A collection of symbolic objects is arranged on the left side of the slide. At the top left is a portion of a chessboard with several pieces. Below it is a blue ribbon with a circular emblem. To the right of the ribbon is a silver star-shaped medal with a central emblem. Below the ribbon is another silver star-shaped medal with a central emblem. At the bottom left is a circular compass. In the center, a pair of glasses with thin frames and a long bridge is positioned diagonally. The background is a light, textured surface.

Ethical and Boundary Issues in Addiction Treatment

William L. White
Chestnut Health
Systems



Introduction

- ◆ Background
- ◆ Boundaries of Competence



Presentation Goals

- ◆ Explore Ethical Ambiguities and Complexities
- ◆ Heighten Ethical/Boundary Sensitivities
- ◆ Enhance Ethical/Boundary Decision-making Skills within Service Relationships



Presentation Resources

- ◆ Handouts
- ◆ White-Popovits Text: Critical Incidents: Ethical Issues in The Prevention and Treatment of Addiction



Frameworks of Evaluation

- ◆ Legal/Illegal--The problem of legal reductionism
 - Exclusive focus on rules and legalities may actually decrease ethical sensitivity/practice
- ◆ Moral/Immoral
 - The problem of cultural/religious relativity



Frameworks of Evaluation

- ◆ Professionally Appropriate/Inappropriate
- ◆ Culturally Appropriate/Inappropriate
- ◆ Ethical/Unethical
 - Fiduciary
 - Iatrogenic



Ethics and Law

- ◆ Ethical and legal
- ◆ Ethical and illegal
- ◆ Ethical and alegal
- ◆ Unethical and legal
- ◆ Unethical and illegal
- ◆ Unethical and alegal



Role Transitions

- ◆ Service Consumers as Volunteers, Staff Members, Board Members
- ◆ Recovery Coaches/Mentors/Support Specialists
- ◆ Potential Ethical Issues in Role Transitions
 - Negligent hiring
 - Inadequate Orientation, Training, & Supervision
 - Performance Standards
 - Role Ambiguity/Role Conflict



From Treatment to Recovery Management

Ethical Implications

- Nature of Service Relationship
- Duration of Service Relationship
- Unchartered Ethical Territory



A Model of Ethical Decision-making

1. Who will benefit? Who will be or could be harmed?
2. Are there any universal or cultural-specific values that apply to this situation?
3. What laws, policies, guidelines or historical practices exist that apply to this situation?



Critical Incident Worksheet

Critical Incident # _____

I. Whose interests are involved; who can be harmed?

Interests and Vulnerabilities	Significant	Moderate	Minimal / None
Client / Family			
Individual Worker			
Agency			
Professional Field			
Community / Public Safety			



Universal Values (Sample)

- ◆ Autonomy (enhance freedom)
- ◆ Beneficence (help others)
- ◆ Nonmaleficence (don't hurt anyone)
- ◆ Fidelity (keep your promises)
- ◆ Discretion (respect privacy)
- ◆ Loyalty (don't abandon)
- ◆ Justice (be fair)



Cultural Values (Sample)

- ◆ Umoja (Unity)
- ◆ Kujichagulia (Self-Determination)
- ◆ Ujima (Collective Work and Responsibility)
- ◆ Ujamma (Cooperative Economics)
- ◆ Nia (Purpose)
- ◆ Kuumba (Creativity)
- ◆ Imani (Faith) --Maulana Karenga, 1988



Arenas of Ethical/Unethical Conduct

- ◆ Personal Conduct
- ◆ Conduct in Business Practices
- ◆ Professional Conduct
- ◆ Conduct in Relationship with Service Consumers
- ◆ Conduct in Professional Peer Relationships
- ◆ Conduct related to Threats to Public Safety



Personal Conduct

- ◆ Personal Privacy versus Professional Duties and Obligations
- ◆ Defining “Nexus”



Personal Conduct

- ◆ Most troublesome areas
 - ATOD use
 - Violating community standards of law/morality
 - Use of knowledge from professional role for personal gain
 - Self-care
 - Lapse/Relapse



Business Practices

- ◆ Historical Definition of Ethics as Clinical Ethics
- ◆ Private addiction treatment in the 1890s and 1990s: Two Case Studies on the Global Consequences of Ethical Misconduct



Professional Conduct

- ◆ Ethical Issues in
 - Intra-professional Conduct
 - Inter-professional Conduct
 - Trans-professional Conduct



Professional Conduct

- ◆ Most Troublesome Areas
 - Representation of Credentials
 - Boundaries of Competence
 - Secondary Employment
 - Proprietary Information/Products
 - Public Statements
 - Personal Appearance



Conduct Related to Public Safety

- ◆ What is our legal responsibility? versus What is our ethical responsibility?
- ◆ Troublesome areas:
 - Reports of physical/sexual abuse (Duty to Report)
 - Threats of violence (Duty to Warn)
 - Impaired workers in safety-sensitive positions (Duty to Intervene)



Ethical Issues in Special Roles

- ◆ Prevention/Education
- ◆ Early Intervention (EAP. SAP)
- ◆ Crisis Intervention
- ◆ Outreach / Case Management
- ◆ Training
- ◆ Community Consultation
- ◆ Research
- ◆ Staff involved in Residential Supervision, Transportation, and Recreation
- ◆ MIS staff



Conduct in Relationships with Service Consumers

- ◆ Definition of Client
- ◆ Coerced Treatment
- ◆ Informed Consent
- ◆ Labeling: The Ethics of Diagnosis



