Semenoff, Carly A

2009

Ethics : dual relationships in experiential group therapy training

https://hdl.handle.net/10133/3065

Downloaded from OPUS, University of Lethbridge Research Repository
ETHICS: DUAL RELATIONSHIPS IN EXPERIENTIAL GROUP THERAPY TRAINING

CARLY A. SEMENOFF

B.A. (Psychology), University of Lethbridge, 2005

A Project
Submitted to the School of Graduate Studies
of the University of Lethbridge
in Partial Fulfillment of the
Requirements for the Degree

MASTER OF EDUCATION
(COUNSELLING PSYCHOLOGY)

FACULTY OF EDUCATION
LETHBRIDGE, ALBERTA

June 2009
This project is dedicated to my parents,

Bob and Janis Semenoff.

Without their self-sacrifice, unconditional love,

and ongoing support,

I would not be who I am,

and where I am today.
Abstract

The intent of this project is to educate the reader on the implications of dual relationships in experiential group therapy training and provide an informed consent template to promote ethical practice. Dual relationships in experiential group therapy training is a controversial topic as there are no standards available for best practice. However, literature is available that discusses the ethics of experiential group therapy training and ways in which dual relationships can be managed or reduced. The questions that are answered in this project include: what are dual relationships in experiential group therapy training, what are the risks, and what are some alternatives to prevent dual relationships. A consent form for students who are required to take a group therapy course with an experiential component, and an orientation guide to the informed consent process between a student and professor will be provided.
Acknowledgments

I would like to thank Dr. Dawn McBride for her mentorship and gracious help on overseeing this project. I would also like to thank my best friend, and life partner, Nathan Sharpe for supporting me in many ways throughout my master’s degree.
# Table of Contents

Dedication ............................................................................................................. iii

Abstract ............................................................................................................... iv

Acknowledgments ............................................................................................... v

Table of Contents ................................................................................................. vi

Chapter One: Introduction .................................................................................. 1

Focus of this Project ............................................................................................. 1

Why this Project ................................................................................................ 2

Dual Relationships in Experiential Group Therapy Training ............................ 2

  Julie the Student ............................................................................................... 3

  Jeannie the Professor ....................................................................................... 4

Summary .............................................................................................................. 4

Appendix ............................................................................................................. 4

Personal Interest ................................................................................................. 5

Summary .............................................................................................................. 6

Chapter Two: Methodology .............................................................................. 7

Database Search for the Literature Review ..................................................... 7

Other Search Methods for the Literature Review ........................................... 7

Methods for the Orientation to the Informed Consent Process ..................... 7

Chapter Three: Literature Review on Dual Relationships in Experiential Group

Therapy Training ............................................................................................... 9

  Introduction .................................................................................................. 9

  Defining Dual Relationships ....................................................................... 9
References...........................................................................................................28
Appendix.............................................................................................................30
Chapter One: Introduction

Dual relationships in experiential group therapy training are an important area that needs to be explored within an ethical framework because of its controversial nature. This project seeks to explore this topic from an ethical standpoint, to flush out the implications of such a practice, and to translate research into practice by providing an orientation to the informed consent process between a professor and a student as well as a sample consent form for students in a university group therapy training course. It is assumed that the reader has graduate level training in psychological ethics and understands the Canadian Code of Ethics for Psychologists (CPA, 2000).

This project is divided into four chapters: Introduction, Methodology, Literature Review, and Limitations, Strengths, and Conclusions. The Appendix includes an orientation to the informed consent process between a professor and a student and a sample consent form for group therapy training.

The purpose of this chapter is to outline the rest of the project. This chapter will clarify the focus of this project, describe dual relationships in experiential group therapy training, and explain this author’s personal interest in the topic.

Focus of this Project

Chapter Three contains a literature review on dual relationships in experiential group therapy training, which is the primary focus of this project. There is extensive literature focusing on dual relationships between a client and his or her therapist, but limited information focusing on dual relationships between professors and students in group therapy training, or between professors and students in general. Because of the scarcity of published data, it must be hypothesized that the issues found in dual relationships between a client and therapist may be found in the relationship between a
professor and student. The limitations of this hypothesis will be examined in Chapter Four.

This writer has chosen to use these terms to refer to the following:

a) Professor- a university faculty member or instructor who teaches a graduate level counselling psychology group therapy course. It is assumed, for this project, that the role of the professor includes leading experiential group therapy in the classroom with his or her students, as well as evaluating the students on their participation and performance.

b) Student- a person who is enrolled in a graduate level counselling psychology group therapy training course. In the group therapy training, the student takes the role of a client and is concurrently evaluated by the professor who leads the group therapy session.

*Why this Project?*

Even though there are codes and guidelines in place, professors may still struggle with what it really means to operate ethically in their practices. Professors may be faced with mixed messages from their colleagues, from different regulatory codes of ethics, and even from within the same code of ethics. Ethical practice is much more complex than just doing what feels right, what is written in a code, or following the advice of colleagues. This project explores the dilemma of having an ethical code without the supporting literature that discusses what really happens in practice and what to do about issues concerning dual relationships.

*Dual Relationships in Experiential Group Therapy Training*

As stated previously, much has been written about dual relationships between therapists and their clients. However, there is a lack of literature that focuses on dual
relationships in group therapy training programs with an experiential component. The norm is that students participate in experiential groups in class without being informed about the dual relationships that may develop. There is a lack of informed consent procedures in place to protect students.

There are numerous risks in having students participate in group therapy with their classmates. This is especially true when the group is facilitated by the same professor who is evaluating student performance. Since the student is in group therapy and being evaluated by the same professor, this relationship between student and professor is regarded as a dual relationship. This will be discussed in depth in Chapter Three. In this section, two fictitious case examples, from the points of view of both a student and a professor, illustrate experiential group therapy training within a university context.

Julie the Student

Julie participated in an experiential group that was required by her group therapy training course. This course was required in order to graduate with a M.Ed. in counselling psychology. Julie was not informed that she had to participate in an experiential group when she was accepted into the program. Julie did not like participating in the experiential group with her classmates because she felt uncomfortable sharing personal information in front of her classmates and her professor. Julie felt as though her grade suffered because she did not disclose personal information in the experiential group. Julie spoke to her professor about her feelings, and was told that in order to be a competent group therapist she would need to have experiential training. Her only alternative was to leave the program. Julie felt as though she was not fully informed about the expectations
of the program. She wished that she had known she would have to disclose personal
information prior to entering the program.

Jeannie the Professor

Jeannie taught group therapy training for ten years. Jeannie knew it was important
that students receive experiential training in group therapy in order to be competent group
therapists. Jeannie always had her students participate in experiential groups in her class.
The students in her class practiced being clients in a group, while she facilitated the
process. Jeannie felt as though she had a dual role, being a facilitator and an evaluator to
her students, and found it hard to evaluate some of her students, especially the students
who participated less in group. However, Jeannie felt supported by the university in
teaching experiential groups, and never had any complaints from students about having to
participate. Jeannie knew that there was a controversy surrounding this teaching
approach, but she did not believe she was causing harm to her students. Jeannie thought
about some alternatives to an experiential group, but knew that the university did not
have the funding or resources to make this happen.

