

THE ETHICS OF PSYCHOLOGICAL COUNSELING: A COMPARATIVE STUDY OF CHINESE CERTIFIED PSYCHOLOGICAL COUNSELORS AND AMERICAN PSYCHOLOGICAL COUNSELORS

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Abstract: The present study has been designed to investigate and to compare the attitudes and beliefs of a sample of Chinese and a sample of American psychological counselors toward ethicalness of a range of counseling behaviors. It is hoped that the obtained findings would (1) provide some guidance to the psychological counselors, both in China and in the U.S., as to how to behave when confronted with such behaviors, and (2) aid the Chinese Psychological Society and the Chinese psychological counselors specifically, in the revision and extension of the existing Chinese psychological counseling ethics codes. The study's data were obtained from a sample of 402 Chinese certified psychological counselors currently practicing in China. Data from the American sample were obtained from the Gibson and Pope's (1993) nationwide survey conducted in the United States. The study's comparative results showed that there are significant differences between Chinese and American counselors in (1) the frequency of occurrence of ethical issues in their counseling practices, (2) their assessment of certain counseling behaviors as ethical or unethical, and (3) their confidence when assessing certain counseling behaviors as ethical or unethical. These findings are discussed in terms of the cultural and developmental differences between Chinese and American counselors.

Keywords: Attitudes and Beliefs, Chinese and American Psychological Counselors, the Ethics of Psychological Counseling

Introduction

The publication of the Psychologists National Occupational Standards on August 3rd 2001 not only marked the beginning of the psychological counseling profession in China, but also formally standardized psychologists' behaviors as well as providing guidelines for adhering to professional ethics for the first time. However, the Chapter of Professional Ethics in the Psychologists National Occupational Standards (both 2001 and 2005) failed to develop sufficient ethical details to guide Chinese psychological counselors in their practice. The

Chinese Psychological Society (CPS) has also developed a Code of Ethics for Counseling and Clinical Practice for its membership (Jan 2006 first draft, May 2006 second draft, Jan 2007 third draft). Although this CPS Code of Ethics for Counseling and Clinical Practice (January 2007) was developed 5 years later than the APA's ethics code (2002), it does provide useful ethical practice guidelines for Chinese psychologists and continues to play an important role in guiding the ethical practice of Chinese Psychologists to this day. Gibson and Pope (1993) noted that there has been no national study of the degree to which counselors as a professional group believe that the APA's ethics code is a valuable resource in guiding their conduct or their beliefs concerning whether a broad range of counseling behaviors are or are not ethical. The same situation exists in China where empirical research into the issue of ethics is rare.

There are a number of important reasons underlying the need to conduct research on Chinese psychological counselors' attitudes and beliefs of the ethical issues in practice. First, the beliefs of psychological counselors would influence their compliance and performance in practice with the psychological counseling ethics codes. Second, a nationwide ethics code in China needs a nationwide consensus. The work of finding a nationwide consensus for professional ethics to govern the practice of Chinese psychologists is therefore urgent. Third, the designation of behaviors as either ethical or unethical should be based on Chinese traditional culture, as well as current professional conception of what is acceptable and what is unacceptable. Fourth, counseling situations that pose dilemmas should be clearly identified and incorporated in the ethics code. This would provide some guidance to the psychological counselors as to how to behave when confronted with such situations.

Method

Participants

The study's sample was drawn from the population of Chinese certified psychological counselors who were registered with the Chinese Psychological Society and whose details are recorded with the National Labor Ministry. All participants were selected from hospitals, clinics, schools, and other places in major cities in China where professional counselors work.

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Instruments

The survey questionnaire employed in the present study was adapted from the one employed by Zhang et al. (2008). Based on Gibson and Pope's (1993) survey questionnaire, Zhang et al. translated it into Chinese using a forward-translation-to-back translation procedure and employed it in their research (Zhang, Qian & Yao, 2008). The adapted survey questionnaire includes two sections. The following presents a detailed description of each section of the survey questionnaire.

