

## **The Case of Allison: Understanding a Counseling Professional's Ethical and Legal Responsibilities**

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*The Council for Accreditation of Counseling and Related Educational Programs (CACREP) requires students in graduate counseling programs to take a course in professional orientation and ethics. Moreover, most counseling programs are accredited in more than one track (e.g., community/agency, school, rehabilitation, etc.), and students from each track will take professional orientation and ethics. Thus, the class may have a mix of students from various tracks, and a case study for each track should be developed. The Case of Allison is aimed at community/agency counseling students.*

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### **THE CASE OF ALLISON: PART A**

This is a first session, and the new client, Allison, sits quietly in the counselor's office. Allison's eyes are downcast, and her hands are folded. Allison is a heavy-set woman, made all more apparent by her choice in clothing, including thick blue jeans and a green fatigue jacket. She wears a confederate flag bandana tied tightly around her neck; and earrings, shaped like the iron cross, dangle from her ears. It is evident that Allison has not bathed or washed her hair, and her clothes are dirty and disheveled. Allison's file indicates that when she made her appointment, she provided the receptionist with the following information:

- Allison is 22 years old.
- She lives independently and alone.
- She graduated from high school, but sought no additional schooling
- She works 2<sup>nd</sup> shift in a hosiery mill.
- She has private insurance.
- She is having "family problems."

Allison tells the counselor that she has "always lived in the country," and that she is "just a simple country girl." Allison reveals that she has been experiencing feelings of anxiety and worry related to the possibility that she might have a gene mutation, increasing her risk for breast cancer. She says that she has not been sleeping well,

and eating excessively. She has gained approximately 25 pounds in the last six weeks. As Allison talks about these issues, she tends either to whisper, or to speak very softly. She becomes tearful as she talks, and it is clear she is experiencing strong emotions. However, her physical body remains unusually quiet and settled; she hardly moves at all. She makes little or no eye contact, and her hands remain calm and folded in her lap.

Allison describes her family as “hardly anybody.” She says she has contact with her father “once in awhile,” but explains he is “sick with the liver.” On probe, Allison reveals that her father is positive for Hepatitis B, which he most probably contracted through intravenous drug use. Allison states she has one older sibling, a sister, who lives “out west.” Allison says, “But we don’t never see her.”

Approximately 40 minutes into the session, Allison discloses that her mother, maternal grandmother, two maternal aunts, and one maternal female cousin “all died from a cancer” (i.e., breast cancer). She also relates that her mother “suffered a lot with the cancer, and tried to kill herself once, because they cut off her boob.” Allison reveals that one afternoon she found her mother comatose, and called Emergency Medical Services. Her mother was subsequently revived; but according to Allison, “died anyway a few weeks later.” At the conclusion of the first session, Allison indicates that “the talking helps.” At this point, Allison also eyes the counselor, and with a small smile says, “You’re real nice.” Subsequently, she and the counselor schedule a follow up appointment for two weeks later.

The counselor’s name is Bryson, and he received his master’s degree approximately 18 months ago. He is currently working in a private agency, which specializes in substance abuse counseling. Recently, Bryson passed the National Counselor Exam; it was his third attempt. He has submitted paperwork for certification as a National Certified Counselor. What should Bryson do to help Allison? What are Bryson’s ethical and/or legal responsibilities?

### **THE CASE OF ALLISON: PART B**

Two days prior to Allison’s follow up appointment, Bryson receives a phone call from Allison’s father. Her father introduces himself as David. On the phone, David sounds polite and soft-spoken. At the outset, David states that he understands that Bryson cannot talk about Allison’s case. Then David says: “I just thought it might help Allison if I let you know that she’s kind of always had some little problems. She’s never gotten along real good. She’s had a hard time; took it real bad when her mother died. That was the saddest week of my life. First I had to bury my wife, and

then I had to put my little girl in the hospital. She stayed up there in Raleigh about a year. Now I'm sick, and I guess you know I've got a little drug problem. Anyway, folks in Raleigh told me that Allison wasn't real smart, but she's real sweet." Bryson notes that Allison revealed none of this information in their first session.

Allison returns for her second session. Her appearance has changed dramatically. She has bathed, and washed her hair. She is wearing a tent-style dress with a bright and colorful floral design. She has on make-up, and her lipstick is hot pink. Her mood is impressively buoyant. As she enters Bryson's office, Allison extends her arms, and twirls in a circle, laughing as she says, "Well, what do you think of the new me?" Bryson notes that her eye contact is strong, and her speech is somewhat pressured. When Bryson asks Allison what has brought about such obvious changes, she giggles, saying, "YOU, silly! You are such a wonderful counselor! I just felt better all the way around after talking to you. I told my aunt that finally I've got me somebody who can help me!" Allison continues by saying, "I've been thinking about some things we could do in my counseling." Allison describes her counseling goals as "losing a bunch of weight," "joining a social group like Al-ANON," and "coming to see my favorite counselor every day!" She concludes with, "Oh yeah! And I want some new clothes and an exercise bike."

