Sexual attraction to clients: are master of social work students trained to manage such feelings?

Jennifer Davis Begun

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Jennifer Davis Begun  
Sexual Attraction to Clients: Are  
Master of Social Work Students  
Trained to Manage Such Feelings?

Abstract

This exploratory/descriptive study was undertaken to determine if master of social work students in a current field placement experienced sexual attraction to clients, and whether they felt adequately trained on the subject. The study also inquired about how the students handled their feelings of sexual attraction and whether they discussed them with their supervisor and/or fellow students.

An email was sent out to the researcher’s fellow social work students asking them to complete the qualitative and quantitative survey and to pass it along to others in master of social work programs. To be eligible, all survey respondents had to be currently enrolled in a master’s of social work program as well as currently participating in a field placement or internship. Ninety subjects started the survey but only seventy-two qualified to participate and completed it.

The findings of this study indicate that responding students in master of social work programs reported that they did not receive adequate trainings on the subject of sexual attraction to clients. Half of the subjects stated that they had experienced sexual attraction to at least one client, noting that this is a common occurrence among students in their field placements. However, only three subjects noted discussing the feelings of sexual attraction to a client with their supervisors, and few indicated that supervisors raised this topic or seemed able to help them as interns discuss it. Given that sexual contacts comprise a large fraction of the complaints to ethics boards in clinical professions, interns’ lack of training seems a significant omission.
SEXUAL ATTRACTION TO CLIENTS:
ARE MASTER OF SOCIAL WORK STUDENTS TRAINED TO MANAGE SUCH FEELINGS?

A project based upon an independent investigation, submitted in partial fulfillment of the requirements for the degree of Master of Social Work.

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2011
I would like to say thank you to all of my fellow social work students who participated in this study and helped me along the way. I would also like to thank my former supervisor, Dr. Mazella Hall, for modeling how to create a safe space in order to talk about sexual attraction to clients. Many thanks also go to my incredible thesis advisor, Gael McCarthy for her patience and the large amount of time and energy she dedicated to this project.

I have no words to express how grateful I am to my family and friends for loving me, supporting me and believing in me. I am also especially grateful for the encouragement, love and support of Alan.
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Chapter I

Introduction

After completing my second summer of classes at Smith, I began my placement at a university counseling center in the fall. Feeling much more confident than in my first placement, I then completed several weeks of extensive training upon my arrival at the counseling center. I began to see clients for initial evaluations and began to meet regularly with my supervisor. Several weeks into my placement, I saw a client for an initial evaluation that left me feeling thoroughly confused. I was able to identify during this initial session that I was feeling sexually attracted to this client. I don’t know what was more shocking at the time, that I felt such feelings towards a client or that I had been through the majority of my training before graduating and had not even had this mentioned. Having not received any training on the subject, I was alarmed at what this might mean for me as the therapist and whether I would be able to work with this client.

I proceeded to walk quickly downstairs to see if I might catch my supervisor in between sessions. I popped into her office and sat down to talk. I managed to squeak out that I had just finished an intake and was feeling afraid of what my feelings for the client meant. Thankfully my supervisor created an open and non-judgmental space from day one of our sessions. She also serves on the ethics committee so I was sure she would have the answer to my question.

During the meeting with my supervisor, she helped to normalize my feelings toward my client. We were able to discuss the situation more in depth and I found that after doing so, in my next meeting with my client no feelings of sexual attraction were present. I was extremely
grateful for her support during this situation and felt glad that I was able to come to her to discuss the scenario. It got me thinking about other MSW students who may have encountered the same scenario and if there had been previous studies on the subject.

My supervisor also discussed the amount of cases coming up to the ethics committee in her state on therapists having sexual contact with present or former clients. It was extremely surprising to me to find that, even though this is currently a very relevant topic in the social work profession today, this was the first I had heard about it. I wanted to explore more about the prevalence of sexual attraction to clients and to find out if other MSW students were receiving training on the subject.

After beginning a literature search I found that many previous studies have been conducted regarding licensed clinicians and their attractions towards clients or erotic countertransference in session. However, the topic of MSW students and their experiences with training and the possibility of being attracted to a client is one that has been significantly under-explored. I found there were no studies based solely on the MSW students’ experience with training, supervision and prevalence of sexual attraction to clients.

I did find one study that examined the experience of trainees from various disciplines in a dissertation titled “Education of Student Clinicians Regarding Sexual Feelings Toward Clients” by Sherral Austin. This study was conducted in 1997 and included students in all clinical training programs, not just MSW programs (Austin, 1997). Austin’s study is the one most similar to the one being reported presently, even though it has several differences. Austin’s study found that the majority of participants in the study had experienced sexual attraction towards and a client and felt underprepared by training in how to handle it (1997).
The study conducted for my thesis project and reported here has aimed to serve as a measure of the current MSW students’ experiences with sexual attraction to clients in field, and of those students’ reports of the training and supervision they have received related to such feelings towards clients. This study also examines how students who have experienced sexual attraction to a client handled the situation and how they felt once they recognized their feelings. I undertook this study in the belief that it would be interesting to explore whether much has changed since Austin’s study about training in the area of sexual attraction toward a client. Increasing our knowledge in this subject could also help to make practicing clinicians and supervisors more likely to discuss this important issue themselves, and perhaps be better able to avoid ethical violations in practice.
Chapter II

Literature Review

The following section begins by addressing the importance of examining why therapists’ experiences of sexual attraction to clients is important given issues of countertransference and these issues’ effects on the therapy process. It goes on to look at a number of past studies conducted on therapists’ sexual attraction to clients and the results of these previous studies. These results were examined to provide a framework for the current study and its relevancy today. This section will also address ethical implications-- due to the potential for harm to therapy clients if attractions are acted upon -- as well as the prominence of complaints to social work ethical boards today. This section also investigates the differences between social workers’ professional ethics codes and those published for psychology as a discipline; such differences in ethics could possibly make it harder to train potential therapists - especially in multidisciplinary settings. Lastly, this section examines sexual attraction as a subject that some therapists are not sufficiently comfortable discussing, which implies that training and discussion in supervision may not be adequate to prepare potential therapists if sexual attraction to a client does arise.

Countertransference

It is important to examine how feelings of sexual attraction toward a client might influence countertransference and affect the therapeutic relationship. Such countertransference is also known as erotic countertransference. There is a large amount of literature on erotic transference but erotic countertransference still remains underexplored. There are several speculations as to why this may be, but the majority of the literature points to the fact that it as
seen as taboo because of the recreation of the child-parent relationship in therapy (Maroda, 1991; Pope, Sonne, & Holyroyd, 1993). Erotic countertransference can be seen as a violation of the incest taboo and can signal that something has gone wrong in the parent-child relationship (Maroda, 1991). Other speculations as to why the subject is under-discussed include mention of the high number of complaints to ethics boards about therapists and clients having sexual contact which has increased anxiety for the therapist about disclosing such feelings. It is important to mention that only a small minority of therapists who experience sexual attraction to a client go on to have sexual contact with that client (Pope, Keith-Spiegel, & Tabachnick, 1986). There is of course, a large difference between the experience of feeling sexual attraction towards a client and acting on it. “When sexual feelings are not defensive, but rather a reflection of the therapist’s true feelings, it is likely that they will be transient and manageable” (Maroda, 1998, p. 95).

