

ETHICS

For Counselors
and Body-Psychotherapists

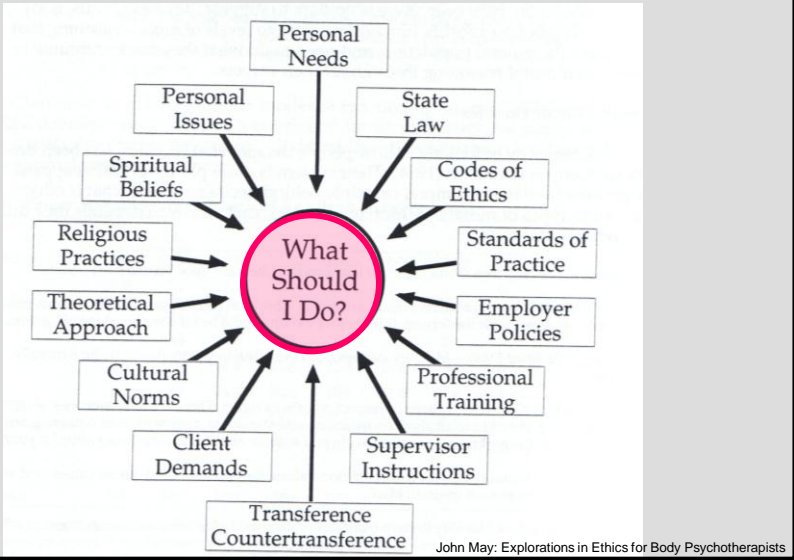
LIST OF TOPICS

- **Why learn Ethics?**
 - Understanding the Fundamentals of Professional Ethics
 - Professional Boundaries 101

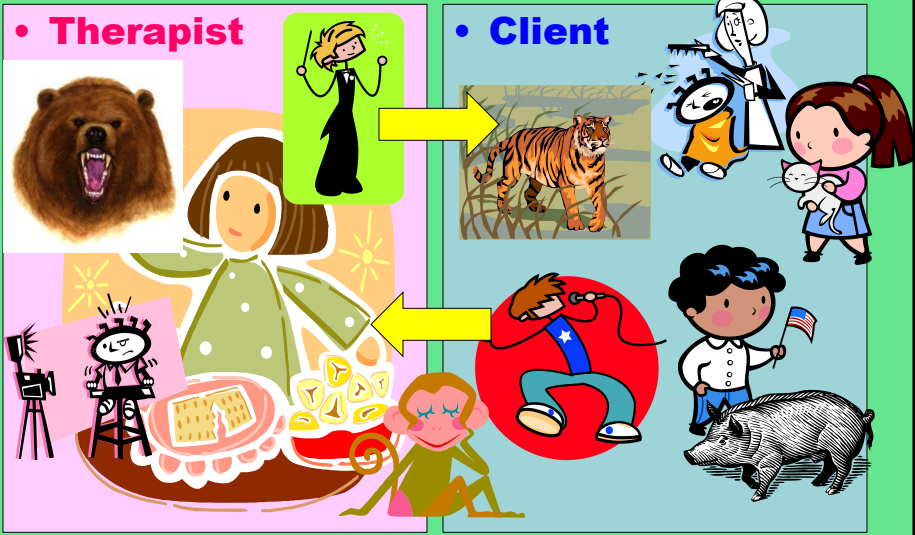
This Course presents:

- **Confidentiality**
- **Referrals**
- **Dual Relationships**
 - Example: Couples Therapy
- **The Ethics of Touch**

Forces Acting on a Therapist



Unconscious Motivations Drive Ethical Conflicts



Unconscious Motivations Drive Ethical Conflicts

**That's why we need
Ethics !**

ETHICS HAS TO BE UNDERSTOOD FROM THE HEART & GUT

Magical Thinking:
"I hope this situation will go away"

The Enforcer:
"It's the Rule!!"

Emotional Intelligence:
"This feels right to me for this situation"

**HUMAN INTERACTIONS
TEND TO BE MURKY:**

- You can't always hide behind a "rule of law".
- Ethics is not always logical or reasonable. You can't just "think" ethics.
- You need to apply your emotional intelligence to be able to "get" the rules and understand the consequences of ethical issues.

