

PSYCHOTHERAPISTS' BELIEFS AND ATTITUDES
TOWARDS POLYAMORY

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ABSTRACT

SHANNON L. STAVINOHA

PSYCHOTHERAPISTS' BELIEFS AND ATTITUDES TOWARDS POLYAMORY

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The primary purpose of this study was to create a valid and reliable scale to measure psychotherapists' attitudes towards polyamory. The secondary goal of this research was to explore whether psychotherapists endorse commonly held negative beliefs about polyamory and to explore what variables are related to the endorsement of such attitudes. Psychotherapists' attitudes were explored with the Psychotherapists' Attitudes towards Polyamory Scale (PAPS), which measures psychotherapists' beliefs about the health or pathology of polyamory, problems presumed to be associated with polyamory, beliefs about treatment, and personal bias. Additionally, psychotherapists' awareness of polyamory was measured. A measure of social desirability and a brief measure of attitudes towards polyamory was included for the analysis of validity for the PAPS. Participants included 171 individuals who were at least 18 years old; currently in graduate training or had completed training in a counseling, clinical, or related psychology graduate program; and had completed at least one practicum course. Participants were recruited via email and social media. Data collection was conducted online. The PAPS was found to be a reliable and valid measure with a clear and systematic factor structure. Results indicated that psychotherapists' attitudes were more

positive than originally predicated and that there is a lack of coverage of polyamory in graduate training. The constructs, theoretical and conceptual foundations, and previous research findings relevant to psychotherapists' attitudes towards polyamory were discussed in depth.

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CHAPTER I

INTRODUCTION

Monogamy is the assumed healthy standard for relationships in our society. In 1994, Smith found that 90% of the general public in the United States (U.S.) considers sex between a married person and someone other than his or her spouse to be morally wrong and people overwhelmingly view non-monogamous relationships less positively compared to monogamous relationships. Using the predominant available relational frameworks, a married person who engages in extramarital sex is assumed to be cheating and an adulterer. This standard of sexual exclusivity is also applied to committed relationships. Currently, the “acceptable” or “moral” relationship model that dominates our cultural understanding of relationships does not allow for the possibility of loving more than one person at a time without betrayal. However, there are individuals who practice relationship models that challenge this notion of monogamy.

With high rates of divorce, extramarital affairs, and separation, monogamy does not work for everyone. In her clinical work, Peabody (1982) found that “the traditional monogamous marriage can no longer provide adequately for the intimacy needs of some individuals” (p. 430). As such, individuals engaging in alternative relationship models may be “attempting to cope with the multiple needs of individuation as well as commitment, intimacy, and sharing in a deep relationship which are not always compatible with one another” (Peabody, 1982, p. 430). Alternative relationship

orientations such as polyamory provide individuals with a new way of meeting diverse relationship needs.

About Polyamory

Definition

Although the current dominant relationship model is monogamy, other individuals have agreed to multiple ethical romantic relationships at the same time. One way of practicing this relationship orientation is *polyamory* (“poly” for short). Polyamory is a word composed from both Greek and Latin roots: “poly” meaning many and “amor” meaning to love. *Polyamory* is a broad and diverse term with many meanings. According to Trahan (2014), polyamory has been described as

a sexual orientation, a relationship orientation, a relationship history, an identity, a politics, a cultural movement, a lifestyle, a lovestyle, a healing art, a romanticisexual label (e.g., “I’d like you to meet my poly partner”), a type of *event* (e.g., “please come to my poly potluck”), a *stance* (e.g., “are these folks poly-friendly?”), an ethical or philosophical *worldview*, and a general *theory* for living and loving. (p. 3)

In terms of formal definitions, Anderlini-D’Onofrio (2004) defined polyamory as follows:

Polyamory is a state of being, an awareness, and/or a lifestyle that involves mutually acknowledged, simultaneous relationships of a romantic and/or sexual nature between more than two persons. . . . Polyamorous people can be exclusively lesbian, gay, or bisexual, yet their efforts to get past the limitations of

monogamy erode set binarisms, including the myth that being part of a closed dyad is the only authentic form of love. (p. 165)

This definition speaks to the diversity of definitions of polyamory and the individuals who practice polyamory. Polyamory encompasses many types of sexualities, relationship structures, and motivations for choosing multiple partners.

White (2004) found that most definitions of polyamory “utilize words like *ethical*, *responsible*, *honorable*, *open*, *honest*, *intentional*, and *principled*” (p. 20) to indicate the key principles of polyamorous relationships between honest and consenting individuals. It should also be noted that an individual does not have to practice polyamory to identify as polyamorous; some individuals adopt the identity label to reject the assumption that love is a limited resource (Trahan, 2014). Terms such as *ethical non-monogamy* and *consensual non-monogamy* have also been used in place of, or in addition to, the term *polyamory* to indicate the importance of honesty and consent.

Demographics

Demographic information available for the polyamorous community is limited. Due to the personal nature of relationships and the potential for social and legal ramifications related to exposure, collecting comprehensive statistical data about polyamory has been complicated. In terms of prevalence, according to The Loving More survey (Weber, 2002), the U.S. has 500,000 polyamorists, or 1 in 500 people. Based on the cumulative findings of a 16-year longitudinal study of polyamorists, Sheff (2014) described polyamorists as people in their early 30s to mid-60s. She stated that there were certainly younger and older practitioners, but that in her work, the majority of

participants who were willing to engage in research fell in this age range. From the available research, we see that the majority of polyamorists fall into the “middle- and upper- middle-class socioeconomic status, [are] usually college educated, overwhelmingly White, and frequently employed as professionals in computer or counseling/therapy fields” (Sheff, 2005, p. 257). Ravenscroft (2004) also reported that in the U.S. most people participating in polyamorous research are White, educated, liberal in terms of political views, and of middle to upper-middle class. Across the literature, there has been a significant proportion of overlap between bisexuality and polyamory (Mint, 2004; Rust, 1996; Sheff, 2014). In terms of gender differences, Sheff (2014) reported that the majority of polyamorous women tend to be bisexual while polyamorous men tend to identify themselves as heterosexual.

Community Values

The available information on polyamory suggested that the polyamorous community endorses a unique set of values. Polyamory promotes an ethical approach to non-monogamy in which all participants in the relationship are aware of, and agree to, the non-monogamous approach to their relationships. As a relationship orientation, polyamory takes a consensual approach and endorses “an ethics based on honesty, respectful negotiation and decision making, integrity, reciprocity and equality” (Klesse, 2011, p. 5). In the polyamorous community, communication and negotiation are central to the relationship model. In the process of maintaining multiple simultaneous relationships, polyamorists spend a great deal of time implementing communication skills, cultivating self-awareness by analyzing personal needs and boundaries, and

learning how to negotiate and process complex interpersonal dynamics (Easton & Liszt, 1997; Taormino, 2008; Weitzman, 2007).

Love and the capacity to have multiple loves are central themes of polyamory. Most publications have suggested that while polyamory is defined by having multiple sexual partners, meaningful connections and love are more salient features of the relationship philosophy (Lano & Perry, 1995). Polyamory can be conceptualized as a relationship philosophy that promotes unlimited love and the belief that having multiple sexual and emotional bonds is beneficial and valid (Klesse, 2011). Thus, polyamory is the practice of the belief in individuals' capacity to have multiple loves "within spiritual, sexual, emotional, and/or intellectual relationships between honest, communicative, consenting human beings" (Trahan, 2014, p. 2). Of interest, Cardoso (2012) makes the distinction between cheating and polyamory by stating that monogamy is not the opposite of polyamory; the opposite of polyamory is cheating due to the violation of certain key polyamory community values such as honesty, respect, and love.

Relationship Models in Polyamorous Relationships

One of the most common reasons polyamorous participants give for having multiple relationships is the ability to get more of their needs met (Sheff, 2014). Western notions of romance indicate that the ideal way to be in relationship with another person is to have a relationship in which our partner will be our everything (Taormino, 2008). The acceptance of monogamy as the only valid relationship model perpetuates the belief that one romantic partner should be the one who is able to fulfill a variety of interpersonal needs that were previously met by many individuals such as other family members or

friends (DePaulo & Morris, 2005; Drigotas & Rusbult, 1992; Gillis, 1996). This overreliance on one person to fulfill all emotional and sexual needs is likely to be unrealistic and problematic, creating an expectation that many partners are unable to live up to (Charles, 2002). Polyamorous individuals may address this issue by spreading their relationship needs across multiple partners, thereby decreasing the pressure that is inherent in unrealistic expectations.

In monogamous relationships, sexual exclusivity is expected. Two people agree to abide by certain rules and boundaries in which they form a unit or a dyad. Each person agrees or understands that the couple will be faithful and uphold the commitment to the relationship. By contrast, polyamorous relationships may have defined boundaries or expectations, but sexual exclusivity is not expected. Polyamorous relationships are intentionally structured with mutual trust and respect to maintain multiple sexual relationships (Munson & Stelbourn, 1999). Relationships tend to be more fluid and flexible with an understanding of the commitment and boundaries of each unique relationship. Polyamory terminology can be complicated due to the fluidity and diversity in relationship structures.

Relationships may vary in the degree of commitment, sexual exclusivity, number of partners, or other agreed-upon structures. Three main relationship structures are most commonly practiced in polyamory: (a) a hierarchical or primary-secondary model, (b) multiple primary partners model, and (c) multiple non-primary relationships model (Labriola, 1999). In a primary relationship, two partners agree that their relationship will come first and other relationships will be secondary (Labriola, 1999). In the multiple

primary partners model, no one relationship takes precedence over the others. Each individual is viewed as separate but equal with his or her own set of relationship boundaries. In the multiple non-primary relationships model, an individual is not interested in a primary relationship(s) and desires a high degree of personal freedom and less commitment (Labriola, 1999). For the purposes of this paper, a relationship that consists of more than two people with consensual boundaries and intimate emotional attachments will be considered a polyamorous relationship.

Common Themes in Scholarly Research

The majority of information available on polyamory comes from the popular media and takes the form of self-help or instructional books. Texts such as these have tended to be authored by feminist women, are celebratory in nature, and focus on individual agency (Noël, 2006). Although there is less published academic work compared to popular media, the majority of empirical research, thus far, on polyamory has come from the fields of psychology and sociology, uses qualitative methods, and has explored how cultural insiders experience their relationships (Trahan, 2014). Research has focused on diverse topics including polyamorous identity (Barker, 2005), language and the creation of new terms (Ritchie & Barker, 2006), polyamorous families and parenting (Sheff, 2014), spirituality and polyamory (Robins, 2004), dealing with jealousy (Easton, 2010), models for polyamorous relationships (Labriola, 1999), and how having needs met in one polyamorous romantic relationship impacts relationship outcomes in other simultaneous relationships (Mitchell, Bartholomew, & Cobb, 2014).

One common theme across the literature, regardless of the type of non-monogamy being discussed, is the comparison between consensually non-monogamous relationships and the practice of monogamy or infidelity, in which polyamory is described as different from unethical secret affairs and positioned as superior to the restrictive rules of monogamy (Barker & Langdridge, 2010b). Explorations of mononormativity and compulsory monogamy are also common topics found throughout the published literature on polyamory. Such topics address how the hegemonic force of mononormativity disadvantages “not just the polyamorists, but a whole host of people whose lives and loves fall outside of this conventional dyadic ideal” (Wilkinson, 2010, p. 243). Currently, scholarship across disciplines is increasingly calling for more political and critical explorations of polyamory and the dynamics of privilege, power, and systemic barriers (Noël, 2006) as well as the intersectionality of polyamorous identity and gender, race, ethnicity, class, and disability (Haritaworn, Lin, & Klesse, 2006).

Psychology’s Response to Polyamory

The field of psychology has come to place a great emphasis on valuing diversity through the training and practice of multiculturalism. Although factors such as religion, sexual orientation, and ethnicity are common topics discussed in psychology, polyamory is often overlooked. For example, Weitzman (2006) noted that “despite the demographic prevalence of polyamory, psychotherapists are under-educated about the lives and needs of polyamorous people” and that “most graduate psychology textbooks, curricula, and internships do not include mention of it” (p. 142). Monogamy has been, and continues to be the dominant accepted relational model in contemporary Western societies; it is

considered normative and optimal (Conley, Ziegler, Moors, Matsick, & Valentine, 2013). Historically, the practice of polyamory has been pathologized by the mental health field. According to Gayle Rubin (1984), “Psychiatric condemnation of sexual behaviors invokes concepts of mental and emotional inferiority rather than categories of sexual sin” (pg.12). Rubin illustrated how western societies have created a hierarchy in which sexuality is organized into systems of power that privilege heterosexual and monogamous relationships and pathologize any sexual practices that are not in this “charmed circle” (p.153).

Academic interest in non-monogamy gained popularity during the 1960s and 1970s. Although celebratory accounts of non-monogamy started to appear in the social science literature during the early 1970s, attitudes of U.S. clinicians towards non-monogamous relationships were not as celebratory (Finn, Tunariu, & Lee, 2012). Constantine, Constantine, and Edelman (1972) were some of the early researchers who documented the increasing number of clients practicing non-monogamy. They found that alternative lifestyle clients reported they had experienced covert forms of disapproval from their psychotherapists. In her study exploring marriage counselors’ attitudes of non-monogamous marriage styles, Knapp (1975) found that psychotherapists endorsed perspectives that people in open relationships have personality disorders or neurotic tendencies and tried to influence clients to return to a monogamous relationship model. Additionally, Knapp (1976) noted that the three greatest fears facing clients who engaged in non-monogamous lifestyles were psychotherapists’ condemnation of their relationship choices, pressures to return to a “healthier” form of marriage, and being labeled with a

disorder due to their lifestyle. Following Knapp's study, Hymer and Rubin (1982) investigated psychotherapists' attitudes and clinical experiences with alternative lifestyle clients (extramarital sex, sexually open marriage, and swinging). They found that some psychotherapists surveyed believed that polyamorous clients feared commitment or hypothesized that these marriages were not fulfilling for their clients. Likewise, Page (2004) and Weber (2002) found that many clients who identified as polyamorous have trouble finding affirming clinicians.

Although polyamory has not always been supported by the mental health community, there has been a gradual shift in social perspectives regarding sexuality that has been reflected in our values as a field. Of note, Albert Ellis could be considered as one of the early supporters of the polyamorous community (Weitzman, 2006). Ellis wrote about the frequency of non-monogamy across cultures and stated,

If any sexual desire, expression, thought, or activity is not morally wrong in itself, then it can never justifiably be termed sexually "wrong" or sinful," merely because it is a sexual act, and as such reprehensible to some theological and superstitious set of beliefs. (Ellis, 1965, p. 7, as cited in Weitzman, 2006)

Perspectives such as those held by Ellis challenge the dominant narrative that romantic relationships should be monogamous. Currently, the value placed on the acceptance and exploration of diversity in psychology has allowed for a more balanced and respectful view of polyamory, but challenging mononormativity is still a valid point of discussion. With the increase in interest in polyamory and the shifting in sociosexual attitudes in our field and society, now is the time to revisit the conversation of how society's

monogamous values impact our ability, as clinicians, to work with people who engage in diverse relationships and sexual practices, even those that push the current accepted paradigm for relationships.

Overview of Study

If having extramarital relationships is considered morally wrong and sexual exclusivity is accepted as the norm in relationships by 90% of the American public (Smith, 1994), non-monogamous individuals may be seen as a marginalized minority population that deserves further exploration. Given the limited understanding of polyamory, it is imperative to extend the current research base exploring psychotherapists' perspectives and experiences with multiple romantic partnerships. I proposed a quantitative research project to create a valid and reliable measure that built upon earlier studies that provided information about the acceptance and understanding of polyamory in the field of psychology.

There are numerous reasons why we need to be able to measure psychotherapists' attitudes and experiences with polyamorous clients. First, the literature on mental health workers' perspectives on polyamory is limited. Hymer and Rubin (1982) and Knapp (1975) conducted two studies directly measuring psychotherapists' attitudes about consensual non-monogamy. These studies were conducted when positive reports of open relationships started to appear in the social science literature, which started in the early 1970s. These early studies are now out of date. Since then, only a few studies have explored psychotherapists' perceptions regarding polyamory. The following studies constitute the available research on this topic: Knapp (1975), Hymer and Rubin (1982),

Ford and Hendrick (2003), and Finn et al. (2012). Ford and Hendrick measured psychotherapists' sexual values for both themselves and their clients in the areas of premarital, casual, and extramarital sex; open marriages; sexual orientation; and sex in adolescence and late adulthood. Results indicated that psychotherapists valued, or had positive attitudes towards, fidelity and monogamy in marital relationships and committed life partnerships. Finn and colleagues interviewed psychotherapists and found that participants identified their clinical responses to open non-monogamy as non-directive and non-pathologizing. It should be noted that although this researcher conducted an extensive search using polyamory, consensual non-monogamy, non-monogamy, monogamy, mononormativity, and open relationship as key words, there may be more available published research on this topic that the researcher was unable to find due to the diverse way polyamory is measured and discussed.

Second, there is a need for current research that addresses the shifting sociosexual attitudes of our society and how this shift is impacting our field. During the 1980s, there was a rejection of the "conflation of open non-monogamy with promiscuity and relationship malfunction" (Finn et al., 2012, p. 206). The new millennium has been marked with a notable increase in scholarship, social commentary, and media attention focused on non-normative forms of sexuality, such as gay and lesbian relationships, open marriages, swinging, and polyamory (Finn et al., 2012). Queer, feminist, and anarchist perspectives have celebrated polyamory as a challenge to the dominant discord of patriarchal and possessive relationship paradigms. While there has been a resurgence in non-pathologized understandings and explorations of polyamory, there has been a lack of

research on how this shift impacts the current attitudes and practices of clinicians regarding polyamory specifically.

Third, there is a need to measure the current experiences of clinicians regarding polyamory to examine issues related to training and competence for this growing marginalized population. Since the late 1960s, research has indicated that increasing numbers of individuals are interested in practicing non-monogamy (Knapp, 1975). It is important that psychotherapists are aware of their personal biases as “personal objectivity is an ideal rarely achieved” (Knapp, 1975, p. 513). Psychotherapists working with polyamorous clients may be especially vulnerable to the personal/professional discrepancy as non-monogamy is still considered a “deviant” relationship style in society and as members of this society, psychotherapists are not immune to such perspectives. Thus, the purpose of this study was to create a measure to assess psychotherapists’ attitudes and beliefs about polyamory and polyamorous clients.

Definition of Terms

Bondage-discipline, domination-submission, sadism-masochism (BDSM): A sexual practice characterized by suppression, physical restriction, practicing role playing games, power exchange, and sometimes even the administration of pain (Wismeijer & Van Assen, 2013, p. 1943).

Polyamory: A relationship form that emphasizes emotional intimacy, openness, and honesty while advocating that it is possible, valid, and worthwhile to maintain intimate, sexual, and/or loving relationships with more than one person simultaneously (Haritaworn et al., 2006, p. 518).

Polyandry: The practice or custom according to which one woman has several husbands (Emens, 2004, p. 21).

Polygamy: Marriage with several spouses, regardless of gender or sex (Emens, 2004, p. 21).

Polygyny: The practice or custom according to which one man has several wives (Emens, 2004, p. 21).

Monogamy: The condition or practice of having a single mate during a period of time (Monogamy, n.d.).

Mononormativity: Mononormativity is based on the taken-for-granted allegation that monogamy and couple-shaped arranged relationships are principles of social relations, per se, an essential foundation of human existence and the elementary, almost natural pattern of living together. From this perspective, every relationship that does not represent this pattern is being ascribed the status of the other, of deviation, of pathology, in need of explanation or is being ignored, hidden, avoided, and marginalized (Bauer, 2010, p. 145).

Compulsory monogamy: A system of cultural power used as an enforcement mechanism in which non-monogamy is met with resistance, classifying violations of monogamy as unacceptable social behavior and positioning monogamy as somewhat less than optional (Mint, 2013).

CHAPTER II

REVIEW OF LITERATURE

The purpose of this chapter is to provide an overview of the multifaceted research about polyamory. Using a variety of professional resources, this review included (a) the history and emergence of polyamory, (b) demographics of polyamorous individuals, (c) community characteristics, (d) primary reasons for or benefits of polyamory, (e) polyamorous relationship models, (f) popular and academic literature, and (g) themes across the scholarship. The literature review closes with a brief rationale for this investigation, as well as the research questions that guide the study. This literature review provides a conceptual understanding of polyamory that prepares us to investigate psychotherapists' attitudes toward polyamorous clients.

The History and Emergence of Polyamory

Non-monogamy is not a new story; it has existed throughout recorded human history (Ryan & Jethá, 2010). Within the last few decades, *polyamory* has emerged and carved out its own principles, values, and cultural practices. Polyamory is commonly defined by what it is not (i.e., monogamy) but the term itself lacks consistency.

Polyamory, as a term, has one of the most disputed and varied definitions among non-monogamies. The concept of polyamory can be traced back to debates focused on alternative relationship styles and non-monogamy (Klesse, 2011). During the 1960s, 1970s, and early 1980s, individuals in multiple-partner relationships began to create their own words to replace standard English terms which they found to be limited (Sheff,

2014). It seems a general consensus exists that the term polyamory originated from within the polyamory community, but it is unclear exactly who coined the term. According to some authors, the term polyamory was coined by Morning Glory Zell-Ravenheart and Oberon Zell-Ravenheart in 1990 due to a desire to replace the term *polyfidelity*, which they found to be exclusive rather than inclusive (Sheff, 2014). Various individuals have indicated that before the term polyamory existed, the Kerista group coined the word *polyfidelity*, which meant “faithful to many” with an emphasis on sexual fidelity to a closed and committed unit of lovers (Sheff, 2014, p. xiv). Kerista was a polyamorous commune that operated from 1971 to 1991 in San Francisco and eventually had a nationwide influence in forming the polyamorous community. Thus, the term *polyamory* addressed discord in the community over Kerista’s concept of polyfidelity by creating a more inclusive term to include relationships in which sexual fidelity was not required (Sheff, 2014). The “philosophical holdover from polyfidelity” can be seen in the defense of polyamory as a legitimate, long-term, committed relational style (Trahan, 2014, p. 83).

According to Alan (2007), the origin of the term polyamory first appeared in print in the article “A Bouquet of Lovers” in spring 1990. As the Zell-Ravenhearts were the founders of the neo-pagan Church of All Worlds, the term initially spread in a primarily spiritualistic subculture across the U.S. (Anderlini-D’Onofrio, 2004). According to Aviram (2010), this initial spiritual environment continues to influence the current cultural and political positioning of various polyamorous communities. The term *polyamory* has been adopted and expanded upon by increasing numbers of people. Unlike

other sexual identities that were defined by cultural outsiders, the term polyamory has emerged from within the community. Cultural insiders have worked and continue to strive to have the term polyamory recognized and accepted as a legitimate sexual identity and relational approach on a political and cultural level (Munson & Stelboum, 1999). The terms *polyamory*, *polyamorists*, and *polyamorous* officially entered the Oxford English Dictionary in 2006. The term polyamory combines the Greek word *poly*, meaning many, and the Latin word *amor*, meaning love and thus literally translates as “many loves” (Klesse, 2011).

