
**Principles & Beliefs in the
Practice of Ethics
March, 2017**

**Jerry Bauerkemper
Executive Director
NCCG**

Agenda

- Overview of Ethics
- Components of Moral Behavior
- Moral Principles
- Approaches to Ethical Decision Making
- Kolberg's Moral Reasoning Model

Opening Thoughts

- The values and ethics of the human service profession must govern every aspect of practice, each decision, and every action you take as a professional. (Cournoyer, 2005)

You Affect

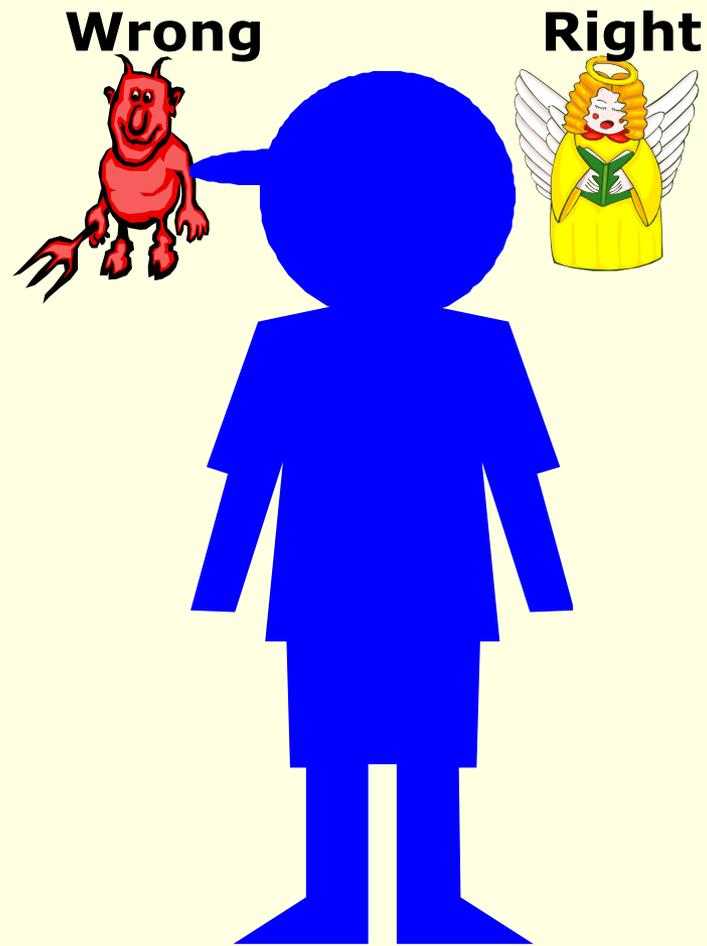
Because you affect for better or worse, the lives of the people you serve, you bear a substantial burden of personal and professional responsibility.

Ethical Responsibility

- Ethical responsibilities take precedence over
 - Theoretical knowledge
 - Research findings
 - Practice wisdom
 - Agency policies
 - Personal values, preferences, beliefs

(Cournoyer, 2005)

ETHICS



Individual Exercise

“Being Right, Or...”

- Discuss the following questions.
- We will discuss this also as a large group.

. . . Being Ethical

1. Describe how learned right from wrong?
2. Recall a time that you realized you were incorrect about something. Discuss the feeling of being wrong.
3. What are some ways that people have of “making” others wrong?
5. What is being ethical?
6. What is integrity?
7. What happens when we (as a profession) are not consistently ethical?

A Few Basics

- **Morals**: your personal values, sense of “right” and wrong, etc.
- **Principles**: professional practice standards
- **Ethical Values**: autonomy, beneficence, justice, fidelity, non-maleficence, etc.
- **Scope of Practice**: definitions and limitations of what services a professional is qualified to provide

Scope of Practice

- The application of general counseling theories and treatment methods.
- The clinical evaluation of issues by screening, assessment and diagnosis.
- It involves treatment planning, and case management activities such as implementing the treatment plan, consulting, continuing assessment and treatment planning, referral and client advocacy.
- It includes individual, group, and family counseling.
- It involves client, family and community education. The practice of these activities will conform to the individuals level of education, training, and supervised experience.

-
- I did an informal email survey of some providers and ADA staff asking a couple of questions.
 - What are the most serious ethical problems entry level Addiction treatment professionals experience?