Summary

These two case examples may help the reader conceptualize what is meant by
dual relationships in group therapy training. In Chapter Three, there is a more in-depth
discussion of the controversy surrounding experiential group therapy training.

Appendix

This project has an Appendix that contains documents to translate ethical research
into ethical practice. The purpose of the consent form is to translate the concepts
discussed in Chapter Three into a template, which can be used by university programs
offering a group therapy training course.
The Appendix contains an orientation to the informed consent process between professors and their students, as well as a consent form for students to review before enrolling in a group therapy training course.

An orientation to the informed consent process is crucial, because it enables professors fully to inform students of their rights. Most supervisors do not receive training on how to supervise students ethically. This orientation to the informed consent process can be a helpful tool.

By having an in-depth discussion of dual relationships in experiential group therapy training, as well as an orientation to the informed consent process and an informed consent form, professors will be encouraged to reflect on ethical dilemmas that occur in the classroom. They will become more aware of possible implications of experiential group therapy training. It is also important for students to learn ethical conduct in relationships that have an inherent power differential, as they will be embarking on a similar relationship when they are counselling their future clients.

**Personal Interest**

Ethics is a fusion of the personal with the professional in the context of common sense guided by thorough decision-making. For a beginning therapist, ethics in counselling is dynamic and full of controversy. It is not a black and white, but rather, a grey issue. Ethics is subject to one’s personal worldview, morals, values, and beliefs. Ethical codes differ from person to person. This may be why the *Canadian Code of Ethics for Psychologists* (CPA, 2000) can be vague and unclear at times. The reason why I entered the counselling profession is that I cherish differences of thought and independent thinking. Since I find ethics to be a challenge, I decided to explore it further as the final project of my M.Ed. Counselling Psychology degree.
I chose to study dual relationships with a focus on group therapy training for my M.Ed. project. It was intriguing and motivating for me to learn about dual relationships in group training because of the small body of literature on this topic. I wanted to do an applied project so it would be of use to students and professors involved in group therapy training. I decided to complete a literature review that would be informative, and to develop an orientation to the informed consent process between professors and students.

In my view, providing an orientation to the informed consent process is one of the best ways to turn research on ethical codes into direct practice. I have come across many policy and procedures manuals that are unclear, disorganized, and that address what should be done in practice without clear guidelines. In this project, I sought to focus only on the informed consent section and make an orientation that was simple, yet clear and detailed enough to provide a framework for practice.

In conclusion, I know that no matter where this profession takes me, I will always need to be observant of ethical practice, and incorporate information taken from research, ethical codes, and the law in real practice. It is my hope that my project will be useful to new and experienced counselors.

**Summary**

This project seeks to provoke an awareness of the effects of dual relationships in experiential group therapy training, as well as provide an orientation to the informed consent process between a professor and a student that will bridge the gap between research and practice. It is important for students in counselling psychology to understand how they can be influenced by dual relationships, and how this directly applies to their future practices as therapists. The next chapter will focus on the methodology of this project.
Chapter Two: Methodology

This section will describe the methodology of the literature review as well as the orientation to the informed consent process. All of the information used in this project was obtained from academic journals and books. No human subject data was included in this project and the Canadian Code of Ethics for Psychologists (CPA, 2000) was followed.

Database Search for the Literature Review

The OVID and EBSCOhost databases at the University of Lethbridge were electronically searched using the following search terms: dual relationships, dual relationships and group training, dual relationships and group, group and counselling and teaching, multiple relationships and group, and dual relationships and group therapy. Only articles in English between the years 1901 to 2008 were included. Using this method, 10 relevant peer-reviewed, articles were found. Three relevant books were found at the University of Lethbridge library using the same search terms.

Other Search Methods for the Literature Review

Some information was collected using the same search terms and the web browser Google. This method identified pertinent chapters of books and was used to scan the reference sections of applicable journal articles.

Methods for the Orientation to the Informed Consent Process

The orientation to the informed consent process was a creative undertaking. The first step was to conceptualize what a policy and procedures manual contained, and look at numerous policy and procedures manuals from different agencies in Lethbridge, Alberta. By researching the content, formats, and language, it was possible to envision what an orientation to the informed consent process should contain. After the research
was completed, the information was divided into sections. Each section included purpose, policy, and procedures that are supported by the *Canadian Code of Ethics for Psychologists* (CPA, 2000), including relevant supporting academic information. The next chapter will focus on the literature review.
Chapter Three: Literature Review on Dual Relationships in Experiential Group Therapy Training

The research on dual relationships in experiential group therapy training and how this is related to dual relationships between professors and students is discussed in this section. The focus of the literature review is on dual relationships in group therapy training, and the risks and alternatives with respect to ethical dilemmas, resolutions, and their applicability to the Canadian Code of Ethics for Psychologists (CPA, 2000).

Introduction

Dual relationships in experiential group therapy training present a host of ethical dilemmas, which are discussed in the literature (Forester-Miller & Duncan, 1990; Goodrich, 2008; Kottler, 2004; Lloyd, 1990; Merta & Sisson, 1991). These researchers note some of the benefits, the risks, and the alternative approaches to group therapy training. Goodrich (2008) states that there is no clear consensus regarding what the best practice is in group therapy training.

There appears to be limited research on dual relationships in group therapy training. Most of the research dates from the late 1980’s and 1990’s. This chapter will define dual relationships in group therapy training, explore the risks to group therapy training, discuss the ethical dilemmas, and note alternative approaches.

Defining Dual Relationships

There is a plethora of research surrounding dual relationships in psychotherapy and counselling. According to Moleski and Kiselica (2005), “a dual or multiple relationship exists whenever a counsellor has other connections with a client, in addition, or in succession, to the counsellor client relationship” (p. 3). Corey, Corey and Callanan (2007) provide examples of a therapist counselling a relative, a friend, becoming friends...
with a client, engaging in sexual relations with a client, having a business relationship with a client, or lending money to a client, just to name a few. There are also specific standards of practice from the College of Alberta Psychologists (CAP, 2006, p. 5) regarding this matter. The CAP standards state that psychologists must not provide therapy to a client if there may be a conflict of interest such as "current or previous professional, familial, social, sexual, emotional, financial, supervisory, political, administrative, or legal relationship with the client or a relevant person associated with or related to the client" (CAP, 2006, p. 5). The standards are in place to protect the client, because therapists have an inherent imbalance of power that can decrease their objectivity, and subsequently disrupt the therapeutic relationship. This can result in harm to a client as well as ineffective treatment (Corey, Corey & Callanan, 2007).

