A CODE OF ETHICS FOR FAMILY THERAPY ASSOCIATIONS

Introduction

Promoting a clear statement of the ethical commitments that guide the work of family therapists has emerged as an important part of the leadership role of the International Family Therapy Association (IFTA). Specifically, in recent years IFTA has been asked by interested parties for its Code of Ethics. However, IFTA had never formally adopted a Code of Ethics because of concerns about the many legal and cultural differences among its international members.

Major differences between IFTA and a national family therapy association are:
• A national or country-based code of ethics can incorporate legal issues that are unique to that country.
• National codes tend to be concerned with enforcement of behaviors and the imposition of sanctions for violations of provisions of that code.
• And IFTA is an interest group and does not attempt to regulate the practice of its members.

The following code of ethics is based on aspirations, rather than on laws and other legal requirements: That is, this code embodies what we as family therapists believe, are committed to, and attempt to achieve as family therapists.

Adequate basis and guidance for a code for national/local associations is readily available: In 2005, William Nichols wrote an invited article for the American Psychology Association’s The Family Psychologist which provides a context for delineating the difference between aspiration ethics and mandatory ethics:

Family therapists’ claim to the privilege of professional status carries with it the responsibility of ethical behavior toward those they serve, in the services they provide, as well as in research and teaching. As do other professionals, clinical practitioners among us assume the specific responsibility to maintain a competent professional and ethical relationship with clients/patients. We are also expected to demonstrate in our practice, knowledge of and conformity to, pertinent statutory and case law, and licensing board regulations, which are sometimes confused with ethics.
Two major kinds of ethical concerns affect us: *aspirational ethics* and *mandatory ethics* or responsibility. *Aspiration ethics* refers to the basic ideals that are supposed to guide the behavior of professionals. As stated in the preamble to the American Psychological Association’s 2002 Ethical Principles and Code of Conduct, aspirational ethics “do not represent obligations and should not form the basis for imposing sanctions.” *Mandatory ethics*, on the contrary, refers to the things that professionals must do; failing to perform those actions and act in the prescribed ways may bring some kind of punishment.”

“…The proposed code of ethics contain general principles of beneficence and non-malfeasance, fidelity and responsibility, integrity, justice and respect for people’s rights and dignity, which are intended to guide therapists toward the highest ideas of the professions. (Nichols, William C. (2005). Ethical issues in practice with couples and families. *The Family Psychologist*, 23, (3). pp. 4-7.)

A GUIDELINE FOR NATIONAL/LOCAL FAMILY THERAPY ASSOCIATIONS

**Meaning and Effect of a Code of Ethics**

A code of ethics binding on each and every member of a national family therapy association should be promulgated and upheld by that organization. In the absence of a national association of family therapy, such a code could be promulgated and upheld by a local family therapy association. The code of ethics for family therapists in either event should be considered together with the code of ethics of other professional organization/s with which the family therapist is affiliated. The family therapist also is expected to comply with applicable laws and regulations.

Each family therapist who joins the [name of association] family therapy association agrees to conform to the Association’s code of ethics and to accept any decision made by the association in connection with this code.

**The Recommended Code of Ethics**

The body of this code of ethics is contained in 10 sets of ethical standards that specify definite expectations and rules that are to be followed in fulfilling various roles.

**General Principles**

General Principles are aspirational and intended to assist the family therapist toward fulfillment of the highest ethical ideals of family therapy. As such, they are different from Ethical Standards and do not refer to behavioral requirements or sanctions for lack of fulfillment. These include the following principles:
1. Family therapists seek to benefit those with whom they work and to avoid doing harm.

2. Family therapists seek to be honest and truthful and to act responsibly in all of their professional relationships and behaviors.

3. Family therapists seek to promote justice and fairness in their practice and to support the rights of all persons to respectful regard and treatment, regardless of age, culture, disability, ethnicity, gender, national origin, religion, sexual orientation, socio-economic status, or related factors.

4. Family therapists seek to maintain a commitment to continuing professional and personal development so as to provide the best services to clients that they are capable of and to contribute to the advancement of professional knowledge and its promulgation among clients, colleagues, and the public.

5. Family therapists seek to support and advance laws and public policies pertaining to families and family therapy that benefit the public.

**Ethical Standards**

These define expectations of the family therapist that are to be developed and enforced by the [name of association] family therapy organization.

1. Responsibility to Clients

   Family therapists offer their knowledge and competence to clients for the purpose of advancing the welfare of the client, whether the client system is a family, couple, individual, agency, or a consultation group.

   Family therapists must remain aware of the trust and dependency of their clients and refrain from exploiting the clients for the therapist’s personal benefit.

   Family therapists must responsibly take into account the effect of their own mental and physical health on their ability to provide ethical professional service to clients and take appropriate steps to make certain they are functioning adequately or to end the therapy and refer the client when indicated.

   Family therapists must respect and observe the confidentiality of each client in the therapeutic relationship. Family therapists do not reveal client confidences except when they have a written and signed release or waiver or where permitted or required by law, and adequately protect all client records to protect confidentiality.

   Family therapists must secure informed consent in writing from clients before audio recording, videotaping, or allowing third party observation of therapy sessions.
2. Responsibility to Students and Supervisees

Family therapists must remain aware that they are in a position of considerable authority and power in relation to their students and/or their supervisees and refrain from abusing their position or exploiting their students and/or supervisees. Family therapists must take reasonable steps and precautions to ensure that their supervisees render ethical and competent professional services to clients.

3. Responsibility to the Profession

Family therapists should keep up with current developments in family therapy research and practice, and participate in appropriate educational endeavors as often and effectively as possible, either in private study or in formal, organized fashion.

Family therapists should consult and collaborate with professional colleagues appropriately and productively as possible in relation to client welfare and their own development and functioning as a professional.

Family therapists should practice within the boundaries of their knowledge and competence and refer cases which are outside those boundaries to other appropriate professionals.

Family therapists should acknowledge appropriate the contributions of others to their research, writing, and other joint professional activities.

**********************************************************************************************

Note:

These guidelines represent a minimalist approach which a national family therapy association (or, as noted, a local association in a country in which no national family therapy association exists) can follow as a guideline in establishing a code of ethics, adding to them to fill them out and adapting them to conform to the needs and culture of the country as needed. Consult the International Family Therapy Association with questions or for further information:

IFTA
1800 3rd Avenue, Suite 512
Rock Island, IL 61201 USA
William Hiebert, General Secretary
wjhiebert@aol.com

** Adopted in December of 2011.