Recent Survey

Category of Ethical Problem	# of Responses
Confidentiality	111
Relationships with Clients (Dual Relationships) Friendships with clients	1111111
Relationships with Client Family	111
Save the world attitude	1
Power struggles with clients	1
Providing clinically unnecessary services	1
Forming relationships with the client/patient for personal gain, sexual or monetary	111111
Being manipulated by the client/patient for favors while in the treatment program (house-keeping staff were bribed by clients to bring drugs/alcohol onto the unit)	1
Undermining by staff in conflict over treatment strategies and styles can destroy the honesty and trust level of the treatment milieu	1
Recognizing differences in roles Counselor-Case manager-Sponsor -Coworker-Friend	11
Not referring out when indicated Not recognizing and addressing problems Trying to perform a service not qualified to do	111
Continuing to provide the same old treatment over and over when it is obvious that the particular intervention is not working	1

Definition

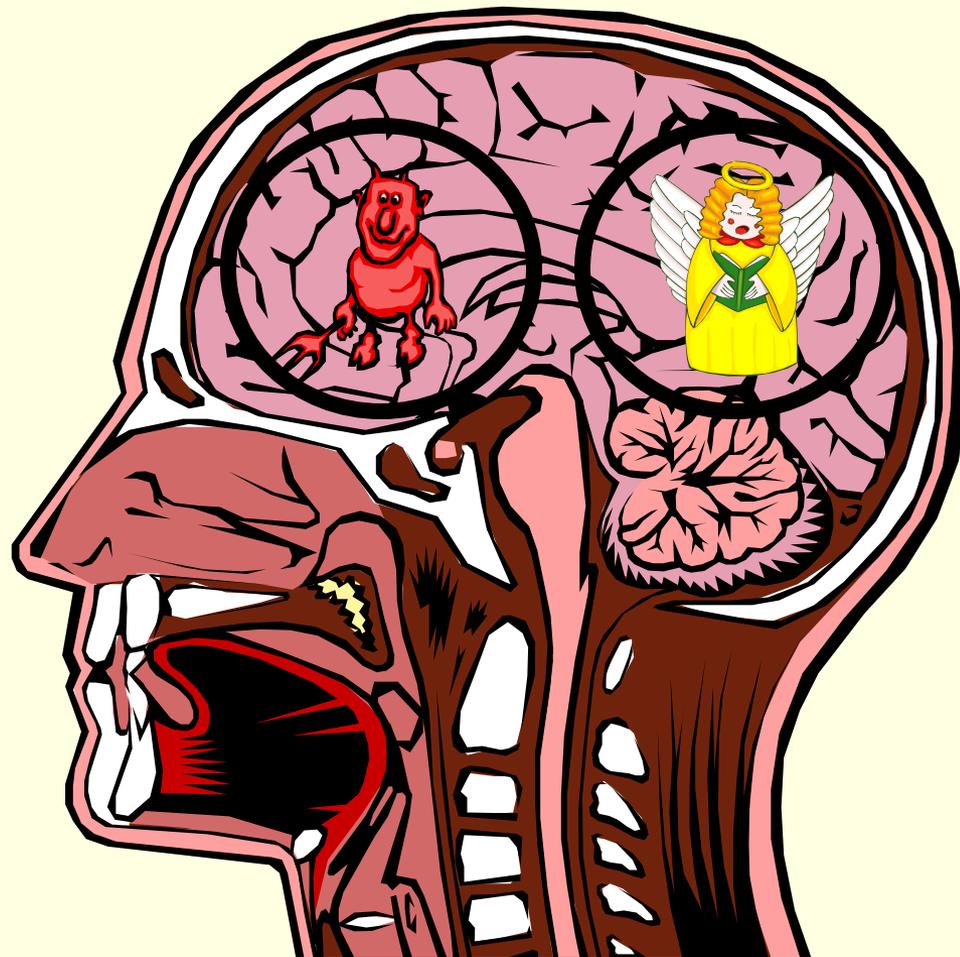
Ethics: an overview

The word "ethics" is derived from the Greek word *ethos* (character), and from the Latin word *mores* (customs).

Together, they combine to define how individuals choose to interact with one another.

In philosophy, ethics defines what is good for the individual and for society and establishes the nature of duties that people owe themselves and one another.

-
- This presentation on Ethics has two primary purposes
 1. Examine established ethical standards which make right and wrong clear.
 2. Learn an ethical decision making strategy for those gray areas.



