

1997

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## Recommended Citation

Case, Paul W.; McMinn, Mark R.; and Meek, Katheryn Rhoads, "Sexual Attraction and Religious Therapists: Survey Findings and Implications" (1997). *Faculty Publications - Grad School of Clinical Psychology*. Paper 234.

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# Sexual Attraction and Religious Therapists: Survey Findings and Implications

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*Five hundred Christian therapists returned surveys describing their beliefs and behaviors regarding sexual attraction and sexual expression toward their clients. Four groups of Christian therapists responded: psychologists, licensed therapists, nonlicensed therapists, and lay counselors. Christian therapists' responses are compared with those from a similar survey of 456 psychologists selected without regard to religious values. Most groups of Christian therapists are less likely than previously surveyed psychologists to report sexual attraction and fantasy toward clients, but the differences between Christian psychologists and other psychologists are minimal. Religious factors that may increase the stigma of admitting sexual attraction are considered.*

In an age in which therapist-patient sexual intimacy continues to be a major source of complaints for professional ethics committees and licensing boards, the management of sexual feelings in psychotherapy is an important professional consideration. Yet, though possibly related, sexual attraction toward clients and sexual misconduct are two distinct issues. Sexual exploitation is quite rare among psychologists (Pope, Tabachnick, & Keith-Spiegel, 1987) and counselors (Gibson & Pope, 1993), yet as Pope and Bouhoutsos (1986) pointed out, "the phenomenon of sexual attraction to patients appears to be (statistically) normal, and may be a completely natural part of the therapist's reaction to some patients" (p. 36). Although most professionals experience attraction to clients (Rodolfa et al., 1994), many clinicians report feelings of guilt, anxiety, and confusion associated with this attraction and treat it as a secret (Pope, Keith-Spiegel, & Tabachnick, 1986). Thus, the extent to which psychotherapists are unable to distinguish between sexual attraction and sexual exploitation may limit the open consideration of sexual attraction in graduate training, continuing education, consultation, and supervision.

It may be particularly challenging for religious therapists to distinguish between sexual attraction and sexual exploitation. Christians, for example, emphasize the importance of controlling inner experiences as a prerequisite to self-controlled behavior. Jesus taught that "everyone who looks at a woman with lust has already committed adultery with her in his heart" (Matthew 5:28, The New Revised Standard Version). This and similar religious teachings may result in religious therapists having different views of sexual attraction toward clients than their nonreligious counterparts.

## Sources of Stigma Affecting All Therapists

As a result of Freud's conceptualization of countertransference, there is often a professional stigma associated with attraction to a client. Pope et al. (1986) described how "a therapist's attraction to a client became, almost by definition, a therapeutic error, something to hide and to be ashamed of" (p. 149). Even though the Freudian understanding of behavior as determined by unconscious drives is problematic for many contemporary psychologists and counselors, the belief continues to be strong within the mental health professions that being sexually attracted to clients suggests a hidden and inappropriate motive on the part of the therapist. Many professionals, therefore, are plagued with anxieties when faced with feelings of attraction for a client because they know that the professional community still largely interprets sexual feelings for a client as a sign of poor practice in therapy (Pope, Tabachnick, & KeithSpiegel, 1988). These anxieties have kept sexual attraction to clients from being openly discussed in training institutions where, according to Lehrman (1960), "guilt-ridden erotic feelings are a major, if not the major, problem of young male psychotherapists treating attractive female patients" (p. 546).

In addition to the belief that attraction to clients is simply a form of counter-transference and therefore a distorted response by the therapist, much of the stigma regarding therapist-client attraction has to do with guilt-by-association reasoning. Therapists sometimes generalize the negative emotions and beliefs associated with therapist sexual misconduct to any experience of sexual feelings about clients (Pope, Sonne, & Holroyd, 1993). This type of thinking creates a professional environment in which "the fear of damaging one's reputation by creating disapproval, doubts, or suspicions in the minds of colleagues makes it difficult for many therapists to consult their colleagues effectively about such issues" (Pope & Bouhoutsos, 1986, pp. 1-2). Furthermore, from a professional standpoint, the fear that surrounds admitting attraction toward a client is, in part, an attempt to protect the public image of the mental health professions. Pope et al. (1993) wrote: "the topic of sexual feelings about patients calls the public's attention to aspects of the therapist that may seem discordant with the persona of the therapist as a caring provider of help to those who are in need" (p. 31).

