



SANDTRAY THERAPY ASSOCIATION OF AUSTRALIA (STTAA) PRACTICE STANDARDS

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SANDTRAY THERAPY ASSOCIATION OF AUSTRALIA
(STTAA)

PRACTICE STANDARDS

This document has been developed with the support of Opengate Institute & The Sandtray Therapy Industry Committee members

Mission Statement

To promote the ethics, development and practice standards of education and training in all the disciplines of the sand therapy techniques. Commonly known as Sandtray Therapy and include Sandtray Play & Sand tray terminology.

We respect and support the diversity of approaches within the field. We support a united training standard for current and emerging practitioners, to foster professional identity, support training and research, and ensure public accountability.

This document has been re-developed based on the American Counselling Association (2014) Code of Ethics and re-developed to support the Sandtray Therapy/Practitioner Code of Ethics in Australia 2023.

Core Competencies Model – Practice Standards

When STTAA first adopted the Core Competencies and developed the STTAA Code of Ethics, we set the standard in the sand therapy field in Australia. The STTAA Core Competencies Practice Standards were first identified and articulated by eight pioneers in our profession, all of whom were committed to creating greater understanding about the knowledge and skills needed for effective sand therapy.

In any profession, it is best practice to perform a job analysis regularly to ensure a competency model remains a valid and accurate reflection of professional practice. STTAA conducted industry analysis in 2018-2023 towards the development of the competency model. As the sand therapy profession continued to grow and evolve STTAA registered as Australia's first Association of Sandtray Therapy as an Incorporated model.

From start to finish, sand therapists participated in this process. These sand therapists represented a diverse range of sandtray and sandplay disciplines, education backgrounds, styles, and experience and diverse levels of training. No other sandtray therapy certification body has undertaken this level of research, and we're incredibly proud of the quality, integrity and validity of our evidence-based approach towards the value it brings to the sand therapy industry.

The empirical data was collected through the industry analysis process and validated that the Core Competency model is relevant and reflects current sand therapy practice, the competency model offers a simple, streamlined structure and integrates consistent, clear language.

STTAA Practice Standards of Core Competencies were developed to support greater understanding about the skills and approaches used within the sand therapy profession as defined by STTAA. These competencies and the STTAA definition of sand therapists serve as the foundation of the Accreditation process towards membership.

STTAA defines sandtray therapists as being the witness to the client's creative process that inspires them towards good psychological growth and healing, supported by the unconditional positive regard of the trained therapist.

STTAA Practice Standards of Core Competencies are organised into four domains based on commonalities and interdependencies between competencies within each domain. There are no domains nor individual competencies that are weighted—they do not represent any kind of hierarchy. Rather, each competency is considered core and critical for any competent sand therapist to demonstrate.

Standards of training to comply with expectations of Associations, Industry and Clients.

To be deemed as a Qualified Sandtray Therapist a practitioner will need to satisfy current and relevant training competencies, government requirements and industry standards

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History of Sand Therapies

This document refers to Sandtray Therapy this also covers the titles of practitioners referring to themselves as Sandtray, Sand tray, Sandplay, Sand Play and Sand Therapists or Practitioners. There are two main streams of Sandtray Therapy that have developed over the years beginning with Sandtray also known as The World Technique.

Sandtray Therapy was developed by paediatrician Dr Margaret Lowenfeld, child psychiatrist (1920's). This method is based on the first wave theoretical frameworks and current theories. It is accessible, measurable and integrates across- theoretical frameworks and approaches.

Sandplay Therapy is based on Sandtray Therapy the model as first developed by Margaret Lowenfeld, then re-developed by Dora Kalff integrating Jungian psychology with terms such as Archetypes and symbols. The theoretical basis stems from the Jungian theory.

When Sand Therapists combine the philosophies of both these methods and adapt them to their current theoretical model of practice then this is known as Integrative Sand Therapy. Not all therapists will integrate the sand methods but will align their practice to Sandtray or Sandplay. However, in the instance of the code of ethics and practice standards there will be little if no difference and the integrative therapists would be well served to utilise the guidelines within this document.

Ethics

When therapists are faced with ethical dilemmas that are difficult to resolve, they are expected to engage in a carefully considered ethical decision-making process, consulting available resources as needed. Sandtray Therapists acknowledge that resolving ethical issues is a process; ethical reasoning includes consideration of professional values, professional ethical principles, and ethical standards. Sandtray Therapists' actions should be consistent with the spirit as well as the letter of these ethical standards. No specific ethical decision-making model is always most effective, so Sandtray Therapists are expected to use a credible model of decision making that can bear public scrutiny of its application. Through a chosen ethical decision-making process and evaluation of the context of the situation, Sandtray Therapists work collaboratively with clients to make decisions that promote clients' growth and development. A breach of the standards and principles provided herein does not necessarily constitute legal liability or violation of the law; such action is established in legal and judicial proceedings.

Standards for Credentialing of a Specialist Sandtray Therapy Practitioner

For a Sandtray Therapist to use the wording 'Sandtray Therapist' or claim accreditation as a Qualified Sandtray Therapist ALL the following must be adhered to:

Accredited Sandtray Therapy Training

Course Details: Make sure the program includes comprehensive training in both the theory and practical application of Sandtray therapy. There must be in-person practical training with a minimum of 35 hours.

Student Membership (S-STTAA) - Student membership is free for all students completing a recognised qualification or certified course. As a student member, if you are enrolled into a recognised training provider you may be eligible for student insurance for your placement (client contacts) and access to the STT Code of Ethics and Practice Standards.

Certified Sandtray Therapist (C-STTAA) – Completed 400-600 hours of sand therapy specific education, minimum 40 hours of client contact experience and minimum 10 hours of sand therapy specific supervision.

Professional Certified Sandtray Therapist (P-STTAA) – Completed Clinical level education 1200 hours of Sandtray therapy specific education, 120 client contact hours and 50 hours of sandtray specific supervision.

Master Sandtray Therapist (MA-STTAA) – Completed a Sandtray Therapy Qualification or equivalent, completed more than 1200 hours of sand therapy specific education and 1,500 hours of client contact experience. May deliver supervision.

Affiliate Membership (A-STTAA) – Educator in the field of Sandtray Therapy, you will be contributing to the field through research and education or have an interest in Sand therapy which benefits the association. Affiliate members can deliver sand therapy specific PD

Training Content

Training must adhere to the Sandtray Therapy Code of Ethics and Practice Standards. At least 1 Module/Unit must include Theories and Evidence-Informed Research as applied to Sandtray therapy. Training should be delivered/assessed by a qualified trainer who has a minimum of 5 years' experience in Sandtray and/or Sandplay or equivalent.

Assessment for each module/unit must have at least 1 assessment task. All students will need to have proof of evidence of completion of a course in the form of certification. This must include course content, hours of instruction, any online component learning hours, any assessments, number of client contact hours undertaken during the training program and supervision hours.

Industry Consultation must be undertaken throughout the life of a Specialist Training course with continuous improvements in place.

Supervision for students undertaking specific Sandtray Therapy training must be included in the course as a minimum of 10 hours (group/individual).