Right-Wrong-Gray Area
Sometimes it seems
there's lots of gray area





What is an "Ethic"?

- A principle of right or good behavior
- A system of moral principles or values
- Some of your definitions.....

What is ethical decision-making?

- **Mandatory Ethics**
- **Aspirational Ethics**
- **The Moral Principals**
- **A model to follow... in ethical decision-making**



Ponderings.....

- Moral issues greet us each morning in the newspaper, confront us in the memos on our desks, nag us from our children's soccer fields, and bid us goodnight on the evening news.
- Daily we are bombarded with questions about the justice of our foreign policy, the morality of medical technologies that can prolong our lives, the rights of the homeless, the fairness of our children's teachers to the diverse students in their classrooms.

-
- Dealing with these moral issues is often perplexing. How, exactly, should we think through an ethical issue? What questions should we ask? What factors should we consider?
 - The first step in analyzing moral issues is obvious but not always easy: Get the facts. Some moral issues create controversies simply because we do not bother to check the facts. This first step, although obvious, is also among the most important and the most frequently overlooked.

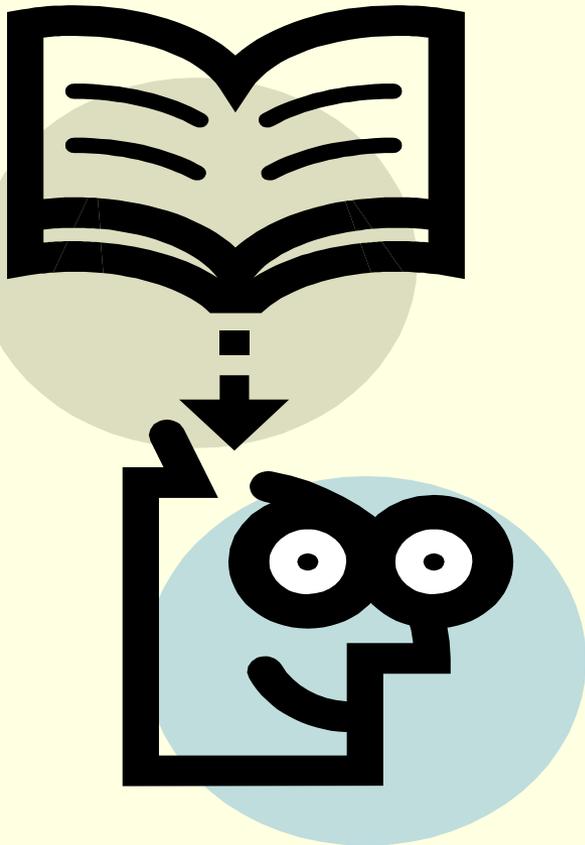
Consistency in Ethics

- Consistency--the absence of contradictions - the hallmark of ethics.
- Ethics is supposed to provide us with a guide for moral living, and to do so it must be rational.
- If our ethical principles and practices lack consistency, we, as rational people, will find ourselves at a loss as to what we ought to do and divided about how we ought to live.

Consistency (cont)

- Ethics requires consistency in the sense that our moral standards, actions and values should not be contradictory.
- Examining our lives to uncover inconsistencies and then modifying our moral standards and behaviors so that they are consistent is an important part of moral development.

Moral Standards



- A more important kind of inconsistency is that which can emerge when we apply our moral standards to different situations.
- To be consistent, we must apply the same moral standards to one situation that we apply to another unless we can show that the two situations differ in relevant ways.

Responsible Professionals

Counselors' claim of skill in relieving people's pain must be based on scientific evidence of effectiveness in carrying out interventions for a good result for the client.

1. Having sufficient knowledge, skill and judgment to use efficacious interventions
2. Respecting the human dignity and freedom of the client

Responsible Professionals.....

3. Using the power inherent in the counselor's role responsibly
4. Acting in ways that promote public confidence in the profession of counseling



Components of Moral Behavior

Framework for understanding moral behavior Rest, (1983, 1994):

Defines moral action as any behavior that can affect the welfare of another.

1. **Moral Sensitivity** – Process of recognizing the situation as one with implications for the welfare of another.
2. **Moral Reasoning** – Process of thinking through the alternatives, once a situation has been recognized as having moral dimensions.

3. **Moral Motivation** – having evaluated the options and determined which is the most moral, must decide whether to go forward.
4. **Moral Character** - Carry out the moral action to its conclusion – requires virtues such as character, integrity, and moral courage.