USE YOUR HEART AND YOUR HEAD WHEN YOU MAKE ETHICAL CHOICES

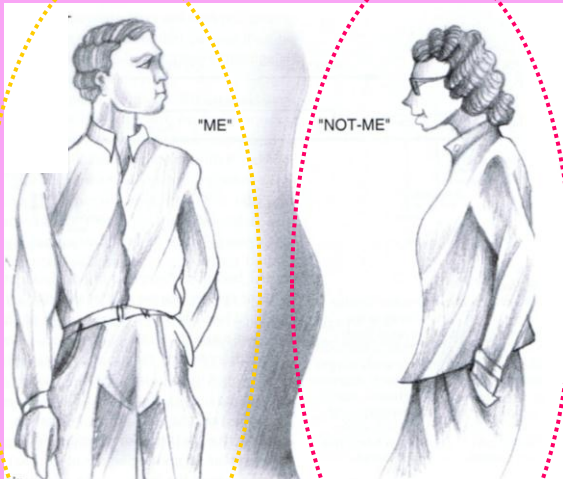
FUNDAMENTAL ETHICAL PRINCIPLES



- AUTONOMY
- NONMALEFICIENCE
- BENEFICIENCE
- JUSTICE
- FIDELITY

IT IS YOUR SACRED JOB TO PROTECT YOUR CLIENT


Boundaries



Boundaries are related to a person's identity. Boundaries establish a firm sense of self in response to one's environment and provide the ability to distinguish what is "me" and what is "not-me".

From: "The Psychology of the Body"
by Elliot Greene & Barbara Goodrich-Dunn

Body Boundaries

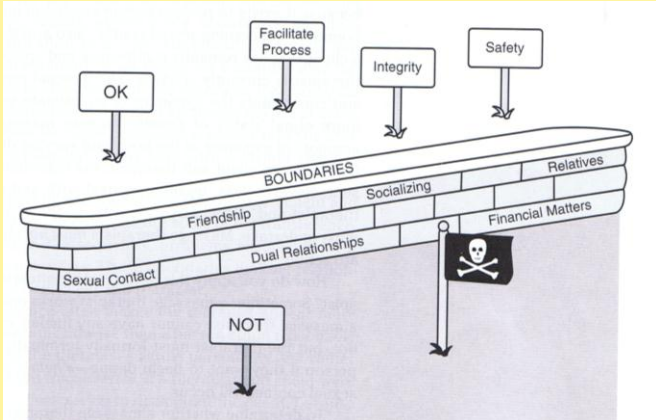


THE FUNCTION OF BOUNDARIES

- 1) Maintenance of Differences
- 2) Rejection of Danger
- 3) Cope with Obstacles
- 4) Detect, select and appropriate any usable novelty

Based on: Jim Kempner

Boundaries place Limits on Behavior



Boundaries serve to facilitate and protect the therapeutic process and relationship. They create safety, and protect the integrity of the client and therapist by setting limits on sexual contact, friendships, dual relationships, financial matters, and other relational issues. Violating boundaries can put the therapy at risk!

From: "The Psychology of the Body"
by Elliot Greene & Barbara Goodrich-Dunn

Professional Boundaries



“Feet of Clay”

Interaction with a client outside of therapy runs the risk of affecting the client's idealized view of the therapist.

The hero can end up with feet of clay.

Boundaries that limit socializing help preserve the therapist's potential to fulfill a certain role for the client because they limit familiarity.

From: "The Psychology of the Body"
by Elliot Greene & Barbara Goodrich-Dunn

Confidentiality

PRIVACY AND CONFIDENTIALITY

Body-psychotherapists have a primary obligation and responsibility to take precautions to respect the confidentiality of those with whom they work or consult.