Section 1 consists of five items written to tap the participants' demographic characteristics, including their gender, age, work location, length of work experience, and counseling theoretical orientation.

Section 2 consists of a list of 90 behaviors that could occur in a counseling situation. These behavioral items were adapted from the Kenneth et al. (1987) study. Participants were asked to consider each behavior carefully and then to indicate (i) the frequency of its occurrence in their practice, (ii) whether they considered the behavior ethical, and (iii) how confident they were in their assessment of whether the behavior was or was not ethical. 'Frequency of occurrence' was to be rated on a 5-point Likert scale ranging from 1=Never, 2=Rarely, 3=Sometimes, 4=Fairly often, and 5=Very often. 'Ethical consideration' was to be rated on a dichotomous yes/no response format. 'Confidence' was to be rated on an 11-point scale ranging from 0=no confidence to 10=highest confidence. A careful reading of the original items employed in the Pope et al.'s (1987) study showed that 20 of these items (originally written for American counselors) are not relevant for Chinese counselors, for example, "performing forensic work for a contingency fee", "earning a salary which is a % of client's fee", and "making custody evaluation without seeing both parents". These 20 items were deleted.

Procedure

An invitation letter together with the survey questionnaire was emailed to each selected certified counselor. To increase the response rate, all participants were assured of their anonymity and the confidentiality of their responses. All completed questionnaires received were coded to ensure that there is no identifiable information to match the returned questionnaires with the participants.

Results

A total of 3,067 questionnaires were sent (emailed) to Chinese certified psychological counselors who were registered with the Chinese Psychological Society. An additional 49 questionnaires were handed directly to

potential respondents. The final sample consisted of 402 respondents, which represents a response rate of 7.75%. Table 1 presents the frequencies and percentages for the demographic variables of gender, age, work setting, and work experience.

Comparison of frequency of occurrence of ethical issues between American and Chinese counselors

In order to test the hypothesis that the frequency of occurrence of ethical issues will differ between Chinese and American psychological counselors, T-test analysis was conducted to compare the 'occurrence' data for 59 ethical issues that are encountered by both the Chinese counselors and American counselors (Kenneth et al. 1987). As the analysis required 59 comparisons, the alpha level (for rejecting the null hypothesis) was set at .01 level ($p < .01$) to lower the probability of committing Type I error. Thus, if the computed t-value is greater than 2.58, the difference in mean occurrence scores for that ethical variable between Chinese counselors and US is significant at the .01 level ($p < .01$). In the 59 ethical items compared, 40 items (67.8%) yielded significant differences in frequency of occurrence between Chinese counselors, and US while only 19 items (32.2%) showed no significant differences. Of the 40 items that showed significant differences in frequency of occurrence, 9 items (22.5%) showed higher frequency of occurrence among Chinese counselors than American psychologists, while 31 items (77.5%) showed higher frequency of occurrence among American counselors than Chinese counselors.

Comparison of ethical assessment of counseling behaviors between American and Chinese counselors

In order to test the hypothesis that there is a relationship between assessment of counseling behaviors as being ethical or not ethical and the ethnicity of the counselors (Chinese versus American), chi-square analysis was conducted on the 68 counseling behaviors that are relevant to both Chinese and American counselors. Once again, because multiple analyses were conducted, the alpha level was set at .01 in order to lower the probability of committing Type I error. Thus, if the computed chi-square value is greater than 6.64 for $df = 1$, the relationship between ethnicity (US versus Chinese) and their perception of that variable as ethical or not is significant at the .01 level ($p < .01$). It can be seen that the chi-square analysis yielded significant results for 56 (82.4%) of the 68 counseling behaviors. Thus, for each of these 56 counseling behaviors, there is a significant relationship between the ethnicity of the counselors and their assessment of that behavior as being ethical or not. Only 12 counseling behaviors (17.6%) showed no such relationship. Of the 56

counseling behaviors that showed significant relationship between counselors' ethnicity and their assessment of the behaviors as being ethical or not, 17 behaviors (30.4%) were assessed in opposite directions by the Chinese and American counselors. That is, the Chinese and American counselors differed in their views on whether or not these behaviors are ethical or not. The remaining 39 counseling behaviors (69.6%) were assessed in the same directions by the Chinese and American counselors. That is, they were similar in their views on whether or not these behaviors are ethical or not.

