

E-THERAPY

Lecture 9

ETHICAL ISSUES AND CONSIDERATIONS IN ONLINE COUNSELLING

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ETHICAL ISSUES AND CONSIDERATIONS IN ONLINE COUNSELLING

Lecture Nine Outline

- 9.1 Introduction
- 9.2 Expected Learning Outcomes
- 9.3 Ethical issues in counselling
- 9.4 Informed consent.
- 9.5 Practitioner competence
- 9.6 Client inclusion and exclusion
- 9.7 Practical issues reflecting best practice
- 9.8 Case study
- 9.9 Summary

9.1 Introduction

In this lecture, we shall focus on the ethical issues in counselling, the concept of informed consent, practitioner competences and practical issues reflecting best practice. We will also look at a case study and discuss the dilemma it may pose to the online counsellor.

9.2 Expected Learning Outcomes

By the end of this lecture, you should be able to:

- a) Discuss the ethical issues in online counselling.
- b) Use case studies to identify ethical issues.

9.3 Ethical issues and considerations in online counselling

Working ethically should be an ongoing concern for the online therapist irrespective of the modality they are using, just as is the case when working face to face with clients. A counsellor should be aware of the following ethical issues that may arise during the online counselling session.

Maintaining boundaries: The most common ethical issue faced by mental health professionals is maintaining boundaries. Counsellors should be responsible for setting and monitoring boundaries between the counselling relationship and any other kind of relationship and making this explicit to the client. Secondly having more than one type of relationship may lead to enmeshment of relationship boundaries, misuse of power and impaired professional judgement, resulting in harming the client. When a dual relationship cannot be avoided, counsellors should take appropriate steps to ensure that their judgement is not impaired and their power is not being misused, such precautions may include seeking supervision. Thirdly, engaging in any kind of sexual intimacy with client during counselling is unethical.

Dawn (2013) describes the characteristics of professional boundaries. They include;

- Clearly established limits that allow for safe connections between therapist and clients
- Being with the client not becoming the client
- Being friendly, not friends with client
- Ability to know where you end and the client begins, as client tells their story
- Having clear understanding of your responsibilities of your role as a counsellor, your responsibility is not to rescue or nurture the client but empower clients
- Provide role modeling to the client, have healthy communication and professional relationship
- Boundaries keep us focused on one's responsibilities to the client and the provision of helpful and appropriate services to client
- Boundaries help one avoid burn out or compassion fatigue.
- It helps clients become independent

Professional ability: Therapists are generally best trained in certain areas of therapy. A specific therapist may be skilled in working with children, helping people with marriage problems, or using specific types of treatment such as cognitive-behavioral therapy. It is essential that a therapist only provide the therapy that they have been trained to provide. If a client needs a different type of therapy, it is the therapist's ethical responsibility to help the client find someone else, or at least let the client know that they need to find someone else. Therefore, in online counselling it is the counsellor's responsibility to inform clients of their area of specialty.

Personal problems: Therapists are responsible for maintaining a standard of professionalism. They must keep their personal and professional lives as separate as possible. This can be difficult in some instances, and mental health professionals are only human. This means that things will happen in their lives that may affect their ability to be an effective counselor for their clients. When these things happen, the therapist must find a way to work through the issue at hand.

If a therapist can separate their personal problems from their professional life and carry on with their work, they should do so ethically. If they are unable to do so, then they must take a leave or otherwise remove themselves from situations where they are responsible for counselling others. A therapist in the middle of a contentious divorce, who has recently lost a loved one, or who is experiencing addiction should seek out professional help for themselves. They should take a break from counselling clients if their ability to counsel effectively is impaired.

Maintaining confidentiality: Every therapist is responsible for maintaining the confidentiality of their clients. This means they are responsible for keeping all personal information confidential, including intake forms, client notes, and contact information. These must be stored so that they cannot be accessed by anyone other than the therapist and other authorized personnel. The therapist is not allowed to share that information with anyone else. Confidential information includes who their clients are, where their clients live, what personal problems their clients are experiencing, and anything that happens during a session.

Respecting client differences: Clients come from different backgrounds, walks of life, and cultures. A mental health professional is required to respect all differences and to maintain a level of professionalism and courtesy with those who have different backgrounds, thoughts, beliefs, and feelings from their own. If the therapist is unable to do this for any reason, they should seek out professional training until they are able to do so.

