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## Dual Relationships and Pastoral Counseling: Asset or Liability?

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## **DUAL RELATIONSHIPS AND PASTORAL COUNSELING: ASSET OR LIABILITY?**

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Dual relationships are proscribed in the standards of ethical conduct for most professional groups that provide counseling or psychotherapy. Dual relationships are thought to be unethical because they cloud the clinical judgment of the counselor and may present conflicts of interest that prevent the counseling relationship from being beneficial. Pastors frequently provide counseling for troubled persons or families, yet they often maintain other roles and relationships with these persons and families. This article addresses the issue of the inevitability of dual relationships in pastoral counseling. Courses of action for handling dual relationships in pastoral counseling are identified.

Most counseling professionals voluntarily adhere to ethical standards that caution against entering into counseling relationships with clients that might constitute dual relationships, which are seen as a violation of ethical, legal, and clinical standards (Herlihy & Corey, 1992; Pope, 1985). Dual relationships can take many forms but are essentially those in which the counselor and client also have another personal relationship together that is composed of roles such as teacher and student, employer and employee, or mutual relatives or close friends (Corey, Corey, & Callanan, 1993). It is believed that these other roles are incompatible with the counseling relationship because they impair the counselor's clinical judgment and objectivity, increase the risk of exploitation of the client, and conflict with the interests of the client (American Association for Marriage and Family Therapy, 1991; American Counseling Association, 1995; American Psychological Association, 1992; National Association of Social Workers, 1996).

The issue of dual relationships is particularly salient for pastors, who are often the first professionals to whom people turn when trying to cope with crises and transitions in their lives. A nationwide survey sponsored by the Joint Commission on Mental Health found that when people perceive themselves as having a personal problem, 42% of them would consult a clergy person, whereas only 29% would consult a nonpsychiatric physician, and only 31% would consult a mental health professional (Gurin, Veroff, & Feld, 1960). Although these percentages have shifted somewhat in recent decades, a substantial portion of the public (39%) continue to use pastors and other professional church staff for their counseling needs (Veroff, Kulka, & Dorran, 1981).

In many cases, however, establishing a counseling relationship with one's pastor or other church staff counselor may constitute a dual relationship. Pastors and their parishioners often relate to each other in a variety of roles in carrying on the teaching and business of the local church. If a counseling relationship is also established, is there a conflict of interest? Can confidentiality be

maintained? Are there steps that can be taken to minimize potential harm? This article explores these issues.

## **THE PROFESSION OF PASTORAL COUNSELING**

The issue of dual relationships cannot be adequately understood without first addressing the lack of clear definition of what constitutes pastoral counseling. In the section that follows, we give a brief history of the discipline and an overview of the current debate about its parameters.

Pastoral counseling apparently took root as a profession in apostolic times. The New Testament clearly exhorted early Christians to follow the example of Christ, who showed concern for all who came in contact with him. The performance of good works became specialized over time, and the tradition of *cura animarum* or "the care of souls," was established in the early centuries of the church (Clebsch & Jaekle, 1964). In our century, Freud's theory of personality influenced the development of pastoral counseling as a discipline requiring specialized knowledge and training. In 1964, in recognition that most clerics were engaged in counseling to some extent, the leadership of the American Foundation of Religion and Psychiatry organized the American Association of Pastoral Counselors (AAPC). The purposes of the AAPC were to enhance professional and ecumenical interaction, promote pastoral counseling as a profession, identify and promote its standards, and encourage research. The AAPC still sponsors a scholarly refereed quarterly, *The Journal of Pastoral Care*. *Pastoral Psychology*, a privately published journal, is another major quarterly in the field.

Despite these organizational developments, there is wide variety in the conceptualization of the pastoral counselor's role in the client's life (Beck, 1997). Certainly, not all religious professionals who counsel belong to, or agree with, the purposes and practices advanced by the AAPC. For some, counseling has an expressly religious purpose. For example, Braceland and Farnsworth (1969) saw the counselor and the client forming a special relationship in which God was the third party, and the goal of counseling was to lead the client to more adequate values and a better understanding of his or her relationship with others and with God. Dueck (1987), in the same vein, wrote that "Christian counseling ultimately seeks to assist the counseled in achieving identity as a member of the People of God" (p. 247). Counselors with this emphasis often believe they must be wary of trends that push them toward a "psychologized Christianity" (Dueck, 1987, p. 241).