Dual relationships in experiential group therapy training are similar to dual relationships between a client and counsellor, because there is a power differential (Sullivan & Ogloff, 1998). The dual relationship that occurs in experiential group therapy training is between the professor and student. The professor is often in the role of the facilitator of the group in which the student is participating, and in the dual role of evaluating the student. The student takes on the roles of a client and student, while the professor takes on the roles of a therapist and professor. There are many consequences of these dual relationships that can affect the student, who is the more vulnerable party. These will be discussed in the subsequent sections.

**Dual Relationships in Group Therapy Training**

The group therapy training context is unique in that the student, rather than the client, is the more vulnerable party. Donigian (1993) defines dual relationships in this context as “the multiple roles that counsellor educators may hold while teaching courses
that have an experiential component that requires students to engage in behaviors that lead to self-awareness” (p. 137). Dual relationships occur between professors and their students when the professor leads a group in which the student is participating, and when the professor is evaluating the student’s performance. Dual relationships can also occur between students, because the students may be in relationships with each other, as well as in a therapy group together (Romano, 1998). In this paper, however, the emphasis will be on dual relationships between students and professors within a group therapy course that uses experiential training.

**The Ethical Dilemma of Dual Relationships in Group Therapy Training**

The literature shows that there is an ethical dilemma in having dual relationships in group therapy training (Goodrich, 2008). Goodrich states, “There has been a conflict in the field of counselling about the most appropriate way that one can honor the professional standards and responsibilities of training effective group counsellors while avoiding the ethical dilemmas that could be created between teacher and student in the classroom” (p. 222). Although Goodrich is discussing American professional standards, it is also applicable to the *Canadian Code of Ethics for Psychologists* (CPA, 2000). Sections III.33 to III.35 state that dual relationships need to be avoided between students, and if they cannot be avoided, the individual needs to be fully informed of the conflict of interest, and the relationship should to be managed by involving a third party. In terms of group therapy training, this may mean employing a teaching assistant to facilitate demonstration groups in which the students become the clients.

Goodrich (2008) writes, “In the field of group work, educators have come to a consensus that it is necessary that students undergo an experiential module to assist in their preparation toward becoming an effective group leader” (p. 221). Merta and Sisson
(1991) state that the experiential model is needed to develop skills, awareness, and understanding, and to enable the student to be an effective group therapy leader. There is a difference in opinion as to whether the experiential module should be facilitated by the students’ professors, since this would result in dual relationships between students and professors.

In order to resolve the ethical dilemma of dual relationships in group therapy training, authors have proposed various solutions ranging from allowing dual relationships to adopting alternative experiential learning models. The subsequent section will examine the problems associated with experiential group therapy training.

**Problems with Experiential Group Therapy Training**

There are numerous problems for a professor engaging in a dual relationship with a student, just as there are in a dual relationship between a therapist and client, because of the direct power imbalance. Various researchers have pointed out how dual relationships occur between a student and a professor who are involved in experiential group therapy training.

**Boundary Blurring**

When a professor uses experiential activities that involve personal disclosure in group therapy training, Pepper (2007) refers to this dual relationship as "incestuous" (p. 14). This is because the professor is functioning as a therapist and professor, which blurs the relationship between the professor and student. This section will discuss how contact between a professor and student outside the group therapy training context can blur relationships.

Pepper (2007) writes about the boundary blurring that occurs between students who are in group therapy together. He observes that dual relationships often “can have
serious effects on transference, group process and on group members” (p. 14). Pepper states, “When group members are in social contact outside the group, the balance between reality and distortion is forever altered” because group members have personal information about each other learned in the group session (p. 15). Although Pepper is primarily writing about the relationships between students, his observations can be generalized to relationships between professors and students. There can be confusion in the relationship between the student and professor, when the professor switches roles from group facilitator to evaluator.

Boundary blurring can also occur in group therapy training when the professor has relationships with some students outside of the group and not with others (Pepper, 2007). For example, a student may also be the faculty member's research assistant, or the professor may be the student's thesis advisor. When students in the group therapy course are not part of the faculty member’s inner circle, they may feel unfairly treated. Furthermore, a student could be viewed as exhibiting transference towards the professor, when the behaviour may be a reaction to the dual relationship between the student and professor.

_Evaluation_

Evaluation, such as assigning grades and providing feedback, is an important topic when analyzing dual relationships in group therapy training, because it is a complicated and inherently subjective process on the part of the professor. Numerous authors have noticed the problem of trying to grade a student who is participating in a group. This is significant because a student may feel violated in terms of revealing personal information that may be used to increase or decrease a student’s grade on other course tasks. As a result, students may feel pressured to reveal more personal information
than they are comfortable in disclosing, and then feel fearful that the information may affect their grades (Forester-Miller & Duncan, 1990; Romano, 1998). Students may not feel comfortable sharing personal information, but may fear being given a lower grade if they do not; or they may fear that the nature of their personal disclosures will affect how they are viewed.

It is ironic that the dual relationships that can occur in this context, model the exact opposite of what the professor intends to teach. There may be a danger that goes much further than that which occurs at the training level, since a lax attitude regarding dual relationships may be implicitly suggested to the students.

These are important considerations for professors to keep in mind, because students can potentially be emotionally harmed if they feel pressured to share personal information, or feel judged on the nature of their disclosures. Lloyd (1990) states that if professors allow the personal information disclosed by students to affect their judgments, they are behaving unethically, because they are not being objective. According to Sullivan and Ogloff (1998), “The supervisor[s] has an obligation to all students to remain objective with respect to their professional judgment; this objectivity may be jeopardized by taking on additional roles that, in turn, blur the boundaries expected in supervisory relationships” (p. 230). This directly relates to group therapy training, since the professor is in a supervisory role, and through having dual relationships with a student, his or her objectivity may be impeded when it comes to evaluating the student’s work.

Power Imbalance

Sullivan and Ogloff (1998) acknowledge the power imbalance between a professor and student, which can be argued to be similar to that between a therapist and a client. The reason for this power imbalance is that a student is the more vulnerable party
as is a client in therapy. Professors hold more power because they determine whether a student passes a class. Sullivan and Ogloff state that the client cannot give voluntary consent to a dual relationship, because one party holds more power than the other does. In this type of relationship, the one with the less power is vulnerable to suggestions made by the person with more power. Therefore, to truly consent, consent must be given “voluntarily, knowingly, and intelligently” (Sullivan & Ogloff, 1998, p. 231). If students do not understand informed consent prior to the program, and therefore do not know what the expectations are in a group therapy training context, consent is not valid, because there may be perceived ramifications to the client if he or she does not agree to such a relationship (Sullivan & Ogloff, 1998).

Getting informed consent prior to enrollment in the program would solve the problem of students not understanding informed consent. This will be discussed in depth in the next section of this chapter. However, it is imperative to note that the student’s informed consent should be given prior to acceptance into the program, in order to be truly an informed consent. There are repercussions if students do not comply with the criteria for the group therapy class. Their grades or ability to graduate may be affected, particularly if they do not participate or if they drop out. The next section of this paper will address ways in which dual relationships can be managed in group therapy training.