Comparison of confidence ratings on ethical issues between American and Chinese counselors

In order to test whether the Chinese and American counselors differ in their confidence ratings of their assessment of each of the 68 counseling behaviors as ethical or not, T-test analysis was conducted. Once again, as the analysis required 68 comparisons, the alpha level (for rejecting the null hypothesis) was set at $p < .01$ to lower the probability of committing Type I error. Thus, if the computed t-value is greater than 2.58, the difference in mean confidence scores for that ethical variable between Chinese counselors and US is significant at the .01 level ($p < .01$). The Chinese and American counselors differed significantly in their confidence ratings for 56 (82.4%) of the counseling behavioral items. They were similar in their confidence ratings for 12 (17.6%) of the counseling behavioral items. For the 56 items that yielded significant differences in confidence ratings, 48 items (85.7%) showed that the Chinese counselors were more confident than their American counterparts when assessing the ethicalness of these counseling behaviors. The American counselors were significantly more confident than the Chinese counselors in their assessment for only 8 of the 56 counseling behaviors. The overall mean confidence scores for the two groups showed that the Chinese counselors ($M=8.52$) were generally more confident in their assessment of the ethicalness of the listed counseling behaviors than the American counselors ($M=7.87$).

(See all tables in the last page)

Discussion

The findings from the present study show that there are clear differences in the frequency of occurrence of ethical issues, ethical assessment of such issues, and in the confidence ratings of the ethicalness of these issues between the study's Chinese counselor respondents and their American counterparts. These differences reflect both cultural and developmental differences between these two groups of counselors. Cultural differences relate to differences among

factors such as (1) how Chinese and Americans regard themselves in their societies (individualism versus collectivism), and (2) how they regard issues such as privacy, friendship, openness, independence, competition, freedom, etiquette, morality, and money. Developmental differences relate to differences in their level of development as counseling psychologists and include factors such as differences in developmental patterns, different work and living conditions in their respective countries, legal awareness, differences in their country's ethical codes, differences in their education and clinical training, and in the psychological counseling system itself. The present study's findings are discussed within the context of these cultural and developmental differences.

Comparison of frequency of occurrence of ethical issues between American and Chinese counselors

With regard to 'human relations', it seems more culturally acceptable/ethical for Chinese counselors than for American counselors to engage in multiple relationships as a way to cultivate and to sustain social relationships. From a developmental perspective, occurrence of multiple relations is not only understandable but may be inevitable as the first step toward building up public trust in their counseling profession. For the American counselors who are more culturally liberal, their perception of 'human relations' issues related more to sexual ("hugging a client", "kissing a client", "engaging in sexual fantasy about a client", "being sexually attracted to a client") than to social matters. With regards to the theme of 'fees and money', "charging a client no fee for therapy" and "selling goods to clients" are behavioral issues that reflect the cultural importance of cultivating and/or maintaining good relationships with clients. This is particularly true when Chinese counselors regularly engage in multiple relationships.

Comparison of ethical assessments on ethical issues between American and Chinese counselors

The similarity of their assessment on the ethicalness of 39 out of the specified 68 counseling behaviors suggests that there is a number of counseling behavioral issues that appear to be clear-cut in terms of their ethicalness/unethicalness as assessed by both groups of counselors.

The results also showed that the two groups of counselors disagreed in their assessment on the ethicalness of 17 out of the specified 68 counseling behaviors. Specifically, more Chinese counselors than American counselors considered the engagement in multiple relationships in their counseling practice as ethical. A possible reason for this difference in their ratings may lie with the two groups' perception of

multiple relationships either from an individualistic or collectivistic perspective. Chinese, being more collectivistic, emphasize the importance of interpersonal relationships and group cooperation, whereas Americans, being more individualistic, are more prone to emphasize the importance of individualism, independence, and freedom.