Literature suggests that Freud and his early followers first regarded countertransference as an obstacle that therapists must get rid of either through self-analysis or through their own psychoanalysis (Mitchell & Black, 1995). Since then, the view on countertransference has taken a dramatic shift, especially in the past three decades (Mitchell & Black, 1995). “Other schools of analytic thought, each in its own language and through its own concepts, have similarly come to find countertransference as a useful tool” (Mitchell & Black, 1995, p.245). It is interesting that when it comes to many areas, countertransference now is used as a tool most commonly examined in supervision; however, sexual countertransference is still widely under-discussed. This study’s purpose was, in part, to examine whether current MSW students who felt sexual attraction towards a client disclosed this to their supervisor(s) as well as, to ask why or why not.
Prevalence of Therapists’ Sexual Attraction towards Clients

The prevalence of therapists’ sexual attraction towards clients was not a subject that began to be researched until the last thirty years. Research has consistently shown that the majority of therapists have experienced at least one incidence of sexual attraction to a client. These results have been consistently found across various disciplines and various backgrounds of the therapists who participated in the research. The first study that looked at the incidence of therapists’ sexual attraction to clients used psychologists in private practice as subjects (Pope, et al., 1986). The study concluded that over 87% of 575 respondents reported feeling sexual attraction to a client on at least one occasion (Pope et al., 1986). Eight years later, this same study with slight variations was recreated to examine social workers and compare the results found with psychologists (Bernsen, Tabachnick, & Pope, 1994). This study yielded similar results and found that the majority of social workers had also experienced sexual attraction to at least one client, although slightly fewer reported this than did psychologists (Bernsen et al., 1994).

Rodolfa, Kraft, & Reilley (1987) identified that sexual attraction to clients in a university counseling center was a stressor for therapists and found this stressor to be of a higher prevalence for university counselors than for those therapists working in a VA. A similar study was conducted on psychologists working in university counseling centers (Rodolfa, Hall, Holmes, Davena, Komatz, Atunez, & Hall, 1994). This study concluded that 88% of subjects reported feeling sexual attraction to a client at least once (Rodolfa et al., 1994). This result may have been slightly higher than that found in previous studies because of the population of primarily young adult university clientele.
In 1997 for the first time, two studies examined the experiences of the student clinicians or interns. Both Austin (1997) and Ladany, O'Brien, Hill, Melinoff, Knox, & Petersen (1997) used subjects from predoctoral psychology or counseling programs. Austin (1997) found that 78% of subjects had experienced sexual attraction to at least one client using an anonymous survey, similar to those studies previously mentioned. Ladany et al., (1997) chose to conduct interviews with subjects instead of using the anonymous survey method that the above studies had all used in order to find out more details about the trainees’ experiences. All of the thirteen subjects selected for the interview had experienced at least one example of being sexually attracted to a client.

Although all of the past studies have concluded that the majority of therapists have been sexually attracted to at least one client, at this time, no studies have examined master’s level social work interns’ experiences with sexual attraction to clients in the field. Based on past research, I concluded that it would be worthwhile to combine the strengths of both qualitative and quantitative studies to create an anonymous survey that also allows for subjects to fill in their personal experiences. The purposes of this study include not only examining the prevalence of current MSW students’ experiences of attraction to clients, but if such feelings developed, how the students chose to handle those feelings and whether they felt they were adequately prepared to do so by their training experiences.

Therapists’ Reactions to Sexual Attraction

There are two different ways to examine sexual attraction to a client, the first being the fact of whether a therapist feels sexual attraction to a client, and the second being the therapist’s reaction to experiencing sexual attraction towards a client. Several studies have examined the therapists’ reactions to experiencing their sexual attraction to a client. Bialek (2004) found the
majority of clinicians experienced negative emotions, whereas Giovazolias & Davis (2001) found that of the counseling psychologists who stated they had experienced sexual attraction to a client, 39% stated they reacted with surprise, feelings of guilt, and shock. These findings were much lower than those of Pope et al. (1986) who reported 63% of therapists’ experiencing negative emotions and Rodolfa et al. (1994) who found 55% of professionals experiencing negative emotions. It is possible that the findings of Giovazolias & Davis (2001) were lower because “…therapists are gradually beginning to re-consider their attitude toward the so far neglected area of sexual attraction, by adopting a broader perspective on the issue” (p. 284).

Studies have also been conducted that have examined predoctoral interns’ experiences of sexual attraction to a client. Ladany et al., (1997) found that the majority of interns interviewed experienced a negative reaction including feeling guilty, scared, or hyperaware when realizing the attraction. Contrary to these findings, Austin (1997) found that 41% of interns reported a negative reaction (uncomfortable, anxious or guilty). Rodolfa, Kraft, and Reilley (1987) found that the majority of therapists found sexual attraction to a client to be a stressful experience and more so for student interns than for staff members. It has been speculated that these feelings could result in the avoidance of this issue by therapists as well as the general absence of this topic in the training curriculum (Pope et al., 1986). It has also been noted that student therapists generally experience more anxiety about their work in general which may further contribute to their anxiety about sexual attraction (Rodolfa et al., 1987). It is important to note that the above studies were conducted on student therapists in predoctoral programs. No previous studies were found that examined the experience of those in Master’s level training programs or social work training programs.
**Danger of Sexual Attraction**

As noted above, there are many ways in which sexual attraction to a client can affect and disrupt the therapeutic relationship and process in therapy. Notably, the most damaging impact for a client is that feelings of sexual attraction to a client may lead to a clinician’s acting on that attraction. Both psychology and social work codes of ethics clearly state that under no circumstances should the therapist engage in any sexual contact with a current client (Reamer, 2006; APA, 2003). This was not always the case though. It was not until the late 1970’s that the APA specifically prohibited sexual contact between therapist and client (APA, 1977). It was not until after the APA code specifically prohibited this that research began to be conducted on the subject of therapists’ experience of sexual attraction to clients.

Since then, it has been noted that sexual contact between therapist and client is one of the most frequently reported complaints to ethics review boards today (Reamer, 2006). “Sexually intimate behavior between therapists and their client has emerged as an increasingly serious problem within the profession, as revealed by an examination of the records in three arenas—ethics cases, malpractice suits, and licensing board hearings” (Pope, Keith-Spiegel & Tabachnick, 1986). Several studies have found that therapists who are most at risk for this violation have not received adequate training or supervision on how to appropriately handle feelings of sexual attraction towards a client (Pope & Bouhoutsos, 1986; Rodolfa et. al., 1994; Russell, 1993; Seto, 1995). The findings of these studies point to the importance of training therapists on the subject of sexual attraction to clients today.