The history of polyamory can be described as being embedded in other counter-cultures. For example, Kitaka (1999) described the cultivation of sexual freedom outside normative relationship styles for lesbian and bisexual women as she discussed her personal motivations and philosophies that led to the formation of her lesbian sex club, Ecstasy Lounge. The author did not directly address polyamory, but stated that the formation of the club was an outgrowth of her desire to have relationships that were “not bound to the monogamy-only model” and to help bring “a sense of more freedom, that women can do whatever they want within their relationships” (p. 183). Siegel (1999) described polyamory as developing alongside the counter-culture movement of radical feminism in which non-monogamy was seen as an important aspect for strengthening lesbian community relationships. These diverse subcultures have influenced the theory and practice of polyamory. In its simplest form, polyamory is a relationship orientation and culture that allows for multiple sexual partners and is therefore considered a

consensual non-monogamy practice. Trahan (2014) described the complex nature of polyamory by stating:

Thus, to be polyamorous (“poly” for short) is to believe that *abundant* love, connection, and support is possible within spiritual, sexual, emotional, and/or intellectual relationships between honest, communicative, consenting human beings. As an orientation toward being that is an alternative to monogamy (but not necessarily “against” monogamy—for the relationship style of monogamy is a valid and beneficial choice for some), a key tenant is the notion that it is possible to ethically and responsibly love more than one person simultaneously. However, a polyamorous person may identify as such no matter what actual form their relationship(s) take. In other words, one does not have to *have* multiple romantic partners to identify as poly. (p. 2)

As a term developing from many different countercultures and perspectives, polyamory can be conceptualized as a critique of socially held assumptions regarding sexuality, heterosexuality, and the monogamous ideal. Due to the complex nature of polyamory, it can be defined as a relationship style, an orientation, a cultural movement, a theory, a spiritual experience, an act of resistance, a personal choice, a worldview, or a paradigm shift. This complexity likely contributes to misinformation and stigmatizing perceptions of polyamory among the general public and psychotherapists alike.

Sociocultural Shifts

According to Dennison (2000, as cited in Brown, 2006), the 21st century can be classified in an interpersonal context as the Singles Century. Dennison and Brown have

both noted the rise of the single person by indicating that more value has recently been placed on developing a personal identity outside of a dyad and more individuals have begun to question the centrality of romantic love. Certain historical events have influenced the emergence of polyamory by transforming the ways when people understand their relationships and relationship needs. Such historical movements include the Sexual Revolution of the 1960s, when we saw a shift in sexual norms (Weeks, 1985). Barker and Langdrige (2010b) reviewed research on consensual non-monogamy in an effort to understand the sociohistorical context in which polyamory emerged and the increased scholarly interest in this relationship style during the last decade. Barker and Langdrige (2010b) summarized the social constructionist view stating, “The nature of love is fundamentally changing” as people construct and negotiate that an ideal relationship is based on changing social conceptions of autonomy and love in a less traditional culture (p. 751). The cultural shift toward pursuing more autonomous goals means that individuals must now decide on choice of partners, how many partners they desire, whether to get married, cohabitate, or have children. These recent transformations have altered the ways individuals choose to relate to themselves and others in relationships. According to Giddens (1992), choice and equality have become important aspects of Western relationships. This increase in the desire for autonomy and equality may be viewed as stemming from “the democratization and individualization of western society” (Barker & Langdrige, 2010b, p. 751).

Paradoxes in current relationships have developed as a result of these desires and the freedom to pursue individual goals. Although there has been a societal shift toward

focusing on autonomy, “relationships have become the new religion in increasingly secular societies and are the places people turn to for validation” (Barker & Langdridge, 2010b, p. 751). Romantic relationships appear to be replacing other forms of interpersonal support, such that individuals may value their romantic partners over friendships, community relations, and family relationships. This overreliance on *the one* and narratives of *the perfect partner* create a dichotomy between desires for autonomy and desires to be everything to a romantic partner (Beck & Beck-Gernsheim, 1995). Such expectations place relationships under pressure to remain static and flexible. Implications of such tension are seen in the rising rates of extramarital affairs, divorce, and single-person households (Barker & Langdridge, 2010b).

According to Barker and Langdridge (2010b), Attwood’s (2009) concept of the sexualization of society is another sociocultural shift implicated in the increased interest in consensual non-monogamies. Individuals have started to integrate their sexuality into the expression of their identity and, thus, sex has become more central to the individual and the expression of self. Participation in dyadic, monogamous relationships creates tension between the need for autonomy through sexual expression and the requirement for sexual exclusivity (Giddens, 1992). Barker and Langdridge (2010b) have argued that it is within this context of tension that individuals have become more interested in other ways of relating, such as having multiple consensual relationships. These theories suggest a paradigm shift from the belief that individuals should have one monogamous lifelong relationship to the current U.S. standard of serial monogamy, in which people have

multiple romantic relationships throughout their lifetimes (Noël, 2006). It is from this sociocultural shift that polyamory has emerged.

Polyamory Becomes More Visible

Both the practice and study of polyamory have been most prominent in the U.S., Australia, and the United Kingdom (U.K.) (Trahan, 2014). While the practice of non-monogamy has a long history, polyamory in theory and practice is a relatively new way to think about having multiple sexual partners. During the 1960s, discourse regarding non-monogamy experienced a revival with the human rights-based social movements, such as the Sexual Revolution, Women's Liberation, and Gay Liberation movements (Weeks, 1985). According to Haritaworn and colleagues (2006), polyamory "emerged at the crossroads of several sexually emancipatory discourses" (p. 518) including feminism, gay and lesbian movements, bisexuality, and BDSM. Noël (2006) noted that in the early 1900s, feminist and socialist circles primarily generated discussions and examinations regarding the practice of intentional non-monogamy. Gay male subculture was identified by Haritaworn et al. as representing diverse forms of sexuality and intimacy with a strong acceptance for open relationships. Specifically, in the 1970s and 1980s, lesbian communities generated a renewed interest in consensual non-monogamy as a feminist resistance to patriarchy and the institution of marriage (Ross, 1995). While Haritaworn et al. argued that the strong overlap within the bisexual community has influenced the development of the polyamorous community, Klesse (2005) stated that within the discourse of bisexuality and polyamory, "non-monogamy is a troubling issue for many bisexuals, because dominant discourse constructs bisexuality as non-monogamous by

necessity” (p. 448). Such communities influenced the current discourse surrounding capitalist and patriarchal critiques of monogamy. Like polyamory, BDSM emphasizes safe, consensual sexual practices and creates an accepting space for those wishing to explore sexual practices with individuals outside the couple relationship (Califia, 1994). Thus, diverse sexual minority groups and communities have influenced the emergence and celebration of non-normative sexualities and have helped develop the narrative of polyamory (Ritchie & Barker, 2006).

There is a growing interest in polyamory in popular culture. Consensual non-monogamies have become an intense public fascination (Plummer, 1995). Such interest can be shown by a growth in Google search results for the term *polyamory* with 170,000 links in 2005 and 1,710,000 links in 2013, and with the term *polyamory* entering into the Oxford University Press’ *Sexuality: The Essential Glossary* in 2004 (Ritchie & Barker, 2006). Barker and Langdridge (2010b) also pointed out the increase in cultural exposure represented by celebrities openly discussing their interest in polyamory, such as Will Smith and Tilda Swinton. We have also seen polyamory in theatrical plays with polyamorous characters (e.g., *David Kiple’s play, MMF*), an increase in polyamory websites and online communities (e.g., <http://www.polyamorysociety.org/>), a polyamory online magazine (e.g., *Loving More PEP Talk*), the development of Loving More Nonprofit, and an explosion in television and media pieces exploring the lives of people practicing non-monogamy (Friend, 2006). There has also been an increase in the coverage and distribution of information about practicing polyamory through self-help books, such as a second edition of *The Ethical Slut* (Easton & Hardy, 2009), newspaper

and magazine articles, film, radio, and a recent major cable network show on Showtime called *Polyamory: Married & Dating*. Additionally, polyamory has experienced an increase in annual conferences, retreats, festivals, and networking events for the community (e.g., Loving Choices seminars). This knowledge should inform psychotherapists with a more thorough picture of polyamorous individuals' lives and needs.

Demographics of Polyamorous Individuals

How prevalent is polyamory? To date, research lacks a sound estimate of the number of people who are in polyamorous relationships or identify as polyamorous in the U.S. and elsewhere. Across the literature, ambiguous demographic information appears to be based on limited samples of the population (Trahan, 2014). Recently, Barker (2013a) estimated that 15 to 28% of heterosexuals and 50% of bisexual and gay men practice non-monogamy or identify as non-monogamous. Page (2004) found that 33% of her participants were in a polyamorous relationship, and over 50% favored polyamory compared to other relationship models. Adding to the discussion on the blog, *Polyamory in the News*, Mint (2007) noted,

I think the community we see is a subset and not the whole picture by a long shot. So there may well be more than 100,000 self-identified poly people out there, though I think we are not anywhere near anything like 5% of the population.
(para. 17)

It is clear that while researchers have started to gather some information regarding the prevalence of polyamory, there is more work to be done. Trahan (2014) reported that

there is a lack of research addressing the prevalence of polyamory directly and that researchers need to differentiate polyamory from non-monogamy in future research. Trahan also called for more quantitative data on the prevalence of polyamorous relationships, as well as “closeted practices of polyamory by those who do not necessarily publicly identify as poly” (p. 88). Trahan asserted the significance of such work by indicating that if we have a better understanding of the prevalence of polyamory, then we will also have a better impetus for ongoing research.

Community Characteristics

Age

Based on the cumulative findings of a 16-year longitudinal study of polyamorists, Sheff (2014) described polyamorists as people in their early 30s to mid-60s. She stated that there were certainly younger and older practitioners, but that in her work the majority of participants who were willing to engage in research fell in this age range. Three reasons for this age distribution were given: (a) Sheff’s work focused on polyamorous families with children; the majority of families in the U.S. encompassed parents in their 30s and 40s; (b) older individuals, or “poly pioneers” of the 1960s and 1970s may be eager to discuss polyamory with researchers because they enjoy seeing polyamory explored in a serious way; and (c) “because polyamorous relationships are outside the norm and have to be consciously negotiated, it often takes people a while to try them” (Sheff, 2014, p. 27). Therefore, people in their 20s may not be as responsive to participating in research or may not consciously define their relational model as polyamory, but that does not mean that they are excluded from this population. Mint

(2007) described how younger polyamorists are likely underrepresented because they tend not to engage in the greater polyamory community. Additionally, there is a group called “polygeezers,” formed by Ken Haslam, to represent the growing number of middle aged and older polyamorous individuals. With the growing popularity of polyamory, and the increasing number of older adults, it is expected that polyamory among older adults will increase dramatically (Sheff, 2014).

Gender

Gender equality is one of the characteristics of polyamory that sets it apart from other types of non-monogamous relationship models. Although equality is a difficult concept to attain in actual practice, gender equality in polyamory is an important challenge to normative relationship paradigms. For example, women are allowed and encouraged to have multiple partners of their choosing. Unlike polygyny, in which men are allowed multiple wives, polyamory strives to create a relationship model where women also have their own agency (Sheff, 2014). This focus on gender equality has implications not only for individual polyamorous relationships, but also for polyamorous communities and beyond. For instance, there are more women than men in positions of leadership in polyamorous communities (Sheff, 2014). In polyamorous communities, women also tend to be preferred partners compared to men. Sheff (2014) described this occurrence as a possible “result of the enduring sexual double standard that allows men far greater sexual latitude than women or a biological propensity that compels them to spread their seed” and that “men seem more willing to have multiple partners” (p. 29). The result is that women usually are in higher demand to join new relationships and this

can provide women with more options and more autonomy. Additionally, men who gravitate towards polyamory tend to hold more egalitarian, liberal, and less traditional values (Sheff, 2014). Polyamorous men are usually interested in social justice and present as more flexible and open to challenging traditional conceptions of monogamy, such as ownership of women (Sheff, 2014). Although gender equality is a relationship quality stressed in polyamory, Sheff (2005) found that in some polyamorous relationships, systems of patriarchal power were simultaneously present with increased sexual freedom.

Race and Class

Although gender equality is a defining characteristic of polyamory, class-based privilege cannot be overlooked as it intersects with gender. Many of the women Sheff (2014) interviewed were “highly educated and frequently able to support themselves financially, which gives them the autonomy to contemplate the end of the relationship without the dread of possibly ending up living in their cars with their children” (p. 28). This class-based privilege means that self-sufficient women are more likely to be able to set boundaries and make requirements in their relationships and less likely to tolerate unwanted relationship environments (Sheff, 2014).

Being in a polyamorous relationship can be precarious due to social stigma associated with having multiple sexual partners. Factors such as race and class may buffer some individuals from the risks associated with polyamory. Such risks might include strained relationships with families of origin, ruptures in friendships, job loss, custody issues, and possible evictions (Sheff, 2014). For individuals who are White and middle-class, engaging with nonconformity may not be as risky as it is for individuals

who are already experiencing the stresses of poverty and racism. The available research demonstrates that the majority of polyamorists fall into a middle- and upper- middle-class socioeconomic status, are college educated, White, and often employed as professionals in computer or counseling/therapy fields (Sheff, 2005). Ravenscroft (2004) also contended that in the U.S., people participating in polyamorous research are White, educated, liberal in their political views, and of middle- to upper-middle class. Individuals who experience racial and class discrimination may not be willing or able to take on the added marginalization of polyamory. Additionally, it may be easier for White polyamorists to participate openly because they have more freedom to consider alternative lifestyles and are not asked to represent their entire race; people of color may not be willing to openly engage in polyamory due to the possibility for stereotyping, objectification or exploitation, or possible rejection from their own ethnic or racial communities (Sheff, 2014). Thus, it appears that having class-based and racial privilege may make active engagement with polyamory more accessible and feasible to some but not all. Psychotherapists should be mindful of the impact of intersectionality when working with polyamorous clients, as these clients likely straddle and negotiate multiple identities that may conflict with one another.

Sexual Orientation

Across the literature, there has been a significant proportion of overlap between bisexuality and polyamory (Mint, 2004; Rust, 1996, 2003; Sheff, 2014). Rust (1996) obtained a sample of 277 bisexual participants and found that 33% of the individuals were practicing non-monogamy. Sheff (2005) found that out of 20 polyamorous women,

only one participant did not identify as bisexual or “bi-questioning.” Additionally, Mint (2004) stated that bisexuality is very common in polyamory and that “online surveys show that about half of the online community members identify as bisexual” (p. 70). Sheff (2014) has found that the majority of polyamorous women tend to be bisexual while polyamorous men tend to identify themselves as heterosexual. The dominance of bisexuality among polyamorous women mirrors both monogamous and swinging cultures “in which women’s bisexuality is highly valued as entertaining to men,” whereas “male bisexuality is cast as threatening to heterosexual masculinity and unappealing to women” (Sheff, 2014, p. 30). Additionally, being a bisexual woman in polyamorous communities may elevate an individual’s status due to compulsory and performative bisexuality as it relates to entertaining men’s patriarchal fantasies about women’s sexuality, as well as the objectification of women in society (Fahs, 2009). Sheff (2005) found that “bisexual women were also among the highest status members of the subculture because they were most often sought as additions to existing female/male dyads to create the coveted and elusive F/M/F (female, male, female) triad” (p. 266). This finding may contradict the egalitarianism that many polyamorous individuals discuss as a strength of the polyamorous relationship model.

Of interest, during her 16 years of study, Sheff (2014) found that gay men may be reluctant to identify as polyamorous because there is no need for a new label for practices that are already common to the gay male community. Likewise, lesbians may also be reluctant to join polyamorous communities because they already have their own existing social niche, which includes non-monogamous norms and groups (Sheff, 2014). Thus,

gay and lesbian communities may be practicing polyamory, but not identifying as polyamorous.

Primary Reasons for and Benefits of Polyamory

According to Sheff (2014), polyamorous individuals indicated six primary reasons for participating in polyamory: having more needs met, experiencing more love, a desire for sexual variety, family expansion, experiencing an innate orientation as polyamorous, and rebellion. In their work, Easton and Liszt (1997) and Weitzman (2007) also found that many polyamorous practitioners stated that a primary reason they chose polyamory was their desire for more sexual variety and a platform to spread more love, support, and affection with multiple people. Many individuals who practice polyamory also describe feeling disillusioned or limited by marriage and modern monogamy (Taormino, 2008). For those looking for a different relational model compared to marriage, polyamory may offer a new way to meet relationship needs.

Need Fulfillment

Sheff (2014) found that during her 16-year study, the most common reason participants gave for having multiple partners was to get more of their needs met without having to be unethical. Polyamorous individuals indicated that having multiple relationships was a primary benefit because “loading all relational needs on a single relationship is a recipe for disaster” (Sheff, 2014, p. 38). Taormino (2008) stated that monogamous relationships encourage the unrealistic myth that a romantic partner is “‘the one’ true love who’s going to be our ‘everything’” (p. 73). Alternately, polyamorous

people try to “recognize this myth and respect each person’s capabilities and limits” (Taormino, 2008, p. 73).

In the poly community, communication and negotiation are central to the relationship model and imperative for diverse need fulfillment. In the process of maintaining multiple simultaneous relationships, polyamorists spend a great deal of time implementing communication skills, cultivating self-awareness by analyzing personal needs and boundaries, and learning how to negotiate and process complex interpersonal dynamics (Easton & Liszt, 1997; Taormino, 2008; Weitzman, 2007).

Capacity for More Love

One of the benefits of polyamory is that current relationships are retained while new and future romantic interests are possible. Various authors have noted that current practices of dyadic monogamy result in multiple cycles of monogamy, or serial monogamy, in which the couple remains together until the union is dissolved, and new partners are then pursued (Ravenscroft, 2004). Easton and Liszt (1997) and Ravenscroft (2004) have offered the critique that serial monogamy, coupled with the romantic ideal of “the one,” has resulted in relationships that are predicated on long-lasting ideals, but are often too easily discarded if another partner appears to be a better fit. Polyamory may offer individuals a way to experience long-lasting love, without the expectation or pressure of having one forever, exclusive relationship. Polyamorists often discuss how having multiple relationships fulfills their desire and capacity to experience more love than a dyadic relationship could contain. The idea of being able to express and experience unlimited love is a popular idea in polyamory; love may be “in the form of

companionship, attention, conversation, doing special things together, romantic gestures (notes, flowers), sex, shared jokes, and affection” (Sheff, 2014, p. 40). Many authors have also discussed the concept of *new relationship energy* (NRE) as a common benefit of polyamory (Easton & Liszt, 1997; Ravenscroft, 2004; Sheff, 2014; Taormino, 2008). NRE is the feeling of excitement and joy due to the novelty of a new relationship starting. The benefits of NRE include enhancing or breathing new life into existing relationships, with a possible increase in sexual energy and an ability to practice more patience and understanding due to an increase in overall happiness and appreciation. It should be noted that while NRE can be a benefit, it could also cause jealousy and insecurity in polyamorous relationships (Wolfe, 2013).

Sexual Variety

While sex and sexuality are usually central in discussions of polyamory in the general public, for practitioners, it is often not the most important motivation for people engaged in long-term polyamorous relationships (Sheff, 2014). Polyamorous individuals who are interested in long-term relationships tend to discuss the primacy of communication and emotions over the potential for sexual variety. For some individuals, the potential for sexual variety may be more of an initial reason to enter into polyamory, as explained by one of Sheff’s participants:

I like sex a lot. And that was more of a motivating factor at first. But over time it became abundantly clear to me that if I wanted a lot of easy sex poly was not the way to go. Way too much talking for that. (p. 40)

Thus, while sexual variety is a reported benefit and an important aspect of polyamory, it is not typically the primary motivation for participation in multiple, consensual relationships (Sheff, 2014).

Family Expansion

Barker (2005) found that many polyamorous individuals described their extended networks of lovers and friends as “family.” The concept of chosen family has been discussed in the LGBT literature as it relates to systems influences involving the reality that “as members of a stigmatized and marginalized group, [members] need to salvage and protect the intimate ties they have created” (Shumsky, 1996, p. 190, as cited in Harkless & Fowers, 2005). Similar to the LGBT community, polyamorists are also a marginalized and stigmatized group, and the importance of a chosen family and the creation of a broad system of support are seen as benefits of polyamory; however, polyamorists do maintain a level of privilege that same-sex families are not afforded, and that is the ability to pass as relational nonconformists (Sheff, 2011).

By having the ability to create a system of support, polyamorists are able to defend against a largely mononormative and hostile environment, which can promote connectedness within the subsystem of the family. In comparison to the nuclear family model that is normative in the U.S., polyamory networks operate in similar ways by providing childcare, financial support, helping with daily activities such as chores, and creating a sense of security (Weitzman, 2007). The creation of a chosen family is also another way polyamorists are able to fulfill diverse relational needs and share their capacity for love. Sheff (2011) discussed the shifting social landscape of family forms

and emphasized the need for psychology and family studies fields to begin to consider levels of monogamy and non-monogamies when theorizing family forms, which accounts for greater social diversity, as well as expands our understanding of how families adapt to shifting social conditions.

Polyamorous Orientation

Within the polyamorous community, there are various ways to conceptualize polyamory. For some individuals, monogamy does not feel instinctive, natural, or right. For these individuals, polyamory is not just a relationship style choice or behavior, but rather an innate orientation (Sheff, 2014). Proponents of this view of polyamory may see polyamory as a natural state of being that is “the universal human condition” which has been “perverted or tamed by social controls” (Sheff, 2014, p. 42). This stance seems to “other” those who participate in monogamy and solidify in-group cohesion, while possibly shifting stigma towards the majority (i.e., those practicing monogamy; Sheff, 2014). The view that polyamory is an orientation is becoming more popular within the field of psychology. A model of identity development for polyamorous individuals has been outlined by Weitzman (2006) and Ferrer (2007) suggested that individual preferences for monogamy and polyamory may be genetically based in humans.

Rebellion

While some individuals might feel that being polyamorous is not a choice, others say that it is a choice, which they practice for self-expression or political motivations (Sheff, 2014). Polyamorists may view polyamory as a strategy for personal agency, sexual fluidity, and the expression of social and political values, rather than a fixed

identity category (Robinson, 2013). Personal development and freedom from confining social conventions are important motivations for those polyamorists who decide to consciously challenge the social and gendered constraints of being in dyadic, monogamous relationships. Polyamory may offer some individuals the ability to create personal challenges to the status quo of monogamy and heteronormativity, particularly when it comes to gender norms and women claiming and expressing their sexual agency. For many individuals, polyamory offers a platform “to customize their relationships to follow their own life course rather than having convention dictate the form of their relationships” (Sheff, 2014, p. 43). Thus, exploring how and why individuals decide to engage in polyamory is a worthy discussion for the mental health field, as many psychotherapists may be misinformed about the diverse and individualized reasons people practice polyamory.

Polyamorous Relationship Models

The concept of open relationships provides the foundation of non-monogamous relationship structures (Peace, 2012). Polyamorous relationships are highly diverse in structure. Relationship models can overlap and vary by the level of commitment or exclusivity, emphasis on love, emotional or physical bonding, sexual practices, and degree of disclosure among partners (Cook, 2005). Polyamorous relationships are structured to meet the individual needs of the partners involved and, thus, relationships tend to look very different from one another. With multiple partners involved in differing capacities, it could be argued that polyamorous relationship structures provide a platform in which partners are able to meet more of their needs. According to Rust (1996),

“polyamorous relationships tend to be based on less all-encompassing forms of relating, in which individuals only partially fulfill their partner’s needs” (p. 137). In most dyadic relationships, the ideal relationship consists of both partners feeling that their needs are met in terms of sex, romance, and intimacy; however, not all people are compatible on all elements of need fulfillment (Mitchell et al., 2014). Adding to this complexity is the pressure for modern relationships to be “an all-encompassing relationship, in which the partners attempt to fulfill all of each other’s sexual and romantic needs and most of their emotional needs” (Rust, 1996, p. 136). A more accurate picture of modern relationships is one in which some or all of these dimensions are present, but usually partners are not completely matched in their need for sex, romance, and intimacy. Due to this reality, individuals are turning to alternative relationship styles to create relationships with different configurations in order to get their needs met in a variety of ways. For example, some partners “like the idea of a partner who fulfills multiple needs, including sexual, emotions and romantic needs, but who does not have to carry the sole responsibility for their needs in each of these areas” (Rust, 1996, pp. 136-137). Other individuals utilize their various partner relations to fulfill their needs by having “nonsexual lovers” (emotional lovers), “friends with benefits” (sexual relationships between friends), and groups in which sex occurs between and with a “circle of friends.” Rust found that individuals use a variety of strategies to get their needs met and that, in practice, relationships exist in many different structures.

