Maintaining professionalism and compassion: We can do both

Counselors are granted the opportunity to work with clients from all walks of life who are experiencing a variety of obstacles in their lives. Many counselors are drawn to this profession by a desire to help others and a hope to relieve suffering by providing supportive interventions. These motivations are important to consider. They can be the driving force behind not only selected treatment interventions but also how a counselor chooses to engage and interact with clients.

The image of a counselor is one of a person who is calm, kind, knowledgeable and compassionate. Of equal importance is an image of counselors conducting themselves with integrity, consistently practicing in a professional manner throughout the counseling relationship. Within counselor education programs, we emphasize the importance of gaining awareness of one’s life experiences and what those experiences bring to the role of being a counselor. We also stress the need to understand the profession’s codes of ethical conduct. In addition, training and supervision should include preparation to recognize the emotional and psychological impact that clinical mental health work can have on counselors.

Counselors are not infallible and, like anyone else, can find themselves practicing in an unethical manner. Patterns of questionable judgments and behaviors on the part of a counselor may or may not bring harm to the client, but they are more likely to result in complaints of unethical practice being heard by a supervisor, an employer, an ethics committee or a licensing board.

Professionalism in the counseling relationship

The preamble to the 2014 ACA Code of Ethics reminds us of a core professional value of the counseling profession: “safeguarding the integrity of the counselor–client relationship.” This includes avoiding actions that cause harm and establishing a relationship in which the client is able to trust in the role maintained by the professional counselor.

The purpose of our ethics code is to set expectations of conduct, with a primary emphasis on the role of the professional counselor. The introduction to Section A of the ACA Code of Ethics notes, “Counselors facilitate client growth and development in ways that foster the interest and welfare of clients and promote formation of healthy relationships.”

Section A guides counselors through integral aspects of the formation of a professional relationship in counseling. Counselors promote professionalism in practice by maintaining accurate records and documentation (Standard A.1.b.), working collaboratively with clients to determine goals for treatment (Standard A.1.c.), consistently utilizing and discussing informed consent documents (Standard A.2.), avoiding the imposition of values on others (Standard A.4.) and avoiding sexual or romantic relationships with current and former clients (Standard A.5.).

Nonprofessional interactions should also be thoroughly vetted to avoid harm being brought to the client (Standard A.6.c.). One common ethical violation heard before licensing boards involves the failure to manage and maintain boundaries (Standard A.6.).

Lessons learned in public meetings

Assisting clients is such a rewarding experience that some counselors allow themselves to violate boundary rules in the name of “helping the client” and “being nice.” Counselors may have access to professional contacts or information outside of the scope of their practice. If so, they have to decide in what way they will use that power.

For example, should Ima Counselor refer a client to a close family member who happens to specialize in the medical condition the client talks about in session? Ima Counselor decides they could make a quick call to this relative to ensure that the client is brought into the office earlier rather than waiting for a referral that is already being handled through the primary care physician. In the process, Ima Counselor realizes that they are reaching over into what they consider to be medical case management, which they have never done for any other client. Ima Counselor reasons that the client will probably be happy that Ima Counselor used their influence to get the client closer to receiving this medical intervention. Ima Counselor asks, “Shouldn’t I do everything in my power to help my client?”

For more than a decade, I have regularly attended the Texas State Board of Examiners of Professional Counselors’ Complaint Committee meetings, first as a liaison for a state organization, and then as a counselor educator wanting to learn more about ethical infractions. Complaints against licensees have been resolved in public meetings for many years, allowing attendees to hear answers to a question we often wonder about: What led to the counselor doing that?

The Sunset Commission recently recommended that this complaint process be changed because of concerns about confidentiality and the timely processing of complaints. This change will more than likely take effect over the next year. No longer will attendees at the public hearings be able to listen to a state investigator’s chronological account of individual complaints, the investigator’s initial interaction with the complainant,
the response (or lack thereof) from the charged member and the tentative findings of violation. Also gone will be the public hearing in which, after each synopsis, the committee chair invited the complainant (if present) to add any additional information that may not have been discovered in the investigation. The charged licensee was then able to respond to the complaint before the committee.

This has to be a nerve-wracking process: providing an investigator with a statement and evidence to disprove the complaint, publicly defending oneself (with or without a lawyer) and answering follow-up questions from licensing board members. Being witness to these counselor statements proved to be a truly educational experience. The statements often revealed insights into what was going on in counselors’ lives before or during the time of the alleged violations.

Attendees came away with a clearer understanding of the motivations behind the boundary crossings or other violations, as well as what steps the counselor had avoided or disregarded instead of safeguarding the professional relationship. Students who attended had their classroom ethics instruction reinforced, and many of them emerged wanting to engage in more in-depth discussions after the meetings.

As an instructor of ethics, I urge students not to use this information to criticize those counselors brought before the licensing board. Rather, I challenge students to reflect on their own practice to determine how boundaries, documentation and informed consent practices might be strengthened and how efforts at mediation of other potential ethical violations could be implemented. Ultimately, these suggestions are also framed from the perspective of protecting the welfare of clients and the professional counseling relationship.

Ethical violations heard before licensing boards

Among other examples of boundary violations: The client of a counselor was found to be providing home renovation services to family members and a business associate of the counselor. When asked how they were able to contact the counselor’s client for these services, the counselor indicated that he didn’t remember giving them the client’s phone number.

