Presented by

THE MASSAGE ETHICS COUNCIL
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The Prevention of Sexual Misconduct and Assault in Massage Therapy

2026 EDITION

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The Massage Ethics Council

In the summer of 2023, The Massage Ethics Council was founded to offer guidance in establishing clear, ethical standards of care for the massage industry. The Council members are Laura Allen, Ben Benjamin, Beverley Giroud, Nathan Nordstrom, and Cherie Sohnen-Moe. Together, they have more than 150 years of combined experience in teaching, writing, and consulting on ethical issues in the massage field.

Laura Allen

Laura Allen has been an ethics instructor since 2000, continuously teaching in person and online. She is the co-author of the last three editions of Nina McIntosh's The Educated Heart, the author of numerous other books, the regular ethics columnist for Massage & Bodywork Magazine, and a massage therapist since 1999. Laura consults with individuals on ethical/business issues.

Ben E. Benjamin

Dr. Ben E. Benjamin founded the massage school, The Muscular Therapy Institute, where he instituted a curriculum of over 100 hours on ethics, sexuality, and communication. He co-authored The Ethics of Touch, a primary ethics textbook for massage schools across the U.S. and Canada. He authored the first ethics articles in the Massage Therapy Journal and has gone on to author hundreds more in magazines like ABMP's Massage & Bodywork Magazine. Dr. Benjamin has also been an expert witness in cases of sexual assault in a massage/spa setting since 2004.

In addition, he conducts risk management assessments for massage spa organizations focused on sexual assault prevention. After the assessment report, he works with these spa organizations to help them implement the recommended policies and procedures, including training their staff to rigorously screen prospective hires, to teach a robust ethics curriculum, and to incorporate an effective secret shopper program. His entire body of work has a common theme of elevating the massage profession and reducing as much sexual misconduct as possible.

Beverley Giroud

Beverley Giroud has been an ethics instructor since 2000, is the author of Ethics and Professionalism for Massage Therapists and Bodyworkers, and has been a massage therapist since 1998. She served as a COMTA Commissioner for 12 years, Board Member of the Alliance for Massage Therapy Education (AFMTE), as well as on the NCBTMB exam development committee. She has been an educator and school administrator for more than 20 years.

Nathan Nordstrom

Nathan Nordstrom has been an ethics instructor since 2003 and has been a massage therapist since 2001. Nathan is a former member of the Board of Directors for the National Certification Board of Therapeutic Massage and Bodyworkers (NCBTMB), the American Massage Therapy Association (AMTA), and the Massage Therapy Foundation (MTF). He is a current Board member of the Alliance for Massage Therapy Education (AFMTE). Nathan currently serves as Director of Recruiting for the National Association of Spa Franchising (NASF). He also served as Program Director at Virginia College in Savannah, Georgia, for 3 years.

Cherie Sohnen-Moe

Cherie Sohnen-Moe has been an ethics instructor since 1985 and is the co-author of The Ethics of Touch and the author of Business Mastery, as well as multiple articles on ethics. She practiced massage therapy for ten years, then served on the faculty of several body-oriented schools. Cherie consults with individuals and massage and bodywork organizations regarding ethical issues. She was also a founding member of the Alliance for Massage Therapy Education (AFMTE), served on its Board, and served as President for two years.

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Guidelines

These guidelines for the prevention of sexual misconduct and assault in massage therapy provide a roadmap for franchisors, franchisees, day spas, and massage clinics to maximize the safety of both clients and therapists and minimize the risk of sexual misconduct and assault. Additionally, if you are a massage therapist looking for a job in a massage clinic or spa, these guidelines will give you the knowledge to help you decide which type of business to work with. Also included is a section on how therapists can protect themselves in a spa setting or private practice.

Standards of care in the massage therapy profession and in health care in general evolve over time. Comprehensive, robust models are followed by the most ethical, professionally led massage clinics and spas, both large and small. While adhering to standards of care may not entirely eliminate the risk of sexual misconduct, it puts in place safeguards that significantly reduce the likelihood of sexual assault or inappropriate behavior. It provides the business with the tools to identify and weed out many therapists with poor boundaries and predatory tendencies. These safeguards include a rigorous screening and hiring process, a thorough orientation and training for new therapists on the business's culture and values, ongoing supervision to identify problems before they escalate, and soliciting honest feedback from clients through regular email surveys.

To be effective, most of the policies and actions outlined in these guidelines must be implemented authentically, with honesty and sincerity. They should not simply be incorporated as lip service to prevent lawsuits but consciously implemented to protect the clients you serve and the therapists you have hired. Policies and procedures might look good on paper, but they are meaningless if they aren't followed and enforced by clinics, owners, managers, franchisees, or franchisors.

Once these measures are implemented, the way to avoid harm to your business and its reputation is to document how you've met or exceeded the standard of care. Although it may seem like a lot of work, it is worth investing time in clearly documenting all your

policies, procedures, hiring processes, and training. Also, always document your verbal and practical interviews with clear notes and store them safely in each practitioner's personnel file until at least 3 years after their employment ends. These documents protect your business, therapists, and clients in the long run. Just one lawsuit can tie you up in court for years. The resulting stress and expense can be incredibly physically, emotionally, and financially draining.

The following is a detailed list of what you can do to adhere to the safest standards of care in massage therapy. Many of the suggested processes link to additional information, checklists, or templates for your use. This treasure trove of information will help you set up systems to provide a safe, professional environment, whether you are a day spa, a massage clinic, a small or large franchisee, a franchisor, or a massage therapist in private practice.

1 EMPLOYEE SCREENING

The hiring process starts with an application. Traditionally, after a spa or clinic reviews a potential candidate's application, the next step is to conduct verbal and practical employment interviews.

Application Form

This document must include an employment history. The standard is to request the names, addresses, and phone numbers of previous employers, even if in a different country, going back at least five years, with permission to contact the applicant's prior employers and their supervisors. If the applicant doesn't have an employment history, have them list at least two instructors that can be contacted. The application should include at least three professional references, educational background, and the applicant's massage school. The breadth of information required by this type of application allows you to check for inconsistencies, the types of references provided, and gaps in employment. If there are gaps, the interviewer can explore the reasons with the applicant. Traditionally, after a spa

or clinic reviews a potential candidate's application, the next step is to conduct verbal and practical employment interviews.

Verbal Interview

You can spot predatory tendencies at multiple points in the hiring process. The verbal interview is the first, and the practical interview is the second. A skilled interviewer should ask every massage therapist applicant the same set of interview questions, including challenging and red-flagging questions. If hired, all answers and notes should be documented and retained in the therapist's file for at least 3 years after their employment ends.

A thorough interview should take between 30 and 60 minutes. Effective interviewing is not easy; it is a skill that can be learned and will significantly benefit your business. Take detailed notes on the verbal interview to clarify why you hired the interviewee or not. Questions should address the applicant's understanding of boundaries and communication skills, as well as standard questions about customer service, the modalities they are skilled in, and the number of hours they are available to work.

Associated resource: Verbal Interview Questions

Practical Interview

The practical interviewer must be highly knowledgeable about the massage therapy profession and possess good sensory and perceptual skills. They must be well-versed in their hands-on techniques and in appropriate client interactions. It should be more than just whoever is available at the time.

An experienced senior massage therapist should conduct the practical interview with each applicant. Other potentially strong interview candidates include a former instructor at a massage therapy school or the lead therapist on staff.

The practical interview involves a hands-on demonstration of the prospective therapist's work, with criteria specific to skill, knowledge, and your business needs and expectations.

The interviewer should receive a massage from the prospective therapist as the therapist would give to your clientele.

If the business owner or manager does the interview, they should have many years of experience within the environment and/or have received numerous massages. Owners and managers should observe a skilled therapist conducting practical interviews for at least a year before attempting to do it themselves. If an owner or manager is unfamiliar with the terms and criteria listed in the attached Practical Interview and cannot recognize the nuances of the hands-on techniques, they are not the appropriate person to do the practical interview.

Associated resource: Practical Hands-On Interview Checklist

As with the verbal interview, notes should be kept in the applicant's permanent file for at least 3 years after their employment ends.

2 EMPLOYEE VETTING

Initial employee vetting includes conducting background checks, reviewing the applicant's online presence, checking their social media, and verifying previous employers and other appropriate references.

Background Checks

Most states include a criminal background check as part of the licensing process. However, they do not usually include a sex offender check, so it's always safer to do your own background check, especially if it has been six months or more since the applicant was licensed. Be sure to include a National Criminal Background check, an Unlimited County Background search, and a search of the National Sex Offender Registry. DISA and other companies offer this service to spas and massage practices, verifying an applicant's massage license for a reasonable fee.

The National Association of Spa Franchises (NASF) was established in 2021 to prevent massage therapists who have resigned or been terminated due to sexually inappropriate behavior from being hired again at another participating brand. The Employment Verification System (EVS) screens applicants through a third-party company, DISA, for a nominal annual fee. In the first 18 months of operation, NASF members performed over 50,000 EVS searches. This provided them with enhanced reference checks for more informed hiring decisions. NASF welcomes all employers of massage therapists (not just franchises) to join the NASF and help protect the public and the profession. For more information, visit the NASF website.

Licensing: Verify with the relevant city or state agency that the therapist is licensed; this information is typically available online and can be verified in minutes. Licensing boards maintain records of complaints about therapists; check the board's website and contact the board directly. If you hire a therapist, keep a copy of their license and liability insurance documents in their file for at least 3 years after employment ends. Also, check your state licensing board's requirements, as some require individual licenses to be visibly displayed on the premises.

Internet and Social Media Searches

In addition to your background and reference check, reviewing prospective therapists' online and social media activities should be standard practice. Training is available on how to scour for this information. You can often find a lot with a quick search on Google, Facebook/Meta, Instagram, Twitter/X, TikTok, and other heavily trafficked platforms, as well as niche platforms such as Parler, Reddit, and Twitch.

Including searches like this can save a business significant time and effort. Here's an example from an actual trial case: A spa did not perform any internet background search during the hiring process of a prospective employee. Had they done so, they would have discovered, with a Google search, an arrest for rape just three years earlier on this man's record. Because of this oversight, he was hired, and as a result, the business was sued after he sexually abused several women.

Associated resource: Internet Search Instructions

Applicant's References

Always request and check at least three references for the applicant. The best ones typically come from former employers or clients, rather than from friends or family. If the applicant has a short (or no) employment history, ask them to provide contact information for the school they attended and at least two of their former teachers. If the applicant has a work history, ask the employer whether they would hire the applicant again. (You could also ask a teacher a similar question.) If the reference is not forthcoming, analyzing their tone of voice may provide answers. You may need to be persistent to get someone to speak with you. It's worth the effort. Document your calls and responses in the employee's file.

Additionally, review the school the student graduated from and the number of training hours they completed to earn their diploma. According to the Entry Level Analysis Project (ELAP), the minimum number of hours should be 625; more would be beneficial. Unfortunately, many schools do not provide significant education in ethics, business, and communication, so you will likely need to provide additional training for new therapists. Also, ask whether the therapist has completed continuing education courses and, if so, which ones; this demonstrates an interest in developing and expanding their skills.

3 TRAINING

Take the time to orient and train every new hire during onboarding and approximately every 2-3 months.

Associated resource: Ongoing Training Topics

Don't assume that your new therapist learned everything they need to know during their schooling, since many curricula are limited in these vital topics and not all instructors are qualified to teach them.

Spas and massage clinics would benefit from investing more time and effort in training their therapists, as well as all staff. Many skills will be put into action while on the job,

including ethics, boundaries, communication, reporting inappropriate behavior, managing challenging clients, attraction to clients, and addressing sexual arousal.

Many organizations try to teach these topics solely through online, pre-recorded, independent-study platforms. This is fine as an introduction, but more engagement with the material is needed. These topics must be supplemented by robust discussions led by a skilled professional knowledgeable about these issues.