Christian psychologists and counselors may face an even stronger professional stigma associated with issues of sexual attraction in therapy than do nonreligious mental health professionals. Although Christian therapists may be influenced by factors such as countertransference anxiety and guilt-by-association thinking previously discussed, there may also be other issues at work in their attitudes toward attraction. Christian therapists' values about sexuality often differ from those of nonreligious therapists. A biblical author wrote, "we take every thought captive to obey Christ" (2 Corinthians 10:5, The New Revised Standard Version). Because sexual attraction to a client might involve thoughts considered lustful by Christians, there is possibly an added effort on the part of Christian therapists to resist their occurrence. This raises considerable concern for Christian professionals who may find themselves struggling against their feelings of attraction to clients. These individuals are wrestling with this issue not only on a professional level, but also on a personal and spiritual level.

One might expect that the Christian emphasis on resisting and controlling expressions of sexuality would result in more attention being paid to this topic by the Christian community. It is, however, an area to which the Christian counseling literature has given only passing

reference. Likewise, as a reflection of the broader American culture, the Christian community has largely embraced the ideal of individualism so that the commands and admonitions of religious scripture have become purely individual responsibilities. For this reason, the feelings of attraction can become an even more distressing experience than it might be for nonreligious therapists, and it may be more difficult to admit a need for help.

In a survey of the ethical beliefs and practices of psychologists, Pope et al. (1987) found that 22% of the respondents believe attraction to a client is always unethical or ethical only under rare circumstances. Gibson and Pope (1993) reported that 37% of certified counselors they surveyed believe sexual attraction is unethical. The purpose of the current study was to investigate the beliefs and behaviors regarding sexual attraction toward clients among Christian psychotherapists. The results reported here are a subset of a comprehensive ethics survey of Christian therapists. The overall survey results are reported elsewhere (McMinn & Meek, 1996).

## **Method**

### *Participants*

Participants for the study were randomly selected from the membership registry of the American Association of Christian Counselors. Three hundred counselors with doctoral degrees, 300 with master's degrees, and 300 with no graduate degree were selected. Of the 900 individuals to whom surveys were sent, 29 returned personal responses explaining why they could not complete the survey (e.g., retirement, not currently practicing), and 5 could not be delivered to. Of the 866 who could have responded, 500 returned completed or partially completed surveys, resulting in a return rate of 58%.

Of the 500 respondents, 302 (60.4%) were men, 181 (36.2%) were women, and 17 (3.4%) did not report their sex. Approximately 80% were between the ages of 30 and 60 years, and another 17% were over 60 years. Seventy-two (14.4%) respondents reported having no graduate degree, 229 (45.8%) reported having a master's degree as their highest degree, and 172 (34.4%) a doctoral degree. Almost one third of the respondents ( $n = 165$ ) reported a private office as their primary work setting, and another 149 (29.8%) reported a church as their primary work setting. Other primary work settings included clinics ( $n = 40$ ), hospitals ( $n = 14$ ), universities ( $n = 13$ ), and various other settings ( $n = 68$ ). Less than one third ( $n = 152$ ; 30.6%) reported having a license in a mental health profession.

The results of a similar survey reported by Pope et al. (1987) were used for comparison purposes. Pope et al. (1987) reported their response distributions in a detailed table in their published journal article. This table was used to construct a data file that accurately presented the previous results and allowed for computerized statistical comparison of the past and present survey results. Data from Gibson and Pope's (1993) study could not be used for comparison because they used a different reporting format, eliciting only yes/no responses rather than using a 5-point rating scale.