-
- We often use the word "integrity" to refer to people who act in ways that are consistent with their beliefs. Here consistency means that a person's actions are in harmony with his or her inner values.
 - Competing values may interrupt moral motivation and action.

-
- Having the facts is not enough.
 - Facts by themselves only tell us what is; they do not tell us what ought to be.
 - In addition to getting the facts, resolving an ethical issue also requires an appeal to values. Philosophers have developed five different approaches to values to deal with moral issues.

The Utilitarian Approach

- Utilitarianism was conceived in the 19th century by Jeremy Bentham and John Stuart Mill to help legislators determine which laws were morally best. Both Bentham and Mill suggested that ethical actions are those that provide the greatest balance of good over evil.

- To analyze an issue using the utilitarian approach,
 - First identify the various courses of action available to us.
 - Second, ask who will be affected by each action and what benefits or harms will be derived from each.
 - Third, we choose the action that will produce the greatest benefits and the least harm.
 - The ethical action is the one that provides the greatest good for the greatest number.

The Rights Approach

- The Rights Approach to ethics has its roots in the philosophy of the 18th-century thinker Immanuel Kant and others like him, who focused on the individual's right to choose for herself or himself.
- According to these philosophers, what makes human beings different from mere things is that people have dignity based on their ability to choose freely what they will do with their lives, and they have a fundamental moral right to have these choices respected.
- People are not objects to be manipulated; it is a violation of human dignity to use people in ways they do not freely choose.

The Rights Approach

- Many different, but related, rights exist besides this basic one. These other rights (an incomplete list) can be thought of as different aspects of the basic right to be treated as we choose.
 - The right to the truth: We have a right to be told the truth and to be informed about matters that significantly affect our choices.
 - The right of privacy: We have the right to do, believe, and say whatever we choose in our personal lives so long as we do not violate the rights of others.

The Rights Approach

- The right not to be injured: We have the right not to be harmed or injured unless we freely and knowingly do something to deserve punishment or we freely and knowingly choose to risk such injuries.
- The right to what is agreed: We have a right to what has been promised by those with whom we have freely entered into a contract or agreement.

The Rights Approach

- In deciding whether an action is moral or immoral using this second approach, then, we must ask:
 - Does the action respect the moral rights of everyone?
 - Actions are wrong to the extent that they violate the rights of individuals; the more serious the violation, the more wrongful the action.

The Fairness or Justice Approach

- The fairness or justice approach to ethics has its roots in the teachings of the ancient Greek philosopher Aristotle, who said that "equals should be treated equally and unequals unequally."

The Fairness or Justice Approach

- The basic moral questions in this approach are:
 - How fair is an action?
 - Does it treat everyone in the same way, or does it show favoritism and discrimination?

The Fairness or Justice Approach

- Favoritism gives benefits to some people without a justifiable reason for singling them out.
- Discrimination imposes burdens on people who are no different from those on whom burdens are not imposed.
- Both favoritism and discrimination are unjust and wrong.

The Common-Good Approach

- The Common Good approach to ethics assumes a society comprising individuals whose own good is inextricably linked to the good of the community.
- Community members are bound by the pursuit of common values and goals.
- Examples?

The Common-Good Approach

- The common good is a notion that originated more than 2,000 years ago in the writings of Plato, Aristotle, and Cicero. More recently, contemporary ethicist John Rawls defined the common good as "certain general conditions that are...equally to everyone's advantage."

The Common-Good Approach

- In this approach, we focus on ensuring that the social policies, social systems, institutions, and environments on which we depend are beneficial to all.
- Examples of goods common to all include affordable health care, effective public safety, peace among nations, a just legal system, and an unpolluted environment, and even a smoke-free Lincoln!

The Common-Good Approach

- Appeals to the common good urge us to view ourselves as members of the same community, reflecting on broad questions concerning the kind of society we want to become and how we are to achieve that society.
- While respecting and valuing the freedom of individuals to pursue their own goals, the common-good approach challenges us also to recognize and further those goals we share in common.

The Virtue Approach

- The virtue approach to ethics assumes that there are certain ideals toward which we should strive, which provide for the full development of our humanity.
- These ideals are discovered through thoughtful reflection on what kind of people we have the potential to become.

The Virtue Approach

- Virtues are attitudes or character traits that enable us to be and to act in ways that develop our highest potential.
- They enable us to pursue the ideals we have adopted: Honesty, courage, compassion, generosity, fidelity, integrity, fairness, self-control, and prudence are all examples of virtues.