USABP Code of Ethics

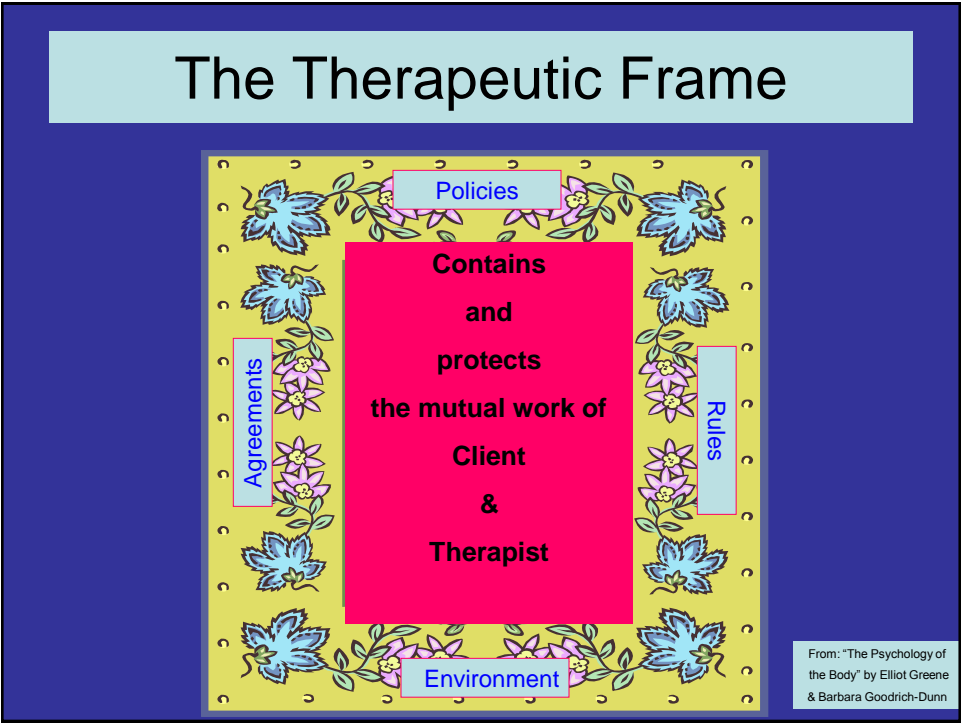
Privacy & Confidentiality

Privacy:

- Refers to a person's fundamental right to choose place, time, manner and extent of self-disclosure with others.

Confidentiality:

- Private information that is shared in the implicit and explicit context and expectation for the purpose of clinical care



Confidentiality & Privilege

Confidentiality

- It is a **CONTRACTUAL PROMISE** concerning private information.
- It concerns shared information in the implicit and explicit context and expectation for the purpose of clinical care.
- Confidentiality is a professional responsibility.
- Confidentiality can be incremental.

Privilege

- Protection against **FORCED DISCLOSURE** in legal proceedings that would break the promise of confidentiality.
- The information belongs to the client

Limits to Confidentiality

- Release of Information requested by Client
- Parental Rights to their Children's Health Information
- Legally Mandated Duty To Protect ("Tarasoff")
- HIV (in some jurisdictions)
- Release required by Court of Law ("subpoena")
- Multiple Relationships (couple, group members, third parties, employer-employee)
- Consultation ("Supervision"), Education, Research

The Duty to Protect

"Tarasoff Warning"

YOUR DUTY TO PROTECT FROM HARM

By U.S. law, the following occurrences are **excluded from the confidentiality rule**. They must be reported immediately to the proper authorities:

- Homicide
- Incest
- Child abuse
- Imminent danger of suicide
- Imminent danger of homicide.

PRIVACY AND CONFIDENTIALITY 1

1. Confidential information includes all information obtained in the context of the professional relationship. They maintain the confidentiality of clients and former clients. Body psychotherapists take appropriate steps to protect their confidential information and to limit access by others to confidential information.
2. Body psychotherapists disclose confidential information without the consent of the client only as mandated by law, or where permitted by law. Such situations include, but may not be limited to: providing essential professional services to the client, obtaining appropriate professional consultation, or protecting the client or others from harm.
3. Unless unfeasible or contraindicated, the discussion of confidentiality and its limits occurs at the beginning of the professional relationship and thereafter as circumstances may warrant. When appropriate, body psychotherapists clarify at the beginning of treatment issues related to the involvement of third parties

From: USABP Ethics Guidelines

PRIVACY AND CONFIDENTIALITY 2

4. Body psychotherapists may disclose confidential information with the appropriate consent of the patient or the individual or organizational client (or of another legally authorized person on behalf of the patient or client), unless prohibited by law.
5. When agreeing to provide services to several persons who have a relationship (such as partners or parents and children), body psychotherapists attempt to clarify at the outset 1) which of the individuals are clients and 2) the relationship body psychotherapy will have with each person. This clarification includes the role of the body psychotherapist and the probable uses of the services provided or the information obtained.
6. If and when it becomes apparent that the body psychotherapist may be called on to perform potentially conflicting roles (such as marital counselor to husband and wife, and then witness for one party in a divorce proceeding), body psychotherapists attempt to clarify and adjust, or withdraw from, roles appropriately.

