Analyzing the Pros and Cons of Multiple Relationships Between Chemical Addiction Therapists and their Clients.¹

ARTICLE

Abstract

The wording of the 1992 Ethics Code implied that multiple relationships were inherently unethical, which essentially placed the burden of proof on the therapist (APA, 1992). In contrast, the wording of the 2002 Ethics Code Standard 3.05 (Multiple Relationships) simply begins with a neutral definition of a multiple relationship; the 2002 code does not contain the implication that dual relationships are inherently unethical. Instead, the code clarifies that multiple relationships that are not exploitive or harmful or cause impairment are not unethical (Fisher, 2003). However, any boundary crossing has the potential to lead to a boundary violation and must therefore be examined very closely. In those dual relationships in which harm eventually results to a client, the burden of proof will always fall on the therapist (Beauchamp & Childress, 2001).

Introduction

The New Ethics Code, Standard 3.05, explicitly states that multiple relationships that reasonably would not be expected to cause impairment or risk exploitation or harm are not inherently unethical (APA, 2002). The standard attempts to adopt a fair balance between the interests of the public and the interests of Chemical Addiction Therapists. On one hand, the Code was not designed to punish therapists who engage in benign multiple relationships. On the other hand, it does want authority to punish those who create unethical dependency or who engage in blatantly exploitative relationships (Fisher, 2003). According to this standard, it could even be ethical to enter into a treatment relationship with a person with whom the therapist has a current business or social relationship, as long as the relationship is not exploitative or clinically contradicted, although from a risk-management perspective I would strongly discourage that. Thus, maintaining healthy boundaries in relationships with clients does not inherently require detached objectivity but does require professional judgment and a commitment to the best interest of the client (Taylor & Gazda, 1991). As such, the intersections of trust, boundaries, and appropriateness for both relationships are dependent on the therapist’s knowledge that multiple relationships are going to occur; and just as importantly on the therapist’s ability to effectively and ethically manage these relationships competently (Beauchamp & Childress, 2001).

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Discussion

Definition

According to its preamble, the new APA Ethics Code has as its goals the welfare and protection of the individuals and groups with whom therapists work and the education of members, students and the public regarding ethical standards of therapy (APA, 2002). Standard 3.05, on multiple relationships, is an excellent example of how the code achieves these goals (APA, 2002). The first paragraph of the standard offers a definition that is new to the code. The definition states that a multiple relationship arises when a therapist is in a professional role with an individual, and that, in addition to this professional role one of three other conditions is met. A multiple relationship occurs when a therapist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the therapist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person (APA, 2002). The first paragraph of Standard 3.05 thus clearly informs therapists and the public what constitutes a multiple relationship (Fisher, 2003).

The Test

One of the most frequent misconceptions surrounding Standard 3.05 is that multiple relationships are, by definition, unethical (Taylor & Gazda, 1991). The second paragraph of Standard 3.05 makes it clear that simply meeting the definition does not speak to the ethics of multiple relationships (APA, 2002). In order to assess the ethical appropriateness of the relationship, the second paragraph sets forth the following test: A therapist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the therapist's objectivity, competence, or effectiveness in performing his or her functions as a therapist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists (APA, 2002).

Several things should be pointed out about this test. First, the test sets out criteria: impairment in objectivity; competence or effectiveness; and a risk of exploitation or harm (Fisher, 2003). In assessing whether the test is met, the therapist will therefore consider the likelihood of impairment or the risk of exploitation or harm (Fisher, 2003). Second, the phrase "reasonably expected" is central in determining what level of likelihood must be present, what a reasonable psychologist would expect to occur (Fisher, 2003). Would a reasonable psychologist expect that multiple relationships would cause impairment or risk of exploitation or harm (Fisher, 2003)? If a reasonable psychologist would not, the test is not met (Fisher, 2003). Third, there must be a causal connection between multiple relationships and the impairment or risk. In other words, something about the relationship must reasonably lead a therapist to expect that the relationship will cause impairment or risks exploitation and/or harm (Fisher, 2003). Thus, that a multiple relationship exists, in and of itself, does not meet the test, a reasonable therapist must expect that the multiple relationship will lead somewhere problematic (Fisher, 2003). The third paragraph in Standard 3.05 emphasizes this point: “Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical” (APA, 2002).

