

# Chapter 7

## SEXUAL BOUNDARIES: PROTECTING OUR CLIENTS

Many of us are led to this work for high-minded reasons. For many, there's a wish to bring greater ease into the lives of others. Some even see this work as a sacred calling, a way to heal the soul and enliven the spirit. But despite the good intentions we bring to our sessions, because we're working closely with the physical body, we can't avoid the murkiness and confusion of sexual issues.

Sometimes clients are sexually attracted to their practitioners. Sometimes practitioners, like any other professional, are attracted to their clients. The intimacy of our work can be confusing to both client and practitioner. We are touching people, often with a tenderness and gentle attentiveness that is almost like a lover's. When the professional boundaries are clear, it can be wonderfully healing for the client. When they aren't, it can be harmful or even disastrous.

The honest pleasure of sensuality is part of the profession, but the dark possibilities of seduction and exploitation are lurking in the background. Whether we are in private practice or work for someone else, how do we keep our sessions safe for our clients and avoid even subtle boundary violations and misunderstandings about sexual boundaries?

To begin with, we need to be able to talk honestly with others about these issues. When there isn't enough dialogue, we don't learn from one another. When I started doing research for this book, I was surprised at how complex and painful the stories were from both clients and practitioners. I heard of well-meaning and presumably well-trained practitioners who had stumbled into tangled, destructive situations that might have been avoided had they known the warning signs and acted on them.

- A male massage therapist ends sessions by kissing female clients on the forehead, a seemingly small gesture that could nevertheless be seen as offensive and invasive.
- A female practitioner works close to a client's genitals and is accused of sexual harassment.
- A bodyworker who became sexually involved with a client only later sees how harmful the relationship was to the client.

The emotions in these situations run deep for both client and practitioner. Even if falsely accused of violating a client, a practitioner's distress

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can be long lasting. And because of the power difference between client and practitioner, the effect on the client when sexual boundaries are crossed, whether intentional or not, can be deeply damaging.

## Transference, Countertransference, and Sexual Boundaries

It is in the arena of sexual violations, the most potentially destructive of violations, that we see the powerful protection that professional boundaries can provide. Here's where being sensitive to boundaries and to the effects of transference and countertransference really pays off, steering us clear of harmful mistakes.

The situations described in this chapter present examples of how transference and countertransference can cloud our own judgment and that of our clients.

### *Positive Transference: Crushes*

Sometimes a practitioner is bewildered or even put off when a client develops a strong crush on him or her. In Chapter 4, practitioners are warned not to take crushes personally, not to assume that a crush means that the client wants to have a romantic relationship. It's so common for a client to have a crush, and so easily misinterpreted, that it's worthwhile to explore crushes further: how do they happen and how should we handle them?

It's not unusual for people to develop crushes on any professional who works closely with them, especially when the practitioner is kind to them when they feel vulnerable. For example, clients often become attached to their divorce lawyers, and patients often idolize compassionate physicians.

We have to keep in mind the special intimacy of a bodywork session. Clients bring all kinds of tender longings, old hurts, and broken hearts to their sessions. And there we are—the picture of kindness, warmth, and selfless giving. We can seem to be the perfect parent, friend, or confidante they have always wanted. It's easy for clients to "fall in love" with us.

Even though there may be a hint of sexual interest, crushes are usually not the same as grown-up feelings of sexual attraction. These crushes are more similar to the kinds of feelings a third grader has for her favorite teacher or the adoration a young boy might have for the star high-school athlete.

Here are some suggestions for dealing with crushes so that both client and practitioner are protected.

#### **DON'T TAKE IT PERSONALLY**

There's no need to be either dismayed or flattered when a client has an innocent crush on you. You don't want to let your awareness of a client's feelings diminish your warmth and friendliness.



Innocent crushes need to be treated as a sign of the client's trust. The client has judged you to be safe, and you shouldn't make any more of it than that. It can be flattering to have someone wide eyed over you, hanging on your every word and laughing at your jokes. But you can't let it go to your head. You have to remember that clients have special feelings about you because of the role that you take on, not because of who you are in everyday life. Do your best to remain centered and respectful with clients who have crushes on you.

