

Managing Multiple Relationships in Therapeutic Roles in Rural Communities

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Abstract

This article explores information regarding the development of multiple relationships (where several roles exist between a therapist and a client, such as when the client is also a student, friend, family member, employee, or business associate of the therapist) in rural communities while engaging in therapeutic practices. It looks at the delicacies of such unavoidable relationships and offers guidelines to support therapists who will inevitably be required to push boundaries while balancing codes of ethics. Due to the vagueness of the information that exists and the lack of training that most counsellors have when practising in rural communities, it is imperative that professional judgement is used on an individual basis to assess the extent to which multiple relationships should exist while counselling in a rural community, for the protection of all involved.

Controversy has surrounded boundary extensions regarding multiple relationships in rural communities. The inconsistency in views comes from the ambiguity of the ethical balancing of boundaries in multiple relationships. Furthermore, the code of ethics provides limited guidance to those seeking clarification when trying to balance boundaries in multiple relationships (Erickson, 2001). As a result, some people are left feeling that multiple relationships do more harm than good and should be avoided, while others feel that pushing the ethical boundaries in multiple relationships may be beneficial to the therapeutic process.

Ultimately, clients need to be assessed on an individual basis, and the uniqueness of each case must be considered when delving into multiple relationships with clients. Of utmost importance, however, is the therapeutic professional judgement when considering what is in the best interest of the client, and when determining the extent to which boundaries can be pushed.

When considering the decisions that counsellors have to make while maintaining ethical codes when practising in rural communities, this article explores the nature of multiple relationships in rural communities, what constitutes the development of multiple relationships in rural communities, boundary extensions and strategies in dealing with them, and the risks and benefits of participating in multiple relationships in a therapeutic environment.

The Development of Multiple Relationships in Rural Communities

Many circumstances can engender multiple relationships in conjunction with the therapeutic process created when practising in a rural community. Even when every effort has been made to avoid such situations, extended relationships tend to be inevitable in such an environment. As a result, multiple relationships must be conducted with the best interest of the client in mind when they are established (CPA 2000).

In rural communities, unless the counsellor leads a solitary life, interactions outside the therapeutic relationship are fated to happen. Chance meetings when one is shopping, exercising, and dining out, and more anticipated meetings such as memberships to the same organizations and associations such as church and school are inevitable. Beyond these are the business relationships and friendships that form in professional and social environments in rural communities with clients and counsellors (Zur, 2015). Regardless, the scarcity of available professional resources makes it essential that therapeutic services are provided to the residents in some way even when multiple relationships develop (Halverson & Brownlee, 2010). Therefore, when assessing what is in the best interest of each client, his/her vulnerabilities must be considered, including the context of the therapy and the intimacy of the extended interactions

with the therapist. These considerations will help to determine the overall harm and benefits that developing multiple relationships have regarding the best interest of the client (Gonyea, Wright, & Earl-Kulkosky, 2012).

Context of the Therapy

Many factors need to be considered when developing multiple relationships. The complexity and severity of the presenting issue, along with the treatment plan to complement it, are essential to the positive development of dual relationships (Zur, 2015). A person with depression may present different issues than a client with a personality disorder. Both could impact the therapeutic process in different ways if overlapping relationships develop (Schank, 1998). The client's values, beliefs, and interests are also important information, especially when they do not fall in line with the counsellor's. Additionally, the duration and intensity of the therapeutic process may affect ongoing external interaction. Furthermore, the experience of the counsellor to feel competent that he/she can manage numerous relationships without violating boundaries and without causing harm to the client is crucial. Staying informed in these areas will help to determine whether extended relationships are an option when combined with the therapeutic service. Considerations of these issues may determine whether the counsellor can manage a therapeutic relationship with specific clients. In rural communities, however, there is often no choice but to proceed with services as necessary (Schank, 1998).

Intimacy of the Relationship

The extent to which intimate relationships are formed in rural communities varies from case to case. Intense trusting relationships, from years of friendship to casual newly developed associations through community interactions, may exist (Zur 2015). Formal services, services provided by the client or the counsellor's family, other connections with the immediate family, and memberships in associations and organizations (to name a few) are situations wherein extended relationships emerge and make the therapeutic process more complex (Truscott & Crook, 2005). Older versions of the code of ethics have been revised to allow for non-sexual relationships to exist where they are unavoidable and beneficial to the client (Herman & Robinson-Kurpius, 2006; Sheppard & Schulz, 2007). This accommodates many forms of extended relationships.

