

CRANIOSACRAL THERAPY ASSOCIATION OF AUSTRALIA - CODE OF ETHICS

Overview

The pursuit of wholeness and well-being requires dedication, discipline and vision. The CSTAA believes in the dignity and worth of the individual human being. The CSTAA is committed to increasing physical, spiritual and emotional wellbeing.

While pursuing this endeavor, the CSTAA is committed to having its members protect the welfare of any person who may seek craniosacral therapy.

Responsibilities include competence where the CSTAA claims it, objectivity in the report of our findings, and consideration of the best interest of our members and their clients, colleagues and of society.

This Code of Ethics is a professional document containing essential principles and inherent truths which may guide members in the evolution of their personal and professional lives. In the pursuit of these ideals the CSTAA subscribes to principles in the following areas:

- 1) responsibility;
- 2) competence;
- 3) moral and legal standards;
- 4) public statements;
- 5) confidentiality;
- 6) welfare of the consumer;
- 7) professional relationships;
- 8) sexual harassment policy; and
- 9) complaint policy.

PRINCIPLE 1 - RESPONSIBILITY

In providing services whether they be teaching, research, administrative or clinical, Craniosacral Therapists maintain the highest standards of this profession. They accept responsibility for the consequences for their acts and make every effort to ensure that their services are used appropriately.

This responsibility extends to approved teachers, their assistant instructors, co-instructors, administrative staff and any other person in a position of authority or power.

- a. As approved teachers, Craniosacral Therapists recognize their primary obligation to help others acquire knowledge and skill. They maintain high standards of scholarship by presenting information objectively, fully and accurately.
- b. As clinicians, Craniosacral Therapists know that they have a social responsibility because their recommendations and professional actions may alter the lives of others. They are alert to personal, social, organizational, financial, or political situations and pressures that might lead to misuse of their influence.

- c. As clinicians, Craniosacral Therapists show sensible regard for the social codes and moral expectations of the community in which they work, recognizing that violation of accepted moral and legal standards on their part may involve their clients and colleagues in damaging personal conflicts and injure their person reputation and the reputation of the profession.
- d. Craniosacral Therapists accurately inform their clients, other healthcare practitioners and the public of the scope and limitations of their discipline. They do not medically diagnose nor prescribe. They acknowledge limitations and contraindications for craniosacral therapy and refer appropriately.
- e. Craniosacral Therapists provides clinical surroundings and treatment that insures the safety, comfort and privacy of the client.
- f. Craniosacral Therapists provide treatment only when there is reasonable expectation that it will be advantageous to the client.

PRINCIPLE 2 - COMPETENCE

- a. Craniosacral Therapists accurately represent their competence, education, training, and experience. They claim as evidence for educational qualifications only those qualifications obtained from institutions acceptable under the standards set forth by the CSTAA.
- b. As teachers, Craniosacral Therapists perform their duties on the basis of careful preparation so that their instruction is accurate, current, and scholarly.
- c. Craniosacral Therapists recognize the need for continuing education and are open to new procedures and changes in expectations and values over time. Craniosacral Therapists consistently maintain and improve their professional knowledge and competence through regular assessment of personal and professional strengths and weaknesses and by continuing education and training in approved programs of the CSTAA.
- d. Craniosacral Therapists recognize differences among people, such as age, sex, socio-economic, and ethnic backgrounds. When necessary, they obtain training, experience, or counsel to assure competent service or research relating to such persons or conditions that clients report.

- e. Craniosacral Therapists recognize that personal problems and conflicts and stress may interfere with professional effectiveness. Accordingly, they refrain from undertaking any activity in which their personal problems are likely to lead to inadequate performance or harm to a client, colleague, student, or any other associate. If engaged in such activity when they become aware of their personal problems, they seek competent professional assistance to determine whether they should suspend, terminate, or limit the scope of their professional activities.
- f. Craniosacral Therapists avoid deliberately provoking an emotional response in their clients with the use of psychological techniques and/or other body centered psychotherapies without an accredited academic degree or appropriate training.

PRINCIPLE 3 - MORAL AND LEGAL STANDARDS

- a. As teachers, Craniosacral Therapists are aware of the fact that their personal values may affect the selection and presentation of instructional materials. When dealing with topics that are controversial, they recognize and respect the diverse attitudes that students may have towards such materials.
- b. As employees or employers, Craniosacral Therapists do not engage in or condone practices that are inhumane or that result in illegal or unjustifiable actions. Such practices include but are not limited to those based on consideration of race, handicap, age, gender, sexual preference, religion, or national origin in hiring, promotion, or training.
- c. Craniosacral Therapists are aware of their need for personal care and ongoing psychotherapy when working with psychological issues arising in their private practice between themselves and their clients. Craniosacral Therapists strive to improve themselves not only through psychotherapy but also psychological supervision from a qualified mental health counselor, group support, body centered therapy and especially continuing education.
- d. Craniosacral Therapists adhere to and follow all policies, guidelines, regulations, codes and requirements promulgated by local, state and national authorities governing their legal right to touch their clients.
- e. Craniosacral Therapists receive informed consent for every specific technique or modality they intend to use with a client. This includes the responsibility of informing the client during a session when the original contract has changed. Informed consent depends strongly on mutual trust, empathetic and compassionate attitudes and behaviour as well as the capacity for clear communication.
- g. Craniosacral Therapists refuse any gifts or benefits in excess of acceptable gratuity which are intended to influence a referral, a decision or a treatment

