Ethical Research in Guidance Counselling

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Summary

The increasing need for evidence-based research to inform career guidance practice is now prevalent in national and international guidance policy discourse. This article discusses the complexities involved in carrying out ethically sound research within the guidance counselling profession in Ireland. Whilst it focuses specifically on research activities within the post-primary sector the fundamental principles apply across all jurisdictions of guidance provision, and will be of value to practitioners involved in various types of empirical and practitioner-based research. The over-riding principle involved is the professional responsibility we have as practitioner-researchers to protect the dignity and wellbeing of our research participants at all times.

Key Words
axiology, duty of care, ethical principles, ethical reflexivity, confidentiality, informed consent
Introduction

This article will address specific ethical issues and strategies relevant to the design and execution of research with clients and other participants in the field of guidance counselling. Ethics is derived from the much larger field of moral philosophy which addresses morals, beliefs and values within society (McLeod, 2003; Singer, 1993). In research, ethics or axiology, is taken as a set of principles that guide conduct in a given situation and are generally informed by codes of practice (Mertens, 2010; Robson, 2002; Thomas, 2009). The emphasis on ethical concerns in research is reflected in the growth of literature on the subject and the establishment of regulatory bodies and specific codes of practice in recent years (Cohen, Mannion, & Morrison, 2011). In terms of the guidance profession, Neary and Hutchinson (2011, p.43) stress that, “the development of practitioner researchers within the careers guidance field has been slow and continually evolving”. They argue that the practitioner-researcher is fundamental to the development of professional practice, critical thinking skills and a reflective approach to problem-solving.

The development of a guidance research community has now gained momentum through the establishment of practitioner focused research publications and forums, and the embedding of research within initial professional training programmes and CPD activities. At a time when policy-makers are strongly articulating the need for evidence-based research to inform future service delivery (Cedefop, 2011; OECD, 2004), the practitioner-researcher has a vital role to play in bridging the inquiry gap between outsider research (i.e. conducted by external bodies) and insider research (i.e. internal evaluation methods) to develop a theoretical knowledge base within the profession. However, guidance research has to be transparent and needs to pay attention to the particular context, motivation for the research, methodology and method, and the ethical considerations arising from the research study. Therefore, it is imperative that practitioner-researchers inform themselves of the ethical issues involved in carrying out research in their field so their work can be viewed as credible, trustworthy and scholarly.

Ethical Issues in Research Design

The ethical issues that arise in research are the same as those that occur in the context of guidance, counselling and educational practice (Cohen et al., 2011; McLeod, 2003). In order to address such issues, guidance practitioners can deal with professional dilemmas by viewing ethics as an active process of discretionary decision-making, deliberative judgement and professional reflexivity (Hearne, 2009; Swain, 2006). Robson, Cook, Hunt, Alred, and Robson (2000) argue that, in spite of reference to ethical guidelines, ethical principles and codes of practice, ethical decision-making is predicated on one’s own value system and involves a high degree of intuitive thinking. Furthermore, the personal history and positionality of the researcher, such as gender, culture, class, age and professional role, are key elements of the inquiry (Havercamp, 2005; Thomas, 2009).

The complex nature of the guidance practitioner-researcher role with regard to the choice of suitable paradigms, methodologies and methods, and the prevailing issue of power throughout the research cannot be underestimated. Any given paradigm represents the informed view of its proponents based on the way they have chosen to address the ontological, epistemological and methodological questions involved (Denzin & Lincoln, 2008). Mertens (2010, p.12) argues that
regardless of the paradigm, “ethics in research should be an integral part of the research planning and implementation process, not viewed as an afterthought or a burden”.

Methodological and ethical issues are inextricably interwoven in interpretive research in education (Cohen, Mannion, & Morrison, 2007). The potential for interpretive (qualitative) research to risk “impingement between the domains of research and intervention with significant problematic ethical implications” has been documented (Richardson, 2005, p.4). Although, “career professionals are particularly skilled in relational work and able to carry out qualitative research with their clients and/or peers” the boundaries of research and intervention can become blurred (Bimrose & Hearne, 2012, p.343). In the choice of research methodologies and design frames acute awareness of the likely ethical issues involved needs careful scrutinisation at the outset and throughout all aspects of the study.

