

# Ethics: Anger Management and Domestic Violence

Presented by:

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This presentation is a condensation of a 6 hour seminar: **Ethical Concerns and Moral Neuroscience Considerations in Anger Management and Domestic Violence Counseling.**

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## Definitions

Ethics: a discipline dealing with what is good and bad and with moral duty and obligation; a set of moral principles.

Morals: One's particular values concerning what is right and wrong.

Negative ethical principles: prohibitions: "Thou shalt not..."

Positive ethical principles: aspirational: "Thou shall strive to..."

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# Three Spheres of Morality

Moral Belief: “What do I believe in? What moral principles guide me?”

Moral Judgement: “Is this good/right or bad/wrong?”

Moral Action: “What could I do? What have I done?”

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## Practicality, Legality, Ethics and Wisdom

Practicality: What is the *smart* thing to do?

Legality: What is the *lawful* thing to do?

Ethics: What is the *right* thing to do?

Integrated model: What is the *wise* thing to do?

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## Special Ethical Concerns in Anger Management and Domestic Violence Counseling

### Overlapping Questions

- 1) Question: who is our client?
- 2) How can we reconcile therapeutic treatment with participation in the criminal justice system?
- 3) How much are we willing to be agents of social control over people?

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## Who is Our Client? (NASW Code of Ethics)

“Social workers are cognizant of their dual responsibility to clients’ interests and the broader society’s interest...”

“However, ...responsibility to the larger society or specific legal obligations may on limited occasions supersede the loyalty owed clients, and clients should be so advised.”

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## How “Voluntary” are Voluntary Clients?

“Nobody comes to anger management or d.v. treatment without a shotgun at their back.”

Courts.

Spouse/romantic partner/family.

Work/school.

Church.

It is important to quickly ascertain a client’s “pressure points.”

## The Involuntary Client (NAMA Code of Ethics)

“In instances when clients are receiving services involuntarily, anger management professionals should provide information about the nature and extent of services and about *the clients’ right to refuse service.*”

[Italics added]

## Protecting the Client (NAMA Code of Ethics)

“When a court of law or other legally authorized body orders anger management professionals to disclose confidential or privileged information without a client’s consent and such disclosure would cause harm to the client, *anger management professionals should request that the court withdraw or limit the order as narrowly as possible* or maintain the records under seal, unavailable for public inspection.”

[Italics added]

## How Counselors Avoid taking Ethical Responsibility

- Deception: What might bring me to lie to a client or others?
- Causing harm: How could my effort to help someone ultimately hurt That individual or others?
- Greed: How do I balance my need to make a living with treating all who need help?
- Neglect: What do I avoid thinking about because I would feel moral discomfort? What could I do for clients that I don’t?

## Has This Happened to You?

“There is a lot of pressure to pretty much provide an inaccurate statement on a glossy shiny paper” [to say someone has made progress when they have merely attended anger management group sessions].

If I provide this document is it an example of:  
Deception? Causing harm? Greed? Neglect?

## Five Important Schools of Moral Reasoning

- 1) Deontology. *First do no harm.*
  - 2) Utilitarianism. *Do the best thing for the most people.*
  - 3) The Ethics of Care. *Relationship creates responsibility.*
- 
- 4) Natural Law. *Honor universal truths.*
  - 5) Virtue Ethics. *Do the right thing.*

## Five Schools/Five “Languages.”

IF:  
You think in one moral language.  
and  
Your client speaks in another moral language.  
then  
You won't make sense to each other.

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## Deontological Moral Thinking

Deontology: The theory of duty (“deon” is Greek word for “duty.”)

Immanuel Kant: best known advocate.

Focus: duties, obligations, rights.

Intent, not consequences, of action is a person's responsibility.

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## Deontology (3)

The Categorical Imperative: Version One.

*Act only on the maxim that you can will as a universal law.*

[R P-E: Seek and apply universal truths and allow no exceptions].

The Categorical Imperative: Version Two.

*Always treat humanity, whether in your own person or that of another, never simply as a means [to an end] but always as an end [in itself].*

## Two Critical Deontological Questions

How/when/where/why do we treat our anger management and/or domestic violence clients as means to an end rather than as an end in themselves?

How can we treat our anger management and domestic violence clients as ends in themselves?



## Utilitarian (Consequentialist) Moral Thinking

Identified with: Jeremy Bentham and John Stuart Mill.