Comparison of confidence ratings on ethical issues between American and Chinese counselors

In the terms of 'confidence ratings of ethical issues', the findings showed that the Chinese counselors were generally more confident in their assessment of the ethicalness of the specified counseling behaviors than the American counselors. The higher confidence among the Chinese counselors in their ratings of the ethicalness/unethicalness of these counseling behavioral issues may be due to developmental differences between themselves and their U.S. counterparts on issues such as educational and clinical training, their respective country's psychological system, and knowledge of and adherence to legal and ethical codes. For example, for the theme of 'human relations', sexual-oriented behaviors such as "becoming sexually involved with a former client", "engaging in sexual fantasy about a client", and "being sexually attracted to a client", are clearly considered taboo in any formal interaction by the more conservative Chinese counselors (as opposed to the more liberal American counselors).

The study's findings showed that the American counselors were more confident in their assessment of the 'ethicalness' of counseling behaviors. For the American counselors, their higher confidence in the ethicalness of these issues reflects the premium they place on individual rights and obligations, as well as the right to privacy. This is not unexpected given the nature of American society that emphasizes independence and freedom on the one hand, and the recognition of obligations and boundaries that are circumscribed by the person's profession on the other.

Implications and Conclusion

Notwithstanding the above limitations, the study's findings carry some important implications for how Chinese counselors conduct their professional work as a function of how they perceive and evaluate the ethicalness of behavioral issues they encounter in their work. The findings also have implications for understanding the role that the Chinese government plays in guiding, standardizing, and professionalizing the psychological counseling industry.

In conclusion, the study's findings clearly show that differences in perception of certain ethical issues between Chinese and American counselors

result from cultural differences as well as from differences in their country's national conditions. The Gibson and Pope's research was conducted 13 years before that of Zhang et al.'s (2007) research and almost 17 years before that of the present study. Yet, the gap of professional ethical consciousness between Chinese and American counselors persists. As pointed out by Corey, Corey, and Callanan (1997), ethical codes should vary with different cultures to fit the local conditions and customs. In this respect, further revision of the existing code of ethics in China should not only be based on China's national conditions and the developmental patterns of the Chinese psychological counseling system, but should also take into account Chinese traditional thinking and traditional morality that underlie Chinese culture.

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Table 1: Content Analysis: Occurrence in Practice is Significantly More Frequent for Chinese than for American Counselors. (T: T value)

<i>Theme 1: Human Relations (includes unfair discrimination, sexual or other harassment, multiple relationships, conflict of interest, and exploitative relationships)</i>	<ul style="list-style-type: none"> • Providing therapy to one of your friends. (T: -11.67) • Accepting only male or female clients (T: -2.81) • Inviting clients to a party or social event (T: -6.95) • Providing therapy to your student or supervisee (T: -11.04) • Going into business with a former client (T: -3.97)
<i>Theme 2: Fees and money</i>	<ul style="list-style-type: none"> • Charging a client no fee for therapy. (T: -10.64) • Selling goods to clients (T: -2.84)
<i>Theme 3: Advertising and other deceptive statements (includes media presentations, and descriptions of workshops)</i>	<ul style="list-style-type: none"> • Advertising in newspapers or similar media. (T: -4.72) • Giving personal advice on radio, TV, etc. (T: -5.65)

Table 2: Content Analysis: Occurrence in Practice is Significantly More Frequent for American than For Chinese Counselors. (T: T Value)