**Training**

As mentioned previously, both the APA and Social Work Code of Ethics similarly state that sexual contact with clients is prohibited and unethical. Even though this is clearly stated,
most studies conducted have found that both therapists and student therapists do not feel as if they were adequately trained on how to handle feelings of sexual attraction towards a client (Austin, 1997; Bernsen, Tabachnick & Pope, 1994; Hamilton & Spruill, 1999; Ladany, O'Brien, Hill, Melincoff, Knox, & Petersen, 1997). One of the first major studies that focused on student therapists also found similar results. Pope et al. (1993) concluded that student therapists who are not adequately prepared for experiencing sexual attraction to a client may be at greater risk for ethics violations. The research clearly points out that student therapists in a variety of disciplines do not feel as if they are receiving the training that they need regardless of the prevalence of ethical violations in the profession today.

Previous studies have explored why this is so; other authors have written published training programs on sexual attraction to clients as well as guides to supervision on the subject. Even though the majority of these were published in the last twenty years, it is important to speculate about why student therapists still do not feel as if they are receiving adequate training. This will be explored more in the discussion section after examining the results of this study and whether this was found to be true in this study with current MSW student therapists.
Chapter III
Methodology

Formulation

This exploratory/descriptive study was conducted to help determine whether current MSW students are receiving training on sexual attraction to clients and whether they have experienced feelings of sexual attraction towards clients in their field placements. This study seeks to help expand on the current literature relating to student interns’ experiences of sexual attraction to clients. Currently, there have been no previous studies focusing on just what the MSW students experienced. This project was also conducted to find out whether, if MSW students have received training, it came from the classroom or from their internship. This study also sought to find out whether there are any correlations between subjects’ demographic characteristics and their responses to the questions about sexual attraction to clients or training on the subject. It is hypothesized that the majority of students have not received training on sexual attraction to clients and that the majority have experienced sexual attraction to at least one client.

Sample

All participants in this study were adults currently enrolled in an English speaking MSW program and were actively participating in field placement at the time that the study was conducted. There were no other inclusion criteria for those participants who chose to participate in this study. The minimum number of subjects for this study was 50; there was no maximum number.
Subjects were selected using snowball sampling. An initial email was sent out to current MSW students that I was personally in contact with. The initial email asked them to fill out the survey and pass it along to other students. An effort was made to recruit a demographically diverse sample by asking in the email for people to pass the survey along to diverse others, not just those enrolled in Smith College’s MSW program. A copy of this email can be found in Appendix A. Prior to sending the email to participants’ this study was reviewed and approved by the Human Subjects Review Committee at Smith College School for Social Work. A copy of the approval letter is contained in Appendix B.

Data Collection

Data collection was conducted using an online survey on the Survey Monkey website. This site was selected because it was able to provide security and confidentiality to all participants. Once participants received the email, they were able to click on the link provided in their email and begin the survey located on the Survey Monkey website. They were asked to first answer the two screening questions. If they answered yes to both, they were considered eligible for the study, asked to proceed and to read and agree to the informed consent form. Then the participants were asked to answer both quantitative and qualitative questions related to the study. Copies of the Informed Consent and the Survey with its eligibility questions are contained in Appendix C.

The procedures included answering qualitative (comment box) and quantitative questionnaire items in the survey on Survey Monkey and submitting it. I collected demographic data. These included: gender, age, MSW program enrolled in, year in program, type of field placement, marital status, sexual orientation, number of supervisors, hours of supervision per week, how many clients seen in individual, group and couples therapy. Most importantly, my
survey asked participants to assess the adequacy of training they have received in coursework, in internship trainings, supervision, and other means for helping them develop understanding about attraction to clients and the ethical principles involved in managing these responses as well as their experiences in field. No interviews or personal contacts were made. Participation took approximately twenty to thirty minutes depending on length of participants’ qualitative responses.

Data Analysis

Data analysis was conducted using the data from the Survey Monkey website. These data arrive in an Excel spreadsheet document that Survey Monkey prepares after removing all identifying information pertaining to each participant so that the researcher is unable to identify who answered what questions. The survey’s quantitative portion can thus be considered truly anonymous. Although some of the qualitative responses could potentially be identifying, all such information has been carefully edited to protect participants’ confidentiality. The Excel spreadsheet was sent to the Smith MSW Thesis statistical analyst for analysis. Several cross tabulations were run using SPSS statistical software to determine whether relationships between participants’ demographic characteristics and their survey responses might exist.

As noted above, some survey questions provided room for qualitative responses. Due to the infrequency and variety of these responses, the typical and unusual themes that emerged will be discussed briefly here, and their implications further examined in the Discussion chapter.
Chapter IV

Findings

This study used both qualitative and quantitative responses to an online anonymous survey to explore current MSW students’ experiences of sexual attraction to clients and the adequacy of their preparation for dealing with such feelings. The recruitment process included snowball sampling beginning with sending an email to those that the researcher knew were MSW students currently in field placement. The email asked the students to pass it on to others that they thought might meet the criteria for this study. A link to the survey was placed in the email; once the subjects were asked the two qualification questions regarding whether they were eligible to participate, and answered positively, they were then invited to take the survey. They were also asked to sign the informed consent.

The findings reported below are based upon the responses of the 72 subjects who agreed to the informed consent. Eighty-one respondents qualified for the study, but six did not fill out the informed consent and three subjects declined to agree to the informed consent. The survey also allowed participants to be able to omit answering certain questions and still be able to participate in the remainder of the survey. Some results indicate this, with numbers for certain questions not adding to 72, and this report includes information on those who did not answer select questions. The findings are reported in the following sections: characteristics of respondents, participants’ responses to survey questions and typical and divergent qualitative responses from the dialogue boxes located in the survey.
Characteristics of Respondents

This study asked a number of different demographic questions in order to determine if any of these factors might have a relationship to the way a subject answered the questions about sexual attraction to clients. Past literature has examined several of these demographic characteristics for correlations in between them and placed individuals at higher likelihood of developing sexual attraction to clients especially gender (males found to be at a higher risk) and relationship status (Bernsen et. al, 1994; Hamilton & Spruill, 1999; Pope & Bouhoutsos, 1986). Seven participants in the thesis project reported here identified as male and 63 as female. Two participants chose “other” in regards to gender: one identified as “gender queer” and the other as “trans.”