The definition in Standard 3.05 educates therapists and the public about when a multiple relationship is present. The test that follows protects those with whom psychologists work, and
thereby promotes their welfare, by making a safe space available for the therapist and client to proceed (Fisher, 2003).

Multiple relationships

How does a therapist know whether a multiple relationship will lead to impairment, or if the relationship risks exploitation or harm? My feeling is that if a multiple relationship is likely to lead to impairment or risks, the relationship should be avoided. Thus, the reasoning is not about values, protecting from harm and promoting welfare, but is rather about what effect a particular multiple relationship will have on a particular client (Beauchamp & Childress, 2001). While the answer to this clinical question has profound ethical implications, the disagreement remains on clinical and technical grounds. As therapists, we can agree upon and share the underlying values (Beauchamp & Childress, 2001).

The APA Ethics Code recognizes that because of the many roles therapists assume in their work, family, community and social lives, multiple relationships arise in unexpected ways. Some of these multiple relationships are potentially harmful. The fourth paragraph in Standard 3.05 addresses potentially harmful, unanticipated multiple relationships. “If a therapist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the therapist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code” (APA, 2002).

The question is again what a reasonable therapist would do. The therapist's focus will be on the affected person's best interests and on complying with the Ethics Code, which has as its focus the individual's welfare and protection (Taylor & Gazda, 1991). Thus, the Ethics Code continues to return to and emphasize its central values of doing good and not doing harm, found in Principle A of the code's General Principles (Taylor & Gazda, 1991).

Multicultural competence

Multicultural competence is facilitated in this code by recognizing that in particular cultural contexts, closer and more complex involvement in the lives of clients may facilitate appropriate service and protection for the client (Fisher, 2003). This may be accomplished by the therapist’s increased knowledge of the cultures involved in his/her clientele.

Clients in individual and group therapy

In most instances, treating clients/patients concurrently in individual and group therapy does not represent a multiple relationship because the practitioner is working in a therapeutic role in both contexts (Taylor & Gazda, 1991), and Standard 3.05 does not prohibit such practice (APA, 2002). Therapists providing individual and group therapy to the same clients should consider instituting special protections against inadvertently revealing to a therapeutic group, information shared by a client/patient in individual sessions (Taylor & Gazda, 1991). As in all types of professional practice, psychologists should avoid recommending an additional form of therapy based on the therapist’s financial interests rather than the client’s mental health needs (Taylor & Gazda, 1991).

Avoiding multiple relationships

In some situations, it may not be possible or reasonable to avoid multiple relationships. Therapists working in rural communities, small towns, military bases, or American Indian
reservations, or therapists who are qualified to provide services to members of unique ethnic or language groups for which alternative psychological services are not available, would not be in violation of this standard if they took reasonable steps to protect their objectivity and effectiveness and the possibility of exploitation and harm (Taylor & Gazda, 1991). Such steps might include: seeking consultation by phone from a colleague to help ensure objectivity; taking extra precautions to protect the confidentiality of each individual with whom the therapist works; or explaining to individuals involved the ethical challenges of the multiple relationships. The therapist will take steps to mitigate these risks, by encouraging individuals to alert the therapist to relational situations of which the therapist might not be aware and that might place his or her effectiveness at risk (Taylor & Gazda, 1991).

There will be instances in which therapists discover they are involved in a potentially harmful multiple relationship of which they had been unaware. Standard 3.05b requires that therapists take reasonable steps to resolve the potential harms that might arise from such relationships, recognizing that in some instances the best interests of the affected person and maximal compliance with other standards in the Ethics Code may require therapists to remain in the multiple roles (Beauchamp & Childress, 2001).