<i>Theme 1: Human Relations (includes unfair discrimination, sexual or other harassment, multiple relationships, conflict of interest, and exploitative relationships)</i>	<ul style="list-style-type: none"> • Hugging a client. (T: 9.85) • Asking for favors (e.g., a ride home) from clients (T: 7.56) • Avoiding certain clients for fear of being sued (T: 6.52) • Kissing a client (T: 7.51) • Going to a client's special event (e.g., wedding) (T: 13.32) • Engaging in sexual fantasy about a client (T: 13.20) • Offering or accepting a handshake from a client (T: 14.81) • Being sexually attracted to a client (T: 19.54)
<i>Theme 2: Fees and money</i>	<ul style="list-style-type: none"> • Terminating therapy if client cannot pay (T: 3.27) • Accepting services from a client in lieu of fee (T: 6.19) • Using a collection agency to collect late fees (T: 13.35) • Raising the fee during the course of therapy (T: 20.58) • Allowing a client to run up large unpaid bills (T: 16.35) • Accepting goods (rather than money) as payment (T: 4.91) • Using a law suit to collect fees from clients (T: 7.27) • Accepting a gift worth less than \$5 from a client (T: 21.56) • Charging for missed appointments (T: 21.63)
<i>Theme 3: Privacy and Confidentiality (includes discussing the limits of confidentiality, recording, disclosures, and consultations)</i>	<ul style="list-style-type: none"> • Breaking confidentiality to report child abuse (T: 6.06) • Discussing clients (without names) with friends (T: 3.32) • Unintentionally disclosing confidential data (T: 12.99) • Limiting treatment notes to name, date, and fee (T: 12.25) • Refusing to let clients read their chart notes (T: 4.66) • Not allowing client access to testing report (T: 6.84) • Not allowing clients access to raw test data (T: 8.82)
<i>Theme 4: Competence and expertise (includes bases for scientific and professional judgments, personal problems and conflicts)</i>	<ul style="list-style-type: none"> • Telling a client you are angry at him or her (T: 15.21) • Using self-disclosure as a therapy technique (T: 7.66) • Telling clients of your disappointment in them (T: 6.26) • Crying in the presence of a client's (T: 10.77) • Utilizing involuntary hospitalization (T: 16.25) • Treating homosexuality per se as pathological (T: 4.35) • Having clients take tests (e.g., MMPI) at home (T: 10.02)

Table 3: Content Analysis: Ethical Themes Yielded by the 17 Counseling Behaviors that were Assessed Differently by the Chinese and American Counselors as either Ethical or Unethical (X: Chi-square Value)

<i>Theme 1: Human Relations (includes unfair discrimination, sexual or other harassment, multiple relationships, conflict of interest, third-party requests for services, exploitative relationships, and cooperation with other professionals)</i>	<ul style="list-style-type: none"> • Becoming social friends with a former client. (X: 19.28) • Providing therapy to one of your friends. (X: 49.27) • Providing therapy to someone referred by my friend. (X: 92.30) • Accepting only male or female clients. (X: 47.27) • Providing therapy to your student or supervisee. (X: 65.48) • Avoiding certain clients for fear of being sued. (X: 75.54) • Being sexually attracted to a client. (X: 145.77)
<i>Theme 2: Fees and money</i>	<ul style="list-style-type: none"> • Accepting services from a client in lieu of fee. (X: 39.02) • Using a collection agency to collect late fees. (X: 109.87) • Accepting goods (rather than money) as payment. (X: 55.77) • Earning a fee that is a percentage of client's salary. (X: 46.94) • Accepting a gift worth less than \$5 from a client. (X: 43.13)
<i>Theme 3: Competence and expertise (includes bases for scientific and professional judgments, personal conflicts, and delegation)</i>	<ul style="list-style-type: none"> • Telling a client you are angry at him or her. (X: 563.60) • Telling clients of your disappointment in them. (X: 124.09) • Utilizing involuntary hospitalization. (X: 368.94)
<i>Theme 4: Assessment (includes use of assessment, release of test data, and interpretation)</i>	<ul style="list-style-type: none"> • Not disclosing to a client the purpose of testing (X: 424.35) • Not allowing clients access to raw test data (X: 54.10)

Table 4: Content Analysis: Ethical Themes Yielded by the 39 Counseling Behaviors that were Assessed Similarly by the Chinese and American Counselors as either Ethical or Unethical

