Ethics in Victim Services

Participant’s Manual
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Acknowledgments

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The opinions, findings, and conclusions expressed in this document are those of the authors and do not necessarily represent the official positions or policies of the U.S. Department of Justice.
Module 1: Introduction and Training Overview

Purpose

This module introduces the instructor and participants, sets expectations for the course, and presents the course objectives and agenda.

Lessons

1. Introduction and Module Objectives
2. Participant/Instructor Introductions
3. Course Objectives and Agenda

Learning Objectives

By the end of the module, you will be able to:

- Identify at least one other participant and his/her role in providing services to victims of crime.
- State the course objectives.
Worksheet 1.1

Introductions and Expectations

1. Your partner’s name:

2. The organization your partner works for:

3. Your partner’s role in providing services to victims of crime:

4. What your partner likes best about his or her job in providing services to victims:

5. Two unique characteristics of your partner:

6. One expectation for this training:
Ethics in Victim Services

Welcome!

Module 1
Introduction and Training Overview

Learning Objectives

- Identify at least one other participant and his/her role in providing services to victims of crime.
- State the course objectives.
Activity

Introductions and Setting Expectations
Worksheet 1.1

Course Objectives

- Create self-awareness and understanding of how attitudes and beliefs influence responses to victims of crime.

Course Objectives

- Learn the Standards for Victim Assistance Programs and Providers developed by the National Victim Assistance Standards Consortium (NVASC).
Course Objectives

- Recognize when a person is acting in an ethically questionable way.
- Use a standard decisionmaking process when faced with an ethical dilemma.

Course Agenda

Module 1: Introduction and Training Overview
Module 2: Values and Responses to Victims
Module 3: Ethics in Victim Services
Module 4: Standard Decisionmaking Process for Ethical Decisions
Module 5: Case Studies
Module 6: Closing and Evaluations

Review of Module Learning Objectives

- Identify at least one other participant and his/her role in providing services to victims of crime.
- State the course objectives.
Module 2: Values and Responses to Victims

Purpose

This module helps participants become aware of their own attitudes, biases, and beliefs, and how these affect their responses to victims of crime.

Lessons

1. Exploring Values
2. Self-Awareness Inventory
3. Values and Roles
4. Multicultural Competency and Ethics

Learning Objectives

By the end of the module, you will be able to:

- State your own values, morals, and ethics.
- State how these attitudes and beliefs influence your responses to victims of crime.
Ethical Decisions

Knowing oneself ethically requires self-awareness. Victim service providers must understand their own definition of a morally good person, how their personal values may influence their responses to challenging situations, how their religious beliefs may influence their judgments, and how their attitudes toward the rights of individuals may come into conflict with the broader principles of justice.

As important as it is to understand their moral orientation, victim service providers must also understand how willing they are to act on their values and uphold their personal ethics if they are challenged. Being aware of the need for action, determining the right course of action, and having the emotional and intellectual commitment to follow through are all important factors when assessing personal values.

Professional values grow from the same basic desire as personal values (to do no harm, help others, and make the world a better place), but they are different in focus and content. Any conflict between a victim service provider’s personal and professional values could affect the ethical decisionmaking process and compromise the capacity to provide services effectively in a particular circumstance. Therefore, personal values must be recognized and dealt with appropriately. A provider’s character and commitment, motivation, and personal viewpoint are all authentic components of the ethical decisionmaking process. Searching for ethical self-knowledge is necessary if victim service providers are to understand their innate reactions when value conflicts occur.
Worksheet 2.1

Assault Victim Vignette

Scenario

Julia Sullivan is a law enforcement victim advocate. Julia has taken Charlotte Thompson to the emergency room for treatment of injuries resulting from an assault.

Julia knows Charlotte Thompson because of Charlotte’s prior history of physical and sexual assaults. In the last year, Charlotte had recanted her story of one violent assault as the case moved through the legal system.

Julia is trying to complete a compensation form to help Charlotte with her medical expenses.

Questions

- What are your reactions to the vignette?

- Do you have any concerns or hesitations about working with this client?

- What values cause you to feel this way?

- How might your feelings affect your professional relationship with Charlotte Thompson?

- What can you do to put Charlotte’s interest first?
For your consideration:

What other challenging victims have you dealt with and how did you handle the situation?
Worksheet 2.2  

**Self-Awareness Inventory***

The following five questions will help you evaluate your own values, attitudes, and beliefs. For each question, circle 1 if you strongly disagree, 5 if you strongly agree, or 2, 3, or 4 for points along the continuum.

Keep in mind that there are no right or wrong answers. This is an inventory designed to get you thinking about your values, attitudes, and beliefs so that you may better serve your clients.

1. **Members of a helping profession such as victim assistance should refrain from getting personally involved with victims they work with.**  
   
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2. **A higher spiritual power should guide our behavior and thinking.**  
   
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3. **Women are rarely violent.**  
   
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4. **The needs of victims must sometimes override a supervisor’s directive.**  
   
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5. **Culture and race are not factors in a professional helping relationship. As human beings, we are more similar than different.**  
   
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* This inventory was adapted from the inventory in Victim Assistance Online (VAT Online) at https://www.ovcttac.gov/vatonline.
Worksheet 2.3

Domestic Violence Scenario

Patrice is the 24-year-old mother of three children, ages 4, 2, and 4 months. She is married to Zeke, the father of her baby and the 2-year-old. Zeke drinks heavily and has been abusing Patrice for at least a year. During this time, law enforcement has been to the home repeatedly for domestic violence incidents, but Zeke has been arrested only a couple of times. Three weeks ago, law enforcement arrested Zeke and alerted the local human services agency with concerns about the children. Zeke was able to post bail and was out of jail 2 days later. He is currently staying with his brother and his brother’s wife, who live about 4 miles down the road. A caseworker from child protective services is in the process of assessing the risks of harm and safety factors for the children. Patrice has been talking with a victim assistance provider with the local domestic violence program.