Sandtray Therapists are expected to complete 1 hour of supervision for every 10 clients they see at a minimum. Monthly supervision is encouraged.

The Lowenfeld Trust

The Lowenfeld World Technique Dr Margaret Lowenfeld,

It is a welcome sign of the life of the ideas embodied in this technique that other workers are now experimenting with modifications of it. This memorandum is called the Lowenfeld World Technique in order to make clear that it is with the original and basic technique that we are here concerned.

<http://lowenfeld.org/>

Original Resources List

The following has been taken from Margaret Lowenfeld's original resources list and recommendations:

1a Resources

Resources include an indoor sand tray, clean sand, access to water, a variety of sand tray miniatures. Sand trays - These can be of a variety of sizes, shapes and commonly the inside of a tray is painted blue. Plastic trays are acceptable.

Sand – Clean sand, washed sandstone sand, Sydney sand is available or fine tiling sand.

Sandtray Miniatures – sandtray miniatures are listed however any good training will give out resources to their trainees on the types of miniatures needed to complete the theoretical models.

***The Tray:** This can be either of metal, or of wood with a metal lining, painted blue inside. The inside dimensions should be 75cm. x 52cm. with a depth of 7cm. It is essential that the tray be waterproof. It has been found important in this technique, to provide an arbitrary boundary which focuses the attention and limits the output of the maker at any one session.*

The Sand Tray Now

A wooden tray painted blue on the bottom with a water proofing paint. This tray can vary according to the use i.e. groups can use either a large sand tray or smaller individual sand trays. Individual sand trays for use in therapy working one on one should if possible, measure minimum 70 cm x 50 cm.

***Sand:** This should be of medium coarseness, and it is valuable, if possible, to have sand of two colours and two grades of coarseness. The tray should be presented with the sand roughly even, the quantity being sufficient to half fill the tray. Facilities should be provided to make possible the use of sand. Wooden spoons, shovels etc. should be available.*

***Water:** This should be available, preferably in two cans or jugs small enough to prevent accidental flooding.*

Amorphous Material: A box of amorphous objects should always be available and should contain bricks, rubber tubes of various lengths and widths, funnels, small shallow tins (for making ponds etc.), coloured stick and slats etc.

The Cabinet for World Objects: This should be of convenient size for children to use and preferably composed of a large number of shallow drawers which can be clearly labelled according to the contents of each drawer, and which only reveal their contents when separately drawn out, thus making it impossible for an overwhelming variety of objects to be visible simultaneously. With this proviso, it is hardly possible to have too large a variety of objects in the World cabinet, since individual variations and subtleties of experience constantly impel subjects to demand specific objects.

World Objects

The collection of World Objects should be as complete and as varied as possible, but as the worker using the technique is usually dependent for the supply of material upon the retail shops of the country in which the work is being carried out, the detail of each class of material inevitably changes from time to time as new objects appear on the market and older models disappear. It is therefore important (a) that the basic classifications of the material should be clearly grasped so that the relative values, in relation to the rest, of different objects commercially produced, can be correctly assessed, and (b) that a constant watch be kept on retail shops so that missing categories can be supplied as and when they become available. Broken and partly damaged objects are valuable and should be kept.

Catalogue of World Objects or Sandtray Miniatures

People

Old men Grandfather 'wise old man 'old age' retirement from active life' Rural Farmers- middle age, usually stout and comfortable looking Father authority, Rural Labourers- with animals or with farm tools, City civilians Father; teacher; authority; 'men' in general, youths, scouts- hikers etc. on 'motor bicycles' etc. Brothers; schoolmates Men in specific occupations: Clergy and priests Religion' morality, ritual 'Splendid people' men in historical costumes History, splendour; social position; glory Doctor and stretcher bearers, ambulance men Accidents, Teachers in gowns Policemen Fireman Postman City Technicians Diver Burglars and robbers station masters, porters, barbers, people on a station

Children of all ages, standing and sitting, siblings, school friends, gangs

Circus people, including acrobats, clowns, ring-maser, the band, including performing animals

Phantasy Figures; Witch; wizard; dwarfs; giants, Knights in armour (mounted and on foot) 'Space-men/women' and other Disney characters, Toreador and bull fighter; Vikings, Robin hood and other heroes and heroines, Dragon

Domestic Animals; Cows and calves- sheep and lambs Bulls and rams Horses and foals (riding and farm horses) Donkey Goat, Pigs, sows, piglets Cocks, hens, chicks, Angry geese and turkeys Swans Rabbits- wild and tame pets Dogs (of many varieties large and small) Pets Cats and kittens

Wild Animals; Lion Tigers; panther; leopards; hyenas; jackals; foxes; Bears Hippopotamus
Rhinoceros Bison Gorillas Snake and pythons Crocodiles, Elephant Giraffe Kangaroo Camels Monkeys
Deer Hares Lizard Tortoise and Turtle; fish Sea lions; seals

Birds; Eagle and Vulture Stork Significance Penguins Owls

Countryside Trees wood and jungles oaks, elms, etc., with foliage palms, Conifers Dead trees or ones
without branches; logs Phantasy trees, Xmas trees, flowering trees, etc. Bushes & Hedges, flowers,
Grass (flat pieces of green)

Fences, Bridges, Gates, etc. Rural fences, with and without gates, bridges Metal railing for Zoo etc.,
turnstiles Railway bridges and other

House Ordinary houses in various size (country and town); churches; school; hospital; prison; public
buildings as post office, etc. Shops (market stalls Manor house, castle Burnt-out or bombed houses
Tents. There should be sufficient houses in number and variation, to lay out villages, streets, towns

Furniture, farm and garden equipment, etc. Interior and exterior furniture a) School: Desks,
blackboard, children fitting into the desks etc. b) Cafes: Tea gardens: small tables, chairs, benches c)
House: Furniture of any sort of suitable size, including fires d) Hygiene: lavatories, baths, vacuum
cleaner e) Food: any reproduction of food of suitable size f) Garden: Wheel barrows, spades, forks,
rakes, watering cans, garden roller, a number of ladders of different sizes g) Farm: Drinking troughs,
haystacks, beehives, pigeon cotes, hen coops, dog kennels, etc. h) Wells i) Children's playground
equipment; fairs

Transport Road Transport Mechanical Fire Engine Police car; ambulance; break-down van, dust cart,
caravan Buses and coaches Delivery vans; furniture removal vans petrol lorries, etc Ordinary
passenger cars; racing cars Lorries covered and uncovered, tip-up lorries Motor-bicycles, aeroplanes,
rockets, bulldozer, different cars, tractors etc.

