



(Review Article)

Ethical Codes and Psychotherapy

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Abstract

Background: Ethics is considered in detail in medicine, and it is needed to be respected carefully in psychology and psychotherapy. Ethics code provides a common set of principles and standards upon which psychologists build their professional and scientific work. This ethics code is intended to provide specific standards to cover most situations encountered by psychologists. This study aims to consider general principles and specific ethical issues in psychotherapy and consulting.

Conclusion: General principles that should be respected by all psychologist and therapist are as followed; beneficence and nonmaleficence, fidelity and responsibility, integrity, justice, respect for people's right and dignity. Specific ethical issues in psychotherapy; informed consent in therapy, privacy and confidentiality, avoiding harm, unfair discrimination, sexual harassment.

Keywords: Ethical principles, Psychotherapy, Privacy, Informed consent

Introduction

Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing

informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness.

Ethics code provides a common set of principles and standards upon which psychologists build their professional and scientific work. This ethics code is intended to provide specific standards to cover most situations encountered by psychologists. It

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has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline. The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems (1).

General principles, as opposed to ethical standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General principles, in contrast to ethical standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon general principles for either of these reasons distorts both their meaning and purpose.

Beneficence and Nonmaleficence

Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work (2)

Fidelity and Responsibility

Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional

standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage (3).

Integrity

Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities' psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques (4).

Justice

Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices (5,6)

Respect for People's Rights and Dignity

Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous

decision making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status, and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices (7).

Psychotherapy and Ethics

There are some ethical issues in psychotherapy that should be considered and respected. These issues explained below in brief.

- ***Informed consent to therapy***

Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties, and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers.

When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation.

When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor (8,9).

- ***Unfair Discrimination***

In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law (1).

- ***Sexual Harassment***

Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts.

Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status (10).

- ***Avoiding Harm***

(a) Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

(b) Psychologists do not participate in, facilitate, assist, or otherwise engage in torture, defined as any act by which severe pain or suffering, whether physical or mental, is intentionally inflicted on a person, or in any other cruel, inhuman, or degrading behavior that violates (11).

- ***Multiple Relationships***

A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or

otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.

When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur.

- ***Conflict of Interest***

Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to (1) impair their objectivity, competence, or effectiveness in performing their functions as psychologists or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation (12,13).

- ***Third-Party Requests for Services***

When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality.

- ***Exploitative Relationships***

Psychologists do not exploit persons over whom they have supervisory, evaluative or other authority such as clients/patients, students, supervisees, research participants, and employees.

- ***Cooperation with Other Professionals***

When indicated and professionally appropriate, psychologists cooperate with other professionals in

order to serve their clients/patients effectively and appropriately.

- ***Interruption of Psychological Services***

Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations.

- ***Privacy and Confidentiality***

Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship.

Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities.

Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.

Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality.

Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives.

Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made (14,15).

Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law.

Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose.

When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation.

Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so (16).

Conclusion

Psychotherapy is a professional relationship between patient and therapist that is based on authenticity, seriousness, intimacy, and freedom. Psychotherapy or psychological treatment refers to the way that a professionally trained therapist performs and adheres to ethical principles. Because most people with neurological and psychological problems have concerns about access to mental health services, such as concerns about

therapist intervention in their privacy and the consequences this may have, in addition to fear of being defamed and negative social outlooks usually disturb their minds and make them hesitant to go to counseling and psychotherapy centers, which causes many people to suffer despite severe and painful neurological problems. Cognitive burdens are less likely to be referred to counselors and therapists if the counselor or therapist carefully selected, many of these concerns will be unnecessary. Today's problems are much more complex than they used to be, and they require an experienced and knowledgeable person. We need to consult with knowledgeable, compassionate, and committed individuals to achieve the right results in our personal, social, economic, and other activities; we must adhere to the ethics of psychotherapy in order to achieve this. Ethics are those general rules of ethics that are the basis for achieving an ethical goal, and this is a very important concern for therapists. The principles, of course, are general guidelines for organizing programs that derive from the values and experiences of the profession.

The ethics of counseling and psychotherapy are broad. Usually these criteria set minimum standards for therapist behavior and prevent prohibited behaviors. There is a big difference between simply adhering to ethical standards and having a practical commitment to ethical standards. Ethical commitments require ethical practice and the promotion of ethical standards requires the attainment of desirable standards of behavior. Therapists who are committed to high-level ethics will seek any professional service that is beneficial to their clients. The most important task of mental health professionals is to improve the health of clients. Code of ethics has been created to integrate this process and to support professionals. These are guidelines to guide ethical and professional challenges that counselors and therapists may refer to these codes of conduct in challengeable cases.

Ethical Consideration

Ethical issues (Including plagiarism, informed consent, misconduct, data fabrication and/or falsification, double

publication and/or submission, redundancy, etc.) have been completely observed by the authors.

References

1. American Psychological Association (2017). *Ethical principles of psychologists and code of conduct*. APA Publication, USA.
2. Kumar S, Dayalan N (2015). A reflection on hierarchy of principles of medical ethics in case of complex psychiatric presentation and use of mental health act. *European Psychiatry*, 30(1).
3. DeFreitas KD, Hucker SJ (2015). *Forensic psychiatry and forensic psychology: Criminal responsibility*. In: Encyclopedia of Forensic and Legal Medicine. 2nd ed. Elsevier Ltd, Netherlands. Pp. 574-578.
4. Greenstone AF (2018). Ethics and public integrity in space exploration. *Acta Astronautica*, 143: 322-326
5. Vyskocilová J, Hruby R, Slepecky M, Latalova K, Prasko J (2015). Justice in psychotherapy. *Neuro Endocrinol Lett*, 36(6): 589-599.
6. Espin OM. (2006). *Psychotherapy and social justice*. American Psychological Association Convention, New Orleans, US.
7. Lowman RL. (2008). Respect for people's rights and dignity. *General Ethical Principles*, 11:71-77.
8. Beahrs JO, Guthel TG. (2001). Informed consent in psychotherapy. *American Journal of Psychiatry*, 158: 4-10.
9. Fisher CB, Oransky M. (2008). Informed consent to psychotherapy: protecting the dignity and respecting the autonomy of patients. *Journal of Clinical Psychology*, 65(5):576-588.
10. Armstrong A. (2018). Sexual harassment: Common misunderstandings and what to do instead, good therapy. Available at: <https://www.goodtherapy.org/blog/sexual-harassment-common-misunderstandings-what-to-do-instead-0109185>. Accessed: 12 Jun 2019.
11. Haeny AM. (2014). Ethical considerations for psychologists taking a public stance on controversial issues: The balance between personal and professional life. *Ethics Behavior*, 24(4): 265-278.
12. Lisa M, Tora D, Citrome L (2019). Disclosures and conflicts of interest: solving the riddle, wrapped in a mystery, inside an enigma. *Journal of Surgical Research*, 41(12): 2643-2655.
13. Ramon J, Elpem DJ, Zampella JG. (2019). Conflicts of interest among dermatology. *International Journal of Women's Dermatology*, 5(5): 368-371.
14. Donner MB, Vandecreek L, Gonsiorek JC, Fisher CB. (2008). Balancing confidentiality: Protecting privacy and protecting the public. *Professional Psychology Research and Practice*, 39(3): 369-376.
15. APA—Committee on Ethical Guidelines for Forensic Psychologists. (1991). Specialty guidelines for forensic psychologists. *Law and Human Behavior*, 15: 655-665.
16. Dickson DT. (1998). *Confidentiality and privacy in social work*. The Free Press, New York.