

Dual roles within the counselling professions

**Good Practice in Action 077
Fact Sheet**

Updated December 2018

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Good Practice in Action 077 Fact Sheet: *Dual roles within the counselling professions* is published by the British Association for Counselling and Psychotherapy, BACP House, 15 St John's Business Park, Lutterworth, Leicestershire, LE17 4HB.

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Design by Steers McGillan Eves.

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Context

This resource is one of a suite prepared by BACP to enable members to engage with BACP's current *Ethical Framework for the Counselling Professions* in respect of building appropriate relationships.

Using Fact Sheet Resources

BACP members have a contractual commitment to work in accordance with the current *Ethical Framework for the Counselling Professions*. The Fact Sheet Resources are not contractually binding on members but are intended to support practitioners by providing general information on principles and policy applicable at the time of publication, in the context of the core ethical principles, values and personal moral qualities of BACP.

Specific issues in practice will vary depending on clients, particular models of working, the context of the work and the kind of therapeutic intervention provided. As specific issues arising from work with clients are often complex, BACP always recommends discussion of practice dilemmas with a supervisor and/or consulting a suitably qualified and experienced legal or other relevant practitioner.

In this resource, the word 'therapist' is used to mean specifically counsellors and psychotherapists and 'therapy' to mean specifically counselling and psychotherapy.

The terms 'practitioner' and 'counselling related services' are used generically in a wider sense, to include the practice of counselling, psychotherapy, coaching and pastoral care.

Introduction

All practitioners, supervisors and trainers will encounter dual or multiple relationships at some point in their career within the counselling professions. Although the *Ethical Framework* does not give definitive guidance on how to best approach and manage these relationships, it does commit members to 'respecting the boundaries between our work with clients and what lies outside that work' (Commitment, point 4c). Many problems brought about by dual relationships result from poor initial contracting with clients, supervisees, or trainees. Being clear about boundaries from the outset may prevent practitioners, clients, supervisees and trainees from encountering difficulties further down the line.

The area of dual and multiple relationships in the counselling professions is highly complex. This resource is intended to provide an overview of some of the key issues that may arise, but it is not an exhaustive list. It does however suggest questions that may be helpful to consider and discuss with all relevant parties in order to arrive at the most appropriate and ethical decision for your particular situation or context of working.

1. What are dual relationships?

Dual relationships can be obvious, predictable, subtle or spontaneous, and many are clearly inappropriate at any time, or at the very least strongly inadvisable. Corey (2009) explains that:

'Dual or multiple relationships, either sexual or nonsexual, occur when counsellors assume two (or more) roles simultaneously or sequentially with a client.' (Corey, 2009)

He further breaks down such relationships into two broad categories, covering any direct or indirect encounters outside the therapy room. The first is where the practitioner has two or more professional roles with one person, for example:

- the counsellor is also the client's trainer or manager
- both are on a training course, for example learning mindfulness
- they are business associates
- a supervisor attends a course led by their supervisee, for example Reiki
- the client is also the therapist's supervisee
- both are presenting at a conference
- they are linked on a professional website, for example LinkedIn
- both are involved in the same research study
- a therapist working in an institutional setting such as a hospital or prison may have two professional roles with a client.

The second could be where there is one professional and one non-professional role between the same parties, such as:

- a counsellor accesses a client's services, for example the client is an accountant
- they are related or are friends
- the therapist regularly shops where the client works
- both use the same place of worship
- they have friends in common on social media sites
- the client works in the counsellor's GP surgery or works for the printing firm the therapist regularly uses.

Dual relationships may be simultaneous or sequential. Many would clearly be unethical if they were to occur simultaneously, but the situation could be very different if one relationship were to follow another. A situation where a client attends a one-hour talk given by their current therapist may give cause for concern, but would you have the same concerns two years after therapy has concluded satisfactorily?

Socialising with ex-clients generally raises fewer concerns than social relationships with current clients but is not without potential problems. For example, a couple's therapist attending the wedding of a client he concluded work with two years previously, is very different to a client asking their current therapist to attend an informal family celebration. However, if you enter into any social relationship with a current or previous client, what would you say when someone asks you how you know each other? If therapy is ongoing, how would the social relationship impact on the professional relationship and the process?

Herlihy and Corey (1992) explain how it can be hard to recognise that a dual role is occurring, for example when a practitioner has a personal relationship with someone close to a supervisee, or the counsellor's brother is in a business partnership with the client.