Therapist maintain their role: A therapist is intended to help an individual (or sometimes a group or couple) reach healthy decisions on their own. Therapists generally focus on helping their clients make decisions for themselves, which includes helping them consider their own values and beliefs, not the beliefs of the therapist. Therapists help clients make plans and decisions, but they do not generally tell their clients what to do, and they should never impose their own values and beliefs on their clients.

Maintaining therapy: Once therapy begins, the therapist is required to continue working with that client as long as the client is benefiting from treatment and wishes to continue. If the therapist discontinues services, it could be considered abandonment. This does not mean, however, that the client dictates all aspects of the therapeutic relationship. The therapist could need to change hours, move, or have a host of reasons that would make it too difficult to continue therapy with the client. When this is the case, the therapist needs to give the client notice and provide the client with appropriate referrals thus online counselling treatment is not disrupted.

Proper billing procedures: What does billing have to do with ethics? In fact, there is an important connection. Therapists just like anyone else who bills for an office call or hourly appointment are responsible for proper billing. Whether they are billing a client directly or an insurance company, they must make sure that they bill only for the services that are provided and accurately account for the time that is spent on a visit. These types of billing responsibilities help maintain ethical standards.

9.4 Informed consent

This is a central issue and the online counsellor should ensure that the clients have as much information as possible in relation to the potential benefits and risks in using online counselling. The practitioner should also make sure that the client had enough knowledge in choosing the modality or type of therapy e.g. chat, email, video conferencing and skype before actually participating. The counsellor therefore should have a page in their website that informs the client about aspects such as the process of therapy, what to expect, alternatives avenues of help and safeguards in place against the risks of having online therapy.

In the initial course of intake, clients should read the informed consent and acknowledge to have read and understood the content. Acknowledgement can be accomplished by using a ticked box on the website or any other verifiable process. Informed consent in counseling refers to the process by which clients or prospective clients receive information about the proposed treatment and subsequently decide whether to provide consent for the counselor or therapist to proceed with the treatment. Historically, informed consent requirements were applied to surgery and other medical procedures; later these requirements were expanded to include counseling and related activities. Currently, informed consent is mandated by the ethical codes that govern most counsellors. There is significant variability, however, in the beliefs and practices of professionals regarding informed consent, including its content, timing, method, and effect.

Content of informed consent procedures

What information should counselors include during the informed consent process? Ethical codes and legal regulations typically offer little guidance regarding the specific topics to cover or particular details to address. In the absence of unambiguous guidelines, counselors have developed and employed a wide variety of approaches to informed consent.

A number of topics have traditionally been included in the informed consent process. Prospective clients are generally informed about the nature of the counselling or therapy being proposed. This includes what the therapeutic approach is called, how it usually works, what activities it may involve, and how long it may last. They are also typically informed about the effectiveness of the proposed treatment, as well as potential risks and alternative treatments. Of course, the pragmatics

of the treatment arrangement are also covered: appointments are scheduled, where and how often sessions will take place, payment arrangements and responsibilities, and emergency contact information. Finally, informed consent procedures have customarily included confidentiality policies, including situations in which the counsellor may need to break confidentiality without the permission of the client (e.g., when the therapist becomes aware of a legal duty to warn a third party of potential danger).

In addition to these essentials, a number of additional topics may merit inclusion in the present-day informed consent process. Recently, numerous authors have identified contemporary issues in the counseling or therapy field about which the client may have a right to be informed. For example, the increasing involvement of insurance companies, managed care organizations, and other third-party payers has had a widespread and well-documented influence on the counseling professions, and some members of these professions believe this topic merits inclusion in their informed consent procedures. Similarly, therapy manuals (or empirically supported therapies, or best practices guidelines) have resulted in many clients in recent years receiving treatment that is to some extent predetermined or preplanned according to a diagnostic category or presenting problem. Informing prospective clients about their use by a counselor or therapist may be another relatively new addition to the informed consent procedure.

Timing of informed consent

When should counsellors obtain informed consent? Ethical codes and legal regulations generally suggest that informed consent be obtained as early as possible in the therapeutic relationship. The rationale behind this suggestion is clear: Clients should have the opportunity to choose whether to proceed with counselling before finding themselves immersed in it. However, counselling is fundamentally different from other practices that utilize informed consent procedures. Consider, for example, a physician who obtains informed consent from potential patients facing the same medical procedure. The procedure is assumed to be essentially similar for all patients, and to be a one-time event, so the physician can provide a uniform informed consent document to all potential patients at the outset.

