Being Our Most Ethical Self
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Objectives

• Examine how personal values determine professional conduct
• Identify why it is important to report unethical behaviors
• Determine how to make ethical decisions in difficult situations
Chiseled in Stone or Guidelines?

Types of Ethics

Mandatory Ethics:
- basics
- Must do or must not do
- Actions that are safe and legal

Aspirational Ethics:
- the highest standards that are sought
- More than meeting basic code
Types of Ethics

Principle Ethics:

“Is this situation unethical?”
“What should I do?”
Obligations and methods of solving ethical dilemmas

Virtue Ethics:

“Is what I am doing the best thing for the client?”
“Who should I be?”
Counselor/therapist character traits and ideals that are not required

The Code as a guide

- Ethics are NOT absolute in all situations
- Ethical codes are not cookbooks
- Need professional, ethical, informed judgment
- Consider the code within the “culture” of counseling
- Each client is unique
- Each situation is different, needing different solutions
Primary purpose is to:

- Protect the welfare of clients
- Protect the public
- Guide professionals in daily work

- Provides guidance in making decisions when problems arise

Limits to Codes of Ethics

- Some issues can’t be handled relying on ethic codes by themselves
- Sometimes lack clarity/precision, makes assessing ethical dilemma blurry
- Simply learning codes and guidelines won’t always lead to ethical practice
- Conflicts can be within codes and among various organizations’ codes
- Members of more than one profession, hold state license and national certifications have numerous codes of ethics which may not be uniform

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More Limits

- Codes need to be reactive not proactive
- Personal values may conflict with a standard within ethics code
- Codes may conflict with institutional policies and practices
- Codes need to be understood within a cultural framework; must be adapted to specific cultures
- Codes may not be in line with state laws or regulations regarding reporting requirements
- Not all members within a professional organization will agree with all elements of their code

Adapted from Corey, Corey and Callahan p7

Making Ethical Decisions

- A Glance at some decision-making models

PRINCIPLE VIII: RESOLVING ETHICAL CONCERNS VIII.3
Samples

- A Simple Guide to Ethical Deliberation for Professionals, by Vanya Kovach
- The Ethical Worksheet, by Thomas Bivins
- Ethical Decision-Making Plan, United States Department of Defense
- PLUS Model
- The Seven Step Method for Analyzing Ethical Situations

Compiled by Alex Wellington,
Department of Philosophy, Ryerson University, June 2009

7 Step Model of Decision-making

1. Identify the problem
2. Apply the appropriate code of ethics
3. Determine the nature of the dilemma
4. Generate potential course of action
5. Consider the potential consequences of all options and choose a course of action
6. Evaluate the selected action
7. Implement the course of action

(Forrester-Miller and Davis)
Why would I not report?

But he’s my friend!
I don’t want to ruin her career!
Someone else will do it.
Nothing will happen anyway...

PRINCIPLE III: PROFESSIONAL RESPONSIBILITIES AND WORKPLACE STANDARDS III.38
PRINCIPLE VIII: RESOLVING ETHICAL CONCERNS VIII.10 and VIII.11

Albert Einstein

We cannot solve all our problems with the same thinking we used when we created them.
Steps for addressing and reporting unethical behavior

- **Obligation** to deal with unethical conduct we hold each other responsible
- **Talk** to the person, intervene, if possible
- Try to **resolve** at lower, informal level
- May talk to **supervisor**
- Seek **consultation**, if unsure
- If egregious act, **reporting** is necessary
- If a **client reports** to you, **advise** how to proceed
- If you see professionals as clients, **encourage** them to **self report**

Reporting Obligations

- We are the **Gatekeepers**: Peer monitors
- **Don’t assume** someone else will do it
- Responsibility to **confront** recognized unethical behavior
- Legal and ethical obligation/responsibility to **report egregious or unresolved violations**
- Ignoring ethical misconduct is an ethical violation
- Seek supervision/consultation, **document, report**, if necessary
Why Many People Don’t Report:

*Everybody, Somebody, Anybody, Nobody*

There were four people named Everybody, Somebody, Anybody, and Nobody. There was an important job to be done, and Everybody was sure Somebody would do it. Anybody could have done it, but Nobody did it. Somebody got angry about that because it was Everybody’s job. Everybody thought Anybody could do it, but Nobody realized that Everybody wouldn’t do it. In the end, Everybody blamed somebody when Nobody did what Anybody could have done.

