

**Boundaries in psychotherapy: Ethical and clinical explorations.  
Ofer Zur.**

**American Psychological Association ([www.apa.org](http://www.apa.org)). 2007, 267 pp., \$59.95 (\$49.95 members) (hardcover).**

This is a good book at the right time. I gather that Dr. Zur has been viewed as somewhat controversial in the past, at least by some people, but this book is published by the APA Press which is likely to assess publishing risks carefully. Especially from a risk management perspective, therapeutic boundaries are among the most important aspects of therapeutic practice. It is good to see the topic addressed in such a comprehensive and thoughtful manner.

The book consists of four parts. Part one is entitled, "Boundaries in context" and includes four chapters discussing dual (i.e. multiple) relationships, power and boundaries, therapeutic contexts, and a decision-making process for boundary crossings. Dr. Zur makes a clear distinction between boundary crossings (which are often unavoidable and sometimes therapeutic) and boundary violations (which are to be avoided, usually unethical and sometimes illegal). Examples of the former include mandated dual relations in the military and prisons, occasional therapeutic touch, encountering clients in recreational settings, and clinically driven self-disclosure. Examples of the latter include exploitive activities with clients (the most obvious of which is sexual relations), as well as accepting or soliciting or exchanging major gifts. What I found especially helpful in this section was the chapter on contexts of therapy that can guide the therapist in deciding when and under what conditions to cross boundaries. These contexts are: differences among clients, different therapeutic settings, and differences among therapies and therapists. Boundary crossings that might be appropriate with one client may not be appropriate with another. Likewise the therapy setting (e.g. solo practice, hospital setting, large city or small town) may dictate the appropriate boundary crossings. Different types of therapies (e.g. behavior therapy or psychoanalytic) may accept different boundary crossings. Certain therapist factors (age, gender, etc.) may call for different crossings. What crossings may be appropriate for same-sex therapist-client pairs may not be acceptable for opposite-sex pairs. There is also an excellent chapter on a decision-making process to aid clinicians in deciding appropriate boundary crossings.

Part two is entitled "Boundaries around the therapeutic encounter" and includes chapters on managing time and fees, pros and cons of the home office, types of therapy settings, and telehealth or distance therapy. The latter is a new area of practice particularly fraught with ethical and possibly legal minefields and this discussion is among the best I've read.

Part three is entitled, "Boundaries within the therapeutic encounter" and includes such sensitive topics as therapist self-disclosure, physical touch in therapy, gift-giving and receiving, and even therapist clothing, physical distance from clients, and speech and silence. Part four is a summary chapter. There are two appendices; one providing examples of boundary crossings and violations for a variety of situations and the other reprinting the ethics codes' principles on boundaries. Each chapter has a case example at the end.

A conservative risk management approach would essentially say, "Don't" to both boundary violations and boundary crossings. For example, some agencies may have a "no gifts" policy. Therapists and agencies both may proscribe any touch of any kind other than a handshake, any therapeutic contact outside the office, barter of any kind under any conditions,

therapist self-disclosure of any kind, no home office, and so on. This is the psychotherapeutic equivalent of practicing defensive medicine. While it is certainly likely to minimize risk (although not eliminate it), it may also lead to a rigid, sterile and stultifying practice, in which the therapist is always on guard. Likewise I've heard some psychologists say, "keep records of all conversations with clients and students; you never know when a problem might develop later." Apart from the sheer labor of doing so (we cannot spend half our lives documenting the other half), the psychic wear and the corrosion of basic trust is likely to be significant. As Dr. Zur says, no human activity or interaction is without some risk and we cannot live our lives in a perpetual state of hyper-guardedness.

This is a book that should be read by all professional psychologists and would be useful as a resource in ethics courses. I recommend it highly.

*E. Thomas Dowd, Ph.D.  
Department of Psychology  
Kent State University  
Kent, Ohio 44242  
330.672.7664  
E mail - edowd@kent.edu*