Ways to Manage Dual Relationships in Group Therapy Training

Corey and Corey (2006) contend that when safeguards are in place to protect the student, experiential group training is valuable, because it can lead to a better understanding of group therapy and its dynamics. Informed consent regarding group therapy expectations should be obtained prior to the student being admitted to the
program (Merta & Sisson, 1991). The following section will discuss what the consent process should entail for students enrolling in a group therapy training program.

Consent Process

Corey, Corey, and Callanan (2007) describe informed consent as a process of informing a client, prior to therapy, of the benefits, risks, and alternatives to treatment, and of making sure that the client truly understands the limitations. It is apparent that the informed consent process between client and therapist is parallel to the informed consent process that should occur between a student and professor. Pierce and Baldwin (1990) state that, since the student is in a role of a client, he or she must be protected in the same way that a client would be, in regards to autonomy, beneficence, nonmalfeasance and justice; likewise, Donigian (1993) notes that a student's “right to privacy needs to be protected” (p. 137). Corey and Corey (2006) stress the importance of obtaining from the student, a full, explicit, informed consent regarding the risks and benefits of experiential training. Corey, Corey and Callanan (2007) note that in regard to informed consent between a therapist and client, “Informed consent involves disclosure by the practitioner of the necessary information clients will need to make an educated and free decision of whether or not to become part of a therapeutic relationship” (p. 158).

Topics that should be included in a consent form that students sign prior to enrolling in a group therapy course, or prior to student acceptance into the program, are drawn from the works of Pierce and Baldwin (1990). “The requirement for participation and the clarification of what participation is expected” prior to being admitted into the course and/or program is essential (p. 152). Furthermore, students at this time should be informed in writing of the rationale for participation in experiential activities.
“Individuals need to be apprised of expectations of group participation and the relationship between self-disclosing and interactive leadership styles” (p. 152). Students need to know what appropriate self-disclosure is, in order to protect their privacy. Pierce and Baldwin (1990) note that students must be clear on what self-disclosure entails. They suggest making students aware that they should not be disclosing deep secrets, but rather sharing reactions with the group about here and now experiences, and discussing personal experiences that are real, but not severely anxiety provoking.

Pierce and Baldwin (1990) refer to ways the group leader can respect the students' privacy. These include how questions are asked in-group, assessment and grading, and modeling. The latter steps will be discussed in subsequent sections.

The Appendix contains a sample informed consent form for students voluntarily to sign prior to acceptance into an M.Ed Counselling Psychology group therapy course or program. The next section will discuss what group therapy training should entail, as well as alternative models to eliminate dual relationships in group therapy training.

**Experiential Group Therapy Training Precautions**

In the literature, there are authors (Kottler, 2004; Pierce & Baldwin, 1990) who argue for a more traditional group therapy training program, meaning that experiential group therapy is a focus of the course. There are also those (Fall & Levitov, 2002; Romano, 1998) who present alternative models for group therapy training to reduce the risks of dual relationships in group therapy training. Each perspective will be outlined below.

**Experiential Group Therapy Training**

Kottler (2004) suggests that there are more positive aspects to experiential group therapy training than there are risks. He argues that in order to be a group therapist, one
needs to have experienced being a group member. He acknowledges that it would be
easier for the student not to partake in experiential group training, but that “easier is not
better” (p. 52). He believes that potential dual relationships are not inherently bad, and
that when the instructor is not exploitative, or taking advantage of the student, it can be
an enriching experience for the student. In fact, Kottler notes that dual relationships “can
add richness and complexity to life,” and that in different cultures “group leaders are
expected to have multidimensional relationships in order to intervene in culturally
appropriate ways” (p. 52). Kottler bases this view on the numerous years of experience he
has had in teaching group work from an experiential viewpoint.

Pierce and Baldwin (1990) propose a model for experiential group therapy
training that is in the “here and now,” as opposed to the “then and there” (p. 151). Pierce
and Baldwin acknowledge that their model is not free from ethical flaws, and state that
their intent is to describe a teaching process that allows a student to be part of an
experiential group. The following paragraphs will summarize components of their model.

Pierce and Baldwin (1990) argue that after a student has been fully informed of
the ethical risks of engaging in group therapy training, and what appropriate self-
disclosure entails (see previous section and the Appendix), professors need to be mindful
of the way they facilitate the experiential group. The authors state that professors need to
“be sensitive in the specific kinds of probing they do about student responses” (p. 153)
when conducting an experiential activity. Professors should have a clear intent when
probing the student for more information about personal topics discussed in group
therapy. At all times, professors should be sensitive to students' privacy (Pierce &
Baldwin, 1990). Details about how to inform students about privacy and confidentiality
are outlined in the Appendix.
Pierce and Baldwin (1990) stress that in order for an experiential training group to be run ethically, students must be constantly aware of how and when they are self-disclosing. The authors suggest that their “Self-Disclosure Scale” be used to monitor self-disclosure. The Self-Disclosure Scale is described as being on a continuum of 1 to 10, where 1 would represent no self-disclosure, and 10 would represent inappropriate self-disclosure. The authors suggest that appropriate self-disclosure would be between a 4 and 7. It is suggested that professors and students monitor each student’s self-disclosure, and give appropriate feedback to each student. In addition, the self-disclosure scale could be used formally to evaluate the student on his or her level of participation in the group. By using the scale, the ethical dilemma of evaluating students and protecting students’ privacy can be more appropriately managed. The next section will discuss alternative models of group therapy training.

Alternative Models of Group Therapy Training

The intent of having alternative models for experiential group therapy training is to minimize the negative impact that can occur when a professor holds the dual roles of being the group therapist and evaluator. The primary way to reduce these dual relationships in group therapy training, as noted by Goodrich (2008), is to “separate the group members’ personal experience from the experiential component, focusing instead on skill acquisition” (p. 225). This means working on group counselling skills, but having non-personal or non-sensitive self-disclosure from the students. The intent of focusing on skills rather than personal experiences is to decrease harmful dual relationships that can occur in experiential training (Goodrich, 2008). Two alternative models involving mock experiential training in group therapy will be presented next.
The SGC model in group therapy training. Romano (1998) proposes the simulated group counselling (SGC) model, which is a “prepracticum training activity that offers students an opportunity to experience group process and practice skills, while reducing concerns associated with self-disclosure” (p. 122). In the SGC model, students take turns role-playing being group members and co-facilitators. The SGC model can reduce dual relationships in group therapy training because the students are role-playing rather than sharing personal information when they are functioning in the client role. The SGC model is inexpensive, gives students a range of experience in different group therapy roles, and allows the students to integrate knowledge with skills (Romano, 1998).