## *Materials*

The survey questionnaire was based on the survey instrument used by Pope et al. (1987). Participants responded to a list of 88 behaviors by reporting how often they engaged in the behavior and whether or not they believed it was ethical. Pope et al.'s (1987) list included 82 behaviors, with one item being repeated to allow for a reliability check. Gibson and Pope (1993) added 5 behaviors at the end of the original 83 and replaced the repeated item, resulting in a total of 88 items. These same 88 items were used in this survey, except that we retained Pope et al.'s (1987) repeated item (Item 66 and Item 82 - "Being sexually attracted to a client") rather than using Gibson and Pope's (1993) replacement item for Item 66 ("Advertising accurately your counseling techniques"). Frequency of engaging in the behavior was rated on a 5-point scale including the categories of *never*, *rarely*, *sometimes*, *fairly often*, or *very often*. Participants also had an option of reporting that a behavior was not applicable to their counseling practice. Beliefs about the ethics of the behavior were also rated on a 5-point scale as *unquestionably not*, *under rare circumstances*, *don't know/not sure*, *under many circumstances*, and *unquestionably yes*.

## *Procedure*

Surveys were sent in March 1994 with a cover letter describing the purpose of the study, and participants were asked to put their completed survey in an inner envelope, which, in turn, was placed in an outer postage-paid envelope. The outer envelope was sent to a psychologist in Oregon who separated the inner and outer envelopes and then sent them to the primary investigators in Illinois. The outer envelopes had a code to identify who had returned the survey, but because the inner envelopes had been previously separated, none of the survey responses could be traced to individual respondents. This assured confidentiality for those completing the survey. Those who had not yet returned the survey after 3 weeks were sent a reminder postcard. After 2 additional weeks, they were sent another questionnaire packet.

## **Results**

Because the Christian counseling sample comprised many different mental health professions, respondents were categorized into four groups. The Christian psychologist group comprised 39 respondents who identified themselves as licensed psychologists. Licensed Christian counselors were those 114 respondents with licenses in social work, marriage and family counseling, or professional counseling. Nonlicensed Christian counselors were 280 respondents who reported having graduate degrees but no mental health license. Lay Christian counselors were 65 respondents who reported having no graduate degree. In addition to these four groups, the response patterns from Pope et al.'s (1987) survey of 465 psychologists were used as a control. Response patterns to all survey items pertaining to therapists' sexual feelings and behaviors are listed in Table 1. The percentages reported for psychologists in Table 1 are slightly different from those in the original Pope et al. (1987) report because we computed percentages after removing missing data, whereas Pope and his colleagues computed percentages before removing missing data.

Kruskal-Wallis tests were used to test group differences on survey items. We selected a nonparametric statistical test because the highly skewed distributions observed on most response distributions violate the assumptions of parametric tests. Using a conservative alpha of .001 to control for multiple hypothesis tests, we found significant group differences on Item 15, Telling a client "I'm sexually attracted to you;" Item 41, Leading nude group therapy or "growth groups;" Item 47, Becoming sexually involved with a former client; Item 54, Kissing a client; Item 66, Being sexually attracted to a client; and Item 75, Engaging in sexual fantasy about a client. We elected to use one-way analyses of variance with post hoc comparisons to better understand the group differences identified with Kruskal-Wallis tests. The group differences and post hoc comparisons for the identified survey items are reported in Table 2.

In addition to rating the ethical appropriateness of survey items, respondents also rated how frequently survey items occurred in their practice. The behavior ratings for the items pertaining to sexual attraction, fantasy, and behavior are summarized in Table 3. Kruskal-Wallis tests were again used to test group differences. Again using a conservative alpha of .001 to control for multiple hypothesis tests, we found significant group differences on Item 15, Telling a client "I'm sexually attracted to you;" Item 54, Kissing a client; Item 66, Being sexually attracted to a client; and Item 75, Engaging in sexual fantasy about a client. Other items did not show significant group differences. As with the belief ratings, the behavior ratings that showed group differences were investigated further with analyses of variance and post hoc comparisons. These results are reported in Table 4.