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Personal Beliefs and Values

Influence our Professional Decisions

PRINCIPLE III: PROFESSIONAL RESPONSIBILITIES AND WORKPLACE STANDARDS III.18
Influence of Personal Values: Knowing Ourselves

Are you aware of how your personal values influence the professional choices you currently make?

As we go through today, consider how your values influence your decisions in case examples.

Challenge yourself for self exploration.

Challenging Topics & Values

Refer to handout

- List the 3 most difficult topics for you to be objective about with a client
- What personal values or beliefs are challenged with each topic
The Dinner Party

Who will you invite to dinner?

Values and Honesty

How honest should we be?

**Sometimes** we have to interfere when clients are making poor, harmful or destructive decisions

Then:

“We need to be honest and open about our views, collaborate with the client in setting goals that fit his or her needs then step aside and allow the person to exercise autonomy and face consequences.”  (Corey, Corey and Callahan, p79)

For example: working in addictions, domestic violence, high risk behaviors, marriage counseling, etc.
When Realities Collide

You are meeting a client for the first time for a mental health and substance use evaluation. He has been referred for the assessment by child protective services. He is reportedly actively drinking heavily and possibly using other drugs. He is involved with CPS as the result of accusations of molesting his pre-teen daughter while he was drunk. He is a farmer and presents dressed in denim overalls, plaid shirt and work boots. You invite him to take a seat. He sits, crosses his arms defensively across his chest and states without preamble, “She’s my daughter and I’ll screw her if I want to.”

Questions:
1. What is your first reaction? Would you possibly give the client powerful, non-verbal messages?
2. Would you be able to work with this client? Or would your judgment/objectivity be impaired to the point that you could not? What if he had been dressed in a 3 piece suit?
3. Do your values have to be congruent with that of the client to work with him effectively?
4. Do you have someone with whom you can consult?

Could I work with this person?

Take a minute to answer the Questionnaire
(Source: Corey, Corey and Callahan p83-84)

1. Would anyone like to share a type of client that you put a C next to?
2. What value or belief is challenged by that type of client?

PRINCIPLE I: THE COUNSELING RELATIONSHIP
I.1
**Imposing vs. Exposing Values**

- **Imposing values**
  Forcing counselor values on client

- **Exposing values**
  Helping client to recognize his/her own values and discuss

- **Encouraging different perspectives**
  Offering a bouquet of flowers

- **Knowing when to discuss values conflict between therapist and client**

- **Use of professional judgment**

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**Imposing Values**

Victor is a counselor in a drug court program. He is active in the community in charitable events. He keeps fliers about fund raisers on his desk in his office. He encourages clients to give to charities as part of their “growth process”. He requires that clients participate in fund raising rallies as part of the program and community service work. He had a Christmas party for a group session during the holidays and asked clients to bring canned goods for food baskets. Despite objections from co-workers, Victor does not see any ethical or legal problems with what he is doing.

**Ethical Issues?**

**Legal Issues?**

“...counselors directly attempting to influence a client to adopt their counselors’ values, attitudes, beliefs, and behaviors... actively or passively.” (Haynes, Haynes and Callahan, page 80)
Exposing Values

Marvin is a marriage and family therapist working with a couple from very different cultural backgrounds. The husband is Native American who was raised on a Reservation in the Southwest. The wife is African American raised in an upper income home in the South. They met while in college. They have two children and have come to therapy due to disagreements concerning child rearing practices.

Marvin was raised in a home where there was strict discipline with children while expression of love and independence were displayed. Marvin has adopted this with his children also and believes it is a successful method of raising children.

The husband believes that children should be “seen and not heard”, respect their elders and do as they are told. The wife has a very liberal view of parenting and believes in free expression of children with very little discipline. Marvin does not agree with either approach.

During sessions, Marvin encourages each client to discuss their parenting values and explores with them possible compromises and options that would be acceptable to both parents without revealing his own views of parenting.

