Cultural, Ethical, and Theoretical Challenges in Supervision of Counseling Students Working with the Incarcerated Populations

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Cultural, Ethical, and Theoretical Challenges in Supervision of Counseling Students Working with Populations under the Supervision of the Criminal Justice System

The practicum/ internship phase of the counseling students course of study can be a real challenge as they transition from theory to practice. The numerous locations and populations from which the student has to choose can be a real challenge for students eager to apply the skills of their chosen profession. In his book "On Being a Therapist," Kottler (2003) notes that the standard client is no longer the white middle-class individual, presenting with mild to moderate issues "we practice in an era when more working-class and lower-class clients are coming in for help, presenting much more severe problems. We now reach a far more diverse population, representing every conceivable cultural, ethnic, religious, socioeconomic, and sexual orientation background. Students going into the field, like, experienced professionals, particularly those in community mental health and other institutions, are seeing people from a staggering array of diverse cultural contexts." This trend is also applicable to the therapist. Individuals of various racial, ethnic, and cultural backgrounds are entering the field, a field where the dominant cultural worldview still exists (Sue & Sue, 2003). The student working in environments serving "highly at-risk" populations, those individuals considered "at-risk" in traditional settings, who are also legally involved (Binder, 1988, Milano, Forrest, & Gumaer, 1998) present unique challenges in the classroom..

This article will cite some of the cultural, ethical, and theoretical challenges presented by a diverse cohort of students, completing their course of study in institutions servicing "legally involved" individuals. A case scenario using actual dialogue from a graduate school counseling course session is presented to demonstrate unique challenges faced by the students, and the course of action that the professor charged with their supervision used to assist them in their professional development.

Issues Raised in an In-Class Session

Anna is an African-American female, completing her internship at a Youth Detention Center (YDC) in the rural south. She is an above average student and reports that she is enjoying the experience. Reports from her site supervisor indicate that she is a good intern, has good rapport with clients, and because she has demonstrated excellent counseling skills, is assigned additional clinical responsibilities. She began working with clients in the general population, and now works in the newly opened mental health facility at the institution, where she will complete her internship.

During a clinical in-class session Anna was asked how things were going at the site. She responded, "I enjoy my experience, but sometimes I have a hard time dealing with how some of the clients are treated." When asked to provide examples she responded with frustration, "I work with a lot of Black kids, some are really good, they made mistakes but, I believe that because they are Black, they don't have a chance." She pointed out one youth that she has worked with since the inception of her clinical experience. "He's 16-years-old and did something stupid, as most kids do. During his incarceration, he obtained his high school diploma and an associate's degree. I have been working with him for a while and know he is a good kid, I believe he has done his time, and should be released. I went to court with him the other day and the Judge did not feel he was sincere. He ruled against the clients release from custody. Many of the kids, especially the Black ones don't have a chance. I can work with them if they [the institution] would let me. They have a prescribed way of dealing with the 'kids', that doesn't work all the time. He [the client in question] trusts me more than he trusts anybody, even his own mother, who is a big part of his problem." When asked to expound on this point, she gave the following example: "Since most of the clients are away from their home city, the facility sets up family sessions via satellite. I have had the opportunity to sit in on several sessions with the client and his mother. The clients' mother was so busy telling the son about her problems that she could not see that the client needs her. During the session I could see that the client was getting upset. His mother made me so angry that I wanted to tell her that she

was his problem. After the session, he [the client] went back to the dorm and acted out. I was the only one who was able to calm him down!" She further stated that during clinical-staffing, when discussing clients it appears that White clients are viewed as having a bad day for 'acting-out' behaviors, whereas the African-American client behavior is viewed as aggressive. The African-Americans can and usually do receive extended sentences based on such repeated behaviors. Their approach to dealing with the youth doesn't work. I just do not think it is fair. What do you do in situations like this?"