## **Discussion**

As hypothesized, Christian psychotherapists differed from the psychologists in Pope et al.'s (1987) study in several ways. The most robust finding is that those in the comparison group (psychologists in Pope et al.'s 1987 study) were more accepting of sexually fantasizing about a client than any group of Christian psychotherapists, including Christian psychologists. Similarly, comparison psychologists reported engaging in sexual fantasy about clients more frequently than did any group of Christian psychotherapists. Also, comparison psychologists were more accepting of being sexually attracted to a client and more likely to report so than were most Christian therapists, although there was not a significant difference in acceptance between comparison psychologists and Christian psychologists. Moreover, control psychologists were more accepting or more likely to report engaging in some forms of behavior that could be perceived as sexually provocative. These behaviors include disclosing sexual attraction to a client, leading a nude therapy group, becoming sexually involved with a former client, and kissing a client.

For most of these behaviors, the difference between comparison psychologists and Christian psychologists was not significant. Comparison psychologists, however, were more likely to report kissing a client than were Christian psychologists. Also, Christian psychologists, typically those with the most education among the Christian respondents, were less likely to differ from comparison psychologists than were other groups of Christian therapists. It may be that

education in general or psychology training in particular makes therapists more inclined to recognize and admit sexual feelings and experiences than do other forms of training.

There are at least two possible explanations for the differences between Christian therapists and nonreligious psychologists described here. First, it may be that Christian psychotherapists are less likely to experience sexual attraction than are psychologists who are not necessarily religious. This could result from their religious training and values. This interpretation would be good news for religious therapists, evidence of their religious training producing protection from a common area of concern for mental health practitioners. Alternatively, it may be that Christian psychotherapists are less likely to admit and report their feelings of attraction because of the stigma placed on sexual images and wishes within certain religious settings. This explanation would certainly be cause for concern for religious therapists. If this is the case, then it seems that education may buffer the tendency toward denial; for example, lay counselors who have received no formal advanced education in counseling are more likely to disapprove of attraction than are either Christian psychologists or Christian licensed therapists.

Among the 500 Christian counselors surveyed in this study, approximately 44% reported that they are never attracted to any clients. Using the same instrument, Pope et al. (1987) reported that only 9% of psychologists surveyed from the American Psychological Association Division 29 were never attracted to clients. Using a different instrument, Rodolfa et al. (1994) reported that only 47 of 386 (12%) psychologists reported they had never been sexually attracted to a client. If these differences reflect denial among Christian therapists, it may place Christian therapists in a vulnerable position for violating ethical guidelines because self-awareness is crucial for ethical care. Craig (1991) reported that, although clergy practitioners make up approximately 10% of the clinical members within the American Association for Marriage and Family Therapy, a recent notice of membership terminations and revocations indicated that "75% of those suspended for ethical violations were clergy practitioners" (p. 51).

It should be added that the self-report data in this survey do not support the conclusion that Christian therapists are at greater risk than nonreligious psychologists for sexual misconduct. Christian therapists were no more likely to report sexual misconduct in this study than were psychologists in an earlier study (Pope et al., 1987). Indeed, the self-report data suggest that comparison psychologists are more likely to disclose attraction toward clients, sexually fantasize about clients, and kiss clients than some groups of Christian therapists (see Table 4).

## **Conclusions and Future Directions**

The findings reported here generate as many questions as can be answered with the results. Although it seems that Christian therapists are cautious and behave in a sexually appropriate manner in their professional work, there is also the disturbing possibility that they are excessively cautious about disclosing and exploring feelings of sexual attraction for clients. This tendency may be especially pronounced among Christian therapists without extensive graduate-level training.