In some cases, it is possible that multiple relationships can lead to role confusion, which could negatively affect the therapeutic process. If parental type roles are developed through transference, for example, unrealistic expectations may be developed. If these expectations are not met, the client may form resentments toward the therapist from the confusion that the extended relationship has created (Truscott & Crook, 2005). In the event that the counsellor's actions are unconsciously self-gratifying, such as in the urge to extend boundaries by rescuing children who come from neglectful abusive home environments, much thought has to be given to the rule of abstinence (whereby the focus should be on the patient's problems and immediate decisions should not be made that may seem beneficial to not only the patient, but the counsellor as well) (Reynolds Welfel, 2016). Even though this may be beneficial to the client, it may be more gratifying to the counsellor by fulfilling his/her vision of rescuing everyone. Such actions could lead to counsellor burnout because of the numerous cases that fall into this category when nonprofessional relationships exist. When a counsellor feels the need to do everything he/she can to help the client, there may be too much flexibility in the extension of boundaries. Dissonance between personal and professional values must be kept in check by evaluating the situation with colleagues or looking for precedents when temptations to save clients occur in multiple in these environments. Counsellors in rural communities are under constant scrutiny, and balancing boundaries must be handled with care when they may be viewed as self-gratifying (Catalano, 1997).

Boundary Extensions and Strategies in Multiple Relationships

When guidelines in counselling are pushed past the norms of traditional practice, boundaries are considered to be crossed. These could include activities outside of and within the clinic, and are often connected more so to certain therapeutic practices (Zur 2015). It is up to the professional judgement of the counsellor to determine whether crossing boundaries is integral to that therapeutic practice or will cause harm to the client (Reynolds Welfel, 2016).

Activities In and Out of the Office

Forming relationships with clients outside of the clinic indicates that boundaries are being crossed. Dining with an anorexic patient or flying with a person who is afraid to fly, with the intentions of showing support, are acceptable extensions of boundaries. These extensions may be associated with cognitive behavioural and humanistic therapeutic practices (Zur, 2015). Boundary extensions within the clinic, such as non-sexual hugs, gift giving and self-disclosure, are also acceptable when done in the best interest of the client (Zur, 2015).

Professional Judgement

When crossing boundaries, the counsellor should consider factors such as the history of the client – past trauma, the presenting problem, personality, values, beliefs, and culture – in order to ensure that these activities are completed with the best interest of the client in mind (Zur, 2015). It is also important to consider where the motivation and intention is coming from. If one's motivation is positive, then it most likely will reflect a positive regard for others and have their best interest at hand. However if it is negative, it will most likely reflect fear for oneself, which should send off red flags and help the counsellor to determine whether he/she is acting with good judgement (Lehr & Sumarah, 2004). Additionally, the experience the therapist has an important role in considering to what extent boundaries should be crossed without harming the client (Zur, 2015). More importantly, however, the decisions being made should not solely lie on the shoulders of the counsellor. Moreover, interpersonal interactions should take place whereby the counsellor seeks guidance from experts and also consults the patient, gaining consensus from all involved. The truth shall emerge consensually rather than with what an individual may feel is a common sense answer to the problem (Lehr & Sumarah, 2004). If one is purely extending boundaries in the best interest of the client, one is honouring the duty to neutrality and these extensions are acceptable (Reynolds Welfel, 2016).

Strategies

Once a therapeutic process that involves multiple relationships is established, many strategies can be incorporated to ensure that ethical practices are being honoured. Following decision-making models through self-evaluations, empowering the client, and creating personal and professional strategies are all essential when managing multiple relationships in rural communities.

Decision-Making Process

Establishing and following a decision-making list, in order to determine whether the development of dual relationships should be established, is crucial to ensure that the therapeutic process will take place for the greater good of all involved. Questions should be considered concerning the necessity of the extended relationship, the risks and benefits that may occur, whether the therapy will be jeopardized, the intimacy of the extended relationships, and the perceptions by others (Truscott & Crook, 2005).

When deciding whether this dual relationship is ethical, a number of steps can be taken:

- Identifying the multiple roles that are at play and what problems they may present. Once this is determined, seeking legal advice may be helpful.
- Applying the code of ethics to look at any standards that may already exist.
- Deciding which moral principles apply to the dilemma and then reviewing related literature and seeking advice from colleagues.
- Considering every course of action and seeking advice about which would be the safest and the least risk to cause harm, while considering the consequences and implications for all involved parties. The most undesirable choice should be eliminated, such as recommending another therapist when no others exist in that area.
- Assessing one's decisions and determining whether one would repeat this action or recommend it to others. If not, the counsellor may have to re-evaluate and start back at square one before putting his/her decision into action.
- Implementing the plan of action (taking on the client or not) and evaluating as the relationship develops. (Foster-Miller & Thomas, 1996)

This guide can help the counsellor determine whether dual relationships will be beneficial and possible in the therapeutic process.