New Hires

It is an investment to train each hire thoroughly, so they adhere to your standards, deliver work consistent with the services you offer, and become part of a cohesive team.

Within the onboarding orientation, there should be in-person live training with in-depth conversations and role-plays around several scenarios, including:

- Recognizing and respecting boundaries
- Understanding the power dynamics of the client/therapist relationship
- What to do if you are attracted to a client
- How to politely avoid dual relationships. For example, how to respond if a client asks you to engage in an activity outside the workplace
- Implementing a zero-tolerance policy for sexual comments, jokes, or actions and practicing responses
- Managing overly personal client questions
- Utilizing company-approved draping and touch recommendations
    - Associated resource: Draping and Touch Recommendations
- Handling clients who don't want a drape
- How to handle clients who cross boundaries or misbehave toward the therapist
- Qualifications for working with special populations, such as cancer and other life-altering conditions, or prenatal clients
- How to write and file a report to the employer about an inappropriate client behavior or interaction
- How to report the inappropriate behavior of another therapist

The training should include role-plays on various challenges, such as handling clients who are verbally or physically inappropriate with the therapist. Being direct and clear on these subjects will set the tone for your new hires and existing employees. We have provided a series of training videos and role-play scripts for use during onboarding and throughout an employee's tenure. You can also create additional videos and role-plays to address your specific concerns.

Additional resources: Sample Role-Play Scenarios

Ethics Role-Play Videos

Inappropriate behavior by another therapist may come to a therapist's attention from a client or in an interaction with a coworker. It is essential to have a reporting and complaint process in place for clients and therapists, so that they feel safe speaking up.

At the end of the initial orientation and training sessions, have the therapist sign off on a document confirming completion of the orientation, and administer a challenging test to assess their comprehension and understanding of the material. Do not assume they understood what you have taught.

Training Manual

Create a clearly written training manual that outlines the organization’s philosophy, values, policies, and procedures applicable to the practitioner. The manual outline reflects the training given to new hires and will also serve as a reference tool during their employment.

Policies to include:

- Absences
- Lateness
- Dress code
- Cleanliness
- Room setup
- Communicating with management
- Resolving conflict

- Giving and receiving feedback
- Cultivating a client-centered practice
- Sexual misconduct and harassment
- Areas of the body you never touch
- Prohibiting the development of dual relationships with clients
- Never having sexual contact, making sexual comments, or using sexual innuendos

Leadership must model best behavior by refraining from sexualized relationships with staff and clients.

4 ETHICS AND ZERO-TOLERANCE

Code of Ethics

Adopt a Code of Ethics that includes statements prohibiting any sexual contact or comments of a sexual nature between the practitioner and the client, and include it in your new hire training manuals. Each therapist should read and sign a copy that is kept in their employment file. Also, create and display a separate Code of Ethics geared to clients. This Code of Ethics establishes safety standards, serves as a deterrent, and signals to employees and customers that your business values and upholds ethical behavior. For reference, some massage organizations that include a clear statement about sexual contact in their code of ethics are The American Massage Therapy Association (AMTA), Associated Bodywork and Massage Professionals (ABMP), College of Massage Therapists of Ontario (CMTO), and The National Certification Board of Therapeutic Massage and Bodywork (NCBTMB). State licensing boards may also have a unique Code of Ethics.

- AMTA Code of Ethics
- ABMP Code of Ethics
- CMTO Code of Ethics
- NCBTMB Code of Ethics

Zero-Tolerance Statement

Have a brief yet explicit “Zero-Tolerance” statement regarding sexual abuse or harassment of clients in the workplace. Clear, unambiguous statements about unacceptable actions and behaviors make your values and policies resoundingly clear. Each hired therapist should read and sign the declaration in the manager's presence, and the declaration will be added to their employment file. Note: When adding a Zero-Tolerance Policy to an existing team of therapists, you can boost accountability and morale by having all therapists read and sign it together.

Additional resource: Sample Sexual Misconduct Statement

All-Staff Zero-Tolerance Meetings

A general meeting of all therapists, except the accused therapist, and additional staff should be called as soon as possible whenever an accusation or complaint of sexual assault or misconduct is reported. Protect the privacy of all parties involved in these meetings by refraining from using the names of clients or therapists involved in the incident.

These mandatory emergency meetings let all employees know that the organization enforces its zero-tolerance policy for sexual assault or sexual misconduct. They reinforce all written policies available to the staff and therapists that may be overlooked or ignored over time. They also create a greater sense of safety for everyone. To have an effective sexual misconduct prevention policy, the organization's management and leaders must encourage an atmosphere of openness and honesty.

If a client is sexually inappropriate, that client should be permanently banned. If the accused is a therapist, they should be suspended from working at the organization pending an investigation and should not attend this meeting. Management should describe the alleged incident with appropriate detail. Employees are asked to share any information they have about this incident or any other incidents they are aware of. If they are uncomfortable sharing in the meeting, they can share privately afterward or anonymously.

Remind employees to report such behaviors to management whenever they become aware of them, not just at a meeting. (This could be done anonymously.) Otherwise, employees often do not speak up, and inappropriate incidents go unreported and uninvestigated.

Additional resource: Sample Zero-Tolerance Meeting Agenda Outline

5 POST-HIRING VETTING

Vetting is a continual process. This section discusses methods for maintaining a safe workplace and includes what to ask in client surveys and the benefits of secret shoppers.

Client Surveys

Set up simple surveys to be automatically sent to every new client after they receive a session from one of your therapists. Send the survey again every two to three months. A victim of sexual abuse often needs time and physical distance from the event to process it and decide to report the incident. The client may be in shock and not thinking clearly. These surveys are an effective method for spotting inappropriate behavior and boundary crossings before they escalate into sexual misconduct. Small boundary crossings and violations are often the precursors to gross sexual assault. The surveys should include an option for clients to remain anonymous.

Additional resource: Sample Client Survey

If an issue arises during the survey or there is a question about possible misconduct, an immediate follow-up with the therapist should be conducted. For example, if they had loose, sloppy draping or asked inappropriate personal questions, follow-up training may be all that is needed. However, if a pattern of poor boundaries is spotted, or the client is inappropriately exposed, even momentarily, due to poor draping - the therapist should be put on probation and carefully monitored in that case.

Secret Shopper

Using a secret shopper is an essential component of customer service and ensuring client safety. It is part of a continual vetting process of therapists since it is difficult to weed out one hundred percent of predatory therapists or those with poor boundaries and predatory tendencies during the interview and vetting process. Predatory therapists often test the verbal and/or physical boundaries of the client during a massage therapy session to gauge whether they are someone to take advantage of. Other therapists, with poorly developed boundaries, may gradually move from the professional to the personal when under stress, drifting into inappropriate touch or conversation. It's useful to have a secret shopper review within the first several months of a therapist's hire and then at least once a year for the full staff.

Too often, inappropriate actions go unreported because either the spa or clinic has not adequately educated the client to recognize such improprieties, or the client feels too ashamed or embarrassed to report the issue.

Additional resource: Secret Shopper Instructions

6 SUPERVISION

Sometimes, a massage therapist has an uncomfortable or disturbing experience when giving a client a massage. The client may have made an off-color joke or been more subtly inappropriate. Practitioners require a shame-free and trustworthy relationship with a supervisor to review and evaluate challenging or complex experiences. Supervision can occur in group sessions or one-on-one meetings. There are two types of supervision: technical and clinical supervision. A technical supervisor can help guide therapists in developing their hands-on techniques. A clinical supervisor helps practitioners learn how to define their boundaries, set boundaries for challenging clients, and deal with the intense feelings or sexual attraction that may develop. Offering your therapists clinical and technical supervision by a qualified practitioner is an asset to your business and a deterrent to underlying personal and professional conflicts.

Additional resource: Clinical and Peer-to-Peer Supervision

7 ENHANCED SAFETY

This section suggests methods for enhancing the safety of both therapists and clients through client educational materials, a client bill of rights, and the installation of an accessible call button on every massage table. It also includes a suggested complaint procedure in case of an incident of sexual misconduct.

Client Education

Any establishment striving to deliver excellence in care and stay up to date with the latest understanding of massage therapy should provide an educational or informational document (printed or digital) that serves several purposes. It should inform clients that standards are applied to their hiring requirements, including state licensing, criminal background checks, and employment reference checks.

In this document, the client is defined as anyone who receives services for any therapy or health care. The document should include an overview of what to expect during a massage therapy session, what is expected of them, and how to recognize and respond to signs of inappropriate conduct. It should outline their consumer rights and inform them how to protect themselves if their rights are violated. This document will help create well-informed clients and serve as a safety valve and a deterrent for those with unclear boundaries.

Clients often don't know what to expect or what is considered acceptable behavior in a massage therapy treatment room. This is especially true for new clients. However, even regular clients can find themselves unsure how to react appropriately. Providing every client with a client education document may also deter practitioners from engaging in inappropriate behavior.

If you put this client brochure on your website instead of handing the client a paper brochure, you must ensure the client has read it. Have them sign to confirm that they have read and understand this document.

Additional resource: Client Bill of Rights

This document should include the company's specific safety policies and information, specifying the boundaries of your clinic's or spa's work. For instance, work may be done up to 1 inch below the clavicle, but there is never work done on the breast, genitals, or upper inner thigh (work within 4 inches of the groin is not permitted). State whether you permit abdominal massage or gluteal work and the draping requirements for those areas.

If your facility has a call button attached to every table, specify its location and purpose.

Include the phone number and/or email address of your massage licensing board.

Highlight that your therapists regularly participate in ongoing training and/or continuing education courses (if applicable).

Call Button

Installing a "call button" within easy reach in each treatment room gives the therapist and client immediate access to the front desk staff in the event of a medical emergency or an urgent need. A small button should be placed under the edge of each massage table, just where the client's hand rests. At the start of each session, the therapist indicates the location and use of this call button. In your training and training manual, provide instructions and sample phrases for the therapist to use, such as: "This call button is here to keep both of us safe if either of us needs help." This creates an immediate sense of safety for the client and the therapist. The call button also serves as a deterrent for anyone engaging in inappropriate activity.

The spa/clinic website should provide information about the call button and its purpose, and prominent signs should be placed in the treatment rooms. Call buttons can generally be installed for a few hundred dollars per room. Research has shown that the incidence of

inappropriate touch is dramatically reduced when call buttons are installed, and complaints generally decrease.

Complaint Process

Every ethics complaint, however trivial it may seem, should be thoroughly acknowledged, investigated, and followed up on. A complaint may be received in person, by phone, or in writing via a survey or email.

There should be a clear and rigorous process for handling complaints about a client's or a therapist's behavior. This can help protect your clients, your practitioners, and your business. A transparent policy cultivates trust and establishes confidence in the company's high ethical standards. In most cases that end up in court, there is often a pattern of minor complaints before an instance of gross abuse. Therefore, having a safe and clear avenue for voicing complaints can prove invaluable, as it prevents a more serious situation from arising later. Having a robust complaint process will help discourage therapists with predatory tendencies who will be searching for an establishment with fewer rigorous checks and balances.

Additional resource: Sexual Misconduct Complaint Procedure Example

If it is determined that the client is sexually inappropriate, the organization must support the therapist in terminating the session and banning that client from all of their facilities.

If a complaint is made against a therapist, management should determine its nature and investigate it. Management can directly address minor ethical complaints through a conversation with the therapist, while other complaints may require additional training, suspension, or termination of employment.

Note that there is a spectrum of types of sex offenders. One primary example is a sexual predator. This type of predator tries to initiate sexual contact with a person in an abusive manner. Like an animal that hunts its prey, the sexual predator seeks their sexual objects and usually commits multiple sexual assaults throughout their lives.