A related issue that deserves careful attention and subsequent research is the extent to which, as Carbo and Gartner (1994) suggested, dual-role relationships contribute to "compromised relationships [and] more serious incidents of sexual ethics violations against clients" (p. 264). These multiple-role relationships are inevitable among some Christian therapists. For example, pastoral counselors are often called upon to counsel parishioners. Ruth Ochroch, former chair of the APA's ethics committee, reportedly believes that the role of a pastoral counselor is one that is characteristically dual in nature. In her view, this presents a variety of obstacles for effective intervention that "involve issues of competence and confidentiality" (Craig, 1991, p. 19). These blurred therapeutic boundaries, plus a tendency for denying sexual feelings, might place pastoral counselors at particular risk for sexual exploitation. An initial exploration of this hypothesis by McMinn, McRay, and Meek (1995), using this data set, does not confirm this concern. However, Carbo and Gartner (1994) reported the alarming statistic that, in 1 year, 4 out of 10 complaints of sexually inappropriate behavior by psychologists received by the Maryland Psychology Licensing Board involved psychologists who were also ordained ministers. Certainly more research is needed to address this issue.

Many psychologists are unprepared by graduate training programs and internships to effectively handle feelings of attraction (Pope et al., 1987; Pope & Bouhoutsos, 1986). Yet attraction to clients is commonplace (Pope et al., 1987), and often results in feelings of discomfort by the psychologist (Pope, 1987; Pope, Sonne, & Holroyd, 1993; Rodolfa et al., 1994). These feelings of distress are most likely related to both a lack of adequate training of appropriate behavioral responses and a lack of acceptance of the feelings (Rodolfa et al., 1994). With the advent of Christian training programs in psychology, it will be important to research the extent to which sexual attraction is considered in the curriculum and in supervision. Moreover, many religious organizations sponsor lay counseling programs in which training is reduced to time-limited workshops and ongoing supervision. The extent to which lay counselors receive training in managing sexual feelings is an important area for further research.

Also, the supervision and consultation practice of religious therapists needs further research. Pope et al. (1986) indicated that 57% of the psychologists they surveyed sought supervision or consultation whenever they experienced sexual attraction to a client. Stake and Oliver (1991) reported a similar finding with 49.3% seeking supervision. Pope and Bouhoutsos (1986) warned: "If therapists are experiencing difficulties in their personal lives, consultation, supervision, and/or (re)entering therapy are useful, if not absolutely necessary, steps to prevent damage to their work with patients" (p. 6). This may be particularly difficult for the Christian therapist, who knows of few resources for coping with confusing sexual feelings because of the stigma within Christian circles. Similar studies among religious therapists would provide valuable information about this concern.