Where a personal relationship knowingly already exists, adding a professional relationship is usually inadvisable, such as providing counselling to a friend. We naturally want to help our friends, but disclosures relating to themselves or others risk causing irreparable damage to the friendship, as well as raising professional concerns.

Group therapists should think carefully before allowing friends or family members into their groups. Peer supervision groups offer excellent opportunities for support, but dual relationships and potential problems may arise if you know people in a different role outside the group, for example, friends, or colleagues from your organisation, are also members of that group. Working with a colleague or more distant contact, such as the daughter of an ex-client, also has the potential for problems. However, as many referrals arrive via word-of-mouth, it may be unrealistic to expect a counsellor to have no prior connections with any client.

2. Purpose of the dual relationship

The reason for any secondary relationship is of paramount importance. Consider the following:

- Is there a genuine desire on the part of the therapist to 'help out' in a one-off situation, for example offering a lift to an elderly client waiting at the bus stop in the pouring rain? How would this affect the dynamics in subsequent sessions? How would it affect the relationship if the therapist just drove past, ignoring the plight of the wet elderly client?
- Are there any personal, professional or financial gains for either party or anyone else, for example has the practitioner's partner been named in the client's will?
- Does the relationship fill an emotional need for the counsellor?
- Could anything in the situation be viewed as a bribe?
- Is it easier to let the dual relationship just happen than to work round it?
- Would it be possible for the person to access the services of another professional in the area? Services are scarce in some remote rural areas, so encountering clients, or supervisees or trainees within different contexts (such as supermarket or social gatherings) is often unavoidable.

Business relationships or providing therapy for professional services offered by the client in lieu of payment may be more common in some cultures and may historically be standard practice in some locations or where it is the client's only means of payment, for example exchanging therapy sessions for work done on the therapist's car. However, how is the relative worth of the services determined, and how would you resolve a situation where one party considers the service they receive is substandard?

3. Issues with dual relationships

Conflicting opinions exist regarding stringent or considered avoidance of dual relationships. Syme (2003) urges caution, explaining how such relationships are rarely neutral and can have powerful negative impacts. Zur (2015), however, explains how such relationships can be beneficial and form integral parts of therapy in some empirically based approaches such as behavioural, humanistic, cognitive and family systems work. The ethical codes of some professional organisations advise against dual and multiple relationships, mainly because of the potential for misusing power, exploiting the client and impairing objectivity; however, some ethical codes do not mandate avoidance of all such relationships (Corey, 2009). It has been suggested that if a practitioner has a tendency to exploit others, then they will unfortunately do so even in the absence of any dual relationship. However, many factors can make engaging in a dual or multiple relationship problematic, or inadvisable and the effects of dual relationships on clients may be wide-ranging, both inside and outside the therapy room.

3.1 Effects on therapy and the client: the potential for harm

It is important to consider what harm a dual relationship may cause, as soon as you realise one may occur, or is occurring. In keeping with the *Ethical Framework* principle of non-maleficence, members are committed to ensure that:

Any dual or multiple relationships will be avoided where the risks of harm to the client outweigh any benefits to the client. (Good Practice, point 33b)

Clients can be negatively affected by dual relationships in a wide range of ways. They may view you as unprofessional, lose faith in the therapeutic process and in you as a practitioner, decide not to continue in therapy and could leave in a worse position than before they started. Herlihy and Corey (1992) discuss how clients may experience conflicting feelings of anger and a fear of being separated from the practitioner, may feel they've been exploited, but also feel dependent on the therapy. They could feel guilty for no apparent reason, or assume they've done something wrong. Unfortunately, some clients may be unable to voice their discontent with the practitioner, because of the perceived power imbalance whereby many clients automatically view their therapist as an authority figure. So, the dual relationship continues, with the client holding back within the sessions and feeling restricted in their daily life.

The degree of harm that may be caused varies enormously, ranging from very little potential for causing distress, to extremely likely to cause significant and permanent harm. It may not be immediately obvious that harm has been caused, as negative consequences may take time to emerge. Power differentials require continual monitoring in any counselling relationship, and introducing a secondary relationship complicates this further and may intensify or reverse the power imbalance. Different theoretical stances vary in opinion regarding what crosses the line in respect of relationships of this kind as they may use the therapeutic relationship in different ways.

