



# Code of Conduct and Ethics

Effective 1st July 2017  
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EFT International (formerly known as AAMET International) is a voluntary, not-for-profit association.

## Scope of This Code

This code defines the behaviour, focus, commitment and integrity the association expects from all its Practitioner, Trainer and Student members in their ongoing personal and professional interactions and in their relationships, where applicable, with:

- the association
- their clients, paying and non-paying
- their trainees (students)
- their mentees
- their professional colleagues
- the public

## Ethical Principles

EFTi is committed to advancing and upholding the highest standards of education, training, professional development and professional behaviour of practitioners of Emotional Freedom Techniques (EFT), and thereby promoting the skilful, creative and ethical application of EFT.

EFTi has five core organisational values, which underpin everything it does:

- 1. Integrity.** We do what we say we do. We do not over promise. We are open, honest, and account for our actions. We are ethical and always strive to do the right thing for our members and their students and clients. We have a Code of conduct and Code of ethics, which defines the behaviour, focus and commitment, which our association expects from all its members.
- 2. Compassion.** We respect people and treat them without prejudice. As a humanitarian association we promote human welfare consistently and reliably.
- 3. Excellence.** We are a learning organisation, committed to high-quality professional and safe standards for our association and our accredited members.

**4. Evidence-based.** We believe that robust science-based EFT research is the route to advancing EFT, bringing it into mainstream awareness and usage around the world. We are the international voice for EFT science and we support and make available EFT research to all.

**5. Collaboration.** We work with our members and others to support safe, high quality care and public access to EFT resources.

## 1. Conduct and Behaviour

### 1.1 General Conduct

- EFTi members must not behave in any way that could bring EFTi or EFT into disrepute or which undermines confidence in EFTi and/or EFT
- Members should respect other medical and health care professionals (e.g. *not* challenge a medical diagnosis given to a client, unless otherwise medically qualified so to do)
- Members should make a complaint about another EFTi member or other healthcare professional only if they believe in good faith that such a complaint can be substantiated, and then only through appropriate channels such as the EFTi Ethics Committee for fellow EFTi members, or other relevant bodies for non-EFTi members

### 1.2 Professional Development

- All EFTi members who are working with clients, trainees or mentees are required:
- To keep up to date with developments in the energy psychology field related to current research, developments and understanding of EFT
- To meet the current EFT International Annual CPD and Mentoring Requirements and to act on developmental points identified through mentorship
- To keep up to date with changes in EFTi regulations through regular engagement with the website and communications
- To inform EFTi if there is a complaint made about them to any other organisation

### 1.3 Personal Development

Personal development is a highly individualised activity and encompasses multiple aspects of physical, mental, and emotional health as self-determined. As a member of EFTi, individuals agree:

- To actively promote their own wellbeing by establishing and maintaining an appropriate self-care programme. Clearing unresolved issues as they arise can be done alone, or with another practitioner, or with a peer or peers. EFTi supports the practice of regular practitioner swaps
- To actively promote their own professional development by a commitment to act on insights gained through mentorship and CPD learnings

- To be aware of the impact of their own emotional state on their work with clients and trainees and take appropriate action (including consultation with a mentor and temporary suspension of client work) to address this where/when necessary
- To be aware that working with clients, mentees and trainees may trigger unresolved issues for the practitioner. Clearing them as they arise can be done alone, or with another practitioner, or with a peer or peers. If a practitioner is uncertain about the best way forward it is recommended that they discuss it with their mentor
- To take responsibility for working only within their areas of competence and to refer on where necessary, managing that process to minimise disruption or damage to the client

#### **1.4 Trauma**

EFT gives practitioners working with trauma some protection against secondary traumatization, but it cannot be guaranteed to eliminate all the risk of the potential effects of distressing stories and images shared by clients. Practitioners need to take action where necessary (e.g. using EFT or other self-care strategies) to ameliorate the impact of clients' traumas, bringing it to mentoring, and seeing a therapist if there is a need

