POSITION STATEMENT

TERMINOLOGY FOR INDIVIDUALS RECEIVING MASSAGE THERAPY CARE

Introduction

In 2026, the College of Massage Therapists of Ontario (CMTO) undertook a process of revising its standards, policies, and official documents to replace the term *client* with *patient*. This change reflects alignment with the Regulated Health Professions Act (RHPA) and broader healthcare system terminology used across regulated health professions in Ontario.

The RMTAO supports this alignment within regulatory, clinical, and interprofessional contexts, recognizing the importance of consistent language within the healthcare system. At the same time, the RMTAO acknowledges that massage therapy is practiced across a diverse range of settings that extend beyond traditional clinical environments.

In response, the RMTAO has developed this position statement to provide clarity and guidance on terminology use across the profession. This statement affirms that both *client* and *patient* remain appropriate and professionally acceptable terms and supports RMTs in selecting terminology that reflects their practice setting, clinical context, and the preferences of the individual receiving care.

Background

Massage therapy is practiced across a wide range of settings, including rehabilitation and interdisciplinary healthcare teams, wellness, sports medicine, and community care. The diversity of these environments means that no single term may universally capture the nature of the therapeutic relationship.

Research examining terminology preferences is limited, but the available evidence consistently identifies *patient* as the most preferred term, while also highlighting significant variation by context, discipline, and individual perspective. Individuals receiving care in medical and acute care settings tend to favour *patient* over *client,* whereas preferences in community, mental health, and wellness settings are more variable. These findings reinforce that no single term is universally preferred across all healthcare environments (Costa et al., 2019; Simmons et al., 2010.

The RMTAO acknowledges that the term *patient* aligns with typical healthcare and interprofessional language and supports RMTs working within regulated health profession frameworks and interprofessional care environments, while *client* reflects collaborative, person-centred care and may be well-suited to wellness and preventative practice contexts. Both terms carry professional legitimacy and reflect different models and philosophies of care (Costa et al., 2019; Deber et al., 2005)

Current guidance across healthcare systems increasingly favours person-centred language that prioritizes individuality, dignity, and preferences of the person receiving care. This approach shifts the focus from identifying a single “correct” label to ensuring that language reflects respectful, inclusive, and collaborative therapeutic relationships (Ontario Centres for Learning, Research and Innovation in Long-Term Care, 2025; National Collaborating Centre for Determinants of Health, 2025).

When selecting terminology, RMTs are encouraged to consider:

- the clinical nature of their practice setting
- alignment with interprofessional team language
- documentation, charting, and insurance requirements
- the preferences of the individual receiving care

- cultural, personal, and trauma-informed perspectives
- the current expectations set forward by the CMTO and/or any other governing bodies (e.g. Ministry of Health, PHIPA, PIPEDA, etc.)

Position

The RMTAO recognizes that both *client* and *patient* are appropriate terms for describing the individual receiving massage therapy care. Registered Massage Therapists should feel comfortable using any term deemed appropriate based on their practice setting, clinical context, and the preferences of the individual receiving care.

Summary

The RMTAO acknowledges that RMTs work in diverse practice settings. As such, the Association recognizes that RMTs may refer to the people they provide care to as either *client* or *patient*. The RMTAO encourages RMTs to continue practicing in a person-centred manner and believes the most important consideration is to provide safe, ethical, and respectful care.

This position aligns with current evidence and guidance, which support context-dependent terminology and emphasizes person-centred language over the use of any single universal term.

As the profession continues to evolve within primary and interdisciplinary care, the RMTAO will monitor emerging language and revisit this guidance as needed.

References

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Accepted by Unanimous Vote (10 – 0) on July 28, 2026.