Pope and Vasquez (1991) warn how viewing a dual relationship as beneficial for the client may be a way of justifying inappropriate behaviour or evading responsibility on the part of the therapist: this is clearly manipulative and unethical. Different cultures hold different perspectives on what is appropriate and what crosses the line, but rigid adherence to a strict code of ethics may cause offence amongst some populations. Zur (2015) further warns that extreme care should be taken before engaging in dual relationships with certain clients, for example those with borderline personality disorder.

Similarly, within supervisory, or training relationships, dual relationships could have the same kind of effects on the supervisee or trainee. The trainer, and supervisor are in positions of power, and often those being supervised, or trained, are dependent on the professionalism and expertise of those supporting them. As with any dual relationship, extreme caution should be exercised by supervisors and trainers considering entering into a dual relationship with a supervisee or student, respectively. Additionally, there is some research to support the negative effects of supervisory dual relationships (Kreider, 2014).

3.2 Professional issues and legal implications

Entering dual relationships without thought or awareness of the implications can have significant career-ending consequences and serious legal ramifications. Herlihy and Corey (1992) discuss how practitioners may face formal complaints procedures and risk losing professional credibility, professional memberships and personal respect within their community. It was estimated by the American Psychological Association (APA) that 40-50% of the complaints received during 1990 to 1992 related to dual relationships (Afolabi, 2015), and Sonne (1994) further reported that issues of dual relationships were the most common reason for termination of APA membership. In the UK, complaints of boundary violations and detrimental dual relationships made against members were key issues upheld by BACP from 2013 to 2016.

Before entering a dual relationship therefore, it is important to consider what may happen if you were called to give evidence in court regarding that client: how would your professionalism be viewed when details of the dual relationship emerged? If reports of the case are readily available online, could you give others a bad impression of the counselling profession and deter people from seeking help? The *Ethical Framework* requires us to act with integrity, as we also have a re-sponsibility to the wider community. Members are committed to '...avoid any actions that will bring our profession into disrepute'. (Good Practice, point 48.)

3.3 Effects on practitioners and others

The *Ethical Framework* requires us to live a full life outside our counselling work stating:

We will take responsibility for our own wellbeing as essential to sustaining good practice with our clients by...keeping a healthy balance between our work and other aspects of life. (Good Practice, points 91 and 91d)

This may cause conflicts, especially for a therapist having an active and varied social life close to their work location. Consider, for example, a practitioner who regularly trains for swimming events and there is only one swimming pool within a 30-mile radius of his home – should he abandon his main hobby because his client is the new aqua aerobics instructor? If we avoid all possibilities of chance encounters with clients we would live very restricted lives and be neglecting our own wellbeing. There may be some situations, however, where a counsellor should not attend a social occasion, because to proceed would be highly likely to cause difficulties in your relationship with the client.

Dual relationships may affect others outside the therapist–client relationship. For example, within a supervision group, where one member of the group is also a workplace colleague of the supervisor. Other members of the group may feel slighted that they do not have this additional relationship with the supervisor.

3.4 Conflicts in different roles

Counselling in the workplace or work undertaken for Employee Assistance Programmes (EAPs) can often produce conflicts, as there can be an implicit 'goal' for the client to return to work as soon as possible. It may become apparent during the course of the therapy that it is not in the client's best interests to return to that work environment, and therefore any report required at the end of the final session can pose a range of challenges.

Practitioners who are also trainers have complex and potentially contradictory obligations, especially if in a dual relationship by taking on the role of counselling or supervising a student. They have a duty to respect client confidentiality, but also a professional obligation to the educational setting should issues arise in therapy which raise concerns of suitability for the student on the course. Herlihy and Corey (1992) explain how these effects may be wide-ranging: it may compromise the student's autonomy if they worry that therapy disclosures may adversely affect their course, other students may lose respect for the trainer and the institution, or some may believe the student is receiving a privilege in the dual relationship. Due to the potential for harm and complications, many counselling educational organisations have strict rules prohibiting such dual relationships.