Another type of sex offender is a person with very poorly developed interpersonal, physical, and/or sexual boundaries. This individual can mistakenly think or feel that the person they are drawn to is interested in sexual contact with them. They may act on those sexual impulses without explicit agreement from the other person, often with dire consequences. For this type of sex offender, a sexual assault may be an isolated event. And, of course, different categories of sex offenders fall on either side of these two. None of these individuals should be in the massage therapy profession.

It can be challenging for a company to conduct an investigation independently. Their staff may not be trained in investigative techniques, and it can be difficult to investigate an employee you have hired, like, and have a financial interest in. Eliminate bias by having a third-party company investigate the complaint on behalf of your organization. Two such companies are Redirect and Ulbrich-Scull Investigators. These companies use a trauma-informed, fact-finding process that is driven by the hiring organization's code of conduct. These companies may offer valuable insights and support, including leadership coaching, staff training, and policy consultation, to help prevent future incidents.

Additional resource: Sexual Misconduct Complaint Procedure Example

8 HOW THERAPISTS CAN PROTECT THEMSELVES FROM SEXUAL ASSAULT

Predatory sexual behavior by the client is a serious issue and not something a therapist should ignore or try to manage on their own. This can occur with male and female therapists. Therapists are entitled to work in an environment free of sexual abuse, whether a therapist is in private practice or an employee. If violations happen, they have the right to make themselves safe, remove themselves from the situation, and take all available steps to have the abuser reported and held responsible for their actions.

Unfortunately, formal reporting remains rare. Therapists stay silent because they fear not being believed, worry about retaliation from employers who prioritize client retention over staff safety, or simply don't know that reporting is an option. Therapists need to know they are not alone and not powerless.

There are instances where a client might not be a predator, yet could cross sexual boundaries due to poor impulse control, ignorance of proper boundaries, or because they are in a vulnerable personal situation. The therapist needs to be able to protect themselves in dealing with all situations.

Here are examples of inappropriate client behavior collected by surveying dozens of currently practicing massage therapists:

Client

- not following the therapist's instructions about draping.
- telling sexually inappropriate jokes, stories, or making inappropriate comments.
- making romantic or sexual advances.
- pushing the boundaries of what is appropriate as outlined by the therapist.
- touching or grabbing the therapist.
- trying to kiss the therapist.
- greeting the therapist at the door naked or in suggestive attire.
- asking for genitals to be massaged or a "happy ending," often for extra pay.
- arousing themselves on the massage table and/or ejaculating.

Additional resource: Predatory Clients

While good intentions and many years of practice might seem to guarantee safety, a client may still cross boundaries. The ethically safe touch experience doesn't just happen; it must be created, structured, and sustained. This means consistently demonstrating absolute professionalism in all aspects of practice, particularly regarding sexuality and touch. There are actions therapists can take to help mitigate clients' inappropriate behavior and boundary crossings.

Additional resource: Setting a Foundation to Prevent Sexual Misconduct

In rare cases, a client might falsely accuse a therapist of sexual misconduct.

Additional resource: How to Prevent False Accusations

9 FIELD VISIT

As a best practice, the clinic or spa should have an objective third party conduct a field visit at least every three months to verify adherence to all operational guidelines, including those in this publication.

Every field visit is an opportunity to support the company's health and welfare and help the owner achieve its goals. In addition to the standard business review, it is crucial to review the employee files to determine whether the spa/clinic is on the right path to success and taking the necessary steps to prevent sexual assault. During the visit, they should check employee files for the following:

- Applicant interview documentation
- Verbal Interview documentation
- Practical interview documentation
- Reference checks
- A copy of a therapist’s license
- Insurance coverage
- Continuing education records
- Performance reviews
- Client surveys
- Incident reports and how they were resolved

The following aspects should be included in the overall review:

- Staff concerns are addressed in a timely manner
- Scheduled regular team meetings
- Complaints process review
- Appropriate allocation of leadership duties

10 REFERENCES AND RESOURCES

Books

- *The Ethics of Touch*, by Ben Benjamin and Cherie Sohnen-Moe
- *Ethics and Professionalism for Massage Therapists and Bodyworkers*, by Beverley Giroud
- *Nina McIntosh's The Educated Heart*, by Laura Allen
- *The Body Keeps the Score*, by Bessel van der Kolk, M.D.
- *Trauma and Recovery*, by Judith Lewis Herman, MD

Articles

- *Clients Crossing Boundaries*
- *Effect of Sexual Assault on Women Sexual Assault Victims*
- *Keeping Clients Safe, Part 2*
- *Keeping Clients Safe, Part 3*
- *Let's Talk About Ethics and Self-Accountability*
- *Let's Talk About Sex*
- *Let's Talk About the Power Differential*
- *Let's Talk About the Therapeutic Relationship*
- *Setting Boundaries with Inappropriate Clients*
- *Spa Legal Liability*
- *Taking Care of Your Transgender and Nonbinary Clients*
- *What I've Learned as an Expert Witness*

Organizations

- American Massage Therapy Association
- Associated Bodyworkers and Massage Professionals
- Federation of State Massage Therapy Boards
- Healthy Place
- National Association of Spa Franchises

- National Certification Board for Therapeutic Massage & Bodywork
- The Rape, Abuse & Incest National Network

Codes of Ethics

- American Massage Therapy Association Code of Ethics
- Associated Bodyworkers and Massage Professionals Code of Ethics
- College of Massage Therapists of Ontario Code of Ethics
- National Certification Board for Therapeutic Massage & Bodywork Code of Ethics

Supplementary Documents

VERBAL INTERVIEW QUESTIONS

We suggest that the Verbal Interview be conducted by both a manager and an experienced Lead therapist. (Red Flag Questions are in Red)

1. Why did you choose massage therapy as your profession?
2. What do you like about it?
3. Are there things you don't like about it?
4. Do you get massages regularly yourself?
5. What do you do to maintain your own health?
6. If you could have changed one thing about your massage school education, what would it be?
7. Why do you want to work in a spa setting?
8. Have you been trained in any spa treatment protocols? Which ones?
9. Have you had training in working with pregnancy? If yes, how many hours of training did you receive?
10. Have you had training in working with clients who have or have had cancer? If yes, how many hours of training did you receive?
11. How many clients do you typically want to see in a day?
12. How many hour-long sessions can you do before you need a break?
13. Have you had or do you have a private practice? How many private clients do/did you see each week?
14. Why did you leave your last job?
15. Give me an example of an area in your professional life that you would like to improve.

Now, I am going to ask you several questions based on our ethical standards. These questions are based on common occurrences in a massage setting.

16. How would you handle a client who arrived 20 minutes late for a 50-minute massage?
17. Tell me about a time when you had difficulty or a conflict with an employer and how you handled it.
18. If you got upset with me or another staff member, how would you handle it? For example, if you felt you had been spoken to disrespectfully?
19. Has a client ever asked you something that made you uncomfortable? If yes, what did you do?

    (If needed) For example:

    a. How would you respond to a client who did not want to be draped?

    b. A client who asks you out to lunch.

    c. Asking you a question that is outside of your scope of practice
20. Have you ever had a situation when a client was inappropriate with you? If yes, how did you handle that?
21. Was there ever a time when a client accused you of being inappropriate during a massage? What was the outcome?
22. Do you make friends with your clients? What are the pros and cons of doing this?
23. If you ever felt attracted to a client, how would you handle those feelings?
24. If you discovered that a fellow therapist was doing something inappropriate, what would you do?
25. What do you think should happen to a therapist who engages in sexual acts with a client?
26. Were you ever let go from a job? If so, why?

PRACTICAL HANDS-ON INTERVIEW CHECKLIST

The most appropriate person to conduct the practical hands-on interview is an experienced massage therapist, usually the lead therapist, whose ethics and judgment you trust. If the examiner does not understand these criteria or is not experienced in identifying them, they should not conduct the practical, hands-on interview/evaluation. This form provides specific criteria on which to base your hiring decision.

Therapist Intake Questioning

Did the therapist ask you about the following? (*Yes/No*)

___ Relevant health history

___ Goals for the massage

___ Area of tension or pain for treatment focus

___ Type of pressure preferred (mild, moderate or deep)

___ Areas to avoid

Amenities in the room:

___ Lighting

___ Temperature

___ Music (or none)

___ Anything else the therapist needs to know

Draping

Rating: 1–5 (*1: Poor, 2: Fair, 3: Good, 4: Very Good, 5: Excellent*)

___ Secure draping (prone), at the waist

___ Secure draping (prone), at the upper inner thigh

___ Secure draping (supine), at the upper inner thigh

___ Secure draping (supine), at the breast

___ Draping performed gently

___ Draping performed with attention to sight boundaries

___ Privacy while turning over

Hand Contact

Is the hand contact: (*Yes/No*)

___ Full

___ Relaxed

___ Partial hand contact

___ Tense

Hand Temperature

Is the hand: (*Yes/No*)

___ Warm/hot

___ Cold

___ Does the hand temperature change during the session? How?

_____

Pressure

Did the therapist: (*Yes/No*)

___ Check with the client about the pressure level on different areas during the session?

___ Adjust the pressure to meet the client's request?

Technique (*Yes/No*)

___ Were the techniques appropriate for the areas of the body and the client's needs?

Treatment Flow (*Yes/No*)

___ Did the treatment flow well?

Transitions Between Strokes and Body Parts (*Select One*)

___ Smooth

___ Disjointed

Speed

The pace was: (*Select One*)

___ Too fast

___ Too slow

___ Just right

Physical Boundaries (*Yes/No*)

___ Did the therapist's pelvis or breast tissue come in contact with the client's body at any time?

___ Was there any brushing of the therapist's clothing against the client's body?

___ Was there any brushing of the therapist's hair against the client's body?

___ Did sweat from the therapist's body drip onto the client?

___ Did the therapist maintain appropriate distance from breast tissue when working on the upper torso (e.g., 1-2 inches below the clavicle)?

___ Did the therapist's hands contact the side breast tissue when prone?

___ Did the therapist maintain appropriate distance from the genital area when working on the upper inner thigh (e.g., 3-4 inches)?

___ Was there any other inappropriate body contact?

Verbal Boundaries (*Yes/No*)

___ Was there excessive self-disclosure?

___ Did the therapist make any sexual comments?

___ Did the therapist make any inappropriate comments about the client's body?

___ Were there any additional verbal boundary crossings?

If yes to any of the above, please elaborate.

_____

_____

Time Boundaries (*Yes/No*)

___ Did the therapist finish in the allotted time?

Body Mechanics (*Yes/No*)

___ Did the therapist balance their use of body weight and hand pressure?

Safety (*Yes/No*)

___ Did you feel safe with the therapist?

Identify anything specific that made you feel unsafe or uncomfortable:

_____

_____

Did the therapist demonstrate professionalism and create a sense of ease?
(*Select One*)

___ Yes

___ No

Comments:

_____

_____

How was the ending of the session? (*Select One*)

___ Soft verbal indication of closure

___ Abrupt

Should we hire or not hire? And why?

_____

_____

INTERNET SEARCH INSTRUCTIONS

Internet Search

Almost every adult has some footprint online, whether small or large, public or private. Simply searching for first and last names can yield enormous results, but potentially nothing relevant to your search. Knowing some search tools and using a few extra characters in your search, you can significantly filter the hits you receive. Try all the following sites for the most thorough view of someone's online presence: Bing.com, DuckDuckGo.com, and Google.com.

Possible results will vary from very specific to entirely unrelated to the person in mind. Scan the pages for links that match. Change and use multiple identifiers (e.g., massage, sexual assault, sexual abuse) to hone your results. Watch for news clippings, police logs, court documents, reviews, and other public posts. General searches on these sites will likely also produce links to their social media profiles – see below.

