

Providing Culturally Competent Care to Sexual and
relationally diverse clients

A Mosaic of Relationships Seminar

Steve Ratcliff, MA, LPCC, LPC, NCC, CST



ACKNOWLEDGEMENTS & DISCLOSURES

Introduction: Personal & Professional

Disclosures: Commercial Funding & Conflicts of Interest – NONE to Disclose

Privilege Acknowledgement: I am a cis-male, white, educated, able-bodied, employed, and housed person. Each of these aspects gives me unearned privileges.

Land acknowledgement: I am living on colonized and stolen Tewa land.

Legal Stuff: None of the content in this presentation constitutes legal advice. This training is copyrighted and for your informational purposes only.

Content Coping: This presentation discusses issues related to sex and relationships. It may contain adult content. If you feel triggered, please take care of yourself.

Ask Questions: Please feel free to ask your questions throughout.

CULTURAL COMPETENCE AS AN ETHICAL IMPERATIVE

What is it?

- "...having an understanding, appreciation, and respect for cultural differences and similarities within, among, and between culturally diverse patient groups."(U.S. Dept. Health Human Serv. 2002 as discussed in Sue et al., 2009)

Involves

- Cultural Knowledge
 - Knowledge of a client's culture such as terminology and community connections
- Cultural awareness and beliefs
 - Being sensitive to your values and bias and how they may influence your perception and work with a client
 - Includes values and attitudes
- Cultural Skills
 - Knowing how to intervene in a culturally sensitive and relevant manner (Sue et al., 1982 as discussed in Sue et al. 2009)

Why it matters?

- Mandated by Ethics Codes (AAMFT, ACA, APA, NASW, AAP)
- There could be legal liability for incompetence (HPSO Reports on malpractice & licensure complaints)
- Mandated by many health care organizations and insurance companies (Sue et al., 2009)
- **MOST IMPORTANTLY** - We risk causing serious harm if we practice in culturally incompetent ways (Dimidjian & Hollon, 2010; Lilenfeld, 2007)
- Moreover, culturally competent practice improves outcomes

Common harms of cultural incompetence

Common Harms of Culturally Diverse Clients in the Multicultural Counseling Literature:

- Micro-aggressions (Neville et al., 2013; ACA, 2009)
- Misattunement / microruptures (Chang & Berk, 2009)
- Inadequate treatment leading to early drop out (Ault-Brutus, 2012; U.S. Surgeon General, 2001)
- Threats of physical violence or death (ACA, 2009)

Potential benefits of culturally competence

- Reduce early termination from treatment (Anderson, Bautista, & Hope, 2018; Kumpfer et al., 2002)
- Reduce health disparities (Butler et al., 2014; Weisner & Hay, 2015)
- Positively impacts patient satisfaction (Beach et al., 2005)
- Improve rapport building (Beach, Saha, & Cooper, 2006)
- Improve therapeutic outcomes (Beach, Saha, & Cooper, 2006; Huey et al., 2014; Jani, Ortiz, & Aranda, 2009)

Cultural Humility

- An alternative model for cultural competence is cultural humility (Johnson, 2021)
- Better accounts for ongoing process throughout our lives / career
 - Competency places the emphasis on knowing and implies mastery
 - Knowledge is viewed to be sufficient for change
- This orients us to a way of being rather than focusing on mastering ways of knowing
 - Issues of oppression, privilege, and social justice needs are better addressed here
 - Focuses on a dynamic and ongoing process
- Making implicit bias explicit permits us to mitigate it, it doesn't remove it.

Cultural Competence & humility

So we will be looking at

- Cultural Knowledge (Some Focus)
- Cultural Awareness and Beliefs (Main Focus)
- Cultural Skills (Not Covered)

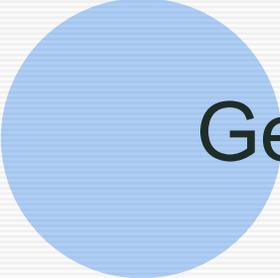
Focusing on lifelong learning through
the cultural humility framework

Value Difference Dilemmas

- Sometimes in providing culturally competent care, we run into value conflicts / differences with our clients
- Sexual and Relationship Diversity are areas where this seems highly prone as both sexuality and relationships are highly value-laden.

Tips for Managing these:

- Ethics codes place the impetus on clinicians to manage these differences and prevent imposing our values on clients, which can cause harm
- Consider your values and highlighting the difference can help micro-value imposition incidents
- Consult
- Normalize difference and bias
- Consider personal therapy as needed
- Remember it's not about you: your job is to treat the presenting concern and not convert the person's values
- Remain client centric in working with their unique world
- Be mindful of risks to pathologize diverse sexual and relationship behaviors and identities

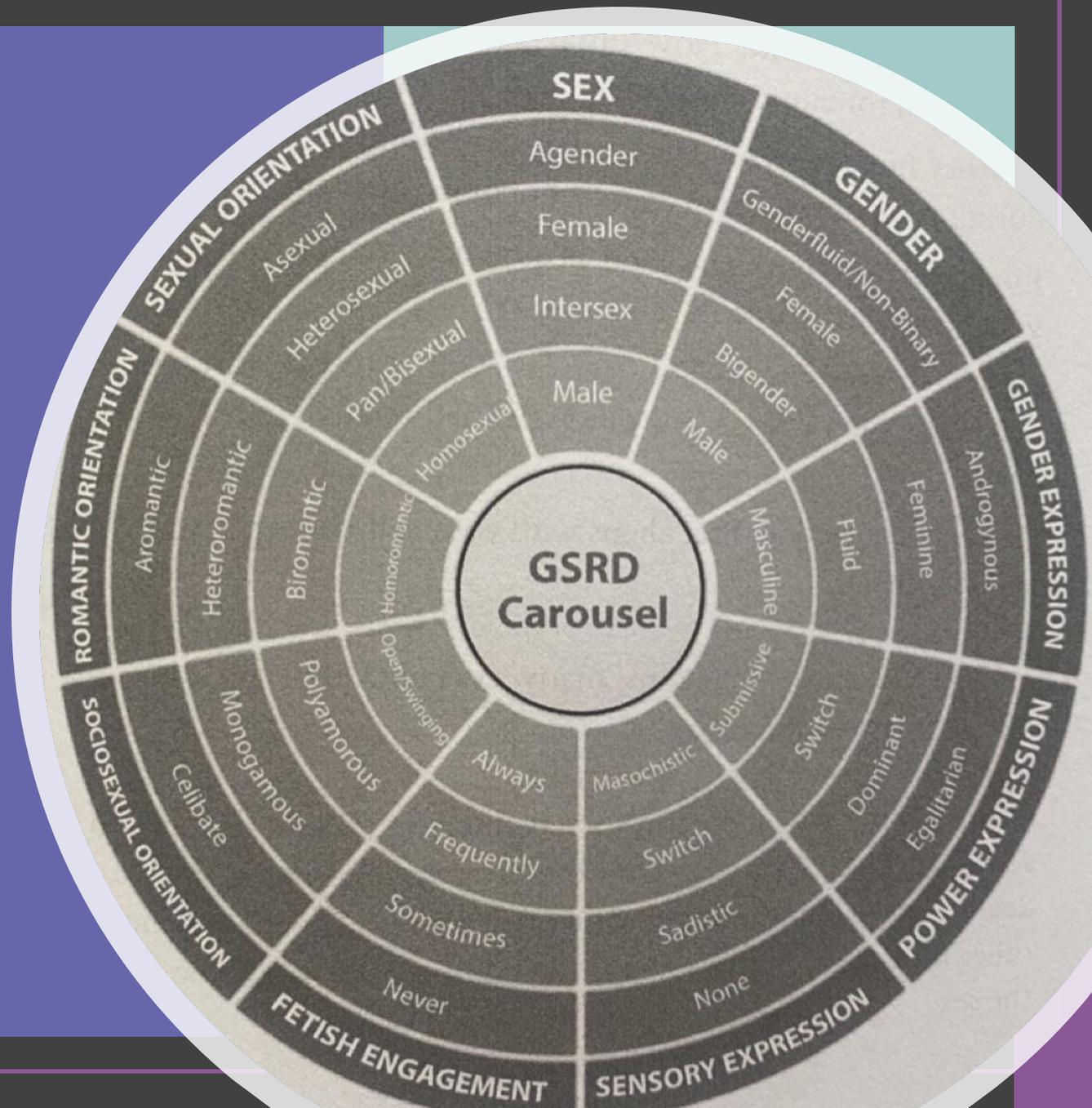


Gender, Sexual and Relationship Diversity

- GSRD = Gender, Sexual and Relationship Diversity (Barker, 2017; Davies & Barker, 2015; Richards et al., 2019)
 - An alternative to ALGBTIIQ+ (the expanding acronym) and SGM (sexual and gender minority)
 - LGBTQ+ only attends to sexuality and gender diversity and doesn't see other links of relationship diversity; moreover, kink is often excluded from some LGB groups (e.g. kink at pride debates)
 - Acronym is ever expanding to incorporate more marginalized groups; GSRD is shorter and includes these groups and can naturally expand without growing the acronym
 - Gender, sexuality, and relationships are inextricably linked, which is why we need to consider them together as GSRD, rather than separating them out
 - Concerned with consensual sexuality diversity (not non-consensual, which fall under sexual offender and sexual deviance forensic literature)
- *For brevity, we will discuss sexual and relationship diversities that are more likely to be unfamiliar to clinicians in this seminar*

Source: Stefani Goerlich "The Leather Couch: Clinical Practice with Kinky Clients" (1st Ed.)