Last evening Zeke nearly strangled Patrice and threatened to kill her and the children if she told anyone. This morning Patrice called the victim assistance provider with the domestic violence program to tell her about Zeke’s threats. Patrice is planning to leave with the children as soon as she can make all the arrangements. She knows she must wait for the right opportunity to leave. She also tells the victim assistance provider that she does not want all this to go to court. It will only make the situation worse.
Module 2
Values and Responses to Victims

U.S. Department of Justice
Office of Justice Programs
Office for Victims of Crime

Learning Objectives

- State your own values, morals, and ethics.
- State how these attitudes and beliefs influence your responses to victims of crime.

Delivering Services

- Begins with personality, moral orientation, and beliefs of provider
- Involves relationships between providers and victims
- Requires awareness that personal values and ethical codes of provider influence interactions
Exploring Values

- Distinction between personal and professional values
- Importance of self-awareness
- Keeping personal attitudes from interfering with professional services

Activity

*What Are Values, Morals, and Ethics?*
Definition of Terms

- **VALUES** are the ideals or beliefs to which an individual or group aspires.
- **MORALS** relate to making decisions between right and wrong.
- **ETHICS** is the articulation of standards of behavior that reflect those values or morals.

Behind Ethical Decisions Are . . .

- Your character
- Your commitment
- Your personal viewpoint

Activity

Assault Victim Vignette

*Worksheet 2.1*
Discussion Questions

- Any hesitations about working with this client?
- What values may cause you to feel this way?
- How might your feelings affect your professional relationship with the victim?

Discussion Questions

- What can you do to put the client’s interest first?
- Consider: what other challenging victims have you dealt with, and how did you handle the situation?

Self-Awareness Inventory
Activity

Self-Awareness Inventory

Worksheet 2.2

Values and Roles

Activity

Domestic Violence Scenario

Worksheet 2.3
Scenario Roles

- Group 1: Law enforcement victim assistance provider
- Group 2: Child protective services caseworker
- Group 3: Domestic violence program victim assistance provider
- Group 4: Prosecutor’s office victim assistance provider

Discussion Questions

- How does assuming the perspective of another role affect your response to the victim?
- Would you have responded differently if you had been in your role as victim assistance provider?

Review of Module

Learning Objectives

- State your own values, morals, and ethics.
- State how your attitudes and beliefs influence your responses to victims of crime.
Module 3: Ethics in Victim Services

Purpose

This module introduces participants to the concept of ethics and to the Ethical Standards for Victim Assistance Providers developed by the National Victim Assistance Standards Consortium (NVASC).

Lessons

1. Ethics and You
2. National Victim Assistance Standards

Learning Objectives

By the end of the module, you will be able to:

- Recognize when a person is acting in an ethically questionable way.
- State at least one of the NVASC’s ethical standards for victim assistance providers and how it is used in an organization other than your own.
- State at least one way to make ethics and standards part of an organizational culture.
Ethics Background

For thousands of years, philosophers, scientists, and teachers in civilized societies have contemplated such matters as the meaning of life, what behaviors are most valued, and the distinction between right and wrong behavior. Perhaps this tendency to pursue such matters is just part of being human or necessary for surviving peacefully. Aristotle in the neo-Greek era taught that leading a virtuous life was the path to happiness and life satisfaction.

As humankind evolved, societies developed their own systems of moral principles based on values. These values are ideals that the society upholds as reflective of the way the world should be and how people should act toward one another. Many of these moral principles are nearly universal regardless of culture or historical time period. For example, most societies expect members to refrain from murder, rape, theft, assault, slander, and fraud. These standards almost always reflect the values of honesty, compassion, and loyalty.

The moral principles are the foundation of ethics, which is the professional discipline dealing with standards of right and wrong. These standards serve as a guide for human behavior and are usually stated in terms of obligations, benefits to society, fairness, or specific virtues. Developing a code of ethics has been an essential part of all professional disciplines since the ancient professions of medicine and law were established. Victim assistance began as a grassroots movement in the late 1960s but is now evolving as an established profession.

Code of Ethics Purpose

When a profession establishes a code of ethics, the code serves several purposes. It safeguards the reputation of the profession, protects the public from exploitation, and furthers competent and responsible practice.

The foundation for the victim assistance code of ethics consists of underlying values such as client autonomy, privacy, and self-determination; objectivity and abstention from abuse; honesty and equity of service; compassion and respect for individuals; social responsibility; confidentiality; and working within one’s range of competence.

National Victim Assistance Standards

Since the late 1960s, the field of victim assistance has evolved from a grassroots movement of committed individuals and nonprofit organizations into a professional discipline. It now encompasses a diversity of organized community and systems-based individuals and organizations whose services to crime victims range the entire gamut of the justice experience.
As this evolution toward professionalism has continued, there has been a call on many levels for greater accountability by victim assistance providers. This is only natural for a movement increasingly recognized by the juvenile and criminal justice systems, academia, and the public at large as a credible, worthwhile and much-needed service.

