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When Unchecked Biases Lead to Imposition of Values: The Case for Counseling Ethics

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Abstract

Counselors encounter complex ethical issues when working with clients within the context of the professional therapeutic relationship. A common ethical issue arises when a counselor's personal biases and values clash with those of their clients. This paper reviews an ethical brief that addresses the clash of religious and cultural values between a counselor and his client. Ultimately, this ethical case results in the counselor imposing his values onto the client. The authors of this paper write from the perspective of a consultant team who is required to make recommendations to a court of law while utilizing an ethical decision-making model to decide a course of action.

Keywords: counseling ethics, values, ethical decision-making model, ethical code

When incidents occur that call into question the ethics of the counselor, it is paramount that a deliberate and systematic investigation occur. The investigation must adhere to the scrutiny found in a court of law. Wheeler and Bertram (2012) suggested an ethical decision-making model be utilized that will yield defensible results when counselors have to explain their decision-making process in a court of law. This suggestion is also congruent with the recommendation by the American Counseling (ACA) Code of Ethics (2014), mandating that all counselors utilize an ethical decision-making model when faced with difficult ethical dilemmas. In the hypothetical scenario listed in Appendix A, Appropriate Termination, the authors analyze the case and utilize an eight-step, legal and ethical decision-making model found in The Counselor and the Law: A Guide to Legal and Ethical Practice (Wheeler & Bertram, 2012). Considered a practical guide and congruent with the current literature on the topic of ethics, the authors found The Counselor and the Law: A Guide to Legal and Ethical Practice a legitimate resource for their analysis.

Using the eight-step legal and ethical decision-making model, one is able to identify an overall understanding of the problem and relevant variables. Furthermore, the model guides the reviewer to be cognizant of the applicable laws and ethical codes that may be pertinent. The model also calls into question any personal influences of the parties involved that may have affected the scenario. One of the more significant points in the model advises consultation from an outside perspective. Once this consultation takes place, the reviewer lists the possible courses of actions and the probable consequences. From this list, a decision is made and the appropriate action executed. The final step in the decision-making model directs the reviewer to document the decision-making process along with follow-up actions (Wheeler & Bertram, 2012).

Utilizing this legal and ethical decision-making model, an examination of the counselor's actions described in the scenario of *Appropriate Termination* finds ethical concerns. After the appropriate investigation, it is clear the counselor committed ethical violations. Further, analysis of the supervisor's actions finds minimal yet culpable infractions. Based on the findings from this model, there is enough information to issue a verdict that will be sustainable and defensible in a court of law. This essay will discuss in detail the overall ethical concerns identified using the eight-step, legal and ethical decision-making model and support the recommended verdicts.

Define the Problem

The initial step of the ethical decision-making model is to define the problem or dilemma at hand (Wheeler & Bertram, 2012). It should be determined if this problem represents a legal, ethical, or clinical issue. In the case described in the scenario, the issue presented is primarily ethical in nature and does not represent a pressing legal concern as the actions of the counselor and supervisor did not violate any laws. Arguably, this case scenario involves two significant problems that represent ethical violations by the counselor, including personal values and appropriate termination.

In the case scenario, a non-Jewish female client entered into a counseling relationship with a male Jewish counselor in order to seek guidance in dealing with her future Jewish in-laws and gain cultural insight pertaining to this concept of outmarriage (i.e., interfaith marriage). In return, the counselor's bias relating to his personal values

prevented him from being able to provide the client with the services that she was seeking. Ultimately, the counselor imposed his personal values on the client by stating that he did not believe she should marry her fiancé due to his personal beliefs relating to interfaith marriage. At the tenth session, the counselor decided to be more blunt and told the client that, in his opinion, she should not marry her fiancé (Appendix A).

Additionally, once the client's insurance coverage concluded at the end of the tenth session, she wanted to continue counseling services, but the counselor felt that further counseling would not benefit her. By the seventh or eighth week, he had the opportunity to inform the client of the possibility that her issues may continue to go unresolved at the end of their 10-week counseling duration. Instead, he waited until the last session to end the therapeutic relationship abruptly. This represents an ethical issue by not providing pre-termination counseling prior to what the counselor determined to be the final session. Although the counselor recommended the client try a community mental health center to continue counseling, the counselor's actions do not demonstrate an appropriate referral; and the abrupt ending of the therapeutic relationship can result in potential harm by abandoning the client.