Non-mechanical Horse-drawn vehicles of all sorts and size, including, Gypsy caravan, wedding
carriage Hay cart; milk cart; coal cart; ice cream cart; etc. West American stagecoach; golden state
coach Travelling circus carts (cages), bicycles and tandems

Road Signs etc Petrol pumps, road lamps, traffic lights; telephone poles Road signs of all sorts,
milestones Telephone boxes; police boxes, newspaper kiosks

Military Road Transport Tanks, armoured cars, jeeps, mobile guns Caterpillar transports, military
transport lorries

Sea Transport Ships should include the following types: - Naval vessels of all available kinds including
submarines, Large liners Small steamers, sailing boats, rowing boats, Red Indian canoes

Lighthouses with some that light up and turn on

Miscellaneous 1) Broken toys of all kinds (mutilated objects; part objects are of great importance
and should always be available) 2) At every period there become available commercial objects of
passing interest (for instance in a current film or event) which are worth adding to the collection 3)
From time to time special objects become available from foreign countries which are valuable for
giving a feeling of 'otherness' 4) Gallows, scarecrows, appear occasionally and are useful 5)
Grotesque and gross objects of all kinds

Sandtray Therapy Resources Portable

Today many therapists work in schools, hospitals and other areas where they need to maintain resources that are portable. This may include kinetic sand in a plastic tub with a lid and sandtray miniatures in plastic containers. It is up to the integrity of the therapist to keep their resources clean, current and safe for the client group they are working with.

Portable sand trays are generally of the size available at the time of purchase. It is not expected that a portable resource contains all the objects, but a selection of objects or sandtray miniatures specific for the age or developmental age of clients.

STANDARDS

Section - Professional Responsibility

Introduction

Sandtray Therapists aspire to open, honest, and accurate communication in dealing with the public and other professionals. Sandtray Therapists facilitate access to Sandtray Therapy services, and they practise in a non-discriminatory manner within the boundaries of professional and personal competence; they also have a responsibility to abide by the Sandtray Therapy Code of Ethics. Sandtray Therapists actively participate in local, state, and national industry consultation that foster the development and improvement of Sandtray Therapy. Sandtray Therapists are expected to advocate to promote changes at the individual, group, institutional, and societal levels that improve the quality of life for individuals and groups and remove potential barriers to the provision or access of appropriate services being offered. Sandtray Therapists have a responsibility to the public to engage in Sandtray Therapy practices that are based on rigorous reliable evidence-informed practice.

Sandtray Therapists store records following termination of services to ensure reasonable future access, maintain records in accordance with federal and state laws and statutes such as legislation laws and policies governing records, and dispose of client records and other sensitive materials in a manner that protects client confidentiality. Sandtray Therapists apply careful discretion and deliberation before destroying records that may be needed by a court of law, such as notes on child abuse, suicide, sexual harassment, or violence.

Sandtray Therapists engage in self-care activities to maintain and promote their own emotional, physical, mental, and spiritual well-being to best meet their professional responsibilities. In addition, Sandtray Therapists engage in self-care activities to maintain and promote their own emotional, physical, mental, and spiritual well-being to best meet their professional responsibilities.

Aboriginal and/or Torres Strait Islanders and Cultural Competencies

There are many considerations that must not be taken lightly when approaching the formulation of a therapeutic plan for a client (Wexler, 2009), in particular a client that identifies as Aboriginal with disabilities, that presents with considerable complexities pertaining to trauma background, and

cultural identity. While it does not specifically communicate whether her heritage is distinctly Aboriginal, and/or also Torres Strait Island, it is essential to consider the Australian Human Rights Commission (2023), Aboriginal and Torres Strait Islander Cultural Safety Protocols, and apply the Cultural Competence Three Step Model. The above-mentioned underpin a therapeutic approach to supporting Donna, with the addition of evidence-based research pertaining to Erik Erikson's Theory of Identity Development (Erikson, chapter 3, 1959) and Freud (Hartmann, 1959).

There are four pillars that underpin Aboriginal "being" and must be considered when engaging with an Indigenous client therapeutically. These pillars include wholeness (everything is connected), change (constant), changes occur in cycles and patterns (connected to viewpoint and perception of world around us), and physical world versus spiritual world (both are considered real) (Pattell, 2007).

The role as a therapist is to hold unconditional positive regard for the client, holding space when needed and providing a safe space where there is no judgement. As therapists, we do not want to box clients into a place where there is only room for them to express themselves "culturally", based on how the therapist has interpreted what they need. You want to ensure that you are not operating from a place of assumptions – You want to ensure that you are building a cultural safe environment where, as referred to in the four guidelines for the Aboriginal and Torres Strait Islander Human Rights Commission in Australia (2023), the client has the opportunity to make their own decisions and self-determine what they need, from the range of symbols and resources you are providing. You would want to provide as many broad options to your client as possible and would take on feedback from client if they ask for specific symbols, music, space and/or to bring an identified safe person to the session.

1. Professional Qualifications

1.a. Accurate Representation

Sandtray Therapists claim or imply only professional qualifications completed and correct any known misrepresentations of their qualifications by others. Sandtray Therapists truthfully represent the qualifications of their professional colleagues. Sandtray Therapists clearly distinguish between paid and volunteer work experience and accurately describe their continuing education and specialised training.

1.b. Credentials/Qualifications

Sandtray Therapists claim only qualifications or certifications that are current and in good standing.

1.c. Educational Degrees

Sandtray Therapists will have earned a degree in a particular discipline in order to then train and become Sandtray Therapist. This may include a process of RPL and a set amount of work experience within industry. It is up to the training institute to work within the accreditation process and practice standards as set out within the policies and procedures.

1.d. Implying Doctoral-Level Competence

Sandtray Therapists clearly state their highest earned degree in Sandtray Therapy or a closely related field. Sandtray Therapists do not imply doctoral-level competence when possessing a master's degree where Sandtray Therapy was a module. Currently the highest level of competence is at the Graduate Diploma of Sandtray Therapy ASQA level 8 (1200 hours).

1.e. Accreditation Status

Sandtray Therapists accurately represent the accreditation status of their Specialist Practitioner training. For example a Graduate Certificate in Sandtray Therapy will be shown as Grad. Cert. in STT or Grad. Dip in STT.

1.f. Professional Practitionership

Sandtray Therapists clearly differentiate between current, active Sandtray Therapy Practitioners with a current and certified training and former practitioners who have industry experience in industry. Practitioners of Sandtray Therapy must clearly differentiate between professional practitioner status which implies the possession of at least a known qualification certified by an association or government body and regular practitioner status which is open to individuals whose interests and activities are consistent with those of Sandtray but are not qualified for professional practitioner status.

1.g Knowledge of and Compliance with Standards

Sandtray Therapists have a responsibility to read, understand, and follow the Sandtray Therapy Practitioner Code of Ethics and adhere to applicable laws and regulations.

2. Professional Competence

2.a. Boundaries of Competence

Sandtray Therapists practice only within the boundaries of their competence, based on their education, training level, supervised experience, professional credentials, and appropriate professional experience. Sandtray Therapists work within a diverse client population.

2.b. New Specialty Areas of Practice

Sandtray Therapists practice in specialty areas new to them only after appropriate education, training, and supervised experience. While developing skills in new specialty areas, Sandtray Therapists take steps to ensure the competence of their work and protect others from possible harm.