If a client's attachment to you is upsetting to you, recognize that the problem lies with your discomfort, not the client's feelings (assuming that the client isn't overstepping boundaries). Talk with a trusted teacher or even a mental health counselor to help turn the experience into a healthy learning one for both you and your client.

#### DON'T EMBARRASS THE CLIENT

A colleague reports:

When I had just graduated from massage therapy school, I was concerned when one of my clients seemed to have a crush on me. I could tell she just adored me. It was kind of flattering, but even though she didn't make any suggestions and I knew that she was happily married, it made me uncomfortable. I wasn't sure whether I should talk to her about it or not, so I talked to my consultant who helps me with problems related to

client dynamics. He said not to say anything to her and just to keep focusing on giving her a good massage. That was good advice. Gradually, the crush seemed to dissipate, and we had a solid and warm professional relationship. She was a client for many years.

As you can see, there was no need for the practitioner to talk with the client about her crush. If he'd mentioned it, she might have felt embarrassed or patronized, which wouldn't have been helpful in resolving her feelings for the practitioner.

### PROTECT YOURSELF FROM INAPPROPRIATE CLIENTS

There are times when you do need to protect yourself. Don't assume a crush is innocent if a client touches you inappropriately, makes a pass at you, or asks you for a date. You need to set firm limits with such clients. First, make it clear that such behavior isn't appropriate and that you don't date clients. Then if you feel comfortable continuing the session or continuing to work with this client, you may do so. However, if the client seems disrespectful, you just don't trust them, or you feel uneasy, you can tell them the session is over and that they're not welcome as a client again.

### TAKE CARE WITH BOUNDARIES

Clients who have crushes sometimes invite their practitioners to socialize with them. What they often want is not the usual give-and-take of a social relationship but a continuation of the therapeutic relationship in which the focus is on them. It's not a good idea to see any clients outside the office setting—this is particularly true of clients with crushes. If you're tempted to do so, be honest with yourself. Are you enjoying the crush? Are you hoping to flirt or take it further? If a client with a crush on you asked you to a party and you showed up, couldn't that give the message that you're interested in the client? You have to respect the vulnerability of your clients by keeping the relationship within professional boundaries.

### *Positive Countertransference: "Special" Clients*

Feeling that one client is exceptional and different from your other clients, wanting to rush into dating that client, and thinking that others wouldn't understand the "special" feelings the two of you have—all these are warning signs. Intense feelings about clients are generally indications of countertransference. When there is that adolescent sense that the intensity of the attraction or the specialness of the relationship between the two of you justifies breaking the rules, it is a red flag.

Of course, all your clients are special and need to be appreciated for their uniqueness. But being overwhelmed with attraction to a client or intensely identifying with a client is different from having compassion for or even loving your clients. A sense of specialness about a client is a problem when it leads you to treat that client differently from others, when you feel that the client is so special that you don't have to adhere to the usual boundaries when working with him or her. In the therapeutic relationship, this can be traumatizing for both parties, as in the following story told by a colleague:

A woman related that during the course of seeing a female bodyworker for many months, she developed an intense transference—she was deeply infatuated with her practitioner. She also felt that the practitioner was very drawn to her and that the practitioner had lost her objectivity. The relationship developed into an inappropriate situation in which, under the guise of therapy, the therapist had touched the client's breasts and genitals during several sessions. The client ended up feeling emotionally and physically seduced and damaged. Her confused feelings of shame and guilt were so powerful that she didn't discuss this relationship with anyone, until several years later, when she was able to talk with a counselor about it.

No matter how seductive the client or how equal you feel the relationship is, practitioners are responsible for keeping good professional boundaries. It's important to remember that your relationships with clients are never equal and that you can damage your clients if you act on inappropriate feelings. When clients are "in love" with you or have crushes on you, those feelings can be part of a positive therapeutic experience if boundaries are kept. If you are tempted to take the relationship further, get a consultation from a mental health professional to help you sort out your feelings.