Table 1: Gender

<table>
<thead>
<tr>
<th>1. What is your gender?</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>0.7%</td>
<td>7</td>
</tr>
<tr>
<td>Female</td>
<td>87.5%</td>
<td>63</td>
</tr>
<tr>
<td>Transgender</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>2.8%</td>
<td>2</td>
</tr>
</tbody>
</table>

The ages of subjects varied from age 22 to age 55. The median of age of subjects was 27 years and the mean was 29 years. The survey also asked about the subjects’ marital status and found that 27 respondents identified as in a relationship, 19 as single and 19 as married. Only three respondents identified as divorced; two others as dating and two more as engaged.
When participants were asked to describe how they identified as to sexual orientation, 47 subjects selected straight, 12 as queer, four as fluid, four as bisexual, three as lesbian, and one as gay. One subject did not respond to this question.
Table 3: Sexual Orientation

<table>
<thead>
<tr>
<th>4. What is your sexual orientation?</th>
<th>Response Percent</th>
<th>Response Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Straight</td>
<td>66.2%</td>
<td>47</td>
</tr>
<tr>
<td>Questioning</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Queer</td>
<td>16.9%</td>
<td>12</td>
</tr>
<tr>
<td>Gay</td>
<td>1.4%</td>
<td>1</td>
</tr>
<tr>
<td>Lesbian</td>
<td>4.2%</td>
<td>3</td>
</tr>
<tr>
<td>Fluid</td>
<td>5.6%</td>
<td>4</td>
</tr>
<tr>
<td>Bisexual</td>
<td>5.6%</td>
<td>4</td>
</tr>
<tr>
<td>Transexual</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Pansexual</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td>Other (please specify)</td>
<td>0.0%</td>
<td>0</td>
</tr>
<tr>
<td><strong>answered question</strong></td>
<td></td>
<td><strong>71</strong></td>
</tr>
<tr>
<td><strong>skipped question</strong></td>
<td></td>
<td><strong>10</strong></td>
</tr>
</tbody>
</table>

The previous studies examined did not report on sexual orientation so it is unknown if this finding was similar to that of previous studies.

The survey also asked about what school the MSW students were attending in order to determine whether this had an influence especially on training regarding sexual attraction to clients. The data found that 49 respondents are currently attending Smith College for Social Work, 19 are attending the University of North Carolina, one did not respond, one attends Boston University, one is a student at Rhode Island College and one at the University of Denver. The survey inquired about which year in their MSW program the subjects’ were in, as it might have had an influence over training, if students were earlier or later in their educational
programs. It was found that 52 respondents were in their second year, 15 in their first year and
five in their third year.

Type of placement was also examined to compare results to the study done by Rodolfa,
Kraft & Reilley (1987) which compared trainees’ experiences of sexual attraction to clients
between those placed at VA hospitals and college counseling center sites. The current study
found that 17 respondents are in an adult outpatient clinic, 13 in a child/family outpatient, seven
in college/university centers, eight in adult inpatient, five in grade schools and one in a child
inpatient. 21 respondents picked other and wrote in a wide range of placements including
“residential adolescent” and “older adult residential care.”

Other factors examined included current number of hours spent in field placement per
week. The majority (32) of subjects stated that they spent 30 hours at their current field
placement. The number of hours ranged from eight who reported 35 hours weekly, to 12
respondents who noted 24 hours per week. The other nineteen participants’ responses varied
between 12 to 35 hours per week. One subject did not respond to this question. Most participants
(39) had one supervisor at their current placement, 28 had two and five subjects reported having
three current supervisors. The hours of supervision per week ranged from one to six with two as
both the median and mean. Two subjects did not respond to this question. Last of the
demographic questions asked was the number of clinical hours per week, identified as the time
spent with clients, not including supervision. This ranged from zero to 23 with 10 as both the
median and mean. Four subjects did not indicate their number of clinical hours. Results for
questions about number of hours spent in placement, supervision, and with clients are displayed
in Table 3. These findings will be examined again later for correlations with responses to the
questions about sexual attraction and adequacy of training to manage such erotic reactions.
Participants’ Responses to Survey Questions

This section examines subjects’ responses to questions about training of sexual attraction to clients and subjects’ experiences, if any, of sexual attraction to clients. Subjects indicated that more than a third of them, 39% (28 subjects), were unsure whether their graduate program offered training on sexual attraction to clients. Following closely behind, 37% (26) subjects, indicated that their graduate program did not offer any training of sexual attraction to clients and 24% (17) indicated that their graduate program did offer training on the subject. One subject declined to answer this question. The survey then posed a follow-up question to the previous one about whether the subject’s graduate program offered training on therapists’ sexual attraction to a client by asking if it was required. Only 7% (5 subjects) indicated that it was required in their program. Many participants indicated that they were unsure (26) or that it was not required (39). Two participants declined to answer this question.

The survey then inquired about how the training in their graduate program was offered. Fifty-two percent of subjects indicated that no training was provided. Thirty-nine percent noted that the training was incorporated into a course of their graduate program. A small percentage of subjects (3%) indicated that there was a colloquium on the subject and the same amount of subjects (3%) stated that the subject was incorporated into a colloquium. Results found that not one subject selected the response that there was a course dedicated to the subject. Eleven subjects selected “other” and provided various responses in the comment box. Several subjects stated that they were “unsure” or “unsure at this time” and several others indicated that “it was touched on in class but not discussed thoroughly.” Seven subjects did not answer this question.

The survey inquired if any training on sexual attraction to a client was provided at the subjects’ internship or field placement. The majority of the subjects 87 % (61) stated that no
training on sexual attraction to clients was provided in their internship. Five subjects stated that training on this subject was required and four subjects stated that they were unsure if training was provided. Two subjects did not respond to this question. Subjects were also asked to think and comment about what the attitude of the staff at their current internship was regarding discussion about sexual attraction to clients. Twenty-four subjects stated that the subject was “strongly discouraged” or “omitted” at their current internship. Twenty-five subjects stated “neither” -- that is, the subject was neither encouraged nor discouraged at their current internship. Eleven subjects stated that the subject was “slightly discouraged” or “mostly omitted” at their current internship. Seven subjects stated that the subject was “slightly encouraged” and four stated that it was “strongly encouraged.” One subject did not answer this question. It was clear from these results that the majority of subjects did not receive training on sexual attraction to clients at their current internship and that discussion of sexual attraction to clients was not encouraged.

The subjects were asked a hypothetical question about being in a situation where they felt sexual attraction to a client and how likely they were to respond to the scenario by various responses. The first asked how likely the subject would be to initiate a spontaneous discussion with a supervisor about their feelings. Twenty-nine percent of subjects (20) stated that they would be extremely unlikely to do so, nine stated they would be moderately unlikely, and ten would be somewhat unlikely to do so. Three subjects stated that they were neutral on having a spontaneous discussion with their supervisor, 19 stated they would be somewhat likely, five stated that they would be moderately likely and four would be extremely likely. Two subjects did not answer this question. The following question asked if they would be likely to engage in the discussion with their supervisors if their supervisor raised the subject of sexual attraction to
clients. More subjects indicated that they would be more likely to discuss with their supervisors, if their supervisors brought it up. Fourteen subjects stated that they would be extremely likely; fourteen stated that they would be moderately likely and thirteen indicated that they would be somewhat likely to discuss with supervisor if they initiated the conversation. Seven subjects noted that they were neutral; eight somewhat unlikely; four moderately unlikely; and ten highly unlikely to do so. As noted previously, there was a shift in the data in that more subjects would discuss the topic with their supervisor if their supervisor brought it up than would initiate the conversation themselves. Two subjects did not respond to this question. The final scenario asked subjects if they would bring it up or discuss it with other students in their program. This question yielded similar results to the findings in the previous scenario. Thirteen subjects stated that they would be extremely likely to discuss with other students; 11 moderately likely; 13 somewhat likely; seven neutral; six somewhat unlikely; nine moderately unlikely and eleven extremely unlikely to do so. Two subjects did not answer this question. It appears that subjects would also feel more comfortable bringing this up with other students than starting the conversation with their supervisor. This is likely to be because of the power difference between intern and supervisor and that the supervisor is in a position to grade the intern. If the interns are unsure if a subject is safe subject to discuss, they are less likely to be the ones to bring it up.