Unlike monogamous relationships, individuals practicing polyamory usually attempt to maintain relationships without the expectation of sexual exclusivity. Although

sexual exclusivity is not expected in polyamorous relationships, the level of exclusivity is a factor that must be negotiated according to the individual needs of the partners involved. Sheff (2014) described *polysexuality* “as the practice of having sex with multiple people, either simultaneously (as a form of group sex) or in concurrent, dyadic (two-person) relationships” (p. 4). Polysexuality does not always mean the same thing to cultural insiders. It has been described as a sexual connection over an emotional connection and is therefore considered by some to be different from polyamory. Taking a closer look at polyamorous relationship models, Labriola (1999) explored three main structures for polyamorous relationships: the primary/secondary model, multiple primary partners model, and multiple non-primary relationships model. Additionally, she discussed the diversity of non-monogamy and how different configurations exist across the different models. These relationship models are summarized in the following subsections.

Primary/Secondary Model

The primary/secondary model, also known as hierarchical polyamory or one plus (Taormino, 2008), is described as the most common model of polyamory and is the closest to monogamous marriage. According to Weitzman, Davidson, and Phillips (2009), the majority of polyamorous relationships start as a primary/secondary model when a dyadic unit decides to add a third partner, as a partner to either one or both people in the existing couple. Taormino (2008) suggested that having a hierarchy may be more comfortable for individuals who are interested in exploring other relationship styles due to the security of keeping the primacy of the dyadic relationship. This model may be

structured as a V in which one person has two lovers who are not sexual with each other. At the core of this model, the couple is the primary unit and takes priority, while other relationships and partners are secondary. Aspects which characterize primary partnerships include living together, sharing financial responsibilities, sharing child-rearing activities, and marriage (Labriola, 1999; Taormino, 2008). Labriola (1999) reflected that “this model doesn’t require making any radical changes in lifestyle or world view” because it “does not threaten the primacy of the couple” (p. 220). In this model, it is recommended that boundaries are negotiated and expectations are clear in that all individuals understand which relationships have priority over others. Boundaries may be physical (location, time commitments), sexual (sexual activities allowed), or emotional/psychological (additional partners only fulfill sexual needs; Taormino, 2008). Although this model is the most common, it has been criticized for recreating the same relationship dynamics as traditional mononormative, patriarchal systems which position primary partners as possessions to be owned and secondary partners as objects with little personal power (Barker, 2005; Stelboun, 1999).

Multiple Primary Partners Model

Whereas the primary/secondary model positions the couple as a closed unit, the multiple primary partner model includes three or more individuals in a primary relationship (Labriola, 1999). In this model, all relationships are considered equal or have the potential to become primary and equal. Multi-partner relationships may be structured as a V or as a triad, or erotic triangle, in which all partners involved are lovers with each other and are considered equal. Labriola described two specific variations of the multiple

primary partners model: the polyfidelity model and the multiple primary partners open model. Multi-partner relationships can be structured as closed units or as open units. Closed units only allow members to have sexual relationships with members of the defined group, while open units do not define parameters for sexual partnerships. According to Sheff (2014), “people in mainstream poly communities in the U.S. tend to use *polyamory* as an umbrella term to encompass the practices of polyamory, polyfidelity, and polysexuality” (p. 3). However, Sheff also differentiated polyfidelity from polyamory “in that *polyfideles* (the term for someone who is a polyfidelist) generally expect the people in their group to be sexually exclusive, and polyamorists generally do not” (p. 3).

Polyfidelity. Labriola (1999) described polyfidelity as a “group marriage” model, based on the same structure as traditional marriage, except that individuals are married to more than one person. Thus, polyfidelity may be viewed as monogamy involving at least three adults. This is a closed relational system and all members must agree to choices regarding the relationships. All partners live together and sex is only allowed between group members. This model became popular during the 1970s and 1980s through the Kerista commune in California (Kerista, n.d.). Sartorius (2004) described the benefits of group marriage, stating it is

a relationship structure with lasting and intense emotional, mental and sexual exchanges and which includes three or more partners. It is a possible answer to the desire to satisfy the need for sexual freedom and variety, as well as the need for commitment. (p. 83)

In the polyfidelity model, agreement among all members about possible new lovers is required. Members tend to cohabitate, share parenting responsibilities, and make choices regarding the family together as equals. According to Labriola, the most common polyfidelity arrangement is a heterosexual or bisexual triad consisting of two women and one man, or two men and one woman.

Multiple primary partners open model.

“This model is very different from polyfidelity in that all partners are given much more autonomy and flexibility in developing any relationships they choose and defining those relationships on their own terms” (Labriola, 1999, p. 222).

The multiple primary partners open model positions each individual to make his or her own rules and decisions in each relationship. As such, each individual is free to form relationships independent of each other and to negotiate the boundaries of those relationships on their own terms. These relationships tend to involve more fluidity because there are hardly any limitations on how relationships develop. Partners may decide to live together, but they also may decide to live alone. Although there is more freedom, individuals are still committed to long-term, equal relationships. An example of a multiple primary partners open model is a lesbian couple who are married and live together: they spend certain nights together, but they also share a lover who lives with them and has a separate bedroom; the three individuals are on a weekly rotational schedule and the lover also has a relationship with another person who does not reside in the home. Labriola (1999) emphasized that this model is more amenable to change compared to polyfidelity.

Multiple Non-primary Relationships Model

The last polyamory relationship model Labriola (1999) discussed is the multiple non-primary relationships model. Taormino (2008) described this type of relational model as solo polyamorists who are “dedicated to polyamory but they choose not to have a primary partner” (p. 87). Individuals practicing this model may prefer to enter into a secondary, long-term relationship with partners who are already involved in a primary relationship. Individuals practicing this model tend to live alone, make life decisions without consulting others, and keep financial and parenting responsibilities to themselves. Relationships can be serious and long-term, or carefree and noncommittal. For individuals in the multiple non-primary relationships model, relationships are important but other activities—such as vocational interests or other passions—take precedence. Simply put, the multiple non-primary relationships model can be described as a person being single and practicing non-monogamy without a desire to form primary relationships. The difference between dating and the multiple non-primary relationships model is that single polyamorists are open about having multiple sexual partners and, unlike typical dating goals, solo polyamorists are not looking for the most compatible person with whom to establish a primary relationship (Benson, 2008).

The defining feature of polyamorous relationships is that sexual exclusivity is not expected. Polyamorous relationships are unique and practiced in many diverse ways depending on the desires and needs of partners. Although polyamory may be used as an umbrella term for a multiplicity of non-monogamous relationship models, honesty and respect appear to be a stable value across this diverse community. What polyamory has to

offer is a “lesson in the reality of diversity” (Trahan, 2014, p. 99). Individuals will have different desires based on gender, relationship structure, and need fulfillment. In addition, polyamory contributes to a broader understanding of sexuality. Polyamory may be viewed as a situational sexuality as some polyamorous individuals report that although they may identify as polyamorous, they do not always practice polyamory and that their sexual performance may be understood as a shifting reflection of their values and identities (Aguilar, 2013). As such, polyamory allows for a level of ambiguity that creates a space for different ways to express connection and “flows of relationality” (Finn & Malson, 2008, p. 532). Thus, there is no single way to practice polyamory.

Popular and Academic Literature

Popular Literature

The majority of available literature on polyamory is comprised of works from individuals practicing polyamory (Anderlini-D'Onofrio, 2004; Bosky, 1995), spiritual practitioners (Lessin, 2006; Zell-Ravenheart, 1990), and activists (Easton & Liszt, 1997; Martin, 1999; Stelboum, 1999). The bulk of information takes the form of popular books in the self-help and instructional genres and relies on the use of anecdotal evidence (Ziegler, Matsick, Moors, Rubin, & Conley, 2014). These works tend to be in the format of guides or introductions to polyamory for the general public and are often philosophical and social critiques of monogamy, heteronormativity, and patriarchy (Peace, 2012). The majority of these texts are written by feminist authors and focus on the power of personal choices and individual agency to facilitate large-scale societal change (Noël, 2006). Haritaworn et al. (2006) stated that “although many popular books on polyamory locate

their advice in the context of a political critique of hegemonic gender and sexual cultures, their emphasis is on free personal choice and agency” (p. 520).

For example, *The Ethical Slut* (Easton & Hardy, 2009) is often called “the poly bible” and discusses personal agency and the power of the individual’s capacity for change. Through self-awareness, readers are encouraged to challenge the repressive socialization of monogamy through actions, such as transforming the word *slut* into a positive identity term in which sex is celebrated as ethical and honest (Easton & Hardy, 2009). Popular texts such as these have been criticized for not examining intersectional identities (Haritaworn et al., 2006; Noël, 2006). However, information from this self-help genre is still relevant and important as the voices from cultural insiders help spread knowledge about other ways of engaging in relationships, and paved the way for current scholarship (Trahan, 2014).

Scholarship and Polyamory

Polyamory has received increased interest since the beginning of the 21st century. According to Sheff (2005), prior to 2005 there was a lack of academic scholarship on the topic of polyamory, although scholarship on non-monogamy has been a dynamic research field since the sexual revolution of the 1960s and 1970s. During the 1960s and 1970s, alternative relationship styles such as swinging and group marriage were discussed with some regularity in social sciences publications and conferences (Rubin, 2001). Starting around the early 1990s, polyamory started to develop into a research topic of its own, with the majority of scholarship originating in the fields of psychology and sociology (Trahan, 2014). According to Barker and Langdridge (2010b), polyamory experienced a

“massive resurgence of interest in the new millennium” with an increase in academic research and cultural attention (p. 748).

In academic circles, polyamory has become a topic for discussions regarding sexuality, identity, gender, relational strategies, and institutions of oppression. Within the field of psychology, scholarly work on polyamory is a relatively new occurrence (Barker, 2005; Davidson, 2002). *The State of Affairs* by Duncombe, Harrison, Allan, and Marsden (2004) contained two chapters focusing on consensual non-monogamies. Jamieson (2004) published a chapter on polyamory and Heaphy, Donovan, and Weeks (2004) published a chapter on gay open relationships. These publications were “ground-breaking since consensual non-monogamies were previously excluded from most social scientific writing on non-monogamy, which only considered it in the context of secret infidelities and affairs” (Barker & Langdridge, 2010b, p. 749). Following the publication of *The State of Affairs* (Duncombe et al., 2004), academic interest in non-monogamy increased, with the first international academic conference for consensual non-monogamies, the International Conference on Polyamory and Mono-Normativity, held in 2005 at the University of Hamburg (Ritchie & Barker, 2006). The following year, a special topics issue focused on polyamory was released in the journal *Sexualities* (Haritaworn et al., 2006). In 2010, the first edited collection on the research and theory of different forms of consensual non-monogamy was published (Barker & Langdridge, 2010a). In 2013, the first International Academic Polyamory Conference was held in Berkeley, California. Increased academic interest is evidenced by the ever-expanding polyamory Yahoo group created for the discussion of research and theory on polyamory (PolyResearchers, 2009),

which has over 400 worldwide members from diverse disciplines such as religious studies, women's studies, anthropology, and physics. Additionally, the Kinsey Institute has a growing collection of resources on polyamory, which contains over 200 theses, books, and articles regarding consensual non-monogamies (Haslam, 2005-2013).

The topic of polyamory has gone from being a relatively unknown subject to an impressive collection of scholarship (Barker & Langdridge, 2010b). Polyamory is carving out its own space in diverse academic fields such as psychology (Bettinger, 2005; LaSala, 2001; Shernoff, 2006; Weitzman, 2006), sexuality studies (Haritaworn et al., 2006), sociology (Shannon & Willis, 2010; Sheff, 2014), rhetoric and composition studies (Trahan, 2014), dance therapy (Chatara-Middleton, 2012), law (Black, 2006; Tweedy, 2010), and geography (Wilkinson, 2010). The majority of academic work on consensual non-monogamies focused on polyamory, gay open relationships, and swinging (Barker & Langdridge, 2010b). Thus, according to Trahan (2014), polyamory may be "hanging in the balance between being a 'new' conversation and one that has already been blazed" (p. 53). The study of polyamory has been particularly significant for the mental health field, as it has helped to contribute to the field's value of diversity by providing a greater understanding of emotions, such as jealousy and love, and the structure and management of non-traditional relationships and families (Weitzman, 2006).

Themes Across the Scholarship

Scholars have analyzed the identity, practice, philosophy, and culture of polyamory, as well as how these factors relate to social justice issues such as heteronormativity and mononormativity (Conley, Moors, Matsick, & Ziegler, 2013;

Klesse, 2014; Rambukkana, 2004). Scholars have explored diverse narratives of individuals engaging in nontraditional styles of having relationships and connection, and the implications and benefits of living outside the norm. Scholarship on polyamory has also addressed “issues of systemic inequality,” the inherent privilege of the monogamous dyad, and the intersectionality of race, class, gender, and other social locations (Haritaworn et al., 2006; Noël, 2006, p. 617). Research within the topic of polyamory has also been important in the study of how certain emotions, such as jealousy and love, function and are regulated in non-monogamous relationships, as well as how non-monogamous families structure and negotiate complex relationship processes (Sheff, 2014; Wolfe, 2013). The following subsections outline the prominent academic themes that are common throughout the extant polyamory literature.

Critique of Mononormativity Theme

Polyamory is an attractive relational model for many people in diverse communities because it envisions alternatives to couple-based monogamy (Klesse, 2011). Thus, it is no surprise that one of the most popular themes across academic scholarship is the hegemonic force of mononormativity. As previously stated, in the 1960s, the sexual revolution and other important rights-based social movements led to increased exploration of gender, sexuality, and race (Noël, 2006). In the 1990s, polyamory emerged from this cultural context as a relationship structure that confronted the normative heterosexual, dyadic, monogamous ideal.

Despite widespread support of monogamy as the healthy ideal method of performing a romantic relationship, the construct of monogamy lacks a stable definition

(Conley, Ziegler et al., 2013). This lack of consistency is reflective of the privilege inherent in identifying as monogamous, as one does not have to identify private behaviors that are deemed “normal.” In 2005, Pieper and Bauer originally coined the term *mononormativity* to highlight the dominant assumption that monogamy is the only natural and legitimate way of practicing and managing relationships (Barker & Langdrige, 2010a). Bauer (2010) described mononormativity as a mechanism that creates a “mono-normative matrix.” The mono-normative matrix is a

complex power relation, which (re)produces hierarchically arranged patterns of intimate relationships and devalues, marginalizes, excludes and “others” those patterns of intimacy which do not correspond to the normative apparatus of the monogamous model. Mono-normativity is based on the taken for granted allegation that monogamy and couple-shaped arranged relationships are the principle of social relations per se, an essential foundation of human existence and the elementary, almost natural pattern of living together. From this perspective, every relationship which does not represent this pattern, is being ascribed the status of the other, of deviation, of pathology, in need of explanation or is being ignored, hidden, avoided and marginalized. (Bauer, 2010, p. 145)

The assumption that monogamy is the only healthy way of being in a romantic relationship has gone relatively unchallenged in the dominant discourse with limited exploration of alternatives to dyadic systems. Mint (2004) stated that “monogamy functions as a hidden assumption, ever-present and unexamined” (p. 72). Furthermore, monogamy is a norm that has been maintained and perpetuated by governmental laws,

religious organizations, school systems, and health professions, including the mental health field (Pallotta-Chiarolli, 2010; Ritchie & Barker, 2006). Thus, because polyamory is non-normative, polyamorous people face psychological challenges that are unique and significant. Such challenges include social stigma, loss of social support, legal consequences, and internalized feelings of shame due to holding an identity that is marginalized and pathologized (Weitzman, 2006). These challenges are mitigated, and compounded, by the fact that polyamorous relationships can be hidden from others (Peace, 2012). Rambukkana (2004) and Ravenscroft (2004) suggested that due to fear of negative consequences, many polyamorous individuals hide their relationship status to avoid “serious social and legal consequences such as loss of friends, jobs, and the custody of children” (Ravenscroft, 2004, p. 148). With the creation of the term *mononormativity*, scholars were able to explore and describe these complex processes, which are often embedded in systems of oppression and founded on social ideals of morality and tradition. Like mononormativity, the term *compulsory monogamy* is ubiquitous across the extant polyamory scholarship (Emens, 2004; Mint, 2013). “Compulsory monogamy is a cultural norm that is maintained by its opposite—infidelity—and renders invisible, stigmatizes, and others relationships” that are not defined by dyadic structure and monogamy (Peace, 2012, p. 1). Without awareness of such pervasive cultural values, psychotherapists run the risk of maintaining these cultural assumptions that invalidate and stigmatize polyamorous people and relationships.

Taking a broader perspective, political critiques of mononormativity also discuss how the exclusive focus on the self and the dyadic relationship keep people from a

broader critical examination of society. This limiting capability of monogamy for all individuals was discussed in Kipnis' (2003) work, *Against Love*, in which dyadic relationships are argued to serve power structures that enforce conformity and prioritize certain forms of love over others. Scholars have also critiqued monogamy as being a fundamentally patriarchal and capitalist institution (Barker & Ritchie, 2007). Consequently, polyamory, as an intimate or erotic practice, challenges the cultural norm of compulsory heteronormative monogamy. However, Klesse (2011) argued that while polyamory challenges the structure of monogamy, it does not directly challenge the concept of the centrality of romantic love, which continues to position monogamy and the long-term couple as ideal.

Feminist and Marxist arguments have been used to defend alternative relationship styles like polyamory and other consensual non-monogamous relationships (Barker & Langdridge, 2010b). Feminist critiques of mononormativity have focused on the repression of female sexual autonomy by social repression (Jackson & Scott, 2004). These arguments are expressed in Robinson's (1997) statement that monogamy "privileges the interests of both men and capitalism, operating as it does through the mechanisms of exclusivity, possessiveness and jealousy, all filtered through the rose-tinted lens of romance" (p. 144). Specifically, jealousy has been conceptualized as maintaining social and economic order within the institution of monogamy (Ziegler et al., 2014). Mint (2010) and Robinson (1997) explored how jealousy in relationships can be a factor that keeps women dependent on men due to their need for financial and emotional support in a patriarchal and capitalist society; they argued that monogamy creates

jealousy due to the conceptualization that love is a finite resource. Therefore, jealousy reinforces women's dependence on men for emotional and financial support, which promotes justifying inequity and positions jealousy as a positive emotion in monogamous relationships (Ziegler et al., 2014).

Rosa (1994) joined Robinson in taking a feminist stance against mononormativity, arguing that the insistence on dyadic relationships isolates and limits women in their ability to engage in other relationships such as friendships and community network relations, thereby reducing the possibility for political activism that might challenge this dominant discourse (Barker & Ritchie, 2007). For example, Anapol (1997) discussed how her own marriages had problems of "domination, control, jealousy and dependency" (p. 123). These experiences led her to explore polyamory by challenging "cultural patterns of control, as well as ownership and property rights between persons, and replacing them with a family milieu of unconditional love, trust and respect" (Anapol, 1997, p. 152). Relationship styles such as polyamory have been proposed as alternatives to monogamy because they allow for more connection, particularly for women, who theoretically would be less isolated and more empowered compared to traditional monogamous systems of ownership (Jackson & Scott, 2004).

Like the term *heteronormativity*, the term *mononormativity* has helped scholars discuss systems of morality, ethics, and privilege and addresses questions such as why one relationship style inexplicably restricts many legal and social benefits to some individuals but not others. Mononormativity positions polyamory and other alternative relationship styles as a pressing and relevant issue for the social justice movement as it is

generally a taken-for-granted, restrictive, and destructive system in our society.

Currently, in Western cultures, individual sexual choices have a significant impact on the legal, economic, health, and parental rights that are afforded to individuals. By exploring the culturally constructed assumption that the monogamous dyadic form is the “natural pattern of living together” (Bauer, 2010, p. 145), those who have been marginalized and silenced are given a chance to express new ways of relating to others and being in relationships outside the conventional ideal (Wilkinson, 2010). According to Trahan (2014), “mononormativity helps us make sense of why polyamory is such a pressing and relevant issue for those scholars concerned with social justice” (p. 60).

Political/Activism Theme

A robust theme throughout the scholarship on polyamory is the appeal that writing and theory move beyond celebrating personal choices and take a more political or activist stance. Klesse (2011) made the argument that compared to “the primarily political rejection of monogamy in 1970s feminist discourse, contemporary poly literature often lacks a structural analysis of power or appeals to collective action” (p. 15). Based on such analysis, across the literature there is a “call for building activist coalitions with other minority groups, social justice groups, or other organizations of people who oppose hegemonies and oppressive structural relations in various forms” (Trahan, 2014, p. 54). Wilkinson (2010) argued that if polyamory is to evolve, it must recognize broader systems of power and oppression, such as the relationship among mononormativity, capitalism, patriarchy, and the experience of freedom in our society. Wilkinson’s work pushes us to take a social justice approach to polyamory by

conceptualizing the personal relational choices people make as public “sites of resistance,” which give us a platform to “challenge wider hierarchies of power” (p. 252). Trahan (2014) indicated that we should not overlook the link between the sexual and the social as a way to reveal oppressive systems that are concealed by the assumed “natural” norms regarding relationships among humans. According to Weiss (2011), “thinking [of] sexuality as a social relation, then, means understanding sexuality is resolutely social, rather than private, or personal, or trivial” (p. 7).

Other scholars writing in this theme have called attention to agency and the need for polyamorist theorists and practitioners to form working relationships with other activist and political groups, placing emphasis around being inclusive, aware of multiple identities, and creating an environment of coming together to advocate for social issues. For example, human sexualities scholar Noël (2006), called attention to the lack of critical analysis in available texts written about polyamory. She stated that the majority of available literature is limited in its ability to meaningfully challenge or change systemic issues because of its “pervasive focus on individual choice and personal agency” (p. 604).

In her analysis of polyamory literature, Noël (2006) found an overwhelming proportion of texts presented a favorable view of polyamory and most of the authors failed to “meaningfully move the discussion beyond a discourse of individual agency” (p. 608). Many authors promote exclusively successful views of polyamory, likely due to the desire to protect the relationship style from criticism and open debate as a result of the marginalized status of those who identify as such. Noël critiqued how an overly positive view of polyamory can mask issues related to social and sexual agency in which some

individuals are empowered to choose non-monogamy while others are not afforded the same choices due to restrictive racialized, gendered, and classed locations. She found that the majority of texts reduce polyamory to a discourse of issues that exclusively address the concerns of “White, middle-class, college-educated individuals and fail to meaningfully collaborate with others around common goals,” which “greatly limits its potential to transform relationships, families and communities currently rooted in systemic oppressions” (Noël, 2006, p. 615). Overall, Noël indicated that polyamory scholarship needs a more intersectional analysis by considering diversity issues and ways to increase building bridges with other groups interested in promoting social justice initiatives, such as lesbian, gay male, bisexual, transgender, and queer communities.