The Virtue Approach

- Virtues are like habits; that is, once acquired, they become characteristic of a person. Moreover, a person who has developed virtues will be naturally disposed to act in ways consistent with moral principles. The virtuous person is the ethical person.

The Virtue Approach

- In dealing with an ethical problem using the virtue approach, we might ask:
 - What kind of person should I be?
 - What will promote the development of character within myself and my community?

Ethical Problem Solving

These five approaches suggest that once we have ascertained the facts, we should ask ourselves five questions when trying to resolve a moral issue:

1. What benefits and what harms will each course of action produce, and which alternative will lead to the best overall consequences?
2. What moral rights do the affected parties have, and which course of action best respects those rights?

Ethical Problem Solving

3. Which course of action treats everyone the same, except where there is a morally justifiable reason not to, and does not show favoritism or discrimination?
4. Which course of action advances the common good?
5. Which course of action develops moral virtues?

Ethical Problem Solving

- This method is not meant to provide an automatic solution to moral problems.
- It is meant to help identify most of the important ethical considerations.
- In the end, we must deliberate on moral issues for ourselves, keeping a careful eye on both the facts and on the ethical considerations involved.

Case # 1

- James & Penny
- James is your ex-husband and Penny is the woman he had affair with while you were married. They are approaching you for some marital counseling?
- Do you take the case?
- Do you keep the case in your agency?

Moral Principles

- Kitchener (1984) has identified five moral principles that are viewed as the cornerstone of our ethical guidelines.
 1. **Autonomy** is the principle that addresses the concept of independence, acknowledging the right of another to choose and act in accordance with his or her wishes or beliefs.
 2. **Nonmaleficence** is the concept of the obligation to not cause harm to others.

3. **Beneficence** reflects the counselor's responsibility to contribute to the welfare of the client. Simply stated it means to do good, to be proactive and also to prevent harm when possible.
4. **Justice** does not mean treating all individuals the same.
5. **Fidelity** involves the notions of loyalty, faithfulness, and honoring commitments.

Case # 2

- ROSIE
- Rosie a a dog breeder and her dogs are your favorite. She is not able to pay for her counseling but is willing to trade you a puppy from her recent litter for your services. Her puppies cost up to \$2,000 retail.
- Do you trade?
- Do you take a reduced amount for the dog?

Ethical Problem Solving

- These five approaches suggest that once we have ascertained the facts, we should ask ourselves five questions when trying to resolve a moral issue:
- What benefits and what harms will each course of action produce, and which alternative will lead to the best overall consequences?

-
- What moral rights do the affected parties have, and which course of action best respects those rights?
 - Which course of action treats everyone the same, except where there is a morally justifiable reason not to, and does not show favoritism or discrimination?
 - Which course of action advances the common good?
 - Which course of action develops moral virtues?

Ethical Decision Making Model

1. Identify the Problem
2. Apply the Code of Ethics
3. Determine the nature and dimensions of the dilemma
4. Generate potential courses of action
5. Consider the potential consequences of all options and determine a course of action
6. Evaluate the selected course of action
7. Implement the course of action

Identify the Problem

Gather as much information as you can to illuminate the situation.

- Be as specific and objective as possible
- Write ideas on paper may help gain clarity
- Outline the facts - separate out innuendos, assumptions, hypotheses, or suspicions
- Ask yourself: Is it an ethical, legal, professional, or clinical problem? Is it a combination of more than one of these? If a legal question exists, seek legal advice.

Apply the Code of Ethics

If there is an applicable standard or several standards and they are specific and clear, it should lead to a resolution of the problem.

To apply the ethical standards - essential to read them carefully and understand their implications.

If the problem is more complex and a resolution does not seem apparent, this is a true ethical dilemma and needs to proceed with further steps in the ethical decision making process.

Determine the nature and dimensions of the dilemma

Consider the moral principles

Decide which principles apply to the situation, determine which principle takes priority in this case.

In theory, each principle is of equal value, which means that it is your challenge to determine the priorities when two or more of them are in conflict.

Nature and dimensions of the dilemma...

- Review the relevant, current professional literature
- Consult experienced professional colleagues and/or supervisors
- Consult state or national professional associations to see if they can provide help with the dilemma.

Generate potential courses of action

Brainstorm as many possible courses of action as possible.

Be creative, consider all options.