For Example: a therapist in a chemical addiction program became aware that his neighbor had begun dating one of the therapist’s addiction patients. The therapist could not reveal to his neighbor that the patient was in therapy. Although telling the patient about the social relationship could cause some distress, it was likely the patient would find out about the relationship during conversations with the neighbor. The therapist considered reducing his social exchanges with the neighbor but this proved infeasible. After seeking consultation from a colleague, the therapist decided that he could not ensure therapeutic objectivity or effectiveness if the situation continued. He decided to explain the situation to the patient, provide a referral, and assist the transition to a new therapist during pre-termination counseling (Fisher, 2003).

Multiple Roles

In its fifth and final paragraph, Standard 3.05 recognizes that therapists are sometimes required to serve in more than one role in judicial or administrative proceedings, and so cannot always avoid or fully resolve a potentially harmful multiple relationship. When a therapist encounters such a situation, the Ethics Code focuses the therapist on informing those affected about the change in expectations (Fisher, 2003). The reasoning behind the code’s language is that if a therapist must take on a potentially harmful multiple role, the best way to help protect those affected is to inform them of the change in circumstances (Fisher, 2003). Standard 3.05c applies to instances when therapists are required to serve in more than one role in judicial or administrative proceedings or because of extraordinary circumstances (APA, 2002). This standard does not permit therapists to take on these multiple roles if such a situation can be avoided (Fisher, 2003). Standard 3.05c requires that when such multiple roles cannot be avoided, as soon as possible and thereafter as changes occur, therapists clarify to all parties involved the roles the therapist is expected to perform and the extent and limits of confidentiality that can be anticipated by taking on these multiple roles (Fisher, 2003).

In most situations, therapists are expected to avoid entering multiple relationships in forensically relevant situations or to resolve such relationships when they unexpectedly occur (Standards 3.05 a and b) (APA, 2002). When such circumstances arise (e.g., such as performing a custody evaluation and then providing court-mandated family therapy for the couple involved), the conflict may sometimes be resolved by explaining to a judge or institutional administrator the problematic nature of the multiple relationship (Taylor & Gazda, 1991).
For example, a judge asked a therapist who had conducted a custody evaluation to provide 6-month mandated family counseling for the couple involved followed by a re-evaluation for custody. The therapist explained to the judge that providing family counseling to individuals who’s parenting skills the therapist would later have to evaluate could reasonably be expected to impair her ability to form an objective opinion independent of knowledge gained and the professional investment made in the counseling sessions (Taylor & Gazda, 1991). She also explained that such a multiple relationship would likely impair her effectiveness as a counselor if the parents refrained from honest engagement in the counseling sessions out of fear that comments made would be used against them during the custody assessment (Taylor & Gazda, 1991). The judge agreed to assign the family to another therapist for counseling.

“When therapists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur” (APA, 2002).

Relationships that are not unethical

Individual therapists perform a variety of roles and work with a variety of individuals. Standard 3.05 was crafted to define multiple relationships and to help therapists distinguish between those that are ethical and those that are unethical (Fisher, 2003).

For example, a client with a fluctuating sense of reality coupled with strong romantic transference feelings for a treating therapist misinterpreted two incidental encounters with his therapist as planned romantic meetings (Beauchamp & Childress, 2001). The client subsequently raised these incidents in a sexual misconduct complaint against the therapist. The therapist's recorded notes made immediately following these encounters were effective evidence against the invalid accusations (Beauchamp & Childress, 2001).

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical (APA, 2002). Standard 3.05 does not prohibit attendance at a client's, student's, employee's, or employer’s family funeral, wedding, or graduation; the participation of a therapist’s child in an athletic team coached by a client; gift giving or receiving with those with whom one has a professional role; or from entering into a social relationship with a colleague as long as these relationships would not reasonably be expected to lead to role impairment, exploitation, or harm (Fisher, 2003). Incidental encounters with clients at religious services, school events, restaurants, health clubs, or similar places are not unethical (Beauchamp & Childress, 2001). Nonetheless, therapists should always consider whether the particular nature of a professional relationship might lead to misperceptions regarding the encounter. If so, it may be wise to keep a record of such encounters (Beauchamp & Childress, 2001).