2.c. Qualified for Employment

Sandtray Therapists accept employment only for positions for which they are qualified given their education, training, supervised experience, state and national professional credentials, and appropriate professional experience. Sandtray Therapists hire for professional Sandtray Therapy positions only individuals who are qualified and competent for those positions.

2.d. Monitor Effectiveness

Sandtray Therapists continually monitor their effectiveness as professionals and take steps to improve when necessary. Sandtray Therapists take reasonable steps to seek peer supervision to evaluate their efficacy as Sandtray Therapists.

2.e. Consultations on Ethical Obligations

Sandtray Therapists take reasonable steps to consult with other Sandtray Therapists, the Sandtray Therapy Practitioner Code of Ethics and Professional Standards Department, or related professionals when they have questions regarding their ethical obligations or professional practice.

2.f. Continuing Education

Sandtray Therapists recognize the need for continuing education to acquire and maintain a reasonable level of awareness of current scientific and professional information in their fields of activity. Sandtray Therapists maintain their competence in the skills they use, are open to new procedures, and remain informed regarding best practices for working with diverse populations.

2.g. Impairment

Sandtray Therapists monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when impaired. They seek assistance for problems that reach the level of professional impairment, and, if necessary, they limit, suspend, or terminate their professional responsibilities until it is determined that they may safely resume their work. Sandtray Therapists assist colleagues or supervisors in recognizing their own professional impairment and provide consultation and assistance when warranted with colleagues or supervisors showing signs of impairment and intervene as appropriate to prevent imminent harm to clients.

2.h. Sandtray Therapist Incapacitation, Death, Retirement, or Termination of Practice

Sandtray Therapists may prepare a plan for the transfer of clients and the dissemination of records to an identified colleague or records custodian in the case of the Sandtray Therapist's incapacitation, death, retirement, or termination of practice.

3. Advertising and Soliciting Clients

3.a. Accurate Advertising

When advertising or otherwise representing their services to the public, Sandtray Therapists identify their credentials in an accurate manner that is not false, misleading, deceptive, or fraudulent.

3.b. Testimonials

Sandtray Therapists who use testimonials do not solicit them from current clients, former clients, or any other persons who may be vulnerable to undue influence. Sandtray Therapists discuss with clients the implications of and obtain permission for the use of any testimonial.

3.c. Statements by Others

When feasible, Sandtray Therapists make reasonable efforts to ensure that statements made by others about them or about the Sandtray Therapy profession are accurate.

3.d. Recruiting Through Employment

Sandtray Therapists should not use their places of employment or institutional affiliation to recruit clients, there are exceptions. Supervisors, or consultees for their private practices are exceptions.

3.e. Products and Training Advertisements

Sandtray Therapists who develop products related to their profession or conduct workshops or training events ensure that the advertisements concerning these products or events are accurate and disclose adequate information for consumers to make informed choices.

3.f. Promoting to Those Served

Sandtray Therapists do not use Sandtray Therapy, teaching, training, or supervisory relationships to promote their products or training events in a manner that is deceptive or would exert undue influence on individuals who may be vulnerable. However, Sandtray Therapy educators may adopt textbooks they have authored for instructional purposes and form part of an advocacy group to inform about Sandtray therapy and offer professional development.

4. Non-discrimination

Sandtray Therapists do not condone or engage in discrimination against prospective or current clients, students, employees, supervisees, or research participants based on age, culture, disability, ethnicity, race, religion/spirituality, gender, gender identity, sexual orientation, marital/ partnership status, language preference, socioeconomic status, immigration status, or any basis proscribed by law.

6. Reports to Third Parties

6.a Sandtray Therapists are accurate, honest, and objective in reporting their professional activities and judgments to appropriate third parties, including courts, health insurance companies, those who are the recipients of evaluation reports, and others.

6.b. Media Presentations

When Sandtray Therapists provide advice or comment by means of public lectures, demonstrations, radio or television programs, recordings, technology-based applications, printed articles, mailed material, or other media, they take reasonable precautions to ensure that 1. the statements are based on appropriate professional Sandtray Therapy literature and practice, 2. the statements are otherwise consistent with the SANDTRAY THERAPY PRACTITIONER Code of Ethics, and 3. the recipients of the information are not encouraged to infer that a professional Sandtray Therapy relationship has been established.

6.c. Exploitation of Others

Sandtray Therapists do not exploit others in their professional relationships.

6.d. Contributing to the Public Good

Sandtray Therapists make a reasonable effort to provide services to the public for which there is little or no financial return (e.g., speaking to groups, sharing professional information, offering reduced fees).

7. Treatment Modalities

7.a. Scientific Basis for Treatment

When providing services, Sandtray Therapists use techniques/procedures/modalities that are grounded in theory and/or have an empirical or scientific foundation.

7.b. Development and Innovation

When Sandtray Therapists use developing or innovative techniques/procedures/ modalities, they explain the potential risks, benefits, and ethical considerations of using such techniques/procedures/ modalities. Sandtray Therapists work to minimise any potential risks or harm when using these techniques/procedures/modalities.

7.c. Harmful Practices

Sandtray Therapists do not use techniques/procedures/modalities when substantial evidence suggests harm, even if such services are requested.

8. Responsibility to Other Professionals

8.a. Personal Public Statements

When making personal statements in a public context, Sandtray Therapists clarify that they are speaking from their personal perspectives and that they are not speaking on behalf of all Sandtray Therapists or the profession.

Section - Relationships with Other Professionals

Introduction

Professional Sandtray Therapists recognise that the quality of their interactions with colleagues can influence the quality of services provided to clients. They work to become knowledgeable about colleagues within and outside the field of Sandtray Therapy. Sandtray Therapists develop positive working relationships and systems of communication with colleagues to enhance services to clients.

D.1. Relationships with Colleagues, Employers, and Employees

D.1.a. Different Approaches

Sandtray Therapists are respectful of approaches that are grounded in theory and/or have an empirical or scientific foundation but may differ from their own. Sandtray Therapists acknowledge the expertise of other professional groups and are respectful of their practices.

D.1.b. Forming Relationships

Sandtray Therapists work to develop and strengthen relationships with colleagues from other disciplines to best serve clients.

D.1.c. Interdisciplinary Teamwork

Sandtray Therapists who are practitioners of interdisciplinary teams delivering multifaceted services to clients remain focused on how to best serve clients. They participate in and contribute to decisions that affect the well-being of clients by drawing on the perspectives, values, and experiences of the Sandtray Therapy profession and those of colleagues from other disciplines.

D.1.d. Establishing Professional and Ethical Obligations

Sandtray Therapists who are practitioners of interdisciplinary teams work together with team practitioners to clarify professional and ethical obligations of the team as a whole and of its individual practitioners. When a team decision raises ethical concerns, Sandtray Therapists first attempt to resolve the concern within the team. If they cannot reach resolution among team practitioners, Sandtray Therapists pursue other avenues to address their concerns consistent with client well-being.

D.1.e. Confidentiality

When Sandtray Therapists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, they clarify role expectations and the parameters of confidentiality with their colleagues.

D.1.f. Personnel Selection and Assignment

When Sandtray Therapists are in a position requiring personnel selection and/or assigning of responsibilities to others, they select competent staff and assign responsibilities compatible with their skills and experiences.