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TABLE 1

## Responses by Percentage to the Question "Is It Ethical"

Item/Group	Responses				
	1	2	3	4	5
15. Telling Client: "I'm sexually attracted to you."					
Psychologists	51.9	33.3	5.5	6.8	2.4
Christian psychologists	65.8	26.3	0.0	0.0	7.9
Christian licensed counselors	74.6	17.5	5.3	1.8	0.9
Christian nonlicensed counselors	79.3	12.5	2.2	2.2	3.7
Christian lay counselors	81.7	8.3	8.3	0.0	6.7
41. Leading nude group therapy or "growth groups"					
Psychologists	61.0	16.8	15.2	4.0	2.9
Christian psychologists	89.7	2.6	0.0	2.6	5.1
Christian licensed counselors	88.5	3.5	5.3	0.9	1.8
Christian nonlicensed counselors	92.1	1.9	2.6	0.4	3.0
Christian lay counselors	90.0	5.5	1.8	0.0	1.8
47. Becoming sexually involved with a former client					
Psychologists	50.7	34.7	7.3	4.0	3.3
Christian psychologists	76.9	15.4	0.0	0.0	7.7
Christian licensed counselors	84.5	10.9	0.9	0.9	2.7
Christian nonlicensed counselors	89.6	5.6	1.5	0.4	3.0
Christian lay counselors	86.7	3.3	6.7	0.0	3.3
54. Kissing a client					
Psychologists	48.5	36.9	4.6	7.7	2.2
Christian psychologists	87.2	5.1	0.0	0.0	7.7
Christian licensed counselors	80.5	12.4	2.7	2.7	1.8
Christian nonlicensed counselors	81.3	12.4	2.2	1.5	2.6
Christian lay counselors	83.6	9.8	1.6	1.6	3.3
55. Engaging in erotic activity with a client					
Psychologists	95.2	3.5	0.4	0.4	0.4
Christian psychologists	92.1	0.0	0.0	0.0	7.9
Christian licensed counselors	96.5	0.0	0.0	0.0	3.5
Christian nonlicensed counselors	96.6	0.4	0.0	0.0	3.0
Christian lay counselors	94.9	0.0	1.7	0.0	3.4
58. Engaging in sex with a clinical supervisee					
Psychologists	85.7	9.1	3.5	1.5	0.2
Christian psychologists	92.3	0.0	0.0	0.0	7.7
Christian licensed counselors	97.3	0.9	0.9	0.0	0.9
Christian nonlicensed counselors	97.0	0.0	0.0	0.0	3.0
Christian lay counselors	93.3	1.7	1.7	0.0	3.3
62. Engaging in sexual contact with a client					
Psychologists	96.3	2.6	0.2	0.7	0.2
Christian psychologists	92.3	0.0	0.0	0.0	7.7
Christian licensed counselors	98.2	0.0	0.0	0.0	1.8
Christian nonlicensed counselors	95.2	1.1	0.4	0.7	2.6
Christian lay counselors	93.3	0.0	1.7	0.0	5.0
66. Being sexually attracted to a client					
Psychologists	11.9	11.7	20.7	20.3	35.4
Christian psychologists	26.3	10.5	26.3	10.5	26.3
Christian licensed counselors	43.5	15.7	13.0	10.2	17.6
Christian nonlicensed counselors	57.0	13.6	15.5	5.7	8.3
Christian lay counselors	75.4	4.9	16.4	1.6	1.6

(table continues)

TABLE 1 (continued)

## Responses by Percentage to the Question "Is It Ethical"

Item/Group (continued)	Responses				
	1	2	3	4	5
68. Allowing a client to disrobe					
Psychologists	81.9	12.1	3.1	1.5	1.3
Christian psychologists	87.2	2.6	0.0	0.0	10.3
Christian licensed counselors	93.8	3.6	0.0	0.0	2.7
Christian nonlicensed counselors	94.0	2.6	0.4	0.4	2.6
Christian lay counselors	91.7	5.0	0.0	0.0	3.3
75. Engaging in sexual fantasy about a client					
Psychologists	19.7	15.8	27.9	13.7	22.9
Christian psychologists	69.2	10.3	5.1	0.0	15.4
Christian licensed counselors	82.1	8.0	8.0	0.0	1.8
Christian nonlicensed counselors	87.6	4.9	4.5	0.0	3.0
Christian lay counselors	90.0	1.7	6.7	0.0	1.7
78. Disrobing in the presence of a client					
Psychologists	95.8	3.3	0.0	0.2	0.7
Christian psychologists	89.7	0.0	0.0	0.0	10.3
Christian licensed counselors	97.3	0.0	0.0	0.0	2.7
Christian nonlicensed counselors	97.0	0.0	0.0	0.4	2.6
Christian lay counselors	94.9	0.0	1.7	0.0	3.4

Note. Rows may not sum to 100% because of rounding. Percentages were computed after removing missing data. For ethics ratings: 1 = *unquestionably not*, 2 = *under rare circumstances*, 3 = *don't know/not sure*, 4 = *under many circumstances*, and 5 = *unquestionably yes*. For groups: psychologists,  $n = 465$ ; Christian psychologists,  $n = 39$ ; Christian licensed counselors,  $n = 114$ ; Christian nonlicensed counselors,  $n = 280$ ; and Christian lay counselors,  $n = 65$ .