From: USABP Ethics Guidelines

PRIVACY AND CONFIDENTIALITY 3

7. In cases where there is more than one person involved in treatment by the same therapist (such as with groups, families and couples), the therapist obtains an initial agreement with those involved concerning how confidential information will be handled both within treatment and with regard to third parties.
8. Body psychotherapists maintain and retain appropriate records as necessary to render competent care and as required by law or regulation.
9. Body psychotherapists are aware of the possible adverse effects of technological changes with respect to the confidential dissemination of patient information and take reasonable care to ensure secure and confidential transmission of such information.
10. Body psychotherapists take steps to protect the confidentiality of client records in their storage, transfer, and disposal. They conform to applicable state laws governing the length of storage and procedures for disposal.

From: USABP Ethics Guidelines

PRIVACY AND CONFIDENTIALITY 4

11. Body psychotherapists take appropriate steps to ensure, as far as possible, that employees, supervisees, assistants, and volunteers maintain the confidentiality of clients. They take appropriate steps to protect the client's identity or to obtain prior, written authorization for the use of any identifying clinical materials in teaching, writing and public presentations.
12. When working with groups, body psychotherapists explain to participants the importance of maintaining confidentiality and obtain agreement from group participants to respect the confidentiality and privacy of other group members but they also inform group members that privacy and confidentiality cannot be guaranteed.
13. Body psychotherapists obtain written consent from clients/students before taping or filming any session, such consent to include the intended use of the material and the limits of confidentiality.

From: USABP Ethics Guidelines

Ethics of Informed Consent

“Informed Consent” means....

.....a number of things!

Before starting the actual work:

- ❑ assess the mental ability of the client to understand the terms and implications of a therapy session or counseling program.
- ❑ assess the mental ability of the client to participate fully in the session or program.
- ❑ assess the mental ability of the client to fulfill the conditions and terms of the contract concerning the session or program.
- ❑ Actual consent to the terms and agreement concerning ground rules of a counseling contract. (Should always be in writing!)

IT IS THE DUTY OF THE THERAPIST TO ACHIEVE INFORMED CONSENT!

Informed Consent

WHY?

- Establishes Parameters of Confidentiality
- Regulates Release of Information
- Clarifies Scope of Practice
- Defines the Nature and Context of Services
- Risk Management
- Self-Protection for Therapist

WHAT?

Assess...

- Capacity for Rational Decisions
- Comprehension of Information

Explain.....

- Freedom of Choice
- Boundaries & Limitations
- Policies & Ground Rules

ALWAYS GIVE A WRITTEN DOCUMENT THAT IS EXPLAINING YOUR “PRACTICE PROCEDURES” TO YOUR CLIENT

Authorization for Release of Information

Logo & Letterhead of Therapist

1) Keep a copy of the Release in your file.

2) Explain to the client why you need it.

3) You don't need this form for your supervision.

⇒ Your supervisor is automatically bound to the confidentiality rules.

SAMPLE AUTHORIZATION FOR RELEASE OF INFORMATION FORM

Authorization for Release of Information

I, _____, do hereby

authorize _____

to:

release written records to _____

communicate verbally with _____

This communication is:

☐ not limited

☐ limited to the following subjects:

☐ I wish the content of said communication to be communicated to me.

This authorization is valid between the dates of _____ and _____

Signature of Client _____ (Date) _____

Signature of Therapist _____ (Date) _____

YOUR Client

Therapist = YOU

OTHER health care provider, insurance, etc.

Special limitations and valid dates

Based on: "The Psychology of the Body" by Elliot Greene & Barbara Goodrich-Dunn

Common Sense Truths Client Bill of Rights

- You may seek a diagnosis or other form of treatment from another practitioner at any time.
- If you decide to end services, you have the right to a coordinated transfer to another practitioner.
- You may refuse services at any time.
- Your treatment will be free of physical, verbal or sexual abuse.
- You have the right to know the expected duration of treatment.
- You may assert your rights without retaliation.

Based on Alec Satin

Copy Rights: Kuno Bachbauer, MD

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Dual Relationships

Who Do You Know? Exercise

DRAW A SOCIOGRAM:

- Use the members of this class only:
- List who
 - are your friends and close contacts in here?
 - Do you know their friends, contacts outside of here?
 - Are you in any way connected through...
 - Business deals
 - Financially
 - Housing
 - Relatives
 - Partners & Ex-partners
 - Children, school,
 - Social: Sports, hobby, professional organizations, business contacts, etc,
 - Health Care provider