### *Dating an Ex-Client*

Given the dynamics of transference and countertransference, you can see the problems with dating an ex-client. Is it ever ethical or safe for the client? The answer is, it depends. It depends on the professional relationship, the intensity of the transference, how emotionally stable the client is, how emotionally stable the practitioner is, and how much time has elapsed since the therapeutic work. The most important question is whether the transference and countertransference issues are resolved, and that's a complex issue to gauge.

The rules of many manual therapy associations say that it may be okay to date a client if you wait several months after ending the professional relationship, usually 6 months to 1 year. Other professional associations don't approve of such dating no matter how much time has gone by. Practitioners

need to check with the licensing laws in their states and the ethical guidelines of their professional organizations. Of course, if you work for someone else, you need to know your employer's rules about dating ex-clients.

The reason for delaying social interaction after concluding the professional relationship is to make sure that neither the client nor the practitioner is still caught up in the rosy glow of transference and countertransference. There needs to be time for reality to set in.

Regardless of what the ethical rules allow, however, there may be clients that you could never ethically date. There are some circumstances that would make the transference so strong that a sexual relationship would never be appropriate with the client. For instance, if a client has been helped out of great physical or emotional pain by a practitioner, he or she might always see that practitioner as a larger-than-life hero. A practitioner who is able to provide relief from pain when all other methods have failed may always seem like a savior to that client. Also, any circumstances that would make a client look up to a practitioner may help create a relationship in which there can never be equal power—for instance, if a bodyworker is a teacher or is well known in the community.

However, in some circumstances, dating an ex-client might not bring problems. For example, if a bodyworker in a health spa saw a client once for a light rubdown, it is more likely that a strong transference did not develop. Even then, the bodyworker would have to consider how dating an ex-client would affect their reputation and the reputation of the profession.

**emotionally oriented bodywork** (also called psychologically oriented bodywork): Manual therapy that is based on the idea that physical tension and restriction are related to unconscious patterns of holding that the client has adopted, often early in life, to cope with his or her emotional environment. The practitioner facilitates the client in releasing these holdings for the greater emotional and physical well-being of the client.

A former client with a crush on his bodyworker asked her for a date. Because she was able to honestly say that she never dates ex-clients, he was able to save face and continue feeling positive about their work together. Suppose the bodyworker had refused him and he knew of other ex-clients she had dated? Suppose she had accepted and had developed a relationship with him, and it had ended in quarrels? Aside from the personal pain on both sides, unhappy ex-clients are not good for public relations.

You also have to consider that if present clients heard that you were dating an ex-client, it might interfere with their therapeutic relationship with you.

Practitioners of **emotionally oriented bodywork** that often evokes deep transference should give serious consideration before beginning to date an ex-client. The possibility for taking advantage of a former client's transference is strong.

In any circumstances, you must take into account the emotional stability of the client. For instance, does the client have solid self-esteem, or are they prone to depression, easily influenced, in crisis, or facing any other

situation that would make them emotionally fragile? Some clients may not be able to see themselves as equals with their practitioner.

Whether to date an ex-client isn't a decision to make lightly. Even if you are certain that you're not taking advantage of a client, just by dating an ex-client, you're opening yourself to scrutiny by your colleagues and risking damage to your reputation and that of the profession.

## *Dual Relationships*

Dual relationships can cause problems with sexual boundaries; in such relationships, the boundaries are already blurred. Working with people you know in some other way, doing trades, or working with people who share a community with you may sometimes lead to confusion about sexual boundaries. You would think that the more someone knows you, the less likely it is that they would misread your intentions. However, the opposite is often true.

Here's how the dynamic of transference affected a trade between two colleagues:

Sally, a massage therapist who had been sexually abused by her father, agreed to do a trade with Jim for sessions in his form of psychologically oriented bodywork. As the trade went on, transference factors caused her to unconsciously see Jim as a father figure. At the same time, the bodywork was bringing up memories and feelings about her abuse.

To fulfill her side of the trade, she gave Jim a massage every other week. On a deep level, it was confusing to Sally. It was too hard to relate to Jim as both her therapist and a client whose naked body she was touching. For instance, she began to wonder if Jim was sexually interested in her, even though he seemed happily married. Although she discussed her concerns with Jim and believed him when he said he wasn't attracted to her, she realized she was too uncomfortable with the trade and ended it.