Others, however, see pastoral counseling as quite compatible with secular psychotherapy in its goals and techniques. For example, Poling (1984) advocated an ethic of pastoral care that works in such a way that "the persons and communities at stake become larger--more unified, more creative, and more just" (p. 113). Burck (1991), whose chapter titled *Pastoral Care and Clergy Ethics* is part of a comprehensive project of The Park Ridge Center for the Study of Health, Faith, and Ethics, wrote that pastors

strive to enhance the independence and authenticity of persons. We seek to enhance their moral decision making and acting by helping them study and identify their values. We seek to strengthen their ability to act morally by helping them sort out what is going on inside themselves, what the influences on their lives are, and so on. (p. 185)

Howard Clinebell (1984), a provider of pastoral counseling textbooks and clinical pastoral education for more than 20 years, depicted pastoral counseling as one dimension of pastoral care, that is "the board, inclusive ministry of healing and growth within a congregation and its community, through the life cycle" (p. 26). Pastoral counseling, according to Clinebell, is the utilization of a variety of healing (therapeutic) methods to help people handle their problems and crises more growthfully and thus experience healing of their brokenness. Pastoral counseling is a reparative function needed when the growth of persons is seriously jeopardized or blocked by crises... The overarching goal of all pastoral care and counseling (and of all ministry) is to liberate, empower, and nurture wholeness centered in the Spirit. (p. 26)

## **Summary and Implications**

Is pastoral counseling primarily a religious or a secular activity? This question is not easily answered. If one reads the Code of Ethics of the AAPC (1994), it is clear that the ethical guidelines of the profession are very similar to ethical guidelines of most secular counseling professions. Therefore, from the perspective of the AAPC, one can surmise that it is a secular activity using religious themes and settings. However, not all individuals who practice see themselves as counselors (P. Davis, personal communication, July 13, 1997). For these individuals, pastoral counseling may be construed as a religious activity that occasionally borrows tools and techniques from the secular world. Overall, this lack of clear definition of pastoral contributes to the lack of consensus in the profession about how to view dual roles. This is the topic we discuss in the next section.

## **VIEWS OF DUAL RELATIONSHIPS AMONG PASTORAL COUNSELORS**

The Code of Ethics of the AAPC (1994) is instructive in its view that pastoral counselor should maintain relationships with clients on a professional basis. Sexual behavior toward clients and former clients is expressly considered unethical. Also, "on-going" counseling relationships with supervisees, students, and employees are to be avoided. Beyond these specific restrictions, however, the Code is less concrete about dual roles and "acknowledges the complexity of some pastoral relationships" (AAPC, 1994, Principle III, Section E). It states,

we avoid exploiting the trust and dependency of clients. we avoid those dual relationships with clients (e.g., business or close personal relationships) which could impair our professional judgment, compromise the integrity of the treatment, and/or use the relationship for our own gain. (Principle IV, Section H)

However, because not all pastoral counselors are members of the AAPC, it is important to consider other points of view in the pastoral counseling community regarding dual roles. A review of the relevant literature reveals a marked difference of opinion about the issue of dual relationships--when the issue is raised at all. Although it was not an exhaustive or representative survey, none of the several contemporary pastoral counseling books we borrowed from one church's counseling office mentioned the terms dual relationship or conflict of interest. Even Clinebell's (1984) classic text on pastoral care and counseling gives no reference to ethical issues in dual relationships. Clinebell does, however, acknowledge the unique role of the pastoral counselor:

The fact that ministers counsel within an ecclesial setting, a complex network of relationships where many people know each other and see their pastor in non-counseling situations, influences what happens in counseling significantly. The ongoing, day-to-day relationships with a network of people of all ages, in light and shadow, provide pastors with innumerable opportunities to help. Established, trustful relationships often provide a solid foundation for crises counseling, allowing persons to be helped in much less time than would be required to start from scratch with an unknown counselor.... The fact that pastors are part-time counselors with a variety of other functions that can complement as well as conflict with counseling, is another significant dimension of their uniqueness as counselors. (p. 69)

Thus, although Clinebell (1984) briefly acknowledges that it is possible for the pastoral counselor's other roles to conflict with his or her counseling role, on the whole he sees the multiple roles and relationships in which the counselor and client may be involved as assets rather than clinical liabilities. His view is apparently shared by many in the clerical community, where there is almost no published opposition to the clergy's function as counselor (Miller & Atkinson, 1988).

One notable exception to this stance is taken by Richard L. Krebs, who was a clinical psychologist for 15 years before entering the Protestant ministry. Krebs (1980) reached the conclusion that pastors should not do formal, long-term counseling. He based this conclusion on his own experience in the ministry, where, even though he was a trained clinician, he faced irresolvable problems of transference, role confusion, misplaced pastoral priorities, and lay expectations for cheap therapy. Similarly, Ruth Ochroch, past chair of the ethics committee of the American Psychological Association, believed the role of the pastoral psychotherapist to be characteristically dual, presenting "great obstacles to effective intervention that involve issues of competence and confidentiality" (Ochroch, 1987, p. 19).

### **Conflicts of Interest**

What, specifically, are the role confusions to which a pastoral counselor is particularly vulnerable? Miller and Atkinson (1988) argued that dual relationships are inevitable because there are key ways in which the clergy person is dependent on his or her congregation. These areas include (a) gifts and gratuities to the clergy person, (b) volunteer participation in both administering the internal congregational program and doing outreach to the community, and (c) the evaluation of and continued salary support for the clerical office itself. Given these dependencies, one can readily imagine scenarios that could constitute dual relationships. For example, suppose a pastoral counselor has a therapeutic relationship with a congregant, and the congregant and the pastor are also both on a committee that must evaluate and make recommendations concerning the church's counseling ministry. Or imagine a situation in which a lay member who is responsible for an important outreach ministry comes for counseling and discloses her knowledge of a secret scandal involving some of the other church staff. These hypothetical situations illustrate how the therapeutic goal of the clergy/counselor might be influenced by priorities other than the client's best interest.

Craig (1991) and R. Plunket (personal communication, November 23, 1993) saw another overlap of counseling and clerical roles that sometimes raises conflicts of interest. Counseling a client

gives the minister an awareness of problems that particular members are having. In fact, the issues presented in counseling situations often prompt the minister to feel a responsibility to educate the congregation to prevent these problems or to support those who may encounter them. Yet, if the counselee is present at these teaching occasions, he or she is likely to feel that the minister is being unduly personal or even breaking confidentiality. On the other hand, when all issues presented in private counseling are publicly avoided, the minister may not be responsibly responding to the needs of the congregation.

## **Summary and Implications**

We believe that the AAPC (1994) Code of Ethics provides the most useful guidelines for defining acceptable and unacceptable dual roles in pastoral counseling. Pastoral counselors, whether they are members of AAPC or not, would best serve their own and their clients' welfare by following these standards of care. One reason for this is because, in matters of legal accountability, a profession's standards of care, as delineated by its ethical guidelines, are typically used to determine liability. Failure to perform according to standards is often considered malpractice when a recognized profession is involved. Malpractice suits have been successfully brought against physicians, attorneys, and secular mental health professionals for some time. Pastoral counseling, however, has been seen historically as "protected" from malpractice suits by the First Amendment, because it has been said to be primarily a religious activity.

In the future, the professed First Amendment exclusion is likely to be challenged and proven inadequate as increasing numbers of pastoral counselors acquire secular clinical training, join professional counseling societies, and seek to obtain secular clinical licenses (Denham & Denham, 1986). In addition, pastoral counselors, especially those who do not belong to a professional association such as the AAPC, should be aware that when they distinguish themselves and their counseling activities from those of mental health professionals, they risk the loss of legal privileges that have been given increasingly to clients of licensed and appropriately credentialed mental health professionals by state and federal laws (e.g., Jaffee v. Redmond, 1996; for a thorough review, see DeBell & Jones, in press).