First & last name in quotes:

- "John Smith"
- Results will be limited to those containing both words

Include identifiers:

- Massage
- Rape
- Battery
- "Sexual Assault"
- If there are two or more words, put the phrase in quotes

Use the + sign:

- +rape +"John Smith"
- +"sexual assault" +"John Smith"

- Adding a plus symbol before a word or phrase indicates to the search engine that it is required in your search results

Use the - sign

- +“John Smith” -carpenter
- Adding a minus symbol before a word or phrase indicates to the search engine that it is to be excluded from your search results

Social Media Search

Most people have at least one social media account where they share their thoughts with family, friends, colleagues, and strangers alike. Even if they haven’t signed up for any large platforms, someone may be talking about them and tagging them online. Sites like Facebook/Meta and LinkedIn often provide snapshots of a person’s background, including education and profession. Twitter/X, Instagram, Pinterest, YouTube, TikTok, and Reddit searches will show people’s interests and examples of who and what they follow online.

While searching social media sites may turn up a random article or public post about the person, most results will give you an overview of their activities and priorities. You’ll need to interpret what you find – what they posted and chose to repost. For example, if they continually post about the exciting continuing education classes they just had, this person may be a good hire. If they constantly complain about their work and their boss, that may influence the questions you want to ask them during an interview.

- First, create/log in to your personal or business account to view all public pages
- Include a location with the name to limit results (e.g., Denver, CO; NYC; California)
- Try searching with their email address instead of their name (as it is more unique)
- Try name variants (e.g., Jim, James, Jay; Chris, Kris, Christine)

ONGOING TRAINING TOPICS

Ongoing training is essential for massage therapists to maintain strong professional boundaries, ethical practice, and client-centered care throughout their careers. This section outlines twelve suggested topics for continuing staff meetings or training sessions, ranging from managing boundary crossings and dual relationships to understanding transference, power differentials, and self-disclosure. Each session combines a short teaching piece with breakout discussions, role-play practice, and a closing assessment, giving therapists practical tools to navigate real-world situations with confidence and integrity.

1. Clients Crossing Boundaries
2. The Dangers of Dual Relationships
3. Understanding Transference & Countertransference
4. Handling Sexual Attraction to Clients
5. Boundary Crossings vs Boundary Violations
6. Setting Boundaries on Self-Disclosure
7. Dealing with Verbal Boundary Crossings
8. Working With Transgender and Non-Binary Clients
9. Self-Accountability
10. Power Differentials
11. Establishing Safety in Disrobing
12. Elements of the Client-Centered Relationship

Each session would consist of:

- A teaching piece
- Breakout groups
- Role-play practice
- Meeting assessment

Meeting Descriptions

1. *Clients Crossing Boundaries*

   In this meeting, the various ways clients often behave inappropriately toward their massage therapists are described. For example, asking personal questions, inviting you to lunch, or touching your leg. This is followed by strategies for dealing with these challenging client situations. After some discussion, these strategies are practiced and coached. The meeting concludes by asking what worked and what didn't.

2. *The Dangers of Dual Relationships*

   In this meeting, the dangers of entering into dual relationships with clients are presented. For example, becoming friends, doing a project together, going to an art exhibition, or going to a party. This is followed by pair discussions. Strategies for handling clients' invitations to enter into dual relationships are discussed, followed by role-play practice declining the invitation in a kind and effective manner. At the end of the meeting, participants are asked what worked and what didn't.

3. *Understanding Transference & Countertransference*

   This meeting covers the impact of transference and countertransference on any therapeutic relationship. Definitions are read and handed out, and examples or stories illustrating how dual relationships create problems are given. The strategies for minimizing transference reactions in oneself and others are discussed. This is then explored through pair discussions, role-plays, and a group discussion. At the end of the meeting, participants are asked what worked and what didn't.

4. *Handling Sexual Attraction to Clients*

   This meeting covers how to normalize and handle one's own sexual attraction to clients and the importance of recognizing it and never acting on those impulses. This is then explored through dyad or triad breakout sessions and a group discussion. At the end of the meeting, participants are asked what worked and what didn't.

5. *Boundary Crossings vs Boundary Violations*

   This meeting covers the difference between boundary crossings and boundary violations and the implications of each. Examples are given of the difference between crossings and violations. How you might handle these topics differently is then discussed in pairs, followed by role-plays and intervention strategies for responding to violations. At the end of the meeting, participants are asked what worked and what didn't.

6. *Setting Boundaries on Self-Disclosure*

   This meeting explores the difference between appropriate and inappropriate self-disclosure between therapist and client, and how to gently set boundaries for self-disclosure in a therapeutic relationship. If needed, examples of the difference between the two are provided. This is then explored in pairs, followed by role-plays of appropriate responses and a group discussion. At the end of the meeting, participants are asked what worked and what didn't.

7. *Dealing with Verbal Boundary Crossings*

   This meeting addresses clients' verbal boundary crossings, how to recognize them, and how to respond to set a boundary for the client. This is discussed in pairs, followed by discussions, examples, and role-plays on how to do it well and poorly. At the end of the meeting, participants are asked what worked and what didn't.

8. *Working With Transgender and Non-Binary Clients*

   This meeting covers working with transgender and non-binary clients. Before the meeting, give out the article *"Taking Care of Your Transgender and Nonbinary Clients"* for therapists to read. Have therapists discuss what they learned from the article. This is followed by pair and group discussions. At the end of the meeting, participants are asked what worked and what didn't.

   Associated resource: Taking Care of Your Transgender and Nonbinary Clients

9. *Self-Accountability*

   This meeting focuses on ethical behavior and self-accountability in a massage context, what they mean, and how important they are. Before the meeting, give out the article "*Let's Talk About Ethics and Self-Accountability*" for therapists to read. This is followed by pair discussions and a group discussion. At the end of the meeting, participants are asked what worked and what didn't.

   Associated resource: Let's Talk About Ethics and Self-Accountability

10. *Power Differentials*

    This meeting covers the importance of understanding the power differential between client and therapist. Read the article "L*et's Talk About the Power Differential"* aloud. Then explore this concept in pair discussions and group processing. At the end of the meeting, participants are asked what worked and what didn't.

    Associated resource: Let's Talk About the Power Differential

11. *Establishing Safety in Disrobing*

    This meeting covers how to establish safety and choice when a client disrobes to their comfort level. Explore various ways to inform clients about disrobing. This is done through pair discussions, followed by role-plays and group processing. At the end of the meeting, participants are asked what worked and what didn't.

    Associated resource: Draping and Touch Recommendations

12. *Elements of the Client-Centered Relationship*

    This meeting covers the five elements of a client-centered relationship. Hand out the article "*Let's Talk About the Therapeutic Relationship*" for everyone to read before the meeting. Explore the group's responses to the article. This is done through pair discussions, followed by a group discussion. At the end of the meeting, participants are asked what worked and what didn't.

    Associated resource: Let's Talk About the Therapeutic Relationship

DRAPING AND TOUCH RECOMMENDATIONS

Draping and touch policies should be detailed and clear to everyone. One of the primary functions of draping is to create clear boundaries and safety for the partially or fully unclothed client. The drape outlines the area to be worked on and covers the rest of the body. Draping is for the client's safety, modesty, and comfort. It is also a way for therapists to protect themselves from misunderstandings.

Therapists may have been taught different draping methods and body areas they can touch. It is best practice to have uniform draping and touch guidelines that you teach during the hiring process, check within a few months after onboarding, and periodically thereafter. Written draping guidelines and photographs must match any training videos you may have, and your lead instructors should follow them.

It should be absolutely clear that the therapist should never work under the drape. It is also recommended that the drape be removed only from the area to be worked on.

Thoroughly instruct clients on how to disrobe and drape. For example, say, “Please undress to your comfort level. I can perform an effective massage regardless of your level of undress, including while you continue to wear undergarments. I will not expose any private area or work under the sheet.”

The massage therapist should explain the draping standards to each client and clarify the purpose and intention, such as, “Here’s what you can expect with my draping [describe draping procedures and limits]. The draping helps you to feel safe and allows me to work in the indicated areas. If any modifications are needed, I will explain why and get your informed consent before proceeding.”

Draping techniques can vary depending on the type of work being done and the environment. When creating your draping guidelines, consider the following suggested techniques for various body regions.

Working on the Lower Back

The most common guideline in the spa industry is that the drape shall be placed at the level of the PSIS (Posterior Superior Iliac Spine) when the client is face down (prone) and the therapist is working on the lower back.

Clinics and private practice might allow the draping to be placed at the base of the sacrum.

If the client is wearing underwear, the sheet can be tucked into the underwear and brought to the base of the sacrum.

Working on the Buttocks

Working directly on the skin in this area is standard practice. In school, therapists are usually trained to work on the buttocks skin-to-skin. When draping this area, the gluteal fold must never be exposed. You may choose a more conservative approach, such as using compression through a sheet or undraping only one side at a time.

Working on the Thigh

When working on the thigh, be sure the drape is tucked and secure. The most common conservative option is to place the drape at least 4 inches below the groin on the medial side.

Turning

Before the client turns over, the therapist lifts the sheet slightly to respect the client's modesty and block the therapist's view. Once the client has turned over, adjust the drape so they are securely covered.

Working on the Arm

When a client is face up (supine), secure the drape over the chest while working on a

client's arm. The most common conservative method is to tuck the sheet under the upper back at the axilla.

Genital Region

A secure drape must always cover the genital region. It is never permitted to massage or touch the genital area.

Breast and Pectoral Region

Working on the breast is not allowed in most parts of the country. There are a few exceptions where breast massage is permitted, and those therapists must have specialized training. These therapists are also required to get specific written informed consent from the client.

Caution is needed when working near the breast area. Secure draping is essential if you need to work on an area where breast tissue might overlap the area you are working on. The client could also be instructed to adjust the breast tissue with their hand(s). Often, a client's breast tissue protrudes to the side when they are both face down and face up. Therapists must do their best to drape securely and refrain from touching that tissue.

If permission is obtained to work on a client's upper pectoral area, work only on the muscle tissue, usually no more than 1-2" below the clavicle, to avoid touching the breast tissue.

Also, when performing a massage on a client's upper back, do not bring your hands to the sides of the ribs near the breasts, and do not touch any part of the breast tissue.

SAMPLE ROLE-PLAY SCENARIOS

Because massage therapists sometimes face challenging ethical issues, role-playing helps explore how a new employee might react in complex ethical situations and what they need to be trained on. Role-play each of these scenarios during the onboarding process. During role-plays, keep the conversation going and argue to see how the therapist-in-training responds. After each scenario, you'll see an example of a poor response and a professional response.

Scenario #1 Lunch Invitation Role-Play

Set Up: A very nice client that you have been working with for a few months asks you a question. I'm the client and say, "Would you like to go out to lunch sometime?"

Continue the conversation to see how the new therapist responds when you push back. (For example, if the therapist responds to Scenario #1 by asking why the guest is extending the invitation, the instructor can role-play by saying, "Just to get to know you better," and see how the therapist responds.)

Poor Response Example

Instructor: Would you like to go out to lunch sometime?

Therapist: Why do you want to go to lunch together?

Instructor: I'd just like to get to know you better.

Therapist: I don't usually do that with a client, but you've been seeing me for quite a while, and I think that might be nice. When would you like to get together?

Professional Response Example

Instructor: Would you like to go out to lunch sometime?

Therapist: Thanks for the invitation. Our policy is that therapists keep the relationship with all clients strictly professional, so no, I can't have lunch with you.

OR

Therapist: In our experience, when you mix personal and professional relationships, and something goes wrong, it often destroys the professional relationship as well, so as a policy, we don't socialize with clients.

Scenario #2 Draping Role-Play

Set Up: I'm the client and say: "I would prefer not to be draped with the sheet because it feels claustrophobic."