Three of the dominant methodologies in educational and guidance research are; action research, case study research and evaluation research, all of which have their own set of ethical issues for the practitioner-researcher with a common thread of the issue of researcher ‘power’. For example, McNiff and Whitehead (2010, p. 73) contend that “the idea of influence is at the heart of action research”, as the focus of action research is to encourage other people to act differently towards personal and social change through the development of critical thinking. Whilst this change may be powerful it has implications for the researcher as it is necessary to ensure that the influence is educational and not an act of coercion. Therefore, in action research studies researchers need to be ethically reflective, reflexive and willing to ask critical questions of themselves (Brydon-Miller, 2008; Burton, Brundrett, & Jones, 2008; McNiff & Whitehead, 2010). McNiff and Whitehead (2010) suggest the development of a set of ethical principles that includes the drawing up of appropriate documentation such as an ethics statement and letters of access; promising confidentiality of information, identity and data; guaranteeing participants of the right to withdraw at any time; ensuring professional and academic conduct; and keeping good faith (fidelity).

With regard to case study research, McLeod (2010, p. 54) argues that this type of design involves “a higher degree of moral risk than other methodologies”. In contrast to large scale therapy studies, such as randomized trials using questionnaires where the information garnered is disparate and lacking depth, case research involves a close examination of a client’s life. Case research raises the risk of identifying the client, family members and other close acquaintances and institutions. Furthermore, even though the moral and ethical issues in case study research apply mainly to the client, they also apply to the therapist/guidance counsellor whose practice is being exposed. McLeod (2010, p. 55) asserts that paying attention to ethical issues in case studies allows for the creation of a “moral space in which effective inquiry can take place, in which all participants feel safe enough to make the maximum contribution to knowledge and understanding”. The opposite is guardedness and poor engagement on everyone’s part.

Evaluation research has its own set of moral and ethical issues for the practitioner-researcher. In the case of ‘outcome’ research, the focus can be on assessing the nature of change for individuals following an intervention process such as guidance counselling, or an assessment of the worth of a professional activity or service (DePoy & Gilson, 2008). However, as evaluation provides the empirical ‘power’ to guide and justify professional programmes, services and intervention activities it can be highly political and controversial in how it is conducted (DePoy & Gilson, 2008; Killeen, 1996). Where the guidance practitioner-researcher is a member of staff (‘insider research’), the researcher’s insight on the topic and issues involved can be very valuable, but care is needed in negotiating the professional boundaries of access, sampling, and
reporting with students, clients, colleagues, and parents. Burton et al. (2008) propose that in such circumstances the activity needs to be viewed as research and not professional practice, thus requiring careful exploration of potential ethical issues and the selecting of appropriate strategies to deal with them.

Finally, guidance professionals have the capacity to carry out authentic and professionally valuable research with their clients and/or peers. Similar to their work as helpers, guidance researchers should be trustworthy, respectful, competent and accountable in their work (Culley & Bond, 2011; Havercamp, 2005; IGC, 2011; NCGE, 2008). However, in the search for ‘truth’ and the protection of the rights and values of research participants, practitioner-researchers also need to bring an ethically reflexive attitude to their research by respecting boundaries and responding appropriately to the ethical issues involved (Richardson, 2005). For example, a distinctive ethical dilemma can arise in the situation of dual relationships where there is an imbalance of power between the practitioner-researcher and the practitioner-client (Havercamp, 2005). Interviewing or observing fellow guidance professionals and other peers under stringent research conditions requires equal consideration. Furthermore, boundary transgression has to be carefully handled whereby the fine line between research and intervention can become blurred when clients request information or help in the research interview (Bimrose & Hearne, 2012). An ‘ethic of care’ and reflexivity can counter difficulties and result in a more equitable process that is mutually beneficial to both parties involved in the research process (Richardson, 2005). Therefore, practitioner-research work should be guided by a set of principles that attend specifically to the issues of competence, multiple relationships, avoidance of harm, confidentiality and informed consent.

**Ethical Regulation in Guidance Research**

Guidance researchers, like guidance counsellors, are guests in the ‘private spaces’ of the world and need to ensure the minimisation of risks to research participants (Stake, 2005). They have a ‘duty of care’ to all parties involved in their research study, and especially so to the participants who volunteer to contribute their time, energy and intellectual capacity to the process. This duty of care is significantly heightened in decisions on the choice of a research sample, i.e. under 18’s or over 18’s, and the sensitive nature of the research topic, for example, disability, sexuality, bullying, ethnicity, learning difficulties, substance abuse. Hence, the need for some form of regulatory practice in order to protect the participant, researcher, and institution involved.