To meet this demand, the U.S. Department of Justice Office for Victims of Crime formed the National Victim Assistance Standards Consortium (NVASC) in 2000 to develop model program, competency, and ethical standards of conduct for the field of victim assistance. NVASC researched existing standards in similar professions, polled professionals in the field of victim assistance, and utilized the expertise and experience of a representative and diverse core of victim assistance professionals. The result of this work is the NVASC Standards for Victim Assistance Programs and Providers published by the Center for Child and Family Studies, College of Social Work at the University of South Carolina.

The book *Ethics in Victim Services* is based on the NVASC model of ethical standards. It is designed to help victim assistance professionals identify, analyze, and resolve the many ethical dilemmas they face in their daily work. This book was used to develop this course.
Resources

NVASC Standards for Victim Assistance Programs and Providers
Published by the Center for Child and Family Studies
College of Social Work
University of South Carolina
http://www.sc.edu/ccfs/training/consortium.html

Ethics in Victim Services
Melissa Hook and Edwin Meese
Published by Sidran Press (June 2005)
ISBN-10 1886968179
ISBN-13 978-1886968172
Worksheet 3.1

Is It Ethical?

Scenario 1
Jo, a woman who is trying to leave her violent husband, asks Betty, the victim assistance provider at a local domestic violence shelter, to help her find a place to stay for a while. The shelter has been filled to capacity the past 2 weeks. Betty’s friend has a vacant garage apartment. After checking with her friend, Betty offers the apartment as a safe place for Jo and her two young children to stay until everything is settled.

Scenario 2
Marsha, who is a victim assistance provider, is working with Jean, a stalking victim who wants to sue the employer of the man who stalked her. The stalker accessed Jean’s financial records through the database at his place of employment. Marsha advises Jean, “Getting involved in a stressful lawsuit isn’t a good idea right now. You really need to focus on your recovery.”

Scenario 3
Kevin, a victim assistance provider, has been working with Heidi for a couple months. She recently moved to a different town to get away from her abusive boyfriend, and she has asked Kevin not to share her new address and phone number with anyone. One day she calls Kevin; she is distraught and reluctantly discloses that she is thinking about suicide, but she begs him not to tell anyone. He explains that he is obligated to report someone who is suicidal and will give her contact information to law enforcement.

Scenario 4
Rebecca, a white victim assistance provider who majored in psychology in college, realizes that an African-American victim she is working with, Shauna, has a substance abuse problem. Shauna is just starting to open up to Rebecca after several weeks of silence. When Rebecca suggests that Shauna see a substance abuse counselor or check out a 12-step program, Shauna accuses Rebecca of trying to get rid of her because she is black. Rebecca denies the accusation and assures Shauna that she will continue working with her. Rebecca figures that she has had enough experience to help Shauna with her substance abuse problem.

Scenario 5
Jeff, who works long hours as a victim assistance provider at a law enforcement agency, regularly takes records home and finishes up his documentation at night. After he eats dinner with his wife and two adolescent daughters, Jeff spreads his work on the kitchen table and puts in a couple more hours.
Worksheet 3.2

Identify the Relevant NVASC Standards

Scenario: Sue and Connie
Sue, a rape crisis advocate, has been called to the emergency room to assist Connie, a rape victim. Connie is too embarrassed to describe, in the presence of a police officer, the intimate details of the rape. Eventually, the officer agrees to leave the room but asks Sue to report the details of Connie’s story to him. According to her agency’s policy, Sue should decline because doing what the officer requested would allow her to be subpoenaed if the case comes to trial.

Scenario: June and Abeir
June, the victim services coordinator for a large metropolitan police department, is particularly fond of Abeir, a young Sudanese immigrant who has filed a report on her boyfriend after he threatened to kill Abeir’s young daughter. June soon realizes that Abeir has severe mental health problems exacerbated by dynamics within her family. June decides Abeir needs therapy to deal with her anger and understand the threat these issues pose for her daughter. Because June has 10 years’ experience as a psychotherapist, she is considering counseling Abeir herself, despite having little knowledge of Abeir’s culture.

Scenario: David and Emma
David, the chief district attorney popular for his get-tough policy on crime, is being honored at a political dinner for his public service work. After David’s thank-you speech, Emma, a victim assistance provider at a domestic violence shelter, realizes she has an opportunity to ask that he publicly defend his “no-drop” policy, which prevents women from dropping charges against their batterers once they have made a report. A batterer has recently carried out his threat to murder his wife if she ever brought charges against him, even though the woman had desperately tried to drop the charges.

Scenario: Lee and Lisa
Lee Chan works at a nonprofit advocacy center where she provides support to victims of abuse and neglect. She is working with Lisa, a 19-year-old immigrant who lives with her father, sisters, and two aunts and uncles (none of whom have green cards) in a Southeast Asian neighborhood. They suffered greatly in their country of origin, and Lisa feels it is her duty to keep her family together in America. One of Lisa’s uncles molestes her, but she refuses to report him. She is terrified that an official report will trigger his deportation, and the whole family will turn against her.
Scenario: Carlotta and Inez
Carlotta, a victim assistance provider at the police department, often encounters young women in the Hispanic community who are at risk of violence when they break up with their gang-member boyfriends. Today, Inez was fired upon by someone she believes (but cannot prove) was her ex-boyfriend. Inez reluctantly agrees to stay out of sight while Carlotta looks for a safe place for her to stay. Later that afternoon, Carlotta receives a call saying that Inez has been hospitalized for a gunshot wound she received while standing in front of a popular gang hangout. Carlotta is so angry with Inez for not staying home that she does not want to see her.