Neutrality in Counseling

Is this truly possible?

Questions:

- Express our beliefs in the work we have chosen? (Value Laden)
  Domestic violence, drug use, child abuse, marriage....
- Where do you place your values in session?
  non-verbal cues, body language
Further questions...

- Do therapists direct what clients choose to explore?
- If the client brings up an issue that is not in line with your beliefs, what do you do?
- Client behaviors that challenge your belief of right and wrong, how do you address it without being judgmental or shaming?
- Know issues that bring up your “stuff”. Can you keep them out of the session?

PRINCIPLE I: THE COUNSELING RELATIONSHIP  1.22

The bias shelf

- Focus on client
- Explore conflict – behaviors, values and beliefs
- Professional addresses their own personal values outside the session
- Values and beliefs can create biases

You know they are there but are they in the box on the shelf?
Helping Clients?

Sandra is a counselor who works in a moderately size community with a variety of resources. She is active in her church and feels that part of her Christian work is to “spread the word”. Sandra works in a private practice with several other therapists. She often has discussions with clients about developing a healthy support system. When clients begin to talk about possibly attending a church, Sandra invites them to her church. She believes this is a good way to help clients and share her faith at the same time.

What are the ethical issues in this situation?
Is there a problem with clients attending her church?
Is there other ways that Sandra could accomplish her personal goals and remain ethical?

Consider: Imposition of values, conflict of interest, undue influence, cultural insensitivity

What is your Plan
To keep in touch with you?
Values Enhancement Plan (VEP)

A. Qualified Supervision
   a) Do your research
   b) You are responsible even if you follow poor advise
   c) Be proactive to develop values awareness

B. Competent Supervision
   a) Different views, culturally diverse perspectives
   b) Check credentials, training and experience
   c) Ethical, professional

C. External professional development
   a) Learn ways to integrate values and counseling practice
   b) Resources, workshops, reading from qualified resources

D. Internal professional development
   a) Self-reflection, self-analysis
   b) Holistic approach
   c) Activities that are enjoyable, stimulating reflectively
   d) Creative expression

Personal Values and Culture

Help me understand!
Diversity:
• We could learn a lot from crayons: some are sharp, some are pretty, some are dull, some have weird names, and all are different colors.....but they all exist very nicely in the same box.

thinkexist.com/quotations

• We have become not a melting pot but a beautiful mosaic. Different people, different beliefs, different yearnings, different hopes, different dreams.

Jimmy Carter

Cultural Humility
• Term coined by Melanie Tervalon and Jann Murray-Garcia in 1998 to describe a way of infiltrating multiculturalism into their work as healthcare professionals.

• Replacing the idea of cultural competency
• Based on the idea of focusing on self-reflection and lifelong learning
• Believed that health care professionals were not receiving appropriate education or training in terms of multiculturalism, and
• Developed a new method of approaching the topic
Cultural Humility:

• An attitude that:
  • Includes pride for one's own culture and knowledge that therapist's world view is not universal
  • Acknowledges that a patient's culture can only be appreciated by learning from the client
  • Understands that attributing certain traits or attitudes to individuals who belong to a certain group is generalization; may or may not be accurate or helpful in understanding a client.
  • To be sensitive to a client's culture, therapists must possess cultural humility.

Revised from: Cultural Humility Task Force at San Francisco General Hospital Department of Psychiatry

Attitudes and Behaviors of Culturally Competent Counselors
TIP 59  p49-50

Respect
• Exploring, acknowledging, and validating the client’s worldview
• Approaching treatment as a collaborative process
• Investing time to understand the client’s expectations of treatment
• Using consultation, literature, and training to understand culturally specific behaviors that demonstrate respect for the client
• Communicating in the client’s preferred language

Acceptance
• Maintaining a nonjudgmental attitude toward the client
• Considering what is important to the client
Striving for Cultural Awareness

- Be sensitive to, acknowledge and confront differences directly
- Ask questions
- Talk with colleagues of different race, sex, age, sexual orientation, religion, regional origins, etc.
- Examine your own biases...and fears

We are never a blank slate!

PRINCIPLE I: THE COUNSELING RELATIONSHIP 1.6

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