## **RECOMMENDATIONS FOR PASTORAL COUNSELORS**

In light of the problems posed by dual relationships, what recommendations can be made to those who practice pastoral counseling? The final section of this article reviews the positions that various writers have taken on the issue and suggests options for the reader's consideration.

### **Option 1: Forgo One of the Relationships**

Krebs (1980) and Ochroch (1987) insisted that the clinical relationship is so encumbered by dual roles that it cannot be ethically established. They advocated that one can be either a professional clinician or a professional clergyperson, but not both. In their view, one must choose between the two roles to perform them responsibly. Craig (1991) pointed out that those who do choose to leave the dual clergy clinician role for private practice "step into a world of professional expectations governed by relatively clear codes of conduct" in contrast to the roles of clergy,

which do not easily lend themselves to ethical codes. Finally, in addition to protecting the client, avoiding dual clerical-clinician roles may protect the mental health of the practitioner, as well. Tieman (1988) found that those who left pastoral counseling for private practice counseling experienced greater satisfaction in both their professional and personal life than did those who remained in parish ministry.

Miller and Atkinson (1988) argued that there is a catch-22 problem faced by a clergyperson in a congregational setting who also subscribes to a particular professional code of ethics, such as that of the American Psychological Association (APA). Such individuals who fill dual roles of clergy and counselor are, ironically, ethically bound to make every effort to avoid dual relationships that could impair their professional judgment (APA, 1992). In the ministry, however, it is apparently impossible to avoid such relationships. Miller and Atkinson argued that "clergy dependency on the laity so thoroughly permeates the clergy role in a congregation that objectivity seems impossible" (p. 122). Miller and Atkinson recommended that "clergy who do counseling . . . adopt a professional code of ethics and abide by it, even if this involves cessation of the counseling function" (p. 116).

Overall, this viewpoint advocates that clergy work to eliminate counseling from their core functions. They might continue to engage in crisis counseling, but would refer troubled parishioners to professional clinicians who can provide ongoing care in a less ethically ambiguous setting. This option would require the clergyperson to be especially vigilant to a congregant who discloses personal information or otherwise begins to assume a client role, particularly in a nonprofessional, nonprivate setting. In these cases, clergy would inform the congregant of their desire to avoid a dual role and suggest that the congregant contact them in a more private setting to receive a referral to a mental health professional.

## **Option 2: Be Both Counselor and Pastor, But Get Supervision**

Not all agree with Miller and Atkinson (1988). In one of the earliest textbooks on pastoral counseling, Oates (1959) wrote the following:

The pastor, regardless of his [sic] training, does not enjoy the privilege of electing whether or not he will counsel with his people. They inevitably bang their problems to him for his best guidance and wisest care. He cannot avoid this if he stays in the pastoral ministry. His choice is not between counseling or not counseling, but between counseling in a disciplined and skilled way and counseling in an undisciplined and unskilled way. (p. vi)

Clinebell's (1984) solution to this unavoidable dilemma is to advocate continued growth for those who counsel. He suggested personal therapy and supervision of one's pastoral relationships--including one's counseling relationships--as a means to this end. For Clinebell, the purposes of pastoral care are inseparable from the purposes of pastoral counseling, and the same ethics guide both forms of ministry.

Although this seamless view of caregiving roles has appeal, and although supervision may increase the counselor's perspicacity and reduce the risk of impaired objectivity, we believe that

the fact the dual relationship creates particular vulnerabilities for the client that remain unaddressed in this approach.