Definition of “Client”

- ◆ **Once a Client, Always a Client**
 - Based on view that professional helpers never lose their power to exploit this relationship
 - Criticized as paternalistic
- ◆ **Time Zone of Greatest Vulnerability**
 - Time standards in ethics/legal standards often use 2-5 years from point of last service contact



Conduct in Relationships with Service Consumers

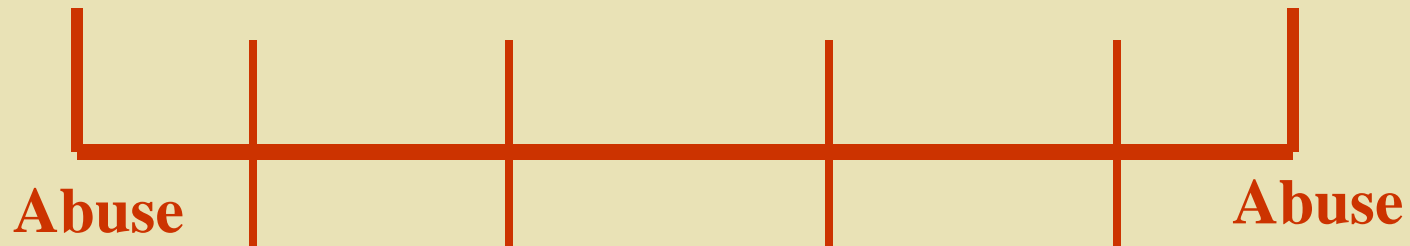
- ◆ Confidentiality
- ◆ Respect for Religious/Political Beliefs
- ◆ Autonomy versus Paternalism
- ◆ Experimental/invasive Treatment Techniques
- ◆ Documentation
- ◆ Responsibility to Terminate

Boundary

Boundary Issues: Decisions that increase or decrease intimacy in the service relationship.

Detachment

Enmeshment





Functions of Boundaries

- ◆ Protect the consumer and service provider physically/emotionally/legally
- ◆ Protect the agency and the profession
- ◆ Provide structure and consistency within which therapeutic work can occur
- ◆ Minimize misinterpretations and misunderstandings
- ◆ Maintain focus on the purpose of the relationship



Boundary Issues in Context

- ◆ Who (Nature of Client)
 - Chronological Age, Developmental Age, Gender, Ethnicity, Culture, Degree of Incapacitation, etc.
- ◆ Who (Nature of Service Provider)
 - Age, Gender, Role, etc.



Boundary Issues in Context

- ◆ When (time of day, timing within relationship)
- ◆ Where (geographical/cultural space)
- ◆ What (actions)
- ◆ Why (purpose/rationale)



Boundary Issues Cultural Context

- ◆ Relationship entry/exit
- ◆ Communication
- ◆ Touch
- ◆ Time and place
- ◆ Dual relationships



Boundary Issues: Organizational Context

- ◆ Organizational Boundary Management
 - Worker Depletion in Enmeshed Organizational Families
 - Worker Isolation in Disengaged Organizational Families
- ◆ Role Stressors
 - Role Overload, Role Ambiguity, Role-person Mismatch, Role Integrity Conflict, Inadequate Role Feedback, Role Deprivation

Boundary Zones of Safety/Vulnerability

Zone of Safety

**Always
Okay**

Zone of Vulnerability

**Sometimes
Okay**

**Never
Okay**

Zone of Abuse





Milgrom's Boundaries in Professional Relationships

- ◆ Always Okay
- ◆ Sometimes Okay
- ◆ Never Okay
- ◆ (See Checklist)



Boundary Issues

- ◆ Self-Disclosure
- ◆ Casual Encounters
- ◆ Therapeutic Bias
- ◆ Social Relationships
- ◆ Mutual Aid Relationships
- ◆ Financial Transactions
- ◆ Gifts



Self-Disclosure

- ◆ Is it clinically effective/ineffective?
- ◆ Is it ethical/unethical?
- ◆ Guidelines
 - Purpose
 - Timing
 - Duration
 - Intensity
 - Effect



Boundary Issues

- ◆ Pre-existing Relationships
 - Treatment of Family Members
 - Other Sources of Therapeutic Bias
- ◆ Verbal Intimacy
- ◆ Physical Touch
- ◆ Sexual Intimacy



Warning Signs of Disengagement

- ◆ Objectification of service consumers
- ◆ High rates of missed appointments/drop-outs
- ◆ Increased conflict with (complaints from) service consumers
- ◆ Physical disengagement, e.g., decreased face-to-face contact



Warning Signs of Enmeshment

- ◆ Escalation of physical/emotional contact (time)
- ◆ Signs of possessiveness/dependence
- ◆ Isolation of consumer in conflict with service plan
- ◆ De-professionalization of place
- ◆ Tandem boundary excesses, e.g., self-disclosure, gifts, etc.
- ◆ Resistance to bring to supervision
- ◆ “Guru” status (See work on “therapeutic cults”)



Zone of Vulnerability Strategies

- ◆ Zone recognition
- ◆ Increased structure/support
 - Team service delivery
 - Peer supervision
 - Increased clinical supervision
 - Increased documentation
- ◆ Monitoring time in zone



Organizational Strategies for Elevating Ethical Conduct

- ◆ Standards Development
- ◆ Personnel Evaluation
- ◆ Critical Incident Review Training
- ◆ Clinical/Administrative Supervision & Modeling
- ◆ Ethics Committee
- ◆ Ethics Resources (Literature)
- ◆ Local Ethics Consultant