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Trades can make it difficult to maintain clear and clean boundaries. Although they can work out well, it usually takes extra effort to make sure they do. Practitioners doing emotionally oriented work or deep structural work should probably avoid trades for bodywork, especially those that are ongoing. The confusion brought about by transference and countertransference makes such trades potentially problematic.

The same confusion can occur if you are working with someone who is part of a "family" group that you're in—for instance, you're both serious students of the same yoga teacher, you're in the same Buddhist community, or you're members of the same church. When you're working with such a person,

you need to be alert to the negative transference about “family” that can get projected onto you because of your mutual association with that group; not everyone has good memories of family. Even though whatever group you both belong to may be spiritual and well intentioned, your client may have buried in their unconscious the idea that “family” means abuse and may associate you with that negative picture.

### *Secrets*

You are headed for trouble any time you are doing something with a client or even having a feeling about a client that you want to keep secret or that you would not share with your colleagues. When you feel that desire for secrecy, the best thing to do is get it out in the open. As hard as it may seem, share your secret with a teacher or consultant. It could be that there is no reason for you to feel uncomfortable. Or it could be that you need help with the client before the situation turns into an even more difficult problem.

## *Clients Who Have Been Sexually Abused*

As we have seen, transference can lead clients to unconsciously associate us with past authority figures. This transference can be especially charged if a client was sexually abused as a child.

When children are sexually abused, the abuser is often a member of the family—perhaps a father, a mother, or an older relative. Abused children can rightfully feel betrayed: someone who was supposed to be protecting them and taking care of them has taken advantage of them. Sometimes those feelings of betrayal and mistrust linger, usually on an unconscious level, even after the individual becomes an adult. Although it is not true of every individual who was sexually abused, some clients who were abused as children will transfer those feelings of mistrust onto anyone who is a caregiver or an authority figure, which can include massage and bodywork practitioners.

Because of these associations, some clients come to sessions with an underlying (and usually unconscious) distrust of the practitioner and perhaps with the expectation that the practitioner will, at the least, not take good care of them and, at the most, exploit them.

Other kinds of behavior may be seen in clients who have been sexually abused. They may be hyper-alert to signs of danger or seduction and, therefore, more likely to misread a careless word or gesture. They may have a distorted sense of what appropriate boundaries are: they may be blind to a truly dangerous situation when a therapist is being inappropriate or may even test the practitioner by being seductive themselves.

Interactions with sexually abused clients can be complicated if the practitioner has also experienced such abuse. Practitioners who have a history of

being abused can have the same kinds of distorted perceptions that clients do. They can assume that a client has sexual intentions when he does not, or they can fail to respond adequately when a client actually is being offensive. Practitioners who have been sexually abused may also be unable to see their own seductiveness or inappropriateness with a client. Crossing boundaries may unconsciously feel comfortable and familiar to them.

Here are a couple of examples of what can happen:

Before the session begins, a female massage therapist announces to a new male client who has not shown any signs of acting inappropriately that she has a stun gun that she will use if he gets out of line.

A male bodyworker flirts with all his female clients and often accepts social invitations from them.

In the first example, the practitioner is being overly self-protective; in the second, the practitioner cannot see the violations he is committing. (Of course, practitioners can overreact or commit violations without having a history of being abused.)

Because of the potential for confusion and missteps, the safest way to avoid making serious errors with clients is to stick to accepted boundaries and provide a stable framework. We may never know what history a client brings to the table, and it is not our place to ask clients whether they have been sexually abused. However, we are safer if we treat *all* clients with the care that we would use if we knew that they were in need of special sensitivity.

### *Working with Clients Who Have Been Sexually Abused*

Statistics on sexual abuse vary. Some say that at least one in three women and one in twelve men have been sexually abused. Because so many people have experienced sexual abuse that you probably cannot avoid working with someone who has, it is a good idea to be educated about how to work with such clients. Also, if you are in private practice and you have a client who is actively dealing with issues of sexual abuse in psychotherapy, you need to contact the client's psychotherapist (with the client's written permission) to make sure that the work you are doing is helpful to the client. Consulting with that psychotherapist or another mental health professional also is very helpful.