GSRD CAROUSEL



GSRD EXPERIENCES OF PREJUDICE: SEXUAL DIVERSITY

Sexual and relationally diverse clients are more likely to experience prejudice

- Kink and BDSM have been pathologized in diagnostic systems the 19th century (Kraft Ebbing, 1886)
- Stigma from medical providers is common (Beebe et al., 2021; Kolmes, Stock, & Moser, 2006; Lawrence & Love-Crowell, 2008; Nichols, 2006; Sprott & Randall, 2017; Sprott et al., 2021) and contributes to health disparities:
 - Delays in seeking medical care, not disclosing to healthcare providers, decreased HIV testing (Waldura et al., 2015)
 - Stigma hinders access and past negative experiences with healthcare workers delayed treatment 4x (Sprott & Randall, 2017; Sprott et al. 2021)
 - Anticipated stigma further led to concealing kink and delaying medical treatment (Quinn et al., 2014)
- Mainstream stigma from kink populations is also well documented (Newmahr 2010; Silva 2015; Mozer 2016; Weinberg 2006; Sprott & Randall, 2017; Sprott et al., 2021) and includes:
 - Harassment, violence, loosing a job, loosing child custody, etc.
- The assumptions that kink engagement is inherently pathological appears unwarranted given the preponderance of research that finds little or no difference in psychological functioning and attachment styles when comparing kink populations with controls (Cannon, 2006, 2009; Cross & Matheson, 2006; Richters, de Visser, Rissel, Grulich, & Smith, 2008; Rubel & Bogaert, 2014; Wismeijer & van Assen, 2013)

GSRD EXPERIENCES OF PREJUDICE: RELATIONSHIP DIVERSITY

Sexual and relationally diverse clients are more likely to experience prejudice

- CNM people are often stereotyped and pathologized by healthcare workers (Schechinger, Sakaluk, & Moors, 2018; Vaughan et al., 2019)
 - 1:7 people who engage in CNM report discrimination from a healthcare provider (Witherspoon, 2018)
- 25.8% - 43% of CNM people experience mainstream explicit prejudice (Cox, Fleckenstein, & Bergstrand, 2013; Nearing, 2000)
- Includes legal prejudice and disadvantage
- Mononormativity is defined as the culturally sanctioned assumption that monogamous relationships are the only healthy relationships (Conley et al., 2013a; Moors et al., 2013b)
 - Term coined by Pieper and Bauer (2005, 2006)
 - This assumption is not supported in the literature regarding relationship satisfaction, sexual satisfaction, and sexual health (Conley et al., 2013b)
- This stigma doesn't hold up to research that suggests relationship diversity can be healthy, is not inherently harmful, and may bring resources to relationships.

Intersectionality

Because Sexual and Relationship Diversity identities interact with other identities, there may be additional levels of cumulative and unique prejudice experiences from these intersecting identities.

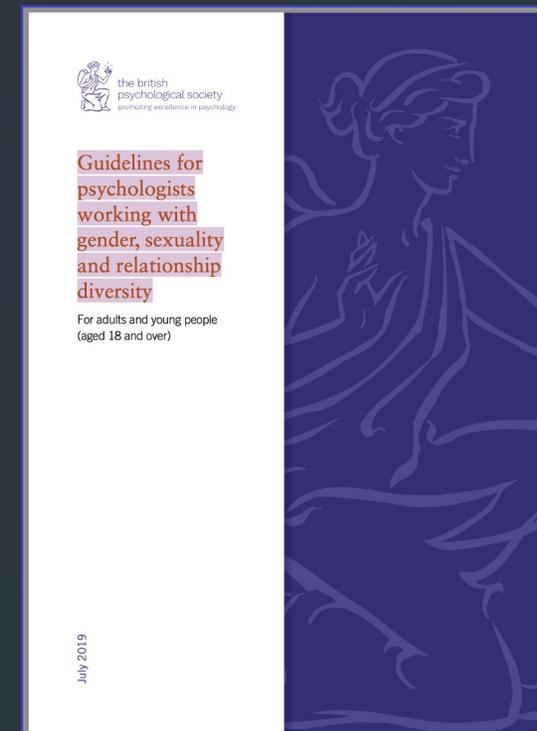
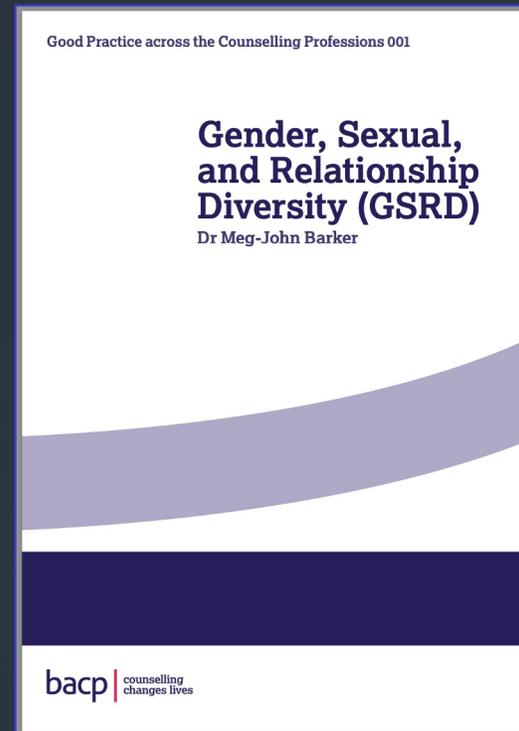
Intersectionality was coined by Kimberle Crenshaw and speaks to unique prejudice experiences of people from intersecting identities of disadvantage (e.g. being POC and woman in her research)

Consider how your client's relationship and sexual diversities may intersect with other identities such as:

- ethnicity, race, immigration status, socio-economic status, class, education, employment, able-bodied, beauty (e.g. sex appeal in the dominant culture), religion, monogamy, sexual orientation, gender, sex, age, gender expression (e.g. masculinity), social support, family support, and urban living

Gender, Sexual and Relationship Diversity

Resources



SEXUAL DIVERSITY

- Includes:
 - Sexual Orientation
 - Gay, Lesbian
 - Bisexual, Pansexual
 - Queer / Questioning
 - Asexual Spectrum
 - Sexual Behaviors (“straight” people who have same-sex sex, etc.)
 - “Alternative” Sexualities
 - Kink / BDSM
 - Fetishes
- These may be behaviors and / or identities
- *Because of the great familiarity with competent practice with Lesbian, Gay, and Bisexual (LGB) individuals, we will focus on asexual spectrum, kink, and fetishes*

Sexual Diversity: Asexual Spectrum

- Increasing publications in literature since the early 2000s
- Viewed as a sexual orientation in the literature today; however what is most important is how your client identifies because asexuality may be an identity, may wiggle / shift, or may be a behavior for now
- Concerns about the DSM diagnosis previously discussed pathologizing this sexual orientation. Rule outs need to be more explicitly labeled in the DSM
- Can be somewhat fluid (shifts along continuum)

Asexual

Gray / Demi Sexual

Allo-Sexual

Sexual Diversity: Asexual Spectrum

Asexual Spectrum Identities



***Demisexual: sexual attraction ONLY after bond has been formed**



***Fraysexual: sexual attraction fades after initially meeting someone (opposite of demisexual)**



***Cupiosexual: wanting a sexual relationship but NOT experience sexual attraction**



***Graysexual: very rarely having sexual attraction and/or very specific circumstances**



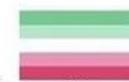
***Lithosexual: experiencing sexual attraction but NOT wanting it reciprocated**



***Autochorisexual/Aegosexual: disconnection between oneself and sexual target of arousal**



***Placiosexual: wanting to do sexual things with someone else but being ok if they're not reciprocated (deals with action, not attraction)**



***Abrosexual: orientation fluctuates between different orientations**



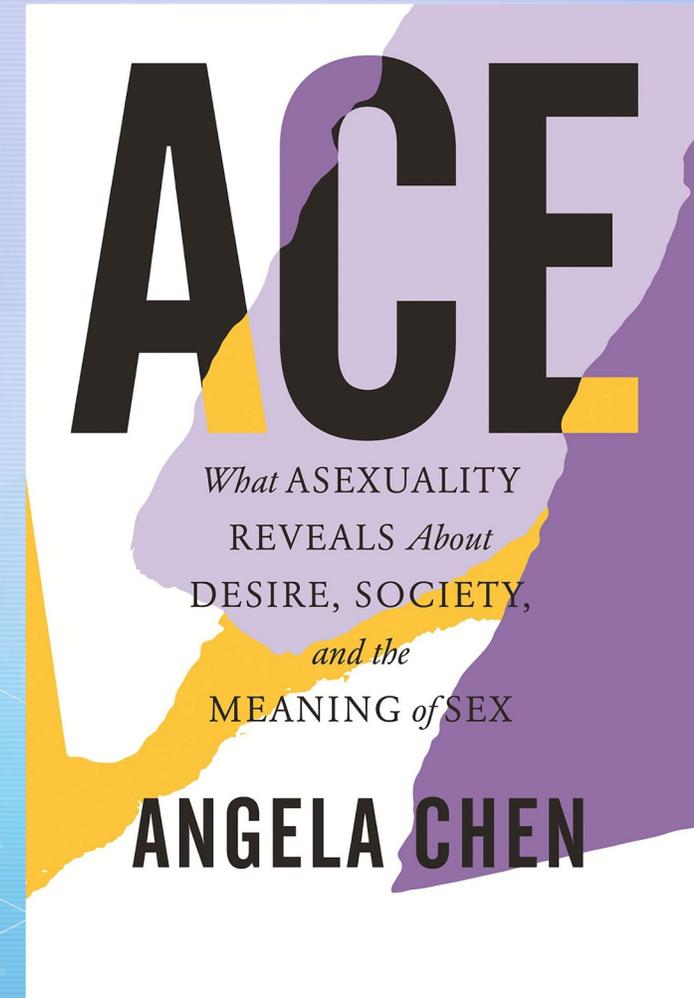
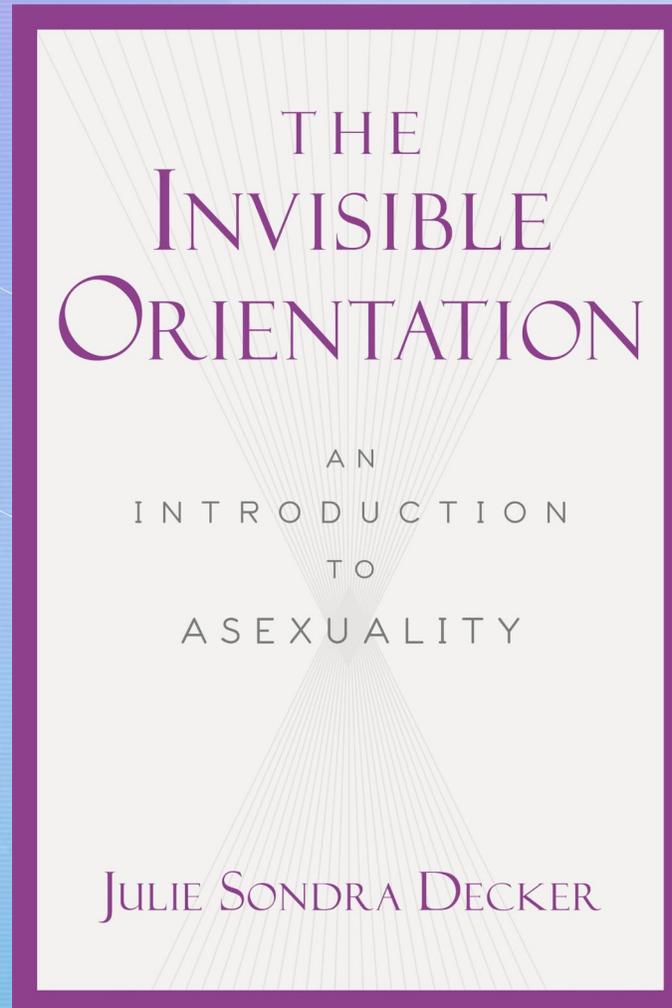
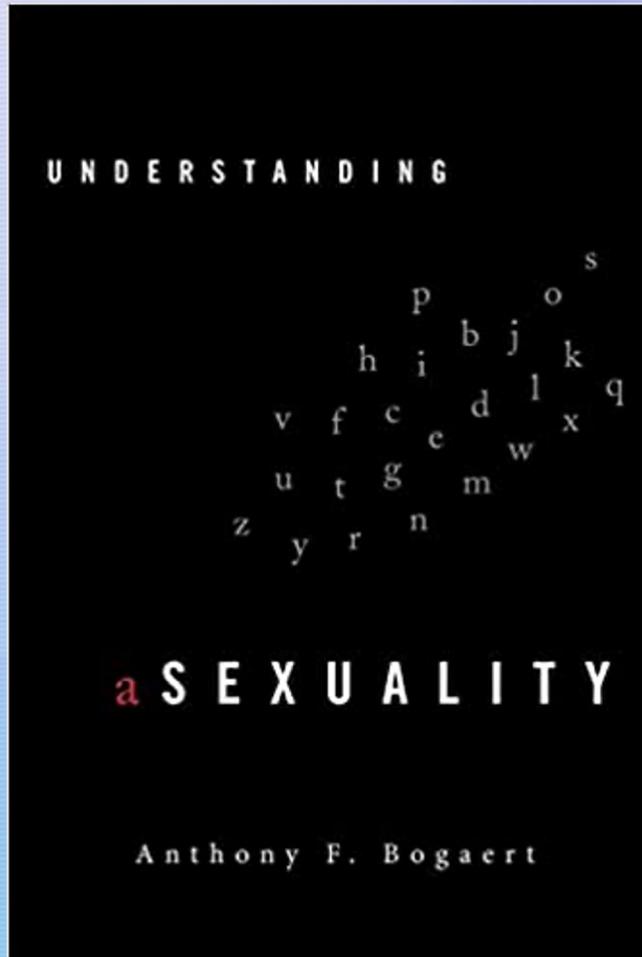
***Apothisexual: Someone who identifies as asexual and is sex repulsed**