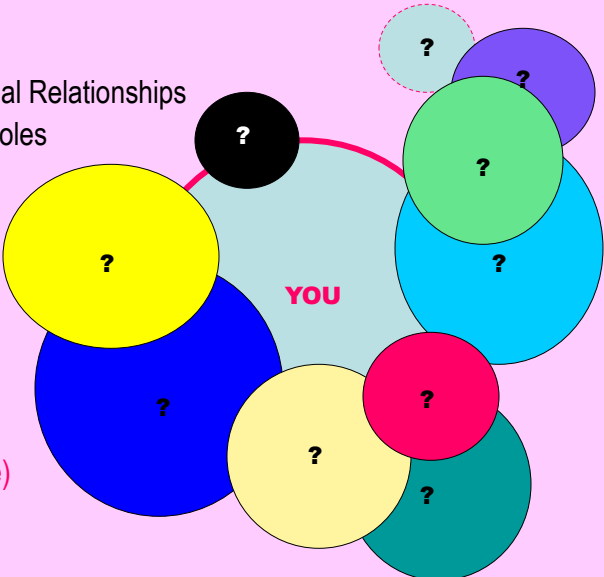
When A
Therapist Is
Juggling Too
Many Hats...

.....THE THERAPY MAY FAIL!

WHY?

Define Dual Relationships

Multiple
Professional Relationships
& Social Roles
Can
be
“sticky”
And
Should
Be
Avoided!
(if possible)



List of Potential Dual Relationship Conflicts

- Family Members
- Co-workers
- Spouses
- Boyfriend-girlfriend
- Ex-Partners & Family
- Current or former Sex partners
- Close Social Friends
- Roommates
- Health Care Providers
- Financial Partners
- Students

THE "THERAPIST'S SACRIFICE"

WHEN YOU ENTER INTO A THERAPY-TREATMENT RELATIONSHIP WITH A CLIENT

YOU MUST ACCEPT THAT YOU MAY NEVER AGAIN HAVE A "NORMAL" RELATIONSHIP WITH THAT PERSON,

EVER!

THE "THERAPIST'S SACRIFICE"

AN ACT OF LOVE

WHEN YOU ENTER INTO A THERAPY-TREATMENT RELATIONSHIP WITH A CLIENT

YOU MUST ACCEPT THAT YOU MAY NEVER AGAIN HAVE A

"NORMAL" RELATIONSHIP WITH THAT PERSON

EVER!

Power Relationships

She pays me MONEY to help her and protect her integrity!

- BY ROLE DEFINITION THERE IS A POWER DIFFERENTIAL BETWEEN CLIENT & THERAPIST.
- THIS CAN, AND SHOULD NOT BE RESOLVED. IT NEEDS TO BE RESPECTED AND OBSERVED!

She is better than my Mommy! Maybe we can be best friends?!!

The Central Issue In Therapy

THE ATTITUDE OF THE THERAPIST

If you are in doubt about your motives – do not act!

Couples in Therapy

- **Couples Session.... ??**

- Same Individual Therapist
- Different Individual Therapists
- One partner in Individual Session or Group
- One partner in supervision, training, professional meeting, business partner, etc.

- **Therapist also works with a person...??**

- With whom one partner in the couple has an affair with.
- Ex-partner (after divorce) or their partner
- Other relatives (children, parents) of the Couple

Referrals

The Process of Referring a Client

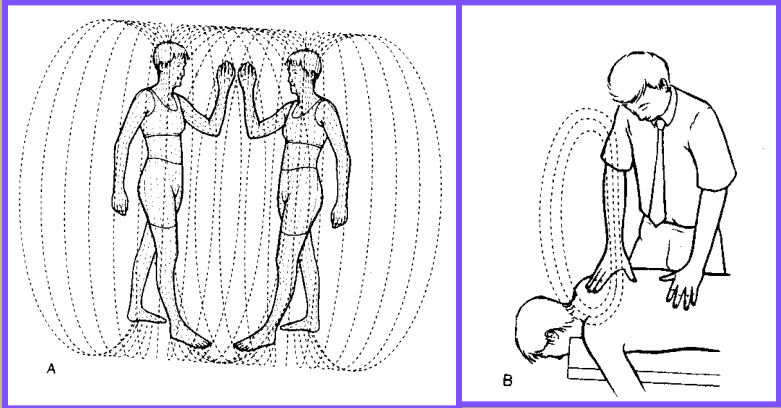
Steps in a Proper Referral:

- **Evaluate** the situation of your client
- **Check** who would be qualified to help
- **Select** 3 Therapists that fit for client
- **Make sure** of their availability (call)
- **Give the phone numbers** to your client
- **Follow up** if the referrals worked out
- **Share case information** with selected therapist (if required and appropriate)

PSYCHOSOMATICS COURSE

The Ethics Of Touch

The Ethics of Touch



From My Field to Your Field....