Quietly, Bryson says, "Allison, I heard from your dad a few days ago. He told me some things that I think we need to talk about." Allison's mood changes immediately and dramatically. She becomes intensely angry. She screams, "Don't talk to me about my father! Don't EVER, EVER, EVER say his name to me! He just wants me to go away. He sent me away before so he could just be with his old druggie friends. All he cares about is the needle. That's all he's ever cared about. That's all he's ever going to care about." Allison's anger is evident and extreme. In an effort to diffuse the anger, Bryson redirects Allison back to her "goals for counseling." Although Allison does not leave the session prematurely; her mood is sullen and morose. Her responses are limited to "yes," "no," "I don't know." Bryson limits counseling discussions to Allison's "counseling goals." She makes no eye contact. She sits quietly in her chair, hardly moving at all, with her hands folded. She is ambivalent about scheduling a follow-up appointment with Bryson. Shuffling out of the room, Allison mumbles, "Maybe I'll call you sometime."

What should Bryson do? What are Bryson's ethical and/or legal responsibilities?

**THE CASE OF ALLISON: PART C**

Two hours following Allison's second appointment, Bryson receives a phone call from Allison's aunt. Her aunt is obviously upset. Speaking frantically, she says: "I got your number from my brother. He said to call you because he's in rehab. We don't know what to do, or who to call. But Allison is out in the front yard shooting off an automatic rifle. My daughter and I live next door, and we can see her. The bullets are landing on the roof. We can't go outside. We're scared to death of Allison!"

What should Bryson do? What are Bryson's ethical and/or legal responsibilities?

**PART A / APPENDIX A**

1. What are the counselor's professional disclosure responsibilities?
2. How should the counselor address the issue of confidentiality?
3. How should the counselor address issues of suicidality, homicidality, child endangerment, and elder endangerment?
4. What are counselor's professional responsibilities related to building a relationship with this client?
5. Which basic counseling skills would be most useful in building this relationship?
6. Describe a preliminary assessment of Allison.
  - a. In validating the assessment, please outline primary questions.
  - b. Given these primary questions and possible responses, please outline follow-up or secondary questions.
7. Define short-term counseling goals for Allison.
8. Define long-term counseling goals for Allison.
9. May these goals be co-constructed with Allison? If so, then please outline the language utilized in co-construction, as well as describe the skills implemented in the co-construction process.
10. Describe a preliminary treatment plan for Allison.
11. Does it seem reasonable that Allison would be amenable to this treatment plan? If so, then please outline the language utilized, as well as describe the skills implemented, to explain the treatment plan to Allison.
12. Is this a case in which a "homework assignment" could be useful? If so, then please describe the "homework assignment," and its counseling purpose. If not, then please explain the reasons why an assignment would be less useful.
13. Does an additional appointment appear necessary? If so, then please outline the language utilized, as well as describe the skills implemented, in helping Allison understand that another session could be helpful. If not, then please explain the reasons why a follow-up appointment is less necessary.
14. Please describe this session's documentation, and the documentation process.

**PART B / APPENDIX B**

1. Please define the ethical and legal guidelines applicable to Allison's father's phone call.
2. Please discuss Bryson's level of professional preparedness. How is he "prepared" to help Allison?
3. Please talk about Bryson's decision to let Allison know her father had phoned. Is this information important for Allison to know? If so, please explain the importance. If not, please explain why Allison does not need to know her father has phoned.
4. Explain or draw hypotheses related Allison's upbeat mood.
5. Is it important to uncover the cause of Allison's mood change? If so, then please outline the language utilized, and skills implemented, in this discovery process. If not, then please explain why it is not important to explain Allison's mood change.
6. Is it necessary for Bryson to "reign in" Allison's mood? If so, then please outline language utilized, and skills implemented, in the "reigning in" process. If not, then please explain why it is not important to "rein in" her mood.
7. How should Bryson make sense of Allison's "goals for counseling?"
8. How does Bryson make sense of Allison's intense mood swing? Her anger?
9. Which, if any, ethical and legal issues should be reviewed with the client?
10. What is the current assessment of Allison?
  - a. To validate this assessment, please describe primary questions.
  - b. To validate this assessment and possible responses to primary questions, please describe secondary or follow-up questions.
11. Is it necessary to change or amend counseling goals? If so, then what changes or amendments are necessary? If not, then explain why the original goals are still appropriate.
12. If changes or amendments are necessary, then please outline the language utilized, and skills implemented, in co-constructing the new goals with Allison.
13. Is it necessary to change or amend the original treatment plan? If so, then what changes or amendments are necessary? If not, then explain why you believe the original treatment plan is still appropriate.
14. If changes or amendments are necessary, then please outline the language utilized, and skills implemented, in communicating these changes/amendments to Allison.

15. Is it necessary to assign Allison a homework assignment following the second session? If so, then please describe the assignment with related counseling objective. If not, then please explain why assigning homework would not be helpful.
16. Does a follow up appointment appear necessary? If so, and given Allison's exit from the session, how would you communicate the need for additional treatment?
17. Please describe this session's documentation, and the documentation process.

**PART C / APPENDIX C**

1. What are Bryson's ethical and legal responsibilities?
2. Is there an issue of imminent dangerousness at hand? If so, then please describe the appropriate response to this dangerous situation. If not, then please explain why the situation would not be deemed imminently dangerous.
3. What is the current assessment of Allison?
4. What are current counseling goals for Allison?
5. At this time, what would be the most appropriate treatment plan?
6. Please describe language utilized and skills necessary to implement the treatment plan.
7. Please describe this session's documentation, and the documentation process.