Ethics, morality, law and best practice touch every part of our life. The aim of this paper is to reflect on significant ethical issues as they relate to professional counselling and psychotherapy. Reference will be made to the ethical guidelines of the Christian Counsellors Association of Australia (CCAA), the Psychotherapy and Counselling Federation of Australia (PACFA), as well as other professional opinion. Consideration will be given to:

• professional orientation;
• ethical obligations underpinning counselling practice;
• professionalism and best practice in counselling and psychotherapy;
• boundaries and boundary violations;
• dual relationships;
• confidentiality;
• use of prayer and spiritual practices;
• understanding social and cultural implications of the counselling role;
• maintenance of records;
• the role of ongoing professional development;
• regular participation in Supervision;
• a ‘health check’ of your ethical process.

PROFESSIONAL ORIENTATION

The starting point of good ethical practice is the necessity to be appropriately trained through an accredited training organisation, together with a clear understanding of the professional functioning of the roles and functions of counselling. It is also essential to develop an understanding of the history and philosophy of the profession and become familiar with appropriate professional organisations like CCAA and PACFA. “Knowing the process of professional credentialing provides the ability to work within the frameworks of ethical standards and the Codes of Ethics of such organisations (Remley & Herlihy, 2005, p67).” The intentional development of an ongoing professional orientation, and the participation in professional development within the context of our
profession, provides the ability to mature ethically in developing awareness, knowledge and skill (Corey, 1996, p79).

ETHICAL OBLIGATIONS UNDERPINNING COUNSELLING PRACTICE

Brock and Barnard (2009) confirm that “the unforeseen is always a threat, and that risk can be minimised by adhering to the common practice guidelines specified in ethics codes that make up the accumulated wisdom of the profession” (p178). As professional counsellors, it is our responsibility to be fully aware of, and work within, the Codes of Ethics upon which our professional memberships are based. Codes of Ethics are formed for our safety and the safety of our clients.

PROFESSIONALISM AND BEST PRACTICE IN COUNSELLING AND PSYCHOTHERAPY

Best practice is a continuum of law and ethics which guides us as we relate to others. However, ethics as it relates to professional process refers to the conduct judged as good or right for Counsellors as a professional group. Likewise, professionalism has to do with the relationship between legal and ethical behaviour. Best practice is the very best a Counsellor could be expected to do. Meeting minimum legal standards or minimum ethical standards is not enough for a truly professional Counsellor.

BOUNDARIES AND BOUNDARY VIOLATIONS

Maintaining professional boundaries is integral to ethical and professional counselling practice. The relationship between client and therapist is built on trust, confidentiality and the appropriate balance of power. Clients must feel safe and believe that their interests are paramount within the professional relationship (Morrissey & Reddy, 2006, p89). From the initial contact, the therapist sets the frame and boundaries of therapy. Setting the ground rules and providing the necessary information about the process is vital. Important issues include informed consent, style of therapy, the welfare of clients, fee for service and payment of fees, confidentiality issues, frequency and length of session. These all play a part in setting the correct boundaries for a professional therapeutic relationship.

Violation of boundaries can occur when they are least expected. Issues which relate to sexual attraction (therapist to client and vice-versa), dual relationships, physical touch, meeting outside of the therapeutic environment, the inappropriate use of Christian processes within the context of professional therapy, the imposition of personal values onto the client and self disclosure can spiral into malpractice complaints.

DUAL RELATIONSHIPS

Non-sexual dual relationships in therapy refer to any situation where multiple roles exist between the therapist and the client. Examples of dual relationships are when a client is also a student, friend, family member, employee or a business associate of the therapist (Zur 2009, p355). Counsellors must avoid dual relationships that could impair their professional judgement or increase the risk of client exploitation (4.5 CCAA Code of Ethics). Sexual dual relationships are a breach of the CCAA Code of Ethics (see Code 4.1) The Code states that “a counsellor is prohibited from carrying on sexual activities, inappropriate attachment or cohabitating with a current client under any circumstances”.

CONFIDENTIALITY

Confidentiality is central to developing a respectful, trusting therapeutic relationship, and as such, as therapists, we have the duty to discuss all aspects of confidentiality with our clients. This discussion also includes limitations of confidentiality. The CCAA Code of Ethics states: “The exception to maintaining confidentiality is a client threatening to harm self or another through suicide, homicide, or serious and imminent abuse. It is the duty of Counsellors to disclose such information to their Supervisors and to the authorities including, where relevant, the Police and relevant Child Protection Authority in their jurisdiction” (see Code 3.5).