Scenario: Sam and Little Saigon
Sam, a community-based crisis responder who speaks Vietnamese, is called out on a homicide in Little Saigon, a city neighborhood where Asian immigrants reside. Neighbors have witnessed the shooting of a teenaged boy, and the alleged killer has been arrested. The boy’s parents arrive as the emergency medical team is preparing to remove his body. The parents insist that his body cannot be moved until the Buddhist monk, who is on the way, conducts a short ceremony to support their son’s departing soul. A hostile crowd, shouting in Vietnamese, grows as the police officer in charge proceeds with the removal.
Worksheet 3.3

NVASC Standards for Victim Assistance
Programs and Providers

Developed by the National Victim Assistance Standards Consortium (NVASC)

SECTION I: Scope of Services

ETHICAL STANDARD 1.1: The victim assistance provider understands his or her legal responsibilities, limitations, and the implications of his/her actions within the service delivery setting, and performs duties in accord with laws, regulations, policies, and legislated rights of persons served.

ETHICAL STANDARD 1.2: The victim assistance provider accurately represents his or her professional title, qualifications, and/or credentials in relationships with persons served and in public advertising.

ETHICAL STANDARD 1.3: The victim assistance provider maintains a high standard of professional conduct.

ETHICAL STANDARD 1.4: The victim assistance provider achieves and maintains a high level of professional competence.

ETHICAL STANDARD 1.5: The victim assistance provider who provides a service for a fee informs a person served about the fee at the initial session or meeting.

SECTION II: Coordinating within the Community

ETHICAL STANDARD 2.1: The victim assistance provider conducts relationships with colleagues and other professionals in such a way as to promote mutual respect, confidence, and improvement of services.

ETHICAL STANDARD 2.2: The victim assistance provider shares knowledge and encourages proficiency in victim assistance among colleagues and other professionals.

ETHICAL STANDARD 2.3: The victim assistance provider serves the public interest by contributing to the improvement of systems that impact victims of crime.

SECTION III: Direct Services

ETHICAL STANDARD 3.1: The victim assistance provider respects and attempts to protect the victim’s civil rights.
**ETHICAL STANDARD 3.2:** The victim assistance provider recognizes the interests of the person served as a primary responsibility.

**ETHICAL STANDARD 3.3:** The victim assistance provider refrains from behaviors that communicate victim blame, suspicion regarding victim accounts of the crime, condemnation for past behavior, or other judgmental, anti-victim sentiments.

**ETHICAL STANDARD 3.4:** The victim assistance provider respects the victim’s right to self-determination.

**ETHICAL STANDARD 3.5:** The victim assistance provider preserves the confidentiality of information provided by the person served or acquired from other sources before, during, and after the course of the professional relationship.

**ETHICAL STANDARD 3.6:** The victim assistance provider avoids conflicts of interest and discloses any possible conflict to the program or person served as well as to prospective programs or persons served.

**ETHICAL STANDARD 3.7:** The victim assistance provider terminates a professional relationship with a victim when the victim is not likely to benefit from continued services.

**ETHICAL STANDARD 3.8:** The victim assistance provider does not engage in personal relationships with persons served which exploit professional trust or could impair the victim assistance provider’s objectivity and professional judgment.

**ETHICAL STANDARD 3.9:** The victim assistance provider does not discriminate against a victim or another staff member on the basis of race/ethnicity, language, sex/gender, age, sexual orientation, (dis)ability, social class, economic status, education, marital status, religious affiliation, residency, or HIV status.

**ETHICAL STANDARD 3.10:** The victim assistance provider furnishes opportunities for colleague victim assistance providers to seek appropriate services when traumatized by a criminal event or client interaction.

**SECTION IV: Administration and Evaluation**

**ETHICAL STANDARD 4.1:** The victim assistance provider reports to appropriate authorities the conduct of any colleague or other professional (including self) that constitutes mistreatment of a person served or brings the profession into dishonor.
Module 3
Ethics in Victim Services

Learning Objectives

- Recognize when a person is acting in an ethically questionable way.
- State at least one NVASC ethical standard for victim service providers.
- State at least one way to make ethical standards a part of an organizational culture.

Ethics and You
Activity

Is It Ethical?

Worksheet 3.1

Ethics Background

- Ancient civilized societies developed systems of moral principles based on values.
- Early ethical codes of law and medicine were set in place.
- Victim assistance evolved into an established profession.

Code of Ethics Purposes

- Safeguards reputation of the profession
- Protects public from exploitation
- Furthers competent and responsible practice
Foundation for Code of Ethics

- Client autonomy, privacy and self-determination
- Objectivity and abstention from abuse
- Honesty and equity of service
- Compassion and respect for individuals
- Social responsibility and confidentiality
- Working within one’s range of competence

National Victim Assistance Standards

Victim Assistance Field Background

- Moved from grassroots beginnings to a professional discipline
- Encompasses a wide diversity of individuals and organizations
- Provides services over the entire range of the justice experience
Victim Assistance Field Background

- Greater accountability by victim assistance providers was needed.
- Field is viewed as credible, worthwhile, and providing much-needed services.
- National Victim Assistance Standards Consortium (NVASC) was formed to develop professional standards for the field.