PRINCIPLE 4- PUBLIC STATEMENTS

- a. When announcing or advertising professional services, Craniosacral Therapists may list the following information to describe their services: name, highest relevant academic qualification earned from an accredited institution, relevant certifications or diplomas from CSTAA approved trainings, date, type, and level of certification or professional membership status in the CSTAA, address, telephone number, office hours, a brief listing of the type of modalities offered, and an accurate presentation of fee information. Additional relevant or consumer information may be included if not prohibited by other rules and regulations in an individual's locale. CSTAA may not use the reference to being members of CSTAA if they are not current financial members of CSTAA.
- b. In announcing or advertising the availability of craniosacral therapy products, publications, or services, Craniosacral Therapists do not present their affiliation with any organization in a manner that falsely implies sponsorship or certification by that organization. Craniosacral Therapists do not make public statements that are false, fraudulent, misleading, deceptive or unfair. They do not misinterpret facts or make statements that are likely to mislead or deceive because in context it makes only a partial disclosure of relevant facts, especially comparing a style of craniosacral therapy to another with statements like "less invasive," "more forceful," or other statements that make another style of craniosacral therapy appear less than or the therapist(s) in question as more than, etc.
- c. Craniosacral Therapists do not use testimonials from clients regarding the quality of their clinical services; nor do they use statements intended or likely to create false or unjustified expectations of favorable results; nor do they use statements implying unusual, unique or one-of-a-kind abilities; nor do they use statements intended or likely to appeal to a client's fears, anxieties, or emotions concerning the possible results of failure to obtain their services such as, "Do you want your fibromyalgia to drag on forever?" or "Without this kind of treatment you may experience more symptoms," etc.
- d. Announcements or advertisements for classes, sessions or clinics give a clear statement of purpose and a clear description of the experiences to be provided.
- e. The education, training, and experience of the staff members are appropriately specified. Craniosacral Therapists associated with the development or promotion of craniosacral therapy devices, books, or other products offered for commercial sale make reasonable efforts to ensure that announcements and advertisements are presented in a professional and factually informative manner.
- f. Craniosacral Therapists are guided by the primary obligation to aid the public in developing informed judgments, opinions, and choices.

- h. As teachers, Craniosacral Therapists ensure that statements in catalogues and course outlines are accurate and not misleading, particularly in terms of subject matter to be covered, basis for evaluating progress, the nature of course experiences and who is teaching the course. Announcements, brochures or advertisements describing workshops, seminars, or other educational programs accurately describe the eligibility requirements, educational objectives, and the nature of the materials to be covered. These announcements also accurately represent the education, training, and experience of the Craniosacral Therapists presenting the programs and any fees involved.

PRINCIPLE 5 - CONFIDENTIALITY

- a. Information obtained in the classroom, clinic or consulting relationships or evaluative data concerning children, students, employees, and others, is discussed only for professional purposes and only with those clearly concerned with such and with the client's permission. Written and oral reports present only data pertaining to the purposes of the evaluation, and every effort is made to avoid undue invasion of privacy.
- b. Craniosacral Therapists who present personal information obtained during the course of professional work in writings, lectures, or other public forums shall either obtain adequate prior consent to do so or adequately disguise all identifying information.
- c. All classroom processes are considered confidential and all staff, instructors and students shall honour and maintain the confidentiality of the classroom.
- e. Craniosacral Therapists respect the client's right to refuse, modify or terminate treatment regardless of prior consent given. Craniosacral Therapists promote active verbal input by the client. Consent for treatment may be withdrawn anytime at the client's request.
- f. Craniosacral Therapists respect the client's boundaries with regards to emotional expression, beliefs, and reasonable expectations of professional behaviour. Craniosacral Therapists respect their client's autonomy. The same is true for teachers of craniosacral therapy and their students.

PRINCIPLE 6 - WELFARE OF THE CONSUMER

- a. Craniosacral Therapists are continually cognizant of their own needs and of their potentially influential position with clients, students, and subordinates. They avoid exploiting the trust and dependency of such persons. Craniosacral Therapists make every effort to avoid dual relationships that could impair their professional judgment or increase the risk of exploitation. Examples of such dual relationships include, but are not limited to, socialising, doing research with, treating or engaging in a fiduciary relationship with employees, students, supervisees, close friends, or relatives.
- b. Sexual intimacies with clients are unethical. Hiring a student, socializing with students, hiring family members are examples of dual relationships.

- c. Teachers may not do private sessions with students during a training period, or in-between training segments unless otherwise required as a prerequisite to the training itself.
- d. Craniosacral Therapists have the right to refuse to attend prospective clients. However once accepted, they owe their clients complete loyalty, care, attention, and integrity. Craniosacral Therapists strive to complete all necessary sessions with their clients. They will discontinue services only when self respect, dignity, or other good cause requires this action.
- e. Craniosacral Therapists may terminate a clinical, teaching, or consulting relationship when it is reasonably clear that the consumer is not benefiting from it. They offer to help the consumer locate alternative sources of assistance.