Identify the Variables

The second step in the ethical decision-making model is to identify the key/critical variables (Wheeler & Bertram, 2012). It is of primary importance to examine the different people affected in this ethical brief in both direct and indirect ways. The various individuals directly affected by the outcomes of the ethical decision include Christine (client), Steve (counselor), and Marvin (supervisor). Other members indirectly impacted include Jeremy (fiancé of Christine), the parents of Jeremy, and the administrative clerk who made the referral to Steve.

Other variables examined in this case involve relational dynamics and multicultural considerations. The counseling relationship between Steve and Christine may have a direct impact upon the relationship between Christine and Jeremy and should be carefully considered. Most of this impact derives from Christine's initial goal of wanting to explore with Steve how to approach her future in-laws and the complex issues surrounding her soon-to-be interfaith marriage with her Jewish fiancé, Jeremy. Other cultural considerations include the religious differences between Christine (i.e., her Christian faith) and Jeremy (i.e., his Jewish faith) and differences between Steve (i.e., Jewish) and Christine. Another relational dynamic identified is the supervisory relationship between Marvin and Steve. Due to the lack of persistent follow-up from the supervisor and Steve's resistance or avoidance to continue exploring his countertransference issues with the supervisor, it could be assumed that this relationship might not be operating at an effective level. All of the aforementioned variables must be considered to evaluate this second step in the ethical decision-making model.

Know the Law, Ethics Codes, and Institutional Policy

The third step in this ethical decision-making model is to know the corresponding laws, ethical codes, and institutional policies (Wheeler & Bertram, 2012). The ACA *Code of Ethics* (2014) provides helpful guidance for professional counselors in solving ethical

dilemmas. This section will incorporate ethical principles primarily from that ethical code.

Counseling Relationship

Within this ethical brief, the counseling relationship between Steve and Christine provides several ethical issues. The ACA Code of Ethics (2014) promotes the professional standard of primary responsibility, which is the welfare of the client. In other words, the ethical code in Section A makes it clear that the individual's welfare is of primary importance and should be maintained at all costs. When evaluating the counselor's behavior with the client, it is evident that the counselor was more focused on his goals than the goals of the client. For example, the client, Christine, entered counseling with the goal of increasing her understanding surrounding interfaith issues and gaining insight into dealing with her future in-laws who were of a different faith. However, the counselor had other goals for the client. Based on Steve's personal biases, he believed that his goal was to convince Christine not to marry her fiancé, Jeremy (Appendix A). Therefore, Steve did not appropriately address his personal religious and cultural biases against this client, and it resulted in the evocation of a strong reaction towards the client. This countertransference was initially addressed in supervision with Marvin; but in subsequent supervisory sessions. Steve was not completely open with his supervisor regarding his ongoing reactions. Section C (ACA, 2014) in the ethical code refers to cultural competence, monitoring effectiveness, and avoiding harm when working with the client. However, Steve was not practicing from a multicultural competent framework because he did not prioritize the client's counseling goals. Therefore, Steve's unchecked biases, countertransference, and inappropriate goals for the client culminated in the imposing of his values onto the client and advising her not to marry her fiancé.

This case observes the progression of Steve's "slippery slope" behavior from the first session until the termination of his professional relationship with Christine. "Slippery slope" behavior within an ethical context refers to how behavior that may originate or appear as innocuous can lead to future ethical violations if unchecked (Doverspike, 2009). Elements in Section C of the ethical code (ACA, 2014) require counselors to avoid imposing their own values onto clients, and Steve's behavior was in clear violation of that ethical mandate when he found himself siding with Jeremy's parents and believed that his goal was to convince his client to end the engagement. By imposing his values onto his client, Steve did not promote the ethical principle of autonomy with his client and uphold her original counseling goals. In counseling contexts, autonomy is fostering the right for the client to control her treatment (ACA, 2014). Therefore, the imposition of values is the primary problem with Steve's behavior. If Steve would have been more open in his supervisory sessions about his reaction to the client and dealt with his biases, this imposition of values may have been prevented while avoiding harm to the client.

Another ethical problem with Steve's behavior was the inappropriate method of terminating the client's relationship. Section A from the *ACA Code of Ethics* (2014) refers to appropriate termination regarding competence and values within the termination process. Arguably, Steve's behavior and biases towards the client directly influenced his termination of the professional relationship with Christine. Steve informed her of

termination on the last available session that insurance covered, and this termination blindsided and angered the client. Christine could have felt that Steve abandoned her as a client. Steve failed to exercise "reasonable" practice within the counseling profession (Doverspike, 2009; Wheeler & Bertram, 2012). Based on the authors' clinical practice in the Atlanta area, it is customary to provide at least two or three referrals when terminating with a client. However, Steve did not provide more than one referral to Christine. Further, he did not provide one concrete resource and haphazardly stated that she "might try" a community health center that offered a sliding scale. It would have been reasonable to provide a specific community health center in this example. Therefore, Steve was in violation regarding Sections A and C of the *ACA Code of Ethics* (2014), particularly on issues related to multicultural competence, imposition of values, inappropriate termination and referral, and client abandonment and neglect.