NVASC
National Victim Assistance Standards Consortium

- Created in 2000 by OVC
- Purpose: To create model program, competency, and ethical standards
- Result: Standards for Victim Assistance Programs and Providers
- Ethics in Victim Services – book based on the NVASC model

NVASC Ethical Standards

- Scope of Services
  - Professional activities
- Coordinating within the Community
  - Collaboration
- Direct Services
  - Relationships
- Administration and Evaluation
  - Monitors activities and relationships
Scope of Services

- Professional activities
  - Follow the law
  - Accurate representation
  - Professional conduct
  - Professional competence
  - Inform about costs

Coordinating within the Community

- Collaboration
  - Respect colleagues
  - Share knowledge
  - Improve systems

Direct Services

- Relationships
  - Respect civil rights
  - Protect victim interests
  - Nonjudgmental
  - Self-determination
  - Confidentiality
Direct Services

- Relationships
  - Terminate appropriately
  - Good boundaries
  - Non-discriminatory
  - Support colleagues
  - Avoid conflict of interest

Administration and Evaluation

- Monitors activities and relationships
  - Reports mistreatment
  - Reports misconduct

Activity

*Identify the Relevant NVASC Standards*

*Worksheet 3.2*
Activity

NVASC Standards in Your Organization

Worksheet 3.3

Is it Ethical? Revisited

- Was the victim assistance provider acting in an ethically questionable manner?
- Any additional rationale?
- What NVASC standards might apply?

Ethical Organizations
Activity

Creating Ethical Organizations

Review of Module Learning Objectives

- Recognize when a person is acting in an ethically questionable way.
- State at least one NVASC ethical standard for victim service providers.
- State at least one way to make ethical standards a part of an organizational culture.
Module 4: Standard Decisionmaking Process for Ethical Decisions

Purpose

This module teaches participants a standard process for making ethical decisions and how to use the process.

Lessons

1. The Decisionmaking Process
2. Common Ethical Issues

Learning Objectives

By the end of the module, you will be able to:

- State the steps in the standard decisionmaking process.
- Use the standard decisionmaking process when faced with an ethical dilemma.
1. The Decisionmaking Process

Effective decisionmaking for victim service providers requires knowledge of the relevant ethical standards as well as practical considerations in making ethical decisions. The decisionmaking process can be organized into six basic steps:

2. Identify relevant standards and practical considerations. What ethical standards and corresponding practical considerations are in conflict?
3. Brainstorm at least three (preferably more than five) courses of action and consequences of each.
4. Consult your peers or your supervisor.
5. Choose the best option and act.
6. Evaluate: How can this situation be avoided in the future?

2. Common Ethical Issues

Common ethical issues that victim assistance providers face include boundary issues and multiple relationships, confidentiality, legal advocacy versus legal advice, and professional competence.

Boundary Issues and Multiple Relationships

If providers offer friendship (or love) to clients outside the purview of their duties, or if they exchange goods and services with a victim, then professional boundaries have been violated and a dual relationship has been created. In a counseling or advocacy relationship, the provider has professional influence over the victim. When a second or dual relationship is established, the provider’s influence and the victim’s subordination are generally replicated. The victim remains vulnerable to the provider’s position of power, creating an unfair dynamic in the second relationship. This blurring of the boundaries between the primary and secondary relationships permits the abuse of power.

Victim assistance providers who enter into dual relationships with victims often rationalize their behaviors by asserting that the circumstances are unique or that they cannot serve the client without making efforts that exceed normal boundaries. However, regardless of these well-meaning intentions, crossing the boundaries of ethical practice creates a potentially exploitive situation for the victim and impairs the good judgment of the provider.

Any time providers venture outside the boundaries established in the professional code of ethics, they do a disservice to the victim, who may ultimately experience distrust and anger.
If providers engage in dual relationships or have an inclination to do so, they should seek assistance in identifying their motivations and request intensive supervision of their interactions with victims. If necessary, they may need to leave their jobs until the ability to maintain appropriate boundaries has been reestablished.

Confidentiality

Confidentiality is the foundation upon which trust in the provider-victim relationship is developed and nurtured. Serving victims often requires that providers become involved in private and personal areas of people’s lives. Respecting the privacy of the victims served and keeping all aspects of the relationship confidential to the fullest extent are ethical standards that apply to every client served. Many providers are required to sign confidentiality agreements with their agencies and maintain the confidentiality of agency records, and are held accountable for adherence to the agency policy on confidentiality.

However, confidentiality is not a guaranteed right in the field of victim services. Unlike other legal rights of confidentiality, such as the attorney-client privilege or the psychotherapist-patient privilege, there is not a commonly established right of confidentiality between victim service providers and their clients. Some states have extended, most by way of the psychotherapist-patient privilege, the right of confidentiality to domestic violence and sexual assault victim service providers.

