# Breaking the Legacy of Silence: A Feminist Perspective on Therapist Attraction to Clients

Renata Carneiro, Jody Russon, Allena Moncrief, Erica Wilkins

**Abstract**—Views on therapists' attraction have influenced the ethical and professional development of the mental health fields. Because the majority of therapist attraction literature (63.6%) has been conducted from a psychoanalytic standpoint, approaches to attraction from feminist perspectives have not been adequately developed. Considering the lack of a feminist voice regarding attraction, this article attempts to offer a feminist perspective on this issue. The purpose of this article is to offer a feminist perspective on the phenomenon of attraction in order to raise awareness about the importance of power inequalities, intersectionalities, contextual variables and the need for action in the field.

**Keywords**—attraction, feminism, power inequality, silence

#### I. INTRODUCTION

VIEWS on therapists' attraction have influenced the ethical and professional development of the mental health fields. A review of therapist attraction literature, over the past 47 years, shows that the majority of literature has been written from a male-dominated, Westernized perspective. As the majority, 63.6%, of therapist attraction work has been conducted from a psychoanalytic standpoint, approaches to attraction from feminist perspectives has not been adequately developed (see table I). Scholarly explanations of attraction have typically reflected patriarchal values, which assert that women are attracted to power and men are drawn to physical beauty. These assertions reinforce the patriarchal orientations dominating therapist attraction work. Considering the lack of a feminist voice regarding attraction, this article attempts to break the silence by offering a feminist perspective on this issue.

Attempting to understand attraction, there are two types of articles in the mental health field that attempt to understand this concept. One type attempts to understand the underlying causes of attraction from the therapist perspective. Results from such work report on therapists' feelings of discomfort regarding their ability to handle attraction in session. A more extensive understanding of attraction should include an exploration of the ways that self-location of therapists and clients (culture, gender, sexual orientation, gender identity, disability status, religion, race, and age) affect feelings of attraction. Doing so will reveal the implicit and explicit messages that therapists and clients bring to the therapeutic encounter.

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The second category of articles uses theoretical orientation to explain attraction from research findings and offers guidelines on how to manage in session.

Researchers have explored ways that mental health professionals, from any orientation, can understand attraction [28]. This work has neglected to include contextual and cultural exploration within the therapist-client relationship. Both categories of articles largely overlook social inequalities and other contextual variables that exist in therapist-client relationships. Such inequalities are even more salient when considering race, disability, sexual orientation and gender identity.

It is important to note that the majority of attraction literature has been conducted in the psychology domain of mental health. Two-thirds (66.7%) of therapist attraction publications, in the last 47 years, have been written by psychologists (see table I). Most of the attraction research in Couple and Family Therapy (CFT) either has not included contextual variables or these findings have not been generalizable.

Overall, invisibility of diverse groups is pervasive in the attraction research literature, reinforcing a stigmatized perspective. For example, the only time disability status is mentioned is when authors refer to clients who are impaired [31]. This point of view further stigmatized disabled individuals being sexual pray, instead of "sexually attractive" [31]. The larger context of attraction in this research demonstrates the inherited patriarchal views prevalent in the field

Within the context of therapy, many therapists replicate the organizing gender principles that they experience in society at large. From a feminist perspective, attraction in North American society is conceptualized as a power inequality between males and females. This is due to the patriarchal discourse that leads many heterosexual males to feel entitled due to their experience of sexuality. When this stance remains unexplored and unchecked, derogatory messages may facilitate the erosion of boundaries between male therapists and female clients [30]. In order to understand attraction, power and dominance needs to be properly addressed by the therapist.

## II. SIGNIFICANCE OF INTERSECTIONALITY IN THERAPIST ATTRACTION

Many therapists have disclosed a lack of personal training regarding how to handle attraction, their concern that a client would find out, and fear of consulting with a supervisor or colleague [28], [31], [32]. The taboo associated with therapists' attraction silences many therapists and aspiring mental health professionals. Meanwhile, strong feelings related to therapist attraction are widely unaddressed creating a perpetual cycle of silence and shame. Most recent surveys have indicated that 70% to 90% of therapists report feeling sexually attracted to their clients [15].