Empowering

Empowering the client to make informed decisions comes from the practice of informed consent when therapy is in its initial stage. Discussing the complexity of multiple relationships in rural communities is crucial to the client's understanding of its possible implications (Reynolds Welfel, 2016; Gonyea et al., 2012). More specifically, the visibility of the counselling services that a client pursues in a rural community makes it possible for inevitable awareness to the community of the client's need for therapy (Reynolds Welfel, 2016). Additionally, as various interactions develop between the counsellor and the client, ongoing discussions regarding the impact that the therapist and the client experience must take place at the beginning of each therapeutic session. Furthermore, working collaboratively with the client ensures his/her awareness and participation in the discussion going forward after boundary extensions have occurred. From this process, the client has the opportunity to disclose any change in his/her confidence in the therapeutic relationship that may develop (Reynolds Welfel, 2016). If there comes a point when the counsellor or client feels that confidence or trust had been broken or lost, or potential harm to the client is perceived, termination of therapy in a caring and sensitive way may be necessary. In such an event, ongoing support should be offered until other resources are available (Erickson, 2001). Additionally, if the relationship becomes too intimate, it may become difficult for the counsellor to be objective and neutral. If balancing boundaries in such cases becomes too complex, the therapeutic relationship or the extended relationships should cease (Catalano, 1997). Ultimately, if the counsellor has the client's wellness in mind and all steps are taken to empower the client, there should be no question that the multiple relationships formed will positively contribute to the therapeutic process that is established.

Personal and Professional Strategies

When working in rural communities, the toll can be very hard on the counsellor. To elevate some of the stress associated with the sense of living in a fish bowl and being scrutinized by the counsellor's every action, counsellors can consider moving outside the community they work in (Endacott et al., 2006). This would help to avoid chance encounters with clients while shopping, etc. Additionally, attending fewer social events or activities can help to avoid uncomfortable interactions with clients. Sending one's spouse shopping or to parent-teacher meetings could be

options. These decisions, however, can come with certain implications which are discussed in the next section of this article.

Under professional circumstances, where it is possible, clients can be referred to other therapists if the counsellor is not comfortable with pushing the therapeutic boundaries when multiple relationships exist. If this is impossible, the dynamics of the need for therapy, the degree of the extended relationships, and the length of the involvement should be considered (Endacott et al., 2006). This information is crucial in deciding whether a therapeutic relationship is possible. Additionally, educating oneself with the intricacies of the code of ethics and using one's professional judgement keeps the counsellor informed regarding the extent with which he/she can push boundaries.

When it is determined that multiple relationships throughout the therapeutic process can be pursued, informed consent, documentation in records (including the benefits to the client supervision by superiors), and consultations with colleagues must be practised (Herman & Robinson-Kurpius, 2006; Reynolds Welfel, 2016). During this process, it is beneficial to share any knowledge regarding multiple relationships on issues of boundary extensions, so that violations will not occur (Sheppard & Schulz, 2007). This ensures that the counsellor is honouring the ethical codes, and that there is evidence to present on behalf of the counsellor when proof is needed. These strategies will help to guide and promote successful practices when dealing with the complexity of multiple relationships in rural communities.

Risks and Benefits of Multiple Relationships in Rural Communities

It is up to each counsellor to determine whether the risks outweigh the benefits when developing multiple relationships in rural communities. Each case is unique and must be assessed independently. Ultimately, anonymity, confidentiality access to other resources, the client pool, and outside counselling services have to be considered to determine whether therapeutic services should proceed.

Anonymity

Counselling in rural communities is essentially like living in a fish bowl. This can be difficult for counsellors to manage, since they are subject to public scrutiny regarding every move they make (Reynolds Welfel, 2016). They must therefore balance the extent to which they participate in community events and social interactions. The absence of engagement in the community, which leads to multiple relationships, results in isolation and unrealistic positions of power by the counsellor – which can lead to exploitation of the client (Endacott et al., 2006; Zur, 2015). The counsellor may feel that anonymity is essential for his/her personal health and protection; however, the community may view this in a different light.