Working with severe trauma requires special training and understanding for the practitioner. Please see the checklist in the appendix to help you to identify if your experience matches that which we deem as necessary

## **2. Working Professionally**

All EFTi members, including students on practise placement, who are working with clients, mentees or trainees are required:

#### **2.1 Insurance**

- To have professional indemnity insurance and to check that it, or the insurance they have on their premises, includes personal injury cover for clients, mentees and trainees. Trainers and mentors need to ensure that their insurance covers them as trainers and mentors, and not only as practitioners.
- To ensure that their insurance cover is valid for their clients' locations as well as their own (e.g. in instances where the practitioner is working via the Internet with clients in countries other than the one in which they themselves are based). An alternative, and probably better, option is to contract with the client that regardless of their location, any dispute will be resolved under the laws applicable in the geographical location of the practitioner

#### **2.2 Legislation**

Legal Issues – As far as is possible, to make themselves aware of, and to observe, laws about the delivery of EFT in the country in which they are operating, and, if they are working across international boundaries, those of the country in which the client is located

### 2.3 Marketing

- To ensure that all advertising, including brochures, websites, directory entries, social media and certificates displayed in a practice or training room, is honest and relevant
- Never to make claims to “cure” anything or promise any particular outcome. If claims are made about previous results working in a problem area, these must be backed up by robust supporting evidence. It must also be made clear that this record does not and cannot constitute a guaranteed outcome for any other client
- Anyone who is not a member of EFTi or has been but is no longer a paid-up member is obliged to remove any logos or claims of membership or other suggestions of EFTi affiliation from their website and other marketing material. If they do not do so, we will notify their local trading standards officer or equivalent / or the advertising standards authority for their country

### 2.4 Practitioner Code of Conduct and safe practice when working with clients, mentees or students

- Practitioners, mentors, trainers and students on practise placement (hereinafter collectively called ‘The Practitioner(s)’) must always deal with clients, mentees and trainees with respect, honesty and compassion
- The Practitioner’s role is to help clients find their way to their own solutions, and therefore, advice is rarely appropriate. If, after careful consideration, you decide that advice may be useful, then you may, with care, and if appropriately qualified, offer clients some suggestions that encourage them to develop their autonomy (e.g. lifestyle changes such as beneficial dietary changes, spending more time out in nature and starting an exercise regime, but you must not
  - i. give a client advice about something outside of your professional competence
  - ii. give a client advice from a position of power/ ‘I know better than you’
  - iii. suggest or advise them to stop medication or to refuse medical treatment recommendations
  - iv. advise them to take life-changing actions (e.g. leave your partner or change your job – though of course, you can support them in such choices if they have independently arrived at that conclusion)
- Before or at the beginning of work with an EFTi practitioner, a client should be given the chance to see the practitioner’s own code of conduct and to have information about how to make a complaint about the practitioner. Some practitioners do this by putting the information on their websites and drawing clients’ attention to it
- EFTi practitioners must ensure that they have a sound consultation process to ensure the development of a clearly stated contract of responsibilities and expectations with the client/trainee/mentee, and to make clear to clients, mentees and trainees the fee structure for EFT, mentoring or training sessions including charges for late cancellation or missed sessions, and any other contract into which the practitioner, mentor or trainer will expect them to enter
- To make available on request all relevant professional qualification documents