Sexual Diversity: Asexual Spectrum

- Don't assume about your client's asexuality but also learn a bit about this group (do your homework)
- Don't assume all people are inherently wanting to be sexual
- Asexual can mean a diversity of things to different people and may shift for some across the lifespan
- Asexuals may want relationships
- Consider:
 - Value Differences about Lifestyle, Relationships, and importance of sex
 - What comes up for you and what assumptions may you have here?

ASEXUALITY RESOURCES

Book Show and Tell



Sexual Diversity: Kink

“Kink” is an umbrella term for various sexually diverse, minority cultures (Moser & Kleinplatz, 2007; Simula, 2019b)

Kink is used as an umbrella term to address a wide range of fantasies, interests, identities, consensually agreed upon behaviors, and consensual relationships.

Kink Requires

- Mutual Agreement
- Openness
- Authenticity
- Negotiation

Sexual Diversity

Elements of Kink

- * Eroticizing intense sensations (including but not limited to “pain”)
- * Eroticizing power dynamics and differences
- * Enduring fascination with specific sensory stimuli including specific body parts or inanimate objects (e.g. “fetishes”)
- * Role play or dramatizing erotic scenarios
- * Erotic activities that induce heightened or altered states of consciousness

SEXUAL DIVERSITY

Why do People Practice Kink?

For the same reasons as non-kinky sex (e.g. “vanilla sex”)

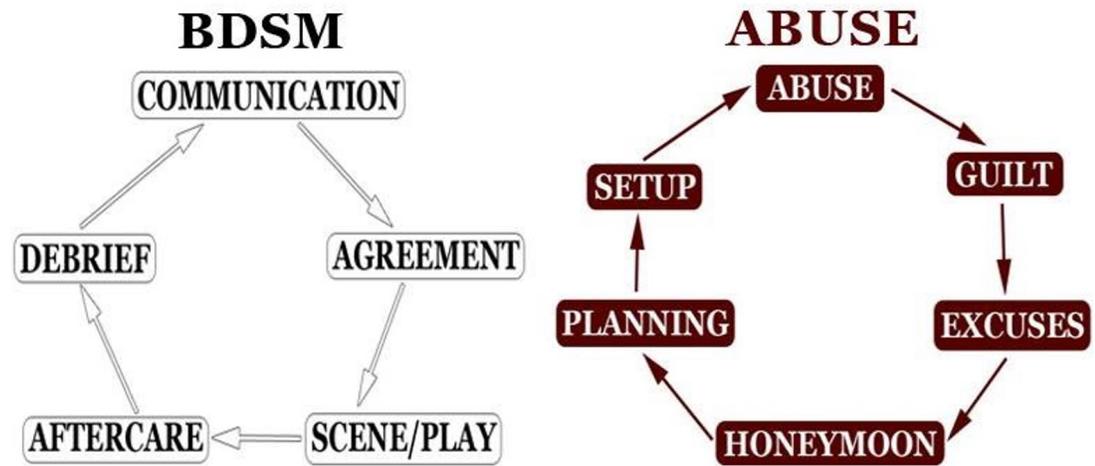
- Connection
- Sensation
- Intimacy
- Creativity
- Intensity
- stress relief
- pleasure

For some people, BDSM is a central part of a spiritual practice

Basically, people do it because they like it & it feels good

Sexual
Diversity:
Kink

THE DIFFERENCE BETWEEN BDSM AND ABUSE



SEXUAL DIVERSITY: FETISHES

- Fetishes are incredibly diverse but generally involves the use of an inanimate object for sexual gratification
- Some are still pathologized in the DSM 5 TR
- Common Fetishes
 - Shoes
 - Women's Clothing / Underwear
 - Leather
 - Rubber
 - Sports Gear
 - Uniforms
 - Hair / Hair Cutting
 - Bodily Fluids
 - Body Parts
- Socially Sanctioned Fetishes?
 - Sex toys
 - Lingere

EXPOSURE EXPERIENCE # 1

1

In order to increase our awareness of our bias' (we all have them), we will next be viewing a series of photographs of kink and fetish activities.

2

While none of these photographs involve nude content, they can be evocative.

3

Take care of yourself

4

Notice what comes up. Maybe journal about it later

- Questions
- Assumptions
- Reactions



KINK & FETISHES
*WHAT DOES IT LOOK
LIKE?*

Source:
TASHRA

A close-up photograph of two hands, one slightly larger than the other, tied together at the wrists with a thick, dark red fabric. The hands are clenched into fists, with the fingers curled inward. The background is a solid, deep black, which makes the skin tones and the red fabric stand out. The lighting is dramatic, highlighting the texture of the skin and the folds of the fabric.

KINK & FETISHES
WHAT DOES IT LOOK LIKE?

Source: TASHRA



KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA



KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA





KINK & FETISHES
*WHAT DOES IT
LOOK LIKE?*

•Source:
<https://www.thesun.co.uk/fabulous/4692554/weird-world-furry-fetish-adults-dress-animal-costumes/>



KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA



KINK &
FETISHES
*WHAT DOES IT
LOOK LIKE?*

Source: TASHRA



KINK & FETISHES WHAT DOES IT LOOK LIKE?

Source: TASHRA

KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source:

<https://www.aliexpress.com/item/3256802590129171.html?gatewayAdapt=4itemAdapt>





KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA



KINK &
FETISHES
*WHAT DOES IT
LOOK LIKE?*

Source: TASHRA



KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA



KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA



KINK &
FETISHES
*WHAT DOES IT
LOOK LIKE?*

Source: TASHRA

KINK &
FETISHES
*WHAT DOES
IT LOOK LIKE?*

Source: TASHRA



A close-up photograph of a person's back and shoulder. Thick, braided ropes are laced across the skin. The ropes are primarily black, with a section of bright orange rope running diagonally across the upper back. The lacing is done in a crisscross pattern, creating a grid-like structure. The person's skin is fair and appears to be lying on a red surface.

KINK & FETISHES *WHAT DOES IT LOOK LIKE?*

Source: TASHRA

Debrief

Notice what came up for you

This may be worth pausing to journal and reflect on during breaks or after today's seminar

I will be happy to discuss this further if you'd like 1:1

For time, we won't be able to debrief very much...but please notice and attend

Sexual Diversity: Kink & Fetishes Resources

<https://drive.google.com/drive/folders/1U4ofCKDza6mqL7XjjacEjMhn7dAnqHAP>



Glossary

Aftercare - Emotional and physical care after a scene. Usually in reference to a top taking care of a bottom but sometimes the reverse. Aftercare often includes touching base with a play partner the next day.

