyworker

Other Ethical Standards and Implementation

Informed Consent

The Ethical Standard

- We need clients' informed consent for: basic manual therapy; work near genitals, anus, or breasts; work in areas known to be sensitive or triggering for a particular client; work that is different from what is contracted for or expected by client

Implementation

- Inform client of benefits, risks, contraindications, & any plans to work in sensitive areas before beginning work
- Have new clients sign informed consent form

Other Ethical Standards and Implementation

Disrespect of Other Professionals

The Ethical Standard

- It is unethical to imply that our skill level or method is superior to another practitioner's or another kind of bodywork

Implementation

- Avoid careless talk, gossip, personal remarks, & assessments about skills of another practitioner
- Avoid maligning other kinds of manual therapies or alternative health practices or being disrespectful of medical profession
- Stay objective if a client speaks negatively about another practitioner, remaining silent or remarking that you cannot comment about another practitioner's work

Staying Out of Trouble

Lawsuits and Ethics Complaints

- Ethics are not determined by impersonal rules but are grounded in relationship with clients
- Violating a rule of ethics is crossing a boundary of therapeutic relationship
- Many lawsuits & ethics complaints are about whether practitioner appears to care about client, not technical skills or competence
- Respond in a professional, caring manner to clients' complaints
- Be accessible & open to clients; answer their phone calls & hear their grievances

The Power of Our Words

Talking With Clients During Sessions

- Keep instructions simple
- Say the obvious
- Use images that convey the possibility of change
- Say something positive about clients
- Be creative with images
- Use only gentle humor
- Do not flirt

The Power of Our Words

Talking With Clients During Sessions

- Take extra care what you say when working around a client's head or face
- Be sympathetic in your tone
- Keep the focus on the client
- Suggest and persuade rather than ordering

Dealing With Common Dilemmas

Talkative Clients

- Is the talking good for the client?
- Some clients unwind & relax by talking
- If talking makes client more tense, gently mention this
- Tell client to feel free, but not obligated, to talk
- Let clients talk as much as they want, as long as it benefits them
- Don't feel obligated to respond in depth to client's comments
- Just say enough to show you are listening

Dealing With Common Dilemmas

When Clients Are Emotional

- Bodywork can bring up held-in feelings
- Crying can be a helpful release
- Simply acknowledge the emotion, offer a tissue, & suggest taking a short break
- No need to “do” anything else
- Your presence & sympathetic ear are comfort enough
- Avoid acting like the sage on the stage and giving advice you are not qualified to give

Dealing With Common Dilemmas

Clients Asking Personal Questions

- Consider carefully how you respond
- Avoid giving more information than client needs or than you want to reveal about yourself
- If you don't know why a client is asking a question & are uncomfortable answering, say, “I'm curious why you're asking.”
- Turn focus back on client in a friendly way
- If client is just trying to make polite conversation, clarify that he or she can just relax & focus on his or her own concerns

Dealing With Common Dilemmas

Clients Asking Questions Outside Your Scope of Practice

- Be willing to say, “I don't know” or “Sorry, but I don't have training in that area.”
- Don't pretend to know more than you do.
- Showing that you honor your limits helps them trust you
- Acknowledging your own limits is freeing to you, too

Dealing With Common Dilemmas

Clients Who Are Demanding

- Don't take their behavior personally
- Avoid negative countertransference
- Keep in mind clients may be acting out of fear from past trauma
- Responding with impatience or difficulty might only reinforce their fears
- Acknowledge client's dissatisfaction
- Let them know you are doing your best & ask what else you can do to help them

Setting Limits

Setting Limits Gracefully

- Be clear about expectations in advance
- Be careful about your tone
- Speak in terms of your general policy rather than personalizing the limit
- Practice what you would say in various situations

Protecting Ourselves From Ethics Complaints or Legal Charges

No One Is Immune

- Any practitioner—male or female, gay or straight—can be complained against by any client
- Even goodhearted, conscientious practitioners can have clients misread their intentions
- However, if you consistently attend to framework & boundaries, you'll be less likely to have trouble

Some Are at Greater Risk

- Most complaints are by female clients against male practitioners
- In some regions, minority men & homosexuals may be at greater risk

**FINANCIAL
BOUNDARIES:
GETTING
COMFORTABLE WITH
MONEY**

**From Caring One to Cashier: Money
Awkwardness**

Discomfort With Money for Services

- Some practitioners feel guilty about setting fees
- Focus for many is caring for & helping people, not money
- However, nothing is wrong with being paid adequately for work

**From Caring One to Cashier: Money
Awkwardness**

Money as Part of the Healing Process

- Fees clarify clients' obligations to us & ours to them
- Clients will value your work & benefit from it more if it costs them something that is valuable to them
- Money is usually best compensation
- Money is clean, precise, & simple

Common Financial Dilemmas

Missed Appointments

- Standard practice is to charge full or partial fee for broken appointment without adequate notice or no-show
- A missed appointment is time & money lost
- Clients who disrespect your time once will likely do it again
- Set your policy when first appointment is made
- Put policy in writing & have client sign it
- Have unreliable clients call to confirm appointment ahead of time
- Explore credit card payments

Common Financial Dilemmas

Gratuities and Gifts

Gratuities

- Some think professionals should not accept tips
- Those who work in a spa/salon for lower wages may need tips
- Spa/salon owner can post sign, "Gratuities are appreciated"

Gifts

- More personal than tips
- Evaluate on case-by-case basis whether to accept
- Consider size & value of gift & client's intention
- Focus on effect on therapeutic relationship

Common Financial Dilemmas

Rewards for Referrals

- Kickbacks for referring clients are unprofessional & unethical, and if it's another healthcare practitioner, ILLEGAL!
- Reward can influence judgment of one who refers
- Be courteous & thank person for referrals but don't offer gift or payment
- A professional should not be in position of seeming overly grateful for referral



www.LauraAllenMT.com
www.educatedheart.com