D.1.g. Employer Policies

The acceptance of employment in an agency or institution implies that Sandtray Therapists are in agreement with its general policies and principles. Sandtray Therapists strive to reach agreement with employers regarding acceptable standards of client care and professional conduct that allow for changes in institutional policy conducive to the growth and development of clients.

D.1.h. Negative Conditions

Sandtray Therapists alert their employers of inappropriate policies and practices. They attempt to effect changes in such policies or procedures through constructive action within the organisation. When such policies are potentially disruptive or damaging to clients or may limit the effectiveness of services provided and change cannot be affected, Sandtray Therapists take appropriate further action. Such action may include referral to appropriate certification, accreditation, or state licensure organisations, or voluntary termination of employment.

D.1.i. Protection from Punitive Action

Sandtray Therapists do not harass a colleague or employee or dismiss an employee who has acted in a responsible and ethical manner to expose inappropriate employer policies or practices.

D.2. Provision of Consultation Services

D.2.a. Consultant Competency

Sandtray Therapists take reasonable steps to ensure that they have the appropriate resources and competencies when providing consultation services. Sandtray Therapists provide appropriate referral resources when requested or needed.

D.2.b. Informed Consent in Formal Consultation

When providing formal consultation services, Sandtray Therapists have an obligation to review, in writing and verbally, the rights and responsibilities of both Sandtray Therapists and consultees. Sandtray Therapists use clear and understandable language to inform all parties involved about the purpose of the services to be provided, relevant costs, potential risks and benefits, and the limits of confidentiality.

Section - Evaluation, Assessment, and Interpretation

Introduction

Sandtray Therapists use assessment as one component of the Sandtray Therapy process, taking into account the clients' personal and cultural context. Sandtray Therapists promote the well-being of individual clients or groups of clients by developing and using appropriate educational, mental health, psychological, and career/educational assessments.

E.1. General

E.1.a. Assessment

The primary purpose of educational, mental health, psychological, and career/educational assessment is to gather information regarding the client for a variety of purposes, including, but not limited to, client decision making and treatment planning. Assessment may include both qualitative and quantitative methodologies and may be used confidentially to further research projects.

E.1.b. Client Welfare

Sandtray Therapists do not misuse assessment results and interpretations, and they take reasonable steps to prevent others from misusing the information provided. They respect the client's right to know the results, the interpretations made, and the bases for Sandtray Therapists' conclusions and recommendations.

E.2. Competence to Use and Interpret Assessment Instruments

E.2.a. Limits of Competence

Sandtray Therapists use only those testing and assessment services for which they have been trained and are competent. Sandtray Therapists take reasonable measures to ensure the proper use of assessment techniques by persons under their supervision.

E.2.b. Appropriate Use

Sandtray Therapists are responsible for the appropriate application, limited interpretation, and use of assessment instruments relevant to the needs of the client.

E.2.c. Decisions Based on Results

Sandtray Therapists responsible for decisions involving individuals or policies that are based on assessment results have a thorough understanding of Sandtray stages of development and are trauma informed.

E.3. Informed Consent in Assessment

E.3.a. Explanation to Clients

Prior to assessment, Sandtray Therapists explain the nature and purposes of assessment and the specific use of results by potential recipients. The explanation will be given in terms and language that the client (or other legally authorized person on behalf of the client) can understand.

Section - Supervision, Training/Teaching

Introduction

Sandtray Therapist supervisors, trainers, and educators aspire to foster meaningful and respectful professional relationships and to maintain appropriate boundaries with supervisees and students in both face-to-face and electronic formats. They have theoretical and/or pedagogical foundations for their work; have knowledge of supervision models; and aim to be fair, accurate, and honest in their assessments of Sandtray Therapists, students, and supervisees.

F.1. Sandtray Therapist Supervision and Client Welfare

F.1.a. Client Welfare

A primary obligation of Sandtray Therapy supervisors is to monitor the services provided by supervisees. Sandtray Therapy supervisors monitor client welfare and supervisee performance and professional development. To fulfil these obligations, supervisors meet regularly with supervisees to review the supervisees' work and help them become prepared to serve a range of diverse clients. Supervisees have a responsibility to understand and follow the Sandtray Therapy Practitioner Code of Ethics.

F.1.b. Sandtray Therapist Credentials

Sandtray Therapy supervisors work to ensure that supervisees communicate their qualifications to render services to their clients

F.1.c. Informed Consent and Client Rights

Supervisors make supervisees aware of client rights, including the protection of client privacy and confidentiality in the Sandtray Therapy relationship. Supervisees provide clients with professional disclosure information and inform them of how the supervision process influences the limits of confidentiality. Supervisees make clients aware of who will have access to records of the Sandtray Therapy relationship and how these records will be stored, transmitted, or otherwise reviewed.

F.2. Sandtray Therapist Supervision Competence

F.2.a. Supervisor Preparation

Prior to offering supervision services, Sandtray Therapists are trained in supervision methods and techniques. Sandtray Therapists who offer supervision services regularly pursue continuing education activities, including both Sandtray Therapy and supervision topics and skills and have their own regular supervision.

F.2.b. Diversity in Supervision

Sandtray Therapy supervisors are aware of and address the role of diversity in the supervisory relationship.

F.2.c. Online Supervision

When using technology in supervision, Sandtray Therapist supervisors are competent in the use of those technologies. Supervisors take the necessary precautions to protect the confidentiality of all information transmitted through any electronic means.

F.3. Supervisory Relationship

F.3.a. Extending Conventional Supervisory Relationships

Sandtray Therapy supervisors clearly define and maintain ethical professional, personal, and social relationships with their supervisees. Supervisors consider the risks and benefits of extending current

supervisory relationships in any form beyond conventional parameters. In extending these boundaries, supervisors take appropriate professional precautions to ensure that judgement is not impaired and that no harm occurs.

F.3.b. Sexual Relationships

Sexual or romantic interactions or relationships with current supervisees are prohibited. This prohibition applies to both in-person and electronic interactions or relationships.

F.3.c. Sexual Harassment

Sandtray Therapy supervisors do not condone or subject supervisees to sexual harassment.

F.3.d. Friends or Family Practitioners

Supervisors are prohibited from engaging in supervisory relationships with individuals with whom they have an inability to remain objective.

F.4. Supervisor Responsibilities

F.4.a. Informed Consent for Supervision

Supervisors are responsible for incorporating into their supervision the principles of informed consent and participation. Supervisors inform supervisees of the policies and procedures to which supervisors are to adhere and the mechanisms for due process appeal of individual supervisor actions. The issues unique to the use of distance supervision are to be included in the documentation as necessary.

F.4.b. Emergencies and Absences

Supervisors establish and communicate to supervisees procedures for contacting supervisors or, in their absence, alternative on-call supervisors to assist in handling crises.

F.4.c. Standards for Supervisees

Supervisors make their supervisees aware of professional and ethical standards and legal responsibilities.