### World Academy of Science, Engineering and Technology International Journal of Psychological and Behavioral Sciences Vol:6, No:6, 2012

TABLE I SUMMARY OF THERAPIST ATTRACTION LITERATURE

First Author	Year	Psychoanalytic Approach	Field
Bernsen	1994	Other model	Psychology/ Social Work
Brayner	1996	Psychoanalysis	Psychology
Cantor	1975	Other model	Psychology
Davies	1994	Psychoanalysis	Psychology
Drescher	1996	Psychoanalysis	Psychiatry
Dutton	1974	Other model	Psychology
Ellis	1994	Psychoanalysis	Psychology
Elliot	2007	Psychoanalysis	Psychology
Fisher	2004	Other model	Psychology
Gabbard	1994	Psychoanalysis	Psychology
Gorton	1997	Other model	Psychiatry
Harris	2001	Other model	Marriage and
			Family
			Therapy
Hoffer	1994	Psychoanalysis	Psychology
Jorstad	2002	Psychoanalysis	Psychiatry
Kosiello	2000	Psychoanalysis	Psychology
Lane	1995	Psychoanalysis	Psychology
Mann	1998	Psychoanalysis	Psychology
Maroda	2000	Psychoanalysis	Psychology
Masters	1976	Other model	Psychiatry
Nickell	1995	Other model	Marriage and
			Family
			Therapy
Ponce	1993	Psychoanalysis	Psychiatry
Pope	1986	Other model	Psychology
Pope	1986	Other model	Psychology
Pope	1993	Other model	Psychology
Rosiello	2000	Psychoanalysis	Social Work
Rutter	1989	Psychoanalysis	Psychiatry
Schover	1981	Other model	Psychology
Sehl	1998	Psychoanalysis	Social Work
Shapiro	2010	Psychoanalysis	Psychology
Sherman	2002	Psychoanalysis	Social Work
Solomon	1997	Psychoanalysis	Psychology
Tansey	1994	Psychoanalysis	Psychology
Wrye	1994	Psychoanalysis	Psychology

First author, year, approach and field listed from past 47 years of therapist attraction literature.

#### World Academy of Science, Engineering and Technology International Journal of Psychological and Behavioral Sciences Vol:6, No:6, 2012

Similarly, a survey of students from an accredited marriage and family therapy program reveal that the majority of students in their first year of clinical experience reported feelings of attraction towards their clients [18]. These results indicate a strong need for therapist attraction to be more adequately addressed in the mental health fields.

Systemic therapists will inevitability encounter the issue of attraction during their career; therefore this topic requires a broader social analysis training framework that is congruent with systemic views of CFT. To date most research and theoretical publications have been authored from a patriarchal, psychoanalytic orientation. As the literature in mental health expands to include diverse perspectives of therapist attraction, concepts of intersectionalites, therapist awareness of power, and roles of implicit and explicit patriarchal cultural messages must be explored through a feminist perspective.

#### III. PURPOSE OF A FEMINIST PERSPECTIVE

By virtue of the therapeutic relationship, therapists always have more power than clients. This has been established in other studies that have documented therapists' abuse of power by becoming sexually involved with clients [27]. The taboo associated with sexual feelings has led many researchers to focus on the content of attraction rather than the process [5], [9], [12]. Although the content for attraction literature can be shocking, losing sight of socio-cultural variables can be equally damaging to the field.

A primary goal of feminist family therapy is to understand the forces in society that control and damage girls and women as well as boys and men [7]. The literature thus far has focused on the psychoanalytic aspects of attraction by trying to predict and formulate the types of therapists who are at a higher risk of experiencing attraction to clients [32]. The focus on the psychoanalytic aspects of attraction offers a reductionist view of this topic, resulting in a need for additional research. Focusing on the process, instead of primarily on the content, will allow therapists not to replicate the same system of oppression that is rampant in American society. In order to address the issue of attraction as a field, helping professionals need to understand the context in which attraction perpetuates a system of oppression.

The perspectives of those with subjugated societal positions have not been explored as a result of the privileged positions of many researchers. Similarly, males primarily have written literature that applies a psychoanalytic perspective to explain the phenomena of attraction. Psychoanalysis is a theory that poses a patriarchal point of view and has been highly criticized by feminists for being sexist [3].

Secondly, the exclusion of subjugated groups obscures information about minority clients' and therapists' experiences of therapeutic attraction. There is a need in the field to include minority researchers so their voices can be captured. By giving therapists a voice to explore how attraction impacts their relationship with clients, the field could question the veracity of patriarchal beliefs and contribute insights about how to manage attraction in therapeutic relationships.

Thirdly, even though the therapist has more power in the relationship, this power is not consistently present. The intersectionality aspects of relationships cause an ever-shifting

experience of power between therapists and clients. For example, a female therapist may have more power than her male client due to her profession; however, her white, male client has more power in society because of his race and sex. Opening the discussion about these intersectionalities will provide more insight into the power differentials that exist in session.

Finally, in order for the helping professions to eradicate prejudice, discrimination, inequality and oppression of one group by another, social analysis is needed [14]. The process of social analysis helps therapists and clients to identify where they fall in the context of a social hierarchy.