Romano (1998) discusses the intricacies of his model in detail, and stresses the importance of making it clear that the student is playing a role, and that the role is only played in the group environment. Romano notes that when the group members are in discussion after the mock therapy, they step out of roles, and the discussion takes place from the perspective of a third party.

Romano (1998) discusses the strengths and limitations of the SGC model. One strength is that the students get to participate in realistic, yet safe and varied roles, without the fear of dual relationships. He argues that realistic group dynamics will be present, because, although the students are engaged in role-play, they will experience the initial anxiety about being in a group, and they will experience the frustrations of their fellow students being late, and possibly withdrawing from the group (Romano, 1998).

Some of the limitations of Romano’s (1998) recommended model include staying in role-play as a character, which can be challenging to do, and not being able to react spontaneously within the group because the students are playing fictitious characters. Romano indicates that some students may not know when their classmates are playing a
role versus being authentic. Romano believes his SGC model is an effective way of training novice group therapists without compromising the students’ emotional safety.

Using actors in group therapy training. Fall and Levitov (2002) describe another teaching strategy available to instructors who want to use experiential learning in their group therapy training. They propose using actors to portray clients in group therapy training as it “eliminate(s) the possible risk to students brought about by asking them to adopt and stay in a role” (p. 128). Fall and Levitov suggest that the actors be specially trained individuals who are hired from outside of the department. The authors suggest forming a partnership with the university’s drama department. The authors emphasize that the actors must always stay in role, to allow for a more realistic experience for the group therapy leaders in training. They also suggest that at the end of the course, the actors, as their real selves, meet with the students to give feedback on their experiences as clients. They believe that using actors is an effective way for students to get realistic experiential group training, without the students having to disclose personal information. One limitation the authors admit is that if the actors stop playing their roles, the effect of the realism of the group will not be maintained.

In closing, there are two main alternatives proposed in the research, both of which have positive implications and limitations. It is important to be aware that there are group therapy training methods that can decrease the harmful effect of dual relationships while providing experiential training to the students.

Summary

This chapter has discussed research in four major areas: defining dual relationships in experiential group therapy training, the ethical dilemma of experiential group therapy training, inherent problems of experiential group therapy training; ways to
manage dual relationships in experiential group therapy training; and the different models of experiential group therapy training.

**Conclusion**

It is difficult to define dual relationships in group therapy training involving experiential training. We may think of these relationships in terms of shades of grey, rather than in black and white. Professors have a paradoxical weight on their shoulders, because they need to ensure that they are giving comprehensive and holistic training, while at the same time that they are not ethically violating their relationships with their students. Professors need to be diligent in maintaining this balance, and strive to be constantly aware of both sides of the dilemma. There are different opinions that suggest both benefits and risks of having experiential training for students learning group therapy. Alternative models have been proposed in this chapter to bridge the gap. Future research will need to evaluate how successful these alternative models are in the classroom.

Overall, it appears that it is of the utmost importance for professors to fully inform students of the expectations in their experiential courses, of how they will be graded, and of the consequences of not participating prior to admission. However, there still has to be the owned responsibility of the student for self-care when feeling unsafe, before participating in any activity. Professors can aid this process by continually informing students about potential risks in classroom activities. Group therapy training is a very important subject of discussion, because the way in which students learn affects the quality of services future clients receive.
Chapter Four: Strengths, Limitations, Future Research, and Conclusion

This section is an overall synopsis of the project focusing on Chapter Three and the Appendix. The strengths, limitations, and future research required will be discussed beginning with the literature review in Chapter Three.

**Strengths of Chapter Three**

The literature review on dual relationships in group therapy training is a strong document that offers a comprehensive discussion of the present literature. The literature review discusses both sides of the dilemma, the benefits, and risks, and provides two alternative approaches to experiential training in a group therapy context.

**Limitations of Chapter Three**

There is a significant lack of published research on dual relationships as these relate to professors using experiential training in a group therapy context. This author was only able to find American literature from various American regulatory bodies that discussed, albeit in a limited way, dual relationships in experiential group therapy training. There was no research referring to group therapy training in Canada. It is apparent that most of the research is from subjective experience rather than objective data. This is problematic because there is no data that describes how many universities use experiential group therapy training, and how many students are affected by the dual relationships that result from experiential group therapy training. Thus, the inherent limitation is lack of information to synthesize and establish validity for the arguments made in this project. Clearly, future research and publication of clinical case studies in this area are needed.
Future Research Based on Chapter Three

Dual relationships in group therapy training needs considerably more research using objective data, especially from a Canadian perspective. It would be useful if future research could address the following research questions:

1. What are students’ experiences with dual relationships in experiential group therapy training?

2. How many undergraduate and graduate university programs have experiential group therapy training and how do they address dual relationships?

3. Which universities in countries other than the United States share the same ethical dilemma in experiential group therapy training programs?

4. What is the impact of ensuring informed consent prior to a student's acceptance into a graduate counselling program?

The next section to examine for strengths and limitations is the Appendix. The main strength of the Appendix is the orientation to the informed consent process between a professor and a student.

Strengths of Appendix

The orientation guide to the informed consent process offers an explicit common language of ethics in psychological practice that can be used in conjunction with a professor’s regulatory body. It is presented in a logical manner that is directly applicable to counselling supervision. It is set up to follow the Canadian Code of Ethics for Psychologists (CPA, 2000) as well as the Standards of Practice from the College of Alberta Psychologists (CAP, 2005). It is user-friendly for professors because the orientation guide to the informed consent process coincide with the informed consent
form. This is especially useful for supervisors who have less experience since the theory and ethics is paired with direct practice.

**Limitations of Appendix**

There are numerous limitations and cautions to using this orientation to the informed consent process. First, this is only a small component of an overall policy and procedures manual. Many sections are not covered, because this is only the informed consent ethical section. Furthermore, this is only one perspective on what an ethical policy and procedures orientation guide should contain. It is assumed that the reader would have graduate level training in psychological ethics and understand the *Canadian Code of Ethics for Psychologists* (CPA, 2000).

Another limitation to this orientation is that it is based on the current *Canadian Code of Ethics for Psychologists* (CPA, 2000), current literature, and current *Standards of Practice from the College of Alberta Psychologists* (CAP, 2005). This is a limitation because not all professors are psychologists, and thus follow different regulatory standards. Another limitation is that it is based in current Canadian legislation. This is a limitation as it may not be generalizable to different countries and may become out-of-date in Canada if legislation is changed. Readers must be aware of these limitations and need to stay up-to-date on all areas of supervision in counselling ethics.

**Future Research Based on Appendix**

There is a vast amount of research on ethics in counselling. However, this author was unable to find practical information on ethics. There were no templates for orientation to the informed consent process that could be used by professors. It would be helpful if future research could address the following research questions:
1. What concerns do students have about dual relationships with their professors, and what specific policies would they want in an orientation to the informed consent process?

2. To what extent would students and professors find an orientation to the informed consent process helpful or not helpful?