Continue the conversation, argue a bit, and see how the therapist responds.

Poor Response Example

Instructor: I'd prefer not to be draped with the sheet and blanket because it feels heavy and claustrophobic.

Therapist: How about I use just the sheet and no blanket?

Instructor: That would be a little better, but it would still make me claustrophobic.

Therapist: I'm sorry you feel that way. How about I use a towel instead so it only covers half your body?

Instructor: That would still not feel as good. You're comfortable with bodies, aren't you?

Therapist: I am comfortable with people's bodies, but the rules say you have to be covered.

Instructor: I'm the client, and I'm telling you that I'm not comfortable with the sheet on me

Therapist: OK, I'll just cover your pelvic region with a towel.

Professional Response Example

Instructor: I'd prefer not to be draped with the sheet and blanket because it feels heavy and claustrophobic.

Therapist: I can just drape you with a sheet and a towel. Does that work for you?

Instructor: No, not really.

Therapist: We have a professional draping policy here that I cannot deviate from. If you are not comfortable with that, I can speak with the manager about a possible refund. Would you like me to do that?

Scenario #3 Uncovered Breasts Role-Play

Set Up: I'm going to be the client: "I was pretty nervous to come back today because of something that happened last time I was here. I've seen you before and trust you, so I want to tell you about it. The last time I was here, the therapist uncovered my breasts, and he massaged them. I was really upset and froze."

Continue the conversation to see how the therapist responds.

Poor Response Example

Instructor: I was pretty nervous to come back today because of something that happened last time I was here. I've seen you before and trust you, so I want to tell you about it. The

last time I was here, the therapist uncovered my breasts, and he massaged them. I was really upset and froze.

Therapist: Really? I can't believe someone would do that.

Instructor: I wouldn't make something like that up.

Therapist: Well, since you didn't say anything, he probably thought it was OK.

Instructor: Well, it wasn't.

Therapist: Just don't make any more appointments with him.

Professional Response Example

Instructor: I was pretty nervous to come back today because of something that happened last time I was here. I've seen you before and trust you, so I want to tell you about it. The last time I was here, the therapist uncovered my breasts, and he massaged them. I was really upset and froze.

Therapist: That sounds like a very upsetting experience. I'm glad you feel safe enough to tell me. I would like you to speak to the manager right after our session. Would you be willing to do that?

Scenario #4 Party Invitation Role-Play

Set Up: I'm one of your fellow therapists, and I say to you: "One of my clients asked me to go to a party. What do you think I should do?"

Continue the conversation to see how the therapist responds.

Poor Response Example

Instructor: One of my clients asked me to go to a party. What do you think I should do?"

Therapist: Do you like this client?

Instructor: Yeah, they're a really nice person.

Therapist: Do you want to go?

Instructor: I think so, but I'm not sure.

Therapist: Life's too short; I'd go.

Professional Response Example

Instructor: One of my clients asked me to go to a party. What do you think I should do?"

Therapist: What do you think you should do?

Instructor: I don't know, I'm conflicted about it. What do you think?

Therapist: I think you have to say no.

Instructor: What should I say?

Therapist: I like to keep my relationships with clients professional. The clinic has a policy of no socializing with clients.

Scenario #5 Hurting Me Role-Play

Set Up: I am your client, and I say, "Another therapist at the facility hurt me physically during my treatment and was then rude to me for saying something about it."

Continue the conversation to see how the therapist responds.

Poor Response Example

Instructor: Another therapist at the facility hurt me physically during my treatment and was then rude to me for saying something about it.

Therapist: Have you seen this therapist before?

Instructor: Yes, a few times.

Therapist: Yes.

Instructor: Were those sessions similar

Therapist: No, they were all ok.

Instructor: Maybe give the therapist another chance or just don't see them again.

Therapist: Should I report it to the management?

Instructor: Only if you want to.

Professional Response Example

Instructor: Another therapist at the facility hurt me physically during my treatment and was then rude to me for saying something about it.

Therapist: That sounds awful. Did you tell the management?

Instructor: No, I didn't want them to lose their job.

Therapist: We pride ourselves on treating our clients well. I'd like to ask you to talk to the manager. The therapist will get a warning and likely some training. I wouldn't want that to happen to any other client. Can you do that, or would you like me to report it for you?

Scenario #6 Breast Massage Request Role-Play

Set Up: I am your client, and I say, "I'd like you to work on my breasts during my treatment."

Continue the conversation to see how the therapist responds.

Poor Response Example

Instructor: Would you massage my breasts?

Therapist: We don't usually do that.

Instructor: Charlie always does that for me. It can't be that difficult.

Therapist: Ok, just this one time.

Professional Response Example

Instructor: Would you massage my breasts?

Therapist: It's company policy that we don't massage the breasts or the abdomen.

Instructor: Charlie always does that for me. I won't tell your boss.

Therapist: I won't perform any services outside our company policy. If you want to continue your massage within the scope of my practice, then we can do that. Would you like me to continue your service?

SAMPLE SEXUAL MISCONDUCT STATEMENT

I commit to upholding the highest ethical standards. I will honor clients' personal space and boundaries. I will keep conversations professional and client-centered.

I understand that the following actions or behaviors are unethical and many are illegal. I understand that if I sexually assault or ever do anything sexual with a client, I would likely be arrested, be reported to the massage board, be terminated from my job, lose my massage license, go to prison, and become a registered sex offender for the rest of my life.

In my work as a massage therapist, I understand that I will:

- Never be romantically/sexually involved with a client.
- Never make sexual advances, jokes, comments, or innuendos toward a client.
- Never engage in client-initiated sexual advances, jokes, comments, or innuendos.
- Never make positive or negative comments about a client's body.
- Never work on the inner upper thigh closer than 3 to 4 inches from the groin (unless specifically trained and written informed consent is obtained).
- Never press my pelvis against any part of a client's body.
- Never allow breast tissue to touch a client's body.
- Never kiss a client.
- Never touch or even brush against a client's genital region.
- Never touch any part of the female breast.
- Never have any type of sexual contact with a client.

Therapist Signature: _____ Date: _____

[Put your adopted Code of Ethics here]

SAMPLE ZERO-TOLERANCE MEETING AGENDA

The following information is to support the leader in facilitating this meeting.

1. Define the goals of the meeting:
    - Debrief the incident
    - Safeguard clients and therapists
    - Ensure the Integrity of the profession
    - Uphold the values of the organization
    - Protect the reputation of the spa or clinic
2. Emphasize why Sexual Assault Prevention is so important:
    - Describe in detail how damaging a sexual assault or boundary violation can be to a client's or therapist's life.
    - Distribute articles that detail the ramifications of sexual assault to all employees.
    - Refamiliarize all employees with the company's policies and the possible consequences, including termination of employment, loss of license, arrest, inclusion on the sex offender registry, and imprisonment.
3. Discuss how to handle client information about a sexual assault:
    - Recognize that victims will most likely be in shock, suffering from an acute form of Post-Traumatic Stress Disorder (PTSD). Their memory of the incident details may not be clear until a few days later, when they have recovered somewhat.

- For a summary list of potential physical and psychological effects of sexual abuse and assault, refer to the article below titled, Effect of Sexual Assault on Women Sexual Assault Victims, by Samantha Gluck.
- Who should be contacted to file a complaint: Management, Supervisor, or Police?
- What online systems are in place at the organization for reporting an assault?
- Are anonymous reports allowed to be filed with your regulatory board?

4. Describe the incident by reporting what was claimed.
    - Reiterate your Zero-Tolerance Policy so it is fresh in their minds: Reinforcing this policy regularly can help staff feel confident that the organization is committed to everyone's safety and well-being.

5. It's often useful to have the therapists and staff meet in pairs for approximately five minutes so that they feel freer to speak and encourage each other to come forward with information.

6. Open the discussion to the full staff and therapists:
    - Ask for reactions to the incident.
    - It's often useful to start the conversation by discussing times when clients may have been inappropriate toward therapists or staff.
    - This often opens the door for therapists, in particular, to speak more honestly about uncomfortable experiences they have had and those they have heard about from their clients or colleagues.

7. Conclude by having each person share their thoughts about the meeting.
    - Invite those who are often quiet to speak.
    - Be sure to state that people may pass if they wish.

Possible Articles to Distribute

- *Clients Crossing Boundaries*
- *Effect of Sexual Assault on Women Sexual Assault Victims*
- *Keeping Clients Safe, Part 2*
- *Keeping Clients Safe, Part 3*
- *Let's Talk About Ethics and Self-Accountability*
- *Let's Talk About Sex*
- *Let's Talk About the Power Differential*
- *Let's Talk About the Therapeutic Relationship*
- *Setting Boundaries with Inappropriate Clients*
- *Spa Legal Liability*
- *Taking Care of Your Transgender and Nonbinary Clients*
- *What I've Learned as an Expert Witness*

Additional resource: References and Resources

SAMPLE CLIENT SURVEY

[Insert company name]

Your feedback is vital to maintaining the highest level of integrity and quality in our services. Please be honest with us. We want to hear from you.

Thank you in advance for taking the time to complete our survey!

1. What services have you received at **[insert company name]**?

☐ Massage Therapy

☐ Esthetic Services

☐ Hot Stone Services

☐ Other Services - please list below:

_____

2. If you received a massage, is there anything you particularly liked or disliked about your session? (If you did not receive a massage at **[insert company name],** simply type N/A below.)

_____

_____

3. Are there things your massage therapist could do to improve the massage experience?

_____

_____

4. Has anything happened in any massage session at **[insert company name]** that made you feel uncomfortable?

☐ Yes

☐ No

If yes, please explain:

_____

_____

5. Did the massage therapist do or say anything inappropriate as far as you are concerned? If yes, please explain.

☐ Yes

☐ No

If yes, please explain:

_____

_____

6. Would you recommend your massage therapist to a friend? Please explain why or why not.

☐ Yes

☐ No

Please explain:

_____

_____

7. How would you rate your experience with the front desk staff at **[insert company name]**?

☐ Excellent

☐ Good

☐ OK

☐ Poor

Please explain:

_____

_____

8. How likely are you to return to **[insert company name]**?

	1	2	3	4	5	
Not at All Likely	○	○	○	○	○	Very Likely

Please explain:

_____

_____

Thank you so much for your valuable feedback!

If you would like us to follow up with you, feel free to leave your name and email address. If you would like to remain anonymous, just skip this question.

First Name: _____

Last Name: _____

Email Address: _____

SECRET SHOPPER INSTRUCTIONS

Secret shoppers should be utilized regularly as part of the quality control process to verify that therapists adhere to the organization's policies and procedures. For example:

- Using secure draping.
- Starting and ending on time.
- Washing hands in the client's presence before the session (if applicable).
- Asking the client where to focus the session.
- Inquiring about the room's lighting and temperature.
- Asking about the depth of pressure before and during the session.
- Asking if they have a sound/music preference.
- Verifying that the therapist adheres to the client's request regarding the session's focus.

Massage therapists should be informed of the secret shopper program's existence and goals, as well as precisely what the secret shoppers will be looking for. This will likely deter inappropriate behavior and increase compliance with policies and procedures.

In addition to using secret shoppers as part of the vetting process, they can also be included in follow-up to a complaint intervention to ensure that required corrections have been made.

These are examples of behaviors that may trigger a secret shopper visit and lead to intervention and retraining:

- Using loose draping that feels insecure.
- Accidentally exposing the female breast for less than 1 second while re-draping, followed by an immediate acknowledgment and an apology.
- Engaging in personal conversations, such as asking clients inappropriate personal questions.
- Talking to clients about themselves and their problems.