Not every client who has been sexually abused is in need of counseling. However, if you have reason to believe that a client needs to see a

psychotherapist—for instance, a regular client seems depressed or self-destructive—you can suggest counseling. While you may provide your regular massage therapy services to such a client, never attempt to delve into a client's sexual abuse issues on your own. Such work takes experience and training. For your own safety—for instance, to avoid being falsely accused of sexual harassment by an overly vigilant client—it's a good idea to seek outside help with the psychological dynamics of the relationship.

All manual therapists need to educate themselves by reading relevant literature and attending workshops on working with clients who have been sexually abused. On rare occasions, such clients have flashbacks during the session: they experience the memory of the abuse as if it is happening in the moment. Education can prepare you to deal with such situations and can help you feel more confident with other signs of sexual abuse.

Most of the effects of sexual abuse that you will encounter are not dramatic. The signs of abuse that you will see most often are usually less obvious. As noted previously, such clients may be more wary and slow to trust. They may seem controlling or demanding. They may have a more difficult time letting go and relaxing. Or they may be seductive. (Of course, not every client who is wary, controlling, tense, or seductive has been abused.)

There are simple ways that you can help sensitive clients feel safer. Of course, these precautions are valuable in working with any client.

#### **DON'T PUSH CLIENTS**

If clients seem numb in a particular area, don't push them to feel it. Work somewhere else. If a client shares a memory of abuse but doesn't have a complete picture, don't push him or her to remember it. Remembering an incident of abuse isn't necessary to healing, and it can often be re-traumatizing for the client. Leave the treatment of sexual abuse issues to those who have extensive training and experience.

#### **STAY SYMPATHETIC BUT OBJECTIVE**

If a client tells you about an experience of being sexually abused, be a sympathetic listener but be careful about sharing your opinion or experience. For instance, talking about what a bad person the perpetrator was is not a good idea. If the perpetrator was also someone the client felt close to, he or she may have mixed and confusing feelings about the person, including loyalty or affection.

#### **MAKE SURE CLIENTS HAVE A VOICE**

Because of transference and feelings of dependency, clients often don't speak up when you're making them uncomfortable. This is especially true when the discomfort is around a sexual issue. Even if the client is an acquaintance

or a colleague and even if the person is usually assertive in the outside world, once in the role of client, she or he can have a hard time saying no.

A successful businesswoman receiving a massage in a spa thought that the practitioner was working too close to her genitals. She didn't think the massage therapist, an older woman, was making sexual advances, but she was still uncomfortable. In the business world, the businesswoman had a diplomatic but straightforward style of dealing with people and gave critical feedback easily. In the role of client, however, she said nothing but never went back to that therapist.

It can help clients voice their feelings if you demonstrate in many ways your interest in hearing how they feel and what they have to say. Bill Scholl, a Trager instructor, says he makes sure to ask clients to let him know if anything he does makes them uncomfortable. He does this even with clients he has worked with many times before. Let clients know that they can always ask you to stop, even if they do not have a reason that seems rational and even if they feel that they are being rude by doing so. Avoid the appearance of dominating a client.

## *Other Cautions and Red Flags*

There are a number of other areas where it makes sense to be cautious and to think of the potential for misinterpretation by a vulnerable client.