Cohen et al. (2007) identify three different levels of ethical regulation in research practice: legislative, professional and personal. At the legislative level, a research study may require ethical approval from a university and/or other institution’s ethics review committee, which can often be seen as a hurdle to get over as opposed to an opportunity for ethically sound decision-making. This process is also referred to as ‘procedural ethics’. Professional bodies and associations have formulated codes of practice that reflect the values of the professional group and provide guidelines for ethically sound research within a specific discipline. Some of the professional bodies’ codes of practice pertinent to education, psychology and guidance research are: British Educational Research Association (BERA, 2011); British Psychological Society (PSI, 2009); Irish Association for Counselling and Psychotherapy (IACP, 2005); International Association of Educational and Vocational Guidance (IAEVG, 1995); Institute of Guidance
Counsellors (IGC, 2012); and the Psychological Society of Ireland (PSI, 2003). Practitioner-researchers who are members of such bodies are bound to their specific codes of practice and need to refer to these when conducting research. The codes can also serve as reference points when specific issues arise in the research process such as duty of care, levels of confidentiality guaranteed and the sharing of data.

However, even though there is a certain degree of homogeneity between these professional codes and guidelines they can only provide a guide and cannot tell the researcher what to do in unique situations (Cohen et al., 2011). Simons and Usher (2000, p.11) argue, in particular, that ethics are ‘situated’ and arise from “the practicality of conducting research, the need for sensitivity to socio-political contexts and to be fair to disadvantaged groups, and to take account of the diversity and uniqueness of different research practices”. Consequently, at the personal level, continuous ethical reflexivity and keen discernment in decision-making is required to deal with specific issues and situations as they arise (Guillemin & Gillam, 2004; Hearne, 2009). Furthermore, the creation of a personal code of ethical practice is helpful to raise awareness of the researcher’s obligations to the research participants’, help develop an “intuitive sensitivity” when dealing with the unexpected, and bring discipline to the researcher’s work (Cohen et al., 2011, p.103). For an illustration of an ethical code see Reynolds (1979, in Cohen et al., 2011, p.103).

**Ethical Principles in Guidance Research**

In order to address ethical dilemmas in guidance research, a number of principles ought to be considered by the practitioner-researcher. An example of an ethical dilemma may be where a guidance counsellor wishes to carry out an evaluative type of research project investigating a wholeschool approach to guidance counselling in his/her own school. Whilst the management is agreeable to this, other staff members may view their work as being assessed by a colleague and attempt to block the project. This dilemma may require the practitioner to reconsider the purpose and aims of the study, his/her role and relationships within the school, the voluntary nature of participation, and the duty of care to those involved. As research is a sensitive process, critical problem solving with reference to a set of ethical principles is a necessary skill. However, ethical principles are not absolute and should be interpreted in the light of the research context and other values at stake (Cohen et al., 2007).

The four key ethical principles outlined in the IGC’s (2012) *Code of Ethics* are respect for the rights and dignity of the client; competence; dignity; and integrity. Embedded within these four are three specific items related to research:

1.1.4 When engaging in research, protect the dignity and wellbeing of research participants.
3.4.5 When engaging in research, take all reasonable steps to ensure that any collaborators treat participants in an ethical manner.
4.1.4 Conduct research in a way that is consistent with a commitment to honest, open inquiry, and communicate clearly any personal values or financial interests that may affect the research.

(IGC, 2012)
The four ethical principles underpinning practitioner research proposed by the National Centre for Guidance in Education (NCGE, 2008, p.2) are “respect for the rights and dignity of the person, competence, responsibility and integrity”. Both of these sets of professional principles align with the five ethical principles of research proposed by McLeod (2010):

(i) **Nonmaleficence**
(ii) **Beneficence**
(iii) **Autonomy**
(iv) **Fidelity**
(v) **Justice**

(i) **Nonmaleficence** refers to the concept of ‘doing no harm’ and minimising the risk of psychological, emotional, professional and personal damage (Cohen et al., 2011). This is also known as the ‘costs/benefits ratio’ dilemma which is defined as the balancing of likely social benefits accrued from the research against the personal costs to the individuals taking part (Frankfort-Nachmias & Nachmias, 1992, in Cohen et al., 2011). Thomas (2009) identifies five potential risks:

- Causing psychological or physical harm to participants or others;
- Damaging the standing or reputation of participants or others;
- Infringing the privacy of participants or others;
- Breaking the law;
- Harming a community in some way (for example, by drawing attention to differences within it).