<i>Theme 1: Human Relations (includes unfair discrimination, sexual or other harassment, multiple relationships, conflict of interest, third-party requests for services, and exploitative relationships)</i>	<ul style="list-style-type: none"> • Filing an ethics complaint against a colleague. (X: 158.96) • Hugging a client. (X: 42.86) • Inviting clients to a party or social event. (X: 55.96) • Becoming sexually involved with a former client. (X: 19.27) • Seeing colleague's client without consulting her/him. (X: 63.21) • Sending holiday greeting cards to your clients. (X: 47.09) • Kissing a client. (X: 17.22) • Going to a client's special event (e.g., wedding). (X: 124.70) • Allowing a client to disrobe. (X: 106.25) • Borrowing money from a client. (X: 63.71) • Signing for hours a supervisee has not earned. (X: 92.93) • Treating homosexuality person as pathological. (X: 20.22) • Engaging in sexual fantasy about a client. (X: 21.66) • Offering or accepting a handshake from a client. (X: 54.80) • Going into business with a former client. (X: 17.05) • Helping a client file a complaint regarding a colleague. (X: 20.54)
<i>Theme 2: Fees and money</i>	<ul style="list-style-type: none"> • Charging a client no fee for therapy. (X: 21.66) • Accepting a client's gift worth at least \$50. (X: 7.04) • Raising the fee during the course of therapy. (X: 43.05) • Giving gifts to those who refer clients to you. (X: 36.00) • Charging for missed appointments. (X: 106.23) • Not disclosing your fee structure to a client. (X: 107.10)
<i>Theme 3: Privacy and Confidentiality (includes discussing the limits of confidentiality, recording, disclosures, and consultations)</i>	<ul style="list-style-type: none"> • Not allowing client access to testing report. (X: 16.15) • Breaking confidentiality to report child abuse. (X: 69.61) • Tape recording without client consent. (X: 102.86) • Discussing clients (without names) with friends. (X: 32.62) • Unintentionally disclosing confidential data. (X: 7.38)

	<ul style="list-style-type: none"> • Not telling a client of the limits of confidentiality. (X: 107.10) • Disclosing a name of a client to a class you are teaching. (X: 82.31)
<i>Theme 4: Competence and expertise (includes bases for scientific and professional judgments, personal problems and conflicts)</i>	<ul style="list-style-type: none"> • Using a computerized test interpretation service. (X: 107.10) • Using self-disclosure as a therapy technique. (X: 11.78) • Accepting client's decision to commit suicide. (X: 14.72) • Telling clients that their values are incorrect. (X: 14.32) • Crying in the presence of a client. (X: 317.51) • Providing services outside areas of competence. (X: 54.93) • Doing therapy while under influence of alcohol. (X: 83.16)
<i>Theme 5: Advertising and other deceptive statements (includes in-person solicitation, media presentations, and descriptions of workshops)</i>	<ul style="list-style-type: none"> • Advertising in newspapers or similar media. (X: 33.11) • Advertising accurately your counseling techniques. (X: 70.96) • Using an agency affiliation to recruit private clients. (X: 9.27)

Table 5: Content Analysis: Ethical Themes Yielded by the 48 Counseling Behaviors that were Assessed More Confidently as either Ethical or Unethical by the Chinese Counselors than by the American Counselors (T: T Value)