Subjects were asked to answer how they thought their training has prepared them to handle a situation where they are sexually attracted to a client. The results showed that 10 subjects noted that they felt extremely poorly prepared; 16 moderately poorly prepared; 21 subjects somewhat poorly and ten noted being adequately prepared. It is clear that the majority of participants in this study do not feel prepared to handle feelings of sexual attraction towards a client. In fact, only two subjects noted feeling extremely well prepared; six moderately prepared
and four somewhat prepared to handle feelings of sexual attraction towards a client. Three subjects did not answer this question.

**Figure 1: Adequacy of Preparation for Sexual Attraction to Clients**

This is an extremely significant finding that will be discussed more in depth in the discussion chapter.

The following data examine the number of subjects who have felt sexual attraction toward one or more clients. The results found that 50% of subjects had not experienced sexual attraction toward a client and that 50% of subjects have. Nineteen subjects noted feeling attracted to “few” clients and 16 noted feeling attracted to “one” client. Two subjects did not respond to this question. This is also a significant findings and slightly less high than the Bernsen et. al. (1994) study which compared practicing social workers to psychologists for prevalence of sexual attraction to clients. Even though this study yielded lower results of sexual attraction to clients it
is expected that MSW students have not been in the field as long as those who participated in the Bernsen et. al. study in 1994.

The items below were answered by only the half of the subjects that indicated who had indicated they had experienced sexual attraction to at least one client; these items were presented in order to find out more information about their responses. When asked about how the subjects felt when they realized they were sexually attracted to a client, 14 subjects noted feeling “normal.” Other common responses were “surprised” (14 subjects) and “guilty” (13 subjects). Less frequent responses included three subjects who indicated feeling “happy”; three feeling “scared”, two felt “sad” and five noted feeling “excited.” Subjects were also allowed to check “other” and fill in a response. Of these nine subjects some noted feeling “nervous,” one “awkward,” one “hypervigilent,” one “all over the map,” one “annoyed,” and one noted feeling “confused.” Even though a number of subjects (14) noted feeling normal there were still high responses among other negative emotions, a result which has also been found in other past studies and was expected.

Subjects were asked to indicate how, once they noticed the feeling of sexual attraction, it affected their investment with the client. Fourteen subjects noted that their investment in the client increased and eighteen noted that it stayed the same. It is interesting to note that not a single subject noted that investment decreased upon discovering feelings of attraction for the client. Many subjects (23) also noted that their feelings of attraction toward the client did not change their therapeutic relationship with the client. Six subjects stated that they felt as if the therapeutic relationship strengthened and only three subjects noted that it weakened the therapeutic relationship. Only one subject acknowledged prematurely terminating treatment after
recognizing a personal attraction to the client; three subjects transferred the client to another therapist.

Most surprising was the fact that only three subjects stated that they discussed their feelings with their supervisor.

**Figure 2**: Participants’ Reports of Whether They Discussed Sexual Attraction with Supervisors

Considering the important role of supervision for trainees, I found this result to be most shocking. Nine subjects noted they had discussed their attraction to the client with another student in their program. The subjects were asked to reflect on why or why not they chose to discuss the subject with their supervisor or other student using a comment box. These results will be discussed more in depth in the following section which will include some narrative responses as well as reflections on how the person the participant chose to discuss it with reacted.
Ten subjects stated that they felt as if their feelings of sexual attraction to a client were beneficial to therapy while twenty respondents stated that they did not believe that the feelings were. Narrative responses to why or why not the subjects believed so will be included in the next section. Three subjects noted feeling as if their feelings of sexual attraction were harmful to therapy and 28 subjects stated that they believed as if their feelings of sexual attraction were not harmful to therapy. Again, the subjects were asked to comment on why or why not the believed so and the narrative responses will be in the following section.

The final survey questions asked subjects about two other hypothetical situations, not related to sexual attraction to a client, and if the subject would initiate discussion with supervisor, discuss with supervisor if the supervisor brought up or discuss with another student. These questions were included as a comparison to the questions about sexual attraction to a client to see if subjects answered differently when thinking about other unrelated scenarios. The first scenario was about experiencing feelings of dislike or hatred toward a client and yielded different results than the scenario about feelings of sexual attraction to a client. The majority of subjects (28) noted that they would be extremely likely to initiate a discussion with their supervisor; 18 stated they would be moderately likely; 13 somewhat likely; six neutral; one somewhat unlikely and one moderately unlikely. The discussion chapter will include further development of why subjects felt much more comfortable bringing these feelings to their supervisor instead of feelings of sexual attraction. An even higher number (39) of subjects noted that they would be extremely likely to discuss their feelings of hatred or dislike for a client if their supervisor initiated the conversation. Sixteen subjects noted that they would be moderately likely; five subjects noted they would be somewhat likely; four were neutral and only two noted feeling somewhat likely. No subjects stated that they would be extremely unlikely or moderately
unlikely to discuss this with their supervisor if the supervisor brought it up. Similar results were yielded when subjects were asked about bringing up feelings of dislike or hate with other students in their program. The majority (33) stated that they would be extremely likely, 13 moderately likely; nine somewhat likely; six were neutral; two were somewhat unlikely; one was moderately unlikely and two was extremely unlikely to do so.

The second scenario asked subjects about nonsexual relationships with clients and how likely they would be to discuss those social relationships. When asked about initiating a discussion with their supervisor about a nonsexual relationship with their client, only nine subjects noted that they would be extremely likely to do so. Other results include: 14 being moderately likely, 13 somewhat unlikely; 13 neutral; five somewhat unlikely; three moderately unlikely and ten were extremely unlikely to discuss a nonsexual relationship with their client. These results shifted slightly when asked if the subject would discuss it if the supervisor initiated the conversation. Twenty-two subjects stated that they would be extremely likely to discuss with their supervisor if they brought it up; 12 were moderately likely to do so; 14 were somewhat likely; nine were neutral; three were somewhat unlikely; five were moderately unlikely and two were extremely unlikely. More subjects (23) noted feeling extremely likely to discuss feelings of dislike or hate toward a client with other students. Other results included 11 subjects being moderately likely to discuss with other students; 13 were somewhat unlikely; ten were neutral; two were somewhat unlikely; three were moderately unlikely and four were extremely unlikely to discuss feelings of dislike or hate toward a client with other students.