The principle of utility:

“Actions are right in proportion as they tend to promote happiness, wrong as they tend to produce the reverse of happiness.”

Goal: to produce the greatest sum total of happiness for the greatest number of people.

## Consequentialism(2)

Intent matters, but results (consequences) are what count most.

Self and family theoretically no more important than others.

When goals/values conflict you must try to calculate the best long-term consequences for all – what promotes the most good for the most people.

## Justification for Mandated Counseling

Consequential argument:

Not “This is for your own good.”

But “This is for the good of all (including you).”

Here the common good trumps autonomy.

## Feminist Theory and Therapy

“...man (in contrast to woman) has continually turned away from his inner self and feeling in pursuit of both science and ethics. With respect to strict science, this turning outward may be defensible. With respect to ethics it has been disastrous.”

Nel Noddings.

## Feminism Definition

“An intellectual commitment and a political movement that seeks justice for women and the end of sexism in all forms”

From Mackinnon, B. and Fiala, A. (2015). *Ethics (8<sup>th</sup> Edition)*, p. 175.

## Two Divisions of Feminist Theory

- 1) The ethics of care.
- 2) The ethics of empowerment.

Integration of these perspectives: Feminist Therapy.

## The Ethics of Care

Primary moral obligations:

Prevent harm.

Help people thrive.

“Heinz” reinterpretation: “I’d go talk with the druggist.”

Justice vs. care.

The relationship is figural.

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## Ethics of care (cont.)

Nel Noddings: The mother’s voice has been silent in ethics.

Three keys:

Receptivity.

Responsiveness.

Relatedness.

Much care is unchosen (e.g., care of elderly parents)  
but interconnections don’t mean loss of autonomy.

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## Contrast with Traditional (Patriarchal) Ethics

### Traditional

Autonomy prized  
 Abstract  
 Universal/invariant laws  
 Fairness as standard of behavior  
 Justice  
 Rights  
 Contractual relationships

### Feminist

Relatedness prized  
 Concrete  
 Situational/personal  
 Compassion as standard  
 Care  
 Responsibilities  
 Natural relationships.

## “The Police are Coming” Quandary

### *Options:*

Say nothing.  
 Tell Joe.  
 Tell the group.  
 Cancel group.  
 Total refusal to “co-operate.”  
 Other: \_\_\_\_\_.

## The Police are Coming: Deontology Considerations

- 1) Duty: Do you have a duty in this situation to support the police?  
Do you have a duty to contest the police action?  
Do you have a duty to protect your group?  
Do you have a duty to protect your organization?
- 2) Does any invariant, universal law apply in this situation?
- 3) How can you treat your client as an end in himself in this situation as against a means to an end?

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## The Police are Coming: Consequentialism Considerations.

- 1) What immediate good or harm might come from your choice?
- 2) What good or harm might come from your action in the longer term?
- 3) Is there an action that you could take that would maximize the benefit to society while minimizing the damage to this individual and the group?

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## Police are Coming: Feminine Therapy Considerations

- 1) Does Joe's statement that he really trusts the group create a particular responsibility or obligation to you?
- 2) How can you best preserve the group's trust in you in this difficult situation?

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## The Police are Coming: Small Group Discussion.

Please share:

Your first gut feelings.

Thoughts regarding general duties that might apply.

Thoughts regarding maximizing the good/minimizing the bad in this situation.

Thoughts about the specific issue of trust maintenance with this person and group.

Most important: **WHAT WILL YOU DO?**

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## How do People Actually Make Moral Decisions?

Intuitionist Model.

Dual Process Model.

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## How Do People Actually Make Moral Decisions? The Intuitionist Model

Moral judgements:

- appear suddenly and effortlessly.
- are the result of an emotional, intuitive process.
- and then are justified cognitively after the fact.
- but really they are just obvious. (exp.: “Torturing others is wrong.”).

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## Making Moral Decisions? Dual Process Model

*Camera Analogy: Point and Shoot vs. Manual Mode.*

### **Point and Shoot:**

- a) automatic
- b) unconscious
- c) fast
- d) standardized responses to routine situations
- e) VMPFC utilized
- f) efficient but inflexible

### **Manual Mode:**

- personally adjusted
- conscious
- slow
- non-standardized to unusual situations
- DLPFC utilized
- inefficient but flexible

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## Review: Practicality, Legality, Ethics and Wisdom

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