

Counselor Ethics and Responsibilities

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To establish an ethical counseling practice a counselor must create a professional identity so potential clients can decide whether to enter a counseling relationship. The client-counselor relationship relies on foundational methods that allow clients to make informed decisions about therapy. Building a strong relationship requires an environment of safety for the client and protects clients' rights, which rests on trust in the counselor to develop clients' well-being.

The Counselor's Role in Protecting Client Rights

Principles of Ethical Practice

Successful therapeutic processes rely on trust in the client-counselor relationship (Corey et al., 2024). Trust enables therapy to proceed and requires client informed consent within a safe environment to address their issues. Feeling safe requires knowing confidential information is protected (ACA, 2014, B.1.c), honoring clients' right to autonomy, counseling prioritizes well-being (A.1.a), and counselors protect client rights. Leaning on ACA's code of ethics, guiding principles, and informed consent leads to positive client-counselor relationships and well-being.

Autonomy

The primary goal of therapy rests on client autonomy. For example, Davis et al. (2017) argue that non-abstinence increases substance abuse client retention due to respect for autonomy. Using informed consent, counselors collaborate and discuss the treatment process, pricing, privacy, risks, and advantages. Clients then decide whether to proceed (Halo, n.d.). Respect for client autonomy frames acceptance of the clients' journey and promotes their right to make autonomous decisions.

Nonmaleficence

Avoiding harm (ACA, 2014, A.4.a) builds trust with clients. Self-reflection and self-awareness uncover biases, values, and worldviews that impact clients. However, as Knox et al. (2022) demonstrate, counselors cause clients harm from subtleties that rupture trust, stop treatment, feel failure or distress, and disengage. The authors point out that counselors are not perfect. How a counselor responds becomes key. Continually informing through client consent requires introspection, acknowledgment, and collaboration to repair errors and create nonmaleficence.

Beneficence

Clients seek counseling to heal and tell stories to convey their motivations (Corey et al., 2024). Achieving client well-being forms the primary purpose and responsibility of the counselor (ACA, 2014, A.1.a). Listening to client's stories can uncover their worldview. As Smith et al. (2019) report, understanding a person's viewpoint aligns with the shift in therapy practices and enables the counselor to embrace the reality of the client's life. This is the essence of beneficence and sets the groundwork for trust in the therapeutic process.

Justice

Each client wants to be treated justly and not denigrated through microaggressions (Rose et al., 2019) or value imposition (ACA, 2014, A.4.b, A.11.b). Protecting client rights through cultural sensitivity (B.1.a), client privacy (B.1.b), confidentiality rights (B.1.c), advocacy (A.7a), and honoring a variety of worldviews (Halo, n.d.) creates justice. Treating clients justly enhances trust in the relationship, a necessary step in well-being.

Fidelity

Client's struggles require counselors to fulfill the responsibilities to protect clients' rights and well-being. Collaboration on informed consent (Corey, et al., 2024; ACA, 2014, A.2.b) clarifies commitment to client rights, the therapeutic process, keeping information confidential, the right to make autonomous decisions, and counselors' intent to understand the client's cultural context. Fidelity to commitments made builds trust.

Informed Consent and Client Rights

Informed consent gives structure to collaboration with clients. Informing clients of their rights throughout therapy helps establish safety and trust (Corey et al., 2024). Informed consent conveys client rights and confidentiality protection (ACA, 2014, B.1.b, B.1.c). Informed consent conversations (and written) include clients' right to privacy, billing, HIPAA rules and exceptions, complying with board rules and credentials, and others discussed below.

Billing

Clients have the right to know the fees for services delivered (ACA, 2014, A.2.b; Corey et al., 2024). It is best to make fees and the payment structure known early in treatment to avoid confusion for the client. The counselor must ensure billing software is secure and private for transactions.

Right to Privacy

A client's right to privacy is protected under US law. Counselors must not cross boundaries (ACA, 2014, B.1.b, B.1.c). A counselor protects the privacy of therapy notes to avoid unauthorized access (B.6.b) and acquires permission for disclosure (A.1.c, A.2.b, B.3.c). Court orders, mandatory reporting, and foreseeable harm (OAPS, 2023) place limits on privacy. Oregon protects counseling clients through psychotherapist-patient privilege (ORS, n.d.).