The supervisory role also has the potential for multiple and conflicting relationships: a responsibility to their supervisee, the organisation they work with (if applicable), their governing body (e.g. BACP), clients the supervisee works with and the general public. Part of their role may involve evaluating the supervisee for training or accreditation purposes, which could be problematic. Supervisors should approach all dual relationships with caution, as the *Ethical Framework* states:

All supervisors will model high levels of good practice for the work they supervise, particularly with regard to expected levels of competence and professionalism, relationship building, the management of personal boundaries, any dual relationships, conflicts of interest and avoiding exploitation. (Good Practice, point 63)

It may be helpful to consider the following points:

- what conflicting responsibilities could occur when a supervisor is also a manager in the same organisation, or in a different organisation?
- what are the potential pitfalls of managing and supervising the same person?
- how should social situations between supervisors/supervisees or trainers/trainees be handled differently compared with a counsellor/client social situation?
- how do the confidentiality parameters differ and what could be the consequences of entering into/not entering into a social relationship?
- supervisor/manager/trainer roles inherently come with a certain degree of authority: how could the supervisee's/employee's/student's impression of professionalism be shaped by any dual relationship? How could this subsequently impact on their practice and their impression of appropriate or inappropriate boundaries?

To illustrate the complexities of dual relationships, consider the following scenario: a counsellor is a trustee for a local charity offering support to older people. The trustees board collectively decides to halve the workforce. This means that the counsellor's supervisor, who alongside her private practice works for the charity as a manager, will lose her job.

In respect of this scenario, consider the following:

- If the supervisor is unaware that her supervisee is on the board, should this be raised (if so, by whom)?
- Should this situation have arisen in the first place; is the conflict of interest too significant?
- How should the supervisee broach the subject in supervision?
- How else could this affect the supervisor/supervisee relationship?

Note: For more information on supervision, see Good Practice in Action 008 (Commonly Asked Questions: *How to choose a supervisor* (counsellors)), 009 (Fact Sheet: *How to choose a supervisor for your service*), 010 (Fact Sheet: *Monitoring the supervisory relationship from the supervisor's perspective*), 011 (Commonly Asked Questions: *Monitoring the supervisory relationship from the perspective of a supervisee*), 032 (Legal Resource: *Supervision within the counselling professions in England, Northern Ireland and Wales*), 043 (Research Overview: *Supervision within the counselling professions*).

For more information on training, see the *Ethical Framework for the Counselling Professions* training and education resources available at: <https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/>.

See also Good Practice in Action 084 Clinical Reflections for Practice: *Ethical mindfulness within supervision and training*.

3.5 Challenges when working in remote locations and in specialist therapy fields

Practitioners living and working in heavily populated areas with multiple amenities may not encounter many dual relationship issues. However, therapists working in remote locations face more difficult challenges due to the lack of options for them and their clients. It could be feasible, for example, for a counsellor in a rural community to have clients such as the village's primary school teacher, a bar worker and the nurse practitioner.

They are also more likely to attend the same community events, and even supermarkets, as their clients, and therefore may struggle to maintain clear boundaries while enjoying an active social life.

Practitioners from ethnic minorities or working in more specialist areas may similarly find boundaries more challenging; for example, some clients prefer therapists from their own ethnicity or religion, who share their sexual preferences or who practise in a less common modality. There may only be one professional in the area who uses sign language, limiting a deaf client's options. The more remote the location the higher the potential complexities involved. Many substance abuse counsellors have previously received therapy themselves for addictions, and if their therapists are also trainers then it is likely that their paths will repeatedly cross. For example, consider the following scenario, a practitioner in a remote village suffers a bereavement and needs personal therapy, they cannot find any practitioner in a 50-mile radius who they do not know. How would they choose to get support?

3.6 Social media

Social media such as Facebook, Twitter, Snapchat, Instagram, Tumblr, LinkedIn and various chatrooms and forums can be attractive both personally and professionally, but are fraught with potential problems. Many professions advise against the use of social media and some ban staff from using Facebook, for example, altogether. The *Ethical Framework* commits members to build appropriate relationships through establishing and maintaining appropriate professional boundaries in our relationships with clients by ensuring that:

Reasonable care is taken to separate and maintain a distinction between our personal and professional presence on social media where this could result in harmful dual relationships with clients. (Good Practice, point 33c)

Posts on social media may inadvertently reveal personal information about you and your family. One of your contacts may be connected to a current or past client and therefore finding out information about you is easy if a friend tags you in one of their posts. How would a client knowing personal information about you affect your relationship? It is possible that you are 'friends' with someone who is a current client of a colleague you are also connected to. Requests from current and ex-clients to connect on social media should be handled sensitively and appropriately. It is clearly inadvisable, for example, to become friends on Facebook with a current client but would you consider it totally unethical to connect on LinkedIn with an ex-client who is now studying to be a therapist, as LinkedIn is more professional?