3. When an orientation to the informed consent process is used, what do the professors and students see as the value of this process? How would professors and students assess whether dual relationships diminished or lessened by using a consent form?

Summary

The primary topics discussed in this project were ethics regarding dual relationships in experiential group therapy training, and the importance of an orientation guide to the informed consent process between a student and a professor. Both of these topics deal with carrying out an ethical practice with the intent of doing no harm. The role of a group therapy professor needs to be taken seriously by individuals who are using experiential training to teach group therapy. There is an inherent power differential between students and professors that needs to be considered thoroughly in every action taken by the supervisor. The purpose of this project was to discuss these issues, and provide a useful tool that can help conceptualize how ethics can be applied to supervision and training in psychology.

Conclusion

This project has been an interesting area to research. Initially, the subject matter did not feel applicable, since I had never been in a group therapy course. However, the more I explored the literature, the more I was able to relate to the subject matter, because the
overall theme of this project is student rights. I find it ironic that students are taught in
detail how to protect the rights of clients, but are rarely protected when they are
functioning in a client role in the classroom. I hope that this project will be read by
students and professors who participate in experiential group therapy training. I know
that if I ever take an experiential group therapy course, I am more aware of the risks and
know what questions to ask to preserve my well-being and privacy.
References


Appendix

An Orientation to the Informed Consent Process between a Professor and Student in a Group Therapy Context

Context of Appendix

It will be assumed that the reader is either a student at the University of Lethbridge Master of Education, Counselling Psychology program and is considering taking a course titled “Group Therapy Training,” or a professor who is teaching the course.

The purpose of this section is to offer a template for an orientation to the informed consent process between a professor and student. A description of the ethical code used, general policies and procedures for informed consent, and a consent form for students who are in a group therapy training course are included.

It is assumed that the reader has graduate level training in psychological ethics and is familiar with the content found within the Canadian Code of Ethics for Psychologists (CPA, 2000). The information in this Appendix is for educational purposes only, and is not intended to be used in actual practice, since the material will need to be modified and adapted to suit particular course needs. This is also a hypothetical case since the M.Ed. Counselling Psychology program does not offer a graduate course in group therapy. The orientation guide within the Appendix can be cited:

Introduction

“We can often help, but if our ethics slip, we can needlessly hurt” (Pope & Vasquez, 2007, p. 1). This simple yet powerful assertion directed at therapists and can be generalized to professors. Professors are privy to, and responsible for, the most sensitive information from students. It is important for professors to be aware that the relationships with their students are based on trust, and that there is a marked power differential because of the risk of harming their students (Corey, Corey, & Callanan, 2007). A professor must have a strong ethical basis in order to act as a competent professional. In order to become a psychologist in Alberta, one must go through rigorous testing, in which ethics is a strong component. The intent of this is to protect the public, or in other words, to ensure that the professional does no harm. There are numerous regulatory bodies that have different ethical codes, which usually include an ethical decision making model. Although ethics is not black and white, it is very helpful to have guidelines and a framework in which to work.

According to Corey, Corey, and Callanan (2007), there are two different ways to conceptualize professional ethics: mandatory ethics and aspirational ethics. The former is when a professor acts in accordance with the minimal standards that are expected and the latter is when a professor goes beyond what is expected, with the primary focus on the welfare of the student. The main goal should be to go beyond and be aspirational. This will mean something different for each professor.

One may wonder why being aspirational is so important. The best way to offer perspective on this is to refer to the simple Rogerian term *empathy*. Rogers describes this as sensing “the client’s private world as if it were your own” (2007, p. 243). In other words, to be an empathetic professor, one must step into the shoes of the student and
decide if one would want to be treated in the same way the student is being treated. This question provokes a different kind of thinking that puts professors on the same level as the students with whom they are dealing. One needs to have sensitivity and respect for all students, especially in the area of informed consent.

Being ethical has implications for the proximal community and overall reputation of the industry. For instance, if professors are not behaving in an ethical way with their students, there is a good chance they are not being completely ethical with their clients. This in turn may compromise the safety of all their clients, and may have repercussions in the community; causing individuals not to trust the field of psychology, and not to access services. This is important because counselling is a sensitive field that abides by strict standards in order to protect the client and student alike.

It is expected that professors should take ethics seriously, and function at their personal best to make their practices a reputable and safe place for their students. Most professors do not receive training on how to behave ethically with students, and, without guidance, this can be an overwhelming expectation. The orientation to the informed consent process has been created to inform students and professors about students' informed consent rights in a group therapy training context.
**Ethical Code Adopted**

The ethical code adopted for this orientation guide is the *Canadian Code of Ethics for Psychologists* (CPA, 2000). This code was chosen because of its thoroughness and direct applicability to counselling and supervision. The *Canadian Code of Ethics for Psychologists* is aspirational in its intent, and meant to be used as a tool for guidance. It is important not to think in a dichotomous manner, and to use the code of ethics that guides a professional therapist when working with students. Because a student is perceived as a vulnerable person, like a client in therapy, areas of the code that pertain to clients can be generalized to students in a group therapy training context.

**Introduction to Each Ethical Theme and Relevant Codes**

The following contains a brief introduction to the ethical principles from the *Canadian Code of Ethics for Psychologists*, and an explanation of how they are applicable to ethical conduct. Throughout this guide, there will be reference to specific codes drawn from the *Canadian Code of Ethics for Psychologists*. A brief introduction to each principle and a description of its importance is given below. Each principle is ordered by importance.

**Principle I: Respect for the Dignity of Persons**

Principle I is weighted as the most important principle out of the four, due to the fact that psychologists have a greater duty to the person than to society as a whole (Sinclair & Pettifor, 2001). As stated in the values statement, the respect for the dignity of persons is “the belief that each person should be treated primarily as a person or an end to him/herself, not as an object or a means to an end” (Sinclair & Pettifor, 2001, p. 43). This means that each individual must be treated equally regardless of his or her ethnic background (Sinclair & Pettifor, 2001). Included in Principle I are more specific
concepts, such as respect, rights, non-discrimination, fair treatment/due process, informed consent, freedom of consent, protection for vulnerable persons, privacy, confidentiality, and extended responsibility (Sinclair & Pettifor, 2001). This principle is important because in order to create a safe environment for students, professors must treat them with respect, not discriminate, and provide them with a full and detailed informed consent process, so that they can freely decide if they would like to be part of the program.

Principle II: Responsible Caring

The second principle revolves around the notion that psychologists are actively concerned about the individuals with whom they are working, and are involved in activities that are more beneficial than harmful (Sinclair & Pettifor, 2001). In order for psychologists to do more good than harm, they must be fully competent in their areas of practice and be self-aware (Sinclair & Pettifor, 2001). The applicable standards are general caring, competence and self-knowledge, risk/benefit analysis, maximizing benefits, minimizing harm, offsetting and correcting harm, and extended responsibility (Sinclair & Pettifor, 2001). An important principle is the duty to protect and warn, which is stated in the code as, “Do everything reasonably possible to stop or offset the consequences of actions by others when these actions are likely to cause serious harm or death” (Sinclair & Pettifor, 2001, p. 69).