- Non-discrimination. Practitioners, mentors and trainers are obliged to provide the same quality of service to all, despite differences between them such as race, religion, age, gender, gender identity, sexual orientation, and disability
- To be aware that practitioners and trainers are entitled to decide who they accept as clients or as students. If a practitioner has no logical reason to say “no” to someone, but their ‘gut’ is telling them to do so, they are entitled, and even advised, to follow their gut feeling, but...
- Once a practitioner, mentor or trainer accepts a client, mentee or student, the interests of the client, mentee or student are paramount. Practitioners are obliged to provide the best attention and services they can
- Environment – As a practitioner, mentor or trainer, it is your responsibility to ensure that your practice/training/mentoring area and any associated waiting area(s) are safe environments. This means not only physically safe but psychologically safe as well
- To give due consideration to when it is safe for a client to work with them online and when the nature of the client’s history and problems and/or the client’s fragility would indicate the need for a supportive presence in the room
- Privacy and Confidentiality. What happens in practice, mentoring and training rooms should not be heard from outside of them. Clients leaving a session should be kept apart from those arriving. Not only is the content of EFT practice confidential – so is the fact that someone is consulting an EFTi practitioner unless they choose to reveal it. This can be done either by physical arrangements or scheduling. When working with clients via the Internet, practitioners are unable to control the client’s environment. It is recommended that practitioners discuss with the client if his or her location is private. Trainees should be asked to agree to keep within the training room what happens in the training room. Generally, it is not advisable for trainers to allow recording in trainings. But if they do it is their responsibility to have recorders turned off or recordings deleted when other trainees disclose sensitive personal information
- Demonstrations during training sessions – The purpose of training demonstrations is to illustrate the particular technique being demonstrated, it is not to show what a wonderful EFT exponent the demonstrator is. Therefore, when a trainer is doing a demonstration to trainees, the volunteer’s interests are paramount and must always be put before the “success” of the demonstration. Trainers must respect boundaries or limitations requested by demonstration subjects and stop immediately if they are requested to do so. Trainers must also take responsibility to provide care afterwards for any unresolved emotions stirred up but not resolved by the demonstration
- Safety – If a client is seeking help with symptoms that are prolonged or potentially life-threatening or which the practitioner feels are cause for concern, the practitioner should enquire whether the client has consulted a medical practitioner and, if they have not, to advise them to do so. They should also record this in the client notes.
- Competence – If, after beginning work together, a client is found to need a level of expertise beyond that which the practitioner is competent or able to offer the client

should be informed and the practitioner should offer to refer them to someone who has the required level of expertise

- Non-Interference with medications – If a client expresses doubts about their current medication, or reports side-effects or other issues that concern them and/or the practitioner, the practitioner should advise the client to discuss this with their qualified medical adviser and record that they have done so
- Diagnosis – Practitioners should never make a medical diagnosis unless they are qualified by other medical training to do so. Nor should they knowingly contradict a diagnosis or advice given by a client's qualified medical advisor

### 3. Certification of Trainees

- A trainer's first responsibility is to the safety of the members of the public who will consult their trainees. They should not certify anyone whom they feel is not safe to work with clients, whatever standards they have otherwise achieved as trainees
- Trainers are not obliged to refund fees to students they are unable to certify. Trainees are paying for training and/or certification process, not for an outcome. This should be made clear in the information given to trainees before they sign up for a course or a certification path

### 4. Confidentiality (See also 2.4)

- Practitioners must promise clients that they will keep confidential anything the client tells them unless the client reveals something, which gives the practitioner cause to believe that the client is a danger to themselves or others. Some practitioners regard suicide threats as covered by their confidentiality and some do not. Either position is ethically defensible (though might lead to some difficult questions in a coroner's court, and suicide threat might thus best be added to your limits of confidentiality).

The important points are that practitioners know the legal position appropriate to their practise with each client, and abide by it, and that they make clients aware of their limits of confidentiality before they start working together

- Practitioners should know, and make clients aware of, what is mandatory for them to report to the police or other authorities in the jurisdiction in which they are working. For example, in some countries, such as the UK, practitioners are legally obliged to disclose if they learn about a terrorism threat
- Clients should also be made aware that, as a practitioner, mentor or trainer you may wish to discuss information about them with your own mentor anonymously, and that you will take all necessary steps to protect their identity. If practitioners are also trainers, they should explain to clients that they sometimes use case history material from EFT sessions for teaching. Again, this would be done with scrupulous care to disguise identity. However, if clients do not agree to either, the practitioner must respect and comply with their wishes

