Counselor Ethical Boundaries and Practices

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Counseling Relationships and Ethical Boundaries

Ethical and successful counseling relationships require discussion and agreed-upon boundaries. Many types of dual relationships can occur between counselors and their clients, such as social, business, professional, institutional, communal, and forensic (GoodTherapy.org, 2019). Regardless of any business, community, or legal ties, counselors must always maintain a professional relationship with clients to uphold ethical standards, maintain professionalism, and prevent harm to clients.

Boundary Issues and Dual Relationships

Counselors should typically avoid non-professional relationships and carefully evaluate the benefits and risks of extending current counseling relationships (ACA, 2014). Applying flexible boundaries in an ethical manner can be helpful in a clinical setting and can build trust with clients (Corey et al., 2024). However, dual relationships can be harmful when the boundaries between roles or therapy guidelines are ambiguous, there is a lack of objectivity, or there is the potential for exploitation of a client (GoodTherapy.org, 2019). It is important for counselors to be self-aware and objective. They should assess their motivations and the potential effects of their actions on clients and consider how their actions will be perceived by clients (Barnett & Hynes, 2024; Corey et al., 2024). It is crucial to ensure any actions taken are ethical and align with the American Counseling Association Code of Ethics (ACA, 2014). Actions should promote client autonomy and align with their treatment plan. Effective collaboration with clients is essential, and comprehensive documentation is critical. Consulting with supervisors and peers can help ensure the best possible outcome.

If there is physical attraction between a counselor and their client, it is crucial for the counselor to remain professional. This can be achieved by seeking advice from more

experienced colleagues, following ethical decision-making models, consulting the ACA Ethics and Professional Standards Department, and adhering to the ACA Ethics Code. The practitioner should communicate with the client, document everything concisely, and refer to the informed consent process. The ACA Ethics Code prohibits sexual relationships between counselors and their clients (ACA, 2014). Engaging in boundary violations can lead to lawsuits, fines, license revocation, and potential harm to the client (Trimmell, 2024).

There may be social situations where counselors encounter their clients. For example, when they reside in a small town and go to the same church or their children attend the same school. There may be some scenarios where these interactions are beneficial to the clinical relationship and strengthen the client-counselor bond. To maintain a healthy relationship with a client, it's important to be friendly and courteous. However, it's crucial to maintain a professional boundary and not let the relationship go beyond the social level. If the client tries to pursue the relationship any further, the best course of action is to speak to them professionally about the informed consent process that was followed and the guidelines for an appropriate counselor-client relationship as well as the ACA Code of Ethics.

Counselors may be responsible for supervising a client's professional development, and the ACA Code of Ethics can serve as a valuable reference in such situations. Section F of the code outlines the responsibilities of supervisors, including the need to maintain appropriate professional relationships and boundaries with supervisees (ACA, 2014). In a dual relationship between a supervisee and a supervisor, both parties have ethical obligations as outlined by the code. It is crucial to strictly adhere to the code, maintain adequate documentation, and ensure that boundaries are thoroughly discussed during informed consent, along with relationship roles and best practices for clients.

Some counselors may be legally bound to testify at a client's trial. In these instances, it will be important for the counselor to be well-prepared and consult with their attorney, reviewing HIPAA guidelines and the laws in their state. They should take their time on the stand, use articulate language and be mindful of body language, and be prepared for cross-examination (Chamberlin, 2017). The counselor must be clear about what, if anything, they can legally withhold, contemplating options for opposing or limiting the production of client records (APACLI, 2016). The ACA Ethics Code, section E.10., requires practitioners to "maintain the integrity and security of tests and assessments consistent with legal and contractual obligations. Counselors do not appropriate, reproduce, or modify published assessments or parts thereof without acknowledgment" (ACA Ethics Code, p. 12). The practitioner should confer with their client to inform them of the circumstances, clarify their role and the parameters of confidentiality, review informed consent, address their concerns empathetically, and document their communication explicitly.

Professional Collaboration in Counseling: Working with a Multidisciplinary Team

Counselors should establish and maintain positive, strong relationships with colleagues both within and outside of counseling to improve client services (ACA, 2014). Counselors should acknowledge and respect the expertise of other professionals and collaborate on decisions that impact clients, incorporating counseling and interdisciplinary values, viewpoints, and experiences (ACA, 2014). Practitioners should respect methods based on empirical evidence and scientific foundation. Counselors on interdisciplinary teams collaborate to clarify roles and should attempt to resolve issues within the team when a team decision raises ethical concerns (ACA, 2014). If a resolution cannot be reached, they should explore alternative options that prioritize the client's well-being.