Age Play - an interaction where one adult takes an older role and another adult takes a younger role

Clinical Practice Guidelines for Working with People with Kink Interests

DECEMBER 2019

Developed by the
Kink Clinical Practice
Guidelines Project
kinkguidelines.com



CORE CLINICAL COMPETENCIES
FOR WORKING WITH
KINK-INVOLVED INDIVIDUALS

Elemental Kink Readiness to Advanced Kink Proficiencies For Medical and Mental Health Providers

PUBLISHED SEPTEMBER 2021

The Alternative Sexualities Health Research Alliance –
TASHRA

Authors:

Richard Sproff, PHD

Anna Randall, DHS, MSW, MPH

Kaylie Engel, BA

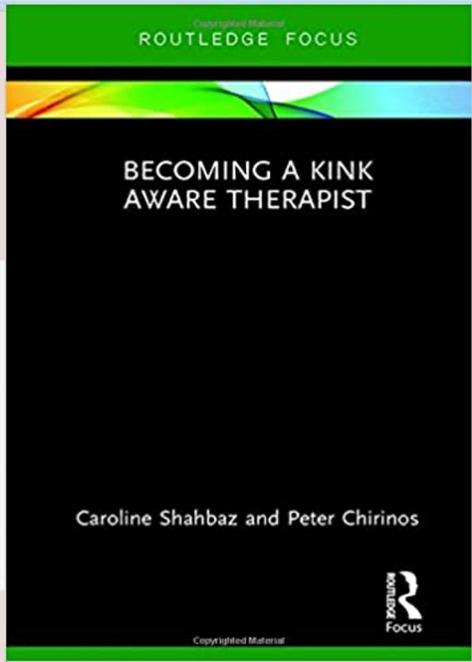
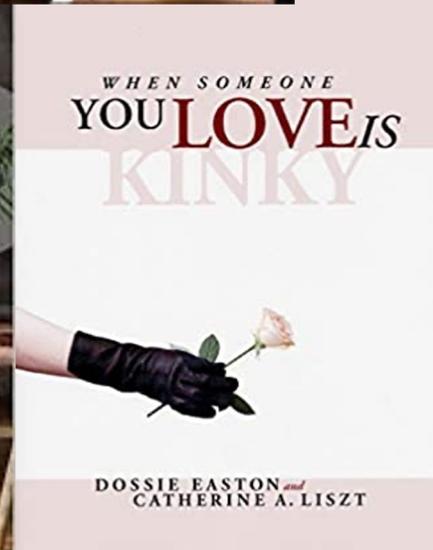
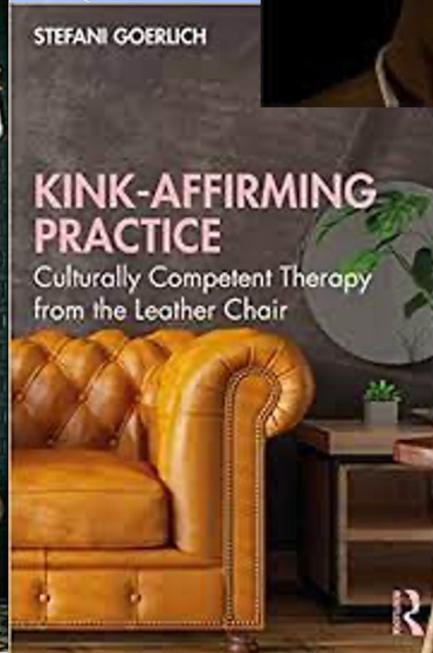
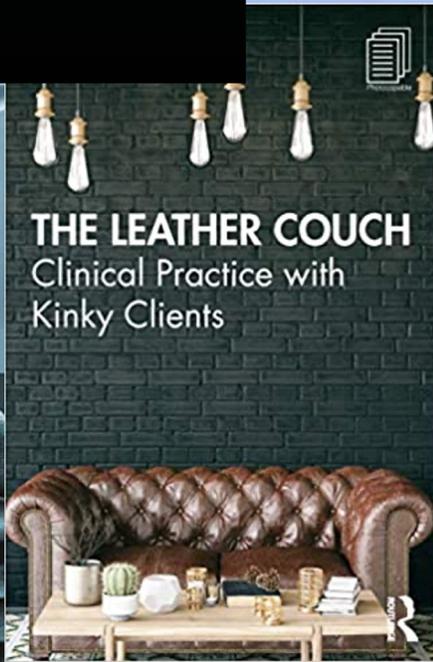
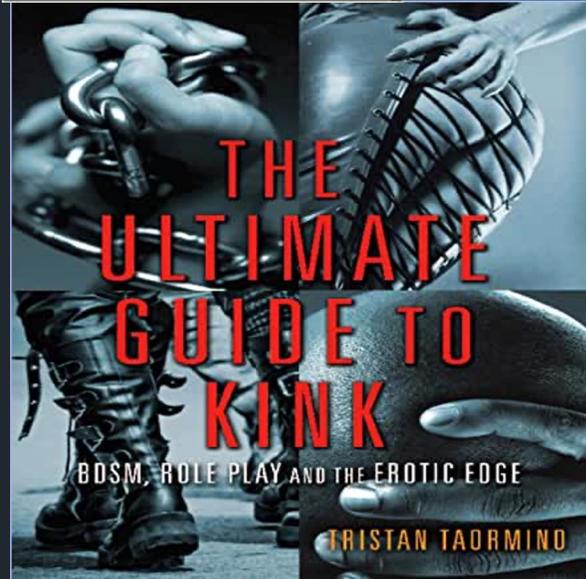
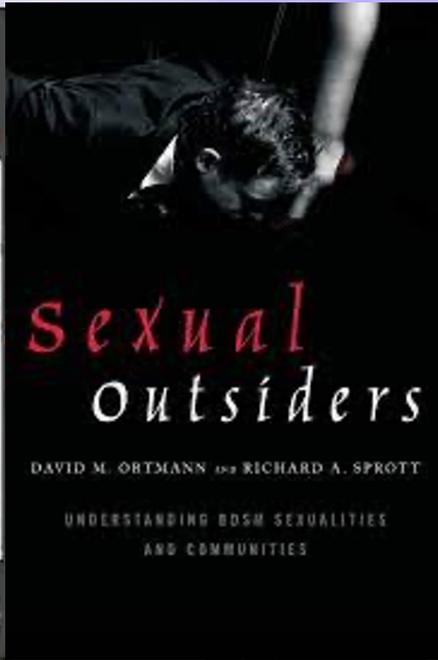
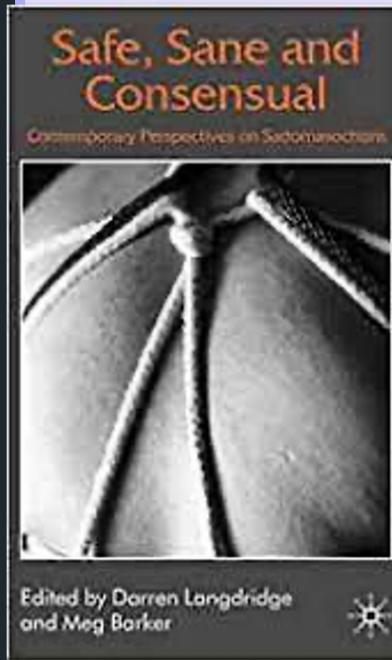
Erik Wert, DO, MPH, FACOJ, AAHIVS

Stephen Ratcliff, MA, LPCC, NCC, CST

Zita L. Nickeson, M.Ed., LMHC, LCPC, CST, CSE

Carrie Jameson, LCPC

SEXUAL DIVERSITY: KINK & FETISHES RESOURCES



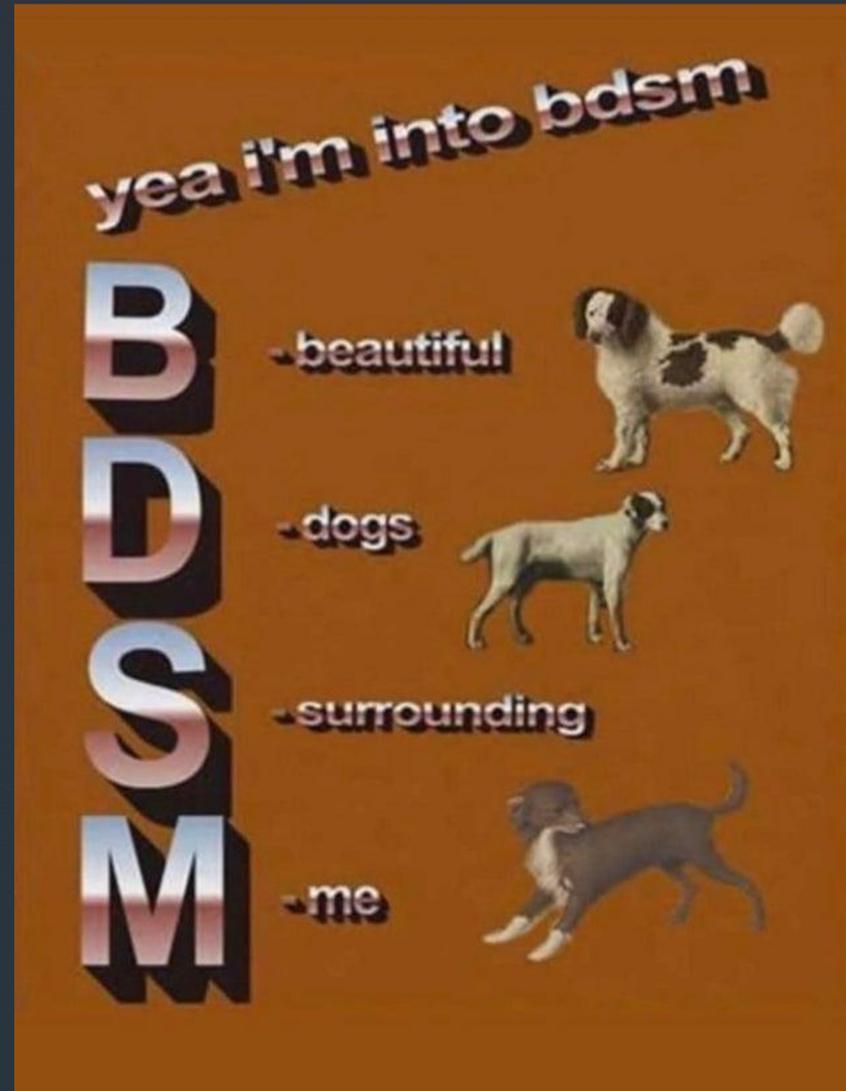
Comedy
Coping



BDSM BEARS

They don't hibernate, they dominate

Comedy Coping



RELATIONSHIP DIVERSITY

Includes Consensual Nonmonogamy, Monogamish, and other Diverse Relationship Configurations

Consensual NonMonogamy (CNM) is generally defined as the consensual agreement between partners in a relationship that they are free to have extradyadic romantic and / or sexual relationships (Conley et al, 2013b).

- Varieties include polyamory, open relationships, non defined non monogamy, multiple play partners, swinging, wife swapping, and many other categories of relationship configuration
- Does not include cheating – seen as a violation of honesty / trust in relationship

Monogamy – one sexual partner

Serial Monogamy – one sexual partner at a time

Polygamy – More than one spouse

Polygyny – More than one wife

Polyandry – More than one husband

Consensual Non-Monogamy – More than one relationship

RELATIONSHIP DIVERSITY

NCSF Definition of Culturally Competent Clinical Work with CNM Clients:

“Be aware of cultural differences and strive to recognize how consensual non-monogamy intersects with your clients’ other demographics/identities, including sexual identity and expression (including kink), gender identity and expression, race, ethnicity, nationality, socioeconomic status, religion/spirituality, ability/disability status, and age.”