- Mentors who record group sessions should inform members of the group that they are recording and also whether they intend to make the recording available for other practitioners to listen to as part of their CPD. Mentees should be able to ask for recording to be stopped or for a section to be deleted if they want to disclose something they do not feel they want to be on record for unknown others to hear
- Trainers and mentors should extend confidentiality to trainees and mentees. They should not publish photographs of groups on their websites or Facebook or any other digital or other platforms without the consent of the trainees or mentees to the picture being taken and to its use
- Trainers/mentors need to obtain signed consent forms to cover the use of any videos, photographs, audio recordings or transcripts in which they appear for any purpose. The interests of the mentees in the group are the over-riding consideration here. Mentors should consider whether recording in this way is in mentees best interests for professional development, since it may discourage them from disclosing certain concerns

## 5. Record Keeping

- Security of Notes – Practitioners are required to keep their notes of client sessions secure. This means paper records should be in a locked filing cabinet and digital ones password protected. In some countries it is also necessary to conform to legal requirements such as registering under the Data Protection Act in the UK (GDPR). It is a practitioner’s responsibility to check local law
- Content of Notes – EFTi recommends that notes are kept brief, factual, and do not include comment, diagnosis, speculation, opinion or prognosis and do not include second-hand information from the client about other people. It is useful to hold in mind the question “How would I feel if this were read out in court?”
- Access to Notes – When you are writing notes, it is important to keep in mind that courts may subpoena them and insist that you explain any codes that you use, and that clients have a right to ask to see them. Former child clients may, when they are adults, ask to see notes of EFT sessions when they were children. Revelations in many countries about historic child sex abuse makes this more likely than it previously may have been
- Maintenance of Notes – Records of adult EFT sessions should be kept for at least seven years, unless you are working in a country where the law requires them to be retained for longer. For children it is advisable to keep them beyond the point at which the client will be old enough to make a claim for damages against an alleged perpetrator should they wish to do so. The current recommendation is to keep child notes until, as a minimum, the client is aged 25. Some recommend that if possible, child notes are kept forever. Practitioners should also check their own insurance policies to see if they impose a longer period for records to be kept
- Safe Disposal of Notes – Practitioners should arrange for their records to be destroyed securely should they become unable to continue working or die, and to

dispose of them securely themselves from time to time during their working life and/or after they retire

- Recording of sessions and CCTV – If a trainer is filming or recording part or all of a training, they should advise applicants in advance that they will be doing so and obtain their written permission to be filmed. They should also make provision for any students who want to be excluded from filming. Re: filming demonstrations, this should be done only with the specific additional permission of the subject, in writing, and on condition that the subject can withdraw permission for the retention of all or part of the recording retrospectively and it will be destroyed

If a mentor is recording a mentoring session, group or individual, the mentor should also advise the attendees that he or she is doing so, obtain permission, and proceed as above. In all instances, trainers and mentors should tell trainees and mentees how they will use the recordings. For example, will they be used as training resources for subsequent students, advertising... publicity?

## **6. Working with Children or Vulnerable Adults**

### **6.1 Protection from Harm**

Children are not small adults, and EFT training does not automatically prepare the practitioner for working with children. Unless the practitioner is otherwise qualified to work with children, such work should be undertaken with great caution, if at all. At the very least, the practitioner should have done a Safeguarding course beforehand. Practitioners may be working in specialist provision and the policy of the organisation is also crucial in informing the scope of information and responsibility in that context

### **6.2 Legal Obligations**

Practitioners working with children, however that is legally defined in the country in which they are working, should make themselves aware of the laws regarding minors there. Practitioners may be legally obliged to obtain police clearance in some areas. Currently, in the UK, a legal requirement for a practitioner to register with the Disclosure and Barring Service (DBS) is rare and would only exist under exceptional circumstances. However, it is widely recognised as best practice to be registered and to hold a current DBS certificate, and UK-based EFTi members can now apply for this service through EFTi