Supervisory Relationship

At least two concerns arise within the supervisory relationship between Marvin, the supervisor, and Steve. These supervisory concerns focus on the welfare of the client and gatekeeping. It seemed that Steve was honest with Marvin in an early supervisory session by talking about Steve's own goals for the client instead of prioritizing the goals of the client. In this instance, Marvin cautioned Steve against imposing his own values upon the client. However, this is the only time that Marvin explored this issue with Steve. In a later supervisory session, Marvin asked Steve how the sessions are going, and Steve responded that the client continued to be defensive, as stated in the vignette. This would have been the appropriate time for Marvin to again explore and process Steve's goals for the client, examine Steve's strong reactions (countertransference), and assess his risk of imposing his values onto the client. If the supervisor had been persistent with this issue in supervision, the welfare of the client could have been maintained while avoiding harm to the client. Section F (Supervision, Training, and Teaching) from the ACA Code of Ethics (2014) promotes the supervisory obligation to protect the welfare of the client. This welfare of the client is the primary responsibility of the supervisor (Bernard & Goodyear, 2009; Wheeler & Bertram, 2012). Along with protecting the client, the supervisor must also uphold a gatekeeping role that monitors a supervisee's limitations. These limitations have the potential of interfering with the client relationship. Similarly, Steve's limitations impeded his relationship with Christine and ultimately led him to imposing his own values onto the client.

Regarding Georgia law, there does not seem to be legal requirement mandating that counselors not impose their values on their clients. Arguably, Steve did not provide a reasonable minimum standard level of care in his termination and referral process with the client, but it probably would not be considered illegal based on the current statutes in Georgia (D. Lane, personal communication, November 14, 2014). The aforementioned information was mostly obtained via consultation with a respected expert on counseling ethics in the community and will be further explained in the consultation step of the ethical decision-making model. Furthermore, the institutional policy of the private practice agency is unknown and could be something to evaluate if the policies were available.

Be Alert to Personal Influences

All ethical decisions have the potential to be influenced by the biases that may be present resulting from the subjective experiences and cultural backgrounds of those in decision-making roles. First, it is a necessary step in the decision-making process to identify the potential biases that may be present when making a decision in a case.

Drawing from the vignette in the Appendix, the counselor, Steve, makes it clear that he had a "strong reaction" to his client. Furthermore, this case example states that Steve found himself not aligning with his client's goals and continually challenged the client, Christine, based on Steve's religious values, which were in direct conflict with his client's values. This example of unchecked biases can eventually lead to the imposition of values, which was suggested in Steve's case. For example, Steve eventually tried to convince his client that she should not marry her fiancé even though this was not in question for the client.

When counselors work with clients who possess a culturally diverse background, they need to be vigilant about how their own values may conflict with their client. If counselors find themselves having strong reactions to their clients, then this would be a time to explore these feelings in a supervisory context. Otherwise, these unresolved feelings can result in counselors imposing their own values.

Obtain Outside Perspective

The panel members sought the assistance of an outside expert in order to examine the issues and variables present in the case and obtain advice in making a sound ethical decision on an appropriate course of action. The three-member panel consulted with Dr. W. David Lane (D. Lane, personal communication, November, 14, 2014), a counseling professor at Mercer University and former Ethics Chair for the Licensed Professional Counseling Association of Georgia (LPCA). Consultation with this ethical leader in the field of counseling in the state of Georgia assisted the panel by providing insight into a variety of aspects of this case. The insight provided by Dr. Lane proved to be integral to the decision-making process as his professional experience challenged the panel to consider new options and in turn altered the outcome of the review. The consultant assisted the panel by providing education about the steps taken by the Composite Board when they are presented with an ethical complaint including the full range of disciplinary action that could be taken by the Board against the counselor or supervisor. Additionally, the consultant provided assistance by identifying ethical standards relevant to the case. examining considerations specific to this case, and presenting recommendations for disciplinary action against the counselor and supervisor

Enumerate Options and Consequences

After taking into account the outside perspective of the consultant on the case, the next step of the ethical decision-making process involves determining all of the possible courses of action as well as the potential intended and unintended consequences of each option (D. Lane, personal communication, November 14, 2014; Wheeler & Bertram, 2012). In the state of Georgia, the Composite Board has a variety of options for discipline

when they determine that a counselor or supervisor has been responsible for an ethical violation. The first option involves a documented letter of reprimand being placed in the file of the counselor or supervisor found to be responsible for the ethical violation. Additionally, the Board has the power to require the counselor to obtain continuing education hours or return to clinical supervision for a specific period of time.