National Coalition for Sexual Freedom, 2019

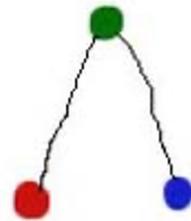
Relationship Diversity

Myths

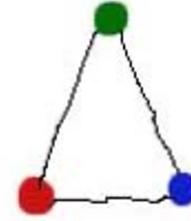
- Sex = love
- Love = sex
- Marriage = no more looking or fantasizing
- If you think about relationship betrayal / cheating, you'll act on it
- CNM is inherently unhealthy or healthy
- Monogamy is inherently unhealthy or healthy
- CNM folks don't feel jealousy
- CNM is more "natural"
- Love is limitless – love may be but time, resources, energy are not.
- Superiority Complex – "More evolved"

Relationship Diversity

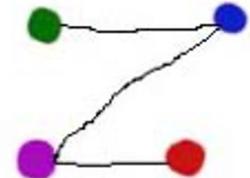
Examples of Polyamorous Relationship Configurations



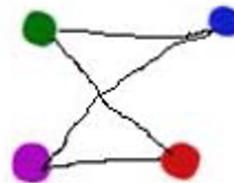
Green is involved with both Red and Blue, but Blue and Red are not involved with each other



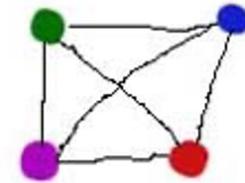
Green is involved with Red and Blue and Red and Blue are involved with each other



Green is involved with Blue, but not Purple and Red. Blue is involved with both Green and Purple, but not Red. Purple is involved with Red and Blue.



Green is involved with both Blue and Red, but not Purple. Blue is involved with both Purple and Green, but not Red.



Green is involved with Blue, Red and Purple. Everyone is involved with everyone else.

EXPOSURE EXPERIENCE # 2

1

In order to increase our awareness of our bias' (we all have them), we will next be viewing a series of photographs of kink and fetish activities.

2

While none of these photographs involve nude content, they can be evocative.

3

Take care of yourself

4

Notice what comes up. Maybe journal about it later

- Questions
- Assumptions
- Reactions

RELATIONSHIP DIVERSITY: *WHAT DOES IT LOOK LIKE?*

•Source:

<https://medium.com/polyamory-today/my-husband-and-i-just-realized-were-polyamorous-407e2bcbdc3b>





RELATIONSHIP
DIVERSITY:
*WHAT DOES IT LOOK
LIKE?*

•Source: <https://www.yourtango.com/2019328308/horoscope-five-zodiac-signs-most-likely-be-polyamorous-relationship-according-astrology>



RELATIONSHIP DIVERSITY: *WHAT DOES IT LOOK LIKE?*

Source:
<https://www.thepublicdiscourse.com/2018/03/21260/>



MARK HILL/CNN

RELATIONSHIP DIVERSITY: *WHAT DOES IT LOOK LIKE?*

Source:
<https://www.cnn.com/2020/01/28/health/polyamorous-relationship-meaning-wellness/index.html>



RELATIONSHIP DIVERSITY: *WHAT DOES IT LOOK LIKE?*

Source:

<https://www.elle.com/uk/life-and-culture/culture/a33010954/polyamorous/>



RELATIONSHIP DIVERSITY: *WHAT DOES IT LOOK LIKE?*

•Source:

•<https://bthomaswriter.wordpress.com/2018/07/02/5322/>

L-R: Louis, Sam and David with their dog, Brusky





RELATIONSHIP DIVERSITY: *WHAT DOES IT LOOK LIKE?*

•Source:

•<https://medium.com/polyamory-today/i-used-to-be-a-polyamory-bigot-7f21cfe1c53f>

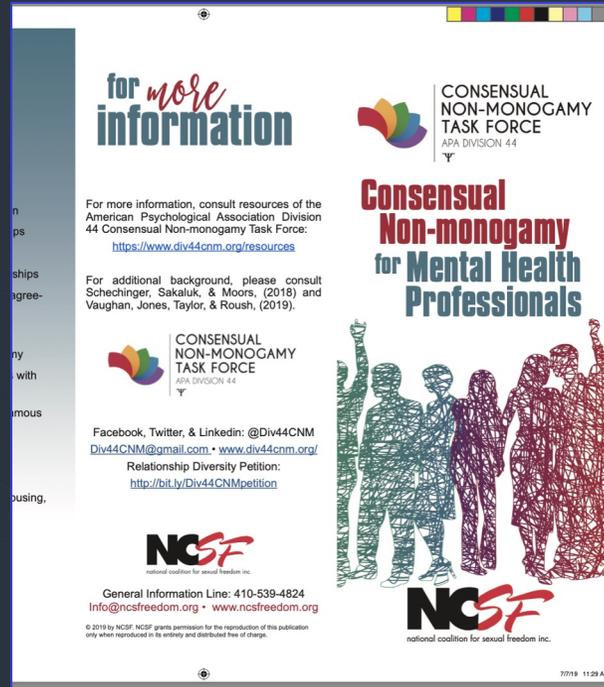
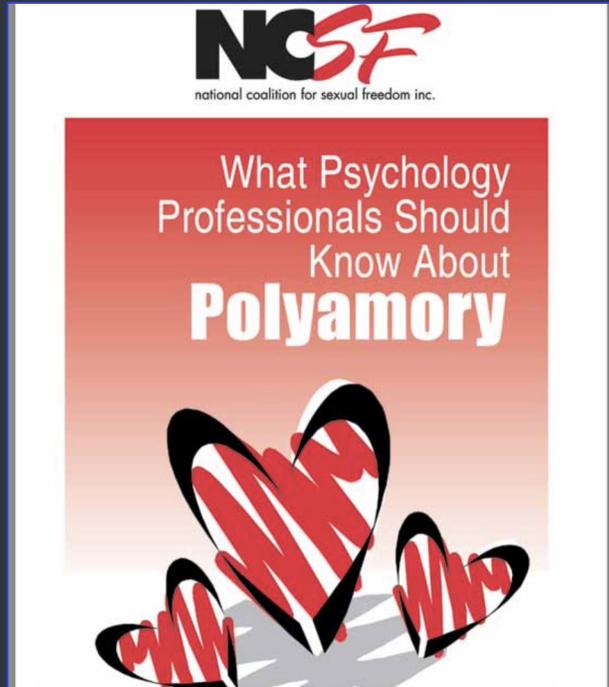
Debrief

Notice what came up for you

This may be worth pausing to journal and reflect on during breaks or after today's seminar

I will be happy to discuss this further if you'd like 1:1

For time, we won't be able to debrief very much...but please notice and attend



Polyamory Glossary

relationship, any activity that violates the rules or agreements of that relationship. In a [polyamorous](#) or [swinging](#) relationship, sexual activity with others may or may not be seen as cheating, depending on the context of that relationship and the agreements of the people in that relationship. Even in such a relationship, sexual activity without the knowledge and explicit consent of the other members of the relationship may be viewed as cheating.

E: Any [marriages](#) where there is no emotional intimacy or sexuality of the partners. **Commentary:** This is the most common form of marriage.

Feeling of joy when a partner invests in and takes pleasure from another person. **Commentary:** Compersion can be thought of as the opposite of "jealousy."