Further issues to consider when using social media include:

- Would having two separate accounts, one strictly for professional purposes and another for personal use, prevent some dual relationship problems arising in the first place?
- What degree of privacy settings are needed, and could the level required differ depending on the purpose of the account?
- What profile pictures would be appropriate for your accounts?

Note: For more information about social media see Good Practice in Action 040 Commonly Asked Questions: *Social media (audio and video) and the counselling professions*.

3.7 Dual relationships of a sexual nature

The complex issue of sexual relationships with current, or previous clients, has been heavily debated; sexual relationships with current clients are universally, ethically unacceptable and may even be illegal (for example, if working in a prison). The *Ethical Framework* explicitly states that:

We will not have sexual relationships with or behave sexually towards our clients, supervisees or trainees. (Good Practice, point 34)

and further expects that:

We will avoid having sexual relationships with or behaving sexually towards people whom we know to be close to our clients in order to avoid undermining our clients' trust in us or damaging the therapeutic relationship. (Good Practice, point 36)

Over the 2015-2016 period, sexual misconduct was one of the main issues raised in the BACP professional complaints' procedure. Whereas sexual relationships with current clients are prohibited, intimate relationships with former clients, supervisees or trainees are far more complex. Dating apps and websites such as Match, Tinder and Grindr are becoming commonplace and are a normal way for many people to meet a partner, with profile information being accessible to anyone, including clients, employers, employees, students and supervisees. Casual and unplanned encounters with clients (present and past) are therefore distinctly possible for more sexually adventurous practitioners.

Many believe that sexual relationships with any client, supervisee or trainee should be forbidden for life. The American Counseling Association Code of Ethics (2014) prohibits sexual relationships with clients or family members of clients until five years have elapsed. However, attributing an arbitrary time limit does not conclusively address the key issues. Before any practitioner contemplates sex with former clients, they should seriously consider the following:

- Has the therapeutic relationship ended? How might any transference or countertransference issues within the therapeutic relationship contaminate a romantic relationship? Or has a sufficient amount of time elapsed to ensure any therapeutic dynamics have come to an end?
- What were the issues brought by the client? If they mainly related to relationship, sexual or attachment issues, will a sexual relationship with this person be complicated by power differentials that could be difficult to overcome or be damaging?
- Is the practitioner willing to be professionally accountable by discussing the possibility of such a relationship in advance in supervision?
- Have alternative arrangements been considered for how the former client will receive future counselling services elsewhere?
- Are both parties entering into the sexual relationship on an informed and consensual basis?

3.8 Potential benefits of dual relationships

The power imbalance in the counselling relationship could be heightened by a dual relationship, but it could instead be levelled out or even reversed in the second relationship. Pope and Keith-Spiegel (2008) hold the perspective that non-sexual boundary crossing can strengthen the therapist–client working relationship.

For example:

- Would you consider it a boundary violation to visit a client at home for a few sessions if they were sick and unable to travel?
- How would your decision differ if the client was terminally ill?
- Is it good or bad if a client sees you struggling in a gym class – and could it be a therapeutically useful discussion point if your client is working through perfectionist issues?

Dual relationships do not necessarily have to be negative: if handled sensitively and professionally they can benefit the therapeutic process.

Perhaps the most important factor is that you have considered all issues carefully from an ethical perspective, and have thoroughly discussed with the client/trainee/supervisee any potential consequences. It is the making of an ethical decision and our candour and accountability to our client/trainee/supervisee that tend to make the difference as to whether the experience is positive or negative for all those involved.

4. Ethical decision making in respect of dual relationships

Learning how to ethically address dual relationships and manage the potential for harm comprise a more constructive and realistic approach than blanket avoidance of all secondary relationships. A strict yes/no decision-making process for dual relationships is impractical, as there are too many variables to consider. The *Ethical Framework* expects that:

The impact of any dual or multiple relationships will be periodically reviewed in supervision and discussed with clients when appropriate. They may also be discussed with any colleagues or managers in order to enhance the integrity of the work being undertaken. (Good Practice, point 33d)

Pope and Keith-Spiegel (2008) explain how therapists make sound decisions when their approach is based upon critical thinking and ethical reasoning. Below is a list of questions and points to consider to help you arrive at an ethical decision, which is appropriate for your particular dual relationship dilemma: these are taken from Good Practice in Action 044 (*Ethical decision-making in the context of the counselling professions*) and a range of points put forward by Corey (2009), Herlihy and Corey (2006), Zur (2015), Barnett (2007) and Herlihy and Corey (1992). When considering each point, ask yourself whether the plain facts, your answers and/or your gut feeling make proceeding with the dual relationship inadvisable or simply unethical.