If possible, enlist the assistance of at least one colleague to help you generate options

Consider potential consequences of all options - determine a course of action

Consider the information gathered and priorities you have set, evaluate each option and assess the potential consequences for all the parties involved.

Ponder the implications of each course of action for the client, for others who will be affected, and for yourself as a counselor.

Eliminate the options that clearly do not give the desired results or cause even more problematic consequences.

Review the remaining options to determine which option or combination of options best fits the situation and addresses the priorities you have identified.

Evaluate selected course of action

Review selected course of action - see if it presents any new ethical considerations.

Stadler (1986) suggests applying three simple tests to the selected course of action to ensure that it is appropriate.

Stadler's (1986) Three Tests

- In applying the **test of justice**, assess your own sense of fairness by determining whether you would treat others the same in this situation.
- For the **test of publicity**, ask yourself whether you would want your behavior reported in the press.
- The **test of universality** asks you to assess whether you could recommend the same course of action to another counselor in the same situation.

Stadler's (1986) Three Tests cont'd

- If the course of action you have selected seems to present new ethical issues, then you'll need to go back to the beginning and reevaluate each step of the process.
- Passing the tests of justice, publicity, and universality and satisfied that you have selected an appropriate course of action, then you are ready to move on to implementation.



Implement the course of action

Taking the appropriate action in an ethical dilemma is often difficult.

The final step involves strengthening your ego to allow you to carry out your plan.

After implementing your course of action, it is good practice to follow up on the situation to assess whether your actions had the anticipated effect and consequences.

Distinction between Ethical and Legal Dilemmas

Ethics

Ethics are aspirational
Concern professional practices and standards
If not self-monitored, regulatory agencies step in
Safeguard autonomy of professional workers
Dynamic and evolving
Often a matter of opinion
Not always a legal concern

Legal

Determined by federal or state statutes
Corrective measure, effort to police profession
Litigious fears versus professional integrity
Implemented if ethics are consistently violated
Civil and criminal law
Enforcement sets precedence

Ethical Values

Be good

Do good

and

Above All, Do No Harm

Code of Ethics

Effective 6/30/01

5-001 Code of Ethics

5-001.01 All Certified Compulsive Gambling Counselors must:

1. Provide and support the highest quality of care in the recovery of all persons served which must include referring, or releasing an individual to other health professionals or services, if that is in the individual's best interest.
2. Respect the unique characteristics of the professional counseling relationship which demands sound, non-exploitive inter-personal transactions between client and counselor.

Ethics

3. Respect the therapeutic needs of the client by not engaging in a personal or sexual relationship with the client.

4. Respect the therapeutic needs of the client by not conducting any business or political transactions with the client that may jeopardize their therapeutic needs.

5. Adhere to a strict policy of non-discrimination in the provision of services by not discriminating based on race, disability, appearance, religion, age, sex, intelligence, sexual orientation, national origin, marital, economic, educational, or social status.

Ethics

6. Respect the basic human rights of all clients, including their right to make their own decision, to participate in any plans made in their interests, and to reject services unless a court order stipulates otherwise.

7. Adhere to the legal requirements for confidentiality of all records, materials, and communications regarding clients, their families and significant others.

8. Assess their personal and professional strengths and limitations, biases and effectiveness on a continuing basis. Strive for self-improvement, and assume responsibility for professional growth through further education and training.

Ethics

9. Respect the rights and views of fellow colleagues and members of other professions.

10. Refrain from the abuse of mood-altering chemicals or gambling in a manner that will reflect adversely on the credibility and integrity of the profession.

11. Report evidence of incompetent, unethical, unprofessional, or illegal practice of a certified compulsive gambling counselor.

Ethics

5-002 Grounds on which the Division may deny certification, refuse renewal of, or discipline a certificate holder:

There are 42 grounds.

2. Conviction of a misdemeanor or felony under state law, federal law, or the law of another jurisdiction, and which if committed within this state, would have constituted a misdemeanor or felony under state law, and which has a rational connection with the applicant's or certificate holder's fitness or capacity to practice the profession.

Ethics

5-002 Grounds on which the Division may deny certification, refuse renewal of, or discipline a certificate holder (continued)

4. Practice of the profession while the ability to practice is impaired by alcohol, controlled substances, narcotic drugs, physical disability, mental disability, or emotional disability.

16. Grossly immoral or dishonorable conduct evidencing unfitness, or lack of proficiency sufficient to meet the standards required for practice of the profession.

