Sexual Feelings in Therapy

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Frequent Reactions

- Surprise, startle, shock and guilt
- Anxiety about unresolved personal issues
- Fear of losing control or being criticised
- Frustration at not being able to speak openly or make sexual contact
- Confusion about tasks, boundaries and roles
- Confusion about actions
The Fundamental Prohibition

Ask yourself is the contemplated action consistent with the prohibition against therapist-client sexual intimacy?

“Under no circumstances should a therapist ever engage in sexual intimacies with a patient. No matter what the patient has said or done. No matter who the patient. No matter how the therapist or the patient feels. Therapist-patient sexual intimacies are in all instances wrong and must be avoided.” (Pope et. al 1993)
The Second Consideration

- The Slippery Slope - is the contemplated action likely to lead to or create a risk for sexual intimacies?
The Third Consideration

- Consistency of Communication
  - Have you clearly and consistently communicated to the client that sexual intimacies cannot and will not occur?
  - Is the contemplated action consistent with that?
The Fourth Consideration

- Clarification - can you defer the contemplated action until sexual and related issues have been clarified?
  - i.e. the client asks to end the session with a hug. Can you clarify the context and meaning of this hug before agreeing to it.
The Fifth Consideration

- Is the contemplated action consistent with the welfare of the client?
  - Whose needs are being met? Yours or the clients?
The Sixth Consideration

- Is the contemplated action consistent with the basic informed consent of the client?
  - However, informed client consent is no defence against the fundamental prohibition of no therapist-client sexual intimacies.
The Seventh Consideration

- The Client’s view: how is the client likely to understand and respond to the contemplated action?
  - Imagine how you might respond if you were the client.
The Eighth Consideration

- Are you competent to carry out the contemplated action?
  - have you been trained and appropriately supervised for undertaking the proposed action?
  Are you working within your limits of competence?
The Ninth Consideration

- Does the contemplated behaviour fall substantially outside the range of the therapist’s usual behaviours?
The Tenth Consideration

- Secrecy: Is there a compelling reason for **not** discussing the contemplated action with a colleague, consultant or supervisor?