One of the few early authors to discuss intersecting issues around race, class, and gender was Pallotta-Chiarolli (1995) whose work explored the potential for exploitive and coerced non-monogamy in our social system of patriarchal privilege. She also discussed “how women are ill-prepared, as gendered subjects raised in this society, to deal with the potential losses—personally, socially, economically” of an alternative relationship style (Pallotta-Chiarolli, 1995, p. 51). In order to specifically address intersecting economic, racial, structural, and cultural oppressions facing marginalized sexual identities, Phelan (1994) stated that scholars need to be more “getting specific” about examining our multiple identities and how these factors relate to existing systemic political, legal, and social barriers to “reveal potential linkages and possibilities for immediate action in our individual lives” (p. xx, as cited in Noël, 2006). Klesse (2005) recommended that “communities built around dominant homogenous identities overcome

their self-complacency, actively welcome and enable diversity, and move towards a ‘politics of difference’” (p. 460). The extent to which polyamorous communities accept sexually diverse members, such as gay, bisexual, and transgender members could be seen as a step towards a “politics of difference” in which heteronormativity is challenged (Klesse, 2011). However, factors other than sexuality should also be considered.

Since Noël’s (2006) critique, more authors are positioning polyamory within the larger cultural context by attempting inclusivity through analyzing intersectional identities, such as disability, race, and class and applying the concept of polyamory to systems of oppression (Iantaffi, 2010; Riggs, 2010). For example, Sheff (2005) found that “while all polyamorous women in the sample faced the social risks of stigma, the women of color felt at greater risk of stigma and consequences for engaging in polyamory than did the White women” (p. 277). Recently, literature addressing the hegemonic force of monogamy has taken on a more radical stance as anarchist politics (Shannon & Willis, 2010) and queer theory (Trahan, 2014) have been applied to challenge “concepts of static, singular selves and relationships, the prioritizing of certain forms of love and intimacy, and the potential for possession and ownership of others” (Barker & Langdridge, 2010b, p. 753).

By exploring how all human beings do not have equal access to make relationship choices due to historical and cultural contexts, polyamory gets closer to “realizing its revolutionary potential to build coalitions and inclusive norms across identity groups in order to transform oppressive systemic relationship and family structures” (Noël, 2006, p. 615). Drawing on Black, postcolonial, and anti-racist feminist theories, Haritaworn et

al. (2006) also asked scholars to examine polyamory with a focus on power relations within these relationships with an intersectional perspective. Thus, scholars need to ask questions such as, “How do the politics of difference and the body play themselves out in non-monogamous relationships?” (Haritaworn et al., 2006, p. 517).

Across many different fields of study, the call for a more political analysis from polyamory scholars has impacted the visibility of non-monogamy and created a political label by which individuals are able to move through personal agency to challenge systemic oppression. Instead of creating boundaries, these authors are calling for more complex and fluid explorations of how polyamory is connected to systems of oppression, including monogamy and heteronormativity, and how identities are interconnected. Butler (1990) wrote that non-normative sexualities should not focus on overthrowing normative structures, like language, but rather such groups should explore the power of performativity to enact gender and sexuality in intentional and revolutionary ways that “displace” normative categories. Polyamory forces people to question the taken-for-granted premise of sexuality; it creates a meaningful daily performance that challenges and integrates structures of normativity while creating a new paradigm with the potential to “locate us all in a relationship to a range of people, all of whom stand in differing positions to our own, and to all of whom we are variously accountable” (Riggs, 2010, p. 196).

Creation of Language Theme

Taking a social constructionist approach, one understanding of sexuality can be conceptualized as developing from the terms or concepts that are available to us at a

given time and place in our culture (Weeks, 2003). How we come to understand ourselves, sexual identity, emotions, and relationships depends on the language available to describe such concepts (Burr, 1995). Scholars in the field of polyamory often reflect on the power of language to the lesbian, gay, bisexual, transgender, and queer movement, indicating how powerful the creation and adoption of certain terms has been to nonheterosexual communities. Such scholarship for polyamory discusses the importance of language in creating more inclusive terms “to express identities and experiences and to claim community, rights and recognition” for polyamorous communities (Ritchie & Barker, 2006, p. 585). Ritchie and Barker (2006) discussed the ways in which members of polyamorous communities construct and describe nonnormative sexual identities through language in their article. The emergence of the label *polyamory* in the early 1990s was important in developing a public expression of this relationship style as a real sexual identity. Through the creation of a legitimate term, polyamorous individuals are able to establish a clear social identity, which allows for the creation of community, support, and security (Ritchie & Barker, 2006). According to Burr (1995), language has the ability to help us define and understand our world by making sense of our experiences. Although existing norms regarding sexual identity, values, and ethics shape and possibly constrain our understanding of life experiences, people rework and invent language for previously unnamed experiences (Ritchie & Barker, 2006).

Some researchers have explored how reclaiming once derogatory terms such as *slut* or the creation of neologisms created by the polyamorous community help describe new kinds of identities, while also creating new ways of practicing relationships (Bauer,

2010; Easton & Liszt, 1997; Klesse, 2006; Ritchie & Barker, 2006). For example, Ritchie and Barker (2006) discussed how the language of sexual identity is a fluid and multidirectional process in which language and action are able to influence each other; terms in polyamory may have been coined to explain actions already occurring, or neologisms may have lead to new actions in ways of being in and understanding relationships. Some of the terms that have been coined by polyamorous practitioners are *wibble*, *metamour*, and *compersion* (Ritchie & Barker, 2006; Sheff, 2006). The term *metamour* or an *other's significant other* (OSO) was developed to create a positive title to describe the nonsexual relationship between the partners of a polyamorous person. It may be positioned in comparison to negative mononormative terms, such as when the partner of a partner is given the title of "the other woman." Metamours are individuals who are not engaging in a sexual relationship, but share a common partner, and they tend to be acquaintances or friends. By creating the term *metamour*, having multiple partners can be described as ethical, healthy, and legitimate. The term *wibble* is a verb describing an emotion that occurs when one person feels negative or anxious about their partner being in relationship with someone else. Having a word to describe the anxiety a partner may be experiencing allows for more validation and normalization in addressing insecurity or the need for clarification without resorting to anger, manipulation, or blame. The term *wibbly* also helps to mediate jealousy and possessiveness, which are two emotions originating from mononormativity that are actively avoided in polyamorous relationships (Sheff, 2014). The term *compersion* describes the joy that a person experiences when their lover is in another fulfilling relationship. *Compersion* is a word that also disrupts the

traditional understanding of possession and jealousy by asking polyamorous individuals not to be threatened if another person can fulfill certain of their partner's needs, but to practice reacting positively to a lover's ability to experience connection with others (McCullough & Hall, 2003; Ritchie & Barker, 2006). Another common term in polyamorous communities is the idea of *new relationship energy* (NRE). NRE is not specific to polyamory, but Stewart, a polyamorous practitioner, coined the term in the mid 1980s to describe the overwhelming rush of sexual and emotional energy characteristic of new relationships (Sheff, 2014). According to Stewart (2001), the term was created to represent "a concept and perspective on relationship dynamics" and that "NRE underlies many dynamics in the dating game, in serial monogamy, and in extramarital affairs" (para. 3 & 4). Instead of being threatened by NRE, polyamory urges practitioners to accept NRE as a positive aspect in that it can bring zest to established relationships and spread happiness to multiple partners. By shifting established notions of romantic relationships through language, words created by the polyamorous community may be conceptualized as "powerful, intentional discursive acts" that help to describe and create new ways of doing nontraditional relationships (Trahan, 2014, p. 64).

Not all polyamory neologisms have been created by polyamorous practitioners; scholars have also worked to create terms to describe relational concepts that explain the experiences of their participants and the communities with whom they interact. For example, Sheff (2014), described *polyamorous possibility* as "the mind-set that acknowledges the potential to love multiple people at the same time, or the awareness of polyamory as a relationship option" (p. 21). Sheff explained the implication of a

polyamorous possibility is that individuals might experience fear and discomfort, apathy, or excitement in reaction to the realization that after recognizing this possibility one “can never again be unaware of consensual non-monogamy as an option” (p. 21). Sheff (2006) also coined the term *polyaffective* to “describe emotionally intimate, non-sexual relationships among polyamorists” (p. 640). She described how, as a society, we tend to prioritize sexual relationships but that emotional relationships are equally important for need fulfillment.

Terms such as these are important in challenging the coding of monogamy as stable, normal, and mature, and polyamory as immature, abnormal, and unhealthy (Saxey, 2010). Through the creation of new terms, dominant relational assumptions that were blindly accepted must be reexamined; this creates the possibility for new positive reactions to nontraditional sexualities and the possibility for new paradigms of interpersonal connection and romantic interaction (Zambrano, 1999).

Working with Polyamorous Clients

Within the literature, there is also a small body of work related to psychotherapy. These texts tend to work to depathologize polyamory and provide clinical advice to mental health professionals working with polyamorous clients. Although this literature is limited, there are a growing number of resources that are available to assist psychotherapists in working with clients who engage in open relationships. Many psychologists and marriage and family therapists have added to the available literature through their use of anecdotal evidence and clinical experiences working with clients who identify their relationship structure as consensually non-monogamous. Two popular

resources for working with polyamorous clients include the paper “Therapy with Clients who are Bisexual and Polyamorous” by Weitzman (2006) and “Working with Polyamorous Clients in the Clinical Setting” by Davidson (2002). These papers have since been combined and updated into a booklet titled “What Psychology Professionals Should Know About Polyamory” (Weitzman et al., 2009). As a guide for psychotherapists, research and information is provided about the benefits and purpose of polyamory, emotional and social concerns for polyamorous clients, and ways psychotherapists can examine their own value systems regarding sexuality and mononormativity (Weitzman et al., 2009). In addition to these resources, other individuals have contributed to the available literature regarding how psychotherapists can effectively work with clients who identify with non-traditional relationship models (see Anapol, 2010; Barker, 2011; Barker, 2013b; Berry & Barker, 2014; Finn, Tunariu, & Lee, 2012; Girard & Brownlee, 2015; Moors & Schechinger, 2014; Nichols & Shernoff, 2007; Richards & Barker, 2013, Zimmerman, 2012). Although each resource offers unique information and recommendations, there are two common themes that emerge. First, psychotherapists are advised to acknowledge the different types of open relationships by acknowledging the diversity and variance in this relationship style. Second, many articles report common concerns reported by individuals who identify as practicing consensual non-monogamy (Moors & Schechinger). Common concerns are: managing stigma or discrimination, the lack of an external support group, identifying an ideal relationship structure, negotiating the boundaries of the relationship or relationships, managing jealousy and ambiguity, and exploring and processing the coming-out process.

As polyamory has become more visible, resources for working with polyamorous clients have increased, as have resources for clients seeking polyamory-friendly and knowledgeable psychotherapists. Although resources have increased, mental health professionals continue to face challenges in receiving training or guidance for this population. The majority of graduate programs for mental health training do not address the unique needs and complexities of polyamorous clients and couples through curricula, practica, or internships; additionally, the majority of textbooks regarding family systems, couples therapy, and sexuality do not mention polyamory (Weitzman, 2006). Furthermore, research on how to practice therapy with polyamorous individuals is lacking and there is a dearth of evidence-based treatment protocols for polyamorous clients (McCoy et al., 2015). Without evidence-based research, psychotherapists will have a difficult time ethically prescribing interventions and will likely need to tailor interventions that were created for monogamous couples or clients (McCoy et al.).

According to Davidson's (2002) electronic journal publication, longer human life spans, high divorce and infidelity rates, limitations of serial monogamy, growing economic and social equality for women, acceptance of sex-positive practices, and the expansion of access to sex-positive cultures through the internet has created a current surge of interest in polyamory. Such issues must be addressed by clinicians as clients navigate new relationship models. As polyamory is developing into a worldwide cultural movement, therapists are more likely to work with consensually non-monogamous clients. Resources for psychotherapists working with non-monogamous clients are invaluable, as Weitzman and colleagues (2009) pointed out that "if psychotherapy is to

enable persons to explore options and life experience in a neutral or supportive, affirming environment that encourages self-responsibility” (p. 27), then therapists working with such clients must explore their own personal and professional bias if they are to remain competent and supportive practitioners for this growing, and often marginalized, population.

Other Themes and Limitations of Current Literature

There are many diverse themes across polyamory scholarship. I have addressed four main theme categories: the critique of mononormativity, political activism, creation of language, and working with polyamorous clients, but there are many other issues that are still important to the discussion of polyamory. The centrality of love is a common theme within the polyamory literature (Klesse, 2011). Love is often portrayed in such discourses as an unlimited resource that has the potential to heal and transform the way humans relate to each other and the world around them (e.g., family, friendships, community, respect for the earth; Wilkinson, 2010). In this way, polyamory may take a spiritual form in which love transcends romantic life and becomes more of a way of being in the world (Aviram, 2010; Robins, 2004). Other popular themes within the literature are polyamory as an identity or an orientation (Barker, 2005); polyamorous families (Riggs, 2006; Sheff 2010, 2014); polyamory and gay marriage (Aviram, 2007; Emens, 2004); feminist perspectives of polyamory (Allegra, 1999; Ritchie & Barker, 2007); the connection between the trans-community and polyamory (Richards, 2010); strategies/rules implemented in polyamorous relationships (Wosick-Correa, 2010); the importance of sex in prioritizing and categorizing relationships (Scherrer, 2010); BDSM

and polyamory (Bauer, 2010; Sheff & Hammers, 2011); identity development (Peace, 2012); and need fulfillment in polyamorous relationships (Mitchell et al., 2014).

Some studies have explored and measured the mental health and relational qualities of individuals in non-monogamous relationships. Watson (1981) found that polyamorous individuals did not differ significantly when compared to monogamous individuals when asked to take the California Psychological Inventory and Symptom Checklist. Kurdek and Schmitt (1986) also asked polyamorous and monogamous individuals to take the Symptom Checklist 90 and the results did not indicate any significant difference between the groups. Rubin (1982) asked monogamous and polyamorous couples to take the Dyadic Adjustment Scale and found that polyamorous couples scored similarly in marital adjustment and happiness. Buunk (1980) found that polyamorous couples had normal levels of marriage satisfaction and self-esteem, while Rubin and Adams (1986) found that polyamorous couples were similar to monogamous couples on the longevity of their relationships and that if the relationship ended, it was for similar reasons as monogamous couples and was not about the polyamory specifically (Ramey, 1975). Bricker and Horne (2007) found that among monogamous and non-monogamous gay, partnered, male participants, non-monogamous and monogamous participants were similar in their frequency of sex with their primary partners, stated relationship satisfaction, sexual satisfaction, and attachment style. Of these studies, none have found empirical evidence to indicate that individuals practicing polyamory or non-monogamy have elevated rates of psychopathology, nor is there evidence that

polyamorous relationships are unhealthy or unsatisfying (Morrison, Beaulieu, Brockman, & Beaglaioich, 2013).

Psychotherapists' Attitudes

Across the literature, there is limited research that directly targets working with polyamorous clients and couples, with many texts focusing on psychotherapy with clients who identify as non-monogamous and bisexual or gay (Bettinger, 2005; LaSala, 2001; Weitzman, 2006). Additionally, there is a dearth of research addressing therapists' perceptions of working with polyamorous individuals in the therapeutic setting. Groundbreaking research in this vein of literature occurred in the 1970s by Knapp (1975), who used survey methodology to explore attitudes and biases of marriage and family counselors towards non-monogamous clients. Knapp found that one-third of the therapists in the sample reported that individuals in open relationships likely suffered from some form of psychopathology, such as a personality disorder or neurotic tendency, and almost 20% indicated that as psychotherapists they would try to influence a return to a monogamous lifestyle and were more likely to pathologize non-monogamous clients compared to clients who had cheated with extramarital affairs. Similarly, Hymer and Rubin (1982) found psychotherapists' negative bias continued to overshadow positive evaluations towards non-monogamous clients, with psychotherapists' assumptions about fear of intimacy, poor attachment styles, and unfulfilling marriages being reported more frequently than positive attitudes. Anapol (2010) found that some psychotherapists still believe that consensual non-monogamy prevents attachment bonds from forming and is therefore unhealthy for the relationship. Ford and Hendrick (2003) explored

psychotherapists' sexual values for themselves and clients, on topics such as open marriages, and other sexual categories. They found that many psychotherapists valued "sex as an expression of love and commitment, and fidelity and monogamy in marital relationships and committed life partnerships" (Ford & Hendrick, 2003, p. 84). Psychotherapists also reported that although they received graduate or postgraduate training on the topic of sexuality, they were only "neutral" when asked if their training was adequate (Ford & Hendrick, 2003). Finn and colleagues (2012) interviewed 17 psychotherapists who all had professional experience working with non-monogamies. The researchers stated that they targeted participants who presented themselves as "affirmative" of non-monogamies in some way. Results indicated that these psychotherapists identified their clinical responses to open non-monogamy as being non-directive and non-pathologizing. While results such as the previous findings are encouraging, Weitzman (2007) pointed out that "mental health practitioners typically do not receive any training on how to work with polyamorous clients. Textbooks on family functioning don't typically mention it, and the diversity literature doesn't usually incorporate it" (p. 313). Thus, while there has been an increase in acceptance for consensual non-monogamies since the rejection of the illness model of homosexuality in the 1970s within the U.S., "the issue of sexual values and therapy has been neglected" in training and research (Ford & Hendrick, 2003, p. 80).

Following Knapp's pioneering study, scholars have also explored perceptions of psychotherapy among polyamorous clients. For example, Rubin and Adams (1978, unpublished study, as cited in Hymer & Rubin, 1982) found that 27% of non-

monogamous individuals who had sought therapy reported that their psychotherapists did not support their relationship choices. In 2002, Weber found that 38% of polyamorous participants had chosen to not disclose their polyamorous identity and that 10% of the participants stated that they had a previous negative response from a psychotherapist when they did disclose. Page (2004) reported that many of her bisexual participants, who also identified as polyamorous, reported difficulty finding a supportive therapist. To show the juxtaposition of acceptance and covert or overt hostility towards polyamory that polyamorous clients may experience, Marano (2009) is quoted from an advice column in *Psychology Today* as she responded to a reader's online question "Can an open relationship work?"

The short answer is no. At least not for the long haul. Sooner or later someone will start forming an outside attachment that will threaten the marriage, or one partner will tire of hearing the other's experiences. . . . If you are so creative, why don't you put that energy into the existing relationship and use the trust between you as a springboard for endless inner and outer exploration and excitement? Of course, it takes guts; it's much easier to look outside for excitement than to find the source within. (para. 2)

Purpose of the Study

The purpose of this study was to design a new measure to assess the attitudes of psychotherapists toward polyamory. This instrument was intended to measure (a) awareness of polyamory, (b) beliefs about the origin of polyamory, (c) beliefs about the health or pathology of polyamory, (d) problems presumed to be associated with

polyamory, (e) beliefs about treatment with polyamorous clients, and (f) personal bias towards polyamory.

As a group, polyamorists value communication and self-growth and may seek therapy for assistance with their relationships and individual psychological challenges (Peace, 2012). Weitzman (2007) noted that therapists often assume that clients are monogamous in their sexual/romantic relationships because mononormativity is a social norm, and therapists are not immune to unquestioned mainstream cultural values that privilege monogamy and pathologize any other relationship structure. However, polyamory is a growing community that challenges “most accepted psychological theories [that] propose ‘natural’ human development as the process of forging a monogamous partnership with someone of the opposite [*sic*] sex and starting a ‘biological family’” (Barker, 2005, p. 77). Many individuals who practice consensual nonmonogamy have reported encountering a number of problematic issues in therapy, such as the therapist assuming monogamy, lacking knowledge of consensual nonmonogamy, inaccurately attributing issues to the relationship structure, using therapeutic time to teach the therapist about their lifestyle, feeling pressured to return to a monogamous relationship style, and encountering overt disapproval with therapists indicating that the relationship was sick, inferior, or bad (Schechinger, unpublished, as cited in Moors & Schechinger, 2014).

Research exploring the competency and efficacy of psychotherapists in addressing sexual issues indicated that there is a lack of exposure to, and comfort with, non-normative sexualities (Graham, 2014). Research has shown that a lack of awareness

and comfort working with sexuality and sex is correlated with poor treatment efficacy. Miller and Byers (2012) found that clinicians in their study who had more graduate training for sex therapy obtained significantly more education regarding sexuality following internship and this finding was associated with a higher level of skill for addressing sexual issues and sex in session as well as with the engagement of significantly more intervention behaviors in session. Ligiéro and Gelso (2002) also found that negative countertransference by psychotherapists towards clients was associated with poorer working alliances, and positive countertransference was related to a weak bond within the working alliance; thus, when therapists are unaware of thoughts or feelings toward a client, negative and positive countertransference has the potential to impact the working alliance and to interfere with the provision of effective treatment. Additionally, a lack of multicultural awareness for polyamory can lead to “a lack of objectivity, inadvertent criticism and potential pathologization of individuals, damaged therapeutic alliances, resultant treatment non-adherence, and potentially poorer patient outcomes” (Graham, 2014, p. 1032). Members of the polyamorous community are subjected to bias and stigma due to the non-normative nature of their relationships and may seek mental health services to address diverse issues such as issues related to identity, internalized beliefs about monogamy, personal growth, discrimination, relationships, and psychological issues such as anxiety and depression (Peace, 2012). Despite this need for psychotherapy, education and research about therapists’ perceptions and comfort working with polyamorists as a marginalized, sexual minority groups are lacking.

There have only been a few studies that investigated psychotherapists' attitudes and experiences regarding consensual non-monogamy, and the majority of such work occurred in the 1970s and 1980s. Although there have been previous studies exploring psychotherapists' attitudes toward non-monogamy, there has not been a published study that uses the term *polyamory* or focuses attention exclusively on psychotherapists' perceptions of polyamorous relationships. Based on findings that polyamorous individuals face discrimination from society, as well as being misunderstood by psychotherapists, it is important to investigate psychotherapists' beliefs and confidence in working with polyamorous clients. Research indicates that psychotherapists' behavior is often a product of their values and attitudes (Rønnestad & Skovholt, 2003). With the potential to create harmful therapeutic experiences, and the dearth of research examining psychotherapists' experiences towards polyamory, it is important to address multicultural awareness and competency for this growing population.

Thus, I proposed a quantitative study to develop a valid and reliable instrument to measure psychotherapists' attitudes towards polyamory. This instrument is used to explore current psychotherapists' attitudes and experiences with polyamory and polyamorous clients in an effort to assess how our field's emphasis on multicultural awareness has impacted current perspectives on polyamory compared to the early studies of Knapp (1975) and Hymer and Rubin (1982).

Research Questions

The following questions guided the framework for designing a new measure:

1. Is the Psychotherapists' Attitudes towards Polyamory Scale (PAPS) a valid and

reliable instrument to use for the exploration of psychotherapists' attitudes towards polyamory and polyamorous clients?

2. What are the factors that underlie the construct of psychotherapists' attitudes toward polyamory and polyamorous clients?

CHAPTER III

METHOD

The primary purpose of this study was to create a new valid and reliable instrument to measure psychotherapists' attitudes toward polyamory. The focus of this study was the psychometric assessment of this new measure. This chapter outlines the methodology for the current study. Participant criteria and demographics, instrumentation used, the procedure of the study, and the hypotheses and statistical design are discussed.

Participants

Participation was limited to adults who (a) were at least 18 years old; (b) were currently in graduate training or had completed training in a counseling, clinical, or related mental health graduate program; and (c) had completed at least one practicum course. Participants were assumed to be able to read English.