Typical and Divergent Responses to Qualitative Responses in Dialogue Boxes

This section will focus on specific responses included in the comment boxes on the survey beginning with address the responses to why a subject who experienced sexual attraction
to a client chose not to discuss that with their supervisor or fellow student. A common theme among the responses of those who chose not to bring it up was that the attraction itself did not feel very strong or that it was passing. For example, as one subject noted, “attraction was passing thought and didn't seem like a big enough deal to discuss with others.” Other responses included “fear of judgment” which was mentioned by several subjects. This was also illustrated by another subject who “it doesn’t seem like you are supposed to.” The previous comment, I believe, really highlights the taboo of sexual attraction to clients that some subjects experienced or felt, which influenced their decision to disclose their feelings. This was also illustrated by another subject who noted “I knew it was normal, and that I wouldn't act on feelings, but I was still embarrassed. I was worried I would be accused of having bad boundaries if I acknowledged attraction.” I believe this is also illustrated perfectly by this comment, “Largely out of confusion. The subject is really taboo, and my defenses were very high around my feelings, making them difficult to sort out. Also, I was once attracted to someone who just physically, personality-wise, etc was so NOT my type that that really confused me on a whole different level.” This comment really speaks to the number of various issues, experiences and feelings that can arise with feeling sexual attraction toward a client. Another issue related to disclosure of sexual attraction to a client is how that can sometimes also cause a disclosure of the student therapists sexual orientation. As one subject noted, “The feelings were minimal and didn't last. If they had become bigger, I would've considered speaking with my therapist. I suppose if I chose not to discuss feelings hindering my work, it would be because of a fear of judgment and someone linking my sexual orientation with the attraction.” This comment links many of the above reasons that other subjects have mentioned that have prevented their disclosure of feelings of sexual attraction
towards a client. These comments bring up important points which will be discussed further in the discussion chapter with suggestions on how might be best to address them.

This survey also asked those subjects who did choose to disclose their feeling of sexual attraction toward a client on how the person they choose to disclose to reacted to the disclosure of the feelings of sexual attraction toward a client. A common theme in these responses included the word “understanding.” It was wonderful to note that the subjects who did choose to disclose their feelings generally all had positive experiences in doing so, in which their feelings were also normalized. I believe the comment from this subject really illustrates this point beautifully “they were understanding: “… it happens to all of us and is something we need to be able to work with.” As noted previously in the literature review, research shows that therapists are less likely to commit ethical violations if they are able to discuss their feelings of attraction and understand them (Bernsen et. al, 1994; Hamilton & Spruill, 1999; Pope & Bouhoutsos, 1986). There was only one comment from a subject who had not had such a positive experience. The subject noted “…the student I shared this with was shocked and joked about the matter - the client became "...the one with the erotic transference.” Overall, the majority of responses to those who disclosed were positive, though only twelve subjects choose to reveal their feelings to a supervisor or peer.

The survey then asked participants to reflect on whether they thought that their feelings of sexual attraction to a client were beneficial or not. The comment box inquired about if the subject thought they were beneficial to therapy to comment on why or why not they believed so. A wide variety of comments were submitted to this question. The common theme in the responses of those who believed the sexual feelings to be beneficial to therapy were that they learned more about the transference and countertransference process. For example, as one
subject noted, “It taught me more about my countertransference - who I was equating the patient with from other parts of my life - and gave me a window into how the client might be perceived by others.” Other comments included “established an interest in the clients well being” and “happy to see the person.” One participant pointed out that “it never occurred to me that it could be beneficial, only detrimental.” Several subjects noted feeling neutral about that subject and said that they do not believe it had any impact on therapy, positive or negative. Several other subjects wrote about ways in which their feelings of sexual attraction toward a client harmed therapy. A subject noted feeling “limited in my interventions.” Several subjects also noted feeling “distracted” during therapy. One subject really expanded on why this was harmful for them. “Not so much my feelings, but my way of handling my feelings was harmful. The subject is so taboo that my defenses were REALLY high. This impaired my clinical judgment.” Even though the responses to this question greatly varied, common themes were found and will be expanded upon in the following section.

Finally, subjects were asked to include any additional comments about the survey or the topic at the end of the study. These comments varied a great deal and will not be presented in any particular order. No common themes were located in these comments. One subject reflected on the importance of the topic as well as their experience with training which gave important additional perspective.

“I think the role of supervisors and professors is so crucial. The NASW Code of Ethics says sexual contact with clients is wrong, but we get so little guidance in school/in field for how to navigate all the feelings. It's a strange lacuna: therapists' countertransference emotions of hate, caring, revulsion, fantasy, etc are widely discussed, but sexual feelings we pretend don't exist. I have one supervisor and one didactic seminar leader who talk all
the time about how normal it is to be attracted to clients. ‘You're probably going to feel attraction toward clients, unless you want to work only with ugly, boring people for the rest of your career,’ one said. The other set a great example by talking really, really candidly about several clients she has been attracted to and how she handled it. Following their lead, I feel must more prepared to confront attraction in myself and talk to my supervisors about it. However, I've also had experiences with supervisors who could not handle it at all when I timidly broached the subject.”

I really appreciated the various angles of the topic that this subject chose to touch upon. Other comments included some subjects who work with children in their internship, and therefore felt as if the survey was not as applicable to them. Others brought up confusion about some questions, especially the last two in the survey. There were other more general comments about the topic including, “the idea of "relationship" beyond the therapeutic dyad is always a sticky conversation to have - viewpoints are not always aligned.” Overall, I was pleased with the amount of feedback with the survey and surprised at how in depth some subjects were willing to discuss it on the survey. The next and final section includes a more in depth discussion about what these results mean and implications for future training.
Chapter V

Discussion

Although the findings section noted various results, there are several findings from this study that really stand out to me both in importance and significance. These findings include the extremely low number, only 3 subjects, who stated that they discussed their feelings of sexual attraction with their supervisor as well as only two subjects who reported that they felt extremely well prepared to handle feelings of sexual attraction to a client. As noted previously, several studies have found that therapists who are most at risk for sexual boundary violations have not received adequate training or supervision on how to appropriately handle feelings of sexual attraction towards a client (Pope & Bouhoutsos, 1986; Rodolfa et. al., 1994; Russell, 1993; Seto, 1995). The findings that such a low number of the sample reported feeling able to handle the feelings and were able to discuss such feelings with their supervisor were therefore extremely concerning. This implies that both master of social work academic programs and field placements are not adequately training students on the subject of sexual attraction to clients. Fifty-two percent of the respondents stated that their graduate program offered no training at all on the subject. It is clear that current masters in social work programs should add additional classes or incorporate the subject into current classes such as ethics or clinical practice.

