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# Seven Things A Therapist Should Never Do



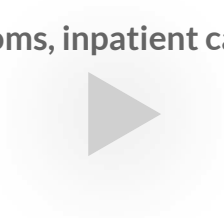
# What a Therapist Should Not Do

A good therapist can improve the lives of their clients in many ways. **Research shows** that over 40% of Americans have seen a therapist at some point in their lives. With more and more people expressing interest and openness in mental health, it's essential to know what to expect in the therapeutic process. Moreover, all current and potential clients should be able to identify concerning red flags if they arise.

Therapists are graduate-level health professionals that treat mental illness and aim to improve the self-esteem and overall quality of life for their clients. Therapists may work with a variety of populations, and they can treat individuals, couples, families, and groups in their practice. Their overarching goal is to provide a safe environment for clients to both process feelings and implement new strategies for sustainable change.

That said, therapeutic relationships can sometimes be confusing. Clients may not fully understand the limits and expectations within their sessions. They may not know what their therapist is (or is not) allowed to say or do with regards to their treatment. Let's get into what current and future clients should know.

**Depending on the severity of symptoms, inpatient care may be beneficial.**



Also See: [How to Find the Right Mental Health Professional](#)

# What a Therapist Should Not Do

## 1. Therapists Should Not Break Confidentiality Except When Mandated

All therapists are legally required to maintain confidentiality for their clients.

Confidentiality means that a therapist cannot confirm or deny even treating the client if someone asks. Furthermore, they cannot discuss any revealing contact information, such as a client's name or demographics, outside of the session. All therapeutic material remains private, and it stays between the therapist and the client.

Confidentiality ensures a safe and supportive environment for clients to feel comfortable disclosing their thoughts and feelings. Clients can share what's on their minds knowing that the therapist must protect those details. If a therapist runs into a client out in public, the therapist should not initiate contact unless the client makes the first approach.

There are a few legal exceptions to this rule, and therapists should debrief clients on these exceptions before starting treatment. The exceptions for breaking confidentiality include:

- Disclosure or speculation of child abuse
- Disclosure or speculation of elder abuse
- Disclosure or speculation of dependent adult abuse

- Concern that the client is in imminent risk of committing suicide
- Concern that the client is in imminent risk of committing homicide
- Being subpoenaed by a judge to submit progress notes or testify in court

It might be helpful for therapists to coordinate care with other professionals. When this is the case, clients may agree to release information to various parties such as their insurance company, parents, teachers, physicians, or other treatment team members. These release of information forms must be signed and dated. The client can also revoke consent at any time.



## 2. Therapists Should Not Break Boundaries

Effective therapy requires strong, reliable, and professional boundaries. Boundaries are the physical and emotional limits set between two people. As mentioned, therapy often includes clients sharing intimate details about their lives. Often, they reveal parts of themselves they've concealed from the rest of the world. It is an undoubtedly vulnerable process, and that's why limits and guidelines are so essential.

Boundaries serve to protect the client. They honor and respect the client's autonomy, aim to mitigate the risk of emotional harm, and eliminate dual relationships. [Dual relationships](#) refer to situations where multiple roles exist between therapists and clients. For example, if a therapist also owns a side business and hires a client to do administrative work, this is an example of a dual relationship.

It should be noted that dual relationships, at times, might be unavoidable. For example, therapists working in small towns may run into each other or engage in the same activities outside of the office. If this is the case, therapists should discuss the ramifications with their clients.

Therapy can be tricky because therapists hold positions of authority and power over their clients. That's why it's their job to uphold the boundaries, even if a client wants or attempts to challenge them. Therapeutic relationships are professional. They are never friendships or romantic relationships. It is never appropriate for a therapist to engage in sexual relations with a client.

There are many different kinds of boundaries, and each therapist may have different expectations for their clients. Some common therapeutic boundaries include setting:

- Precise start and end times for each session
- Avoiding or limiting self-disclosure to when it's appropriate
- Expectations related to terminating therapy
- Specific directions for interaction in-between sessions
- Rules pertaining to payment and missed appointments
- Guidelines related to touch (i.e., hugging, shaking hands)

Generally speaking, clients shouldn't have to guess their therapist's boundaries. They should be reviewed and discussed in a professional consent form. If confusion arises, therapists should be willing to provide thorough clarification. Moreover, if a boundary needs to be revised or changed completely, this must also be addressed and discussed.