There are various guidelines regarding the minimum acceptable sample size for a factor analysis. Some researchers recommend a ratio of 20 participants per scale item (Hair, Anderson, Tatham, & Black, 1995) whereas others have estimated that the subjects-to-variables ratio should be no lower than five participants per item (Bryant & Yarnold, 1995). The sample size for the current study followed guidelines recommending there should be at least 5 cases for each item for the instrument being used (Bryant & Yarnold, 1995). According to Bryant and Yarnold's recommendation, the goal for data collection was five participants per 33 items. Therefore, the sample size was set at 165 participants.

Instrumentation

Demographic Form

Participants were asked to complete a demographic questionnaire. The questionnaire asked participants to specify their age, sex, gender, ethnicity, sexual orientation, relationship status, self-identified religious practice (if any), and level of religiosity (ranging from 0 = *not religious* to 4 = *very religious*). Items also asked participants to define their professional characteristics (e.g., degree, licensure, years of practice), political and social values, experience with polyamory, competency to work with polyamorous clients, amount of sexuality training, and if that training was adequate. A definition of polyamory was given to survey participants before the demographic questions. This form is provided in Appendix A.

Psychotherapists' Attitudes Towards Polyamory Scale

The Psychotherapists' Attitudes Towards Polyamory Scale (PAPS) was constructed by the author to assess various attitudes therapists hold towards polyamory and clients who engage in polyamorous relationships. The original item pool was created based on the available literature addressing psychotherapists' perceptions of consensual non-monogamy. The item categories were adapted from a scale that was constructed to measure therapists' attitudes towards clients who engaged in BDSM (Kelsey, Stiles, Spiller, & Diekhoff, 2013). The PAPS included a true-or-false response format for the first subscale, Items 1-5. The PAPS included a 5-point Likert-type scale for the rest of the 28 subscale items, ranging from 1 = *strongly disagree* to 5 = *strongly agree* with 3 = *unsure*, being a neutral answer. The 33 items consisted of a mix of positive (e.g.,

supportive/accepting) and negative (e.g., disapproving) adjectives. They were randomly ordered within the scale. These items represented positive and negative attitudes about polyamory without overly identifying with celebratory or disapproving attitudes.

Due to its recent development and similar subject matter, the Therapists' Attitudes Towards BDSM Scale (Kelsey et al., 2013) was used as a scale model. Like BDSM, polyamory can be considered a controversial sexual practice. Given that psychotherapists are not immune to socially held norms, psychotherapists' perceptions of sexual minority groups may reflect the general population's disapproval of unconventional sexual behavior. Therefore, the scale created by Kelsey and colleagues provided a general structure for the assessment of psychotherapists' attitudes towards sexual minority clients and non-normative sexual practices that can be applied to the study of polyamory.

Three subscales were adapted from Kelsey and colleagues (2013): (a) beliefs about the origin of polyamory, (b) health/pathology of polyamory, and (c) problems presumed to be associated with polyamory. Two additional subscales that were not based on Kelsey and colleagues' scale were added: (d) familiarity with polyamory and (e) personal bias.

The first subscale explored psychotherapists' awareness of polyamory. This subscale had five true-or-false items. These items were intended to measure psychotherapists' familiarity with the term or practice of polyamory. This subscale was adapted from Yost's (2010) measure, the Attitudes about Sadomasochism Scale, which measured participants' knowledge of sadomasochism with five items, such as "I have a good idea of what SM means, but I am unsure of the details" (p. 87). For example, the

first item of the PAPS asked participants to endorse a true or false response to the statement “I have never heard of polyamory before today.” See Appendix B for all items.

The second subscale explored beliefs about the origin of polyamory. This subscale had three items. Responses were made on a 5-point Likert-type scale ranging from 1 = *strongly disagree* to 5 = *strongly agree* with a neutral point of 3 = *unsure*. These items were intended to measure psychotherapists’ beliefs about how polyamory developed and were adapted from Kelsey and colleagues (2013). For example, this subscale included the item, “Polyamory is caused by attachment issues in childhood.” See Appendix B for all items.

The third subscale explored psychotherapists’ perceptions regarding the benefits or unhealthy behaviors associated with the practice of polyamory. These items were intended to measure psychotherapists’ attitudes regarding commonly held perceptions that involvement in polyamory is unhealthy and indicative of pathology. This subscale had eight items. Responses were made on a 5-point Likert-type scale ranging from 1 = *strongly disagree* to 5 = *strongly agree* with a neutral point of 3 = *unsure*. For example, one item is “Clients who engage in polyamorous relationships are acting out immature impulses.” See Appendix B for all items.

The fourth subscale explored problems presumed to be associated with the practice of polyamory. As an unconventional sexual practice, polyamorous relationships are often thought to be problematic. There were six items in this subscale. Responses were made on a 5-point Likert-type scale ranging from 1 = *strongly disagree* to 5 = *strongly agree* with a neutral point of 3 = *unsure*. For example, one item is “Having

multiple romantic partners will lead to unstable relationships.” See Appendix B for all items.

The fifth subscale explored psychotherapists’ beliefs about psychotherapy treatment regarding polyamory and polyamorous clients. This subscale intended to measure psychotherapists’ beliefs about their role in supporting or discouraging clients’ polyamorous relationships through therapy and their perceptions of “healthy” relationship models. There were six items in this subscale. Responses were made on a 5-point Likert-type scale ranging from 1 = *strongly disagree* to 5 = *strongly agree* with a neutral point of 3 = *unsure*. For example, one item is “Monogamy does not work for every client.” See Appendix B for all items.

The sixth subscale explored personal bias towards polyamory. This subscale was intended to measure psychotherapists’ comfort working with polyamorous clients and their personal attitudes or experiences regarding polyamory. This subscale consisted of five items. Responses were made on a 5-point Likert-type scale ranging from 1 = *strongly disagree* to 5 = *strongly agree* with a neutral point of 3 = *unsure*. For example, “Due to my personal discomfort with polyamory, I would refer a polyamorous client to another therapist.” See Appendix B for all items.

The PAPS consisted of a total of 33 questions. The first five items comprised the awareness subscale and were not used to calculate attitudes. The remaining 28 items on the following subscales were used to measure attitudes: (a) beliefs about the origin of polyamory, (b) health/pathology of polyamory, (c) problems presumed to be associated with polyamory, (d) beliefs about treatment, and (e) personal bias. Eleven items indicated

positive attitudes toward polyamory (e.g., “Polyamory can be a model for healthy, long-term relationships”). Seventeen items indicated negative attitudes toward polyamory (e.g., “Clients who engage in polyamory suffer from poor self-esteem and need validation”). A total attitude (TA) score was calculated by reverse coding negatively worded items so that a high value indicated the same type of response on every item, and then all items were summed for a total score. Higher TA scores indicated more positive attitudes about polyamory. Lower TA scores indicated more negative attitudes about polyamory. DeVellis’ (2003) guidelines for scale development were used as an outline for the development of the PAPS. The questionnaire was developed on the basis of existing literature on sexual minority groups, with the intent of contributing to that literature.

Attitudes Towards Polyamory Scale

The Attitudes Towards Polyamory Scale was used to measure convergent validity (Johnson, Giuliano, Herselman, & Hutzler, 2015; ATP). It was hypothesized that there would be a significant relationship between the ATP Scale and the PAPS. The ATP Scale is a brief, reliable measure of individual differences in public attitudes regarding polyamory. The ATP Scale has 7 items and uses a 7-point Likert-type scale ranging from 1 = *disagree strongly* to 7 = *agree strongly* for 7 items. The ATP Scale includes such items as “Polyamory is harmful to children,” and “I think that committed relationships with more than two individuals should have the same legal rights as married couples.” The authors reported a Cronbach’s α of .86, indicating adequate internal consistency (Johnson et al., 2015). According to Johnson and colleagues, this instrument is scored by

reverse scoring three negatively worded questions (items 1, 4, and 6) and then summing the 7 questions to create an aggregate attitude score. High scores indicate positive attitudes towards polyamory, while low scores indicate negative attitudes toward polyamory. See Appendix C for scale items.

Marlowe-Crowne Social Desirability Scale, Form C

The Marlowe-Crowne Social Desirability Scale, Form C, was used to measure discriminant validity. The Marlowe-Crowne Social Desirability Scale is a standard measure used to control for desirable response bias. It was assumed that the Marlowe-Crowne Social Desirability Scale would not be highly correlated with the PAPS and thus demonstrated that the PAPS responses were not biased by desirable responding patterns. In 1960, Crowne and Marlowe developed the Marlowe-Crowne Social Desirability Scale (Reynolds, 1982). Several modified forms were subsequently developed including Form C (M-C Form C), which is a shorter version of the original scale (Reynolds, 1982). M-C Form C has 13 items and uses a true/false rating system (e.g., “I sometimes feel resentful when I don’t get my way”). The M-C Form C was developed to assess the impact of individuals’ social desirability on self-report measures and has demonstrated concurrent validity with other measures of social desirability (Reynolds, 1982). The M-C Form C has been found to have adequate internal consistency ($\alpha = .76$) and to be significantly positively correlated ($r = .93$) with the original 33-item Marlowe-Crowne Social Desirability Scale (Reynolds, 1982). To score this instrument, items 1, 2, 3, 4, 6, 8, 11, and 12 are given a score of 0 for a true response and a 1 for a false response, while the remaining 5 items are given a score of 1 for true responses and a 0 for false responses.

Higher scores on this measure reflect a tendency of survey participants to answer self-report measures in a manner that was viewed as favorable. Social desirability bias is applicable to this study as this is a study using self-report measures assessing psychotherapists' attitudes towards sexually taboo behaviors. See Appendix D for scale items.

Procedure

The proposed method for this study was first submitted to the Institutional Review Board (IRB) for evaluation. After the study was granted approval, the instruments were uploaded on Psychdata, a website designed for the secure hosting of online research surveys (Locke & Keiser-Clark, 2012).

Participants were recruited by contacting training directors at various APA internship sites and APA-accredited clinical and counseling psychology graduate programs. Contact information for training directors for counseling psychology graduate programs were facilitated through the Council of Counseling Psychology Training Programs (CCPTP). Contact information for training directors for clinical psychology graduate programs were facilitated through the Council of University Directors of Clinical Psychology (CUDCP). Training directors were asked for their assistance in forwarding an invitation for participation by email to current graduate students, interns, and staff (Appendix E). An Excel database was created by retrieving contact information from the APA website for accredited programs and the Association of Psychology Postdoctoral and Internship Centers (APPIC) online directory for internship programs. The name of the institution, training director's name, and email contacts were collected

from each of the various training sites and entered into the Excel document. The researcher sent out individual emails to each training director for the different sites. The email (Appendix E) stated the purpose of the study, included a link to the Psychdata study, and invited participation to complete the online survey (Appendices A, B, C, D, F).

Eligible participants were also recruited through convenience sampling on Facebook and participants were asked to re-post the link to the Psychdata survey on their Facebook wall or contact other potential participants by emailing the survey link to other individuals. Additionally, directors of Master's level psychology graduate programs were contacted by email and asked to distribute the same email invitation discussed previously.

Participants were asked to click on a link to Psychdata.com that directed them to the study that contained an informed consent form (Appendix F), stating the eligibility requirements for the study and potential risks of participation. If participants self-identified as meeting eligibility requirements, they were directed to the questionnaire and survey instruments. The informed consent discussed the purpose of the study, the eligibility requirements for participation, the potential risks and benefits to the participant, and the right to terminate participation at any time. After reading and agreeing to participate in the current research study, the participants were asked to complete the demographic questionnaire (Appendix A), the Psychotherapists' Attitudes towards Polyamory Scale (Appendix B), the Attitudes Towards Polyamory Scale (Appendix C), and the Marlowe-Crowne Social Desirability Scale, Form C (Appendix D). After data collection, the provided information was downloaded, analyzed, and stored securely.

Hypotheses and Statistical Design

The researcher gathered data from Psychdata, downloaded those data from Psychdata, and entered them into the Statistical Package for the Social Sciences (SPSS). Then the data were coded and analyzed in SPSS. Prior to any statistical test, assumptions of normality and homogeneity of variance were analyzed in SPSS.

Descriptive Statistics

Descriptive statistics included the mean, range, and standard deviation for all continuous demographic variables and for all measures used in the current study. For the categorical demographic variables, frequencies and percentages were recorded. Correlations were run to show whether, and how strongly, pairs of continuous variables were related.

Reliability

Cronbach's α was used to estimate the internal consistency of the subscales of the PAPS. Cronbach's α is widely used as a measure of reliability and normally ranging between 0 and 1.0 (DeVellis, 2003). Internal consistency coefficients estimate the degree that scale scores measure the same construct. The closer Cronbach's alpha coefficient is to 1.0, the greater the internal consistency of the items in the scale. Cronbach's α was used to examine the internal consistency of each of the six subscales of the PAPS separately and all items together. George and Mallery (2003) provided the following guidelines: $\# > .9$ = excellent; $\# > .8$ = good; $\# > .7$ = acceptable; $\# > .6$ = questionable; $\# > .5$ = poor; and $\# < .5$ = unacceptable (p. 231). The expected result was that the Cronbach's alpha coefficient would be within the acceptable range of $\alpha > .70$.

Validity

Convergent and discriminant validity were assessed by comparing the PAPS to the Attitudes Towards Polyamory Scale (Johnson et al., 2015) and the Marlowe-Crowne Social Desirability Scale, Form C (Reynolds, 1982). Convergent and discriminant validity are subtypes of construct validity (Westen & Rosenthal, 2003). The correlation coefficient was used to estimate the degree to which any two measures were related to each other; patterns of intercorrelations among the PAPS, Attitudes Towards Polyamory Scale, and the M-C Form C were analyzed.

Convergent validity was estimated by comparing the PAPS to the Attitudes Towards Polyamory Scale (Johnson et al., 2015). It was predicted that the resulting pattern of correlations suggested that the variables were associated in a manner that was predictable and positively associated. It was expected that the PAPS would demonstrate convergent validity by having a significant positive correlation ($p < .05$) with the Attitudes Towards Polyamory Scale. Theoretically, both scales measure attitudes toward polyamory and thus should be positively associated.

Discriminant validity was established by comparing the relationship between theoretically unrelated constructs; the expected statistical result for discriminant validity is an absence of a significant correlation between measures (Westen & Rosenthal, 2003). Analysis of discriminant validity was computed between the PAPS and the M-C Form C (Reynolds, 1982). It was expected that the PAPS would demonstrate discriminant validity by having a non-significant correlation ($p > .10$) with the M-C Form C.

Exploratory Factor Analysis

Additional analyses were conducted to explore the factor structure of the data and to identify factors associated with perceptions of polyamory. Factor analysis is a method to determine the dimensionality of a scale (DeVellis, 2003). An exploratory factor analysis was conducted to establish the relationships between the different subscales for the Psychotherapists' Attitudes towards Polyamory Scale. It was expected that there would be a clear and systematic factor structure for the PAPS.

Research Questions and Hypotheses

The primary purpose of this research was to create a valid and reliable scale to measure psychotherapists' attitudes towards polyamory. The secondary goal of this research was to explore whether psychotherapists endorsed commonly-held negative beliefs about polyamory and to explore what variables were related to the endorsement of such attitudes. The primary research questions and hypotheses are listed below. Because the PAPS was found to be a reliable and valid measure, the following exploratory research questions and hypotheses were analyzed.

Primary Question 1 asked, "What factors are associated with psychotherapists' attitudes towards polyamory?"

Primary Hypothesis 1 predicted there would be a clear and systematic factor structure for the construct of psychotherapists' attitudes towards polyamory.

Primary Question 2 asked, "Is the PAPS a reliable measure?"

Primary Hypothesis 2 predicted the PAPS would demonstrate acceptable internal consistency by having the Cronbach's alpha coefficient fall within the acceptable range of $\alpha > .70$.

Primary Question 3 asked, "Is the PAPS a valid measure?"

Primary Hypothesis 3a predicted the PAPS would demonstrate convergent validity by having a significant positive correlation with the ATP Scale.

Primary Hypothesis 3b predicted the PAPS would demonstrate discriminant validity by having a non-significant correlation with the Marlowe-Crowne Social Desirability Scale, Form C.

Exploratory Question 1 asked, "What attitudes will psychotherapists have towards clients who identify and engage in polyamorous behaviors?"

Exploratory Hypothesis 1 predicted that some psychotherapists would hold negative attitudes towards clients who identify as polyamorous, but the majority will report positive attitudes towards polyamory.

Exploratory Question 2 asked, "Does a relationship exist between psychotherapists' conservative/ liberal values and attitudes towards polyamory?"

Exploratory Hypothesis 2 predicted that a relationship would exist between psychotherapists' political and social values and attitudes towards polyamory. More specifically, it was predicted that participants who report more liberal political and social values would also report more positive attitudes towards polyamory.

Exploratory Question 3 asked, “Does a relationship exist between psychotherapists’ reported training, prior knowledge of polyamory, and experience with polyamory and their attitudes towards polyamory?”

Exploratory Hypothesis 3 predicted that a relationship would exist between psychotherapists’ reported training, prior knowledge of polyamory, experience with polyamory, and reported attitudes towards polyamory. More specifically, based on Allport’s (1954) contact hypothesis, it was predicated that psychotherapists with more training, prior knowledge, and experiences with polyamory would endorse more positive attitudes towards polyamory.

CHAPTER IV

RESULTS

An examination of the results from this study are presented in this chapter. First, a preliminary analysis of the data and processes that were used to remove participants from this data set are described. Next, an overview of the descriptive statistics for the scales used are presented. An exploratory factor analysis is then presented and described within the context of the hypotheses and the framework of the exploratory analysis.

Preliminary Analysis

Preliminary analyses were conducted to investigate the data and describe how variables were related in this study. Variance across items in the survey was not an issue and no impossible values were found. The total participants in the final analysis were reduced from 241 participants to 171 participants. Initial screening of the data resulted in an elimination of 70 participants from the study. Thirty-three participants (14% less) were deleted from the analysis because they did not meet inclusion criteria questions: (a) “Have you completed at least one semester of supervised practicum or internship?” and (b) “Are you currently enrolled in or have you completed a graduate program in one of the following areas: Counseling, Psychology, Family Therapy, or Social Work?” Per Johnson’s (2005) recommendation that respondents who stop participating in a survey be removed if they did not complete more than 50% of the questionnaire, twenty-seven participants (13% less) were deleted for dropping out of the survey at or before 50%. Ten participants (6% less) were deleted for dropping out of the survey at 60%. Although two participants did not complete the last scale, the Marlowe-Crowne Social Desirability

Scale, Form C, these two participants were kept in the analysis as they completed 65% of the survey.

Participants completed three instruments: the Psychotherapists' Attitudes Towards Polyamory Scale, The Attitudes Towards Polyamory Scale, and the Marlowe-Crowne Social Desirability Scale, Form C. The PAPS was constructed for the purpose of this study and was used to create a scale to measure psychotherapists' attitudes towards polyamory. The ATP scale (Johnson et al., 2015) was used to assess convergent validity. The Marlowe-Crowne Social Desirability Scale, Form C (Reynolds, 1982) was used to assess discriminant validity. Scale means, standard error of mean, standard deviations, internal consistency and scale ranges were all computed and listed in Table 1. Higher scores for each of the scales indicated higher levels of the variable that were measured. Internal consistency reliabilities were 0.81 (MC-SD), 0.90 (ATP), and 0.96 (PAPS). All reliabilities exceeded the 0.70 criterion suggested by Nunnally (1978), and thus maintained adequate internal consistency reliabilities for new instruments, as well as meeting Carmines and Zeller's (1979) recommendation that "reliabilities should not be below .80 for widely used scales" (p. 51).

Table 1

Descriptive Statistics for Scales

Measure	N	<i>M</i>	<i>SD</i>	α	ActRng	PosRng
PAPS	171	104.03	16.97	.957	48 -125	33 – 165
ATP	171	36.23	9.24	.897	10 - 49	7 - 49
MC-SD	169	4.96	3.34	.807	0.0 - 12	0.0 - 12

Note. PAPS = Psychotherapists' attitudes towards polyamory scale; ATP = Attitudes towards polyamory scale; MC-SD = Marlow-Crowne social desirability, Form C; *N* = Number of participants; *M* = Mean; *SD* = Standard Deviation; α = Cronbach's alpha; ActRng = Actual Range; PosRng = Possible Range.

The categorical demographic variables in this study were sex, gender, sexual orientation, ethnicity, religion, educational level, and type of graduate program.

Frequencies and percentages of categorical demographic variables are presented in Table 2. Most participants were female ($n = 140$, 82%) than were male ($n = 29$, 17%), with two participants indicating that they were male to female transgender (1.2%). The majority of participants reported their gender as woman ($n = 133$, 78%). Over half of the participants of the sample identified as heterosexual ($n = 111$, 65%). A majority of the participants were White ($n = 131$, 77 %). When asked to report highest degree earned, 52% of participants reported completing a master's degree ($n = 88$) while 19 participants reported having completed a 4 year college degree, which may represent individuals who did not complete their graduate training, or decided to endorse this response over the option of current graduate student. In regard to graduate program type, 37% of participants were in, or graduated from, a family sciences/MFT graduate program ($n = 64$), with equal

participants reporting the same percentages for clinical psychology and counseling psychology graduate programs ($n = 38, 22\%$).

Table 2

Frequencies and Percentages of Categorical Demographic Variables

	<i>n</i>	%
<i>Sex</i>		
Female	140	81.9
Male	29	17.0
Female to Male	2	1.2
<i>Gender</i>		
Woman	133	77.8
Man	29	17.0
Transgender	2	1.2
Gender Queer	6	3.5
Androgynous	1	0.6
<i>Sexual Orientation</i>		
Heterosexual	111	64.9
Bisexual	28	16.4
Gay/lesbian	16	9.4
Pansexual	11	6.4
Other	5	2.9
<i>Ethnicity</i>		
White	131	76.6
Hispanic/ Latina/ Latino	12	7.0
African American/ Black	10	5.8
Bi-Racial	5	2.9
Asian/ Asian American	4	2.3
Middle Eastern/ Arab	2	1.2
Multi-Racial	3	1.8
Other	3	1.8
Asian Indian	1	0.6

(Continued)

	<i>n</i>	%
<i>Religion</i>		
Spiritual	39	22.8
Agnostic	32	18.7
Atheist	22	12.9
Other	22	12.9
Liberal Protestant	18	10.5
Roman Catholic	15	8.8
Jewish	11	6.4
Conservative Protestant	11	6.4
Mormon	1	.6
<i>Highest Degree Completed</i>		
Master's Degree	88	51.5
Current Grad Student	34	19.9
Psy.D./ Ph.D.	30	17.5
4 Year college/other	19	11.1
<i>Graduate Program</i>		
Family Sciences/ MFT	64	37.4
Counseling Psychology	38	22.2
Clinical Psychology	38	22.2
Counseling/ Counselor Education	23	13.5
Social Work	4	2.3
Other	2	1.2
School Counseling	1	0.6
School Psychology	1	0.6

The continuous demographic variables in the study were age and the number of polyamorous clients with whom a participant reported working. The continuous independent variables in the study were reported political and social values. The means and standard deviations of the continuous variables of interest are shown in Table 3. Participants' ages ranged from 22 to 69 years, with an average age of 35 years (Median = 31, Mode = 27, $SD = 10.94$). Participants reported working with 0 to 100 polyamorous clients. Participants' political values ranged from 2 = *politically conservative* to 5 =

politically very liberal. Participants' social values ranged from 1 = *very conservative* to 5 = *very liberal*.