F.4.d. Termination of the Supervisory Relationship

Supervisors or supervisees have the right to terminate the supervisory relationship with adequate notice. Reasons for considering termination are discussed, and both parties work to resolve differences. When termination is warranted, supervisors make appropriate referrals to possible alternative supervisors.

F.5. Student and Supervisee Responsibilities

F.5.a. Ethical Responsibilities

Students and supervisees have a responsibility to understand and follow the Sandtray Therapy Practitioner Code of Ethics. Students and supervisees have the same obligation to clients as those required of professional Sandtray Therapists.

F.5.b. Impairment

Students and supervisees monitor themselves for signs of impairment from their own physical, mental, or emotional problems and refrain from offering or providing professional services when such impairment is likely to harm a client or others. They notify their faculty and/or supervisors and seek assistance for problems that reach the level of professional impairment, and, if necessary, they limit, suspend, or terminate their professional responsibilities until it is determined that they may safely resume their work.

F.5.c. Professional Disclosure

Before providing Sandtray Therapy services, students and supervisees disclose their status as supervisees and explain how this status affects the limits of confidentiality. Supervisors ensure that clients are aware of the services rendered and the qualifications of the students and supervisees rendering those services. Students and supervisees obtain client permission before they use any information concerning the Sandtray Therapy relationship in the training process.

F.6. Sandtray Therapy Supervision Evaluation, Remediation, and Endorsement

F.6.a. Evaluation

Supervisors document and provide supervisees with ongoing feedback regarding their performance and schedule periodic formal evaluative sessions throughout the supervisory relationship.

F.6.b. Gatekeeping and Remediation

Through initial and ongoing evaluation, supervisors are aware of supervisee limitations that might impede performance. Supervisors assist supervisees in securing remedial assistance when needed. They recommend dismissal from training programs, applied Sandtray Therapy settings, and state or voluntary professional credentialing processes when those supervisees are unable to demonstrate that they can provide competent professional services to a range of diverse clients. Supervisors seek consultation and document their decisions to dismiss or refer supervisees for assistance. They ensure that supervisees are aware of options available to them to address such decisions.

F.6.c. Sandtray Therapy for Supervisees

If supervisees request Sandtray Therapy, the supervisor assists the supervisee in identifying appropriate services. Supervisors may provide Sandtray Therapy services to supervisees. Supervisors address interpersonal competencies in terms of the impact of these issues on clients, the supervisory relationship, and professional functioning.

F.6.d. Endorsements

Supervisors endorse supervisees for certification, OPD/PD, employment, or completion of a Sandtray Therapy Practitioner academic or training program only when they believe that supervisees are qualified for the endorsement. Regardless of qualifications, supervisors do not endorse supervisees whom they believe to be impaired in any way that would interfere with the performance of the duties associated with the endorsement.

F.7. Responsibilities of Sandtray Therapy Educators

F.7.a. Sandtray Therapy Therapist Educators

Sandtray Therapy educators who are responsible for developing, implementing, and supervising educational programs are skilled as adult teachers and practitioners. They are knowledgeable regarding the ethical, legal, and regulatory aspects of the profession; are skilled in applying that knowledge; and make students and supervisees aware of their responsibilities. Whether in traditional, hybrid, and/or online formats, Sandtray Therapy educators conduct Sandtray Therapy education and training programs in an ethical manner and serve as role models for professional behaviour.

F.7.b. Sandtray Therapy Educator Competence

Sandtray Therapists who function as Sandtray Therapist educators or supervisors provide instruction within their areas of knowledge and competence and provide instruction based on current information and knowledge available in the profession. When using technology to deliver instruction, Sandtray Therapy educators develop competence in the use of the technology and advanced skills in the evolution of symbol work in Sandtray therapy.

F.7.c. Infusing/Diversity

Sandtray Therapy educators infuse material related to symbols from ancient mythology, and other sources into all courses and workshops for the development of professional Sandtray Therapists.

F.7.d. Integration of Study and Practice

In traditional, hybrid, and/or online formats, Sandtray Therapy educators establish education and training programs that integrate Sandtray Therapy Practitioner academic study and supervised practice.

F.7.e. Teaching Ethics

Throughout the program, Sandtray Therapy educators ensure that students are aware of the ethical responsibilities and standards of the profession and the ethical responsibilities of students to the profession. Sandtray Therapy educators infuse ethical considerations throughout the curriculum.

F.7.f. Use of Case Examples

The use of client, student, or supervisee information for the purposes of case examples in a lecture or classroom setting is permissible only when (a) the client, student, or supervisee has reviewed the material and agreed to its presentation or (b) the information has been sufficiently modified to obscure identity.

F.7.g. Student-to-Student Supervision and Instruction

When students function in the role of Sandtray Therapy educators or supervisors, they understand that they have the same ethical obligations as Sandtray Therapy educators, trainers, and supervisors. Sandtray Therapy educators make every effort to ensure that the rights of students are not compromised when their peers lead experiential Sandtray Therapy activities in traditional, hybrid, and/or online formats (e.g., Sandtray Therapy groups, skills classes, clinical supervision).

F.7.h. Innovative Theories and Techniques

Sandtray Therapy educators promote the use of techniques/procedures/modalities that are grounded in theory and/or have an empirical or scientific foundation. When Sandtray Therapy educators discuss developing or innovative techniques/ procedures/modalities, they explain the potential risks, benefits, and ethical considerations of using such techniques/ procedures/modalities.

F.7.i. Field Placements or Client Contact

Sandtray Therapy educators develop clear policies and provide direct assistance within their training programs regarding appropriate field placement and other clinical experiences. Sandtray Therapy educators provide clearly stated roles and responsibilities for the student or supervisee, the site supervisor, and the program supervisor. They confirm that site supervisors are qualified to provide supervision in the formats in which services are provided and inform site supervisors of their professional and ethical responsibilities in this role or the Sandtray Therapist educator takes on the role of supervisor.

F.8. Student Welfare

F.8.a. Program Information and Orientation

Sandtray Therapy educators recognize that program orientation is a developmental process that begins upon students' initial contact with the Sandtray Therapy education program and continues throughout the educational and clinical training of students. Sandtray Therapy education faculty provide prospective and current students with information about the Sandtray Therapy education program's expectations, including 1. the values and ethical principles of the profession; 2. the type and level of skill and knowledge acquisition required for successful completion of the training; 3.

technology requirements; 4. program training goals, objectives, and mission, and subject matter to be covered; 5. bases for evaluation; 6. training components that encourage self-growth or self-disclosure as part of the training process; 7. the type of supervision settings and requirements of the sites for required clinical field experiences; 8. student and supervisor evaluation and dismissal policies and procedures; and 9. Student policy & procedures relating to all course work.

F.8.b. Student Career Advising

Sandtray Therapy educators where applicable may provide career advice for their students and make them aware of opportunities in the field.

F.8.c. Self-Growth Experiences

Self-growth is an expected component of Sandtray Therapy education. Sandtray Therapy educators are mindful of ethical principles when they require students to engage in self-growth experiences. Sandtray Therapy educators and supervisors inform students that they have a right to decide what information will be shared or withheld in class.