### **6.3 Informed Consent**

Practitioners should obtain written consent from the parents/guardians/carers of such children. Parents/guardians/carers should be given to understand that, even if they are paying for therapy, the child is entitled to confidentiality. For vulnerable adults, defined as adults who are unable to understand well enough to give truly informed consent to therapy, practitioners must obtain written consent on their behalf from their legal guardians or carers. Alternative methods of obtaining consent may be utilised for those who may be non-verbal, hearing impaired or visually impaired



## 6.4 Understanding Confidentiality for the Child or Young Person

Confidentiality for children is slightly different from confidentiality for adults. With children it is good practice to tell them that anything they tell the practitioner will not be revealed to anyone else unless they tell the practitioner something that puts them or someone else in danger

It is recommended that they are told that, if the practitioner feels they have to break confidentiality, the child will first be given the opportunity to tell their parent or guardian or other authority themselves, with help from the practitioner if they would like it, or to be present when the practitioner tells the parent or other authority

Practitioners are advised to read the Safer Working Professional Practice Guidelines on the EFTi website.

## 6.5 Understanding Confidentiality for Vulnerable Adults

A vulnerable adult is usually regarded as a person who lacks capacity for self-determination; a person who:

*Is or may be in need of community care services because of mental or other disability, age or illness, and is or may be unable to take care of him or herself, including protecting self from harm or exploitation.*

The position is complex, and hinges on a determination of whether the person has capacity, which is defined, in the UK, in the Mental Capacity Act of 2005. Essentially, it means having the ability to make their own decisions and to determine their own direction in life. EFTi training does not provide you with the knowledge to make this determination, but it is possible that you will encounter someone whom you believe to be at risk, and need to make a decision.

As always, the answer is, at the least, to discuss the case with your mentor. You may also Google, for example 'what is confidentiality for vulnerable adults' and read some of the useful literature online, especially from relevant professional sources such as Social Work and medicine

## 7. Boundaries

- Practitioners must not cross appropriate boundaries between the practitioner and client to exploit the client emotionally, sexually, financially, or in any other way
- If a financial relationship (other than the payment for EFT sessions or training fees) should develop between the practitioner and a client or any member of a client's family, the practitioner should immediately end their practitioner involvement with the client, accept no further fees, and offer to refer the client to another practitioner
- Sexual relationships between practitioners and clients are not recommended but if they happen, at least two years should elapse after EFT work ceases before the beginning of such a relationship. Practitioners should always be alert for any

inappropriate feelings they are beginning to have or that they are aware their client is feeling. Such feelings should be discussed with a mentor at the earliest opportunity

- Practitioners, mentors and trainers should use self-disclosure only most exceptionally and after careful consideration of why they are doing so and whether and how it is in the best interests of the client, mentee or student that they should do so. Self-disclosure of a sexual nature would never be acceptable
- Practitioners should not touch clients in any way that may be open to misinterpretation. In EFT work, the tapping does, of course, constitute touching, but in most, if not all cases, the client can be invited to follow along with the practitioner, whilst the practitioner taps on him or herself. Any variation from this must be carefully considered and fully explained to the client and full, informed consent gained
- Any practitioner who finds him or herself in any of these situations should, in the first instance, discuss it with their mentor. Further consultation can be accessed by contacting the EFT International Ethics Team

## 8. Practitioner Safety and Personal Care

- Practitioners need to consider their own safety, as well as that of their clients. If they are working alone in a building at night, it is wise to create the impression that someone else is in the building. Leaving on lights in other rooms or turning on a radio or television set can create a protective illusion. It is also wise to tell someone and arrange that you will let them know when you are finished work
- If you suspect a client could be violent, or do not have confidence they will not be, firstly, consider whether you wish to begin/continue work with this client. It is perfectly acceptable to decline to work with a client with whom you feel unsafe. If you do decide to work with such a client, think out your exit strategy in advance. In reality, you will not be able to exit a practice room before the client opposite you can get to you, so you need to consider what resources you need to have immediately at hand e.g. a 'screamer' alarm, which might distract an attacker long enough for you to escape
- Burnout is an occupational hazard for practitioners. One of the best ways to avoid it is to be aware of your limitations about the number of clients and hours you can work without putting yourself under unsustainable pressure. Adopting the recommended practice suggested above of tapping on self and inviting the client to follow along can be protective against practitioner overwhelm
- Having a mentor to whom you regularly offload concerns and discuss worries about yourself, as well as your clients, is also a good protection against burnout