Table 3

<i>Descriptive Statistics for Continuous Demographic and Independent Variables</i>					
	<i>N</i>	<i>M</i>	<i>SD</i>	Min	Max
Age	171	35.16	10.94	22	69
Number of polyamorous clients	165	4.88	14.49	0	100
Political values	171	4.18	.86	2	5
Social values	171	4.30	.89	1	5

The categorical independent variables in this study were endorsing a polyamorous relationship status, graduate training on polyamory, feeling prepared to work with polyamorous clients, awareness of the term *polyamory*, and openness to entering into a polyamorous relationship. Frequencies and percentages of categorical independent variables are presented in Table 4. The majority of participants identified as not polyamorous (94%), indicated they had not received graduate training on polyamory (67%), and did not feel their training had prepared them to work with polyamorous clients (74%). The majority of participants reported that they had heard of the term polyamory (92%). Lastly, over half of the sample indicated that they would not consider entering into a polyamorous relationship (68%).

Table 4

Frequency and Percentages for Categorical Independent Variables

	<i>N</i>	%
Polyamory relationship status	171	
Not polyamorous	161	94.2
Polyamorous	10	5.8
Graduate training on polyamory	171	
No	115	67.3
Yes	56	32.7
Prepared to work with polyamorous clients	171	
No	127	74.3
Yes	44	25.7
Never heard of polyamory	171	
False	158	92.4
True	13	7.6
Would consider polyamory	171	
True	54	31.6
False	117	68.4

Analyses of Hypotheses**Factor Structure of the PAPS**

The following section discusses the reduction of the original 33-item question pool into the final 25 items that were found to support the factor structure of the PAPS. This analysis resulted in a four factor solution.

Hypothesis 1. It was hypothesized that there would be a clear and systematic factor structure for the PAPS that would allow for the measurement of psychotherapists' attitudes towards polyamory. Results indicated support for this hypothesis. The first five awareness items were not included in the total score for the PAPS and were used to explore participants' awareness and experience with polyamory. The first four category subscales (Beliefs About the Origin of Polyamory, Health/Pathology of Polyamory,

Problems Presumed to be Associated With Polyamory, and Beliefs About Treatment) were adapted from a scale that was constructed to measure therapists' attitudes towards clients who engaged in BDSM (Kelsey et al., 2013). The last subscale, Personal Bias, was created based on the available literature addressing psychotherapists' perceptions of consensual non-monogamy. For the original 33 question-item pool, 66% of the variance was explained by the PAPS without forcing the factors, which converged into seven iterations. In order to test the factor structure of the individual subscales of the PAPS, instead of allowing the factors to vary on their own, items were forced into one factor with a varimax rotation and Cronbach's alphas were calculated. The final iteration of the PAPS scale included a four factor solution (health/pathology subscale, problems presumed subscale, beliefs about treatment subscale, and the personal bias subscale) with 25 items and a Cronbach's alpha of 0.96.

A factor analysis was conducted in order to examine the structure of the Beliefs About the Origin of Polyamory subscale items. The subscale was originally modeled after the Therapists' Attitudes Towards BDSM Scale (TAT BDSM; Kelsey et al., 2013). The subscale consisted of three items. Items with factor loadings less than 0.50 were considered criteria for removal in subsequent analyses, as well as subscales having a weak Cronbach's alpha (< 0.60). Due to the weak Cronbach's alpha, this subscale was not used in subsequent analyses. The results of the factor analysis are presented in Table 5.

Table 5

<i>Beliefs About the Origin of Polyamory Subscale: Final Factor Loadings</i>		
Item	Factor Loading	α
<i>Eliminated factor: Origins of polyamory</i>		<i>.51</i>
Polyamory is a sexual orientation like heterosexuality.	.73	
Polyamory is caused by attachment issues in childhood.	.59	
A person's interest in polyamory is innate, more than just a matter of choice.	.82	

A factor analysis was conducted in order to examine the structure of the Health/Pathology of Polyamory subscale items. The subscale was originally modeled after the Therapists' Attitudes Towards BDSM Scale (TAT BDSM; Kelsey et al., 2013). The subscale consisted of eight items. Items with factor loadings less than 0.50 were considered criteria for removal in subsequent analyses, as well as subscales having a weak Cronbach's alpha (< 0.60). This subscale displayed high internal consistency ($\alpha = .90$) and therefore was used in subsequent analyses. The results of the factor analysis are presented in Table 6.

Table 6

<i>Health/ Pathology of Polyamory Subscale: Final Factor Loadings</i>		
Item	Factor loading	α
<i>Factor 1: Health/Pathology of polyamory</i>		<i>.90</i>
Polyamory can be a model for healthy, long-term relationships.	.85	
Clients who engage in polyamory are unable to form deep and meaningful relationships and likely fear commitment.	.85	
Polyamory promotes self-acceptance, honesty, and allows for independence.	.82	
Having multiple, consensual romantic relationships can increase need fulfillment and relationship satisfaction for all partners involved.	.82	
Clients who engage in polyamory suffer from poor self-esteem and need validation.	.81	
Clients who engage in polyamorous relationships are acting out immature impulses.	.80	
Clients who identify as polyamorous are likely struggling with sex addiction.	.74	
Polyamory is a more egalitarian relationship model that allows for flexible gender roles and autonomy.	.58	

A factor analysis was conducted in order to examine the structure of the Problems Presumed to be Associated with Polyamory subscale items. The subscale was originally modeled after the Therapists' Attitudes Towards BDSM Scale (TAT BDSM; Kelsey et al., 2013). The subscale consisted of six items. Items with factor loadings less than 0.50 were considered criteria for removal in subsequent analyses, as well as subscales having a weak Cronbach's alpha (< 0.60). This subscale displayed moderately high internal

consistency ($\alpha = .89$) and therefore was used in subsequent analyses. The results of the factor analysis are presented in Table 7.

Table 7

Problems Presumed to be Associated With Polyamory Subscale: Final Factor Loadings

Item	Factor Loading	α
<i>Factor 2: Problems Associated with Polyamory</i>		.89
Having multiple romantic partners will lead to unstable relationships.	.86	
Polyamorous clients who are parents are creating an unhealthy environment for their children.	.86	
Polyamorous clients are likely coercing their partner into enduring an affair.	.83	
Polyamory leads to harmful behaviors such as dishonesty and engagement in secretive affairs.	.82	
Clients who engage in polyamory are just unhappy in their existing romantic relationship.	.74	
Clients who engage in polyamory are more likely to contract sexually transmitted diseases.	.70	

A factor analysis was conducted in order to examine the structure of the Beliefs About Treatment subscale items. The subscale was originally modeled after the Therapists' Attitudes Towards BDSM Scale (TAT BDSM; Kelsey et al., 2013). The subscale consisted of six items. Items with factor loadings less than 0.50 were considered criteria for removal in subsequent analyses, as well as subscales having a weak Cronbach's alpha (< 0.60). This subscale displayed moderately high internal consistency

($\alpha = .87$) and therefore was used in subsequent analyses. The results of the factor analysis are presented in Table 8.

Table 8

Beliefs About Treatment Subscale: Final Factor Loadings

Item	Factor loading	α
<i>Factor 3: Beliefs About Treatment</i>		.87
Clients should be discouraged from engaging in polyamorous relationships.	.88	
Dyadic commitment is the only healthy relationship model that therapists should support.	.87	
Having multiple, consensual romantic relationships can be a healthy alternative for clients that do not feel comfortable in a monogamous relationship.	.85	
Polyamory interests should be eliminated through psychotherapy.	.82	
Monogamy does not work for every client.	.78	
It could be helpful to refer clients to a polyamory support group.	.51	

A factor analysis was conducted in order to examine the structure of the Personal Bias subscale items. The subscale consisted of five items. Items with factor loadings less than 0.50 were considered criteria for removal in subsequent analyses, as well as subscales having a weak Cronbach's alpha (< 0.60). This subscale displayed moderately high internal consistency ($\alpha = .82$) and therefore was used in subsequent analyses. The results of the factor analysis are presented in Table 9.

Table 9

Personal Bias Subscale: Final Factor Loadings

Item	Factor loading	α
<i>Factor 4: Personal Bias</i>		.82
I would experience a decrease in motivation to work with a client if I discovered the client was polyamorous.	.85	
Due to my personal discomfort with polyamory, I would refer a polyamorous client to another psychotherapist.	.81	
I feel relaxed and comfortable discussing polyamory with my clients.	.80	
I would be personally uncomfortable working with a client who engages in polyamory.	.73	
I would personally support clients' polyamorous relationship choices.	.70	

Hypothesis 2. This hypothesis predicted that the PAPS would demonstrate acceptable internal consistency by having a Cronbach's alpha coefficient fall within the acceptable range of $\alpha > 0.70$. This hypothesis was largely supported. The four confirmed subscales had Cronbach's alpha coefficients ranging between $\alpha = 0.82$ (bias subscale) and $\alpha = 0.90$ (health subscale; see Table 10). The PAPS total scale score had a Cronbach's alpha coefficient of 0.96.

Table 10

Internal Consistency for PAPS Subscale Scores and PAPS Total Scale Score

Measure	<i>N</i>	α
PAPS Total	171	0.96
Health subscale	171	0.90
Problems subscale	171	0.89
Beliefs subscale	171	0.87
Bias subscale	171	0.82

PAPS Relationship with Other Instruments

The PAPS and its subscales were compared to similar as well as dissimilar instruments to determine whether it had convergent and discriminant validity. The results of this examination are discussed in the following sections.

Hypothesis 3a. This hypothesis predicated that the PAPS total scale score would demonstrate convergent validity by being significantly and positively correlated with the Attitudes Towards Polyamory Scale (ATP; Johnson et al., 2015). This hypothesis was supported, as a significant positive relationship was found for the PAPS total scale with the ATP ($r = 0.89, p < .001$). Pearson's product moment correlations were also conducted to examine the relationship between the ATP Scale and the PAPS subscale scores. As shown in Table 11, the results revealed significant positive correlations between the ATP scale and all four subscales of the PAPS, as well as the PAPS total score. These results demonstrated high convergent validity between the PAPS and the ATP Scale.

Table 11

Pearson's Product Moment Correlations Between PAPS Scale Scores With ATP Scale

	ATP total score	Sig
Health subscale	.850 **	.000
Problems presumed subscale	.849 **	.000
Beliefs about treatment subscale	.781 **	.000
Personal bias subscale	.668 **	.000
PAPS total score	.893 **	.000

Hypothesis 3b. This hypothesis predicted that the PAPS total scale score would demonstrate discriminant validity by being unrelated (i.e., not significantly correlated) with the Marlowe-Crowne Social Desirability scale, Form C (MC-SD; Reynolds, 1982). Pearson's product moment correlations were conducted to examine the relationship between the MC-SD and the PAPS scale scores. All correlations were significant at the 0.01 level. This hypothesis was supported, as there was a non-significant, negative relationship found between the PAPS total scale score with the MC-SD. Table 12 reveals non-significant, negative correlations between the PAPS subscale scores, as well as the PAPS total scale score, and the MC-SD, with all probabilities $> .05$. These results suggest that the PAPS total scale score, as well as the four PAPS subscales, demonstrated discriminant validity by being non-significant and negatively correlated with the MC-SD. Thus, participants' responses to the PAPS were not influenced or biased by a desire to present oneself in a favorable manner (Reynolds, 1982).

Table 12

Pearson's Product Moment Correlations Between PAPS Scale Scores With Marlowe-Crowne Social Desirability Scale, Form C

	MC-SD Total Score	Sig
Health subscale	- 0.10	.196
Problems presumed subscale	- 0.09	.260
Beliefs about treatment subscale	- 0.15	.059
Personal bias subscale	- 0.01	.868
PAPS total score	- 0.10	.190

Note: MC-SD = Marlowe-Crowne Social Desirability Scale, Form C

Exploratory Analyses

Because the PAPS was found to be internally consistent and demonstrated convergent and discriminant validity, it was determined that the scale would be used for exploratory analysis. Three exploratory analyses were conducted to examine reported attitudes towards polyamory, as well as the analysis of four awareness items. Each analysis is discussed below.

Exploratory Hypothesis 1

This exploratory hypothesis stated that psychotherapists would report more positive attitudes towards polyamory compared to neutral (“unsure”) or negative attitudes. This exploratory hypothesis was supported. To test this hypothesis, a one sample Wilcoxon Signed-Rank test was used because the data were skewed for the PAPS subscale distributions. To determine a neutral point for reported attitudes, 75 was picked as a midpoint due to the PAPS containing 25 questions and constructed with a 5-point

Likert scale, with 3 being *unsure*. PAPS total score values that were above 75 were labeled *positive* while scores below the midpoint of 75 were labeled *negative*. PAPS total score values that were equal to the midpoint were labeled as *unsure*, which indicates that participants reported a neutral attitude towards polyamory. A Wilcoxon Signed-Rank test indicated that psychotherapists' attitudes towards polyamory were statistically significantly higher, or more positive, than neutral or negative attitudes, $Z = 14, 398.50$, $p < .001$. Thus, the null hypothesis that psychotherapists would report more neutral or negative attitudes towards polyamory was rejected and the alternative hypothesis that psychotherapists' attitudes would be more positive was accepted (see Table 13).

Table 13

Hypothesis Test Summary

	Null hypothesis	Test	Sig.	Decision
1	The median of PAPS Total equals 75.0.	One-sample Wilcoxon signed rank test	.000	Reject the null hypothesis.

Note: Asymptotic significances are displayed. The significance level is .05.

Results suggested participants reported more positive attitudes towards polyamory compared to reported negative or neutral attitudes. When comparing the reported PAPS total scale scores, 12 participants reported more negative attitudes compared to positive or unsure attitudes towards polyamory and 159 participants reported more positive attitudes compared to negative or unsure attitudes towards polyamory. Thus, results suggest that 93% of psychotherapists in this study reported more positive attitudes on the

total PAPS score overall when compared to reported negative or neutral attitudes (see Figure 1).

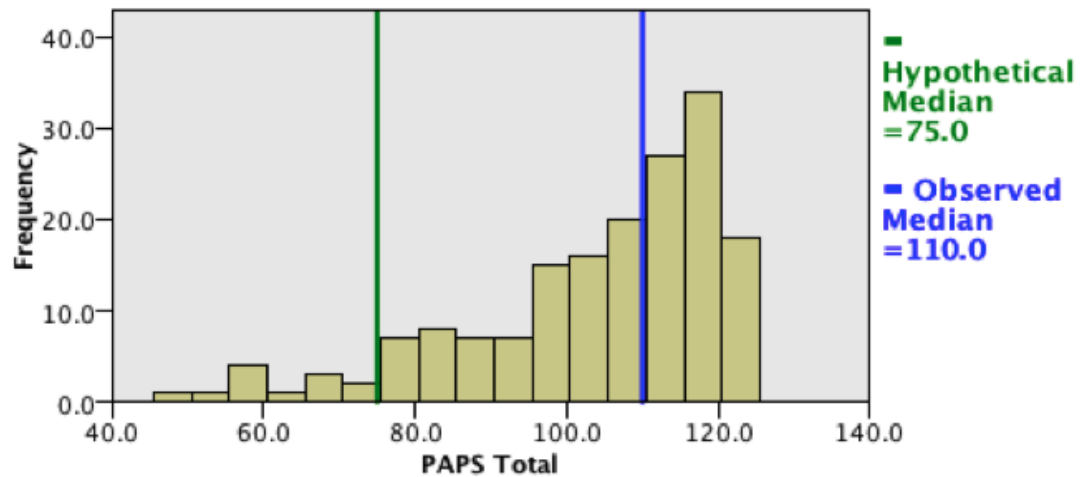


Figure 1. One-sample Wilcoxon signed rank test bar graph. This figure illustrates psychotherapists' reported attitudes towards polyamory are more positive compared to reported negative or neutral attitudes.

By creating midpoints for all PAPS subscales based on the number of items per subscale and the use of a 5-point Likert scale with a midpoint of 3 for *unsure*, descriptive statistics indicated that based on each PAPS subscale, participants reported more positive attitudes towards polyamory compared to negative or neutral attitudes. For the Health/Pathology of Polyamory subscale, a midpoint of 24 was used because the subscale had eight items with a neutral point of 3 for *unsure* on a 5-point Likert scale. Results indicated that for the Health/Pathology subscale, 87% of participants endorsed positive subscale items. Specifically, 18 participants endorsed negative items, four participants endorsed unsure or neutral items, and 149 participants endorsed positive items. For the

Problems Presumed to be Associated with Polyamory subscale, a midpoint of 18 was used because the subscale had six items with a neutral point of 3 for *unsure* on a 5-point Likert scale. Results indicated that for the Problems Presumed to be Associated with Polyamory subscale, 84% of participants endorsed positive subscale items. Specifically, 19 participants endorsed negative items, eight participants endorsed unsure or neutral items, and 144 participants endorsed positive items. For the Beliefs About Treatment subscale, a midpoint of 18 was used because the subscale had six items with a neutral point of 3 for *unsure* on a 5-point Likert scale. Results indicated that for the Beliefs About Treatment subscale, 94% of participants endorsed positive subscale items. Specifically, 10 participants endorsed negative items, one participant endorsed unsure or neutral items, and 160 participants endorsed positive items. For the Personal Bias subscale, a midpoint of 15 was used because the subscale has five items with a neutral point of 3 for *unsure* on a 5-point Likert scale. Results indicated that for the Personal Bias subscale, 95% of participants endorsed positive subscale items. Specifically, five participants endorsed negative items, four participants endorsed unsure or neutral items, and 162 participants endorsed positive items.

The mean and standard deviation for the PAPS total scale score are shown in Table 14. Results indicated that for the PAPS total scale score, participants' scores ranged from 48 to 125, with an average score of 104.03 ($M = 104.03$, $SD = 16.97$). Higher scores on the PAPS indicated more positive attitudes (see Table 14).

Table 14

Descriptive Statistics for the PAPS Total Scale Score

Total <i>N</i>	171.00
Minimum score reported	48.00
Maximum score reported	125.00
Mean	104.03
Standard deviation	16.97

Exploratory Hypothesis 2

This exploratory hypothesis predicted that a relationship would exist between psychotherapists' political and social values and attitudes towards polyamory. Specifically, it was predicted that participants who reported more liberal political and social values would also report more positive attitudes toward polyamory. This exploratory hypothesis was partially supported. Political values were not found to be a significant predictor of the PAPS total scale score ($Beta = .14, p > .05$). In contrast, social values did significantly predict the PAPS total scale score. Reporting more liberal social values was associated with an increase in positive attitudes towards polyamory for the PAPS total scale score ($Beta = .33, p < .01$).

A multiple linear regression was conducted to predict the PAPS total scale score based on the independent variables. The predictors included political values and social values with sexual orientation and age as covariates. The overall model was significant, $F(5, 165) = 17.39, p < .001$, and accounted for 59% of the variance. The results indicated that sexual orientation, age, and social values were significant predictors of the PAPS total scale score (see Table 15). Participants who identified as bisexual ($Beta = .13, p =$

.048) or Gay, Pansexual, or as “other” sexual orientation ($Beta = .18, p = .009$) were associated with higher PAPS total scores compared to participants who identified as heterosexual, which implies that participants who did not identify as heterosexual tended to endorse more positive attitudes towards polyamory. As age increased, the PAPS total scale score decreased ($Beta = -.18, p < .01$), which implies that as age increased, individuals endorsed more negative attitudes towards polyamory.

For this analysis, the PAPS beliefs subscale was run with and without outliers; results indicated that neither the presence nor absence of the outliers would change the regression results and were therefore included in the analysis and subsequent analyses.

Table 15

Multiple Linear Regression Analysis of Political Values, Social Values, Sexual Orientation, and Age on PAPS Total scale Score (N = 171)

	Unstandardized B	SE	Beta	t	p
Political values	2.80	1.80	.142	1.55	.122
Social values	6.39	1.77	.334	3.62	.000
Age	-.28	.10	-.178	-2.70	.008
Sexual orientation					
Gay/pansexual/ other ^a	7.82	2.94	.180	2.66	.009
Bisexual ^a	6.09	3.05	.133	1.996	.048

Note. $F(5, 165) = 17.39, p < .001, R \text{ squared} = .345$. ^aReference category is heterosexual

Awareness of Polyamory

Exploratory Awareness Items

Awareness items were created and included in the first section of the PAPS to measure psychotherapists' knowledge of the term *polyamory* and experience with individuals who self-identify as polyamorous; however, these items were not included in the total score for the PAPS and were only examined for this exploratory analysis. Frequencies and percentages of categorical variables used to measure participants' awareness or experience of polyamory are presented in Table 16. The variables included the following questions: (a) "I have never heard of polyamory before today"; (b) "I have heard of polyamory, but I don't know what it really involves"; (c) "I have a very good idea of what polyamory involves"; (d) "I am acquainted with polyamorous individuals outside of my therapeutic work." Each question was answered using a true-or-false response format. Results indicated that the majority of participants reported having heard the term *polyamory* before (92%), knowing what polyamory involves (92%), having a very good idea of what polyamory involves (82%), and being acquainted with polyamorous individuals outside of their therapeutic work (61%). Overall, the majority of psychotherapists in this study reported being well-informed and familiar with the term *polyamory* with more than half of the participants reporting they had previous experience with polyamorous individuals outside of their therapeutic work.

Table 16

Frequencies and Percentages for Categorical Awareness Variables

Variables	<i>n</i>	%
Never heard of term polyamory	171	
False	158	92.4
True	13	7.6
Unfamiliar with term polyamory	171	
False	157	91.8
True	14	8.2
Familiar with term polyamory	171	
False	31	18.1
True	140	81.9
Acquainted with polyamorous individuals	171	
False	66	38.6
True	105	61.4

Exploratory Hypothesis 3

This exploratory hypothesis predicted that a relationship would exist between psychotherapists' reported training, prior knowledge of polyamory, experience with polyamory, and reported attitudes towards polyamory. Specifically, it was predicted that psychotherapists with more training, prior knowledge of polyamory, and experience with polyamory would endorse more positive attitudes towards polyamory. This exploratory hypothesis was partially supported.

A multiple linear regression was conducted to predict the PAPS total scale score based on the independent variables. The predictors included the following questions or statements: "Did participants receive graduate training on polyamory?" "Did participants

feel prepared to work with polyamorous clients?” “I have never heard of polyamory,” and “I would consider entering into a polyamorous relationship,” with sexual orientation and age as covariates. The overall model was significant, $F(8, 162) = 8.21, p < .001$, and accounted for 53.7% of the variance. The results indicated that age and “I would consider entering into a polyamorous relationship” were significant predictors of the PAPS total scale score (see Table 17). Participants who reported that they would consider, or have entered into, a polyamorous relationship were associated with higher PAPS total scale scores ($Beta = .333, p < .01$). Similar to the previous multiple linear regression exploring political and social values, results showed that as age increased, the PAPS total scale scores decreased ($Beta = -.242, p < .01$), which indicated that as age increased, individuals endorsed more negative attitudes towards polyamory. Five of the items were not significant predictors of the PAPS total scale score. Participants’ reported relationship status as polyamory and sexual orientation were not significant; as well as the two questions and one statement about participants’ knowledge and comfort with polyamory: “Did participants receive graduate training on polyamory?” “Did participants feel prepared to work with polyamorous clients?” “I have never heard of polyamory.”