Principle III: Integrity in Relationships

The third principle discusses accuracy/honesty, objectivity/lack of bias, straightforwardness/openness, avoidance of incomplete disclosure, avoidance of conflict of interest, reliance on the discipline and extended responsibility (CPA, 2000). All of these standards encompass values that contribute to “maintenance of public confidence”
(Sinclair & Pettifor, 2001, p. 73). This principle stresses the importance of knowledge of boundaries and dual and multiple relationships. It discusses the importance of self-knowledge on behalf of psychologists, and how their values, background, and so forth, greatly affect their relationships with clients.

*Principle IV: Responsibility to Society*

The final principle, although weighted last, is crucial to the profession of psychology. This principle encourages psychologists to go beyond their roles to ensure that the profession of psychology is ethical, by becoming involved in society, policies, and so forth, when there is an ethical discrepancy (Sinclair & Pettifor, 2001). The standards are development of knowledge, beneficial activities, respect for society, development of society, and extended responsibility (Sinclair & Pettifor, 2001).
Policies and Procedures for the Informed Consent Process between a Professor and Student in Experiential Group Therapy Training

Informed Consent for Students - Introduction

Purpose

The importance of obtaining complete informed consent from students is paramount. There are various ethical and legal reasons one must do this. It is important for students to understand confidentiality, their rights and responsibilities, what the supervision process entails, how to make a complaint, and so forth. This enables students to make decisions of their own free will about whether or not they would like to use the service, and what to expect if they do. It is imperative that a professor not just give students the forms to sign and read, as the students may not understand all of the material and thus would not be giving full informed consent, in accordance with the Canadian Code of Ethics for Psychologists, section I.23 (CPA, 2000). Professors should not allow services to be rendered before written consent is obtained. They should ensure that students completely understand what informed consent entails and what its purpose is, and do not use coercion or persuasion to get students to give their consent, in accordance with sections I.23, I.24, I.27, and I.29 (CPA, 2000). Professors should adhere to the principle that informed consent is a process, and thus will be ongoing throughout the class when applicable, in accordance with section I.17 (CPA, 2000).

The subsequent policies are broken down into rights and responsibilities, confidentiality and privacy, and dual relationships. A subsequent informed consent form for group therapy training is included following the policies and procedures section.
Making available a consent form to sign is in accordance with section I.21 of the

Informed Consent for Students – Rights and Responsibilities of Students

Purpose

It is crucial that students understand their rights and responsibilities, in order to know what to expect from their professor. It is important for students to understand fully what the class entails, the benefits and risks of being part of the class, and the alternatives (Corey, Corey & Callanan, 2007). This dovetails with the ethical duty to provide full informed consent to students, because providing this information enables students to choose whether they want to enroll in the class. This is in accordance with sections I.23 and I.24 of the Canadian Code of Ethics for Psychologists (CPA, 2000).

Policy

This information will be included in the informed consent the student receives prior to the start of the class. Included in the rights and responsibilities handout is an explanation of the right to end the class at anytime (I.30), confidentiality, and instructions for the student to file a complaint against the professor (CPA, 2000).
Informed Consent for Students – Rights to Privacy/Confidentiality

Purpose

Understanding the right to privacy or confidentiality is a crucial part of the informed consent process. Corey, Corey, and Callanan (2007) state that informing students about how their information will be used is a part of the process of establishing trust with the student. Included in a confidentiality protocol is the clarification of the access that third parties have to students’ files, such as those in the registrar's office. This is in accordance with section I.26 (CPA, 2000). It is imperative that the student understands the limits to confidentiality, such as under what conditions the professor will breach confidentiality and why, in accordance with sections I.23 and I.34 (CPA, 2000). The limits to confidentiality are in accordance with sections I.24 and II.39 of the Canadian Code of Ethics for Psychologists.

Policy

This information will be included in the informed consent the student receives prior to the start of the class. Included in this handout is how the student’s information will be handled, who has access to it, and the limits of confidentiality.
Informed Consent for Students – Dual Relationships with Professors

Purpose

Professors need to be clear with their students beforehand regarding dual relationships, in order for students to be fully informed about the limits. Dual relationships are defined as a professor providing supervision to a student, and being in another non-professional role with the student at the same time, or serving as a facilitator in group therapy training. Examples of a non-professional role include being a relative, being a friend’s relative, being a friend, having sexual relations with a student, having a business relationship with a student, and lending money to a student (Corey, Corey & Callanan, 2007).

There are specific standards of practice from the College of Alberta Psychologists regarding this matter. The standards state that psychologists must not provide therapy to a client if there is a conflict of interest such as “current or previous professional, familial, social, sexual, emotional, financial, supervisory, political, administrative, or legal relationship with the client or a relevant person associated with or related to the client” (College of Alberta Psychologists, 2005, p.5). This can be readily generalized to the student-professor relationship due to the same imbalance of power. The professor is in a position of power, which can decrease the professor’s objectivity, and disrupt the supervisory relationship. This can result in harm to the student as well as ineffective supervision (Corey, Corey & Callahan, 2007).

However, there are times when certain dual relationships can be acceptable, only because there is no other alternative and it is in the student’s best interest. This should be a rare occurrence, and it is important for the professor to follow a problem-solving template for ethical dilemmas to determine whether a dual relationship is ethical. The
professor should consult with the Dean. If applicable, the protocol should include discussions with the student about the issue that includes possible consequences (College of Alberta Psychologists, 2005, p. 6). Corey, Corey, and Callanan (2007) stress that professors must decide whether they are engaging in the relationship to fulfill their own needs or those of the student. The College of Alberta Psychologists (2000) recommends that a therapist ask certain questions before proceeding in a dual relationship with a client. These questions are generalizable to the student-professor relationship:

1. Is this in my student’s best interest?
2. Whose needs are being served?
3. Will this have an impact on the service I am delivering?
4. Should I make a note of my concerns or consult with a colleague?
5. How would this be viewed by the student’s family or significant other?
6. How would I feel telling a colleague about this?
7. Am I treating this student differently (e.g., appointment length, time of appointments, extent of personal disclosures)?
8. Does this student mean something special to me?
9. Am I taking advantage of this student?
10. Does this action benefit me rather than the student?
11. Am I comfortable in documenting this decision or behaviour in the student file?
12. Does this contravene the Regulated Health Professions Act, the Standards of Professional Conduct, or the Code of Ethics, and so forth? (CAP, 2000, p. 174).

