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Professional Boundaries Statement - Dominic Davies

Providing psychotherapy services to people in the pansexual, fetish and gay BDSM/Kink communities, when I am as visibly involved as I am, raises questions about professional boundaries. They may need creative solutions, that adhere to underlying ethical principles, while being structured in somewhat different ways, that are unique to the situation.

Being actively involved in the BDSM lifestyle is my strongest credential as a kink aware therapist. I qualify as *Kink Knowledgeable*, not just kink friendly or *Kink Aware*. Those are the three levels of expertise used in the Kink Aware Professionals (KAP) Directory, hosted by the National Coalition for Sexual Freedom. I am actually more knowledgeable, because those definitions do not require involvement in the lifestyle.

More personally, embracing and expressing my kinky side is too important to my identity and health at this point, to want to pull back significantly from my current level of involvement.

The easiest way to think about these boundary issues, is to compare it to practicing therapy in a small town, rather than in large cities, the latter providing much more anonymity, which makes strict separation between professional and personal/community life more possible. In a small town, a therapist is likely to know people both before and after they are clients. During the course of therapy, the client and therapist are likely to see each other, perhaps often, at church, in the grocery store, the post office, on the local arts board, or wherever.

In the BDSM/kink communities, there is also the complicating element of play, often public, and generally considered erotic ... though very often without explicitly sexual acts as part of the scene.

The following are preliminary guidelines, that may get altered as experience dictates. If that happens, it will almost always mean that they become stricter, not more relaxed.

Confidentiality:

This is likely to be the major concern of potential clients. It is also a central element in professional codes of ethical behaviour, as well as statutory requirements. It is a value I personally feel strongly about.

- All of the usual safeguards for confidentiality and secure record keeping will be strictly adhered to.
- Every client will receive, as required, a statement about their rights to confidentiality, as well as identifying the few exceptions that may be mandated by law.
- What is said in therapy, or other professional interactions, will not be shared with anyone else, without a signed release of information, or in the rare instances mandated by law and/or court order.
- It almost goes without saying that I will not out anyone's kinky interests or activities. That is generally expected and adhered to in the community as a whole, in any case.
- If we meet in public, I will take my cue from how you acknowledge me, and/or what we have talked about and agreed upon. Otherwise, I may make eye contact, smile or nod, but not go beyond that. There are all kinds of ways that we might have become casually acquainted, other than our actual professional relationship. However, if you identify me to others as your therapist, it will be hard for me to deny it. Of course, I still will not talk about what we are working on.

Friends and Acquaintances:

There are prohibitions against dual relationships. Generally this refers to romantic relationships, sexual activity, and being good friends outside of the therapy relationship. It might also extend to some business relationships. And it includes family members, or significant others of either friends or clients.

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- If we already know each other well, and if either of us considers the other a good friend, I will not take you on as a paying client. In many cases, schedule permitting, I will be glad to talk about some of the same issues, as friends, over coffee.
- If we are merely acquaintances, including *FetLife/Recon* friends, but do not know each other well, it may be appropriate to work together as therapist and client. We will discuss the implications of any prior interaction and knowledge of each other, as well as how it may limit our friendship in the future.
- In between good friends and casual acquaintances, there is quite a bit of grey area. We would take even more time to discuss prior interaction, and how the transition to a defined professional relationship may or may not work. This is the kind of situation that small town practitioners likely have to deal with. In a city, some therapists may choose never to take on a client they have known previously.
- If we have been play partners on an ongoing basis, I will treat that as a good friendship, and I won't see you formally as a client. If we played only once, very casually and briefly, and at least a year ago, we can talk about what it did and did not mean to each of us, and whether it will adversely affect developing a proper therapy relationship. If we engaged in a public play scene in a club, it will be less problematic than if we'd had a lengthy scene in private, which would be interpreted as a more sexual and/or a more cathartic, power exchange experience. In that case, if a professional relationship would be appropriate at all, I will probably wait at least two years, rather than one, before considering it, and I am more likely to refer you to a colleague.

Public Play:

- In general, nowadays, I rarely play in public. If we have previously witnessed each other in scenes at parties and other public events, particularly if they involved nudity, sex, extreme pain, humiliation or

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emotional intensity, we will need to discuss whether and how that might affect working together.

- If you become a client, we will agree to share with each other any plans to attend specific public play events. After talking about it, if we still decide to go to the same one, we will set some rules for the event, such as agreeing not to watch each other's scenes. The rare exception to that would be if a client requests me to observe a scene, which is directly related to something they are working on in therapy, so I can better understand the issue, and/or be helpful in a more specific way. The type of scene, the therapeutic issues, and other interpersonal dynamics, would determine how much discussion and preparation we would need to do before that might occur.

- If you are in need of therapy ...

... and would consider doing that work with me, I hope you will raise any questions and concerns you may have, whether covered here or not. I want to be able to help you, and others in the community, in a safe and comfortable way. Once that kind of trust is established, we can work together, so that you can reach your full potential, according to your own definitions and goals. It will often be the case that clients come to me for issues and problems that are not all that kink related. But they don't want to have to hide that part of their lifestyle, and they don't want to spend a lot of time educating their therapists on the basics of BDSM and kink. You still get to explain what it all means to you, as a unique individual, which will take time and effort enough.

I welcome any feedback, questions, and concerns, that prospective clients, and others in the community, may need or want to share with me.

Dominic Davies

Psychotherapist and Clinical Sexologist