Using a secret shopper is NOT indicated when inappropriate behavior of a sexual nature is suspected or reported. If there has been even one complaint of a sexual nature against a therapist, an investigation should occur. Behaviors like these should trigger an immediate suspension followed by an investigation, not a secret shopper visit:

- Working under the drape.
- Touching any part of the breast skin-to-skin or through the sheet.
- Making any physical contact with a client's underwear at the groin line of the inner upper thigh while supine or prone.
- Making physical contact with any part of a client's genitalia.
- Touching the upper inner thigh any higher than 4 inches from the groin.
- Pressing the pelvis against any part of the client's body.
- Making sexual advances, jokes, comments, or innuendos toward a client.
- Being romantically or sexually involved with a client.
- Making comments, either positive or negative, about a client's body.

A predatory therapist often tests a client's verbal and/or physical boundaries during a massage therapy session to gauge whether a client is susceptible to their advances. Too often, these inappropriate actions go unreported because the client feels too ashamed or embarrassed to bring the issue to light, or because the spa/clinic has not properly educated the clients on what to expect.

Secret Shopper Prerequisites

Careful selection, vetting, and training of a secret shopper are crucial. The secret shopper should have these qualities and qualifications:

- An assertive person who has had massage regularly and can set boundaries and say no easily.
- An emotionally mature person with a good sense of boundaries.

- A psychologist, social worker, counselor, or psychotherapist with at least several years of experience as a massage client, or
    - A massage therapist with at least five years of experience, or
    - A massage therapy teacher with at least five years of experience, or
    - A teacher who has taught communication and ethics (including boundaries) at a massage school.

Where to Find Secret Shoppers:

- Massage schools
- Small massage clinics
- Local AMTA Chapters
- Counselors at rape crisis centers

How to Interview a Potential Secret Shopper:

- Conduct the interview in person or by video call so you can see them.
- Review their experience and qualifications.
- Discuss their understanding of trauma.
- Check their references.
- Explain signs to watch for during the massage.

CLINICAL AND PEER-TO-PEER SUPERVISION

The Role of Clinical and Peer-to-Peer Supervision in Massage Therapy

Supervision helps practitioners maintain ethical practices and can reduce burnout. Without communication training, practitioners must figure out through trial and error how best to manage the complex interpersonal dilemmas involved in caring for clients. Unfortunately, professional relationships can be irreparably damaged by a guesswork-based strategy. Discussing these issues in supervision helps diffuse residual emotions and create balance.

Different Types and Formats of Supervision

There is a difference between technical supervision and clinical supervision. Technical supervision in massage and bodywork means working with an experienced therapist who is an expert in the type of work you do. This kind of supervisor can help you approach a problem or develop new skills and techniques for working with a particular issue. They can also offer a supervision consultation on how to work with a person who has a type of pain they have not seen before or someone who is not responding to treatment as they would expect. A technical supervisor can also help a massage therapist with issues, such as a practitioner who injured their thumb and would like to learn more about using their elbow or forearm while their thumb heals.

In clinical supervision, the supervisor works with the therapist to manage ethical and communication issues. In addition to being aware of clients who may exploit our vulnerabilities, we must recognize our own blind spots. Many of us don't fully appreciate all the effects of transference. A trained mental health professional can help you understand the dynamics of a situation. Seductive clients, for instance, do not always want you to be their lover; they're letting you know how they habitually deal with power in relationships. They're telling you how they usually get into trouble in their own lives or how they get attention. A consultant can help you protect yourself by not playing into the client's unhealthy behavior patterns. Other issues that could be addressed in clinical

supervision include a practitioner's client who talks incessantly during the session, asks numerous personal questions, or the therapist's feeling attracted to the client. All of these types of issues should be discussed, not brushed aside as inconsequential.

There are two primary formats for supervision: one-on-one and small-group.

In *one-on-one supervision*, a therapist works directly with a clinical supervisor as issues arise or regularly. One-on-one supervision can allow the therapist to be more vulnerable while addressing more deep-seated issues.

Small-group supervision consists of practitioners who work together or do similar work. This broadens the learning base and creates an additional support system for each member. In a group, they can learn from other practitioners' experiences.

In a group setting, clinical supervision has four primary functions:

1. Addressing the relationship issues that arise between clients and practitioners,
2. Acting as a support group for the practitioners,
3. Serving as a forum for instruction on important psychological concepts such as projection, transference, and countertransference, and
4. Training the practitioners in supervisory skills so that they feel confident continuing this type of coaching by themselves.

In a group setting, the supervisor often invites other members to help guide a colleague towards the core issue.

Rather than offering advice or direction, a good supervisor helps the practitioner by exploring what’s happening internally, defining the appropriate boundary for the practitioner and the client, and determining what actions might correct the situation. Practitioners often increase their tolerance and understanding and learn to manage their feelings.

Essential Elements of Helpful Supervision

1. Effective supervision encompasses an interpersonal climate of reasonable safety that fosters warmth, respect, honesty, and support, allowing a trust-based relationship to develop. A collaborative approach, with mutual empowerment and openness to learning, is valued by all participants. A supervisory contract establishes a sense of safety and clear boundaries. It defines and clarifies expectations, including time commitments, confidentiality, and learning goals.
2. Supervision works best when the supervisory contract is specific, and all parties communicate directly and clearly with each other. Successful supervisory experiences include feeling that "mistakes" are an inevitable and essential part of the learning process. The practitioners' comfort and willingness to self-disclose often deepen over time.
3. Supervisors encourage practitioners to creatively answer their own questions and facilitate the development of a competent professional.

How to Find a Supervisor

A technical supervisor could be a teacher or a therapist with many years of experience in the same modality. They must be an effective educator. The best source may be a massage school in your community.

Finding a clinical supervisor is often more complex, particularly in areas where few therapists are familiar with somatic practices. Psychotherapy disciplines have the longest tradition of providing clinical supervision; thus, psychotherapists are fruitful sources. Social workers, psychologists, counselors, and psychologically savvy massage therapists will likely be good supervisors.

A potentially more feasible and cost-effective approach would be to train a group of lead therapists within the organization, selected based on specific criteria, in conducting supervision.

Interviewing Potential Supervisors

You are purchasing a professional service that may cost up to several hundred dollars per hour. You should investigate and choose wisely. This interview could be conducted online and include participants from across the country.

Arrange an interview after an initial screening phone call to determine whether the supervisor is available, cost-effective, and a potential match. During the interview with the prospective supervisor, you can sit down and speak with them and form an impression of how they think and work.

Before the meeting, prepare questions you would like answered, such as the following:

1. What has been your experience as a supervisor? How long? For what disciplines?
2. Have you ever worked with or supervised massage and bodywork practitioners?
3. Have you received a massage and/or bodywork? How often?
4. How do you describe your approach as a supervisor?
5. What is your fee for supervision? For how much time?
6. Please explain the limits of confidentiality with regard to supervision.
7. After gaining permission, can you provide me with the names of a few individuals you've supervised who would be willing to share their experiences?

These guidelines are designed to help you secure the best supervisory assistance for your situation. Look elsewhere if you feel uncomfortable during the initial meeting with the prospective supervisor for any reason, even if it's difficult to articulate why.

Peer-to-Peer Group Supervision

A peer support group is a group of people in similar careers who come together to offer support and share struggles, challenges, and successes. When successful, peer group supervision can surpass other forms of supervision in terms of individualized learning, intimacy, support, and a sense of belonging that anchors their professional work. Many peer groups opt to have a clinical supervisor help set up the group and moderate their meetings regularly, such as quarterly or semiannually. This supervisor may also be a suitable contact for individuals who require additional support.

CLIENT BILL OF RIGHTS

The purpose of this document is to provide you with a better understanding of sexual misconduct in the health and wellness field. It outlines your consumer rights and explains how to protect yourself if your rights are violated.

In this document, the term "client" refers to anyone who receives services for therapy or healthcare. Sexual misconduct is defined as including sexual touching of the client by the practitioner and/or any activity or verbal behavior that is sexual. Sexual contact consists of a wide range of behaviors besides intercourse; it includes any behaviors that aim to arouse sexual feelings. They range from suggestive verbal remarks to erotic hugging and kissing, in addition to direct sexual contact. The behavior need not be coercive to be inappropriate.

You Have a Right To:

1. Undress to your comfort level, whether you prefer to leave your undergarments on or remove some or all of your clothing. The therapist must leave the room for you to undress.

2. Tell the therapist to adjust the amount of pressure applied.

3. Ask the therapist to adjust the room's temperature, lighting level, and music volume (where possible).

4. Stop treatment at any time without being pressured to continue.

5. Expect a professional relationship with your therapist. It is also your right to report to management if you feel your therapist has crossed any boundaries, such as asking to see you outside of this work relationship, complimenting or criticizing your body, having a conversation that is sexual, asking questions that are too personal, or having an opinion about your lifestyle or relationships.

6. Expect to be treated without discrimination.

7. Expect confidentiality, subject to legal constraints.
8. Receive safe treatment free from physical, sexual, or emotional abuse.
9. Expect that the clinic and your practitioner maintain industry-standard hygiene practices.
10. Know that your genitals and female breasts will remain covered at all times during your session.
11. Receive treatment only on the agreed-upon areas.
12. Never receive treatment on the genitals.
13. Never receive treatment on the female breasts unless legal, with a specialty-trained therapist, for good reason, and with written informed consent.
14. Question any action that you perceive as inappropriate, invasive, or sexual.
15. Terminate treatment at any time if you feel unsafe or threatened.
16. Report unethical or illegal behavior.
17. Expect a swift response from the clinic/spa to your report of inappropriate behavior.
18. Receive assistance in contacting the appropriate authorities, or if you are not comfortable doing so, the authorities will be contacted on your behalf.
19. Know that during an investigation of inappropriate behavior, the practitioner in question will be suspended.

Possible Actions If Inappropriate Behavior Occurred

If you believe any of your rights have been compromised or violated, you may speak directly with the practitioner (if you are comfortable doing so). Otherwise, talk to management. If you don't receive a satisfactory response, you should report the complaint to the following: the massage licensing authority, law enforcement (if the action violated the law), and/or the Professional organization (if applicable).

Licensing Boards have the authority to discipline an individual (for example, revoke a license) if that person violates professional guidelines. No matter how serious your complaint may be, the Boards have no legal authority to award monetary damages or to prosecute someone criminally. Professional organizations also receive complaints about their members. The three major organizations are the American Massage Therapy Association (AMTA), the Associated Bodywork and Massage Professionals (ABMP), and the National Certification Board for Therapeutic Massage and Bodywork (NCBTMB).

Legal Recourse

Another course of action is to pursue legal action. Be aware that there are time limitations for civil and criminal actions.

Criminal Action: If it is determined that a criminal action occurred, criminal prosecution may be pursued through the Office of the District Attorney in the abuser's county. The District Attorney's Office may also have a victim advocate who can assist you and answer questions.

Civil Action: A civil lawsuit may be a means to obtain monetary compensation for losses incurred and damages suffered. Attorneys specializing in these cases can often be found through victim advocacy groups.

Remember, if you feel that you have been sexually assaulted in a therapeutic relationship, you can get help. We encourage you to seek help as an essential part of your healing process.

This document was prepared by the Massage Ethics Council.

SEXUAL MISCONDUCT COMPLAINT PROCEDURE EXAMPLE

- When someone in reception receives a complaint of sexual misconduct directly from a client, the first step is to call a manager. If this were a case of sexual assault, the client is asked if they want the company to call the police. If the client does not wish to contact the police, proceed with the internal investigation.

- If a client reports sexual misconduct by a staff member to another staff member, the reporting staff member should recommend that the client report the incident to management. If the client refuses, inform them that you must report this incident to management (and possibly the state massage board) as soon as the session concludes. It is recommended that a reporting protocol be established for this situation and that all employees be trained on the protocol.

- The manager offers to guide the client to a private room where they can write a description of what occurred, sign, and date the document. If a manager is unavailable, the receptionist can perform this step.