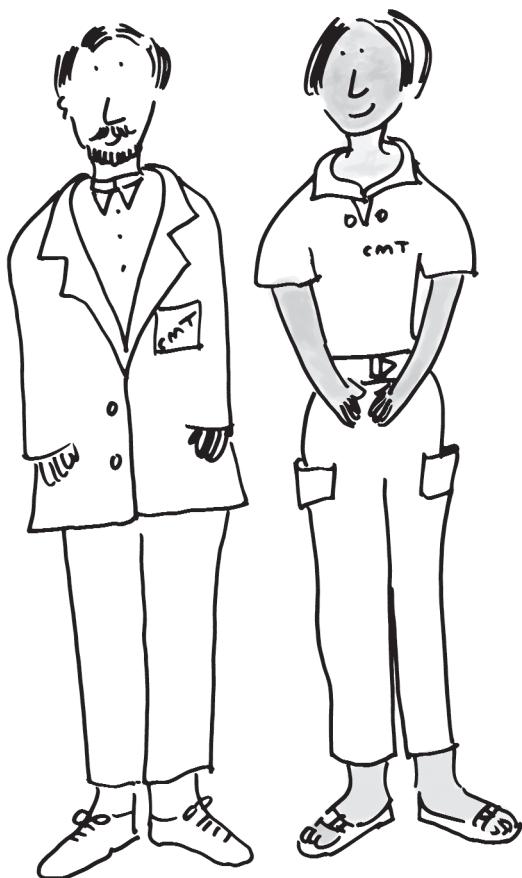
### *Professional Appearance*

Short shorts, tank tops, and cleavage are for off-hours. Don't dress as if you're going out on a date or to the beach. You can be comfortable and still look like a reliable professional. Basically, you want to wear clean, neat, loose clothes that don't draw attention to your body.

In many parts of the country, visible tattoos and unusual facial rings, such as nose or eyebrow rings, raise other people's eyebrows and make you work harder to convince them that you are safe and professional. Let your work show people how special you are—not your jewelry or body art.

### *Language*

You need to be careful that your language isn't even remotely suggestive or flirtatious. For instance, it's best not to tell clients, "Take off your clothes." That sounds like an order, and it is too close to words that would be used in a sexual encounter. Instead, say something such as, "I'll leave the room so that you can get ready for the session."



*The well-dressed practitioner.*

Choose your words carefully when you say anything about a client's body. Even saying, "Why do you criticize your body? You look great!" can sound overly personal or suggestive. You might sometimes want to compliment a client who seems to have a negative body image. When clients make unflattering comments about their bodies, you can say something general such as, "Gosh, women (or just people) are so hard on themselves about how they look." To be sure you avoid being heard as expressing sexual attraction, however, you're better off avoiding all comments about how you think the client's body looks aesthetically. Besides having the potential to be seen as a come-on, making such a remark puts you in the position of being an expert on how bodies should look, which, of course, you're not.

## *Draping*

Draping is always a good idea. In most massage licensing, it is the law. For deep work or emotional work, having the client wear underpants or briefs in addition to draping is often a good idea. When in doubt, go for more cover rather than for less. It's respectful to the client's privacy and a way to protect yourself from misunderstandings.

## *Disrobing*

Clients need to dress and undress in private, and they need to know that they do not have to undress at all if it makes them uncomfortable. Let them know that they can wear a bathing suit or whatever else is suitable—for instance, athletic shorts and a comfortable bra or tank top. If necessary, you can explain how it will limit your ability to work with them if they choose to leave clothes on, but always make sure they know it is their decision.

## *Locked Doors*

The question of whether or not the door was locked has been a crucial point in some court cases in which a practitioner was sued for sexual harassment. Even if a client isn't locked in or could unlock the door, the point has been raised that the client should be able to leave the room quickly and easily. In many situations, a practitioner may want to lock the door to protect the client from unwanted intrusion, such as a stranger wandering into an office by mistake. A cautious way to handle that type of situation is to explain your reasons for wanting to lock the door and give clients the option of it being locked or unlocked.

## *Intrusive Work*

Some manual therapies can involve intrusive work. If you have good reason to work in an area near a client's genitals, near the coccyx, or near a woman's breasts, you can tell the client in a matter-of-fact way what you are about to do and why. Use terms they can understand—breastbone or tailbone, for instance, instead of sternum or coccyx. Or if you use anatomical terms, make sure they understand where you will be working. "It might be a good idea to work on the muscles around your tailbone because it could be useful to free them up. However, if that makes you uncomfortable, it's fine to skip that area." Let clients decide if it's all right. Watch to see if it really is okay or whether they tense up or seem to be trying to act as if it's fine when it really isn't. The safest plan is to let clients know before the session begins that the session might involve intrusive work and get their consent before they are in the

more vulnerable state of being on the table. In some parts of Canada, practitioners are required to get prior consent in writing for such work.