Sometimes There Are Mixed Messages and Confused Signals....



ETHICS OF TOUCH

The use of touch has a legitimate and valuable role as a body-oriented mode of intervention when used skillfully and with clear boundaries, sensitive application and good clinical judgment. Because use of touch may make clients especially vulnerable, body-oriented therapists pay particular attention to the potential for dependent, infantile or erotic transference and seek healthy containment rather than therapeutically inappropriate accentuation of these states. Genital or other sexual touching by a therapist or client is always inappropriate, never appropriate.

From: USABP Ethics Guidelines

INFORMED CONSENT

- Body psychotherapists obtain informed consent prior to using touch-related techniques in the therapeutic relationship.
- They make every attempt to ensure that consent for the use of touch is genuine and...
- That the client adequately understands the nature and purposes of its use.
- As in all informed consent, written documentation of the consent is strongly recommended.

ETHICS OF TOUCH 1

1. Body psychotherapists evaluate the appropriateness of the use of touch for each client. They consider a number of factors such as
 1. the capacity of the client for genuine informed consent;
 2. the client's developmental capacity and diagnosis;
 3. the transference potential of the client's personal history in relation to touch;
 4. the client's ability to usefully integrate touch experiences; and
 5. the interaction of the practitioner's particular style of touchwork with the client's.
 6. They record their evaluations and consultation in the client's record.
2. Body psychotherapists obtain informed consent prior to using touch-related techniques in the therapeutic relationship. They make every attempt to ensure that consent for the use of touch is genuine and that the client adequately understands the nature and purposes of its use. As in all informed consent, written documentation of the consent is strongly recommended.

From: USABP Ethics Guidelines

ETHICS OF TOUCH 2

3. Body psychotherapists recognize that the client's conscious verbal and even written consent for touch, while apparently genuine, may not accurately reflect objections or problems with touch of which the client is currently unaware. Knowing this, body psychotherapists strive to be sensitive to the client's spoken and unspoken cues regarding touch, taking into account the particular client's capacity for authentic and full consent.
4. Body psychotherapists continue to monitor for ongoing informed consent to ensure the continued appropriateness of touch-based interventions. They maintain periodic written records of ongoing consent and consultation regarding any questions they or a client may have.
5. Body psychotherapists recognize and respect the right of the client to refuse or terminate any touch on the part of the therapist at any point, and they inform the client of this right.

From: USABP Ethics Guidelines

ETHICS OF TOUCH 3

6. Body psychotherapists recognize that, as with all aspects of the therapy, touch is only used when it can reasonably be predicted and/or determined to benefit the client. Touch may never be utilized to gratify the personal needs of the therapist, nor because it is seen as required by the therapist's theoretical viewpoint in disregard of the client's needs or wishes.
7. The application of touch techniques requires a high degree of internal clarity and integration on the part of the therapist. body psychotherapists prepare themselves for the use of therapeutic touch through thorough training and supervision in the use of touch, receiving therapy that includes touch, and appropriate supervision or consultation should any issues arise in the course of treatment.
8. Body psychotherapists do not engage in genital or other sexual touching nor do they knowingly use touch to sexually stimulate a client. Therapists are responsible to maintain clear sexual boundaries in terms of their own behavior and to set limits on the client's behavior towards them which prohibits any sexual touching. Information about the therapeutic value of clear sexual boundaries in the use of touch is conveyed to the client prior to and during the use of touch in a manner that is not shaming or derogatory.

From: USABP Ethics Guidelines

Touch Ethics Highlights

BODY-PSYCHOTHERAPISTS...

- evaluate the appropriateness of the use of touch for each client.
- obtain "informed consent".
- strive to be sensitive to the client's spoken and unspoken cues regarding touch.
- monitor for ongoing "informed consent" to ensure the continued appropriateness.
- respect the right of the client to refuse or terminate any touch.
- use touch to benefit the client.
- touch may never be utilized to gratify the personal needs of the therapist.
- prepare themselves for the use of therapeutic touch through thorough training and supervision in the use of touch.
- do not engage in genital or other sexual touching.
- nor do they knowingly use touch to sexually stimulate a client.
- set limits on the client's behavior towards them which prohibits any sexual touching.

Excerpt from: USABP Ethics Guidelines