(Thomas, 2009, p.152)

As there are no absolutes in research, practitioner-researchers need to make decisions about the research process in accordance with their personal values and professional ethics. In particular, consideration has to be given to the possible impact of the research process on the participant during and after data collection, regardless of the age and background of the participant. A particular ethical issue which has parallels with guidance counselling is the protection of the client’s privacy at all times. McLeod (2003, p.169) argues that “informants who feel safe are more likely to share more of themselves” and proposes the three specific strategies of appropriate research design, informed consent and maintaining confidentiality to minimise harm to participants. As with guidance counselling interventions, it is paramount that appropriate referral routes and supports are identified in advance of the data collection in the event that participants become upset during the fieldwork. It is an ethical responsibility at the core of our professional practice to ensure that those individuals we engage with are not exploited, damaged or abandoned in the pursuit of new knowledge.

(ii) **Beneficence** is inextricably linked with nonmaleficence and refers to the idea that research should also strive to contribute to the health and wellbeing of individuals and society (McLeod, 2010). The research needs to be worthwhile and valuable. Critical questions can arise in relation to who exactly will benefit from a guidance research study; the practitioner-researcher, the participant, the policy-maker, the education stakeholder, the wider guidance profession? Cohen et al. (2011) argue that whilst the practitioner, the organisation or the funding body may
gain from the outcomes, the participant or population may remain untouched, underprivileged, unsupported, and with no further improvements in their quality of life. Whilst a statement of potential benefit is often needed to gain access to data collection sites and sample populations, as well as appease ethics regulatory bodies or funders, participants’ should not be viewed as objects to be used instrumentally, but subjects to be treated respectfully (Cohen et al., 2011).

(iii) Autonomy refers to the research participant’s freedom of action and freedom of choice to take part in a study without coercion (McLeod, 2010). In the case of guidance counselling practitioner-researchers need to respect the “right of individuals to discontinue participation in research at any time, and be responsive to non-verbal indications of a desire to discontinue if individuals have difficulty in verbally communicating such a desire” (NCGE, 2008, p.9). The issue of autonomy is addressed through the procedure of informed consent.

(iv) Fidelity in research practice denotes the confidential and respectful nature of research and the need for “loyalty, reliability, dependability and action in good faith” (McLeod, 2010, p.56). The purpose and execution of the research study should be communicated honestly and accurately, in a straightforward and open manner, and non-exploitative in terms of any conflicts of interest in the professional and personal relationships involved (NCGE, 2008).

(v) The fifth principle, justice, implies that researchers need to be mindful of the social justice aspect of their research activities and give due recognition to the role of research to work in the interests of the oppressed, marginalised or minority groups (McLeod, 2010). For example, adopting a ‘critical’ methodological framework in education and guidance research allows the researcher to unmask power relationships and demonstrate the inequities embedded in society (Hearne, 2011; Rogers, 2004).

Strategies for Ethical Conduct in Guidance Research

Two of the most important strategies regarding ethical conduct in research are (i) maintaining confidentiality and (ii) informed consent.

Maintaining Confidentiality

The basic human need of a right to privacy can be violated during the course of a research study, or afterwards, making the participant “extremely vulnerable” (Cohen et al., 2013, p.90). Cohen et al. (2013) stress that privacy is much more than confidentiality as it pertains to the right of the participant not take part in any or all of the research study. Therefore, the onus is on the researcher to inform participants of their right to refuse, as well as obtain permission to take part. Mertens (2010) provides clear definitions for two terms central to the protection of participants:

Anonymity means that no uniquely identifying information is attached to the data and thus no one, not even the researcher, can trace the data back to the individual providing them.

Confidentiality means that the privacy of individuals will be protected in that the data they provide will be handled and reported in such a way that they cannot be associated with them personally.