Table 17

Multiple Linear Regression Analysis of Polyamory Relationship Status, Graduate Training on Polyamory, Prepared to Work With Polyamorous Clients, Never Heard of Polyamory, Would Consider Polyamory, Sexual Orientation, and Age on PAPS Total Scale Scores (N = 171)

	Unstandardized <i>B</i>	<i>SE</i>	<i>Beta</i>	<i>t</i>	<i>p</i>
Age	-.38	.11	-.242	-3.42	.001
Sexual orientation					
Gay/pansexual/ other ^a	7.32	3.28	.169	2.23	.027
Bisexual ^a	5.09	3.33	.111	1.53	.128
Polyamory relationship status	.76	5.25	.011	.15	.885
Graduate training	.30	2.91	.008	.10	.917
Prepared to work	1.81	3.23	.047	.56	.576
Never heard of polyamory	-7.50	4.37	-.118	-1.72	.088
Would consider polyamory	12.11	2.88	.333	4.21	.000

Note. $F(8, 162) = 8.21, p < .001, R \text{ squared} = .288$; ^aReference category is heterosexual

CHAPTER V

DISCUSSION

Summary of Major Findings

This chapter provides a discussion of the results for the present study. The aim of this study was to investigate a method of measuring psychotherapists' attitudes towards polyamory. In the first section, the findings from each of the three hypotheses are discussed, including possible interpretations. Next, summary results from the exploratory analyses are presented. Limitations, directions for future research, and implications for clinical training and practice are presented subsequently. Finally, a conclusion of the study is provided.

Factor Structure of the PAPS and Internal Consistency

A series of exploratory factor analyses revealed that a four-factor solution was the most viable and psychometrically and conceptually sound model of the items developed for the PAPS and thus supported the first hypothesis. However, the first proposed factor, beliefs about the origin of polyamory, only contained three items with low internal consistency. Therefore, the first factor did not contain enough information to make a decision on what it might represent and was not statistically supported and, thus, was deleted from further analysis (Cortina, 1993). The second factor, health/pathology, had high internal consistency with eight items. The third and fourth factors, problems associated with polyamory and beliefs about treatment had moderately high internal

consistencies, each having six items respectively. The fifth factor, personal bias, had moderately high internal consistency and consisted of five items.

The first factor used in the model, health/pathology, contained eight items and appeared to measure perceptions of psychological health and/or psychopathology of polyamorous practitioners and practices. Items that addressed assumptions underlying the psychological framework that sexual exclusivity is a hallmark of healthy romantic relationships were included. Some of these items described polyamorous relationships as healthy, meaningful, and honest; whereas, other items tapped into pathological descriptions of polyamorous relationships as being unhealthy, indicative of sex addiction, and the inability to form meaningful, committed relationships. Please refer to Table 6 in the results section for a list of all items in this factor. This factor is composed of items that are consistent with research showing that mental health professionals have a long history of holding negative attitudes and perceptions about non-traditional sexual subcultures (Weitzman, 2006). According to Rubin's (1984) theorization of sexuality, mental health professionals exist in a culture that places non-traditional sexual acts and identities in a value system in which sexuality that is not monogamous is viewed as dangerous and thus, polyamory practitioners have at times been conceptualized as emotionally and mentally inferior by psychotherapists.

The second factor, problems associated with polyamory, included six items that appear to measure perceptions of problematic behavior or issues that might arise in polyamorous romantic relationships. Items that addressed stereotypes regarding the negative consequences of having multiple romantic partners were included. Some of

these items described polyamory as leading to unstable relationships, coercion and manipulation, lying, parenting issues, and concerns about safe sex practices. Please see Table 7 from the results section for a list of all items in this factor. This factor is consistent with previous studies that have shown that polyamorous individuals are perceived to be sexually risky and unfaithful (Barker, 2005), as well as documenting public concern regarding the negative impact on children of polyamorous parents' lifestyle (Pallotta-Chiarolli, 2010). Therefore, some of the items in this subscale were based on these previous problems found in other studies regarding problems presumed to be associated with polyamory.

The third factor, beliefs about treatment, contained six items that appear to measure how psychotherapists might conceptualize polyamorous relationship models. Items that address cultural stigma on psychotherapists' clinical work as well as interventions for polyamorous clients were included. Some of these items tap into ideas and theories about relationships such as the idea that dyadic commitment is the only relationship model psychotherapists should support. Other items described polyamory as a valid relationship style and discussed ways psychotherapists might support clients in the exploration of polyamory. Please see Table 8 from the results section for a list of all items in this factor. This factor is consistent with previous studies that have shown that individuals who practice consensual non-monogamy face stigma; polyamorous individuals have been described as amoral, less trusting, more jealous, and more sexually risky, as well as polyamory being perceived as a less satisfying relationship style (Conley, Moors et al., 2013; Moors et al., 2013). The results of this study are inconsistent

with previous research showing that psychotherapists hold negative beliefs towards polyamory (Knapp, 1975, Weber, 2002; Weitzman et al., 2009). This finding may indicate that perceptions of polyamory specifically, and non-traditional relationships broadly, are becoming more accepted as viable relationship models by psychotherapists.

The fourth factor, personal bias, which is not new to attitudes research, but has never been explored using a scale for psychotherapists' attitudes towards polyamory, contained five items that appear to measure psychotherapists' personal values and behavior choices in regard to polyamory. Items discussed motivation to work with polyamorous clients, discomfort or comfort working with polyamorous clients, and support of polyamorous clients' choices. Please see Table 9 from the results section for a list of all items in this factor. This factor is consistent with previous research that indicates a lack of awareness of one's own sexual values and beliefs can have deleterious effects, including but not limited to, a lack of objectivity, poor therapeutic alliance, compromised quality of care, and perpetuating a hostile environment, which may contribute to client distress and mental health issues (Meyer, 2013; Nichols & Shernoff, 2007; Weitzman et al., 2012). Without awareness, psychotherapists run the risk of projecting personal biases and potential microaggressions onto vulnerable clients. Even polyamory-positive psychotherapists are likely to have their own biases and stereotypes regarding various polyamory practices, and they will need to address these issues as they arise in an effort to bring a more inclusive model of sexuality into their work.

These four confirmed subscales of health, problems, beliefs, and bias had good internal consistency. Additionally, the PAPS total scale score had strong internal

consistency. Thus, the second hypothesis was largely supported, indicating that the PAPS subscales and total scale demonstrated strong internal consistency and is thus a reliable measure.

Relationships with Measures Examining Scale Validity

The PAPS and its subscales were compared to a scale that was both conceptually and theoretically similar as well as to a scale that was conceptually dissimilar. The implications of this examination are discussed below.

Hypothesis 3a. When examining the convergent validity between the PAPS and another conceptually and theoretically similar instrument, the Attitudes Towards Polyamory scale (ATP; Johnson et al., 2015), a significant positive relationship was found between overall scores. Additionally, each of the subscales of the PAPS, Health, Problems, Beliefs, and Bias, also had positive significant relationships with the ATP scale. This indicates that the PAPS and each of its subscales is highly consistent with a brief measurement of the general public's attitudes towards polyamory (Johnson et al.). Thus, the PAPS is theoretically measuring the construct of attitudes towards polyamory. This finding supported Hypothesis 3a.

Hypothesis 3b. It was hypothesized that social desirability would not be related to the PAPS. Correlation statistics were computed in order to examine discriminant validity between the PAPS and a theoretically and conceptually unrelated instrument, the Marlowe-Crowne Social Desirability Scale, Form C (MC-SD). When examining discriminant validity between the PAPS and the MC-SD, a non-significant, negative relationship was found between overall scores. The analysis also revealed that there were

non-significant, negative relationships between the PAPS subscales, Health, Problems, Beliefs, and Bias, with the MC-SD. Hypothesis 3b was supported by this finding. This suggests that the PAPS and the MC-SD are measuring two theoretically different constructs and that psychotherapists in this study were not influenced by bias or a desire to present their responses in a favorable manner. A possible explanation for this finding is that psychotherapists have more training in the assessment and reflection of personal bias and may, therefore, be less influenced by social desirability compared to the general public. Psychotherapists may also have been familiar with the MC-SD and responded in ways that impacted these findings.

Exploratory Analyses

Three exploratory analyses were conducted to examine reported attitudes towards polyamory. Additionally, four awareness items were used to explore psychotherapists' knowledge and experience with polyamory.

First, exploratory analyses were conducted to examine the impact of different demographic variables on the overall PAPS scale as well as an analyses of how psychotherapists endorsed scale items overall. It was hypothesized that psychotherapists would report more positive attitudes towards polyamory compared to neutral or negative attitudes. When examining reported attitudes for the PAPS, psychotherapists' attitudes were 93% positive. Additionally, when examining each PAPS subscale, psychotherapists reported more positive attitudes towards polyamory than negative or neutral attitudes. Contrary to the pathologizing anticipated by members of the polyamory community (Weitzman et al., 2009), the majority of psychotherapists did not universally equate

polyamory with psychopathology or dysfunction. Most psychotherapists in this study endorsed highly positive perspectives on polyamory. Thus, overall, psychotherapists' beliefs in this study appear to be consistent with the few established recommendations that polyamory not be seen as deviant and indicative of pathology (see Nichols & Shernoff, 2007; Richards & Barker, 2013; Weitzman, 2006; Weitzman et al., 2009). As public and empirical attention to polyamory increases, and national discussions regarding same-sex marriage and sexual equality become more widespread, it may be said "we are in the midst of a new sexual revolution" (Johnson et al., 2015, pp. 1-2). This shifting social landscape may be seen in a recent poll that found Americans were more likely now compared to the early 2000s to report previously unmoral behaviors as morally acceptable, including gay and lesbian relationships, having a baby outside of marriage, and sex between unmarried individuals, with more Americans identifying themselves as socially liberal compared to past polls (Newport, 2015). The results of this study are consistent with research indicating Americans are becoming more liberal on social issues and suggests that psychotherapists are receptive to these social shifts and that there is sufficient interest and value in continuing to explore and support nontraditional relationship orientations. This finding supported exploratory Hypothesis 1.

Regarding sexual orientation and age, significant positive relationships were found to predict attitudes toward polyamory as measured by the PAPS. Psychotherapists in this study who did not identify as heterosexual tended to report more positive attitudes towards polyamory overall. As age increased, psychotherapists tended to report more negative attitudes toward polyamory. It is possible that older psychotherapists have had

less experience with the topic of polyamory and may be reporting less positive attitudes due to uncertainty about this relationship orientation. Additionally, the results of this study are consistent with research that indicates there is a positive relationship between age and conservatism, with older individuals reporting more conservative political-social-cultural attitudes and values (Bettencourt, Vacha-Haase, & Byrne, 2011; Cornelis, Van Hiel, Roets, & Kossowska, 2009). This information may be helpful as polyamorous individuals may be able to use these data when seeking treatment providers. Some advocates have recommended that clients look for psychotherapists who specifically identify as polyamory friendly or specialize in working with sexual minorities if possible (Kelsey et al., 2013).

It was predicted that psychotherapists who reported more liberal political and social values would also report more positive attitudes toward polyamory. Overall, psychotherapists in this study reported liberal social and political values, which is consistent with previous research showing that psychology as a field tends to be more liberal than conservative (Duarte et al., 2015). In this study, psychotherapists who reported more liberal social values also reported more positive attitudes towards polyamory on the PAPS. This finding is consistent with Hutzler and colleagues' (2016) finding that participants who were younger, same-sex attracted, and more positive towards sex in general tended to be more accepting of polyamory, while politically conservative, religious, right-wing, and authoritarian people were less accepting of polyamory. Although political values in this study did not predict PAPS total scale scores, political values may not impact attitudes towards polyamory the way social values

do and, thus, the way a psychotherapist identifies politically may not have an impact on his or her work with clients who identify as belonging to a non-traditional sexual group or their general level of acceptance towards polyamory. Because social and political values share some overlap, it is difficult to clearly interpret the results of this analysis. Perhaps the potential differences between social and political values include the distinction of political party identities, such as Republican or Democrat and that these definitions lack the significance of social values as they relate to values for relationships and sexuality. Because of the mixed impact of social and political values, exploratory Hypothesis 2 was partially supported by this finding.

It was predicted that psychotherapists with previous training, prior knowledge of polyamory, and reported experiences with polyamory or polyamorous individuals would report more positive attitudes towards polyamory for the overall PAPS. Psychotherapists in this study who reported that they would consider entering into a polyamorous relationship reported more positive attitudes towards polyamory. Additionally, as age decreased, psychotherapists tended to report more positive attitudes toward polyamory, which indicates that older psychotherapists in this study tended to report more negative attitudes. Consistent with cohort effects, younger psychotherapists may have had more interaction with polyamory and therefore may feel more familiar and more accepting of non-traditional relationship styles. Of interest, psychotherapists who identified their relationship status as “polyamorous” ($n = 10$) did not significantly report higher positive attitudes. This finding may indicate that a ceiling effect is occurring. Participants in this

study reported very positive attitudes overall and, thus, relationship orientation or status may no longer have an effect on reported positive attitudes.

Additionally, reported training, preparedness to work with polyamorous clients, and reporting no previous knowledge of the term *polyamory* did not significantly influence attitudes reported for the overall PAPS. Further research needs to be conducted to explore the relationship between attitudes and competency. It is possible that the results of this analysis were difficult to interpret because many psychotherapists conveyed feeling unprepared to work with polyamorous clients and reported a lack of training in working with this population. Because of the mixed impact of reported training, preparedness to work with polyamorous clients, previous knowledge of the term *polyamory*, age, and willingness to enter into a polyamorous relationship, exploratory Hypothesis 3 was partially supported. Future studies that examine psychotherapists' attitudes toward polyamory should continue to explore such factors, for example, reported training and preparedness, as a way to further examine how these variables impact reported attitudes held by psychotherapists towards polyamory practices and polyamorous clients.

Exploratory awareness items. Four true-or-false questions were created to explore psychotherapists' knowledge and experience with polyamory. The purpose of these awareness items was to assess how familiar psychotherapists were with polyamory in an attempt to measure the general awareness of this relationship model in the field of psychology. The awareness items consisted of the following four questions: (1) "I have never heard of polyamory before today"; (b) "I have heard of polyamory, but I don't

know what it really involves”; (c) “I have a very good idea of what polyamory involves”; and (d) “I am acquainted with polyamorous individuals outside of my therapeutic work.”

Psychotherapists reported being familiar with the term *polyamory* with 92% of the sample indicating that they had heard of polyamory before and that they were aware of what polyamory involved. When examining the level of familiarity with polyamory, 82% of psychotherapists reported that they had a very good idea of what polyamory involved, which indicated that psychotherapists in this study seemed to have an awareness of the term *polyamory* and also indicated a clear understanding of the relationship model. Regarding psychotherapists’ reported interaction with individuals who self-identify as polyamorous, 61% of the sample indicated that they were acquainted with polyamorous individuals outside of their therapeutic work. These results were interesting and were higher than the findings the researchers expected to obtain. The researchers expected some psychotherapists to be aware of polyamory, but hypothesized that polyamory would not have a high level of cultural awareness as some other minority sexual identities, such as the gay and lesbian community. It appears that psychotherapists were more aware of polyamory and had more interaction with polyamorous individuals than originally hypothesized in this study.

Limitations

There were some limitations to the current study. One such limitation was in the area of recruitment and sampling. The study recruited participants online through a respondent-driven sampling method. This method was used in an effort to contact and recruit a specialized population, namely psychotherapists. Recruitment efforts resulted in

a sample consisting primarily of graduate students enrolled in a master's level marriage and family psychology program with the majority of participants self-identifying as women. Thus, the research was not representative of men's attitudes or psychotherapists in general. Additionally, it should be noted that a limitation of this research was that it was only representational of U.S. culture and could not be generalized to other cultures' attitudes towards polyamory. Given that there has not been a widely used measure for psychotherapists' attitudes towards polyamory, future research with the PAPS should focus on recruitment of a more diverse sample for different genders, professional departments, and geographical locations, particularly in areas where non-monogamous relationship orientations are more frequent than in the U.S.

Additionally, a large proportion of the sample identified as White (77%). A more comprehensive analysis of different ethnic groups using the PAPS is desired if a true understanding of how psychotherapists view polyamory is to be achieved. Future researchers may want to use the PAPS to explore psychotherapists' attitudes towards polyamory by examining various ethnic demographics in greater depth and targeting recruitment efforts to obtain a more diverse sample to increase generalizability and to improve the reliability and validity of the PAPS. Future research could conduct a separate analysis of how individuals report attitudes towards polyamory who self-identify as belonging to a minority ethnic group. Having an ethnic identity that is marginalized may impact attitudes towards polyamory, which can be conceptualized as a sexual minority group.

Another limitation to this study was that political and social values were measured using single item scales without anchors. Participants were not provided a definition of social values and therefore may have responded differently to this measure based on their own definition of the construct. Future research exploring social and political values would benefit from providing participants with a definition of abstract constructs and what anchors of the scale mean in terms of the level or the amount of the construct being measured.

Participants also self-selected to participate in the study, which may have influenced responses. For example, the word *polyamory* was included in the title of the recruitment email. The mere presence of the word *polyamory* and the implication that the researcher was interested in psychotherapists' attitudes towards polyamory may have attracted participants who were more interested in or familiar with polyamory. Of interest, almost one-third of the participants in this study indicated that they have been in, or would consider entering into, a polyamorous relationship. Similarly, the same prime for the word *polyamory* may have functioned as a deterrent for psychotherapists who oppose consensual non-monogamy or have a general lack of interest in the topic. Although it is likely that participants in this study were primed, historical differences might be impacting the results as well. As there has not been another recent study measuring psychotherapists' attitudes towards polyamory, it is likely that attitudes have shifted over time. Historical differences, such as the trend that attitudes have shifted in a more liberal direction over the past 20 years (PEW Research Center, 2016), may account for the strong positive response towards polyamory and suggest that psychotherapists in

2015-2016 have become more tolerant and accepting of consensual non-monogamy, specifically polyamory.

The potential for unintended bias in the areas of sampling and recruitment could have resulted in a less than representative sample, which impacts the generalizability of this research. The potential for self-selection bias in the current study, along with the higher than expected percentage of positive reported attitudes, indicated that it was likely participants who held negative attitudes towards polyamory chose not to participate in this study. Omitting potentially reactive language, especially in the recruitment procedures and materials, may have resulted in a more inclusive sample that would be representative of a wider range of psychotherapists' attitudes towards polyamory. Recruitment materials could have used the word "consensual non-monogamy" or "untraditional relationships" instead of "polyamory" to decrease the potential for selection bias.

A second limitation that should be noted in this study was the potential for participant reactivity toward various items on the surveys, which may have been perceived as loaded or biased language. Although purposeful, some survey items may have elicited a certain degree of reactivity from survey participants, which may have impacted psychotherapists' responses. For example, the following item on the PAPS had the potential to generate reactivity in participants who were presented with the following statement: "Polyamorous clients who are parents are creating an unhealthy environment for their children." This item solicited participant endorsement of a potentially libelous statement about polyamory and parenting. Asking psychotherapists to endorse such

judgments without contextual information may be seen as discordant with the training that is provided in mental health disciplines. Such reactivity to scale items may have masked genuine attitudes towards polyamory.

Future Research Directions

There are many implications for future research directions. In the future, the PAPS may be used to explore if it is possible to change psychotherapists' attitudes towards polyamory. Now that a scale exists to measure attitudes, it would be helpful for future research using the PAPS to measure how training and education focused on polyamory impacts attitudes towards polyamory. Researchers could use the PAPS to measure attitudes before training and then after training to test the impact of training. The PAPS may also be used to measure how reported training, competency, and knowledge of polyamory impact reported attitudes towards polyamory. Specifically, how much training, competency, and knowledge of polyamory do psychotherapists report and does the amount or level of such training, competency, or knowledge impact reported attitudes towards polyamory? The amount of training and the type of training received may be explored to establish how much training and what types of training are reported by psychotherapists in the area of polyamory education. Additionally, research might explore if there is a relationship between having taken a sexuality class and perceived competency to work with polyamorous clients. Future research may benefit from exploring the relationship between general multicultural training received and reported comfort with working with polyamory and polyamorous clients, as most graduate programs require a general multicultural course, but not a sexuality course.

Due to the limited diversity in this study's sample, the PAPS may be used to explore how diverse ethnic, gendered, cultural, sexual, and professional identities impact reported attitudes towards polyamory. Future research may benefit from exploring how gender impacts psychotherapists' attitudes towards polyamory, as previous research indicates women and men have different attitudes towards sexuality with men having more accepting attitudes toward diverse sexual practices compared to women (Peplau, 2003). Future research may also benefit from using the PAPS to explore how psychotherapists' age impacts reported attitudes towards polyamory. The average age of participants in this study was 35 years old and future research would benefit from replicating this study to determine if there is a cohort effect that is impacting the results or if the finding that older psychotherapists report more negative attitudes towards polyamory is unique to this study. The relationship between age, reported training, and attitudes toward polyamory may also be explored. As training and education evolves to address a more diverse landscape for sexuality, the PAPS has the potential to measure current perspectives on polyamory in the field of mental health, as well as the common stereotypes or misperceptions that are commonly reported by psychotherapists. Such information may be used to develop more informed and effective training programs.

Implications for Research

The current study contributes to the research and literature on polyamory by measuring psychotherapists' attitudes towards polyamory, which has not been explored since 1982 when Hymer and Rubin asked therapists to describe the psychological profile of a polyamorous individual. The finding that psychotherapists held more positive

attitudes compared to negative attitudes differs from previous studies such as Knapp's (1975) finding that 33% of her sample of therapists reported that polyamorous practitioners had personality disorders, neurotic tendencies, with 9 to 17% reporting that they would try to use their professional skills to eliminate client's interests in open relationship models. Similarly, Hymer and Rubin's (1982) study found that 24% of therapists reported that polyamorous individuals feared commitment or intimacy, while 15% reported that their marriages were likely not fulfilling. In contrast, the current study suggested that psychotherapists' attitudes towards polyamory have changed over time and that societal shifts are leading to progress towards an increased recognition and acceptance by psychotherapists of non-traditional relationship orientations.

Findings from this study may indicate that psychotherapists possess an advantage in holding more open and tolerant beliefs about sexuality and interpersonal styles due to previous exposure to sexual minority groups and alternative relationship orientations as polyamory becomes more visible within academic and social spaces. Psychotherapists in the current study reported positive attitudes; however, inaccurate beliefs about polyamory and stigma surrounding non-monogamy are common across the general public (Conley, Moors et al., 2013). Similar to the current study, Hutzler et al. (2016) found that the more familiar participants were with polyamory, the more accepting they were of polyamory and, specifically, participants who had previously reported hearing about polyamory (50-60%), or knew a polyamorous individual, reported more positive attitudes toward polyamory. The current study's findings that the majority of psychotherapists reported previous experience or knowledge of polyamory supported the "contact hypothesis" in

which the more contact a person has with a group, the more accepting they become of the people who belong to that group. Future research may benefit by using the PAPS to confirm the idea of the contact hypothesis in regard to perceptions of polyamory and the possible implications for psychotherapists' training.

The current study contributes to literature regarding polyamory through the creation of the first valid and reliable measure of psychotherapists' attitudes toward polyamory. The current study also adds to research in explicitly measuring attitudes towards polyamory, which is an area of research that has only recently begun to take off. As previously stated, future research would benefit from continuing to explore psychotherapists' attitudes toward polyamory through the use of the PAPS with different targeted mental health professions, such as clinical and counseling psychologists, as well as different cultures and geographical locations, and how these demographic variables impact reported attitudes.