Ethics

5-002 Grounds on which the Division may deny certification, refuse renewal of, or discipline a certificate holder (continued)

36. Entering into a dual relationship with a client which includes, but is not limited to: a business, political or close personal relationship, that impairs the certificate holder's professional judgment, or exploits the client.

42. Use of untruthful or improbable statements, or flamboyant, exaggerated, or extravagant claims concerning certificate holder's professional excellence or abilities, in advertisements or otherwise.

Client Rights



Client Rights

- Non-discrimination:
 - **Autonomy**: a person's right to make independent choices; the power of self-direction
 - **Dignity**: the quality of being worthy of esteem or respect; the earning or the expectation of personal respect or of esteem
 - **Respect**: respect is the objective, unbiased consideration and regard for the rights, values, beliefs and property of all people.
- Confidentiality
- Responsibility and Competence



Non-discrimination

- Do not discriminate based on race, religion, age, gender, disability, national ancestry, sexual orientation or economic condition
- Avoid bringing personal or professional issues into the counseling relationship
- Be knowledgeable about disabling conditions and make accommodations

Confidentiality



- Do not disclose confidential information without proper consent.
- You must inform the client of his/her rights regarding confidentiality in writing.
- Make appropriate provisions for maintenance of confidentiality and ultimate disposition of confidential records.

Confidentiality 42 C.F.R. Part 2

Drug and alcohol treatment and prevention providers are now covered by two distinct federal laws that protect patient's privacy. For nearly thirty years, the federal law governing Confidentiality of Alcohol and Drug Abuse Patient Records and its implementing regulations, 42 C.F.R. Part 2 ("42 C.F.R. Part 2"), have protected information regarding patient of drug and alcohol treatment and prevention programs.



Legal Action Center, (2003) page. 9

Confidentiality 42 C.F.R. Part 2

(continued)

The General Rule:

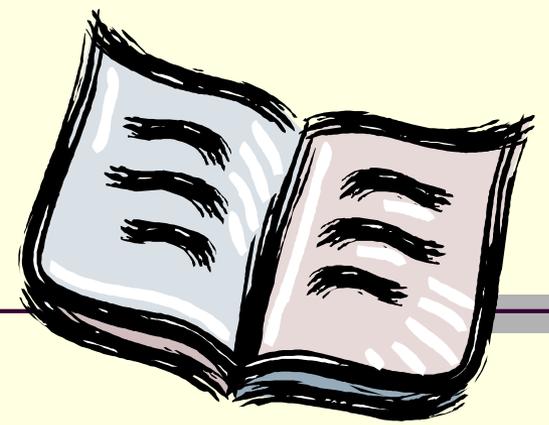
Except under certain specified conditions, both HIPAA and 42.C.F.R Part 2 prohibit the use and disclosure of records or other patient related information. 42 C.F.R 2.12, 2.13(a); 45 C.F.R 164.502(a). This prohibition on unauthorized disclosure applies whether or not the person seeking information already has the information, has other means of obtaining it, enjoys official status, has obtained a subpoena or warrant, or is authorized by the state. 42 C.F.R 2.13(b), 2.20.

Legal Action Center, (2003) pge.14-15

Responsibility

- Respect institutional policies and management functions . . . take initiative toward improving such policies if it will better serve the interest of the client.
- As an educator, help others acquire knowledge and skills.
- If aware of unethical conduct or unprofessional modes of practice, report to appropriate authorities.

Competence



- Recognize need for ongoing education
- Recognize boundaries and limitations
- Recognize the effect of impairment, be willing to seek appropriate treatment for oneself or a colleague. . .support peer assistance programs.
- Maintain high standards of professional competence and integrity.

Mandatory Reporting

- Duty to Warn (Tarasoff):
Threat to Self or Others
- Child Abuse
- Sexual Misconduct of a
Therapist



Boundary Setting



Boundary Issues

- Do No Harm – Non-maleficence
- Transference – client to counselor
- Counter-Transference – counselor to client

Transference and Counter Transference

Transference

- A series of psychological experiences are revived, not as belonging to the past, but as applying to the clinician at the present moment.
- Client's unconscious shifting to the analyst of feelings and fantasies that are reactions to significant others in the client's past.
- Transference allows clients to understand and resolve "unfinished business" from these past relationships.
 - Clients learn to provide themselves with reassurance, rather than seeking confirmation from others in the environment

Corey, G. (1996), *Theory and Practice of Counseling and Psychotherapy*.