Cautious behavior protects both you and your clients. In the altered state that clients enter into, they can get confused about both your intentions and where your hands actually are. Bring those things into their conscious awareness by giving clients specifics.

You may not know what areas are sensitive for a particular client. Heida Brenneke, founder of the Cortiva Institute, Brenneke School of Massage in Seattle, makes this point: "Massage therapists think too narrowly about where a memory of sexual abuse may be in the body—if, for instance, someone was pinned down by her shoulders during abuse, working in that area could bring up the memory." Any of your work has the potential to trigger a memory of sexual abuse. Therefore, you always want to keep an eye out for signs of discomfort from the client, such as their becoming more tense or reporting numbness.

### *Expressions of Affection*

Although it may come from genuine caring, initiating hugs with clients isn't a good idea. Mandatory hugs can be very intrusive for clients. The same is true, only more so, for kissing on the forehead or cheek. We may think that clients would welcome any expressions of affection. "But love heals—why not hugs?" goes the argument that Lucy Liben, Dean for Massage Therapy at the Swedish Institute in New York, hears from some students. Actually, understanding is what heals. And that may involve your understanding that, for some clients, being in charge of their own personal space is healing. As the client is leaving the session, you can show through your body language that you are available for a hug if the client wants to initiate one (assuming that you are) without forcing the issue. Giving clients the choice is another way to respect their boundaries.

### *Unintentional Touching*

When asked about uncomfortable experiences, clients often cite situations in which some part of a practitioner's body other than hands touched them or the practitioner leaned against them. This is usually accidental on the part of the practitioner, but it can be disturbing to the client. One woman reports:

In the middle of a massage from a male practitioner, he leaned against my hip with his belly to reach the other side of me, instead of walking around the table. I was so uncomfortable that I had a difficult time relaxing for the rest of the session, wondering whether there would be another incident.

Not every client will react strongly to unintentional or careless touching. However, some will. You do not want to prop yourself against clients as if they were furniture. Of course, if your technique requires you to touch clients with other parts of your body or to lean against them, the reasons for this intrusiveness should be explained to clients, and their consent must be given.

You also want to be careful about wearing sleeves that dangle and things that could brush against clients. In the open and receptive state induced by bodywork, clients shouldn't have to figure out what is touching them.

## The Power of Touch

We cannot ignore sexual issues when learning to work with our clients. Because the sensuality of healing touch that we offer is often so close to the sensuality of sex, we need to be all the more careful to maintain clear sexual boundaries with clients. The manual therapies are intimate and can bring up issues about sexuality, both for us and for our clients.

This work can be a blessing for people who are starved for safe and respectful touch. However, we're always skating the edge between the sacred and the profane. It speaks to the goodwill and compassion of practitioners that we so often succeed in keeping the balance on the side of the sacred.



## QUESTIONS FOR REFLECTION

- 1 Has a manual therapy practitioner or other health-care provider ever said or done something that felt like a violation of your sexual boundaries or that made you uncomfortable? Did you say something to the practitioner, either at the time or later? Did you tell anyone? If this has not happened to you, have you heard of such an incident happening to a friend or colleague? What feelings did that person have about the incident?
- 2 Have you ever looked up to or had a crush on a practitioner of any kind who worked closely with you? Do you feel that it would have been appropriate if the practitioner had entered into a romantic relationship with you? Why or why not?
- 3 Is there anything in your history that might help you be more sensitive to issues of sexual boundaries with clients? Is there anything that might get in the way of your being comfortable with setting clear sexual boundaries with clients?

- 4 Imagine that you're single and run into an ex-client (also single) at a party. There seems to be a mutual attraction that you weren't aware of while you were working with the client. You are thinking of asking this person for a date. As a professional, what concerns would you have in evaluating whether it would be ethical or wise to do so?
- 5 Have you ever had a professional massage in which the draping wasn't adequate? Were you uncomfortable because of it? If you weren't, could you imagine circumstances in which you would be?