F.8.d. Addressing Personal Concerns

Sandtray Therapy educators may require students to address any personal concerns that have the potential to affect professional competency both within the classroom and in their practice.

F.9. Evaluation and Remediation

F.9.a. Evaluation of Students

Sandtray Therapy educators clearly state to students, prior to and throughout the training program, the levels of competency expected, appraisal methods, and timing of evaluations for both didactic and clinical competencies. Sandtray Therapy educators provide students with ongoing feedback regarding their performance throughout the training program.

F.9.b. Limitations

Sandtray Therapy educators, through ongoing evaluation, are aware of and address the inability of some students to achieve Sandtray Therapy competencies. Sandtray Therapy educators do the following:

1. assist students in securing remedial assistance when needed, 2. seek professional consultation and document their decision to dismiss or refer students for assistance, and 3. ensure that students have recourse in a timely manner to address decisions requiring them to seek assistance or to dismiss them and provide students with due process according to institutional policies and procedures. Training providers will follow their own Policy and Procedures.

F.9.c. Sandtray Therapy for Students

If students request Sandtray Therapy, or if Sandtray Therapy services are suggested as part of a remediation process, Sandtray Therapy educators assist students in identifying appropriate services.

F.10. Roles and Relationships Between Sandtray Therapy Educators and Students

F.10.a. Sexual or Romantic Relationships

Sandtray Therapy educators are prohibited from sexual or romantic interactions or relationships with students currently enrolled in a Sandtray Therapy or related program and over whom they have power and authority. This prohibition applies to both in-person and electronic interactions or relationships.

F.10.b. Sexual Harassment

Sandtray Therapy educators do not condone or subject students to sexual harassment.

F.10.c. Relationships with Former Students

Sandtray Therapy educators are aware of the power differential in the relationship between faculty and students. Faculty practitioners discuss with former student's potential risks when they consider engaging in social, sexual, or other intimate relationships.

F.10.d. Non-Sandtray Therapy Practitioner Relationships

Sandtray Therapy educators avoid non-Sandtray Therapy Practitioner relationships with students in which there is a risk of potential harm to the student, or which may compromise the training experience or grades assigned. Sandtray Therapy educators may accept any form of professional services, fees, reimbursement, or remuneration from a site for student or supervisor placement.

F.10.e. Sandtray Therapy Services

Sandtray Therapy educators may serve as Sandtray Therapists to students currently enrolled in a Sandtray Therapy (where possible, circumstances will arise in rural and remote regions) or related program and over whom they have authority.

F.10.f. Extending Educator– Student Boundaries

Sandtray Therapy educators are aware of the power differential in the relationship between faculty and students. If they believe that a nonprofessional relationship with a student may be potentially beneficial to the student, they take precautions similar to those taken by Sandtray Therapists when working with clients. Examples of potentially beneficial interactions or relationships include, but are not limited to, attending a formal ceremony; conducting hospital visits; providing support during a stressful event; or maintaining mutual practitionership in a professional industry, organisation, or community. Sandtray Therapy educators discuss with students the rationale for such interactions, the potential benefits and drawbacks, and the anticipated consequences for the student. Educators clarify the specific nature and limitations of the additional role(s) they will have with the student prior to engaging in a nonprofessional relationship. Nonprofessional relationships with students should be time limited and/or context specific and initiated with student consent.

F.11. Multicultural/Diversity Competence in Sandtray Therapy Education and Training Programs

F.11.a. Faculty Diversity

Sandtray Therapy educators are open to recruiting and retaining a diverse faculty, however faculty will be recruited on their knowledge and skills as first point.

F.11.b. Student Diversity

Sandtray Therapy educators demonstrate commitment to multicultural/diversity competence by recognizing and valuing the diverse cultures and types of abilities that students bring to the training experience. Sandtray Therapy educators expect all students to integrate into the holistic training and provide appropriate open mindedness in all subjects relating to sand, symbols and integration of and student well-being and Sandtray Therapy Practitioner academic performance.

F.11.c. Multicultural/Diversity Competence

Sandtray Therapy educators actively request students to explore multicultural/diversity competency in their training and supervision practices. They actively train students to gain awareness, knowledge, and skills in the competencies of the collective and individual practice.

Section - Research and Publication

Introduction

Sandtray Therapists who conduct research are encouraged to contribute to the knowledge base of the profession and promote a clearer understanding of the conditions that lead to a healthy and more just society. Sandtray Therapists support the efforts of researchers by participating fully and willingly whenever possible. Sandtray Therapists minimise bias and respect diversity in designing and implementing research.

G.1. Research Responsibilities

G.1.a. Conducting Research

Sandtray Therapists plan, design, conduct, and report research in a manner that is consistent with pertinent ethical principles, federal and state laws, host institutional regulations, and scientific standards governing research and enterprise agreements with other stakeholders and non-profits.

G.1.b. Confidentiality in Research

Sandtray Therapists are responsible for understanding and adhering to state, federal, agency, or institutional policies or applicable guidelines regarding confidentiality in their research practices.

G.1.c. Independent Researchers

When Sandtray Therapists conduct independent research and do not have access to an institutional review board, they are bound to the same ethical principles and code of ethics.

G.1.d. Deviation from Standard Practice

Sandtray Therapists seek consultation and observe stringent safeguards to protect the rights of research participants when research indicates that a deviation from standard or acceptable practices may be necessary.

G.1.e. Precautions to Avoid Injury

Sandtray Therapists who conduct research are responsible for their participants' welfare throughout the research process and should take reasonable precautions to avoid causing emotional, physical, or social harm to participants.

G.1.f. Principal Researcher Responsibility

The ultimate responsibility for ethical research practice lies with the principal researcher. All others involved in the research activities share ethical obligations and responsibility for their own actions.

G.2. Rights of Research Participants

G.2.a. Informed Consent in Research

Individuals have the right to decline requests to become research participants. In seeking consent, Sandtray Therapists use language that 1. accurately explains the purpose and procedures to be followed; 2. identifies any procedures that are experimental or relatively untried; 3. describes any attendant discomforts, risks, and potential power differentials between researchers and participants; 4. describes any benefits or changes in individuals or organisations that might reasonably be expected; 5. discloses appropriate alternative procedures that would be advantageous for participants; 6. offers to answer any inquiries concerning the procedures; 7. describes any limitations on confidentiality; 8. describes the format and potential target audiences for the dissemination of research findings; and 9. instructs participants that they are free to withdraw their consent and discontinue participation in the project at any time, without penalty.

G.2.b. Student/Supervisee Participation

Researchers who involve students or supervisees in research make clear to them that the decision regarding participation in research activities does not affect their Sandtray Therapy Practitioner academic standing or supervisory relationship. Students or supervisees who choose not to participate in research are provided with an appropriate alternative to fulfil their Sandtray Therapy Practitioner or clinical requirements.

G.2.c. Client Participation

Sandtray Therapists conducting research involving clients make clear in the informed consent process that clients are free to choose whether to participate in research activities. Sandtray Therapists take necessary precautions to protect clients from adverse consequences of declining or withdrawing from participation.