The first step is to identify where one belongs in terms of privilege and subjugation. Therapists' line of questioning revolves around where they belong in terms of their social location. For example, a therapist may identify as a female, a woman of color, able-bodied, heterosexual, and so on. This analysis is then followed by the social location of clients.

#### IV. CONCLUSION

The complexities of self-location may create several dynamics that have the potential to be clinically significant, highlighting the purposes outlined in this article. Overall, future research and theoretical conceptualization should seek to build on a feminist perspective of attraction in order to raise awareness about the importance of power inequalities, intersectionalities, contextual variables, and the need for action in the field.

#### REFERENCES

- American Psychological Association. Ethical standards of Psychologists (Rev. ed.). Washington, D.C.: Author, 1977. (a)
- [2] American Psychological Association. Standards for providers of psychological services. Author, 1977. (b)
- [3] Beauvoir, S. d. (1989). The Second Sex, trans. H. M. Parshley, New York: Vintage Books.
- [4] Bernsen, A., Tabachnick, B. G, & Pope, K.S. (1994). National survey of social workers' sexual attraction to their clients: Results, implications, and comparison to psychologists. Ethics & Behavior, 4, 369-388. doi:10.1207/s15327019eb0404
- [5] Brayner, I. A. (1996). Erotic transference and countertransference in the analysis of children and adolescents: Aggressivity and eroticism. RevistaBrasileira de Psicanalise ,30,4, 1147-1156. Retrieved from http://www.datenschlag.org/english/bisam/year/index.html
- [6] Cantor, J.R., Zillmann, D., & Bryant, J. (1975) Enhancement of Experienced Sexual Arousal in Response to Erotic Stimuli Through Misattribution of Unrelated Residual Excitation. Journal of Personality and Social Psychology, 32, 69-75. doi: 10.1037/h0076784
- [7] Corey, G. (2008). Theory and Practice: Counseling and Psychotherapy. Belmont, CA: Cenage Learning.
- [8] Davies, J. M. (1994). Love in the afternoon: A relational reconsideration of desire and dread in the countertransference. Psychoanalytic Dialogues, 4, 153-170.doi:10.1080/10481889409539011
- [9] Drescher, J. (1996). Across the great divide: Gender panic in the analytic dyad.Psychoanalysis & Psychotherapy, 13,2, 174-186. Retrieved from http://journalseek.net
- [10] Dunne, C. (2000).Carl Jung: wounded healer of the soul: an illustrated biography. New York: Parabola Books.
- [11] Dutton, D. G & Aron, A. P. (1974). Some evidence for heightened sexual attraction under conditions of high anxiety. Journal of Personality and Social Psychology, 30, 510-517. doi:10.1037/h0037031
- [12] Ellis, M. V &Douce, L. A. (1994). Group supervision of novice clinical supervisors: Eight recurring issues. Journal of Counseling & Development, 72,5, 520-525. Retrieved from http://proquest.umi.com
- [13] Elliott, S, Loewenthal, D. & Greenwood, D. (2007). Narrative research into erotic countertransference in a female therapist-male patient

#### World Academy of Science, Engineering and Technology International Journal of Psychological and Behavioral Sciences Vol:6, No:6, 2012