With regards to the license of the counselor in question, the options include probation, suspension, or revocation. The counselor or supervisor's license may be placed on probationary status pending the completion of the requirements previously stated. The counselor's license may be suspended either for a specific period of time or until the counselor completes the requirements outlined by the Board. License revocation with or without the possibility of future reinstatement is also a potential disciplinary option that the Composite Board may take against counselors found to be guilty of particularly serious ethical violations. The options relating to the suspension or revocation of licensure involve consequences that include the potential of financial hardship for the counselor as well as the possibility of needing to consider a change in career paths (D. Lane, personal communication, November 14, 2014).

Decide and Take Action

Based on the possibilities listed above, a broad range of options exists regarding the implementation of punishment. However, the Board should take into consideration several variables prior to the implementation of the decision. These variables include the egregious nature of the violation, first-time violation, or severity of damage to the client or group (D. Lane, personal communication, November 14, 2014).

Given the information presented, the panel determined that this was Steve's first offense. In this particular scenario, Steve, the counselor, has committed several ethical violations in the relationship between him and his client, Christine. However, he has not violated any laws (mentioned above). In this respect, a lower level punishment may be in order as opposed to suspension or license revocation. Based on the given information, the panel recommends four distinct decisions as elements toward Steve's punishment.

The first decision would be the issuance of a letter of reprimand. The second decision requires Steve to attend weekly supervision for a minimum of 30 hours over the course of 12 calendar months, with a supervisor chosen by the board. The third requirement would include Steve completing continuing education for up to 15 hours. The continuing education topics include the imposition of personal values and respect for the individuality of clients and client welfare. An additional 12 to 15 hours may be required on abandonment and referral. The fourth requirement places his license on a probationary status pending the completion of the continuing education and supervision requirements, along with a letter of recommendation from the board appointed supervisor (D. Lane, personal communication, November 14, 2014).

In regards to the supervisor, Marvin, there are considerably less consequences. Even though the supervisor is just as responsible for the welfare of the client as the counselor is, the supervisor is limited by the information provided to him by the counselor. It seemed evident that Steve, the counselor, purposefully directed the course of discussion to avoid significant details pertaining to his client, Christine. Nevertheless, that is the risk involved when taking on the responsibilities of a supervisor. In that

respect, Marvin could have pushed the issue further as he was aware of the potential conflict at the beginning of the counseling sessions. As a consequence for the lack of initiative on the part of the supervisor, the panel would recommend a letter of reprimand, placing him on a probationary status, but not prohibiting professional practice. If this had not been the first offense for Marvin, then a harsher consequence would have been implemented.

Document Decision-Making and Follow-Up Actions

In this final section, documentation of what was done and why is important, as well as what was not done and why (Doverspike, 2009). The members of this panel consulted with an outside professional who is an expert on counseling ethics about this case (D. Lane, personal communication, November 14, 2014). Consulting with this expert on counseling ethics was insightful and cannot be understated. It was after careful attention to an ethical decision-making model per the ACA *Code of Ethics* (2014) and consultation with Dr. Lane that this panel decided on the course of action discussed above. These requirements seemed to be appropriate given that neither Marvin nor Steve has had any evidence of a past problem with unethical behavior. This is the primary reason why harsher penalties (e.g., licensure suspension, fines, or revocation) were not enforced.

Additional follow-up actions include obtaining quarterly updates from the Board-appointed clinical supervisor on the status of Steve's Continuing Education Unit (CEU) requirements as well as direct reports from Steve himself on his progress. After completion of the CEU requirements by Steve, this panel will reevaluate Steve's progress and may remove the probationary status of his licensure at that time.

Tips for Success

In making ethical decisions, it is imperative that counselors follow an established decision-making model in order to ensure that all factors are being considered and the proper steps are being taken when determining an appropriate course of action. The use of an ethical decision-making model provides a framework for reviewing the situation and making the decision and encourages the counselor to document the process in a systematic way. This allows any potential reviewing bodies to effectively trace the decision-making process that is taken by the counselor. Consultation with an established leader in the field is a step of the process that cannot be overlooked or understated. The guidance provided by this individual can provide invaluable insight into a variety of aspects involved in the case, assist with determining the potential course of action that provides the best-fit for the situation at hand, or can validate the decision recommended by the decision-makers.