While this study measured psychotherapists' attitudes toward polyamory, it may be beneficial to explore how attitudes impact behavior in therapy. Although research indicates that attitudes can be predictive of future behaviors (Bentler & Speckart, 1979), the direct effect between psychotherapists' attitudes and therapeutic behavior variables is unknown. The current study examined beliefs and attitudes of psychotherapists in the abstract and these attitudes about polyamory may not be enacted when interacting with clients. This line of research may also explore competency and how attitudes towards polyamory interact or impact a psychotherapist's ability to provide culturally competent services. Thus, future research might explore the effect of psychotherapists' attitudes

towards clients and how negative or positive attitudes impact behaviors, decisions, and practices within the therapeutic session.

Implications for Clinical Training and Practice

The results of this study have important implications for applied clinical training programs, especially given how polyamory is becoming an increasingly visible phenomenon. While 81% of participants in this study reported that they had received graduate training on the general topic of sexual minorities, with 61% of participants reporting that they had taken a graduate level sexuality class, and 74% reported that a sexuality class was offered, the majority of psychotherapists (67%) indicated that they had not received graduate training on polyamory. Additionally, participants reported that they did not feel their training had prepared them to work with polyamorous clients (74%). Psychotherapists do not universally receive formal training on sexuality or diverse sexual minority groups (Minwalla, 2014). Graduate training tends to focus more on training competent practitioners in general. Training focusing on sexuality may center around working with gay and lesbian populations, without the exploration of other diverse sexual minority groups. The findings from the current study suggest that many psychotherapists have not been exposed to specific training in the area of polyamory.

Psychotherapists in this study reported working with a range of 0 to 100 polyamorous clients, with an average of five clients. This suggests that psychotherapists are working with polyamorous clients, yet receive little training for working with this population and often feel unprepared to address the therapeutic complexities of polyamorous clients. These findings are consistent with previous research that suggests

despite progress in training psychotherapists to be more aware, and focus on multicultural competency in working with diversity issues, there is a lack of training concerning diverse sexual identities and the majority of programs lack education on various sexual subcultures, such as polyamory (Miller & Byers, 2009; Scherrer, 2013; Weitzman, 2006; Weitzman et al., 2009). It has become increasingly important for clinicians in training to understand the challenges and complexities of sexual minority groups by increasing their knowledge of sexual subcultures, explore their own beliefs and values regarding non-traditional sexual orientations, and assess the presence and impact of bias within their therapeutic work (Kelsey et al., 2013). Future research would benefit from the exploration of how many psychotherapists seek out other types of training for working with polyamorous clients and what types of training they engage in during or after graduation.

Results from the current study have implications for training psychotherapists in the area of polyamory. This study indicated that the majority of psychotherapists did not explicitly stigmatize polyamory practitioners. However, results also suggested that psychotherapists were not receiving adequate training and did not have the educational background or competency that the American Psychological Association (APA) requires for working with sexual minorities (APA, 2012). Although APA published “Guidelines for Psychological Practice With Lesbian, Gay, and Bisexual Clients” (2012), there are currently no guidelines for working with polyamorous clients. Additionally, the negative attitudes that previous researchers have found regarding psychotherapists’ perceptions of consensual non-monogamy, in conjunction with many inaccurate beliefs held by the

general public about polyamory, is a sufficient reason to promote training models for working with sexual minority groups, as psychotherapists are not immune to cultural misconceptions and bias found in the general public, even if the results of this study indicate psychotherapists in this sample hold positive attitudes towards polyamory (Hymer & Rubin, 1982; Weitzman, 2006).

Based on the lack of training reported by psychotherapists in this study, it is recommended that sexuality training be required for graduate programs. Incorporating formal training through required course work, or informal training within practice, may provide a solution to avoid inaccurate beliefs and negative stereotypes that often are attributed to non-traditional sexual behaviors and practitioners of consensual non-monogamy. Training would allow psychotherapists to explore their beliefs and attitudes about polyamory while receiving feedback and direction for growth from professors, supervisors, and colleagues. Additionally, examining biases around polyamory in a graduate-level sexuality course or a training seminar would allow psychotherapists to understand and be aware of their attitudes and beliefs regarding relationships and interpersonal structures. Professors and supervisors might address common stereotypes about consensual non-monogamy and how such ideas have the potential to impact client conceptualization, treatment planning, therapeutic alliance, relationship, and outcome, as previous research has shown that the therapeutic alliance is fundamental in successful therapy (Henry, Schacht, & Strupp, 1986; Muran & Barber, 2010). Such exploration may also include discussions of cultural ideas related to western ideals of romantic structures and how such beliefs have impacted relational theories in the field and beliefs about

pathological behavior. Coupled with the increase in the visibility of polyamory, the negative consequences of stigma, and the lack of training for psychotherapists working with clients who endorse this relationship orientation, polyamory perspectives are an equally indispensable component in graduate training for understanding human psychology and assisting psychotherapists in promoting social justice.

Future research is needed to create cultural competency guidelines specific to polyamory with validated, effective treatment strategies to inform training, assessment, and intervention approaches. Given the current societal shift away from traditional relationship styles and the growing awareness and interest in non-monogamy, it is important to train psychotherapists to expect to interact with clients who practice consensual non-monogamy. Integrating polyamory into graduate training for psychotherapists would likely lead to a more informed and rich understanding of sexuality, relational theory, and notions of power and privilege within private and public spaces of interpersonal dynamics.

Implications for Theory

Theoretically, the structure of the PAPS was modeled after the Therapists' Attitudes Towards BDSM Scale (TAT BDSM; Kelsey et al., 2013). Although previous researchers have sought to gather information about perceptions of psychologists' attitudes toward polyamory (Hymer & Rubin, 1982; Knapp, 1975), there was not an instrument in existence that measured psychotherapists' attitudes towards polyamory. Using Rubin's (1984) radical theory of politics of sexuality, BDSM and polyamory can both be conceptualized as sexual minority groups. Rubin's framework proposed an

alternative theorization for the conceptualization of sexuality, in which sexual identities and behaviors are hierarchically organized. The foundation for this system is sexual stratification in which sexual practices that are seen as acceptable represent the “charmed circle” and include relationships that are monogamous, heterosexual, and valued as moral. Non-traditional sexual practices, such as BDSM and polyamory, are deemed inappropriate, dangerous, deviant, and are perceived as less legitimate and valuable. Using Rubin’s (1984) theory, because BDSM and polyamory fall outside the charmed circle, they warrant persecution and are thus similar in their respective sexual stratified locations. Results of this study indicated that the factor structure of the PAPS had strong internal consistency, which suggests that attitudes about BDSM and polyamory are structurally similar. This may suggest attitudes toward these two sexual minority groups are theoretically similar. Understanding polyamory in terms of sexual stratification, as suggested by Rubin, may prove beneficial in gaining a better understanding of the social and cultural implications of sexual minority groups and the spaces they occupy, as well as informing psychotherapists about the complexities of living on the fringes of the “charmed circle.”

Conclusion

The purpose of this study was to develop a psychometrically reliable and valid measure of attitudes towards polyamory for psychotherapists, the Psychotherapists’ Attitudes Towards Polyamory Scale (PAPS). This study successfully created a reliable and valid scale to explore psychotherapists’ attitudes towards this relationship style and, as such, created a method to assess the potential impact of cultural bias on

psychotherapists' attitudes when working with polyamorous clients. This study contributes to the body of research regarding polyamory by providing a quantitative means for the measurement of psychotherapists' attitudes towards polyamory. The PAPS is the only known measure of psychotherapists' attitudes towards the polyamorous relationship orientation. In spite of some limitations, this study has made an original contribution to the study of attitudes towards consensual non-monogamy, specifically polyamory, by addressing a gap in the research, as well as exploring potential needs for training and by supporting the future assessment of emerging perspectives on polyamory in the field of psychology. The development of the PAPS contributes to a more expansive approach to sexuality by moving sexual acts outside of private realms and into discussions of how psychotherapists can support diverse forms of sexuality within research and clinical practice.

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APPENDIX A

Demographic Questionnaire

Demographic Questionnaire

Your participation in this study will be kept strictly confidential. This information is not used to identify you. It is used to describe the participants in the research study.

For the purposes of this study, the following definition will be used for polyamory: “the state or practice of having more than one open romantic relationship at a time” (Merriam-Webster).

Please answer the following questions to the best of your ability:

Have you completed at least one semester of practicum or internship?

☐ Yes ☐ No

Are you currently enrolled in or have you completed a graduate program in one of the following areas: Counseling, Psychology, Family Therapy, or Social Work?

☐ Yes ☐ No

Please enter your age: _____

Biological Sex:

☐ Male ☐ Female ☐ Intersex ☐ MTF ☐ FTM

Gender:

☐ Woman ☐ Man ☐ Transgender ☐ Gender Queer ☐ Androgynous

Sexual Orientation:

☐ Gay/Lesbian ☐ Heterosexual ☐ Bisexual ☐ Pansexual ☐ Asexual ☐ Other

Racial and Ethnic Identity:

<input type="checkbox"/> African American/ Black	<input type="checkbox"/> Middle Eastern, Arab
<input type="checkbox"/> African/ Caribbean	<input type="checkbox"/> Multi Racial
<input type="checkbox"/> Asian Indian	<input type="checkbox"/> Native American/ Alaskan Native
<input type="checkbox"/> Asian/ Asian American	<input type="checkbox"/> Pacific Islander
<input type="checkbox"/> Bi Racial	<input type="checkbox"/> White
<input type="checkbox"/> Hispanic, Latina/ Latino, Chicano	<input type="checkbox"/> Other

Current Relationship Status: Please endorse all that apply

☐ Single ☐ Married ☐ Divorced ☐ Partnered ☐ Polyamorous ☐ Other

Religion and/or Spiritual Orientation:

With which religious tradition do you most closely identify?

- | | |
|----------------------------------------------------------------------------------|------------------------------------|
| <input type="checkbox"/> Liberal Protestant (Episcopalian, Presbyterian, United) | <input type="checkbox"/> Mormon |
| <input type="checkbox"/> Conservative Protestant (Baptist, Pentacostal) | <input type="checkbox"/> Muslim |
| <input type="checkbox"/> Roman Catholic | <input type="checkbox"/> Agnostic |
| <input type="checkbox"/> Jewish | <input type="checkbox"/> Atheist |
| <input type="checkbox"/> Orthodox | <input type="checkbox"/> Spiritual |
| | <input type="checkbox"/> Other |

Level of Religiosity:

0	1	2	3	4	5
Not					Very
Religious					Religious

Please indicate the highest degree completed that allows you to engage in mental health services:

- | | |
|------------------------------------------------|--------------------------------|
| <input type="checkbox"/> 4-year college degree | <input type="checkbox"/> M.D. |
| <input type="checkbox"/> Master's degree | <input type="checkbox"/> Ed.D. |
| <input type="checkbox"/> Psy.D. | <input type="checkbox"/> Ed.S. |
| <input type="checkbox"/> Ph.D. | <input type="checkbox"/> Other |
| <input type="checkbox"/> N/A (I am a student) | |

Please indicate the type of graduate program you received your training from:

- | | |
|----------------------------------------------------------|--------------------------------------------|
| <input type="checkbox"/> Clinical Psychology | <input type="checkbox"/> School Counseling |
| <input type="checkbox"/> Counseling/ Counselor Education | <input type="checkbox"/> School Psychology |
| <input type="checkbox"/> Family Sciences/ MFT | <input type="checkbox"/> Psychiatry |
| <input type="checkbox"/> Counseling Psychology | <input type="checkbox"/> Other |
| <input type="checkbox"/> Social Work | |

License: Please endorse all that apply:

- | | |
|-----------------------------------------------------------------|-------------------------------------------------------|
| <input type="checkbox"/> Licensed Marriage and Family Therapist | <input type="checkbox"/> Licensed Social Worker |
| <input type="checkbox"/> Licensed Chemical Dependency Counselor | <input type="checkbox"/> Not Licensed |
| <input type="checkbox"/> Licensed Professional Counselor | <input type="checkbox"/> Other, please specify: _____ |
| <input type="checkbox"/> Licensed Psychologist | |

Are you currently providing or have you ever provided mental health services (e.g., individual psychotherapy, group therapy, couples counseling) under your own license or under the supervision of a licensed professional?

☐ Yes ☐ No

What is the total amount of time you have spent providing mental health services under your own license or under the supervision of another?

Please indicate the amount of time and specify if the amount is in years, months, or weeks: _____

Please indicate how many direct client contact hours you have obtained: _____

☐ Yes ☐ No Have you received graduate training on the general topic of sexual minorities?

☐ Yes ☐ No Have you received graduate training on the topic of polyamory?

☐ Yes ☐ No Have you received postgraduate training on the general topic of sexual minorities?

☐ Yes ☐ No Have you received postgraduate training on the topic of polyamory?

☐ Yes ☐ No Did your training adequately prepare you to work with polyamorous clients?

In your graduate training, was there a sexuality class offered?

☐ Yes ☐ No

If a sexuality class was offered, did the class include information about polyamory?

☐ Yes ☐ No ☐ Unknown ☐ N/A

If a sexuality class was offered, was this class required in your training program?

☐ Yes ☐ No ☐ N/A

Have you taken a graduate level sexuality class?

☐ Yes ☐ No

How many polyamorous clients have you worked with?: _____

Have you published or presented research on the topic of polyamory?

☐ Yes ☐ No

How would you rate your competency to work with polyamorous clients?

1	2	3	4	5
Not		Unsure		Very
Competent				Competent

How would you rate your political values?

1	2	3	4	5
Very				Very
Conservative				Liberal

How would you rate your social values?

1	2	3	4	5
Very				Very
Conservative				Liberal

APPENDIX B

Psychotherapists' Attitudes Towards Polyamory Scale (PAPS)

Psychotherapists' Attitudes Towards Polyamory Scale (PAPS)

Please read each item and endorse one answer that best fits your response.

AWARENESS SUBSCALE (5 items)

True / False

1. I have never heard of polyamory before today.
2. I have heard of polyamory, but I don't know what it really involves.
3. I have a very good idea of what polyamory involves.
4. I have, or would consider, entering a polyamorous relationship.
5. I am acquainted with polyamorous individuals outside of my therapeutic work.

BELIEFS ABOUT THE ORIGIN OF POLYAMORY (3 items)

1 –strongly disagree 3 – unsure 5 – strongly agree

6. Polyamory is a sexual orientation like heterosexuality. (PA)
7. Polyamory is caused by attachment issues in childhood. (NA)
8. A person's interest in polyamory is innate, more than just a matter of choice. (PA)

HEALTH/ PATHOLOGY OF POLYAMORY (8 items)

1 –strongly disagree 3 – unsure 5 – strongly agree

9. Polyamory can be a model for healthy, long-term relationships. (PA)
10. Clients who engage in polyamory suffer from poor self-esteem and need validation. (NA)
11. Polyamory is a more egalitarian relationship model that allows for flexible gender roles and autonomy. (PA)
12. Clients who engage in polyamory are unable to form deep and meaningful relationships and likely fear commitment. (NA)
13. Having multiple, consensual romantic relationships can increase need fulfillment and relationship satisfaction for all partners involved. (PA)
14. Clients who identify as polyamorous are likely struggling with sex addiction. (NA)
15. Polyamory promotes self-acceptance, honesty, and allows for independence. (PA)
16. Clients who engage in polyamorous relationships are acting out immature impulses. (NA)

PROBLEMS PRESUMED TO BE ASSOCIATED WITH POLYAMORY (6 items)

1 –strongly disagree 3 – unsure 5 – strongly agree

- 17. Clients who engage in polyamory are more likely to contract sexually transmitted diseases. (NA)
- 18. Polyamory leads to harmful behavior such as dishonesty and engagement in secretive affairs. (NA)
- 19. Clients who engage in polyamory are just unhappy in their existing romantic relationship. (NA)
- 20. Having multiple romantic partners will lead to unstable relationships. (NA)
- 21. Polyamorous clients are likely coercing their partner into enduring an affair. (NA)
- 22. Polyamorous clients who are parents are creating an unhealthy environment for their children. (NA)

BELIEFS ABOUT TREATMENT (6 items)

1 –strongly disagree 3 – unsure 5 – strongly agree

- 23. Monogamy does *not* work for every client. (PA)
- 24. Polyamory interests should be eliminated through psychotherapy. (NA)
- 25. It could be helpful to refer clients to a polyamory support group. (PA)
- 26. Dyadic commitment is the only healthy relationship model that therapists should support. (NA)
- 27. Having multiple, consensual romantic relationships can be a healthy alternative for clients that do not feel comfortable in a monogamous relationship. (PA)
- 28. Clients should be discouraged from engaging in polyamorous relationships. (NA)

PERSONAL BIAS (5 items)

1 –strongly disagree 3 – unsure 5 – strongly agree

- 29. I would personally support clients' polyamorous relationship choices. (PA)
- 30. Due to my personal discomfort with polyamory, I would refer a polyamorous client to another psychotherapist. (NA)
- 31. I feel relaxed and comfortable discussing polyamory with my clients. (PA)
- 32. I would experience a decrease in motivation to work with a client if I discovered the client was polyamorous. (NA)
- 33. I would be personally uncomfortable working with a client who engages in polyamory. (NA)

APPENDIX C

Attitudes Towards Polyamory Scale (ATP)

Attitudes Towards Polyamory Scale (Johnson, et al., 2015; ATP)

Please indicate how much you disagree or agree with the following statements.

1	-	2	-	3	-	4	-	5	-	6	-	7
Disagree												
Strongly												
Agree												
Strongly												

Items in ATP Scale

1. Polyamory is harmful to children [R]
2. Polyamorous relationships can be successful in the long term.
3. I think that committed relationships with more than two individuals should have the same legal rights as married couples.
4. People use polyamorous relationships as a way to cheat on their partners without consequence. [R]
5. I would allow my children to spend time with a peer who had polyamorous parents.
6. Polyamorous relationships spread STIs (sexually transmitted infections). [R]
7. Religious forms of polyamory (such as polygamy) are acceptable.

[R] denotes reverse-coded items

APPENDIX D

Marlowe-Crowne Social Desirability Scale, Form C

Marlowe-Crowne Social Desirability Scale, Form C (Reynolds, 1982; M-C)

Listed below are a number of statements concerning personal attitudes and traits. Read each item and decide whether the statement is true or false as it pertains to you personally.

1. It is sometimes hard for me to go on with my work if I am not encouraged.
2. I sometimes feel resentful when I don't get my way.
3. On a few occasions, I have given up doing something because I thought too little of my ability.
4. There have been times when I felt like rebelling against people in authority even though I knew they were right.
5. No matter who I'm talking to, I'm always a good listener.
6. There have been occasions when I took advantage of someone.
7. I'm always willing to admit it when I make a mistake.
8. I sometimes try to get even rather than forgive and forget.
9. I am always courteous, even to people who are disagreeable.
10. I have never been irked when people expressed ideas very different from my own.
11. There have been times when I was quite jealous of the good fortunes of others.
12. I am sometimes irritated by people who ask favors of me.
13. I have never deliberately said something that hurt someone's feelings.

APPENDIX E

Participation Request Email

Participation Request Email

Greetings Dr. Xxxxx,

I would greatly appreciate any assistance with my dissertation by forwarding this email to current graduate students, interns, colleagues, and/or staff.

You are being asked to participate in a research study for Ms. Stavinotha's dissertation at Texas Woman's University. The purpose of the current study is to create a measure to assess psychotherapists' beliefs and attitudes towards polyamory. This research is intended to provide information regarding the current perception of polyamory in the mental health field. You are only permitted to participate once in the current study. Eligibility requirements for participants include: (a) at least 18 years old, (b) must have completed at least one practicum course, and (c) are currently or have completed training in a counseling, clinical, or family sciences psychology program.

The link to the study:

<https://www.psychdata.com/>

Sincerely,
Shannon Stavinotha

Shannon Stavinotha, M.A.
Counseling Psychology Doctoral Candidate
Texas Woman's University

APPENDIX F

Informed Consent Form

Informed Consent Form

Title: PSYCHOTHERAPISTS' BELIEFS AND ATTITUDES TOWARDS
POLYAMORY

Investigator: Shannon Stavinoha, M.A.Email: sstavinoha@twu.edu

Advisor: Jeff E. Harris, Ph.D.Email: jharris18@mail.twu.edu

Purpose of the Study

You are being asked to participate in a research study for Ms. Stavinoha's dissertation at Texas Woman's University. The purpose of the current study is to create a measure to assess psychotherapists' beliefs and attitudes towards polyamory. This research will also explore relationships about psychotherapists' beliefs regarding polyamory and their attitudes towards clients who identify as polyamorous. For the purposes of this study, the following definition will be used for polyamory: "the state or practice of having more than one open romantic relationship at a time" (Merriam- Webster).

You only permitted to participate once in the current study.

Eligibility requirements for participants include: (a) at least 18 years old, (b) must have completed at least one practicum course, and (c) are currently enrolled in or have completed a graduate program in one of the following areas: Counseling, Psychology, Family Therapy, or Social Work.

Description of Procedures

The study consists of completing, online, a packet of questionnaires regarding psychotherapists' beliefs and attitudes towards polyamory. PsychData will be used to administer the entire survey and you will be provided with instructions throughout the course of the survey for completing measures as they are presented online. Using the PsychData survey system, you will first be asked to review the informed consent and then click on a button if you consent to participate: "If you have read and understand the above statements, please click on the "Continue" button below to indicate your consent to participate in this study." You will then be asked to initially respond to a demographic section and then to complete 3 survey measures online. If eligibility requirements are not met, you will be thanked for your interest and excluded from completing the online survey. All participants are welcome to request the results of the study by emailing the researchers. Completing the study will take approximately 5 to 10 minutes.

Participation and Benefits

Your involvement in this research study is completely voluntary, and you may discontinue your participation in this study at any time without penalty. The researchers will benefit from this study by creating a measure to assess psychotherapists' beliefs and attitudes towards polyamory.

Potential Risks

The following are risks related to your participation in this study and steps that the researchers will take to minimize those risks:

There is a risk of loss of confidentiality. You will not use your name. You may risk a loss of confidentiality if you choose to email the researcher to ask for results of the study. If you choose to email the researcher, then the researcher will immediately delete such emails after responding to them. Confidentiality will be protected to the extent that is allowed by law. There is a potential risk of loss of confidentiality in all email, downloading, and internet transactions.

There is a risk of coercion. Your participation is completely voluntary, and you may terminate your participation in this study at any time without penalty.

There is a risk of fatigue and/or emotional discomfort. There is a risk of loss of time. You may take a break or discontinue your participation in the study without any negative consequences.

If you do feel distressed or experience emotional discomfort, please use the following information to seek support:

Online referrals for counseling services in your area:

American Psychological Association

Psychologist Locator Service

<http://locator.apa.org/>

The researchers will try to prevent any problems that could happen because of this research. You should let the researchers know at once if there is a problem and they will try to help you. However, TWU does not provide medical services or financial assistance for injuries that might happen because you are taking part in this research.

Questions Regarding the Study

If you have any questions about the study, please contact the researchers; their email addresses are at the top of this form. If you have questions about your rights as a participant in the research or regarding how the study was conducted, feel free to contact the Texas Woman's University Office of Research and Sponsored Programs at 940-898-3378 or via email at IRB@twu.edu.

The above referenced study has been reviewed and approved by the Denton Institutional Review Board (IRB): Protocol #: 18116

I have read the foregoing information, or it has been read to me. I have been given the opportunity to ask questions about the research. I consent voluntarily to participate as a participant in this study and understand that I have the right to withdraw from the study at any time without penalty. I hereby consent to participate in the study.

If you have read and understand the above statements, please click on the "Continue" button below to indicate your consent to participate in this study.