- encounter.Psychoanalytic Psychotherapy, 21, 233-249. doi:10.1080/02668730701535594
- [14] Enns, Z. C. (2010).Locational Feminisms and Feminist Social Identity Analysis.Professional Psychology: Research and Practice American Psychological Association41,4, 333—339. doi: 10.1037/a0020260
- [15] Fisher, C. D. (2004). Ethical Issues in Therapy: Therapist Self-Disclosure of Sexual Feelings. Ethics & Behavior., 14,2,105-121. Retrieved from http://www.tandf.co.uk
- [16] Gabbard, G. O. (1994). Sexual excitement and countertransference love in the analyst. Journal of the American Psychoanalytic Association, 42,4, 1083-1106. Retrieved from http://apa.sagepub.com/
- [17] Gorton, G. E & Samuel, S. E. (1997). A course for residents on sexual feelings and boundary maintenance in treatment: Reply. Academic Psychiatry, 21,3, 167-168. doi: 10.1037/0735-7028.29.1.86
- [18] Harris, S. M. (2001). Teaching family therapists about sexual attraction in therapy. Journal of Marital and Family Therapy, 27,1, 123-128. doi: 10.1111/j.1752-0606.2001.tb01145.x
- [19] Hoffer, A., Barron, J. W. (1994). Historical events reinforcing Freud's emphasis on "holding down the countertransference."The Psychoanalytic Quarterly, 63,3, 200-217. Retrieved from http://www.psaq.org/
- [20] Jorstad, J. (2002). Erotic countertransference: Hazards, challenges and therapeutic potentials. The Scandinavian Psychoanalytic Review, 25,2, 117-134. Retrieved from http://journalseek.net/
- [21] Lane, R. (1995). Incomplete mourning, betrayal, and revenge in The Prince of Tides: Erotic countertransference in the cinema. Journal of Contemporary Psychotherapy, 25, 123-134. doi:10.1007/BF02306686
- [22] Lorde, Audre (1984). Sisters Outside.Berkely: Crossing Press.
- [23] Ludvig, A. (2006). Differences Between Women? Intersecting Voices in a Female Narrative. European Journal of Women's Studies,13, 245-256.doi: 10.1177/1350506806065755
- [24] Maines, R. P. (1998). The Technology of Orgasm: "Hysteria," the Vibrator, and Women's Sexual Satisfaction. Baltimore: The John Hopkins University Press.
- [25] Mann, D. (1995). Erotic transference and countertransference: Clinical practice in psychotherapy. London: Routledge.
- [26] Maroda, K. J. (2000). On homoeroticism, erotic countertransference and the postmodern view of life: A commentary on papers by Rosiello, Tholfsen, and Meyers. Journal of Gay & Lesbian Psychotherapy, 4, 61-70. doi:10.1300/J236v04n02\_05
- [27] Masters, W. H., & Johnson, V. E. (1976). Principles of the new sex therapy. American Journal of Psychiatry, 133, 5, 548-554. Retrieved from http://psycnet.apa.org/psycinfo/1976-21000-001
- [28] Nickell, N. J, Hecker, L., Rose, E. &Bercik, J. (1995). Marriage and family therapists' sexual attraction to clients: An exploratory study. American Journal of Family Therapy, 23, 315-327. doi:10.1080/01926189508251362
- [29] Ponce, D. (1993). Erotic countertransference issues in a residential treatment center. Residential Treatment for Children & Youth,11, 107-123. doi:10.1300/J007v11n02\_08
- [30] Pope, K. S., &Bouhoutsos, J. C. (1986). Sexual intimacies between therapists and patients. New York: Praeger/Greenwood.
- [31] Pope, S. K., Spiegel, K., Tabachnick, P. G. B. (1986). Sexual Attraction to Clients: The Human Therapist and the (Sometimes) Inhuman Training System. American Psychologist, 41,147-58.doi: 10.1037/1931-3918.S.2.96
- [32] Pope, K., Sonne, J. & Holroyd, J. (1993). Frequent reactions to sexual feelings in therapy: Explorations for therapists and therapists-in-training. American Psychological Association, 3,79-101.doi:10.1037/10124-006
- [33] Rosiello, F. (2000). On lust and loathing: Erotic transference/countertransference between a female analyst and female patients. Journal of Gay & Lesbian Psychotherapy, 4, 5-26. doi:10.1300/J236v04n02\_02
- [34] Rutter, P. (1989). Sex in the forbidden zone when men in powertherapists, doctors, clergy, teachers and others-betray Women's Trust. Los Angeles: Jeremy P. Tarcher Inc.
- [35] Schover, L. R. (1981). Male and female therapists' responses to male and female client sexual material: An analogue study. Archives of Sexual Behavior, 10, 477-492. doi:10.1007/BF01541584
- [36] Sehl, M. R. (1998). Erotic countertransference and clinical social work practice: A national survey of psychotherapists' sexual feelings, attitudes, and responses. Journal of Analytic Social Work, 5,4, 39-55. doi:10.1207/s15327019eb0404 4
- [37] Shapiro, S. A. (2010). Clinical realism versus the seductions of universal theory: Discussion of Celenza's "The guilty pleasure of erotic

- countertransference: Searching for radial true." Studies in Gender and Sexuality, 11, 192-199. doi:10.1080/15240657.2010.513230
- [38] Sherman, E. (2002). Homoerotic Countertransference: The Love That Dare Not Speak Its Name? Psychoanalytic Dialogues, 12, 649-666. doi:10.1080/10481881209348697
- [39] Solomon, M. F. (1997). On love and lust in the countertransference. Journal of the American Academy of Psychoanalysis, 25,1, 71-90.doi: 10.1177/000306519404200203
- [40] Tansey, M. J. (1994). Sexual attraction and phobic dread in the countertransference. Psychoanalytic Dialogues, 4, 139-152. doi:10.1080/10481889409539010
- [41] Wrye, H., K. & Welles, J. K. (1994). The narration of desire: Erotic transferences and countertransferences. Hillsdale, NJ, England: Analytic Press, Inc, England.