(Mertens, 2010, p.342)
Preserving anonymity by not using the names or any other personal information about participants’ ensures confidentiality of their identities. The most common way of achieving this is the use of pseudonyms, codes for identifying people and password-protected files. Whilst anonymity can be easier to guarantee in questionnaire design (Cohen et al., 2013; Thomas, 2009) this cannot be expected in face-to-face interviews (Cohen et al., 2013). Cohen et al. (2013) argue that at best the researcher can “promise confidentiality” (p.91).

The ethic of respect for client autonomy stresses the importance of collaboration and negotiation with the client in decisions about confidentiality (Kidd, 2006; NCGE, 2008). It is standard practice to inform participants of how information will be stored and destroyed (McLeod, 2010). It is also important to inform them about the limitations of confidentiality, especially in ethically sensitive areas of research where confidentiality cannot be automatically guaranteed. As Cohen et al. (2011, p.92) assert “the more sensitive, intimate or discrediting the information, the greater the obligation on the researcher’s part to make sure that guarantees of confidentiality are carried out in spirit and letter. Promises must be kept”.

Informed Consent

Securing informed consent involves providing adequate information on the purpose of the research, the voluntariness of the client, and the nature of confidentiality (McLeod, 2003). In addition, because of the dual roles of practitioner-researcher, all reasonable steps should be taken to ensure that consent is attained from all participants without undue pressure or coercion (NCGE, 2008). Thomas (2009) provides a distinction between opted in consent and implied consent. The former relates to the active choice about becoming involved in the study through the standard practice of gaining agreement in advance through an information sheet and a signed consent form. The information sheet usually specifies the aim of the study, what the person is being asked to do, the possible risks of taking part, how the data will be stored, the parameters of confidentiality, who to contact for further information, and who has given ethical approval for the study. In contrast, with implied consent, participants are told about the research and there is an assumption that they have given consent unless they state otherwise. However, for example, in a school based study whereby an information letter is given to students and/or parents/guardians this would need to be made explicit in the information sheet (Thomas, 2009). The decision to use either of these options needs careful consideration in terms of the level of risk involved in the study.

Issues of consent are particularly important when conducting research with children (under 18 years of age). Thomas (2009) refers to the imbalance of power between the researcher and the child in the relationship. In order to respect the dignity of the child, assent from the child as well as the parent/guardian is advocated by some (Danby & Farrell, 2005; Phelan & Kinsella, 2013). However, this can be complicated and requires clear information to be provided to the child on the purpose of the study and the child’s involvement that is age appropriate and easily understandable (Phelan & Kinsella, 2013). Finally, in relation to educational and guidance research which is school-based, Morrow (2005) warns against the assumption by the researcher that because the research takes place in the school where children may be viewed as “the ‘objects’ of schooling” the researcher has a captive sample. Even if agreement has been given by the school management, teachers and parents/guardians, it should not imply that the individual child has agreed to be involved.
Conclusion

To conclude, some of the key issues, principles and strategies pertinent to guidance counselling research have been discussed in this article. In professional practice, guidance counsellors have a moral obligation to safeguard and protect the privacy of clients within their care. This duty of care can be extended to practitioner-based research where ethical dilemmas and concerns are part of the research endeavour. By developing an ethically reflexive attitude that involves sensitivity, critical thinking and research competence such dilemmas can be alleviated thus safeguarding the participants’ involved and the integrity of the guidance researcher.

Checklist

For practitioner-researchers involved in research, the following reflective questions may be a helpful guide:

- How is research viewed in my school/organisation?
- Is there a school/organisation policy on carrying out research?
- Do I need ethical approval prior to embarking on the research?
- What do I wish to find out in my research?
- What will I do with the outcomes of the research?
- Who will benefit from my research?
- What are the risks for the participants involved?
- What are the risks for me, the practitioner-researcher?
- What are the risks for the research site (e.g. school, college)?
- Can I guarantee total confidentiality to the participants?
- How will the data be stored?
- How and where will the findings be disseminated?
Biography

Dr. Lucy Hearne is a Lecturer and Programme Director of the Graduate Diploma in Guidance Counselling and the MA in Guidance Counselling and Lifespan Development in the Department of Education and Professional Studies, University of Limerick. She is a recipient of an Irish Research Council for Humanities and Social Sciences Scholarship (IRCHSS) in 2006 and an IRCHSS research award in 2011.
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