Collaborative informed consent discussions about privacy (ACA, 2014, B.2.e), disclosures only to qualified professionals (E.4), and confidential information protection (B.6.g) build trust and occur as issues arise.

HIPAA Compliance

A practice, approved as a HIPAA-covered entity for insurance, must follow privacy and confidentiality rules (Corey et al., 2024) which protect the clients' dignity through treatment confidentiality. HIPAA standards cover electronic communication's privacy, information security, and a national identifier number to track providers. A growing number of limitations favor public good over individual privacy such as the duty to warn and protect. Informed consent discussions protect clients by providing the information necessary for decisions to proceed due to privacy concerns.

Compliance and Credentialing Board Requirements

Oregon requires compliance with ACA ethics codes (OR MHRA, 2024b) and CACREP-accredited or equivalent curriculum (2024a). Oregon (2024) requires full disclosure of legal or compliance issues for associate registration and licensure. The state requires a Professional Disclosure Statement to be publicly available and the credentialing board requires 1900 supervised hours. Counselors may not misrepresent the state of their credentialing, licensing status, or use of professional titles. Demonstrating compliance and credentials heightens trust in counselors and builds confidence. Client confidence in the therapeutic relationship helps achieve client well-being.

Responsibility to Warn and Protect

Deciding to warn or protect, especially for dangerous clients, poses a significant issue for counselors (Corey et al., 2024). Warning potential victims becomes imperative when clients

make detailed threats against specific targets – themselves or others. Hulfachor (2023) shows suicidal thoughts can be associated with desires to harm others. Courts find counselors liable, as in the Tarasoff case (Griffin, 2022), for not warning potential victims when foreseeable danger is demonstrated (ACA, 2014, B.2.a). Protecting others from harm means mandatory reporting for suspected elder or minor abuse (Oregon DHS, n.d.). Suicidal ideation may require protecting the client by consultation or hospitalization referral in Oregon (MHACBO, 2018, 2.8; OAPS, 2023). An Ethical Decision Model (EDM) process can help counselors discern the degree of danger a client poses.

Client Record-Keeping

Client records serve to capture required accurate information about therapy and progress for uninterrupted treatment (ACA, 2014, A.1.b). Counselors cover certain points in the therapy records ensuring therapy serves the client's well-being and that actions meet ethical and clinical standards, for individuals, families, couples, managed care, groups, and clients with aggressive or violent behaviors. Progress and process notes regarding client treatment must be kept confidential and considered during informed consent (Corey et al., 2024) to strengthen trust in the professional relationship with the client.

Professional Standard of Care

Counselors look to standards and services provided by other mental health professionals in similar situations (Corey et al., 2024). These standards can be found in ethics codes, community standards, scholarly literature, consultations, supervision, ACA (n.d.) continuing education, and CACREP (2024) standards. Counselors document and follow the best standards of care available to reduce risks to the counselor, ensure client well-being, and keep the client-counselor relationship healthy.

Malpractice

Counselors face malpractice risks due to negligence, as in the Tarasoff case (Hulfachor, 2023), and ethics complaints (Wilkinson et al., 2018). Record keeping can play a key role in demonstrating counselors follow standards of care as practiced by colleagues in similar situations (Corey et al., 2024). Providing excellent care, keeping well-documented records, guarding client well-being and privacy, and continuing education mitigate malpractice risks by improving client relationships.

Notification of Client's Rights

Clients have many rights in therapy including privacy, confidentiality, limitations, collaboration with the counselor on plans and treatment, and ultimately the right to make treatment choices found throughout the ACA code of ethics (2014). Informed consent (A.2.a) conversations used as a framework enhance understanding of mandatory reporting issues, the counselor's duties and clients' rights under state laws, and counselors' credentials and background demonstrating competence. Clients become empowered through autonomous decisions which improves relationships and results (Corey et al., 2024).

Electronic Storage

Digital advances have brought about new safety concerns regarding record keeping. Luckily tools exist to address privacy, confidentiality, and security issues for mental health providers like TherapyNotes (n.d.). All confidential communications must be kept private. Informed consent discussions can convey the use and risks of electronic storage.