John, a white male works for a for-profit agency servicing "legally involved" individuals, empathized with Anna's position. He indicates that he has experienced the difference in how African-American kids are treated, and he feels sorry for some, "but I treat them all the same." When asked about his interacting with clients her stated the following: I'm a brother, father, and uncle. I'll be what they want me to be as long as they [clients] don't give me any trouble." When asked if he believed his behavior was helping or harming the client, he assumed an empathetic disposition toward the clients and stated some need a lot of nurturing, otherwise they could be difficult to work with. He described his experience with one family by stating "many of the families are crazy." Laughter resounded in the class. With regards to interacting with the clinical supervision, John also addressed theoretical issues he is experiencing. "The theoretical approach is already chosen for the counselor. In my facility, a behavior management system drives the treatment the counselor provides. There is a token economy set in place in which the client earns points for positive behavior. This tends to work well but does not allow the counselor to use any other counseling approach to get at the root of the clients' problems. There are some exceptions, based on the fact that I am an Intern, but for the most part, there is a set approach to working with these client's." Anna interjected "that's a problem that I face especially with the juvenile population. The community does not want to deal with the 'kids' that we provide treatment for so they throw them away and try to forget about them. It has been my experience that Judges in the community do not want to accept the fact that a juvenile can be rehabilitated while in a development center without having to remain incarcerated for long periods of time. This leaves the counselor trying to figure out who is most important the community in which the offender has caused damage or the youth, the damaged goods in need of repair?" The class interjected a number of *emotionally* charged comments, that ranged from empathy and understanding for each other and their clients, to cynicism and lack of empathy for the client families their clinical sites, using examples of experiences they are having with this population..

These students are highly regarded by their sight supervisors, and during site and in-class supervision the students are assessed to determine progress in the environment. These students also have varying years of experience in the helping profession, which has had some influence in their professional development from a formal perspective. The objective here is to point out real cultural, ethical, and theoretical dilemma's faced by these students in as they transition from academia to real-life situations.

Opportunities for Professional Development

Based on the dialogue, the students interaction with client's raises a number of questionable ethical violations based on various sections of the American Counseling Associations Code of Ethic's (2005). Cultural identification and sensitivity issues and problems with incorporating their theoretical approach are apparent. Although the students made it perfectly clear that the dialogue in class was not indicative of their professionalism on site, issues of professional integrity (i.e. emotional competence) was inherent in the dialogue.

Anna attached her cultural morals, values, and beliefs to her client, and consequently his mother. Implications are a high probability of fostering client dependence (i.e. "I am the only one he trusts and who can control him") on her [Anna], and her failure to consider how the client my perceive the relationship, and her apparent loss of empathy for the clients mother. All are potentially serious ethical violations. Her identification with the client from a cultural perspective, and her failure to consider how the relationship can negatively impact (harm) the client, raises issues of client autonomy, beneficence, and competence. The students characterization the families of clients as "crazy" and assuming an inappropriate nurturing disposition towards clients (paternalism) is clearly in violation of the code of ethics, and cultural insensitivity. Minor infractions of this nature can lead to more sever infractions overtime. Therefore it was important for the students understand the importance of self-monitoring their professional actions and take responsibility for the minutest of infractions (Welfel, 2005).

To address the students apparent dilemmas and their eagerness to be successful, they were given various assignments. The students were instructed to analyze the 'Five Principles of Ethical Decision-Making' to determine potential violations of ethical codes. They were asked to use 'The Ethical Decision Making Model' (ACA, 2005) to determine questionable ethical practices, realized from class dialogue, and to suggest more appropriate ways of interacting with clients and the institutions. They were instructed to

examine their own cultural issues and to do a self-examination in an effort to determine how their cultural, morals, values, beliefs, might conflict with their professional development, and how they might work through these issues. Finally, they were asked to develop a personal theory eclectic in nature. This task would assist the student in understand the reasoning behind the preferred approach at their sites, and to reinforce the eclectic approach and integrative nature of counseling theories and, how they might integrate their approach when interacting with clients and the institutions (Cory, 2004). Although concepts are reinforced throughout the student's course of study, applying them is a daunting task for even the most seasoned professional. This point was cited in the dissemination of assignments to the students.

Questions posed to the aid in their analysis were: In what way might the student's relationship be harmful to the client? Do you think that the student's cultural beliefs negatively influence the client-therapist relationship? What are the implications of the student's disposition toward the client and the family? How might the client perceive his relationship with the student and what are some of the implications? What impact does the student's assumed relationship with the client have on the student's development of clinical skills when interacting with on-site clinical professionals, and other agencies? Finally, what is the student's responsibility to the clinical site, academic setting, and the counseling profession?

Lessons Learned

The students benefited from the assigned tasks in a number of ways. Using the tools of the profession the students identified questionable interaction with clients and their families, and clinical issues and implications inherent in those interactions. They were able to develop more appropriate ways of dealing with issues, and the importance of continual self-monitoring. An important lesson learned was how the nature of a particular environment and population can present challenges that may not be realized in traditional counseling settings. Finally, an important lesson learned was patience. We live in a society that pushes 'have it your way and right now.' Counselors are not immune to this conditioning. Using the tools of the profession and the support of each other in class-sessions, students learned that change takes time, as does the development of emotional and intellectual competence in one's profession.

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