The low number of subjects who reported feeling comfortable discussing the subject of sexual attraction to a client is also notable and brings up questions about supervision, especially for current students. Since students in an internship are being evaluated, by their supervisors, this may often create a power dynamic that may cause the student to not want to disclose such
feelings. Additional trainings for supervisors should be incorporated that include how to create a safe space with supervisees to be able to disclose more sensitive subjects. It is also possible that if students are not adequately trained on the subject, they will be less likely to bring it up with their supervisors; not knowing how to handle such feelings, they may also not know that it would be beneficial to discuss in supervision. I believe that it is most important to stress the difference between feelings of sexual attraction to a client and acting on sexual attraction to a client in training made available to both supervisors and supervisees/students. This may help alleviate fear or a sense that merely having such feelings is bad or wrong. The results from this study also noted that subjects would feel more comfortable discussing the subject of sexual attraction to a client if a supervisor were to bring the subject up first. I believe that this may be very helpful, especially in certain setting such as university counseling centers where sexual attraction to clients may be more prevalent. In this way, supervisors can help normalize such feelings for supervisees, and help their interns manage them. This was illustrated very well by on the qualitative responses at the end of the results section pertaining to candid discussion of attraction the supervisor had had towards clients and the help offered to the intern by this open, honest admission.

This study also found that half of subjects noted experiencing sexual attraction to at least one client. Although these numbers are lower than reported in past studies, it is still clear that sexual attraction to clients is a common occurrence among master’s in social work students. These numbers may be lower than past studies because subjects have only had one or two placements at this time and may be working in child or family settings, where sexual attraction to clients is less prevalent. Since this is the first study done on current master’s in social work students, it is likely that studies conducted with licensed clinicians have a higher number of
clinicians reporting sexual attraction to clients just due to the fact that they have seen more clients than current students have. Ideas for future studies may include comparing the results of this study to other current social work students to see if similar results are found.

It is also important to note that the majority of subjects were from Smith School for Social Work and the University of Chapel Hill close behind in numbers. Since the majority of subjects were from these two schools, it would be important for future studies to expand the study to a variety of schools and see if there are any correlations between schools and training received. This study did not find any correlation between school attended by the subject and receiving adequate training on erotic countertransference.
References


Bialek, G. (2004). How male social work clinicians maintain their integrity when sexually attracted to their clients: a project based upon an independent investigations. MSW, Smith College, Northampton.


Appendix A

Email Sent to Prospective Survey Participants

Dear Fellow MSW Student,

Allow me to introduce myself, my name is Jennifer Begun and I am a second year MSW Student at Smith College School for Social Work. I am currently working on a thesis research project that I would greatly appreciate your help with. I am interested in gathering data from fellow MSW students currently participating in a field placement. The survey asks both qualitative and quantitative questions and should take no longer than 30 minutes of your time.

This project is designed to explore MSW students’ experiences and education regarding sexual feelings toward clients. The survey is conducted on Survey Monkey and your responses are entirely confidential and anonymous.

I would also really appreciate your forwarding this email on to any additional MSW students that you may know of. I would like to get as many responses from people from different schools as well as diverse backgrounds. This is research that may possibly influence future MSW training programs. If you are interested in learning more about and perhaps participating in this project, please click on the link below. Thank you all so much for your help in advance.

Sincerely,

Jennifer D. Begun
Appendix B
Human Subjects Review Committee Approval Letter

Smith College
School for Social Work

January 9, 2011

Jennifer Begun

Dear Jennifer,

Your revised materials have been reviewed and they are fine. We are glad to give final approval to this most interesting study. We note that you decided to keep in the name of the school they are attending. We were a bit concerned about that as an identifier (not the spiritual question on those grounds) but if you feel the school is important, leave it in. I hope all of your folks aren’t from Smith as that would make your findings on Social Work education really primarily about Smith education which in many ways is quite different. On reflection, I guess it is a good idea to keep it in so you’ll know if it’s primarily Smith you’re learning about or a broader range of social work education.

Please note the following requirements:

Consent Maintaining Data: You must retain all data and other documents for at least three (3) years past completion of the research activity.

In addition, these requirements may also be applicable:

Amendments: If you wish to change any aspect of the study (such as design, procedures, consent forms or subject population), please submit these changes to the Committee.

Renewal: You are required to apply for renewal of approval every year for as long as the study is active.

Completion: You are required to notify the Chair of the Human Subjects Review Committee when your study is completed (data collection finished). This requirement is met by completion of the thesis project during the Third Summer.

Good luck with your study.

Sincerely,

[Signature]

Ann Hartman, D.S.W.
Chair, Human Subjects Review Committee

CC: Gael McCarthy, Research Advisor
Appendix C
Survey with Informed Consent, Including Eligibility Questions

MSW Students’ Training and Personal Experiences on Sexual Attraction to

1. Welcome Page
Thank you for your interest in this study.

2.

1. Are you currently enrolled in an English speaking Masters in Social Work program?
   - [ ] Yes
   - [ ] No

3.

1. Are you currently participating in a field internship?
   - [ ] Yes
   - [ ] No

4. Informed Consent
MSW Students' Training and Personal Experiences on Sexual Attraction to

1. Dear Participant,
   
   My name is Jennifer Begun and I am a second year MSW student at Smith College School for Social Work. I am currently conducting a research study for my thesis. The focus of this research is on current MSW students and their education about, and experiences with managing, sexual feeling towards clients. This research is being used for an MSW thesis as well as possible presentations and publications. Participation in this study requires filling out related survey questions as well as responding with brief remarks, if you choose, in comment boxes. You must be a current MSW student actively participating in field study at this time in an English speaking program to qualify for participation. It will take approximately 20-30 minutes to complete this study depending on response time. If you choose to participate, you will fill out an online survey conducted by Survey Monkey which will encrypt the data and send it to me.

   There will be no financial or other compensation provided for completing this study. It is possible that during participation one might get upset about the questions being asked or confused and uncomfortable about the ethics of a particular scenario you might be describing. Possible benefits to participants include increasing reflection on experiences in practice, and it might also be helpful in starting conversations with others in the field about this subject. It can also help normalize such experiences and help you see their role in your training experiences. This research could possibly be used to help further develop Social Work training programs and help increase trainings available on sexual attraction towards clients. It could also be used to help increase awareness and help start additional conversations between supervisors and supervisees. There will be no compensation provided for completing this study.

   Confidentiality is provided by using Survey Monkey which is turn encodes the data. This means that even when the data are sent to the researcher, I will be unable to identify who filled out the survey. In any publications or presentations, the data will be presented as a whole and if any quotes or vignettes are used they will be carefully disguised so that no one individual is identifiable.

   All participation in this study is voluntary. You may choose to withdraw from this study at any time during the data collection process. You may also refuse to answer any individual questions asked in the survey without ending your participation in the remainder of the survey. You will be unable to withdraw your responses after completion of the online survey; due to the encoding process provided by Survey Monkey. I will be unable to tell at any time which data are yours in order to withdraw them from the study. If you have any additional questions please feel free to contact me by email: jenniferbegun@gmail.com or cell phone: 919-673-6327. If you have any
**MSW Students' Training and Personal Experiences on Sexual Attraction to**

questions or concerns about your rights or about any aspect of the case study, you are encouraged to contact me or the Chair of the Smith College School for Social Work Human Subjects Review Committee at 413-685-7974.

BY CHECKING “I AGREE” BELOW YOU ARE INDICATING THAT YOU HAVE READ AND UNDERSTAND THE INFORMATION ABOVE AND THAT YOU HAVE HAD AN OPPORTUNITY TO ASK QUESTIONS ABOUT THE STUDY, YOUR PARTICIPATION, AND YOUR RIGHTS AND THE YOU AGREE TO PARTICIPATE IN THE STUDY.