TABLE 2

## One-Way ANOVA Results and Post Hoc Comparisons for Selected Ethics Belief Items

Item/Source	<i>df</i>	<i>F</i>	Post Hoc Comparisons*
15. Telling client: "I'm sexually attracted to you."			
Between group	4	7.98*	Psychologists differ from Christian licensed counselors and Christian nonlicensed counselors.
Within-group error	931		
41. Leading nude group therapy or "growth groups"			
Between group	4	14.26*	Psychologists differ from Christian licensed counselors, Christian nonlicensed counselors, and Christian lay counselors.
Within-group error	915		
47. Becoming sexually involved with a former client			
Between group	4	14.35*	Psychologists differ from Christian licensed counselors, Christian nonlicensed counselors, and Christian lay counselors.
Within-group error	924		
54. Kissing a client			
Between group	4	12.35*	Psychologists differ from Christian licensed counselors, Christian nonlicensed counselors, and Christian lay counselors.
Within-group error	927		
66. Being sexually attracted to a client			
Between group	4	75.37*	Psychologists differ from Christian licensed counselors, Christian nonlicensed counselors, and Christian lay counselors; Christian lay counselors differ from Christian psychologists and Christian licensed counselors; Christian psychologists differ from Christian nonlicensed counselors.
Within-group error	896		
75. Engaging in sexual fantasy about a client			
Between group	4	129.65*	Psychologists differ from Christian psychologists, Christian licensed counselors, Christian nonlicensed counselors, and Christian lay counselors.
Within-group error	910		

\*Scheffe tests with an alpha of .05 were used for post hoc comparisons.

\* $p < .001$ .

TABLE 3

Responses by Percentage to the Question,  
"Have You Ever Done This?"

Item/Group	Responses				
	1	2	3	4	5
15. Telling client: "I'm sexually attracted to you."					
Psychologists	79.6	16.4	3.6	0.2	0.2
Christian psychologists	92.1	7.9	0.0	0.0	0.0
Christian licensed counselors	92.9	7.1	0.0	0.0	0.0
Christian nonlicensed counselors	94.7	4.5	0.8	0.0	0.0
Christian lay counselors	93.7	4.8	0.0	1.6	0.0
41. Leading nude group therapy or "growth groups"					
Psychologists	96.4	2.4	1.0	0.2	0.0
Christian psychologists	100.0	0.0	0.0	0.0	0.0
Christian licensed counselors	99.1	0.0	0.9	0.0	0.0
Christian nonlicensed counselors	99.6	0.0	0.0	0.0	0.4
Christian lay counselors	98.2	1.8	0.0	0.0	0.0
47. Becoming sexually involved with a former client					
Psychologists	88.7	10.6	0.4	0.0	0.2
Christian psychologists	100.0	0.0	0.0	0.0	0.0
Christian licensed counselors	95.5	4.5	0.0	0.0	0.0
Christian nonlicensed counselors	98.4	1.6	0.0	0.0	0.0
Christian lay counselors	100.0	0.0	0.0	0.0	0.0
54. Kissing a client					
Psychologists	71.3	23.6	4.4	0.2	0.4
Christian psychologists	97.4	2.6	0.0	0.0	0.0
Christian licensed counselors	91.2	7.9	0.9	0.0	0.0
Christian nonlicensed counselors	91.6	8.0	0.4	0.0	0.0
Christian lay counselors	88.5	6.6	3.3	1.6	0.0
55. Engaging in erotic activity with a client					
Psychologists	97.4	2.4	0.2	0.0	0.0
Christian psychologists	100.0	0.0	0.0	0.0	0.0
Christian licensed counselors	97.3	2.7	0.0	0.0	0.0
Christian nonlicensed counselors	98.9	1.1	0.0	0.0	0.0
Christian lay counselors	100.0	0.0	0.0	0.0	0.0
58. Engaging in sex with a clinical supervisee					
Psychologists	96.7	2.9	0.4	0.0	0.0
Christian psychologists	100.0	0.0	0.0	0.0	0.0
Christian licensed counselors	99.1	0.9	0.0	0.0	0.0
Christian nonlicensed counselors	100.0	0.0	0.0	0.0	0.0
Christian lay counselors	98.4	0.0	1.6	0.0	0.0
62. Engaging in sexual contact with a client					
Psychologists	98.0	1.5	0.4	0.0	0.0
Christian psychologists	97.4	2.6	0.0	0.0	0.0
Christian licensed counselors	97.3	2.7	0.0	0.0	0.0
Christian nonlicensed counselors	97.7	1.9	0.4	0.0	0.0
Christian lay counselors	98.4	0.0	0.0	1.6	0.0
66. Being sexually attracted to a client					
Psychologists	9.3	39.3	44.4	5.6	1.3
Christian psychologists	17.9	48.7	33.3	0.0	0.0
Christian licensed counselors	32.4	40.5	23.4	2.7	0.9
Christian nonlicensed counselors	43.7	34.5	19.9	1.5	0.4
Christian lay counselors	58.7	20.6	20.6	0.0	0.0