USE OF PRAYER AND SPIRITUAL PRACTICES

As Christian Counsellors it is important that the following statement in the CCAA Code of Ethics is noted and understood. Code 4.8.3. states that CCAA Members: “will recognise that counselling is a different process to Prayer Ministry or Prayer Counselling and that all types of Prayer Ministry including Theophostic, Word of Knowledge, Spiritual Discernment, Prophecy and other similar practices are not counselling per se; they are practices of the Christian Church. Those engaged in such Prayer Ministries who are untrained counsellors are not covered
As therapists, a growing self awareness in the areas of available resources, aspects of traditional approaches, perceptions and misperceptions of other cultures, institutional barriers, language and labelling are important considerations. Expansion of all areas related to our culture, and that of our clients, is invaluable to our growth as therapists.

**MAINTENANCE OF RECORDS**

Complaints happen. Over the course of our professional life there is reasonable likelihood that we will all face complaints related to our professional practice. (CCAA has in place a Complaints Procedure listed on the CCAA Website- ccaa.net.au). To be able to respond effectively to a complaint, it is important that client record keeping is maintained. Being subject to a complaint is confronting, distressing and discouraging. It brings into question one’s self-image as a professional and as an honourable and competent practitioner (Morrissey & Reddy 2006, p150). Maintenance of factual detailed session notes is critical when legal issues arise or subpoenas are received.

**THE ROLE OF ONGOING PROFESSIONAL DEVELOPMENT**

As a Member Association of PACFA (Psychotherapy and Counselling Federation of Australia), CCAA holds to the training standards as set by, and agreed to with, PACFA. The current requirement for Membership with CCAA is the annual completion of fifteen (15) hours of Professional Development (PD). As there is a wide variety of PD now available, it is easy to choose courses and seminars that fit with the type and style of your therapeutic process. It should be noted that the professional qualifications of presenters need to be checked to see that they meet PACFA requirements. These professional requirements refer to Clinical Membership with CCAA and PACFA or equivalent.

**REGULAR SUPERVISION**

As part of their training and membership standards, PACFA requires a minimum of ten (10) hours of Supervision annually with an appropriately qualified and trained Supervisor. Only you, as the therapist, will know whether ten sessions per year is adequate. Both your case load and the complexity of that case load require consideration in order to maintain both your ‘health’ and skilled output as a therapist. Personal issues which emerge from time to time may be best worked through by participating in personal counselling. It is wise to review the amount of your ongoing Supervision in light of an increasing case load.

**UNDERSTANDING SOCIAL AND CULTURAL IMPLICATIONS OF THE COUNSELLING ROLE**

We live in a culturally diverse and pluralistic society. As such, it is important that therapists accept the need to grow in multi-cultural and broad social competence. As we work with clients who may be different from ourselves, the cultural norms of world view, social class, gender, age, sexual orientation, disability status, place of residence, marital status, language and religion may present complexities within the therapeutic relationship.

by this Code of Ethics. There is a distinction between people who engage in Prayer Ministries and those who engage in Counselling".
Supervision assists in the areas of:

- Case management, assessment and the review of treatment plans and strategies
- Competence, confidence and skills
- Monitoring ethical and legal issues
- Discussion and advice on necessary referral
- Structuring self care and personal evaluation

The role of the Supervisor is to be actively involved in creating a learning relationship and environment, as well as teaching and reviewing new skills. The Supervisor also counsels and consults on a wide variety of professional issues (Carroll 1996, p17)

YOUR ETHICAL PROCESS ‘HEALTH CHECK’

As a therapist, have you:

- Familiarized yourself with the Codes of Ethics which underpins your memberships e.g. CCAA & PACFA?
- Arranged appropriate Professional Indemnity Insurance to cover counselling and counselling-related activities?
- Advised your clients of your mode of therapy, practice and fee for service?
- Provided clients with your professional qualifications?
- Created a safe environment in which your therapy can take place?
- Gained informed consent to participate within a therapeutic relationship?
- Considered the effect that dual relationships may have on your therapy? (This is an ongoing process.)
- Put in place the necessary boundaries to maintain safety for both the client and yourself?
- Sorted the major issue of confidentiality within your therapeutic process and the possible need to breach confidentiality when harm by the client, to self or others, may take place?
- Systemized appropriate record keeping and security of client files?
- Created a personal program for your professional development?
- Made yourself aware of the need for multi-cultural consciousness?
- Considered the complexity of the integration of Christian approaches within your therapeutic process?
- Contracted for Supervision with an approved and appropriately trained Supervisor?
- Put into place a ‘schedule’ for your self-care?

In conclusion, I would like to encourage you in the vital work in which you participate daily. You may never be aware of the difference which you make, or have made, in the situations and the lives of your clients. Good therapy is underpinned by excellent process, the recognition of appropriate boundaries, the honing of skills, ongoing professional development and regular professional supervision. A comprehensive appreciation of ethics within your personal life and therapeutic process stabilizes and establishes your therapeutic practice and the gift which you bring to others.

Phil Henry - CCAA Vice President and Executive Chair – Professional Practice; PACFA Ethics Chair

References

CCAA Code of Ethics – www.ccaa.net.au
PACFA Code of Ethics – www.pacfa.org.au