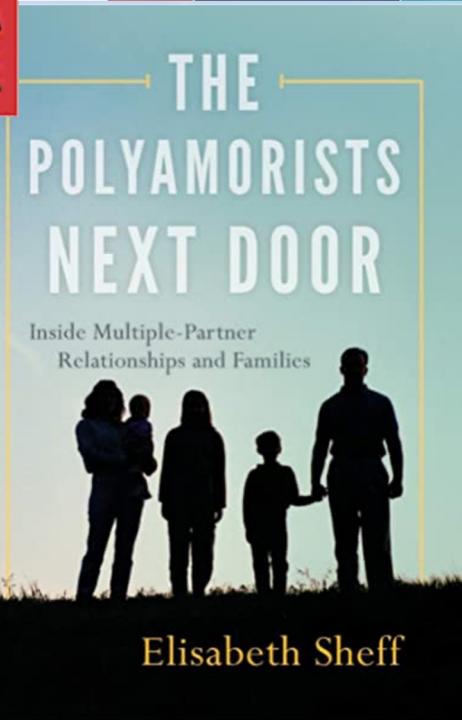
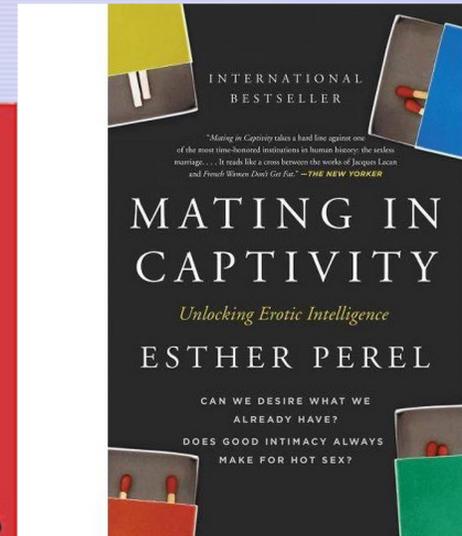
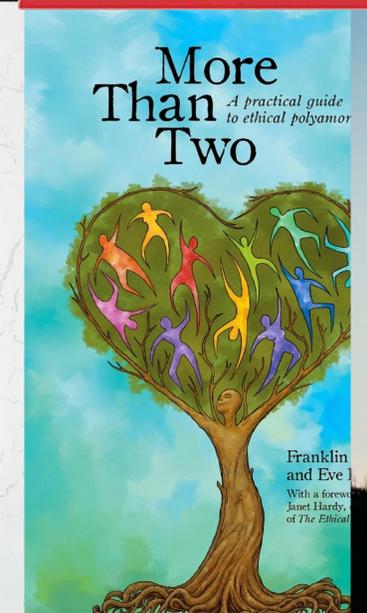
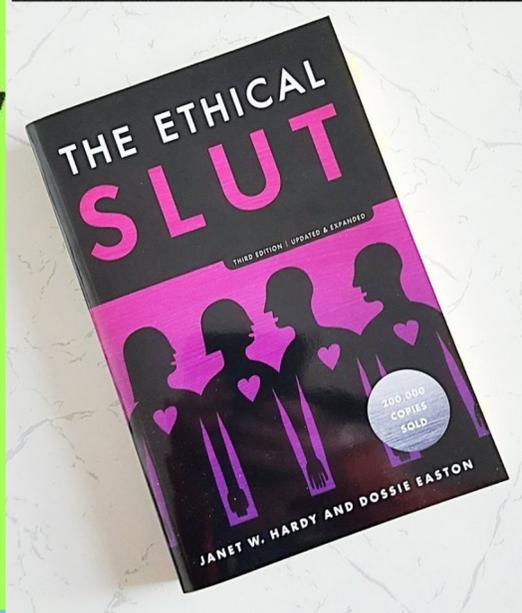
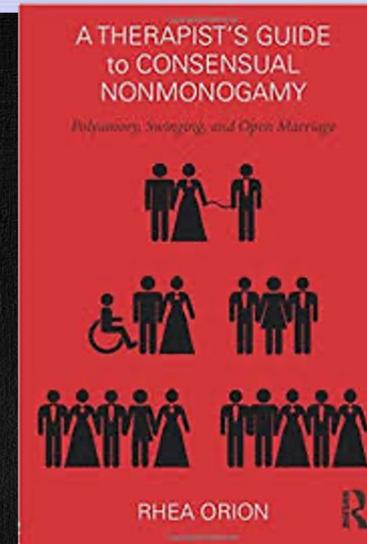
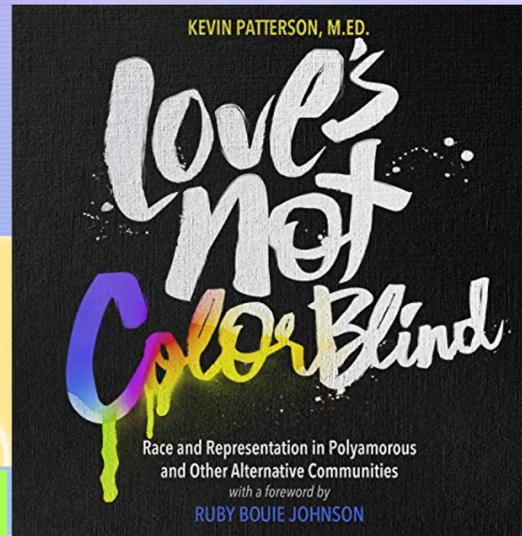
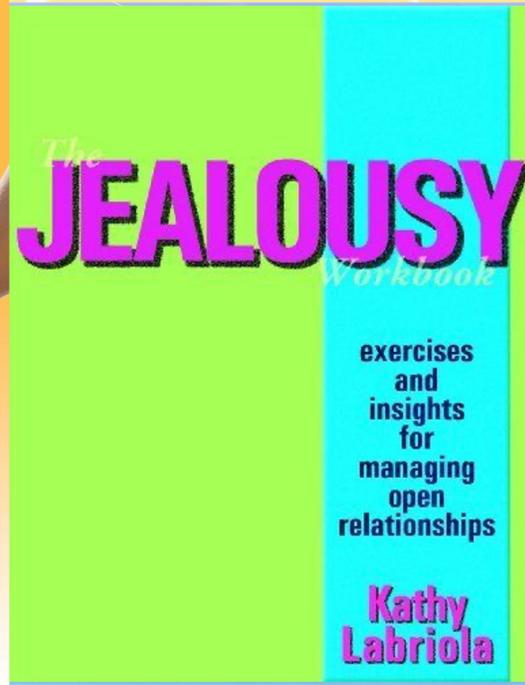
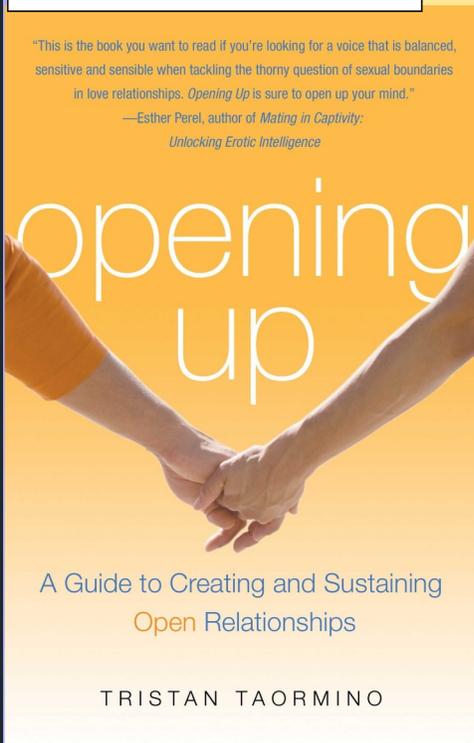
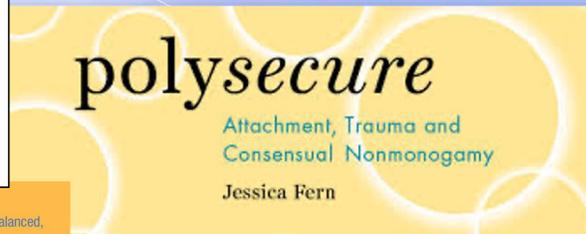
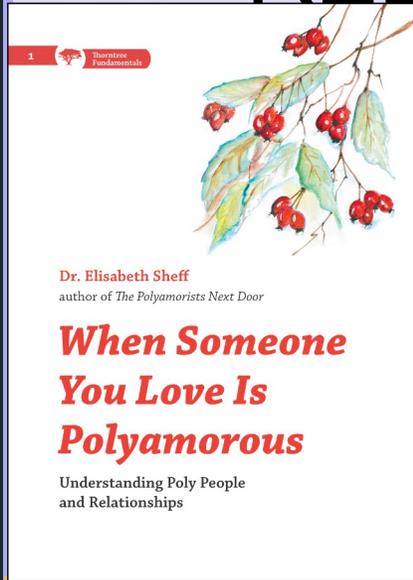
ACT/ COMPACT/ COMMITMENT: A formal agreement within a relationship that allows and barrier-free sexual contact to the people in that relationship and is often used to protect against sexually transmitted diseases.

Demisexuality: A sexual orientation in which someone feels sexual attraction only to a person with whom they have a personal bond. Many demisexuals are only attracted to a handful of people. Many demisexuals are also uninterested in sex.

Relationship diversity Resources

<https://drive.google.com/drive/folders/1U4ofCKDza6mqL7XjjacEjMhn7dAnqHAP>

RELATIONSHIP DIVERSITY RESOURCES



summary

Cultural Competence is an Ethical Imperative for Providers

It involves

- Knowledge
- Awareness and Beliefs
- Skills

It is a lifelong learning journal best exercised through cultural humility frameworks

We have specifically discussed some awareness of personal bias and knowledge about

- Sexual Diversity
 - Asexuality
 - Kink
 - Fetishes
- Relationship Diversity

Resources

Scan this QR Code to go to the google drive with resources that you can download for free

https://drive.google.com/drive/folders/14ZS6At_3CCMtEeBmlc2IHy6HWISgqe3I?usp=sharing

Contact for Steve

▪ steve@liberatedcounseling.com

▪ www.liberatedcounseling.com

▪ 505-504-5449



SCAN ME

REFERENCES: GENERAL

GSRD

- Barker, M. J. (2017). *Gender, sexual, and relationship diversity (GSRD)*. British Association for Counselling and Psychotherapy.
- Davies, D., & Barker, M. J. (2015). How gender and sexually diverse-friendly is your therapy training?. *The Psychotherapist*, 61, 8-10.
- Richards, C., Gibson, S, Jamieson, R., Lenihan, P., Rimes, K., & Semlyen, J. (2019). *Guidelines for psychologists working with gender, sexuality and relationship diversity*. BPS. (n.d.). Retrieved June 23, 2022, from <https://www.bps.org.uk/news-and-policy/guidelines-psychologists-working-gender-sexuality-and-relationship-diversity>

References: Kink & Fetishes

- Barker, M., Gupta, C., & Iantaffi, A. (2007). The power of play: The potentials and pitfalls in healing narratives of BDSM.
- Beach, M. C., Price, E. G., Gary, T. L., Robinson, K. A., Gozu, A., Palacio, A., Smarth, C., Jenckes, M.W., Feuerstein, C., Bass, E.B., Powe, N.R., & Cooper, L. A. (2005). Cultural competency: A systematic review of health care provider educational interventions. *Medical care*, 43(4), 356. [10.1097/01.mlr.0000156861.58905.96](https://doi.org/10.1097/01.mlr.0000156861.58905.96)
- Beebe, S., Payne, N., Posid, T., Diab, D., Horning, P., Scimeca, A., & Jenkins, L. C. (2021). The Lack of Sexual Health Education in Medical Training Leaves Students and Residents Feeling Unprepared. *The Journal of Sexual Medicine*. <https://doi.org/10.1016/j.jsxm.2021.09.011>
- Buchanan, N. T., Rios, D., & Case, K. A. (2020). Intersectional cultural humility: Aligning critical inquiry with critical praxis in psychology. *Women & Therapy*, 43(3-4), 235-243. <https://doi.org/10.1080/02703149.2020.1729469>
- Butler, M., McCreedy, E., Schwer, N., Burgess, D., Call, K., Przedworski, J., Rosser, S., Larson, S., Allen, M., Fu, S., & Kane, R. L. (2016). Improving cultural competence to reduce health disparities. Rockville (MD): Agency for Healthcare Research and Quality (US); 2016 Mar. Report No.: 16-EHC006-EF. PMID: 27148614.
- Cascalheira, C. J., Ijebor, E. E., Salkowitz, Y., Hitter, T. L., & Boyce, A. (2021). Curative kink: survivors of early abuse transform trauma through BDSM. *Sexual and Relationship Therapy*, 1-31. <https://doi.org/10.1080/14681994.2021.1937599>
- Culture. 2021. In *Merriam-Webster.com*. Retrieved August 25, 2021, from <https://www.merriam-webster.com/dictionary/culture>
- Donaghue, C. (2015). *Sex outside the lines: Authentic sexuality in a sexually dysfunctional culture*. Dallas, TX: Benbella Books.
- Easton, D. (2007). Shadowplay: S/M journeys to our selves. In D. Langdrige & M. Barker (Eds.) *Safe, sane and consensual: Contemporary perspectives on sadomasochism*. (pp. 217–228). Basingstoke: Palgrave Macmillan.
- Hays, P. A. (2008). *Addressing cultural complexities in practice: Assessment, diagnosis, and therapy* (pp. vii-275). Washington, DC: American Psychological Association.
- Henkin, W. A. (2007). Some beneficial aspects of exploring personas and role play in the BDSM context. In Langdrige, D. & Barker, M. (Eds.), *Safe, sane and consensual: contemporary perspectives on sadomasochism*. London: Palgrave Macmillan.
- Hoff, G., & Sprott, R. A. (2009). Therapy experiences of clients with BDSM sexualities: Listening to a stigmatized sexuality. *Electronic Journal of Human Sexuality*, 12(9), 30.
- Hook, J. N., Davis, D. E., Owen, J., Worthington Jr., E. L., & Utsey, S. O. (2013). Cultural humility: Measuring openness to culturally diverse clients. *Journal of Counseling Psychology*. doi:10.1037/a0032595
- Kink Clinical Practice Guidelines Project. (2019). *Clinical Practice Guidelines for Working with People with Kink Interests*. Retrieved from <https://www.kinkguidelines.com>