- After a complaint, the therapist should be informed and suspended pending the outcome of the investigation.

- The manager completes an incident report within 24 hours.

- Inform the owner/corporate office immediately. If this is a franchise, the franchisor should also be notified of any sexual misconduct complaint at the facility. The franchisor should have a straightforward process in place to ensure the franchisee follows all steps.

- Ideally, have a third-party agency handle the investigation. If not, see the following:

    - The owner or manager should speak with the client as soon as possible after the incident is reported. This is best done in person at a location of the client's choosing, such as a nearby coffee shop. Clients who were molested will most

likely not want to return to the spa or clinic. This approach has been shown to reduce lawsuits and misunderstandings.

- Encourage the client to report the incident to the police. If the client calls the police or requests that you contact the police, cooperate fully. Provide the police with a copy of the Incident Report, including the client's statement, and all documentation from the session.
- After an incident, send a standard follow-up survey to all clients seen by the accused therapist during the previous six months.
    - Additional resource: Sample Client Survey
- If the allegations are accurate, the therapist's employment should be terminated.
- Report the therapist to the massage licensing authority.
- If you are a member of the National Association of Spa Franchises (NASF), report the incident to their Employment Verification System (EVS).

PREDATORY CLIENTS

Nearly every female massage therapist — and many male massage therapists — report at least one incident involving a client who crossed a line. Yet formal reporting remains rare. Therapists stay silent because they fear not being believed, worry about retaliation from employers who prioritize client retention over staff safety, or simply don't know that reporting is an option. The reported data almost certainly understates the true prevalence.

In reported cases, the majority of the time, the client is a man who wants something sexual to happen during their massage with a female therapist. There are also some female predatory clients as well.

Who is this person? Why are they doing something so inappropriate?

Research suggests most sexual predators are emotionally troubled individuals who have distorted thinking. For the predator, it's about power and control to dominate, not about sex. They are good at compartmentalizing, which means they do not consider the consequences of their actions on others or themselves. Predators are often charming and skilled at lying and manipulating others. Most predators believe that anyone they find desirable will be attracted to them. Predators think about sex a lot of the time, and they seek out potential targets.

Four factors have been identified as features of sexual predators.[1]

1. The ability to have power and control over others
2. The belief that they are uniquely attractive
3. The capacity for deception
4. The ability to compartmentalize – they are aware of what they are doing with no regard to the consequences

[1] Inside the Criminal Mind: The Thinking Processes of Sexual Predators, by Stanton E. Samenow, Ph.D.

Grooming

First, predator clients test the boundaries of their chosen therapist to see whether they have weak boundaries and defenses. Sometimes it starts with a compliment or an invitation to meet outside of the professional setting. At other times, it's creepier, with moaning sexual sounds on the table, the offer of a big tip for doing something more satisfying, or an explicit ask to massage the "full body". This is code for "I want something sexual."

What happens inside the massage therapist's mind and body when this overture arrives? It could be a freezing response, anger, embarrassment, or confusion about what to do. This is where good training comes in.

A massage therapist has three opportunities to screen out predatory clients: before, during, and after the session.

The best time to spot a predatory client is during the booking process. Always talk to a new client on the phone. If you use online booking software, always schedule a screening call with a new client. Predators prefer anonymous online booking. A client who will not take your calls and only wants to communicate via messaging is a red flag.

During Booking

During the call, ask why they want a massage, what their goal is, why they chose you or your business, and what their experience with professional massage has been. The answers to these questions will usually screen out predatory clients; they don't want a professional massage; they want something sexual.

Therapists should also be aware of the coded language predatory clients use when looking for prostitution and not massage. Some terms include *full-body release, full-body massage, full service, extras, generous, roses, happy ending, and nuru massage*. Other red flags to be aware of include:

- Refusing to provide a last name, address, or phone number
- Insisting on cash payment or asking to be seen "off the books"

- Requesting an after-hours or unusually urgent appointment
- Asking for a photo of the therapist
- Leading the conversation with questions about draping (e.g., "Do I have to use a sheet?", "Can I just use a hand towel?")
- Flirting or expressing sexual or romantic interest during the booking call

Other deterrents include requiring clients to submit intake forms in advance, requiring prepayment by credit card for new clients, and clearly posting a zero-tolerance policy both online and at the office. Illegitimate establishments almost never do any of these things.

In the Treatment Room

When a predatory client makes it to your office, they rarely begin with explicit misconduct. They start small and do deniable things: make an off-color comment, deliberately shift the drape, ask an overly personal question about the therapist's life. Then they watch the reaction. If the therapist accommodates, minimizes, or says nothing, they escalate. The number and intensity of boundary violations increase in proportion to the apparent tolerance of earlier ones. Addressing a small transgression early is almost always easier than addressing a larger one later.

In-session red flags include: deliberately removing or kicking off the drape after the therapist repositions it; drawing attention to sexual arousal or engaging in pelvic movement; requests designed to guide the therapist toward the genitals (e.g., "can you work a little lower," "can you work higher on my inner thigh?"); non-consensual touching of the therapist; and sexual jokes, explicit requests, or persistently invasive personal questions.

Addressing this behavior immediately is essential. When something in your gut feels wrong, trust it. That instinct is not an overreaction. It is a neurologically based signal, and therapists who routinely override it to avoid awkwardness pay a high price over time.

When you need to act, the Intervention Model developed by Daphne Chellos, MA (a pioneer in massage and sexual ethics) gives a repeatable, effective framework:

1. **Stop the treatment.** Remove your hands. Make eye contact. Use a firm, grounded voice — assertive, not aggressive.

2. **Re-drape the client fully.** This restores a literal boundary and removes touch as a stimulus. Do it calmly.

3. **Describe the behavior factually.** Name what occurred without editorializing: *"I noticed you've shifted the drape twice after I repositioned it." or "I notice that you have an erection."*

4. **Clarify intent.** Ask a direct question and wait. *"Tell me what's going on."* Don't answer for the client.

5. **Respond to what you heard.** For a first-time, ambiguous incident, educate: *"Sometimes clients experience arousal as a physiological response to touch. That's a normal body response, and it's never my intent for this session to create sexual arousal."* For a client who has made their sexual intent clear, end the session.

6. **End the session when necessary.** Say something like, *"I'm not comfortable with what's going on here, and it's time for you to leave."* Leave the room. Through the closed door, instruct the client to dress and exit. No further explanation is required.

7. **Secure your exit.** Always position yourself between the client and the door. If you feel physically threatened, leave the room immediately and call 911. No session is worth your physical safety.

After the Session

Whether a session ended badly or a pattern of boundary-testing only became clear in hindsight, document what occurred.

Document immediately. Write down the behavior, your response, the client's response, the time, the date, and any witnesses before you end your day. Do not rely on memory. This documentation is your primary protection if the client later files a retaliatory complaint — a common response from clients who have been refused.

Notify your employer or manager. If you work for someone else, notify your manager or supervisor as soon as possible, and definitely before the end of the workday. A written record of the incident in the employer's files protects both you and the next therapist who might encounter the same client. If you work independently, talk to a trusted colleague so you have a verbal witness to your experience.

Dismiss the client clearly. Therapists have the legal right to refuse or terminate service for reasons of inappropriate conduct. Declining based on behavior is lawful, and no proof is required. Keep the dismissal brief and neutral. For clients who have been abusive or sexually inappropriate, there is, of course, no professional requirement to provide a referral to another therapist.

If you send a written notice, keep it factual and restrained — and consult a lawyer before doing so. Here's a workable template: *"The reason I will no longer be providing massage therapy treatment is due to inappropriate behavior that occurred during your appointment on [DATE]. This behavior is not acceptable in a therapeutic setting."* Do not over-explain or apologize.

Block the client from rebooking and notify front desk staff so they aren't quietly rescheduled with another practitioner.

Know the right reporting channels. State massage boards regulate massage therapist licensees — not clients. Filing a complaint about a predatory client with your state board accomplishes nothing. For client misconduct, the correct authorities are: the police for assault (non-consensual touching of the therapist is assault in every U.S. jurisdiction) and for solicitation; and the state attorney's office for solicitation of prostitution. These are crimes, not policy violations, and they should be reported accordingly. If massage therapists report predatory clients to the police regularly, they would likely get multiple complaints against these predatory clients.

Do not name the client publicly on social media. Defamation liability is real, and public posts rarely stop predatory behavior while often creating legal exposure for the therapist.

The Rights You Already Have

The ethics codes governing massage therapy give practitioners far more authority than many realize. The NCBTMB Standards of Practice require that when a client initiates sexual behavior, the practitioner must interrupt the session. If the behavior ceases, the practitioner *may*, at their own discretion, continue or terminate. The word "discretion" is significant: no code requires a therapist to give a predatory client a second chance.

The ABMP, AMTA, and most state codes are categorical: practitioners must refrain from sexual conduct "even if the client attempts to sexualize the relationship." The moment a session is sexualized, the therapeutic contract is void.

The principle of do no harm — foundational to all manual-therapy ethics — extends to the therapist's safety. Ethics educators and professional associations are unambiguous: massage therapists are entitled to a workplace free of sexual harassment and abuse and have the right to make themselves safe and report abusers. Tolerating misconduct to preserve income is not professionalism. By the field's standards, it is an ethical failure.

What the Industry Still Needs to Do

Individual therapists should not be managing this problem alone. Responsible employers should post and enforce written zero-tolerance policies, train staff on screening and intervention, and make clear that therapists have an unconditional right to end any session without fear of retaliation.

Physical deterrents matter too. The "Attention Button" — piloted by Hand & Stone and produced by BEC Integrated Solutions — summons front-desk staff to a treatment room within 15 to 20 seconds of activation. Locations that deployed it reported measurable reductions in client misconduct incidents.

When evaluating a potential employer, ask directly: *What is your policy if a client behaves inappropriately toward a therapist? Can a therapist end a session without management approval?* An employer who minimizes the question or doesn't answer it to your satisfaction is telling you something important about how they will respond when the situation is real.

Priscilla Fleming, massage therapist, author, and teacher, writes about the stigma in the massage field so well that we would like to quote her here.

Stigma in the Massage Field

Massage related to sexuality has been around for centuries; in fact, ancient Greek doctors used to prescribe it as part of health care. Erotic massage has since moved away from the realm of health care and is illegal in most places. (It is legal only where prostitution is legal, such as in certain areas within Nevada in the U.S.) The term "happy ending" was born in 1999 when a Weekend Australian article described massage parlors as giving "guaranteed happy endings," in reference to orgasm.

That happy-ending stigma is alive today in our pop culture. We often see the trope associated with massage therapists in movies, TV shows, and other forms of media. As a society, when we discuss massage therapy, we often hear jokes about happy endings; however, these jokes are not harmless.

Establishments that engage in illicit sexual services and offer happy endings (i.e., prostitution) are often engaging in human trafficking. These jokes, and the frequenting of these institutions, contribute to modern-day slavery and put a lot of lives—both the people trafficked and legitimate massage therapists—in danger. Human trafficking is usually an aspect of organized crime syndicates, according to the International Criminal Police Organization.

According to the Polaris Project, a social justice movement fighting sex and labor trafficking, illicit fronts claiming to be massage businesses are among the most common venues for sex trafficking. In the U.S., sex trafficking is a $32 billion industry. There are estimated to be 9,000 active trafficking organizations disguised as massage parlors today, according to the Polaris Project.

Conclusion

This framework — screen before they arrive, intervene while they're in the treatment room, dismiss and document after the session — is not complicated. But it requires

preparation: knowing the code words, rehearsing the scripts, and understanding that every professional and legal right needed to act is already in place. The ethics codes don't ask therapists to tolerate harassment. They prohibit it.

