

Ethical Compass



Ethical Compass is an initiative of the NLASW Ethics Committee and is intended as a resource for members. The issues covered in this publication have been identified by social workers as part of the NLASW ethical consultation process and from a review of ethical trends in practice.

The Ethics of Countertransference: A practice reality

Throughout their careers, social workers will have clients who remind them of someone they know in their life, who may have traits they admire or dislike, or who are going through, or have gone through, similar experiences in their lives. Sometimes this can evoke strong emotional reactions (positive or negative) for the social worker, leading to the experience of *countertransference* in practice.

The Social Work Dictionary (2014) defines *countertransference* as “a set of *conscious* or *unconscious* emotional reactions to a client experienced by the social worker or other professional, usually in a clinical setting. According to psychodynamic theory, these feelings originate in the professional’s own developmental conflicts and are projected onto the client. Countertransference is identical to *transference* except that it applies to the feelings, wishes, and defensive operations of the therapist toward the client. Like transference, it must be constantly monitored and understood” (p. 98). As social workers work through dilemmas in practice that involve *countertransference*, there are several ethical issues to be considered:

Professional Boundaries: As noted in the CASW Code of Ethics (2005) “Social workers establish appropriate boundaries in relationships with clients and ensure that the relationship serves the needs of clients” (p. 7). When experiencing *countertransference*, it is important to consider how professional boundaries may be impacted. Boundary issues pertaining to *countertransference* can fall along the continuum of boundaries and can manifest into boundary crossings or boundary violations.

Conflicts of Interest: As boundary issues arise, one must consider potential conflicts of interest. Could the experience of *countertransference* result in a conflict of interest that impedes one’s ability to remain unbiased and objective? As noted in the CASW Guidelines for Ethical Practice (2005) “social workers avoid conflicts of interest that interfere with the exercise of professional discretion and impartial judgment. Social

workers inform clients when a real or potential conflict of interest arises, and take reasonable steps to resolve the issue in a manner that makes the clients' interests primary" (p. 11).

Self-Disclosure: Self disclosure is a complex issue and reflection is required. Should social workers reveal information to clients regarding their shared experiences for example? Social workers consult the Code of Ethics and consider self-disclosure within the context of professional boundaries and the clients best interests. Questions to consider may include: how much self-disclosure might be appropriate, what are the benefits/risks, whose needs are being met, and how might the social worker-client relationship be impacted? Social workers must also consider whether the client is also experiencing transference and how this might be impacting the professional relationship.

Competence in Practice: "Social workers uphold the right of clients to be offered the highest quality service possible" (CASW Code of Ethics, 2005, p, 8). Social workers therefore consider issues related to *countertransference* on their ability to practice competently. If one's ability to practice competently is impacted, social workers consult the Code of Ethics and relevant standards. Social workers terminate the professional relationship and refer to another professional when it is in the client's best interest.

Consultation/Supervision: When experiencing *countertransference*, it is important to engage in peer consultation, or raise the issue with a supervisor. This can be difficult as the thought of exposing one's vulnerabilities can be intimidating. However, this is important in addressing issues that could impact on service delivery and as part of one's own professional development. This is a strength, not a weakness.

Self-awareness is key to addressing *countertransference* in practice. It is important that social workers have a good understanding of what their triggers are, and how one's reaction to these triggers may impact the social worker-client relationship and decision-making. Not all experiences of *countertransference* will have a negative impact. Having shared experiences with a client may enhance one's ability to empathize with a client for example. But like any ethical issue, social workers must work through the ethical considerations to inform their decision-making. Social workers also have tools at their disposal such as the NLASW ethical decision-making resource guide. It is through reflection, ethical consultation and a review of best practices that we work towards excellence in social work practice.

References:

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