<i>Theme 1: Human Relations (includes unfair discrimination, sexual or other harassment, multiple relationships, conflict of interest, third-party requests for services, exploitative relationships, and cooperation with other professionals)</i>	<ul style="list-style-type: none"> • Becoming social friends with a former client. (T: -7.42) • Hugging a client. (T: -3.70) • Providing therapy to someone referred by my friend. (T: -15.57) • Accepting only male or female clients. (T: -6.87) • Inviting clients to a party or social event. (T: -7.44) • Asking for favors (e.g., a ride home) from clients. (T: -9.29) • Providing therapy to your student or supervisee. (T: -6.66) • Becoming sexually involved with a former client. (T: -7.33) • Avoiding certain clients for fear of being sued. (T: -12.05) • Sending holiday greeting cards to your clients. (T: -6.56) • Kissing a client. (T: -2.89) • Accepting a client's invitation to a party. (T: -8.29) • Going to a client's special event (e.g., wedding). (T: -6.33) • Engaging in sexual fantasy about a client. (T: -6.05) • Going into business with a former client. (T: -6.01) • Being sexually attracted to a client. (T: -6.61) • Helping a client file a complaint regarding a colleague. (T: -10.32)
<i>Theme 2: Fees and money</i>	<ul style="list-style-type: none"> • Charging a client no fee for therapy. (T: -3.75) • Terminating therapy if client cannot pay. (T: -9.45) • Accepting services from a client in lieu of fee. (T: -11.34) • Using a collection agency to collect late fees. (T: -6.82) • Accepting a client's gift worth at least \$50. (T: -8.01) • Raising the fee during the course of therapy. (T: -10.67) • Allowing a client to run up large unpaid bills. (T: -10.16) • Accepting goods (rather than money) as payment. (T: -10.35) • Earning a fee that is a percentage of client's salary. (T: -8.09) • Giving gifts to those who refer clients to you. (T: -5.28) • Using a law suit to collect fees from clients. (T: -9.42) • Selling goods to clients. (T: -5.24) • Accepting a gift worth less than \$5 from a client. (T: -7.66) • Charging for missed appointments. (T: -3.47)
<i>Theme 3: Privacy and Confidentiality (includes discussing the limits of confidentiality, recording, disclosures, and consultations)</i>	<ul style="list-style-type: none"> • Seeing a minor client without parental consent. (T: -7.87) • Discussing clients (without names) with friends. (T: -4.07)

<i>Theme 4: Competence and expertise (includes bases for scientific and professional judgments, personal problems and conflicts, and delegation)</i>	<ul style="list-style-type: none"> • Telling a client you are angry at him or her. (T: -4.96) • Using self-disclosure as a therapy technique. (T: -4.66) • Accepting client's decision to commit suicide. (T: -4.75) • Not prescreening group members. (T: -7.30) • Telling clients that their values are incorrect. (T: -4.08) • Telling clients of your disappointment in them. (T: -9.22) • Utilizing involuntary hospitalization. (T: -6.89)
<i>Theme 5: Assessment (includes bases for assessment, use of assessment, release of test data, assessment by unqualified persons, and interpretation)</i>	<ul style="list-style-type: none"> • Using a computerized test interpretation service. (T: -3.08) • Having clients take tests (e.g., MMPI) at home. (T: -5.27) • Refusing to let clients read their chart notes. (T: -9.37) • Not allowing client access to testing report. (T: -5.31) • Not allowing clients access to raw test data. (T: -4.32) • Unintentionally disclosing confidential data. (T: -3.89)
<i>Theme 6: Advertising and other deceptive statements (includes in-person solicitation, media presentations, and descriptions of workshops)</i>	<ul style="list-style-type: none"> • Giving personal advice on radio, TV, etc. (T: -7.99) • Directly soliciting a person to be a client. (T: -7.89)

Table 6: Content Analysis: Ethical Themes Yielded by the 8 Counseling Behaviors that were Assessed More Confidently as either Ethical or Unethical by the American Counselors than by the Chinese Counselors (T: T Value)

<i>Theme 1: Disclosing (includes psychological assessment disclosing and counseling session disclosing)</i>	<ul style="list-style-type: none"> • Not disclosing to a client the purpose of testing. (T: 4.14) • Disclosing a name of a client to a class you are teaching. (T: 5.18)
<i>Theme 2: Competence and expertise (includes boundaries of competence and personal problems)</i>	<ul style="list-style-type: none"> • Crying in the presence of a client. (T: 11.11) • Providing services outside areas of competence. (T: 3.24) • Doing therapy while under influence of alcohol. (T: 3.01)
<i>Theme 3: Human relationships (include multiple relationships and third-party requests for services)</i>	<ul style="list-style-type: none"> • Signing for hours a supervisee has not earned. (T: 5.97) • Offering or accepting a handshake from a client. (T: 4.32) • Using an agency affiliation to recruit private clients. (T: 5.02)