References: Kink & Fetishes

- Kolmes, K., Stock, W., & Moser, C. (2006). Investigating bias in psychotherapy with BDSM clients. *Journal of homosexuality*, 50(2-3), 301-324. https://doi.org/10.1300/J082v50n02_15
- Kolmes, K., & Witherspoon, R. G. (2012). Sexual orientation microaggressions in everyday life: expanding our conversations about sexual diversity: part I. *Bull Psychol in Independent Pract*, 96.Lantto, R., & Lundberg, T. (2021). (Un) desirable approaches in therapy with Swedish individuals practicing BDSM: client's perspectives and recommendations for affirmative clinical practices. *Psychology & Sexuality*, (just-accepted).<https://doi.org/10.1080/19419899.2021.1918230>
- Lekas, H. M., Pahl, K., & Fuller Lewis, C. (2020). Rethinking Cultural Competence: Shifting to Cultural Humility. *Health Services Insights*, 13, 1178632920970580. <https://doi.org/10.1177/1178632920970580>
- Lindemann, D. (2011). BDSM as therapy?. *Sexualities*, 14(2), 151-172. <https://doi.org/10.1177/1363460711399038>
- Moser, C. (2016). DSM-5 and the paraphilic disorders: Conceptual issues. *Archives of Sexual Behavior*, 45(8), 2181-2186. <https://doi.org/10.1007/s10508-016-0861-9>
- Moser, C. (2018). Paraphilias and the ICD-11: Progress but still logically inconsistent. *Archives of Sexual Behavior*, 47(4), 825-826. <https://doi.org/10.1007/s10508-017-1141-z>
- Moser, C., Jacobs, L., Sprott, R., Johnson, R., Randall, A., Manduley, A., Thomas, S., Jameson, C., Berkey, B., Shahbaz, C., Wright, S., Francis, S., Williams, D.J., Chirinos, P., Prior, E., Kleinplatz, P., Michels, L., Levine-Ward, A., Nichols, M., Grant, P., & Strambaugh, R. (2019) Clinical Practice Guidelines for Working with People with Kink Interests. Retrieved from <https://www.kinkguidelines.com/the-guidelines>
- Nanda, S., & Warms, R. L. (2019). *Cultural anthropology*. SAGE Publications.
- Newmahr, S. (2010). Rethinking kink: Sadoomasochism as serious leisure. *Qualitative Sociology*, 33(3), 313-331. <https://doi.org/10.1007/s11133-010-9158-9>
- Silva, A. D. (2015). Through pain, more gain? A survey into the psychosocial benefits of sadoomasochism (Master's thesis).Retrieved from <https://www.duo.uio.no/handle/10852/48652>
- Sprott, R.A., Vivid, J., Vilkin, E., Swallow, L., Lev, E.M., Orejudos, J. and Schnittman, D. (2020). A queer boundary: How sex and BDSM interact for people who identify as kinky. *Sexualities*. Advance online publication. doi: 10.1177/1363460720944594.
- Sprott, R., & Randall, A. (2017). Health disparities among kinky sex practitioners. *Current Sexual Health Reports*, 9(3), 104-108. <https://doi.org/10.1007/s11930-017-0113-6>
- Sprott, R. A., Randall, A., Davison, K., Cannon, N., & Witherspoon, R. G. (2017). Alternative or nontraditional sexualities and therapy: A case report. *Journal of clinical psychology*, 73(8), 929-937. [10.1002/jclp.22511](https://doi.org/10.1002/jclp.22511)
- Sprott, R. A., Randall, A., Smith, K., Cranstoun, L., & Woo, L. (2021). *Health Outcomes in Kink-Identified Individuals: A Descriptive Study*. Manuscript in preparation.

References: Kink & Fetishes

- Tervalon, M., & Murray-Garcia, J. (1998). Cultural humility versus cultural competence: A critical distinction in defining physician training outcomes in multicultural education. *Journal of health care for the poor and underserved*, 9(2), 117-125. [10.1353/hpu.2010.0233](https://doi.org/10.1353/hpu.2010.0233)
- Thomas, J. N. (2020). BDSM as trauma play: An autoethnographic investigation. *Sexualities*, 23(5-6), 917-933. <https://doi.org/10.1177/1363460719861800>
- Tormala, T. T., Patel, S. G., Soukup, E. E., & Clarke, A. V. (2018). Developing measurable cultural competence and cultural humility: An application of the cultural formulation. *Training and Education in Professional Psychology*, 12(1), 54. <https://doi.org/10.1037/tep0000183>
- Vilkin, E., and Sprott, R. A. (in press). Consensual non-monogamy among kink-identified adults: Characteristics, relationship experiences, and unique motivations for polyamory and open relationships. *Archives of Sexual Behavior*.
- Waldura, J. F., Arora, I., Randall, A. M., Farala, J. P., & Sprott, R. A. (2016). Fifty shades of stigma: Exploring the health care experiences of kink-oriented patients. *The journal of sexual medicine*, 13(12), 1918-1929. [10.1016/j.jsxm.2016.09.019](https://doi.org/10.1016/j.jsxm.2016.09.019)
- Weinberg, T. S. (2006). Sodomasochism and the social sciences: A review of the sociological and social psychological literature. *Journal of Homosexuality*, 50(2-3), 17-40. https://doi.org/10.1300/J082v50n02_02
- WHO (2006). Defining sexual health: Report of a technical consultation on sexual health, 28–31 January 2002. Geneva, World Health Organization.
- *What does "sex positive" mean?* ISSM. (2018, September 21). <https://www.issm.info/sexual-health-qa/what-does-sex-positive-mean/>.
- Williams, D. J., Thomas, J. N., Prior, E. E., & Walters, W. (2015). Introducing a multidisciplinary framework of positive sexuality. *Journal of Positive Sexuality*, 1(1), 6-11.
- Williams, D. J., Christensen, M. C., & Capous-Desyllas, M. (2016). Social work practice and sexuality: Applying a positive sexuality model to enhance diversity and resolve problems. *Families in Society*, 97(4), 287-294. <https://doi.org/10.1606/1044-3894.2016.97.35>

References: CNM

References

- American Association for Marriage and Family Therapy. (2015). *AAMFT code of ethics*. Author.
- American Counseling Association (ACA). (2014). *2014 ACA code of ethics*. Author.
- American Counseling Association (ACA). (2009). *ALGBTIC Competencies for counseling LGBTQIA*. Author.
- American Psychological Association. (2019). *Assessing Relationship Structure on Demographic Forms*. Author.
- American Psychological Association. (2017). *Ethical principles of psychologists and code of conduct*. Author.
- Anderson, K. N., Bautista, C. L., & Hope, D. A. (2019). Therapeutic alliance, cultural competence and minority status in premature termination of psychotherapy. *American Journal of Orthopsychiatry*, 89(1), 104. <https://psycnet.apa.org/doi/10.1037/ort0000342>
- Ault-Brutus, A. A. (2012). Changes in racial-ethnic disparities in use and adequacy of mental health care in the United States, 1990–2003. *Psychiatric Services*, 63(6), 531–540. <https://doi.org/10.1176/appi.ps.201000397>
- Barker, M., & Langdrige, D. (2010). Whatever happened to non-monogamies? Critical reflections on recent research and theory. *Sexualities*, 13, 749–772. <https://doi.org/10.1177%2F1363460710384645>
- Beach, M. C., Price, E. G., Gary, T. L., Robinson, K. A., Gozu, A., Palacio, A., Smarth, C., Jenckes, M. W., Feuerstein, C., Bass, E. B., Powe, N. R., & Cooper, L. A. (2005). Cultural competency: A systematic review of health care provider educational interventions. *Medical care*, 43(4), 356. [10.1097/01.mlr.0000156861.58905.96](https://doi.org/10.1097/01.mlr.0000156861.58905.96)
- Beach, M. C., Saha, S., & Cooper, L. A. (2006). The role and relationship of cultural competence and patient-centeredness in health care quality (Vol. 36). New York, NY: Commonwealth Fund.
- Blaney, A. D., & Sinclair, H. C. (2013). Defining concepts and new directions: a commentary on the fewer the merrier: assessing stigma surrounding nonnormative romantic relationships. *Analyses of Social Issues and Public Policy*, 13, 38–41. <https://doi.org/10.1111/asap.12000>
- Butler, M., McCreedy, E., Schwer, N., Burgess, D., Call, K., Przedworski, J., Rosser, S., Larson, S., Allen, M., Fu, S., & Kane, R. L. (2014). Improving cultural competence to reduce health disparities. Rockville (MD): Agency for Healthcare Research and Quality (US); 2016 Mar. Report No.: 16-EHC006-EF. PMID: 27148614.
- Chang, D. F., & Berk, A. (2009). Making cross-racial therapy work: A phenomenological study of clients' experiences of cross-racial therapy. *Journal of counseling psychology*, 56(4), 521. <https://psycnet.apa.org/doi/10.1037/a0016905>
- CNA & Healthcare Providers Service Organization. (2014). *Understanding Counselor Liability Risk*. Healthcare Providers Service Organization. <http://www.hpso.com/>
- Conley, T. D., Moors, A. C., Matsick, J. L., & Ziegler, A. (2013a). The fewer the merrier?: Assessing stigma surrounding consensually non-monogamous romantic relationships. *Analyses of Social Issues and Public Policy*, 13, 1–30. <https://doi.org/10.1111/j.1530-2415.2012.01286.x>
- Conley, T. D., Ziegler, A., Moors, A. C., Matsick, J. L., & Valentine, B. (2013b). A critical examination of popular assumptions about the benefits and outcomes of monogamous relationships. *Personality and Social Psychology Review*, 17, 124–141. <https://doi.org/10.1177/1088868312467087>
- Cox D. W., Fleckenstein J., & Bergstrand, C.R. (2013). What do polys want? An overview of the 2012 Loving More survey. *Loving More Magazine*.
- Deckha, M. (2011). Pain as culture: A postcolonial feminist approach to S/M and women's agency. *Sexualities*, 14(2), 129–150. <https://doi.org/10.1177%2F1363460711399032>
- Dimidjian, S., & Hollon, S. D. (2010). How would we know if psychotherapy were harmful?. *American Psychologist*, 65(1), 21. <https://psycnet.apa.org/doi/10.1037/a0017299>
- Dryden, J. B. (2015). This is the family I chose: broadening domestic partnership law to include polyamory. *Hamline University's School of Law's Journal of Public Law and Policy*, 36, 162–188.
- Easton, D. & Hardy, J. (2009). *A guide to polyamory, open Relationships, and other adventures*. Random House.
- Friederichsen, R. M. (2017). *Culturally-competent counselling with consensually non-monogamous clients: a narrative inquiry* (Doctoral dissertation, University of British Columbia).