Even where the rule of confidentiality is established by state statute, there are situations in which confidentiality can, and even should, be broken. It is the provider’s duty to inform a victim of these exceptions at the beginning of the relationship (except in extraordinary crisis situations). Exceptions to the right of confidentiality are discussed in detail in the NVASC’s Ethical Code for Victim Assistance Providers and include the following:

- Emergency health issues (including death)—for example, information pertaining to the health of an individual in need of immediate medical intervention.
- Conditions relating to minor victims—for example, reports of imminent danger to the minor.
- Sharing of information among agency colleagues that extends the confidentiality clause to those privy to the information.
- When a confidential communication has raised a threat of imminent harm to either the client or a third party.
- Informed consent—a written release, signed by the victim, that permits providers to disclose written or oral communications to any individual or entity.
- Child and elder abuse. In some states providers will be mandated to report child and elder abuse to child or adult protective services.
- Duty to warn—the legal obligation to inform people of danger. States differ regarding duty to warn and confidentiality privileges.
When subpoenaed to testify in court in some states. It is imperative that providers be educated about the controlling legal authority in their states with respect to confidentiality and its exceptions.

Legal Advocacy versus Legal Advice

Legal advocacy to crime victims is also complicated by unauthorized practice of law (UPL) statutes. All states have laws that limit the practice of law to licensed attorneys, but courts differ widely in how they enforce the law. Generally, the courts look at UPL in terms of harm caused by the practice of law by an unlicensed person.

Many victims of domestic violence pursue cases in court for custody and restraining orders without the services of a lawyer, and legal advocates often find themselves walking a fine line between assisting victims in the legal process and UPL. The advocate can give information and support and can make referrals to appropriate resources. For example, victim assistance providers can give a tour of the courtroom and explain what typically happens in court but should avoid giving any legal advice to clients.

Phrases to remember and to keep you clear of giving legal advice include:

- I cannot tell you what to do, but some of your options are….
- I cannot predict what will happen in your case, but the usual process is….
- I know that none of these choices are what you want, but which option will move you closer to what you need?
- I can never guarantee what the judge/police/social services will do, but what usually happens is….
- It has been my experience that women in similar circumstances to yours have done….but you will need to decide what works best for you.

If you find yourself saying, “you should,” “what will work is,” or “if I were you,” stop and rephrase your thought in a way that places the choice/responsibility on the client.

Professional Competence

Victim assistance providers must keep informed of all new and pertinent developments within the field, including research findings, newly enacted statutory guidelines, and policy changes. Achieving and maintaining professional competence serve the interests of the victim, the field of victim services, and the victim assistance provider.

Being competent also means providers recognize when the need for supervision or other types of consultation arises. In serving the best interests of the victim, providers must stay within their clearly defined roles and responsibilities. If the victim’s needs go beyond these particular roles and responsibilities, providers must make an outside referral. To do this, providers must be familiar with the resources of the community in which they work and have contacts within the allied professionals in the area.
When a victim no longer benefits from the services the victim assistance provider has to offer or the services are no longer relevant to the victim’s needs, the professional relationship should be terminated. The provider should prepare the victim for this eventuality, particularly if the victim is unusually vulnerable and derives a great deal of support from their relationship. If referral to another professional is indicated, the provider should obtain as much information as possible and provide this to the victim in a timely manner. On the other hand, providers are strongly discouraged from terminating a relationship with a victim in order to pursue a business or personal relationship with the victim.
Worksheet 4.1

The Decisionmaking Process


2. Identify relevant standards and practical considerations. What ethical standards and corresponding practical considerations are in conflict?

3. Brainstorm at least three (preferably more than five) courses of action and consequences of each.

4. Consult your peers or your supervisor.

5. Choose the best option and act.

6. Evaluate: how can this situation be avoided in the future?
Worksheet 4.2

**Disclosing Victim Vignette**

Deborah Giles is a victim assistance provider in a prosecutor’s office. For the past 5 months, Deborah has been working with Paulina Mantegna, a young woman who is a victim of criminal sexual assault. The case against Paulina’s rapist is about to plead out.

A call has been patched through to Deborah’s home phone. As this scenario opens, we hear the phone ring in Deborah’s apartment.
Worksheet 4.3

Common Ethical Issues

State the ethical issue.

What standards are relevant to this issue?

What practical considerations should the victim service provider be aware of?
Module 4
Standard Decisionmaking Process for Ethical Decisions

Learning Objectives

- State the steps in the standard decisionmaking process.
- Use the standard decisionmaking process when faced with an ethical dilemma.

The Decisionmaking Process
Decisionmaking Process

1. Assess the facts.
2. Identify relevant standards and practical considerations.
3. Brainstorm options and consequences.
4. Consult with peers/supervisor.
5. Choose best option and act.
6. Evaluate.

Activity

Disclosing Victim Vignette

Worksheet 4.2
Common Ethical Issues

- Boundary issues and multiple relationships
- Confidentiality
- Legal advocacy versus legal advice
- Professional competence

Activity

Common Ethical Issues
Worksheet 4.3
Review of Module Learning Objectives

- State the standard decisionmaking process.
- Use the standard decisionmaking process when faced with an ethical dilemma.
Module 5: Case Studies

Purpose

This module provides practice in using the standard process for making ethical decisions when facing an ethical dilemma.

Lesson

Case Study

Learning Objective

By the end of the module, you will be able to:

- Use the standard decisionmaking process, given a particular ethical dilemma.
Worksheet 5.1

The Decisionmaking Process


2. Identify relevant standards and practical considerations. What ethical standards and corresponding practical considerations are in conflict?