Ending a session with a predatory client is not a failure of professionalism. It is not an overreaction. It is, in the most precise terms the field offers, doing no harm.

Associated resources: ABMP's CE course "Ethics: Create a Zero-Tolerance Practice" with Joyce Gauthier, Ben Benjamin's "Ethics: Preventing Sexual Misconduct," and Priscilla Fleming's "Safety and Solicitation" are all NCBTMB-approved and widely available online

SETTING A FOUNDATION TO PREVENT SEXUAL MISCONDUCT

Maintain a professional appearance and demeanor.

The therapist's appearance reflects their professional standards. Make sure that the therapist's image projects competence and doesn't sexualize them:

- Dress appropriately for the work environment. A therapist's attire isn't meant to be a distraction or a loud message.
- Avoid provocative, tight-fitting, or revealing attire, such as tank tops, short shorts, shirts that show cleavage or nipples, shirts that expose the midriff, and shirts with questionable statements or provocative images.
- Maintain good hygiene.
- Be fragrance-free.
- Keep jewelry to a minimum.

Ensure that the physical environment is professional.

The physical environment differs depending on whether the therapist is in a professional office, a home office, or doing outcalls.

a. Establish a professional space.

Be aware that sight, sound, smell, and touch all have the potential to create emotional or sexual responses. Practitioners may aim to create a very relaxing environment with a darkened room, candles, and soft music. These can send confusing messages—particularly to new clients or to people in vulnerable situations regarding their romantic relationships. Ideally, start with the room well-lit and ask clients whether they want the light dimmed or an eye pillow. Choose soothing music that isn't sensual or romantic. Use quality equipment and supplies. Consider hanging pertinent anatomical charts and other health-related posters. Limit displays of personal photos and keepsakes.

b. Home office

If the practitioner works in a home office, follow the above guidelines and comply with local ordinances (if applicable). Keep the treatment room separate from the living space (if possible) and decorate it to make it feel professional. Minimize clutter in the waiting area. Be sure the treatment room windows are covered. If possible, have a separate bathroom that's free of personal belongings.

c. Outcalls

Set up a space that feels like an office when doing home or hotel visits. Avoid working in a bedroom unless there is no other option, such as a hotel room, or if the client is severely injured or ill. Professionally display your supplies and equipment. Consider investing in a hard case on rollers that holds your supplies. Those items can be displayed on top of the case; this helps make the space look more office-like.

Business Practices

Policies: In general, it's important to have clear written policies that address the types of services offered, hours of operation, cancellation and lateness, fees, communication guidelines, what to expect during treatment, draping, hygiene, sanitation, confidentiality, and which body parts are off-limits. It's also wise to include a statement such as: "*Main Street Massage* has a zero-tolerance policy for sexual comments or behavior. If this occurs, the massage will be ended immediately, and payment in full is expected."

Policies are designed to prevent boundary crossings, but when prevention fails, the therapist must address the issue immediately as it arises. If the therapist doesn't do this, they have just given the client permission to carry on with the problem behavior, whether it's making a sexual joke or asking for something inappropriate.

Marketing Materials: Ensure a professional image in all materials. Any form of advertising, whether online or in print, opens your business to the public at large.

- Choose an appropriate business name.

- Set up separate business and personal email accounts. Make sure the business email address is professional.
- Ensure that no photos are sexually provocative.
- Use appropriate language and terminology. Avoid phrases like “full-body massage.”
- Routinely verify that your website links point to the intended destinations.
- Regularly search for your business to verify that your business isn’t linked to inappropriate sites.
- Most towns have free local publications that cover local events and feature advertising. Before agreeing to run an ad, check where it would be placed. You don’t want it next to an advertisement such as “Buffy’s Massage & Pleasure Spa.”

Social Media: Most people spend a significant amount of time on social media. Here are some things to consider:

- Create separate personal and business pages/accounts on all platforms.
- Only allow friends and family to access the therapist’s personal pages/accounts.
- Ensure that content and photos are appropriate.
- Remember, once something is on social media, it’s there forever.

Client Interactions

Keep communication professional and not personal. Limit self-disclosure, as this can blur boundaries. Avoid careless comments that could be misconstrued as flirting or sexual innuendo. In most massage sessions, there is minimal conversation. Also, never discuss charged topics, even if the client brings them up, such as politics, money, sex, or religion.

It’s essential to establish clear boundaries. If a client touches the therapist, makes a sexual comment or joke, or asks for something sexual, then the therapist must pause to firmly establish the boundary. If the client’s behavior doesn’t change, then it’s appropriate to end the session. Keep in mind that not everything is as serious as a sexual assault, but it could be dismissal-worthy.

Dual relationships should be avoided. A dual relationship occurs when a therapist has a second, distinct relationship with a client, such as a friend, employee, business partner, or romantic relationship, in addition to the primary professional one. These relationships are

generally not advisable because they could impair the professional's judgment or increase the risk of harm or exploitation to the client.

Dual relationships may be unavoidable and require careful management to protect the client's interests, especially in small communities or during specialized training. Failure to navigate the risks involved in a dual relationship can result in personal or professional harm. Dual relationships can be a gateway to inappropriate behavior and embolden a predator. Conscious consideration of the potential risks is essential before engaging in a relationship of this nature; if so, clinical supervision is strongly recommended.

Professional Documentation

In addition to standard treatment notes, if a client is sexually inappropriate, document it immediately. Speak to a manager/supervisor (if you have one) or a trusted colleague. This type of documentation is particularly important in the event of a criminal or civil complaint.

Steps to Take with New Clients

Proper screening should be conducted before the client arrives. Always call new clients, even if they book online. Always call new clients, even if they book online, to verify they are a legitimate client, clarify what they're looking for (they might want a technique you don't offer), and briefly review key policies. Once a client arrives, do the following:

- Review policies.
- Provide an orientation.
- Complete and review the Health History.
- Create a treatment plan depending on the client's goals.
- Have clients sign an Informed Consent document.
- Describe the disrobing and draping protocols
    - Associated resource: Draping and Touch Recommendations
- Instruct the client on how to lie on the table (prone or supine), the anticipated sequence of the work, and any other pertinent details.

Tips to Reduce Sexual Boundary Crossings by Clients

Sexuality is a natural part of the human experience. By recognizing this fact, therapists can consciously choose to create a professional treatment space, to maintain clear boundaries, and to deal ethically and compassionately with unintended sexual responses. They can also protect themselves and their clients from sexually inappropriate behavior. By understanding the physical, social, and cultural dynamics and applying behavioral strategies, therapists can enhance their effectiveness as a safe, healing presence in the treatment setting.

- Conduct a thorough client intake interview: ask what sort of work they are looking for, what their problem is, and how they heard about the practice.
- If a therapist doesn't feel safe, take whatever steps are necessary to protect themselves: it's best to err on the side of caution.
- Ensure all intake forms and establishment websites clearly state that sexual inappropriateness results in immediate termination of service and full payment for time.
- Confirm that the client has read, signed, and agrees to the sexual conduct policy.
- As part of a client information document, include statements that address what areas of the body are never massaged.
- Don't allow any sexual conversation.
- Limit personal self-disclosure.
- Don't seek emotional support from clients.
- Don't ask clients for favors.
- Avoid seeing clients after regular hours.
- Be cautious when accepting gifts.
- Be mindful of body contact during the session.

- Always use proper draping techniques. Draping is intended to protect the client's safety, modesty, and comfort. It is also a way for the therapist to protect themselves from misunderstandings.
- Be mindful when discussing a client's body. Anatomical terms are far less suggestive and less offensive than layperson's terms or slang words.
- Don't engage in any romantic relationships with clients.
- Be aware of transference and countertransference.
- Be careful when working in sensitive areas, such as near the breasts, groin, upper thigh, and gluteal region.
- Immediately address any sexual overture from a client.
- Always address the client's sexual arousal and erections; don't ignore them.
- Put up a visible camera system in the reception area.
- If you work alone, carry mace or other personal protection equipment, and keep your phone (volume off) and keys on your person.
- Establish a procedure to alert colleagues or staff to a potential problem. For instance, if doing outcalls, phone a colleague or friend (in front of the client). Tell them the location, estimated finish time, and that they will receive a call when the session is over.

Responding to Inappropriate Client Behavior

How should a practitioner respond when a client has an erection during the session? It depends on the situation, the client, and your comfort level. Some practitioners wrongly believe that if a person is having an erection, the practitioner must immediately end the massage. There is the misconception that for a man to get an erection, he must be deliberately sexualizing the massage and either be mentally or physically stimulating himself. Erections may occur as a natural physiological response to being touched. When an erection occurs, it can make both client and practitioner feel vulnerable. If you respond

with unnecessary disapproval and fear, you're doing an already embarrassed client a disservice. Yet, you have to be on guard against the threat of a disrespectful, abusive client. It's a tricky situation that requires tactful nuance.

If a client makes an inappropriate sexual suggestion during the session, respond to it immediately. Hesitating will give the client the impression that you are open to the idea. It is up to you to address it in the moment; otherwise, you have given them the impression that you condone the behavior and reinforced the idea that it is okay to try something with the next unsuspecting therapist they work with.

Associated resource: How to Prevent False Accusations

If the client is being obviously aggressive—physically stimulating themselves, grinding on the table, or trying to grab you- end the session immediately. You can say, "I'm not comfortable working with you anymore. This session is over. I'll wait outside while you get dressed."

HOW TO PREVENT FALSE ACCUSATIONS

This information focuses specifically on ethical issues related to false sexual complaints lodged against therapists. Any practitioner can be accused of sexually violating a client. Sexual abuse and violation issues are about power, and they cross all lines of gender and sexual orientation. Most complaints are made by female clients against male practitioners. So, men, on the whole, are more at risk of accusations. All who touch people need to be cautious about sexual boundaries, and practitioners in those groups should be especially mindful.

Examples of Actual False Accusations:

- A female client thought a male therapist had an erection because he was wearing a lotion holder, and it kept touching her hand while she was on the table with her eyes closed.
- A client made suggestive comments and physical advances toward a therapist. The therapist refused their advances. The client was offended and filed a claim that the therapist sexually harassed them.
- A therapist had a client with whom they had been romantically involved many years ago. The therapist saw the client for several sessions, and the interactions were professional. The client's current partner filed a claim with the massage board, accusing the therapist of sexual misconduct (falsely), stating they were currently having sex.
- A client was upset with the spa and took out their anger by accusing the therapist of sexual misconduct.

Steps to Take to Minimize Risks of False Accusations:

- Describe the treatment using terminology that best reflects the therapeutic aspect of the work. Realize that what is said might be interpreted differently from what is meant, and avoid language that can be sexualized.
- Get Specific Informed Consent when working in a potentially sensitive area.
- Avoid comments that could be misconstrued as flirting or sexual innuendo.
- Always use proper draping techniques.
- Be mindful of unintentional body contact during the session and avoid straying strokes or movements.
- Make sure that no clothing, hair, jewelry, or equipment (such as a massage lotion holster) touches the client's body.
- Beware of sexually provocative and emotionally disturbed clients.
- Be cautious regarding dual or sequential relationships, even if they were in the distant past.
- If a problem occurs during a session (whether initiated by the client or the therapist), immediately discuss it with the client and document it in the session notes - even if it is resolved.
- Here's a protocol developed by Daphne Chellos, a pioneer in massage and sexual ethics, for when a client makes sexual comments or gestures:
    - Pause the session and describe the client's behavior.
    - Clarify the client's intent.
    - Restate the purpose of the session.
    - Based on the client's response and intention, continue or discontinue the session.

    - Be sure to document what occurred and report it to your supervisor (if you have one).

- Engage in supervision. Get a reality check with a consultation from a trained mental health professional who can help you understand the dynamics of the situation.
    - Associated resource: Clinical and Peer-to-Peer Supervision