- If the dual relationship is with a client, what is the client's background? Consider in terms of issues brought to therapy, support network, history of mental health conditions or drug/alcohol misuse (and likelihood of relapse), history of abuse, culture and religion, family situation, current or past involvement in legal issues, responsibilities, attachment issues, previous experiences in therapy, location of therapy sessions and the type of therapy.
- If the dual relationship is with a supervisee or trainee, the supervisor or trainer could be seen as being in a position of power or authority. How would this affect any dual relationship that occurred? If a boundary was violated in this different setting, how would this impact or affect the supervisee's work with clients, or the trainee's input into their course?

- If the dual relationship is with an ex-client, also consider the length of time since you worked together, their current mental health status and how the relationship ended.
- What is the purpose of the dual relationship? Who proposed it, who may benefit from it and how?
- Are there any personal motivations for this dual relationship?
- What does the client/trainee/supervisee think about it?
- What is the likely intensity and frequency of the proposed dual relationship?
- How solid is the current relationship with your client/trainee/supervisee? What transference or countertransference have you identified?
- Is there a conflict of interest in the proposed dual relationship?
- Could the dual relationship impair your professional judgement or leave you unable to be objective?
- Are the power dynamics of the primary therapeutic relationship likely to be mirrored in the dual relationship? Could there be any shift in power: who would be favoured and what may the consequences be?
- How compatible is the dual relationship with a therapeutic relationship, and how would one be affected if the other were to end?
- What is the likely impact on the client, you, any third parties or the counselling profession: is anyone being exploited or could anything be misinterpreted?
- What could happen if you choose to proceed or not to proceed with the dual relationship?
- How can this dual relationship realistically be avoided?
- Consult the *Ethical Framework* and consider which Values, Principles, Personal Moral Qualities and Good Practice points are relevant.
- Discuss with colleagues and/or in supervision; ensure you consult colleagues who may hold conflicting opinions to your own to get a balanced perspective.
- Obtain informed consent from the client after discussing potential risks and benefits of the dual relationship.

- Document all discussions and outcomes of any dual relationship roles in client notes.
- If necessary, refer the client to another professional.
- Ask yourself: Would I make the same decision if this person was rich or famous? Would I be happy to account for the relationship with peers, or if I had to do so within a professional setting (such as a court of law)?

If it becomes apparent that a dual relationship has been occurring for some time without you knowing, still review the above points to help clarify your thinking. Depending on the situation, you may decide something needs to change, or you need to talk to the client/supervisee/trainee to raise mutual awareness of the situation. When discussing any dual relationships with clients, approach all communications with sensitivity. Be clear about what decision you have reached, explain why you have reached that conclusion, explain your concerns and give them plenty of opportunity to give their opinion and ask questions. Your client may disagree with your decision: that is their right to do so, but if you believe your decision to be correct both ethically and professionally then stick by it.

4.1 Ongoing monitoring of dual relationships

Dual relationships can change or are likely to end at some point, and the decision-making process may need to be revisited regularly as the relationship develops.

Remain open to discussing unexpected problems or conflicts that may emerge due to the dual relationship with clients or confer with colleagues. Zur (2015) explains that if the dual relationship proves not to benefit the client, causes distress and harm or a conflict of interest arises, then the situation should be reassessed and, if necessary, the dual relationship should be ended in a manner that causes the least harm.

Responsibility for monitoring dual relationships ultimately rests with the practitioner, and peer supervision can provide an excellent forum for obtaining a diverse array of opinions and acts as a learning experience for others. Herlihy and Corey (2006) advise continued involvement of the client in ongoing discussions about expectations as the relationship progresses. Corey (2009) further explains how continued self-monitoring demonstrates a professional outlook in working through day-to-day ethical complexities. Remember, to help prevent dual relationship-associated issues arising in the first place hold thorough discussions at the contracting stage about what you both consider to be appropriate and inappropriate.

Summary

Dual and multiple relationships may be, but are not always, unethical, harmful or abusive. The key is to be aware of them when, or preferably before they arise, assess all aspects of the dual relationship, discuss with your client, consult your supervisor and trusted colleagues, be honest with yourself, and your client, and ensure that the situation is reviewed frequently.

About the author

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