3. Brainstorm at least three (preferably more than five) courses of action and consequences of each.

4. Consult your peers or your supervisor.

5. Choose the best option and act.

6. Evaluate: how can this situation be avoided in the future?
Worksheet 5.2

Case Study

1. Blake and Philip

Blake is the victim advocate in the Surry County Sheriff’s Department. He recently had a case that posed a dilemma for him. His sister has been through a traumatic divorce and her minister Philip helped her through it. A woman in the choir has accused the minister of molesting her during a counseling session. Blake is certain that Philip could not be guilty. In fact, he knows from his sister that there are factions within the church that are trying to get rid of the minister. Some members think he takes the Bible too literally. This accusation could be a ploy to ruin the minister’s name.

Ethical Standards

<table>
<thead>
<tr>
<th>Practical Considerations</th>
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<tbody>
<tr>
<td>Three options and consequences for each:</td>
</tr>
<tr>
<td>1.</td>
</tr>
<tr>
<td>2.</td>
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<tr>
<td>3.</td>
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</tbody>
</table>
Chosen course of action:

How can this situation be avoided in the future?
2. Carrie and Maria

Carrie is a victim assistance provider with a private nonprofit agency that serves victims of sexual assault. She has recently started working with Maria, who refuses to leave her abusive husband though he frequently assaults her sexually. Carrie has suggested that Maria talk to a counselor, and Maria has agreed, provided she can see an Hispanic female counselor. Carrie’s agency has a practice of referring victims to a counseling group that is regarded as having special expertise in working with crime victims. The director of the group, Brooke, works hard to accommodate sexual assault victims and be supportive of Carrie’s agency. Brooke and Carrie have become friends. In fact, their families have vacationed together several times at Brooke’s mountain home. Carrie knows that Brooke has recently hired an Hispanic male counselor in an effort to meet the cultural needs of clients, but Maria keeps saying that she cannot relate to a man.

**Ethical Standards**

**Practical Considerations**

**Three** options and consequences for each:

1.

2.

3.
Chosen course of action:

How can this situation be avoided in the future?
3. Kayla, Liz, and Kate

Kayla, a sworn officer at a law enforcement agency, has recently taken on the role of victim assistance provider at the agency. She is riding with Frieda, another officer, to respond to a domestic violence report, which turns out to be at the home of a lesbian couple. Kayla sees that one of the women, Kate, has bruises around her wrists and neck (evidence of previous abuse), and her nose is bleeding. The woman seems terrified but submissive to the other, more outspoken woman, Liz. Kate readily agrees with Liz’s story that Kate ran into a door and broke her nose. Although the state’s domestic violence laws do not apply to homosexual couples, Kayla thinks that she and Frieda should make an arrest on assault and battery, but Frieda treats the women with condescending indifference and leaves without making an arrest. In the car, she tells Kayla that a couple of dykes can beat each other up all they want as far as she is concerned.

**Ethical Standards**

**Practical Considerations**

Three options and consequences for each:

1. 

2. 

3. 
Chosen course of action:

How can this situation be avoided in the future?
4. Teresa and Mandy

Teresa works at a local domestic violence shelter. She has taken a couple of counseling classes but has no formal training as a therapist or mental health professional. She has recently gained the trust of Mandy, a client who was abused as a child and has recently left an emotionally and physically abusive relationship. Teresa soon realizes that Mandy has serious mental health issues and needs additional therapy. Mandy expresses a deep-seated mistrust of “shrinks” because she became sexually involved with one therapist 10 years ago. The relationship did not last and she felt betrayed.

**Ethical Standards**  
**Practical Considerations**

**Three** options and consequences for each:

1. 

2. 

3. 
Chosen course of action:

How can this situation be avoided in the future?
5. Sally and Jeffrey

Sally is a victim assistant who facilitates a homicide survivor support group. She has been working closely with Jeffrey, whose life partner was murdered. Sally knows that Jeffrey is battling a cocaine addiction, and she has helped him secure drug treatment out of state. Sally recently learned that Jeffrey was arrested as an uninsured driver after wrecking another person’s sports car, which has raised her concerns about whether he is still actively using cocaine. The passenger in the car was seriously injured. Jeffrey passed the breathalyzer test, but the district attorney’s office thinks he might have been high on something else. Today, Sally received a voicemail message from a prosecutor she has known for years asking her to come in to discuss Jeffrey. Sally knows that there is no statutory protection of confidential privilege for providers in the state where she lives and works.

**Ethical Standards**

**Practical Considerations**

Three options and consequences for each:

1.

2.

3.
Chosen course of action:

How can this situation be avoided in the future?
6. Frances and Skip

Frances’s son was killed in a car accident last year, and she is now going through a painful divorce. She is taking over-the-counter and prescription medications to help her cope. Her friend and fellow victim assistance provider, Skip, who has worked with Frances for several years, has noticed she has been neglectful of her clients, failing to return phone calls or keep up with case documentation. Several times she has asked Skip to cover for her. Recently he found out that she has had dinner a couple of times with a married man, a client with whom she has been working for a couple of months. When Skip asks Frances about it, she replies that the man just wants to express his gratitude. Skip knows that Frances is going through a rough time and is looking for solace wherever she can find it, but he also knows that her actions are inappropriate.

_Ethical Standards_  

_Practical Considerations_

Three options and consequences for each:

1. 

2. 