(table continues)

**TABLE 3 (continued)**

**Responses by Percentage to the Question,  
"Have You Ever Done This?"**

Item/Group	Responses				
	1	2	3	4	5
68. Allowing a client to disrobe					
Psychologists	95.6	2.9	1.6	0.0	0.0
Christian psychologists	100.0	0.0	0.0	0.0	0.0
Christian licensed counselors	98.2	1.8	0.0	0.0	0.0
Christian nonlicensed counselors	97.7	1.1	0.8	0.0	0.4
Christian lay counselors	96.8	3.2	0.0	0.0	0.0
75. Engaging in sexual fantasy about a client					
Psychologists	27.3	46.9	22.7	2.4	0.7
Christian psychologists	56.4	43.6	0.0	0.0	0.0
Christian licensed counselors	64.3	28.6	7.1	0.0	0.0
Christian nonlicensed counselors	73.3	21.8	4.2	0.4	0.4
Christian lay counselors	87.3	12.7	0.0	0.0	0.0
78. Disrobing in the presence of a client					
Psychologists	98.7	0.9	0.0	0.2	0.2
Christian psychologists	100.0	0.0	0.0	0.0	0.0
Christian licensed counselors	100.0	0.0	0.0	0.0	0.0
Christian nonlicensed counselors	100.0	0.0	0.0	0.0	0.0
Christian lay counselors	100.0	0.0	0.0	0.0	0.0

*Note.* See Table 1 *Note.* For practice ratings: 1 = *never*, 2 = *rarely*, 3 = *sometimes*, 4 = *fairly often*, and 5 = *very often*.

TABLE 4

## One-Way ANOVA Results and Post Hoc Comparisons for Selected Ethics Behavior Items

Item/Source	<i>df</i>	<i>F</i>	Post Hoc Comparisons <sup>a</sup>
15. Telling client: "I'm sexually attracted to you."			
Between group	4	10.20*	Psychologists differ from Christian licensed counselors and Christian nonlicensed counselors.
Within-group error	923		
54. Kissing a client			
Between group	4	15.68*	Psychologists differ from Christian psychologists, Christian licensed counselors, and Christian nonlicensed counselors.
Within-group error	925		
66. Being sexually attracted to a client			
Between group	4	40.61*	Psychologists differ from Christian licensed counselors, Christian nonlicensed counselors, and Christian lay counselors; Christian psychologists differ from Christian lay counselors.
Within-group error	919		
75. Engaging in sexual fantasy about a client			
Between group	4	57.70*	Psychologists differ from all groups of Christian therapists.
Within-group error	921		

<sup>a</sup>Scheffe tests with an alpha of .05 were used for post hoc comparisons.

\* $p < .001$ .