Broken Boundaries: Sexual Exploitation in the Professional-Client Relationship. VHS, 24 minutes, free upon request. Available from the Maryland Department of Health and Mental Hygiene, 201 W. Preston Street, Baltimore, MD 21201, phone (410) 767-6612.

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"This third person lives with us." The voice is not that of a couple caring for a relative, friend, or boarder, but that of a husband describing how his marriage is haunted by the therapist who sexually exploited his wife. A new resource developed by the Maryland Department of Health and Mental Hygiene provides a poignant portrayal of the effects of sexual exploitation by professional helpers through the stories of 10 individuals who survived such exploitation.

Broken Boundaries opens with Maryland Senator Leonard Titiebaum explaining why his state passed legislation to protect people against sexual exploitation by professional helpers and quickly moves to the stories of women and men who were sexually exploited by clergy, physicians, licensed psychologists, and other professional helpers. There are many common themes that permeate the stories of these survivors: the depths of vulnerability experienced by people at the time they seek professional counsel, the enormous amount of trust people place in such helpers, and the devastating consequences that occur when that trust is violated. The strength of this video is as a tool to enhance awareness of these points and to spark discussion within the context of training on professional ethics and boundary management.

Training regarding sexual exploitation provided to the public, to professionals and paraprofessionals, and to students preparing for roles as professional helpers should be able to answer several crucial questions: What is included within the rubric of "sexual misconduct?" What is the etiology of sexual misconduct? (How does this happen?) What are the warning signs of such boundary violations? What is the effect of sexual exploitation upon the client and her or his intimate partner? What personal and organizational strategies can reduce the likelihood of boundary violations within helping relationships? What sources of redress are available to clients who have been sexually exploited by a professional helper? How should professional helpers respond to disclosures by clients of sexual exploitation by another professional helper? What should happen to professional helpers (professionally and criminally) who have sexually exploited one or more clients? Broken Boundaries does not define, elucidate the causes of, or outline the needed public policy and professional responses to sexual exploitation of clients by professional helpers, and it is virtually silent on the different types of perpetrators of such exploitation. It could not stand alone as a comprehensive orientation to this subject, but it brings unique strengths to its answers to questions 3 and 4.

The stories in the video vividly portray warning signs of boundary violations: the cultivation of client dependency, the increased frequency and duration of sessions, the isolation of the client from other sources of influence, the promises of great happiness if only the client can learn to trust, and the framing of increased physical intimacy in therapeutic or religious terms. Similarly detailed are the consequences of sexual involvement with a professional helper: fear of discovery, fear of loss of family, feelings of personal responsibility, shame, anger, and the more enduring consequences of lost time (usually years) and an experience of betrayal so profound as to make future trust nearly impossible.

There are many messages contained in Broken Boundaries that are worth exploring in the context of public education and professional training.

- The public's lack of knowledge about what is and is not appropriate within the rubric of therapy or spiritual advice enhances the vulnerability of people seeking such services.
- Defining and monitoring boundaries within helping relationships constitute the very essence of professionalism.
- All professional helpers are vulnerable to poor boundary management with some clients and during periods of heightened personal vulnerability.
The effect of poor boundary management is measured not just in terms of less-than-ideal clinical outcomes, but in harm to the client.

The responsibility for defining and maintaining appropriate relationship boundaries in helping relationships is always that of the helper.

Sexual exploitation of clients by professional helpers can be enabled by the silence of their coworkers.

For readers seeking an aid to trigger discussion about the effects of sexual exploitation on clients, this is a helpful new resource that could be used as part of a larger public education program or as part of a training workshop on managing personal and professional boundaries in the helping professions. It would be well utilized within any educational program seeking to educate professional helpers about the effects of sexual exploitation upon those who have been so exploited. While it would have some utility in training primary healthcare providers, its best use will be in the training of psychiatrists, psychologists, social workers, clergy, counselors, case managers, and outreach workers.