### **Option 3: The Continuum View and Informed Consent**

Corey et al. (1993) did not directly address the issue of dual relationships in pastoral counseling settings in their book *Issues and Ethics in the Helping Professions*, but they do treat the topic of dual relationships in a thorough and balanced way. These authors and experienced counselors would likely find several points of agreement with Clinebell (1984). Corey et al. argued that not all dual relationships can be avoided; they are not all necessarily harmful, and there may even be some beneficial aspects to some. Corey et al. agreed with Kitchener and Harding (1990), who asserted that it may be more useful to place dual relationships on a continuum ranging from those that are potentially seriously harmful to those that have little potential for harm, with practitioners evaluating the risks and acting accordingly. This also seems to be the viewpoint implicit in the AAPC (1994) Code of Ethics. Kitchener and Harding advocated that counselors can manage the risks inherent in dual relationships by securing the informed consent of clients and discussing with them both the potential risks and the benefits of dual relationships, remaining willing to talk with clients about any unforeseen problems and conflicts that arise, consulting with other professionals as a means of resolving any dilemmas, seeking supervision when dual relationships become particularly problematic or when the risk for harm is high, documenting any dual relationships in clinical case notes, and examining one's motivations for being involved in such relationships.

These recommendations are similar to Clinebell's (1984) in that active steps are taken to safeguard the pastoral counselor's objectivity. Kitchener and Harding (1990), however, were more explicit in suggesting that duality be specifically discussed within the counseling relationship, thereby giving clients greater awareness of the issues and greater opportunities for truly consensual participation in the relationship and the ambiguities that may arise because of it. In our view, this third option is the best choice. It is the most realistic in its view of duality, and it is the most ethical in its advocacy for clear informed consent.

### **Choosing the Degree of Confidentiality**

If clergy engage in counseling relationships with congregants, ethical practice requires that they inform clients at the outset of the degree of confidentiality they will maintain. Confidentiality can also be considered to range along a continuum. For example, the level of confidentiality practiced by mental health professionals is very strict and is limited only by laws (e.g., duty to protect, see *Tarasoff v. The Board of Regents of the University of California*, 1976), or by the client's written permission to disclose. This degree of confidentiality is also required by the Code of Ethics of the AAPC (1994). If the clergyperson chooses to maintain this level of confidentiality, the clergy's interest in their own needs or the needs of the congregation would have to be subjugated to the interests of the congregant/client. Regarding the examples given previously in this article, the clergyperson would allow potentially damaging situations to continue unchallenged in church matters and would not break client confidentiality in either direct or indirect ways. Although this might, of course, be difficult, it is an example of one of the consequences of mixing the need for confidentiality with a dual role relationship.



Toward the other end of the confidentiality continuum is the practice of limited confidentiality. This is not ethical for mental health professionals or for professional pastoral counselors who belong to the AAPC, because it violates their codes of ethics; however, it might provide an alternative for unaffiliated pastoral counselors who view their role as primarily a religious activity. In this case, clergypersons retain the right to violate confidentiality if, in their opinion, the disclosures by the congregant were such that they seriously violated the rights of other congregants or of the integrity of the church.

Regardless of the level of confidentiality the pastoral counselor chooses to maintain, ethical practice requires that congregants be given the right of full informed consent. This would necessitate a professional disclosure statement made to or given to potential clients before any counseling relationship began. The disclosure statement would address confidentiality, and it would provide examples that illustrate the limits of confidentiality and any implications (legal or otherwise) of these limits. If the congregant were unwilling to enter a counseling relationship under these stated limits, a list of referrals to mental health professionals in the community could be made. Counselor and congregant would both sign the form, and it would be maintained appropriately by the counselor as a confidential record. Some useful guidelines for developing consent forms can be found in Baird (1996), Everstine et al. (1980), and Pipes and Davenport (1990).

## CONCLUSION

Ultimately, the issue around which both sides of this debate about dual relationships in pastoral counseling turns is the welfare of the client-congregant. Although some authors have warned of opportunities to injure and confuse the client who seeks help in a pastoral setting, others have acknowledged the opportunity to provide a continuity of care to the client, within and without the confines of the counseling relationship. Regardless of which position is most defensible, we believe that pastoral counselors are best served by a thorough understanding of the issues surrounding dual relationships, by receiving regular supervision, and by providing potential clients with the opportunity for complete informed consent. Following these guidelines will promote ethical practice by pastoral counselors and, concurrently, help to protect the welfare of their clients.

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