References: CNM

- Hauptert, M. L., Gesselman, A. N., Moors, A. C., Fisher, H. E., & Garcia, J. R. (2017). Prevalence of experiences with consensual nonmonogamous relationships: Findings from two national samples of single Americans. *Journal of Sex and Marital Therapy*, 43(5), 424-440. <https://doi.org/10.1080/0092623X.2016.1178675>
- Hermann, M. A., & Herlihy, B. R. (2006). Legal and ethical implications of refusing to counsel homosexual clients. *Journal of Counseling & Development*, 84(4), 414-418. <https://doi.org/10.1002/j.1556-6678.2006.tb00425.x>
- Huey, S. J. Jr., Tilley, J. L., Jones, E. O., & Smith, C. A. (2014). The contribution of cultural competence to evidence-based care for ethnically diverse populations. *Annual Review of Clinical Psychology*, 10, 305-338. <https://doi.org/10.1146/annurev-clinpsy-032813-153729>
- Hyde, J. S. & De Lamater, J. D. (2000) Understanding human sexuality (7th Ed.). McGraw-Hill.
- Jani, J. S., Ortiz, L., & Aranda, M. P. (2009). Latino outcome studies in social work: A review of the literature. *Research on Social Work Practice*, 19(2), 179-194. <https://doi.org/10.1177%2F1049731508315974>
- Jenks, R. J. (1985). Swinging: A replication and test of a theory. *The Journal of Sex Research*, 21, 199-205. <https://doi.org/10.1080/00224498509551258>
- Johnson, R. B. (2021, April 7). *Cultural Humility: In Practice with Consensually Nonmonogamous Clients* [Clinical Presentation]. Sexual Health Alliance. CNM Clinical Training.
- Kimberly, C., Hans, J. D. (2015). From fantasy to reality: A grounded theory of experiences in the swinging lifestyle. *Archives of Sexual Behavior*, 1, 1-11. <https://doi.org/10.1007/s10508-015-0621-2>
- Kleiman, D. G. (1977). Monogamy in mammals. *Quarterly Review of Biology*, 52, 39-69.
- Klesse, C. (2006). Polyamory and its 'others': Contesting the terms of non-monogamy. *Sexualities*, 9, 565-583. <https://doi.org/10.1177/1363460706069986>
- Kumpfer, K. L., Alvarado, R., Smith, P., & Bellamy, N. (2002). Cultural sensitivity and adaptation in family-based prevention interventions. *Prevention Science*, 3(3), 241-246. <https://doi.org/10.1023/a:1019902902119>
- Laumann, E. O., Gagnon, J. H., Michael, R. T., & Michaels, S. (1994). *The social organization of sexuality: Sexual practices in the United States*. University of Chicago Press.
- Lilienfeld, S. O. (2007). Psychological treatments that cause harm. *Perspectives on psychological science*, 2(1), 53-70. <https://doi.org/10.1111%2Fj.1745-6916.2007.00029.x>
- Matsick, J. L., Conley, T. D., Ziegler, A., Moors, A. C., & Rubin, J. D. (2014). Love and sex: polyamorous relationships are perceived more favorably than swinging and open relationships. *Psychology & Sexuality*, 5, 339-348. <https://doi.org/10.1080/19419899.2013.832934>
- Manley, M. H., Diamond, L. M., & Anders, S. M. V. (2015). Polyamory, monoamory, and sexual fluidity: A longitudinal study of identity and sexual trajectories. *Psychology of Sexual Orientation and Gender Diversity*, 2(2), 168-180. <https://doi.org/10.1037/sgd0000098>
- Meyer, I. H. (2003). Prejudice, social stress, and mental health in lesbian, gay, and bisexual populations: conceptual issues and research evidence. *Psychological bulletin*, 129(5), 674. <https://dx.doi.org/10.1037%2F0033-2909.129.5.674>
- Moors, A. C., Matsick, J. L., Ziegler, A., Rubin, J., & Conley, T. D. (2013). Stigma toward individuals engaged in consensual non-monogamy: Robust and worthy of additional research. *Analyses of Social Issues and Public Policy*, 13, 52-69. <https://doi.org/10.1111/asap.12020>
- Muzacz, A. & Horsey, K. (2017). *When three's not a crowd: Consensual multiple-partner relationships*. American Counseling Association, San Francisco, CA, USA. <https://www.counseling.org/docs/default-source/2017-conference/programguide2017>
- National Association of Social Workers. (2017). *NASW code of ethics*. Author.
- National Coalition for Sexual Freedom. (2019). *Consensual nonmonogamy for mental health providers brochure*. Author.
- NAADAC, the Association for Addiction Professionals. (2016). *NAADAC / NCC AP code of ethics*. Author.
- Nearing, R. (2000). *Polyamory demography—the "Loving More Magazine" study*. The Kinsey Institute.
- Neville, H. A., Awad, G. H., Brooks, J. E., Flores, M. P., & Bluemel, J. (2013). Color-blind racial ideology: Theory, training, and measurement implications in psychology. *American Psychologist*, 68(6), 455. <https://psycnet.apa.org/doi/10.1037/a0033282>

References: CNM

- Pieper, M., & Bauer, R. (2005). Polyamory und Mono-Normativität: Ergebnisse einer empirischen Studie über nicht-monogame Lebensformen. In L. Méritt, T. Bührmann, & N. B. Schefzig (Eds.), *Mehr als eine Liebe: Polyamouröse Beziehungen* (pp. 59–70).
- Pieper, M., & Bauer, R. (2006). *Polyamory and mono-normativity: Results of an empirical study of nonmonogamous patterns of intimacy*. Unpublished manuscript. Hamburg, Germany: Research Center for Feminist, Gender, and Queer Studies, University of Hamburg.
- Rubel, A. N. & Bogaert, A. F. (2015). Consensual nonmonogamy: Psychological well-being and relationship quality correlates. *Journal of Sex Research*, 52(9), 961-982. <https://doi.org/10.1080/00224499.2014.942722>
- Rubin, J. D., Moors, A. C., Matsick, J. L., Ziegler, A., & Conley, T. D. (2014). On the margins: considering diversity among consensually non-monogamous relationships. *Journal für Psychologie*, 22, 1–17.
- Schawartz, J. & Jacobs, A. (2019). *Cultural competency with consensually non-monogamous clients*. Transforming Care Conference. Columbus, Ohio, USA. <https://equitashealthinstitute.com/conferences/2019tc>
- Schoser, S. & Addison, S. (2016). *Cultural competence with consensually non-monogamous relationships: Beyond the dyad*. American Counseling Association, Montreal, QC, Canada. <https://aca.digitellinc.com/aca/live/1/page/1>
- Schechinger, H. A., Sakaluk, J. K., & Moors, A. C. (2018). Harmful and helpful therapy practices with consensually non-monogamous clients: Toward an inclusive framework. *Journal of consulting and clinical psychology*, 86(11), 879. <https://psycnet.apa.org/doi/10.1037/ccp0000349>
- Sheff, E. (2013). *The polyamorists next door: Inside multiple partner relationships and families*. Rowman and Littlefield.
- Sizemore, K. M. & Olmstead, S. B. (2017). Testing the validity and factor structure of the willingness to engage in consensual non-monogamy scale among college men and women. *Sex Research and Social Policy*, 14, 182-191. <https://doi.org/10.1007/s13178-016-0263-8>
- Sue, S., Zane, N., Nagayama Hall, G. C., & Berger, L. K. (2009). The case for cultural competency in psychotherapeutic interventions. *Annual review of psychology*, 60, 525-548. <https://doi.org/10.1146/annurev.psych.60.110707.163651>
- Taormino T. (2008). *Opening up: A guide to creating and sustaining open relationships*. Cleis Press.
- U.S. Department of Justice. (2020, October 28). *Laws and Policies*. Hate Crimes. <https://www.justice.gov/hatecrimes/laws-and-policies>
- U.S. Surgeon General. (2001). *Mental health: Culture, race, and ethnicity. A supplement to Mental health—A report of the Surgeon General*. Rockville, MD: U.S. Department of Health and Human Services.
- Vaughan, M. D., Jones, P., Taylor, B. A., & Roush, J. (2019). Healthcare experiences and needs of consensually non-monogamous people: results from a focus group study. *The Journal of Sexual Medicine*, 16(1), 42-51. <https://doi.org/10.1016/j.jsxm.2018.11.006>
- Veaux F. (2011, June 18). Care and feeding of polyamorous secondary relationships. Retrieved from <https://www.morethantwo.com/primarysecondary.html>
- Veaux, F. & Rickert, E. (2014). *More than two: A practical guide to ethical polyamory*. Thorntree Press.
- Weitzman, G., Davidson, J., & Philips, R.A. (2014). *What psychology professionals should know about polyamory*. Ed.s J.R. Fleckenstein & C. Morotti-Meeker. National Coalition for Sexual Freedom.
- Weisner, T. S., & Hay, M. C. (2015). Practice to research: Integrating evidence-based practices with culture and context. *Transcultural Psychiatry*, 52(2), 222–243. <https://doi.org/10.1177%2F1363461514557066>
- Witherspoon, R. G. (2018). *Exploring Polyamorous Resilience and Strength Factors: A Structural Equation Modeling Approach* (Doctoral dissertation, Alliant International University).
- Wheeler, A. M., & Bertram, B. (2019). *The counselor and the law: A guide to legal and ethical practice* (8th ed.). John Wiley & Sons.
- Witherspoon, R. (2021, February 20). *Case conference on applying systems theory to polycules*. CARAS Continuing Education Seminar.