

Workplace matters

An awkward triangle? Sandi Mann

Princess Diana famously claimed that there were three people in her marriage to Prince Charles. While comparing therapy to a marriage may seem an inappropriate analogy, it does often seem, with workplace counselling, that there is also one person too many in the relationship. Like marriage, individual therapy works best when there are two people involved; a third person often causes messy complications and potentially awkward situations.

The relationship between counsellor and client is, as every therapist will be aware, based on trust, empathetic understanding and unconditional positive regard.¹ Underpinning these ideals are the basic tenets that support every client-counsellor relationship; those that put the client's needs first and foremost beyond most other considerations.

I say 'most', because, of course, there may be exceptional instances when the needs of the client are superseded by other needs; for example, should a client disclose criminal activity or intention to harm. But, generally, it is ethical and right that therapists work at helping the client in the most efficient and appropriate way possible, without regard to external influences.

When it comes to workplace counselling, however, matters are complicated by the sometimes intrusive presence of the third 'partner' – the company or organisation that is paying for the therapy.

The company's main concern is usually that the client be fit for work as quickly (and cheaply) as possible. Happily, this aim usually coincides with the benefits to the client's wellbeing – but not always.

The main complexities of the triangular relationship between client, counsellor and organisation often surrounds issues of confidentiality. While client confidentiality is always paramount, the therapist also has the employer to consider; as the UK Employee

Assistance Professionals Association states in its *Counsellors' Guide to Working with EAPs*, 'EAP providers have a contractual relationship and duty of care not only to those who are accessing their services for support, but to the employer that has contracted with the provider to deliver them.'² This can lead to anxiety about confidentiality for the client, which can hinder the therapeutic relationship. It is normal (and ethical) practice for the client to be required to approve any information released during therapy to any third party, irrespective of who is paying for treatment. This is easily accomplished with assessments and reports, but can get a little messier if the company unexpectedly phones the counsellor or otherwise engages in a verbal conversation. Great care has to be taken to protect the client's confidentiality, even when faced with pressure from the paying partner. It can become a juggling act; if it is in the client's interest to continue therapy, the therapist wants to ensure that the paying partner will continue to pay and thus needs to convince them of improvements or benefits – without revealing anything that has not been authorised.

Confidentiality issues can work the other way too; it is not unusual for a company representative to disclose confidential information to the counsellor about the client that the client hasn't herself divulged – often with the added request to 'not pass this on to the client'. This puts the counsellor in the uncomfortable position of knowing something about the client that the client doesn't know they know. Awkward.

Things can get even more awkward when there is animosity between client and company; this can happen for example when a client blames their mental health condition on the company or when they believe that the company is actively trying to get rid of them. In such cases, the counsellor must take care not to be drawn into a role beyond the scope of their remit.

While most organisations are savvy enough to appreciate the cost-benefit analysis of paying for therapy for a client (versus the far more significant cost of losing them to long-term sickness), some can be quite careful about budgets for therapy. In today's harsh economic climate, this is understandable; but sometimes paying out a little bit extra in the short term, or even agreeing to clients having 'top-up' or occasional refresher sessions, can reap benefits in the longer term.

Unlike a marriage, having a third person in the relationship can be managed successfully, and setting clear guidelines and expectations in advance (such as insisting on written communication only and explaining confidentiality) can often ensure that the 'third person' remains out of the therapy room as much as is possible.

References

- 1 Rogers C. *Client-centered therapy: its current practice, implications and theory*. Boston: Houghton Mifflin; 1951.
- 2 UK Employee Assistance Professionals Association. *Counsellors' Guide to working with EAPs*. [Online.] UK EAPA; 2014. <http://www.eapa.org.uk/wp-content/uploads/2014/10/Counsellors-Guide-to-working-with-EAPs-FINAL.pdf>.



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