Research suggests that when a counsellor endeavors to maintain anonymity in a rural community it is viewed as distancing by the residents and can be resented (Truscott & Crook, 2005). However, it can become an advantage to counsellors who are from a rural community and can rely on their experience to feel comfortable with forming dual relationships. Furthermore, they feel that their therapeutic services are enhanced when they involve extended relationships. Additionally, some counsellors feel that the more information they have about the client (which comes from their multiple relationships), the more effective the therapeutic relationship is (Halverson, & Brownlee, 2010). Some also feel that it is the counsellor's responsibility to the client and the rural community to be in and contribute to the community (Halverson, & Brownlee, 2010). Furthermore, a mutual trust is developed between the residents and the counsellor when the counsellor invests in the community. Moreover, the counsellors are seen in a more humanistic way and trust is developed when they interact with the residents they live amongst (Endacott et al., 2006). The need for anonymity under these circumstances is

eased, but balance is still necessary in order to maintain objectivity and prevent counsellor burnout (Halverson & Brownlee, 2010).

Confidentiality

The concerns with confidentiality become much more complex when they involve multiple relationships in rural communities. Breaches in the code of ethics may occur more often due to the visibility whereby clients are easily identified and stigma is an issue. Even in the most casual discussion, community members may misinterpret and construe details regarding clients (Schank, 1998). Under these circumstances, there is little one can do (Endacott et al., 2006).

Access to Resources

In a rural community, there are many limitations to the services that are available (Reynolds Welfel, 2016). When counsellors consider the circumstances in which they will accept referrals for clients, attention must be given to the pool of clients they are pulling from, what other services are available and the desires of the residents. Furthermore, residents in rural communities have a unique set of needs that require flexibility and adaptations by the counsellor. Consequently, the competency of the counsellors can come into question as they do the best they can to meet the needs of a diverse set of issues (Schank, 1998). The views on outside counselling services and clients' preferences must be considered when multiple relationships in rural communities are established in a therapeutic setting.

Client Pool

A counsellor's income relies partly on the number of clients that he/she serves (Reynolds Welfel, 2016). Turning away clients can cause undue financial stress for the therapist. Therefore, the counsellor is obliged to consider the personal good of the client and not accept cases solely based on financial needs, in order to prevent self-gratification. In this situation, if the fiduciary interest does not exist and the duty to abstain from promoting self-interest is not adhered to, then the therapeutic relationship should cease (Reynolds Welfel, 2016).

Outside Counselling Services

When counsellors choose to decline client referrals due to multiple relationship concerns, there may be few other therapeutic options for the client. Furthermore, the cost and inconvenience of accessing outside services may be problematic (Schank, 1998). Clients may not want (or not have the means) to travel for services that are many miles away from their home communities (Erickson, 2001). Furthermore, the clients may have developed trust in the counsellors in their home communities from other associations they may have, and may seek them out based on this comfort (Reynolds Welfel, 2016). Additionally, clients tend to be attracted to counsellors with similar interests, values, and culture. They get a good sense of this by observing the associations and contributions that counsellors make in the rural community (Gonyea et al., 2014). Moreover, refusal to provide service to them may cause them to feel rejected and offended (Reynolds Welfel, 2016). Also, potential clients often do not trust counsellors from outside the community and therefore choose not to obtain help from them. (Reynolds Welfel, 2016). Considering these circumstances, the home community's counsellor may be only option for the client.

There are also limitations for counsellors who practise in rural communities. Consultation and supervision are crucial in these environments, given that the boundaries are always pushed beyond the norms. Unfortunately, these resources may not be available to the counsellor, who may be left alone to make important decisions that he/she be unsure of (Schank, 1998).

Conclusion

Developing multiple relationships in rural communities in conjunction with a therapeutic practice can be complex and risky. Balancing ethical boundaries while protecting vulnerable clients is a delicate undertaking. Given counsellors' limited training, and the vague guidelines that codes of ethics provide regarding multiple relationships, counsellors must remain well informed. It is left to the counsellor's professional judgement, honesty, and benevolence to make ethical decisions regarding multiple relationship and boundary extensions. In this atmosphere of uncertainty, if there is any doubt as to what extent boundaries can be pushed, following guidelines and strategies, and simply being human, should lead the counsellor in the right direction regarding the individual wellness of the client while adhering to ethical standards.

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About the Author

Between raising three boys and working as a high school educator, Patricia Goodine is finding the time to further her education in the guidance and counselling master's program at BU. She hopes to practise in this field in the future and is using what she learns with her current classes.