Still other boundary violations revolve around counselors’ use of specific language or actions with clients in the name of encouragement and support. For instance, one counselor didn’t see a problem signing off communications with a client with “Love, your counselor” because “I love him like I love all of my clients.” Another counselor left a voicemail stating how much they loved being the client’s counselor. These actions become problematic when issues of romantic interaction, such as “a hug that lasted too long,” were alleged. Another client misinterpreted the holding of hands while praying during session as a romantic gesture on the part of the counselor.

Complimenting a client who was going through a contentious divorce and referencing the client’s attractiveness ended up being seen as sexual harassment. When a counselor sent playful and inappropriate text messages that used sexual humor to a client, questions were raised about whether the counselor was utilizing communication outside of the session for sexual gratification. One counselor’s documented “out-of-office interventions” were actually gifts given to clients to offer encouragement and support. Another licensee claimed that they became friends with clients on Facebook solely for the purpose of sending inspirational quotes between sessions.

Another counselor purchased crafting materials and equipment from a client and then allowed crafting to take place during counseling sessions. The counselor failed to keep records documenting whether counseling or crafting took place during sessions that were billed to an insurance company.

Additional communications outside of session included a counselor who sent greeting cards to a client, albeit to explain why they could not be friends — while still engaging the client in calls, emails and texts between sessions. Yet another counselor provided what they described as “additional support” to an incarcerated client via email and text, even while the counselor ignored their own needs for support after experiencing significant trauma and loss over a short period of time.

More egregious consequences were experienced in a case involving a counselor who befriended the mother of a former client. Ultimately, this led to a sexual relationship, restraining orders, lies being told to employers and investigators, and a denial of paternity that was ultimately resolved, with the counselor being ordered to provide child support.

Readers are likely wondering what consequences the counselors faced in the scenarios I just described. The answer varies. Depending on a number of factors, including the severity of the violation, the harm caused to the client and the counselor’s demonstrated understanding of the violation, consequences ranged from letters of reprimand, mandated remediation and probated suspension to revocation of the counselor’s professional license. There is a lot to lose in the name of “helping the client” if counselors do not practice in a professional manner.

Attitudes toward boundaries

The attitudes that counselors and counselors-in-training hold about boundaries can significantly affect the implementation of boundaries in session. Ethics courses can help shape these attitudes by providing vignettes that allow for hypothetical application of ethical standards. Giving students opportunities to process together in small groups ensures that everyone has a chance to be part of the discussion and generates enough variability for each group to participate in a larger class discussion. Students seem to enjoy hearing when other groups have similar points to make and take an interest when divergent viewpoints are proposed. My ethics classes strive to understand not only the violated ethical principles but also the intricacies of how counselors could find themselves making an unethical choice or taking an unethical action.

The way we talk about boundaries from the beginning — in particular addressing the impact on the client — is how counselors-in-training will think about them. Inevitably, a discussion will come up in which someone describes a counselor as being “nice” for allowing a boundary crossing, such as letting a counseling session go over time. My
students explore where this “niceness” comes from and what they believe the counselor is trying to convey by bending the rules. Some students say they see this as the counselor being accommodating or flexible, particularly when something out of the ordinary has happened to the client (e.g., a major accident, the death of a loved one, an unexpected stressor) and the client needs a little more attention. That “unexpected” part ends up being the key — it is not something that will or should happen every session.

Boundaries are not about being nice or mean. They are about providing clarity for the counseling relationship. We see this in Standard A.2., which deals with informed consent in the counseling relationship. Its purpose? To let clients know what to expect in counseling, how to respond in certain instances, what the counselor’s roles and responsibilities are and what the client’s roles and responsibilities are. We fail to protect clients when we don’t institute the boundaries that have been placed around our profession.

If we don’t set and execute boundaries at the beginning of counseling, it can feel even harsher to do so after the counseling relationship has been established. How do we go back and say, “I should have been implementing this all along, but I was afraid to do so.” How does that demonstrate healthy communication in relationships?

Counselors serve as role models. We implement boundaries and help clients see that we will still treat them, respect them and refrain from judging them if they violate those boundaries. Counselors will talk clients through the boundary violation or crossing and discuss what it is about the boundary that might be problematic or difficult for them to honor. Counselors also take steps to protect clients from the unforeseen consequences to boundary violations or boundary crossings that we, as counselors, are required to consider as possibilities, no matter if the client assures us that no problem will arise.

Clients are more likely to respect a counselor who demonstrates integrity by providing structure, consistency and safety in the counseling experience, not someone who is too flexible, unstructured and lets the relationship happen by chance (or luck).

The ethical virtue of integrity

According to Merriam-Webster, one definition of integrity is “firm adherence to a code of especially moral or artistic values: incorruptibility.” Some of the synonyms for integrity — virtue, honesty, honor, probity — provide additional descriptors of what this means in action. Virtue means uprightness of character or action. Honesty implies a refusal to lie, steal or deceive in any way. Honor suggests an active or anxious regard for the standards of one’s profession, calling or position. Probity implies tried and proved honesty.

Integrity and all of its synonyms perfectly highlight the aspirational practice of professional counseling to which we all should strive. Asking ourselves what we can do to ensure that we are practicing with integrity can help bring to light those areas in which we have trouble establishing and maintaining boundaries. Taking the time to do this work is worth it to “foster the interest and welfare of clients and promote formation of healthy relationships” (introduction to Section A of the ACA Code of Ethics).

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