G.2.d. Confidentiality of Information

Information obtained about research participants during the course of research is confidential. Procedures are implemented to protect confidentiality.

G.2.e. Persons Not Capable of Giving Informed Consent

When a research participant is not capable of giving informed consent, Sandtray Therapists provide an appropriate explanation to obtain agreement for participation from, and obtain the appropriate consent of a legally authorised person.

G.2.f. Commitments to Participants

Sandtray Therapists take reasonable measures to honour all commitments to research participants.

G.2.g. Explanations After Data Collection

After data are collected, Sandtray Therapists provide participants with full clarification of the nature of the study to remove any misconceptions participants might have regarding the research. Where scientific or human values justify delaying or withholding information, Sandtray Therapists take reasonable measures to avoid causing harm.

G.2.h. Informing Sponsors

Sandtray Therapists inform sponsors, institutions, and publication channels regarding research procedures and outcomes. Sandtray Therapists ensure that appropriate bodies and authorities are given pertinent information and acknowledgment.

G.2.i. Research Records Custodian

As appropriate, researchers prepare and disseminate to an identified colleague or records custodian a plan for the transfer of research data in the case of their incapacitation, retirement, or death.

G.3. Managing and Maintaining Boundaries

G.3.a. Extending Researcher– Participant Boundaries

Researchers consider the risks and benefits of extending current research relationships beyond conventional parameters. When a non-research interaction between the researcher and the research participant may be potentially beneficial, the researcher must document, prior to the interaction (when feasible), the rationale for such an interaction, the potential benefit, and anticipated consequences for the research participant. Such interactions should be initiated with appropriate consent of the research participant. Where unintentional harm occurs to the research participant, the researcher must show evidence of an attempt to remedy such harm.

G.3.b. Relationships with Research Participants Sexual or romantic

Sandtray Therapist–research participant interactions or relationships with current research participants may be prohibited. This may apply to both in-person and electronic interactions or relationships.

G.3.c. Sexual Harassment and Research

Participants Researchers do not condone or subject research participants to sexual harassment.

G.4. Reporting Results

G.4.a. Accurate Results

Sandtray Therapists plan, conduct, and report research accurately. Sandtray Therapists do not engage in misleading or fraudulent research, distort data, misrepresent data, or deliberately bias their results. They describe the extent to which results are applicable for diverse populations.

G.4.b. Obligation to Report Unfavourable Results

Sandtray Therapists report the results of any research of professional value. Results that reflect unfavourably on institutions, programs, services, prevailing opinions, or vested interests are not withheld.

G.4.c. Reporting Errors

If Sandtray Therapists discover significant errors in their published research, they take appropriate measures to reasonable steps to correct such errors in a correction erratum or through other appropriate publication means.

G.4.d. Identity of Participants

Sandtray Therapists who supply data, aid in the research of another person, report research results, or make original data available take due care to disguise the identity of respective participants in the absence of specific authorization from the participants to do otherwise. In situations where participants self-identify their involvement in research studies, researchers take active steps to ensure that data are adapted/ changed to protect the identity and welfare of all parties and that discussion of results does not cause harm to participants.

G.4.e. Replication Studies

Sandtray Therapists are not obligated to make available sufficient original research information to qualified professionals who may wish to replicate or extend the study.

G.5. Publications and Presentations

G.5.a. Use of Case Examples

The use of participants', clients', students', or supervisees' information for the purpose of case examples in a presentation or publication is permissible only when (a) participants, clients, students, or supervisees have reviewed the material and agreed to its presentation or publication or (b) the information has been sufficiently modified to obscure identity.

G.5.b. Plagiarism

Sandtray Therapists do not plagiarise; that is, they do not present another person's work as their own.

G.5.c. Acknowledging Previous Work

In publications and presentations, Sandtray Therapists acknowledge and give recognition to previous work on the topic by others or self. The exclusion is if some material is gained on ChatGPT.

G.5.d. Contributors

Sandtray Therapists give credit through joint authorship, acknowledgment, footnote statements, or other appropriate means to those who have contributed significantly to research or concept development in accordance with such contributions. The principal contributor is listed first, and minor technical or professional contributions are acknowledged in notes or introductory statements.

G.5.e. Agreement of Contributors

Sandtray Therapists who conduct joint research with colleagues or students/supervisors establish agreements in advance regarding allocation of tasks, publication credit, and types of acknowledgment that will be received.

G.5.f. Student Research

Manuscripts or professional presentations in any medium that are substantially based on a student's course papers, projects, dissertations, or theses are used only with the student's permission and list the student as lead author.

G.5.g. Duplicate Submissions

Sandtray Therapists may submit manuscripts for consideration to more than one journal at a time. Manuscripts that are published in whole or in substantial part in one journal or published work are submitted for publication to another publisher.

G.5.h. Professional Review

Sandtray Therapists who review material submitted for publication, research, or other scholarly purposes respect the confidentiality and proprietary rights of those who submitted it. Sandtray Therapists make publication decisions based on valid and defensible standards. Sandtray Therapists review article submissions in a timely manner and based on their scope and competency in research methodologies. Sandtray Therapists who serve as reviewers at the request of editors or publishers make every effort to only review materials that are within their scope of competency and avoid personal biases.

H.5. Records and Web Maintenance

H.5.a. Records

Sandtray Therapists maintain electronic records in accordance with relevant laws and statutes. Sandtray Therapists inform clients on how records are maintained electronically. This includes, but is not limited to, the type of encryption and security assigned to the records, and if/for how long archival storage of transaction records is maintained.

H.5.b. Client Rights

Sandtray Therapists who offer distance Sandtray Therapy services and/or maintain a professional website provide electronic links to relevant other Sandtray therapists who may offer face to face Sandtray therapy services. The Sandtray Therapy Association of Australia will be a good source of the licensure and professional certification of these other Sandtray Therapists.

H.5.c. Electronic Links

Sandtray Therapists regularly ensure that electronic links are working and are professionally appropriate.

H.5.d. Multicultural and Disability Considerations

Sandtray Therapists who maintain websites provide accessibility to persons with disabilities if applicable. Sandtray Therapists acknowledge who can and who cannot do Sandtray Therapy.

H.6. Social Media

H.6.a. Virtual Professional Presence

In cases where Sandtray Therapists wish to maintain a professional and personal presence for social media use, separate professional and personal web pages and profiles are created to clearly distinguish between the two kinds of virtual presence.

H.6.b. Social Media as Part of Informed Consent

Sandtray Therapists clearly explain to their clients, as part of the informed consent procedure, the benefits, limitations, and boundaries of the use of social media as applied to the Sandtray therapists' practice.

H.6.c. Client Virtual Presence

Sandtray Therapists respect the privacy of their clients' presence on social media unless given consent to view such information.

H.6.d. Use of Public Social Media

Sandtray Therapists take precautions to avoid disclosing confidential information through public social media.

This is an example of the official badge of STTAA. Every member will receive their level of membership. This badge can be displayed on social media and for other marketing purposes for the duration of current membership.