Proper client record-keeping establishes a well-run practice by reducing counselor and client risk, demonstrating standards of care, and improving counselor credibility. Informed

consent regarding records builds confidence and trust in confidentiality ultimately improving client-counselor relationships.

Self-Care

My personal goals have and do include self-care. They need improvement to meet the demands of counseling. Prioritizing self-care ensures I avoid burnout and depletion. It should keep me alert and attentive to clients' needs to sustain excellent service.

ACA Description

ACA (2014, C Introduction) encourages self-care across spiritual, mental, physical, and emotional considerations. I can locate webinars, live and recorded continuing education, and articles on self-care that address mental self-care (ACA, n.d.). I look to my church, family, and counselor for spiritual and emotional self-care and my hobbies for physical self-care.

Balancing Professional and Personal

Failure to balance self-care and dedication to clients causes stress and burnout. These can result in neglecting clients or reducing standards of care and ethics violations (ACA, 2014, A.4.a, A.12). Using an EDM process assists in identifying risks, issues, possible solutions, and consequences (Springer, n.d.). Striking the balance requires careful and ongoing self-awareness reflection to set boundaries (ACA, 2014, A.6) with clients to manage treatments.

Current and Previous Self-Care Activities

In the past, I actively engaged in daily workouts. Currently, I do less frequent workouts and have added reading and writing. Some hobbies require time for planning, preparation, and travel which conflicts with the demands of work and school. So, I have added playing the guitar, ham radio, writing and self-reflection (Corey et al., 2024), Bible studies, and local walks that can be done efficiently. I also attend counseling sessions.

Considerations for Future Self-Care Activities

Establishing a habit of self-care early in the process as CITs sets the stage for lifelong self-care activities (Corey et al., 2024). Watching for common stressors such as difficult, aggressive, and suicidal clients indicates increased self-care. Taking time for mindfulness, self-reflection, and self-compassion each day creates the benefits I desire.

Red Flags to Address

Barton (2022) points out red flags such as burnout, physical exhaustion, and compassion fatigue. Corey et al. (2024) describe taking too much responsibility for clients' progress, values conflicts, difficult situations, isolation, and suicide discussions produce red flags. Personal red flags include reactions from emotional buttons due to values conflicts and high expectations for client progress. I engage in counseling and self-reflection to address these.

Professional Counseling for Counselors

Counseling helps counselors uncover limiting beliefs, biases, worldviews, communication styles, values, stressors, and the conflicts faced in daily life (Knapp et al., 2019). Counseling can improve competencies to spot biases and worldviews reflected in communication (Rose et al., 2019). I sought counseling to address these issues and to observe an experienced counselor at work. I intend to improve my ability to build trusting relationships and ultimately client well-being.

Advocacy

Counselors must understand and become competent in various worldviews and cultures (ACA, 2014, A.2.c, B.1.a). I intend to serve adults struggling in difficult transitions focusing on Catholic communities. Veterans, immigrants, and Sexual and Gender Minority clients will be among the target population. I must be culturally competent (ACA, 2014, B.1.a) and aware of

social justice implications. Involvement with ACA's (n.d.) partnership with US Department of Veterans Affairs provides learning opportunities to advocate for Veterans. I feel that advocacy in collaboration with clients builds trusting relationships and results in clients achieving the well-being they seek.

Counselor Values

John and Bill approached me for counseling with their adoption disagreement. As a counselor who is Christian, I am obligated to the ACA (2014) code of multicultural competency (C.2.a) and must be wary of value differences (A.4.b). I also understand my Christian worldview of natural law and values (Halo, n.d.). The values seem to conflict however, I value everyone as a child of God and appreciate the unique journey of each. So, like St. Paul, I meet them where they are and then objectively help them on their journey. I am not the One to judge. Empowering them to resolve the conflict likely involves seeking consultations and collaborating using an EDM process to uncover their core issues, possibilities, consequences, and an acceptable solution.

Concluding Thoughts

Counselors help clients build trust and develop client-counselor relationships assisting clients toward the well-being they seek. Building trust and therefore relationships, span protecting clients' rights, informed consent discussions of duty to warn and protect, self-care activities, advocacy, and remaining objective. To conclude, counselors demonstrate an ethical professional identity pointing to clients' mental well-being.

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