## 9. EFT Disciplinary Procedures

It is our belief that most EFTi practitioners, trainers and mentors set out to do the best job that they can, and that therefore, most breaches of this code will occur because of error or lack of knowledge/understanding, rather than intent.

## 9.1 Support

With this in mind, our preferred route to dealing with breaches of the ethical code is one of remediation, rather than punishment, so might include, for example, additional studies, additional mentoring or personal therapy.

## 9.2 Sanctions

We reserve the right to adopt a punitive approach where a remedial approach is deemed unsuitable, and this might include suspension of membership, either immediately, pending investigation, in the case of a serious breach(es) or following investigation, and that suspension might be for a fixed period of time, with restoration being dependent upon some remedial work, or, in extreme cases, permanent.

We further reserve the right to invoice the member complained about for the reimbursement of reasonable costs incurred by the charity in investigating the case.

In cases where a complaint against a member of EFTi is upheld, details of the member concerned will be published on the EFTi website.

## Appendices

Appendices (may contain local legal points for different jurisdictions):

- Appendix 1: Working with Trauma
- Appendix 2: Working with Children. See Safer Working Professional Practice: Visit <https://eftinternational.org/about-us/efti-policies-and-procedures/safer-working-professional-practice/>
- Appendix 3: Read EFTi Case Study Guidance Manual

**Note:** The EFTi Code of Conduct and Ethics is up for review 12 months from date of adoption

## Appendix 1: Working with Trauma

When we work with clients with EFT, trauma presents itself to us whether we expect it or not. Often it will be the sort of small “t” trauma from which people determine their identity and decide how safe the world is. Working with that small ‘t’ trauma will often be a key part of our work, but if we are inexperienced and suddenly discover we are working with someone who is living with major trauma, we should refer to someone more experienced. This needs to be in consultation with the client, and with reassurance that the referral is not because of anything to do with them, but because we are not appropriately qualified to give the client the best and most appropriate service.

Practitioners should not agree to work with clients presenting with known major trauma unless they are accredited at Level 3 or above, experienced as a practitioner, and have taken steps to be more trauma-aware than an EFT practitioner training provides, or to have had trauma training in some other context.

There are some further cautions to bear in mind, all of which we have previously encountered in therapeutic practice:

- The work of the EFT practitioner is not to attempt to erase any memories. It is firstly to discharge distressing emotions and separate them from the memories that trigger the emotion, and secondly, to help the client to process any negative or unhelpful beliefs that may have developed
- Likewise, it is not our job to rewrite memories, and it is unhelpful to suggest or encourage a client to change the trauma story to have a different ending
- Avoid telling clients (or implying) that if they recover a repressed memory it will help them to feel better. The unconscious mind wants to help and may well create a false memory in an attempt to do so, and this can create all sorts of potential legal pitfalls
- Also, the role of the EFT practitioner (or any other practitioner acting in a therapeutic capacity) is to accept the client’s truth, so if a client does start to recover a memory, even if it sounds unbelievable, we should accept and work with it.

Repressed memories can emerge a little at a time, or as a whole, when the unconscious mind feels it is safe to do so or when something in or outside of EFT work triggers recall. Clients often say the worst thing about a traumatic experience, especially one of sexual abuse or domestic violence, was that when they told someone they were not believed

The ethics team is currently planning a workshop on working with trauma, so watch this space for further details