PRINCIPLE 7 - PROFESSIONAL RELATIONSHIPS

- a. Craniosacral Therapists understand the areas of competence of related professions. They make full use of all the professional, technical, and administrative resources that serve the best interest of their clients. The absence of formal relationships with other professions and professional workers does not relieve the craniosacral therapist of the responsibility of securing for their clients the best possible professional service, nor does it relieve them of the obligation to exercise foresight, diligence, and tact in obtaining the complementary assistance needed by clients.
- b. Craniosacral Therapists know and take into account the traditions and practices of other professional groups, especially in the medical and osteopathic community and they work and cooperate fully with such groups. If a person is receiving similar services from another professional, Craniosacral Therapists do not offer their own services directly to such a person. If a craniosacral therapist is contacted by a person who is already receiving similar services from another professional, he or she carefully considers that professional relationship and proceeds with caution and sensitivity in regards to the therapeutic issues as well as the client's welfare. The craniosacral therapist is obligated to discuss these issues with the client so as to minimize the risk of confusion and conflict.

- c. When Craniosacral Therapists know of an ethical violation by another craniosacral therapist, and it seems appropriate, they initially attempt to resolve the issue by bringing the behaviour to the attention of the therapist. If the misconduct is of a minor nature and/or appears to be due to lack of sensitivity, knowledge, or experience, such an informal solution is usually appropriate. Such informal corrective efforts are made with sensitivity to any rights of confidentiality involved. If the violation does not seem amenable to an informal solution, or is of a more serious nature, Craniosacral Therapists bring it to the attention of the CSTAA Ethics Committee.

- e. As Craniosacral Therapists, the client is considered the best and final authority about their own welfare. Craniosacral Therapists seek at all times to further that understanding; at no time do they endeavour to assume that function for themselves. When a client is not competent to evaluate the situation (for example, in the case of a child), Craniosacral Therapists inform the person responsible for the client of the circumstances, which may influence the relationship. Craniosacral Therapists use informed consent at all times.

PRINCIPLE 8 - SEXUAL HARASSMENT POLICY

CSTAA and its approved teachers and members reaffirm their commitment to the maintenance of study and work environments free of inappropriate and disrespectful conduct of a sexually harassing nature. This includes all Craniosacral Therapists and their relationships with their clients as well as assistants, co-instructors, administrative staff or others in a position of authority and power. Sexual harassment of any member of the CSTAA community by another or with any client or student of a craniosacral therapist is damaging and furthermore may be interpreted to be in violation of the Sexual discrimination act –which could lead to prosecution under that act.

The CSTAA has a zero tolerance of sexual harassment policy.

It is the policy of CSTAA, that no member of the CSTAA community may sexually harass another person. Anyone who violates this policy will be subject to disciplinary action which may include suspension or termination. Complaints of sexual harassment should promptly be reported to the office of the CSTAA. Every effort will be made to resolve the problem on an informal basis in such a way as to preserve the reputation, confidentiality and integrity of every person involved. Disciplinary action will be taken toward the harasser if a complaint is determined to be valid. Complaints found to be motivated by the malicious intent of the person claiming to have been harassed rather than actual harassment will result in disciplinary action towards the accuser.

Sexual harassment refers to behaviour which is not welcome, which is personally offensive, which debilitates morale, and which interferes with academic or work effectiveness of the receiver. It is usually imposed on a person in an unequal power relationship through abuse of authority but may also occur from friends and colleagues.

Central to this concept is the use of implied rewards or threat of deprivation in a coercive attempt to solicit sexual attention. Unwelcome sexual advances, requests for sexual favours or other verbal or physical conduct of a sexual nature constitute harassment when:

- a. Submission to such conduct is made, either explicitly or implicitly, a term or condition of an individual's employment or academic success;
- b. Submission to, or rejection of such conduct by unreasonably interfering with an individual's work or academic performance or creating an intimidating, hostile, or offensive working, clinical, or study environment. It is debilitating to the recipient's morale. Federal law states that "sexual harassment is clearly unwelcome by any reasonable person."

PRINCIPLE 9 - COMPLAINT POLICY

- a. Complaints shall be submitted in writing to the office of CSTAA and shall include the name, address and phone number of the person submitting the complaint.
- b. When there is a complaint against a member of the CSTAA community with respect to the Standards for Practice, Code of Ethics or any other matter, the CSTAA pledges to respond to that complaint without delay and in a spirit of fairness and compassion for all parties. The CSTAA does not consider that punitive action is the most just or efficacious form of discipline, seeking rather to heal the dispute and find ways of resolving the conflict between the two parties. The CSTAA recognizes that competition, mistrust, or the spreading of rumours destroys the spirit of kindness and union which is the heart of any human association. Whenever possible, students, staff and approved CSTAA instructors will be given a single warning in writing prior to an official notice of dismissal.