

The Case of Blaise

Case Scenario number three

Ulonda V Jemmott

Nyack College

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Dr.A'Tasha M. Christian

Blaise appears to be a troubled young man with impetuous thoughts of brutality and savagery toward himself and others. He delineates occasions when he has vigorously beaten his girlfriend, Lucy, which has caused her to be afraid of leaving him, anticipating more savage beatings according to his knowledge. He explains that his distemper gets so out of control that he feels like killing her. He speaks as one with severe violence issues and enjoys physically taking it out on weaker vessels and controlling them through physical assaults and intimidation. He likes being in control and forceable willing others into submission, and his thoughts of harming himself and others though impulsive, could also be suicidal and contemplative. As a school counselor, I assume that Blaise is seeking help because he's sharing this information with me even after I shared with him my "legal and ethical obligation to break confidentiality if I have good reason to suspect suicidal conduct or potential harm to someone else" according to Corey et al. (2014).

As a school counselor, I must prepare a safe place for the students to divulge their difficulties and assess a student's risky behavior if possible. The case of Blaise doesn't give me much information concerning his culture, family background, and when or if these beatings of his girlfriend Lucy were done on school grounds or during school hours, but due to the severe nature of our conversation, I want to learn more about his childhood and how did he get to the place where he feels that it's morally okay to physically beat a woman and take glory in her fear of him. I want to know if he's ever had any anger management counseling if there were other episodes when he lost his temper and caused bodily harm or if he ever harmed himself in anger. I will pursue the question, "Do you want to commit suicide" since he impulsively desires to harm himself.

According to (Remley & Herlihy, 2014), a counselor can make a resolve that this student is at risk for suicide and use the least invasive steps necessary to prevent harm to the student. I want to consult with a supervisor or colleagues with more competency in identifying and presiding over such cases so that I can make a sound judgment in this case because there's also the duty to protect others, and Lucy must be covered. I do not feel I influence this student, and I find risk factors for a diagnosis of possible mood disorder or bipolar disorder. This student has suicidal tendencies and desires to harm himself and others; although he has not spoken of any specific plans to end his life, I have no information on any past treatment. With bipolar disorder, a person will have sudden impulsive thoughts of reckless behavior, and he has abused Lucy repeatedly and may eventually commit suicide due to depression.

I don't know enough about family genes and their possible role in suicide; this student is not a substance abuser from the information received. However, upon consultations, I will document all necessary information, contact the proper authorities after informing my client, and contact Lucy as part of my "duty to Protect," according to Corey et al. (2014). I recommend that this student have anger management counseling and see a psychiatrist for further evaluation.