The author would like to collaborate with a team experienced in working with the military, PTSD, and EMDR to produce innovative and effective solutions for clients. The team could consist of psychologists, mental health counselors, pharmacists, and sexual or substance abuse counselors, with administrative support. With a diverse team with different levels of expertise, many facets of the target audience could be addressed simultaneously, such as substance abuse. The writer hopes to learn from colleagues, combine strengths and perspectives, and work together in harmony to achieve their common goals.

Relationships with Supervisors and Colleagues

Section F of the ACA Code of Ethics outlines in detail the roles of a supervisor. It states that supervisors should endeavor to cultivate respectful, ethical, and professional relationships and clarify and maintain appropriate boundaries with supervisees (ACA, 2014). Supervisors should be "fair, accurate, and honest in their assessments of counselors, students, and supervisees" (ACA, 2014, p. 12). Supervisors are obligated to monitor the services supervisees provide, their performance, and professional development, in addition to the welfare of clients. Trainees should be educated by supervisors on informed consent, policies and procedures, and tools for due process appeals related to supervisor actions. In addition, supervisors inform supervisees of ethical and professional standards and legal responsibilities (ACA, 2014). Per the ACA code, sexual relationships are prohibited. Both supervisors and supervisees have a responsibility to follow the code of ethics. Fulfilling multiple roles involves thinking through potential problems before they occur and putting safeguards in place (Corey et al., 2024).

Supervisor-supervisee and counselor-client relationships are dual relationships that can present opportunities for unethical behavior. Human behavior is involved, and issues like attraction, transference, countertransference, and boundary crossing can occur. The ACA Ethics

Code addresses both scenarios and advises against crossing boundaries or having sexual relationships while promoting and maintaining professional and ethical relationships and always keeping the clients' welfare at the forefront (ACA, 2014). In both counseling and supervisory relationships, it is vital that practitioners remain vigilantly self-aware, as they hold power over their clients or supervisees due to their professional position and knowledge. The primary distinction between these two relationships is the presence of a supervisory relationship in one of them. Fraternization between a supervisor and their supervisee can lead to biased treatment, affecting the trainee's performance and fair monitoring and potentially harming the client.

Counselors may witness blatant, egregious, unethical behavior between a colleague and a client, such as carrying on a sexual relationship. In this instance, the practitioner could use an ethical decision-making model to gather facts, determine whether a problem truly exists and whether there is an ethical, legal, moral, professional, or clinical issue involved. One such model is the Forester-Miller and Davis model. This approach outlines steps for ethical decision-making, such as identifying the problem and articulating the ethical concern, applying the ACA Ethics Code, determining the nature and dimensions of the dilemma, generating a possible course of action, considering the potential consequences of all options, evaluating the selected course of action, and implementing the course of action (Forester-Miller & Davis, 2022, p. 5).

When counselors hear of colleague misconduct from a client and can't resolve the issue personally, they should refer to the ACA Ethics Code, appropriate authorities, colleagues, their attorney, or their state licensing board. The counselor should communicate with the colleague and document everything. They must determine whether they have a legal duty to report or whether their obligation to maintain confidentiality would supersede that duty (Corey et al.,

2024; ACA, 2014, I.2.c). If blatant, egregious behavior is witnessed or proven, a counselor has an obligation to report it.

This course has provided me with the tools I will need as a counselor to make ethical decisions confidently. I have a more succinct understanding of the ACA Ethics Code (ACA, 2014) and numerous examples of ethical decision-making models. I am keenly aware of resources for ethical decision-making, relying on the expertise of colleagues, insurance providers, attorneys, and the Arizona State Licensing Board. I will become a part of organizations such as the ACA and the APA and utilize their resources. I was enlightened by the intricacies of dual relationships and how best to deal with them. For example, what to do if I am ever faced with unethical behavior by colleagues, or a client with whom personal feelings have developed. I have learned the complexities of following ethical and legal guidelines while still remaining an advocate for my clients and protecting their confidentiality. I gained an astute perspective on allowing some flexibility with dual relationships while maintaining professionalism. I learned a great deal about confidentiality and its limitations and applicable laws like HIPAA. I found this class invaluable and I have saved many references for my career as a counselor.

The Bottom Line

Counselors must prioritize their clients' best interests and avoid exploitation while maintaining a flexible approach to boundaries and dual relationships. Practitioners must consider the provisions of the ACA Ethics Code (ACA, 2014), seek advice from colleagues when faced with dilemmas, and use ethical decision-making models and other ethical guidelines to assist in making decisions. Practitioners should clarify boundaries at the onset of counseling during the informed consent process. It is also advisable for counselors to consult with professionals, such

as their insurance company or attorney, about things such as dual relationships and multiple roles to avoid liability (Corey et al., 2024).

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