Pacific Grove, CA: Brooks/Cole Publishing Company.



Transference and Counter Transference

Counter Transference

- the reactions therapists have toward their clients that may interfere with their objectivity
- Therapist unresolved needs – unless therapist is aware of own needs as well as own dynamics, it is very likely that their dynamics will interfere with the progress of therapy.

Corey, G. (1996), *Theory and Practice of Counseling and Psychotherapy*.
Pacific Grove, CA:Brooks/Cole Publishing Company.

Boundary Issues

- Dual Relationships
- Sexual and Affectionate Feelings versus Behaviors
- Remuneration: monetary compensation



Know “yourself”

It’s YOUR Ethical Responsibility

- Self-evaluation
- Continued education -- advanced
- Supervision – on-sight and/or off-sight

SELF ASSESSMENT

- **Ethical Problem Solving**
- Ask yourself is what I am doing or planning to do a violation of ethics, laws, rules, or agency policy?
- If yes, don't do it.
- If you are unsure:
 - Consult Supervision
 - Ask yourself what is the worst that could happen?
 - Ask yourself what would the headline be?
 - Am I proud of this course of action?
- Create a plan to lessen the likelihood of a similar situation happening to yourself or someone else in the future.

Summary: Ethics

Key points to remember:

- “Be good, do good, and above all – do no harm.”
- Distinguish among ethics, morals & legalities.
- Client rights are always foremost.
- Your ethics can greatly impact the quality of client care and the image of the profession.
- Boundary issues start with the small, innocent transgressions.

References

Adams, R., & Gallon, S. (1997a). *Entry level addiction counselor competencies*. Portland, OR: Northwest Regional Educational Laboratory Report.

Center for Substance Abuse Treatment (1999). *Addiction counselor competencies: The knowledge, skills, and attitudes of professional practice* (DHHS Publication No. SMA 99-3313). Washington, DC: U.S. Government Printing Office.

Center for Substance Abuse Treatment and the Northwest Frontier Addiction Technology Transfer Center (2003). *Clinical Supervision: Building Chemical Dependency Counselor Skills*. Salem, OR: NFATTC

Cournoyer, B (2005). *The social work skills workbook (4th ed.)*. Belmont, CA: Brooks/Cole.

References

Culbreth, J., & Borders, L.D. (1999). Perceptions of the supervisory relationship: Recovering and nonrecovering substance abuse counselors. *Journal of Counseling and Development, 77*, 330-338.

Greenberg, J. S. (1999). *Comprehensive Stress Management*. Boston, MA: WCB McGraw-Hill.

Long, J., Lawless, J., & Dotson, D. (1996). Supervisory Style Index: Examining supervisees' perceptions of supervisor style. *Contemporary Family Therapy, 18*, 191-201.

Loganbill, C., Hardy, E., and Delworth, U. Supervision: A Conceptual Model. *The Counseling Psychologist, 1982, 10*(1), 3-42.

Miller et al (2004). A Randomized Trial of Methods to Help Clinician Learn Motivational Interviewing. *The Journal of Counseling and Clinical Psychology, 72*(6), 1050-1062.

Nathan, P.E., & Skinstad, A.H. (2003). *Some Facts and Findings on Clinical Supervision of Substance Abuse Counselors*. Powerpoint presentation. Iowa City, IA: PATTC.

Pearson, Q. (2001). A Case in Clinical supervision: A framework for putting theory into practice. *Journal of Mental Health Counseling, 23*(2), 174-184.

References

Powell, D. (1991). Supervision: Profile of a clinical supervisor. *Alcoholism Treatment Quarterly*, 8, 69-86.

Reeves, D., Culbreth, J., & Greene, A. (1997). Effect of sex, age, and education level on the supervisory styles of substance counselor supervisors. *Journal of Alcohol and Drug Education*, 43, 76-86.

Skovholt, T., & Ronnestad, M. (1992). *The Evolving Professional Self: Stages and Themes in Therapist and Counselor Development*. New York, NY: John Wiley & Sons, Inc.

Stoltenberg, C., Pierce, R., & McNeill, B. (1987). Effects of experience on counselor trainees' needs. *The Clinical Supervisor*, 5, 23-32.

Stoltenberg, C., & Delworth, U. (1987). *Supervising Counselors and Therapists: A Developmental Approach*. San Francisco, CA: Jossey-Bass Inc., Publishers.