Counselling is unique in two important ways: They unfold gradually over time in ways that cannot be accurately predicted at the outset, and they necessarily differ from client to client. For these

reasons, a standardized informed consent procedure cannot be offered to all clients at the outset. Of course, some basic information can and should be provided at the very beginning, including confidentiality and payment policies. However, discussion about more substantive issues, such as treatment orientation, duration, goals, and activities may need to be delayed until the therapist has learned enough about the client to provide personalized information. Thus, many authors on informed consent promote a “process” model rather than an “event” model, such that informed consent represents not a distinct occurrence, but an ongoing and recurrent element of counselling.

9.5 Practitioner competence

Competence entails being able to demonstrate sufficient academic knowledge by successfully graduating from recognized institution or program. Further, to be independent therapist having completed intensive training program that includes many hours of supervised practice. After completing both the academic and supervised training requirements. The long process of education, supervision, and training that therapists are required to complete is designed mainly to ensure that therapist are well prepared in both theory and practice, and thus qualified to provide responsible service to the public.

The new medium of online consulting is similar to a new treatment technique that needs to be mastered. To ensure mastery and understanding of the medium, online clinicians must acquire technical skills, get consultation, or contract to practice under an experienced supervisor prior to providing professional services online. Online provision is a specialist area, requiring a level of competence at least as high as that for face-to-face work.

Technological skills: Fluency and ability to communicate and to use all modalities that are computer mediated. It is the responsibility of the practitioner to ensure that technological tools remain up-to date to avoid interfere with the therapeutic process. Therapist can troubleshoot issues arising from the hardware and software. It is the responsibility of the therapist to ensure that all spam blocking software, anti-virus software, encryption software, firewalls, pop-up blockers, anti-tracking/marketing devices and other technological tools remain up-to date.

Verification: Clients should be able to verify a practitioner's identity, the accuracy and adequacy of their stated credentials and whether they work in private practice or as part of an organization.

The route to verification by the client should be made explicit in the pre-therapy information provided by the practitioner.

9.6 Client inclusion and exclusion

Cultural issues; cross cultural therapy is likely to occur on a much more regular basis as compared to face to face counselling given that geographical boundaries are in a sense nonexistent. Even the “boundary” of differences in time zones becomes irrelevant, for instance when working with email. It is therefore important that a certain level of cultural sensitivity is considered when working with clients in any modality of therapy. As can be expected, a complete understanding of the client’s culture is not possible unless the client belongs to the same culture as the online counsellor.

However, the counsellor can obtain important clues from the client’s location and description of him or herself. The counsellor may consider following up on these clues to avoid making assumptions.

Aspects such as sexuality and religious practices may also be considered. Counsellors should also go an extra mile and research on the clients’ cultures as they come up during counselling.

Age of the client; online counselling seems particularly suited to younger people many of whom grow up being familiar with the internet. Counsellors who choose to work with minors will need to carefully consider what particular safeguards they can offer to their clients, and where their duty lies in informing the parent, or the guardian

9.7 Practical issues reflecting best practice

Establishing the best standard of care at all times and always protecting the client is of utmost importance to the online therapist. Other aspects that the online counsellor may consider are;

Computer screens: The online counsellor sensitizes client on the need for confidentiality of information shared during the online counselling by ensuring the computer screens are not visible to others people other than the client.

Computer passwords protection: The online counsellor should recommend to the client the need to acquire a secure password such as suggested by computer specialists like having a short phrase

that is at least eight characters long and contain numeric, non -alphanumeric, lower and uppercase characters. Therefore increasing the degree of difficulty in guessing the client password.

Mobile phone: The online counsellor should inform the client to keep counselling information shared through the mobile phone confidential.

Emails encryption: The online counsellor should use document encryption. Encryption involves deliberately scrambling the text of a document by devising a basic mathematical equation and an unusual key and then applying the equation to the document. In addition, instant messages and chats are encrypted.

9.8 Case study

You have had two asynchronous sessions with Juliet, who is dealing with workplace stress. One of her colleagues writes an email to you and introduces herself as Joyce. She says that they share a laptop in the office with Juliet and has seen the communication between you and Juliet. She humbly requests to give some more information that Juliet has not disclosed to you. She insists that this information is very important as you continue counselling Juliet. Describe your response to this email.

9.9 Summary

In this lecture, you have had an opportunity to discuss the ethical issues in counselling, the concept of informed consent, practitioner competences and practical issues reflecting best practice. We have responded to a case study and discussed the dilemma posed to the online counsellor.

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