Thank you for participating! It is suggested that you print this page for your records.

- Yes
- No

### 5. Demographics

1. **What is your gender?**
   - Male
   - Female
   - Transgender
   - Other (please specify)

2. **What is your current age in years?**

3. **What is your martial status?**
   - Single
   - Divorced
   - Married
   - In a relationship/serious dating
   - Widowed
   - Other (please specify)
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<tr>
<th>Question</th>
<th>Options</th>
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<td><strong>4. What is your sexual orientation?</strong></td>
<td>- Lesbian</td>
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<td>- Bisexual</td>
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<td>- Questioning</td>
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<td>- Queer</td>
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<td>- Gay</td>
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<td>- Other (please specify)</td>
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<td><strong>5. Current University/College/School enrolled in</strong></td>
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<td><strong>6. What year are you in your MSW program?</strong></td>
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<td>- Second</td>
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<td>- Third</td>
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<td>- Other (please specify)</td>
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<td><strong>7. What type of field placement are you currently placed in?</strong></td>
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<td>- Adult Outpatient</td>
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<td>- Child Inpatient</td>
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<td>- Other (please specify)</td>
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### MSW Students' Training and Personal Experiences on Sexual Attraction to

#### 8. Hours per week spent in field placement

#### 9. Number of CURRENT supervisors (do not include peer supervision)
- [ ] 1
- [ ] 2
- [ ] 3
- [ ] Other (please specify)

#### 10. Hours spent in supervision per week

#### 11. Number of clinical (time with clients, do not count supervision) hours per week

#### 6. Training on Sexual Attraction to Clients

1. **Does your graduate program offer training about therapists' sexual attraction to a client?** Note that we are asking about sexual attraction and NOT sexual contact.
   - [ ] Yes
   - [ ] No
   - [ ] Unsure

2. **Is that training required?**
   - [ ] Yes
   - [ ] No
   - [ ] Unsure
MSW Students’ Training and Personal Experiences on Sexual Attraction to

3. How was that training provided? (Check all that apply)

☐ Was not provided
☐ Course devoted to this topic exclusively
☐ Incorporated into a course
☐ In a colloquium devoted to this topic exclusively
☐ Incorporated into a colloquium
☐ Other (please specify):

4. Did your internship offer training on sexual attraction to a client?

☐ Yes
☐ No
☐ Unsure

5. What do you believe would best describe your internship setting staff members' attitude regarding discussion of sexual attraction to clients?

☐ Strongly Discouraged/Omitted
☐ Slightly Discouraged/ Mostly Omitted
☐ Neither
☐ Slightly Encouraged
☐ Strongly Encouraged

6. Imagine that you are in a situation in which you feel sexually attracted to a client with whom you are working. Please note how likely you would be to:

<table>
<thead>
<tr>
<th>Situation</th>
<th>Extremely unlikely</th>
<th>Moderately unlikely</th>
<th>Somewhat unlikely</th>
<th>Neutral</th>
<th>Somewhat likely</th>
<th>Moderately likely</th>
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<tr>
<td>Spontaneously initiate a discussion of your attraction with any of your supervisors?</td>
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<td>Discuss your attraction with any of your supervisors, provided that the supervisor raised the issue?</td>
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<td>Discuss your attraction with other students in your program?</td>
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<td>7. How well do you believe your training has prepared you to handle a situation in which you are sexually attracted to a client?</td>
<td>Extremely Poorly, Moderately Poorly, Somewhat poorly, Adequately, Somewhat well, Moderately well, Extremely well</td>
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### 7. Personal Experiences

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<th>Answer Options</th>
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<tbody>
<tr>
<td>1. Toward how many clients have you felt any degree of sexual attraction?</td>
<td>All, Most, Many, Few, One, None</td>
</tr>
</tbody>
</table>

### 8.

When you recognized your feeling of sexual attraction:
MSW Students’ Training and Personal Experiences on Sexual Attraction to

1. How did you feel? Please check all that apply.
   [ ] Happy
   [ ] Scared
   [ ] Sad
   [ ] Guilty
   [ ] Excited
   [ ] Normal
   [ ] Surprised
   [ ] Other (please specify)

2. How did these feelings affect your investment in the client?
   [ ] Investment increased
   [ ] Investment stayed the same
   [ ] Investment decreased

3. How did these feelings seem to affect your therapeutic relationship?
   [ ] Weakened it
   [ ] Stayed the same
   [ ] Strengthened it

4. Did you prematurely terminate the therapy?
   [ ] Yes
   [ ] No

5. Did you transfer the client?
   [ ] Yes
   [ ] No

6. Did you discuss your feelings with your supervisor?
   [ ] Yes
   [ ] No
MSW Students’ Training and Personal Experiences on Sexual Attraction to

7. Did you discuss your feelings with another student?
   ○ Yes
   ○ No

8. If you choose not to discuss your feelings with someone else, why didn't you?

9. If you did choose to discuss your feelings with someone else how did that person or persons react?

10. Do you believe that your sexual feelings were beneficial to therapy?
    ○ Yes
    ○ No
    Why or why not?

11. Do you believe that your sexual feelings were harmful to therapy?
    ○ Yes
    ○ No
    Why or why not?

9. Other Training Issues

This survey has focused on therapists’ sexual feelings toward their clients and the adequacy of training you have received in order to help you cope with them. The same questions could be asked about several issues in psychotherapy. Please indicate the likelihood that you would discuss with your supervisors or peers the following issues if they were to arise.
**MSW Students’ Training and Personal Experiences on Sexual Attraction to**

1. **Feelings of dislike or hatred toward a client.**
   **How likely would you be to...**

<table>
<thead>
<tr>
<th>Extremely unlikely</th>
<th>Moderately unlikely</th>
<th>Somewhat unlikely</th>
<th>Neutral</th>
<th>Somewhat likely</th>
<th>Moderately likely</th>
<th>Extremely likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initiate a discussion of your dislike/hatred with any of your supervisors?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss your dislike/hatred with any of your supervisors, if they raised the issue?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss your dislike/hatred with other students in your program?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2. **Nonsexual relationships with clients (e.g., going out for a drink, playing tennis, etc.)**
   **How likely would you be to:**

<table>
<thead>
<tr>
<th>Extremely unlikely</th>
<th>Moderately unlikely</th>
<th>Somewhat unlikely</th>
<th>Neutral</th>
<th>Somewhat likely</th>
<th>Moderately likely</th>
<th>Extremely likely</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initiate a discussion of your inclinations towards engaging in a nonsexual relationship with any of your supervisors?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss your inclinations towards engaging in a nonsexual relationship with any of your supervisors, if they raised the issue?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Discuss your inclinations towards engaging in a nonsexual relationship with other students in your program?</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

3. **Please feel free to make any comments about the topics covered in this survey.**

![Comment Box]

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**10. End**

Thank you for your time and participating in this survey!