3. 
Chosen course of action:

How can this situation be avoided in the future?
7. Chana, Tanya, and Rosanne

Chana is a trauma counselor who works with high school teenagers who have been victims of child molestation. Two of her most problematic cases are Tanya and Rosanne, who are best friends and always at risk of suspension from school as chronic troublemakers. Tanya is generally the instigator of the trouble, but Rosanne is her loyal follower. Chana feels that her professional relationship with Tanya is ineffective and wants to refer her elsewhere, but she is also aware that she responds negatively to Tanya because of her bad behavior. Rosanne, on the other hand, is quite receptive to treatment, particularly when she is free of Tanya’s negative influences. Chana fears that she may lose Rosanne’s interest and possibly her trust if she terminates the relationship with Tanya. Clearly, the two girls talk about their meetings with Chana and share experiences which may be the only way Tanya is benefiting, albeit indirectly, from treatment.

**Ethical Standards**

**Practical Considerations**

Three options and consequences for each:

1.

2.

3.
Chosen course of action:

How can this situation be avoided in the future?
8. Carolyn and Grassroots Groups

Carolyn, who is white, has a large grant to provide assistance to the five culturally and ethnically diverse populations that have started grassroots homicide survivor groups in the city. Her role as a strategic planner/victim assistance provider is to help them assess their needs as an organization, to assist them in applying for not-for-profit status, and to help them become self-sufficient as support groups for survivors. Carolyn believes that she is color blind – that race and culture are not factors in her job. However, many of the members of the grassroots groups feel that she does not understand them. Over a period of months they have been increasingly frustrated by her stereotypical views about their cultures. When they ask her to bring in interpreters and members of their own communities to assist her, she replies that the money will be better spent hiring lawyers to secure the not-for-profit status.

*Ethical Standards*  
*Practical Considerations*

**Three** options and consequences for each:

1.

2.

3.
Chosen course of action:

How can this situation be avoided in the future?
9. Jane and Linda

Jane works as a victim assistance provider in a nonprofit counseling center. Linda, her newest client, is a Native American activist working to reclaim land for the Lakota tribe. Linda was beaten up 3 weeks ago in a heated argument during a land claims meeting. Linda does not want to report the incident because she believes it will reflect poorly on the activist group. In conversation, Linda reveals that her religion has been central to the process of healing from this violence. She belongs to a Native American church that uses peyote as part of its religious ceremonies, particularly those involving healing. Although some argue that peyote is legal because of freedom of religious practice, Native Americans who have gone up against the courts in the past have often lost their cases. Now Jane has found out that Linda’s 10-year-old son also participates in the healing ceremonies to help him get over the paranoia and fear he has been experiencing since his mother was attacked.

Ethical Standards       Practical Considerations

Three options and consequences for each:

1.

2.

3.
Chosen course of action:

How can this situation be avoided in the future?
10. Charlotte and Teisha

Teisha has been battling her husband Andre for custody of their two sons. They have filed for divorce after 3 years of marriage during which they had five domestic violent incidents involving law enforcement. Charlotte, a victim advocate with the sheriff’s department, has been assisting Teisha throughout her troubled marriage. A couple of weeks prior to the custody hearing, Teisha convinced Andre to meet for dinner without their lawyers and try to work some things out on their own. The evening ended in another domestic violence incident that left Teisha with a black eye and sprained wrist. She called Charlotte the next morning and vehemently expressed her desire to report the incident. Charlotte understands Teisha’s anger but is afraid that reporting Andre may jeopardize custody of Teisha’s sons, considering that Teisha talked Andre into meeting without the lawyers and that Teisha also left a nasty scratch on Andre’s face.

**Ethical Standards**

Three options and consequences for each:

1. 

2. 

3. 

**Practical Considerations**
Chosen course of action:

How can this situation be avoided in the future?
Use the standard decisionmaking process when faced with an ethical dilemma.

**Case Study**
*Worksheets 5.1, 5.2*
Case Study

1. Explain the facts of the case.
2. What are the relevant standards and practical considerations?
3. Present your three options and pros and cons of each.
4. Which option did you chose and why?
5. Evaluate: how can this situation be avoided in the future?

Review of Module
Learning Objective

- Use the standard decisionmaking process when faced with an ethical dilemma.

Review of Module
Learning Objective

- Use the standard decisionmaking process when faced with an ethical dilemma.
Module 6: Closing and Evaluations

Purpose

This module provides a “wrap up” for the course. You will fill out an evaluation of the course.

Lessons

1. Personal and Professional Ethics Conflict
2. Closing
3. Evaluations

Learning Objectives

By the end of the module, you will be able to:

- State the skills presented in the course.
- Generate ideas on how to implement ethics in your organization.
Worksheet 6.1

Brainstorming Ideas

What can you do when you get back?
Module 6
Closing and Evaluations

Learning Objectives

- State the skills presented in the course.
- Generate ideas on how to implement ethics in your organization.

Activity

**Personal and Professional Ethics Conflict**
Closing

Activity

*Brainstorming: What Can You Do When You Get Back?*

*Worksheet 6.1*

Expectations
Course Objectives

Create self-awareness and understanding of how attitudes and beliefs influence responses to victims of crime.

Course Objectives

Learn the Standards for Victim Assistance Programs and Providers developed by the National Victim Assistance Standards Consortium (NVASC).

Course Objectives

Recognize when a person is acting in an ethically questionable way.
Use a standard decisionmaking process when faced with an ethical dilemma.
Evaluations

Thank You