Practicing ethically as a rural psychologist

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A number of years back I came home to find I had a new neighbour across the road who also happened to be a current patient. I’m not sure who was most surprised/shocked. We merely nodded and then at the next session we discussed how to maintain our therapeutic relationship and not have it muddy a nodding neighbourly relationship and vice versa. Happily all went well…

… unlike another patient with an alcohol problem, who walked past me working in the garden one day, and decided in that moment to give me a professional reference in front of my children. This second person would on odd occasions over the next year or so give me somewhat shorter assessments of my failings. My main concern was my children’s sense of safety….
• I am the only psychologist in a rural community. I was seeing a client through an EAP provider... Then received a referral from another EAP provider for her husband... so I had to very delicately explain the conflict of interest...

• I went to a friend’s house for dinner and there was a client - I had no idea the client was their friend…

• I am the only psychologist in a rural community and practice out of the local GP’s rooms. The receptionist recently asked me to see her son who I knew was struggling with depression.
• For rural people the fact that such situations occur is not unexpected....

• For psychologists some of these situations have the potential to cause harm and there are ethical obligations on psychologists that recognise this
As required by the Psychology Board of Australia, all psychologists must adhere to the Australian Psychological Society Code of Ethics

*Three general ethical principles:*

1. The respect for the rights and dignity of people and peoples including the right to autonomy and justice
2. Propriety (incorporating the principles of beneficence, non-maleficence and responsibility to client, profession and society)
3. Integrity (requirement for good character).
Professional boundaries and multiple relationships

Principle of integrity:

• The knowledge, professional standing & information acquired in the course of delivering psychological services places a psychologist in a position of power & trust over clients.

• As such, psychologists must seek to act in the best interests of their clients, including identifying personal biases, avoiding conflicts of interest, & maintaining proper boundaries with clients.
What constitutes ‘multiple relationships’?

• When a psychologist providing psychological services to a client is or has been:
  – in a non-professional relationship with the same client
  – in a different professional relationship with the same client
  – in a non-professional relationship with an associated party
  – a recipient of a service provided by the same client.
The Code of Ethics requires that psychologists:

Refrain from engaging in multiple relationships that may:
- Impair their competence, effectiveness, objectivity, or ability to render a psychological service;
- Harm clients or other parties to a psychological service;
- Lead to the exploitation of clients or other parties to a psychological service

Psychologists must also:
- take steps to establish & maintain proper professional boundaries with clients & colleagues.
As an undergraduate [psychology] student, I sat through my university ethics lectures in a state of rising anxiety... The lecturer stated that under no circumstances, should psychologists engage in multiple relationships.... Then another academic, a practicing psychologist in a regional town joined the lecture. He revealed how, under some circumstances, he engaged in multiple relationships. I felt confused. When I become a psychologist, I wondered how I might determine ethical from unethical practice in a rural community. I questioned whether I could serve the needs of clients known to me and still practice ethically (Psychology student living in rural WA, 2013).
The ethical focus on boundaries & multiple relationships

• Clearly contributes to ensuring psychologists do not exploit their powerful position with clients

BUT

• Poses challenges for practitioners working in rural communities where social boundaries can sometimes be blurred because of small populations & geographical isolation

Is this a contributing factor to the recruitment & retention of the rural psychology workforce???
The concept of boundary maintenance: Where does it come from?

• Emerged within the urban-based psychoanalytic tradition

• Based on the urban cultural norms of *segmentation*, *separateness* & *anonymity*

• Fails to account for the rural cultural norms of *connectedness, the development of trust through knowing someone* & *fluidity of boundaries*
But multiple relationships are inevitable in rural practice

- **The Australian Code:**
  - Psychologists should **refrain from** such relationships

- **Ethical Guidelines:**
  - Take into consideration rural culture & isolation
  - Note that “non-sexual overlapping relationships are almost inevitable in rural communities”
  - While some boundary crossings may not cause harm, the “blurring of boundaries” has the potential to “present difficulties for both psychologists and clients”
  - The management of such dilemmas requires **negotiating how these situations will be managed with clients**, & then documenting this process.
So as our student learnt:

*The decision-making is up to individual psychologists: “murky”, “grey”, “tricky”, “messy”, and “soupy”.*

- There is rarely a choice as to whether or not to enter a multiple relationship
- Negotiate with the client, where possible
- Refer-on:
  - Lack of alternative services
  - Can create new ethical problems (breach confidentiality of another client)
  - Personal professional safety versus client need
- Restrict social contact with community
- Live in a different town to where you work
Rigid adherence
(refrain from multiple relationships)

vs

Identify & manage the multiple relationships
(distinguish between the harmless/harmful and try to manage them in best interests of client)
Practical implications:

- View as a key factor that might assist the retention of rural psychologists
- Awareness raising in rural health services where there may only be a few psychologists employed
- Greater access to supervision, especially for new psychologists and those not experienced in rural practice
- Revision of ethical frameworks to be less culture-dependent