The standard does not have an absolute prohibition against post-termination nonsexual relationships with persons with whom therapists have had a previous professional relationship (APA, 2002). However, such relationships are prohibited if the post-termination relationship was promised during the course of the therapeutic relationship or if the individual was exploited or harmed by the intent to have the post-termination relationship. If the personal knowledge acquired during therapy becomes relevant to the new relationship then the new relationship would be prohibited (Fisher, 2003).
Relationships that are potentially unethical

Therapists may encounter situations in which the opportunity to enter a new relationship emerges with a person with whom they already have an established professional role. Many relationships would be prohibited by Standard 3.05a because these situations could reasonably be expected to impair a therapists’ ability to competently and objectively perform their roles and could lead to exploitation or harm (Fisher, 2003).

For example: a company hired a therapist for consultation on how to prepare employees for a shift in management anticipated by the failing mental health of the chief executive officer (CEO). A few months later, the therapist agreed to a request by the board of directors to counsel the CEO about retiring. The CEO did not want to retire and told the therapist about the coercive tactics used by the board. The therapist realized too late that this second role undermined both treatment and consultation effectiveness because the counseling role-played by the therapist would be viewed as either exploitative by the CEO or as disloyal by the board of directors (Fisher, 2003).

Therapists may also encounter situations in which a person closely associated with someone with whom they have a professional role seeks to enter into a similar professional relationship (Fisher, 2003).

For example, the roommate of an addiction therapy client might ask the therapist for an appointment to begin addiction therapy. With few exceptions, entering into such relationships would risk a violation of Standard 3.05a because it could reasonably be expected that the therapist’s ability to make appropriate and objective judgments would be impaired, which in turn would jeopardize the effectiveness of services provided and result in harm (Fisher, 2003).

Therapists may also encounter situations in which they are asked to be in a professional role with someone with whom they have a preexisting personal relationship. These multiple relationships are frequently unethical because the preexisting relationship would reasonably be expected to impair the therapist’s objectivity and effectiveness (Fisher, 2003). The phrase “could reasonably be expected” indicates that violations of Standard 3.05a may be judged not only on the basis of whether actual impairment, harm, or exploitation has occurred but whether most therapists engaged in similar activities in similar circumstances would determine that entering into the multiple relationship would be expected to lead to such harms (Taylor & Gazda, 1991).

Here are two examples of what I am talking about: relatives ask a therapist to help his nephew overcome his dependence on alcohol; a colleague asks a therapist to administer a battery of tests to assess whether she has a drinking problem.

Conclusion

Standard 3.05 defines a multiple relationship and provides a test for when therapists refrain from entering into a multiple relationship (APA, 2002). The Standard also indicates what therapists should do when an unanticipated and/or unavoidable multiple relationship arises in their professional lives (APA, 2002).

The goal of Standard 3.05, like the goal of the code as a whole, set forth in the preamble, is "the welfare and protection of the individuals and groups with whom therapists work and the education of members, students and the public regarding ethical standards of the discipline" (APA, 2002). Standard 3.05 illustrates that an excellent way to protect our clients and promote
their welfare is to educate the public about our profession’s core values and to inform therapists about how these values can be implemented in everyday practice (Fisher, 2003).

A therapist should refrain from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the therapist’s objectivity, competence, or effectiveness in performing his or her functions as a therapist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists (Fisher, 2003). Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical (APA, 2002).

Adjudication of complaints under the 2002 Ethics Code is likely to be determined by the way disciplinary boards interpret the meaning of the phrase "could reasonably be expected" (Fisher, 2003). The word “reasonably” does not define itself. What is reasonable to one therapist may not be reasonable to another. These considerations highlight the importance of consulting with colleagues in situations involving dual roles or boundary crossings (Fisher, 2003). Of course, the best way to stay out of potentially dangerous situations is to avoid them in the first place (Fisher, 2003).

REFERENCES AND ADDITIONAL RESOURCES


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