Conclusion

Based on the scenario presented in Appendix A, this panel investigated, processed, and determined a logical course of action for the counselor and supervisor. Utilizing the eight-step legal and ethical decision-making model, the panel first

determined that the primary ethical violations revolved around the personal values of the counselor and lack of appropriate termination. Juxtaposing the known ethical violations to Georgia state law and the ethics code, along with the identification of possible personal influences, the panel developed a clear direction toward the conception of appropriate recourse. However, prior to a final determination of options, the panel exercised what it considers the most important step of the decision-making model, outside consultation.

Through outside consultation, the panel identified perspectives and concepts not originally considered. From this conference, in addition to its own research, the panel found itself further educated and adequately prepared to render options for appropriate remediation. Once these options were established and the consequences from these options addressed, the panel decided on its final recommendations for the counselor, Steve, and the supervisor, Marvin. After the implementation of the panel's decision, appropriate documentation for the actions taken, as well as those not taken, were recorded in the written form. Furthermore, appropriate steps were taken for follow-up pertaining to the panel's decisions.

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Appendix A

Appropriate Termination

Christine, who is non-Jewish, is engaged to marry a young Jewish man, Jeremy, whom she met in college. Her future in-laws, Orthodox Jews, are opposed to the marriage and have voiced their disapproval of the "outmarriage." Christine, an English Protestant, does not intend to convert to Judaism. She is offended by Jeremy's parents' rejection simply because of her religion and ethnicity. Christine promised her future in-laws that she will follow Jewish holiday traditions in raising her children. Jeremy, who does not practice his religion and leans toward the more liberal reform or reconstructionist positions of Judaism, feels that his family will adjust eventually and that they should just keep moving ahead with their marriage plans. Christine, troubled by her future in-laws' rejection, wonders about its effect on her forthcoming marriage and is reconsidering her plan to marry Jeremy. A friend recommended that she seek counseling to assist her in resolving this issue.

Christine sought counseling through a private practice. She requested to see a Jewish counselor because she felt that he or she will have a thorough understating of the outmarriage (interfaith or mixed marriage) issue and would be able to advise her about dealing with her future in-laws.

Steve was assigned her case; prior to the session, the insurance clerk for the private counseling center informed Steve that his client, Christine, had coverage for 10 counseling sessions. As Steve listened to Christine recount her problems and vent her anger toward her potential future in-laws, he realized that he has a strong reaction to her. Although he did not state it, Steve agreed with Jeremy's parents in disapproving of marriages between non-Jews and Jews. Steve tried to contain his strong emotional reaction to Christine's anger toward Jeremy's parents and Jews in general because of the restrictions about intermarriage. As Christine told her story, he thought she would have a difficult time accepting Judaism. He found himself siding with Jeremy's parents and believed that his goal was to convince her to end the engagement.

Steve shared his goal with his supervisor, Marvin, who cautioned him against imposing his own values on the client. When Marvin asked how sessions with Christine were going, Steve simply stated that the client was still defensive.

Steve met with Christine weekly and attempted to explore her understanding of Jewish beliefs and traditions. He continually challenged her lack of understanding of Jeremy's religion and background. Christine ignored these challenges and presented arguments in favor of marriage because she and Jeremy love each other and get along well. Steve became convinced that Christine should not marry Jeremy and he was increasingly frustrated that she appeared to show no insight into the reason why. At the tenth session, Steve decided to be more blunt and told Christine that, in his opinion, she should not marry Jeremy. He explained that after 10 counseling sessions, she still did not seem to understand what it means to engage in a religious intermarriage. Christine told Steve that she thought he was wrong about her understanding of intermarriage, but she did not realize he was opposed to her marriage to Jeremy. Christine wanted to continue counseling but could not pay the fees. Steve did not believe that she would benefit from any further counseling, so she was informed that he could not see her since her insurance

coverage had been used up. He informed her that she might try a community mental health center where she would be charged based upon her ability to pay. Christine was not pleased when she left the session. She felt the counselor had not really helped her with her problem and had depleted her insurance coverage.

Christine was angry that she received little or no help from Steve and felt he was prejudiced in his views of religious intermarriage. She also was upset that the counseling session ended without giving her further treatment. She contacted the state licensure board and filed a complaint. Her complaint accused Steve of prejudice and not providing an appropriate referral to another counseling agency for counseling.