Finally, therapists must implement their boundaries with their clients. Clients should feel a sense of security in knowing that their therapist will commit to a consistent experience. If

this commitment wanes (or doesn't exist at all), this is a serious red flag.

### 3. Therapists Should Not Provide Directionless Therapy

Therapy is a place for self-exploration, growth, and personal discovery. While each client has unique needs and goals for their improvement, there should always be a movement towards fulfillment and healing.

Competent therapists collaborate with their clients to create appropriate treatment plans for their care. They do not meet with individuals haphazardly to just discuss daily events or struggles. They do not treat clients if they do not feel competent to help them with particular issues.

*Treatment goals usually include quantifiable goals, objectives, and interventions. Quantifiable goals extend beyond generic goals like "be happy." Quantifiable goals refer to measurable intentions, like, "client will practice positive affirmations twice a day," or "client will identify five activities that promote a sense of self-care."*

Therapists should discuss the goals and objectives with their clients, as this helps both parties track achievements and setbacks. Clients evolve at different paces. With that in mind, therapists should routinely check in with their clients to review progress and treatment satisfaction. It may be beneficial to both parties to discuss what types of therapies are being utilized. such as; [cognitive behavioral therapy \(CBT\)](#) and [dialectical behavior therapy \(DBT\)](#).

Sometimes, depending on the course of treatment, goals need to be revisited and revised. It's not uncommon for clients to enter therapy wanting to work on one issue only to

discover they need support with something else. If this is the case, therapists and clients should engage in an appropriate dialogue about recharting the course of treatment.

## 4. Therapists Should Not Just Give Advice

Clients often seek support when they need to make difficult decisions related to relationships, health, work, finances, or personal risks. They may turn to the therapist for a precise direction. They may trust that the professional “knows what to do.”

Although it may be the cliched misconception, this therapeutic process isn't about advice. It isn't about therapists telling clients what they should or should not do. Instead, therapy is about exploration. That may entail processing the risks and benefits of particular patterns or choices. It may include goals related to increasing decisiveness and harnessing a sense of personal autonomy.

**Therapy isn't about the therapist telling clients what they should or shouldn't do.** If a therapist rescues the client every time, the client does not grow. Likewise, clients become dependent on someone else telling them what to do.

Instead, therapy is about exploring the risks and benefits of particular choices. It's about harnessing personal autonomy and increasing decisiveness. Contrary to popular belief, therapists do not necessarily know what's best for their client. Most therapists believe, in fact, that clients are the experts of their own lives. In their work, they aim to foster their client's confidence in utilizing their expertise.

Ideally, therapists offer a warm and nonjudgmental space to act as both their client's cheerleader and soundboard. They don't just provide generic advice, and they don't act as if they know what's best for the client.



## 5. Therapists Should Not Just Agree With Everything

There is no doubt that support, compassion, and empathy are critical tenets of effective therapy. Most people enter treatment because they want someone who can listen to them without judgment or rejection. Even when clients have a helpful support system, they often find that loved ones may have biases or opinions that interfere with listening.

Therapists generally maintain objectivity and neutrality. They attune to their client's needs, but they don't play a passive role to them. Instead, they strive to strike the significant balance between providing comfort and nurturing with healthy assertiveness and confrontation.

Let's say a client continues to arrive at sessions every week complaining of depression. He's struggled with depression for many years, and he reports that he has never felt much of an improvement. He and his therapist have discussed several solutions, such as consulting with



a psychiatrist for a medication evaluation, building his support system, practicing meditation, and starting to exercise, for improving his mood.

Each time the therapist offers a suggestion to [combat his depression](#), the client responds with an excuse as to why that option won't work. He continues to engage in the same negative thinking, and he does not make any changes to his daily routine. Yet, he continues to show up faithfully to therapy every week.

If the therapist only continues to sympathize and empathize with this client's depression, the individual has little chance for improvement. In many ways, the therapist provides a disservice, and he essentially enables a lack of change.

Instead, therapists must recognize problematic behavior, ineffective patterns, and resistance. Likewise, to help foster growth, they must be willing to address these observations for the benefit of the client.