If a relationship is deemed acceptable, both the student and professor (Corey, Corey & Callanan, 2007) should sign an informed consent form.
Policy

Professors are not to engage in dual relationships with students in accordance with sections II.27, III.31, III.33, and III.35 of the *Canadian Code of Ethics for Psychologists* (CPA, 2000). Professors are to provide information defining dual relationships, examples including sexual contact, why dual relationships are harmful, and what to do if the professor breaches this. This information will be included in the informed consent form the student receives prior to the start of the class.
Introduction

Congratulations on your acceptance into the University of Lethbridge Master of Education, Counselling Psychology program. As you are aware, you have the option of taking a course titled “Group Therapy Training.” The School of Graduate Studies aspires to be ethical, forward thinking, and focused on the best interests of the student. Hence, the following information has been created to ensure your group therapy course will be conducted in an ethical manner. You will be expected to sign an informed consent if you agree to the terms. Please contact the School of Graduate Studies if you have any questions or would like more information on the topic.

Group therapy training is regarded as extremely beneficial for counselling students (Corey & Corey, 2006). However, there are inherent risks associated with group therapy training that use experiential training as part of the course (for more information please refer to Corey & Corey, 2006; Romano, 1998). As a future student in this course, you should be informed of these risks. The following are details outlining the expectations of a student and professor in the course titled “Group Therapy Training.”

Participation in Class

You are required as a student to participate in “mock group therapy.” Mock group therapy is when the clients are actors brought in from the University of Lethbridge Drama Department, and the group leaders are yourself and your classmates. This University does not believe in having students participate as clients due to the potential harm and
confusion of roles it can cause between students, and between students and professors (Sullivan & Olgoff, 1998).

*Participation Outside of Class*

The University of Lethbridge believes that experiential group therapy training is necessary to become a competent group therapist, and thus requires that you participate independently as a client in group therapy. You are not permitted to be in a group affiliated with members in your class or faculty in your department.

*Evaluation*

You are expected to provide a journal of your experience in the group and discuss your experience in class. It is expected that you only discuss material with which you are comfortable. You will not be graded on the nature of your therapy, but on your reflections on your experience. An example of an acceptable journal entry is provided below. The disclosure is focused on the here and now, and it does not contain sensitive personal information.

I cannot believe I am halfway through group. I have had an interesting experience so far, I cannot believe how much I am relating to people I just met. Today, I shared a personal experience that made me emotional. I felt so much support from my group members and could not believe that I was the only one that felt that way. I walked out of group feeling great. The facilitator did such a good job in asking me open-ended questions and getting me to dig deeper into my behaviour. I learned a lot about being vulnerable in a group and feel I had a great experience.

There are three ways your work will be evaluated: (i) from your personal self-reflection in the form of journals (see above) and discussion in class, (ii) by your peers,
and (iii) by your professor. More specifically, your work will be evaluated using a scale called “The Self-Disclosure Scale” (Pierce & Baldwin, 1990) (see page 56 for an example of this). The Self-Disclosure Scale is described as being on a continuum of 1 to 10, where 1 represents no self-disclosure, and 10 represents inappropriate self-disclosure. The intent for using this scale is to monitor your self-disclosure, and to give formal evaluations.

Privacy and Confidentiality

Your professor has the duty to keep all of your personal information private and confidential, unless he or she feels that you will harm yourself or another person; that a child or dependent is being abused; or if there is a subpoena for your records. No information discussed within the class can be guaranteed to be confidential, due to your professor not being able to control what happens outside of the classroom. However, at the beginning of the class each student is expected to sign an oath of confidentiality stating that he or she will not discuss other students' and professors' personal information outside of the classroom. This oath does not have an expiry date.

Dual Relationships

Dual relationships are defined as a professor being in a non-professional role with a student while he or she is teaching a course in which the student is enrolled. Examples of a non-professional role include being a relative, being a friend’s relative, being a friend, having sexual relations with a student, having a business relationship with a student, and lending money to a student (Corey, Corey & Callanan, 2007). Some dual relationships are unavoidable in small communities. It is up to the student and professor to talk to the Dean before the course begins to ensure that there is no conflict of interest.
However, under no circumstances, can a non-professional relationship occur between a student and professor during the duration of the course. If you feel that a professor is trying to initiate a dual relationship, please let the Dean of the department know and report it to your professor’s regulatory body if warranted.

If you agree to the following terms, you can sign the consent form. Please do not sign the consent form unless you understand and accept the expectations outlined above.
Consent Form for Group Therapy Training at the University of Lethbridge

I (student) ________________________________, understand and agree to the following expectations as a student in the course “Group Therapy Training”:

1. Participate in “mock group therapy” as a facilitator, not a client.

2. Participate as a client in group therapy that is not associated with classmates or instructors in the faculty, and share my written and verbal personal experience.

3. Understand that I am not expected to disclose information that I feel is too personal or sensitive to share. I will use “The Self Disclosure Scale” to help me learn what is appropriate to share.

4. Understand that I will be evaluated in the following ways: (i) from personal self-reflections in the form of journals, (ii) by my peers, and (iii) by my professor.

5. Understand that all information shared between my professor and I will be kept confidential, unless he or she feels that I will harm myself or another person; that a child or dependent is being abused; or if there is a subpoena for my records. I understand that my privacy cannot be guaranteed from information I share in the classroom setting.

6. Understand the definition of dual relationships between a professor and a student.

7. Understand that if I have ethical concerns about my professor, I can report them to the Dean and to the professor’s regulatory body.
If you agree and understand, please sign below:

__________________________________________  ______________________________
Name                                      Date

__________________________________________  ______________________________
Witness                                    Date
Table 1

*Self-Disclosure Scale for Group Counsellors in Training*

<table>
<thead>
<tr>
<th>Closed Behaviour May Represent:</th>
<th>Behaviour Encouragement Towards:</th>
<th>Open Behaviour May Represent:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Defensiveness</td>
<td>• Developmental issues</td>
<td>• Inability to focus</td>
</tr>
<tr>
<td>• Fearfulness</td>
<td>• Exploration of experience and feeling</td>
<td>• Inability to select</td>
</tr>
<tr>
<td>• Retreat</td>
<td>• Measured, tentativeness</td>
<td>• Lack of restraint</td>
</tr>
<tr>
<td>• Withholding</td>
<td>• Consideration of feelings of others, both present and not present</td>
<td>• Provocation</td>
</tr>
<tr>
<td>• Too little verbal exploration</td>
<td>• Sharing on topics and needs of others</td>
<td>• Domination</td>
</tr>
<tr>
<td>• Lack of social interest</td>
<td>• Owning responsibility for self</td>
<td>• Preoccupation with own needs</td>
</tr>
<tr>
<td>• Inadequate risk</td>
<td>• Experimenting with moderate risk</td>
<td>• Search for therapy</td>
</tr>
<tr>
<td>• Inadequate skill</td>
<td>• Attending to group process</td>
<td>• Questionable judgment</td>
</tr>
<tr>
<td></td>
<td>• Growing and expanding skill</td>
<td>• Questionable skill</td>
</tr>
</tbody>
</table>