

A few Introductory Notes on the Principles of Ethics

All codes of ethics need to balance the need for clarity with the need for simplicity and the need to reflect the underlying principles associated with ethics. In TA there is a tradition of emphasising Eric Berne's edict... "Do no harm"!

There is much debate about various codes of ethics, and at the present time there is an active debate as to how to standardise all the codes for all the member organisations of the United Kingdom Council for Psychotherapy (UKCP) ... Many different traditions of Psychotherapy within one body, all having their own histories and having developed their own codes and professional practice guidelines and codes.

Ethical Principles!

There is a long history of debate dating over the centuries! What constitutes an ethical principal? There seems to be various strands to this historical debate...

- The Emphasis on motivations of actions not their consequences ... Kantian ethics... (www.philosophypages.com/hy/5i.htm#gdw is a discussion on Kantian moral theory; www.philosophypages.com/ph/kant.htm provides an overview of Kant's life.)
- The rightness / wrongness of actions is to be judged by their predicted consequences. Utilitarianism... good is whatever brings greatest happiness (www.philosophypages.com/hy/5q.htm is a link to a discussion of and the history of utilitarianism.)
- The third area is less easily defined and is based on the idea of virtue... Emphasising the character of those making the virtuous judgements.
- If you are interested in following these interesting historical developments it is also worth taking a look a summary of Nietzsche's ideas: "Nietzsche: Beyond Morality": www.philosophypages.com/hy/5v.htm

In the book "Values and Ethics in the Practice of Psychotherapy" Fiona Palmer Barnes and Lesley Murdin describe 3 approaches to ethics:

- Consequential: In which the outcome defines what is ethical or not... ie all actions are ethically neutral...
- Dutiful: All actions are either right or wrong... thus defining their ethicality.
- Ethical Pluralists: who use both of the above to make decisions regarding the ethicality of actions.

They also describe various ethical principles and values underpinning ethics:

- Utility: (The aim is to bring about the best possible outcome for all concerned.)
- Respect for autonomy:
- Truth:
- Keep Promises:
- Confidentiality:
- Not causing harm:
- Fairness:
- Justice:
- Live in accord with nature:
- Be caring and Loving:
- Respect rights:
- Respect religious authority:

In attempting to draw these strands together Ross in the Right and the Good (1930) developed for the medical professions a concept of ethics which considered the morality of an action and its outcomes. The following are 7 categories of duties by which "We are morally governed".

1. Fidelity, being faithful to promises made.
2. Reparation, making a recompense for a wrongful act.
3. Gratitude, making payment for that which is received.
4. Justice, ensuring fairness to all.
5. Beneficence, working for the benefit of others.
6. Self-improvement, work for the benefit of self.
7. Non-maleficence, no harm to be done to others.

5 Guiding Principles

Steve Page and Val Wosket in the book Supervising the Counsellor (1994) suggest adding one more Autonomy and reducing the others to four principles...

1. **Non Maleficence...** Prevention of harm to others, dilemmas can arise in therapy for example when a client confides that they know of sexual abuse occurring, however they are too frightened to report it... The therapist has to decide who she / he must act to protect.
2. **Fidelity...** Being faithful to promises made. Contracts agreed upon must take into account what is realistic. For example a therapist may say... " I am available to you when you are feeling scared" Any limits to this availability must be made explicit. Other examples of areas of conflicts are the need to break confidentiality for supervision, and for protection of the client in emergencies.
3. **Justice...** Ensuring that people are treated fairly. Difficulties may in groups for example where one client is facing a crises, they may apparently receive more direct attention than others in a group. Extra phone calls etc.
4. **Beneficence...** Actions taken should do good, the question then arises who judges what is good... the client or the professional or the supervisor, or an external judge such as a religious teaching. For example the client making a decision may be to their benefit but be detrimental to the wider community or family.
5. **Autonomy...** Each individual has the right to freely choose their own course of action and to choose what happens to them. The constant difficulty in therapy is when a client in an impasse asks for help or direction regarding how to resolve their impasse. The therapist needs to consider what course of action is best going to invite the client to be autonomous; this in itself seems to contain possible contradictions as the therapist is choosing their intervention autonomously. (In TA we seek to work within this contradiction by working contractually within the therapy process, doing with the client rather than doing to the client)

A Hierarchy of Ethical Thinking and Practice:

As people develop their capacity for ethical thinking there is a developmental process through three levels...

- Ø **Fist Level: "The Rules"...** There is a rule which covers everything and dictates what is ethical and what is not. EG: "You shall do xyz"
- Ø **Second Level: "The Values"...** Behind every rule there is a value... "The reason we should do xyz is that it would be fair"
- Ø **Third level: "The General Principles" ...** Behind every value is a general ethical principle...The concept of justice, mercy, compassion and love are general principles.

Recommended Reading:

Complaints and Grievances in Psychotherapy... A Handbook of Ethical Practice, by Fiona Palmer Barnes.....

Complaints and Grievances in Psychotherapy... A Handbook of Ethical Practice, by Fiona Palmer Barnes..... I highly recommend this excellent handbook, written by an experienced practitioner in the art of handling ethical issues for the United Kingdom Council for Psychotherapy

Values and Ethics in the Practice of Psychotherapy and Counselling
Edited by Fiona Palmer Barnes

Supervision in the Mental Health Professions, A practitioners Guide by Joyce Scaife.

Despite it's terrible title this is the book I have based some of these notes on it!... I again recommend it!

TAJ Articles:

Ethics special edition 1994

1) Val Garfield: Ethical Principles for work in Organisations: 1993: vol 02. This article contrasts the history and rigorous requirements of traditional ethical standards governing therapist-client and teacher-student relationships with the more ambiguous and diverse standards necessary for work in training and organizational settings. Thirty-one ethical principles are proposed. The reader is invited to discover and confirm his or her personal code of ethics for organizational and training work.

2) Grace McGrath: 1994-01: Ethics boundaries and contracts, applying moral principles: Dealing with issues related to therapeutic boundaries often creates complex and difficult ethical dilemmas for psychotherapists. This article describes a method of applying moral principles (Thompson, 1990) to ethical dilemmas that can assist transactional analysts in making Adult decisions about boundaries.

3) William F. Cornell 1994-01: Dual Relationships in Transactional Analysis; Training, supervision and therapy: This article reviews the literature on and the practice of dual supervisory/therapeutic relationships in psychotherapy in general and transactional analysis in particular. Seven training and supervisory structures are delineated, and the clinical/ethical issues for each are discussed.

4) William F. Cornell 1997 – 01 Touch and boundaries in TA; Ethical and transferential considerations: While Eric Berne viewed physical contact between therapist and client with considerable anxiety and disapproval, the use of touch as therapeutic invention has become common in the practice of transactional analysis. This article presents a theoretical discussion of some of the implications of intentional physical contact between therapist and client, with particular attention to ethical and transferential concerns. It is the central premise of this article that the use of touch can simultaneously evoke a rich and potentially disturbing mix of history, affect, and desire.