## 6. Therapists Should Not Work Outside Of Their Scope

Therapists should only work within their clinical scope of practice. While specific guidelines related to scope of practice vary from state to state, the scope of practice typically includes:

- Providing psychotherapy for individuals, families, couples, and groups
- Providing psychoeducation about mental illness and social development
- Administer diagnostic tests related to diagnosing mental illness
- Consult with other educators and professionals related to client care
- Conduct and develop treatment plans intended to address problematic behaviors



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It's not unusual for therapists to have education or training in other fields, such as nutrition, real estate, fitness, law, accounting, or medicine. However, they must refrain from offering advice or guidance on other topics. As a client's therapist, they must only act in the role of a therapist. Working inside of scope ensures professionalism and boundaries.

## 7. Therapists Should Not Shame or Judge Clients

Therapy should feel like an inclusive and safe place for clients. Clients need to feel safe and supported in their work. And while all therapists have inherent biases and personal

preferences, it is never appropriate for them to engage in discrimination, racism, sexism, or other forms of prejudice with clients.

Clients may shame or judge themselves or others in sessions. Therapists seek to offer support and compassion when this occurs. They also seek to provide reasonable strategies for reframing or changing these thoughts and patterns.

That's not to say therapists may not offend clients from time to time. The truth can be painful, and it's normal to resist confrontation. Sometimes, therapy can feel worse before it feels better. However, clients should feel safe and encouraged to share their thoughts about their therapist to their therapist.

## Final Thoughts On The Therapeutic Relationship

Therapy is often a profound experience for clients seeking to improve their lives. It's an opportunity for clients to exclusively focus on their own needs, dreams, and goals. It's also a safe place to feel supported and encouraged by a mental health professional.

That said, if something feels wrong, it probably is wrong. If something feels like it's being neglected or overlooked, it could be a sign of a red flag. Clients always have the right to terminate their therapy at any time and for any reason. If a situation starts to feel uncomfortable or unsafe, it's within their absolute right to discuss their feelings or end the relationship altogether. A good therapist can help you [improve your mental health](#).

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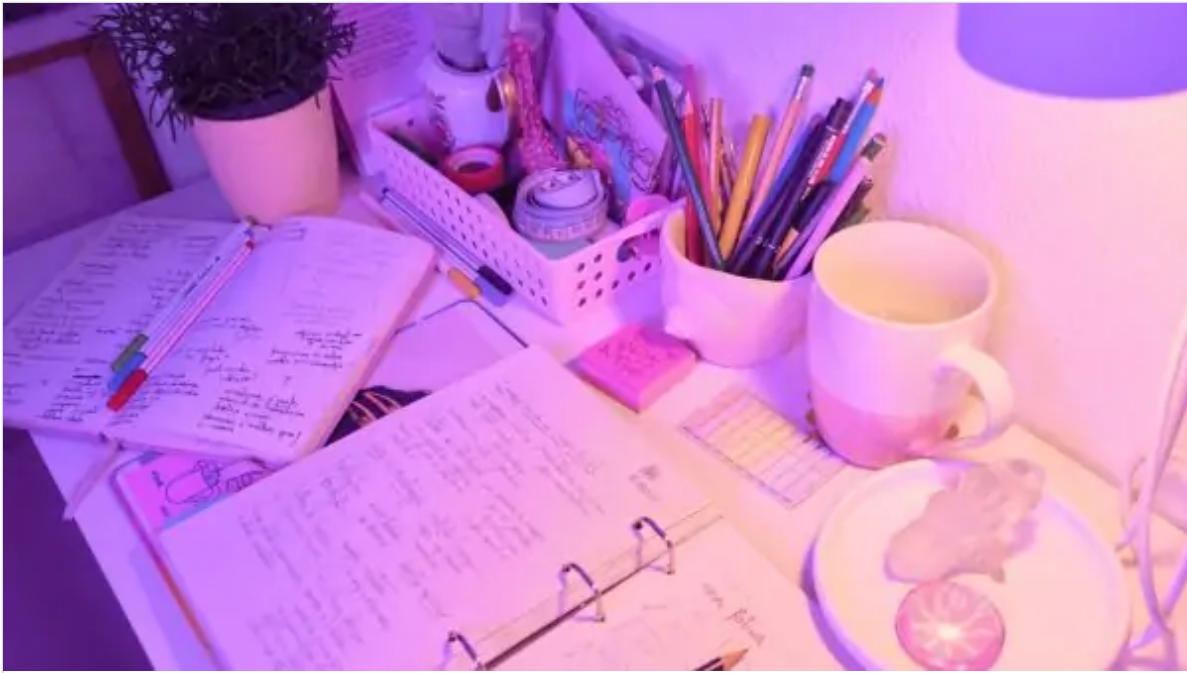
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