

# PCE EUROPE: ETHICAL FRAMEWORK

## INTRODUCTION

Working on our Ethical Framework with pan-European significance, we were concerned with the scope and breadth of this document. As a consequence we agreed that in the spirit of PCE we will provide a framework, offer support and facilitate education towards better practice and growth.

We are, of course, aware of the fact that our member organisations have Ethical Codes and regulations, countries have national professional boards with their Ethical Codes and rules; and countries have laws that supersede any organisational ethical framework and rules. For this reason, any ethical issues should first be deferred to the national rules and regulations. Please also note, that PCE Europe is an accredited EAP-member and therefore follows the EAP Statement of Ethics and Principles.

This Ethical Framework serves to provide support and guidance and is not meant to issue rules or even punishment.

The Person Centred and Experiential Approach (henceforth called **PCE**) respects the individual as the subjective expert in their own life, possessing an innate movement towards psychological growth. This understanding of human behaviour provides a foundational ethical attitude for the person-centred and experiential practitioners toward the client, of non directivity, respect and trust.

PCE puts at the centre the person as being in a relationship, and their experience. It also promotes a basic ethical attitude within the relationship with the client. It is assumed that every person has inherent value, the potential and the right to develop constructively. This potential can develop with the help of beneficial relationship with a PCE member.

The following Ethical Framework outlines our ethical principles and guidelines applicable for all members of PCE Europe.

- All PCE-professionals, such as person-centred psychotherapists, counsellors, practitioners, trainers or other members will henceforth be called “**member**”.
- All professionally qualified activities like counselling, person-centred psychotherapy or mental health practice by PCE members will henceforth be called “**PCE practice**”.
- All potential beneficiaries (including patients, students etc.) will henceforth be called “**client**”.

These guidelines should be consulted in case of conflicts or dilemmas. Any further questions should first be discussed with the local member association. If not possible or no satisfactory outcome, the PCE Europe board can be consulted.

## **ETHICAL PRINCIPLES**

In our attitude towards our clients, colleagues and the public, we apply the following ethical principles:

### **Beneficence**

This is a core principle for the member in the therapeutic relationship, and as a representative of the profession: the commitment to promote the well-being<sup>1</sup> of their clients through action<sup>2</sup> that provide positive benefits and actions that prevent harm through action or non-action<sup>3</sup>.

This means being called to respond to potential clients and when responding, to do so out of responsibility and solidarity<sup>4</sup>.

### **Dignity**

All persons have an inherent<sup>5</sup> and inalienable value<sup>6</sup> that each of us recognises within ourselves, and within all others<sup>7</sup>. We have the consciousness that we are "subjects" and not "objects"; and the expectation<sup>8</sup> to be treated as such. In the context of PCE practice, dignity becomes more visible in vulnerability and weakness than in self-sufficiency.

### **Autonomy**

The client has the right to self-determination and the right to be informed and decide<sup>9</sup> on the course of the therapeutic process even when their capacity<sup>10</sup> or autonomy is impaired. Respecting autonomy entails informed consent, respect for confidentiality and telling the truth.

### **Confidentiality**

The member honours the trust<sup>11</sup> of protecting the information provided by the client for the purpose of the therapeutic process<sup>12</sup>. Also, the member recognises and informs about the limitations of confidentiality in relation with legal obligations<sup>13</sup>.

### **Justice**

The member commits to treat the client with fairness and impartiality<sup>14</sup>. They offer the client what they are entitled to receive on the basis of professional duty<sup>15</sup>, contractual relationships and legal grounds.

The member commits to treating people equally and with no bias, benefiting the member's abilities at a maximum<sup>16</sup>.

## **GUIDELINES**

The following guidelines outline our behaviour towards our clients, our colleagues and the public:

### **1. Toward the Client**

#### **Respecting and Protecting Dignity**

The member respects the dignity and integrity of the persons with whom they have a professional relationship. They ensure that the relationship has the client's best interests and purpose for the therapeutic relationship in mind at all times and is not abused in any way.

Examples:

- Contracting and boundary setting with the client is clear and specific, so that there is no possibility for misinterpretation.
- Offering honest support and opinions even when it is not in the practitioners financial interest.
- Having a conflict of role or interest and deferring the client to a colleague.
- The member ensures that the best interests of the client, and their purpose for the therapeutic relationship is held in mind at all times and not subject to abuse in any way.

#### **Framework of Relationship**

At the start of the relationship, the member must discuss the framework of the collaboration with the client: regularity of the sessions, possible length of the PCE practice and financial aspects (fees, payment conditions, payment of missed sessions etc.).

Example:

- The client comes to PCE practice with the expectation of a psychodynamic approach and is confused by the member's method and frustrated with the outcome.
- Providing information about the method, price, duration, frequency, confidentiality and the role of the therapist, verbally and in writing through the contract and an informed consent material.
- Client data will be collected, stored and protected transparently, with a legitimate purpose, only as much data as absolutely necessary. The data will be kept up to date, confidentially, ensuring the possibility of accountability, according to the Confidentiality Principle and General Data Protection Regulation (GDPR).

#### **Information**

When the client has questions about the course or the results of PCE practice or treatment, the member will provide that information in a comprehensible and truthful manner.

Example:

- The member talks about the method, offers information about the theory and the way it orientates the therapeutic process.
- The information provided by the member must be in accordance with the general framework of any organisation and professional body that the member is affiliated with.
- The member will inform the client of the limits of confidentiality.

### **Freedom of Participation**

The PCE practice will not occur without the client's consent. The member acknowledges the right of the client to withdraw their cooperation at any time.

Examples:

- The members informs the potential client at the beginning about their right to choose start and end of the PCE practice contract.
- The client is expected to take counselling through a rehabilitation service but does not feel emotionally ready.
- A child is brought to PCE practice to meet the caregiver's need: the member should check for genuine need, the level of understanding and if there is consent for PCE practice.

### **Protection from Abuse**

Abuse exists where the member engages the client in order to satisfy their own personal emotional, economic, social, sexual or other inappropriate interest, misusing their position and the psychotherapeutic relationship. The responsibility for protection against abuse is borne solely by the member and is ensured through ongoing supervision and personal development.

Examples:

- The member is conscious of the power gap between them and the client and the risk of even accidental abuse.
- The member takes into consideration the vulnerability of the client.
- A client no longer requires PCE practice but the member needs the income, and so persists with the therapeutic relationship.

## **2. Toward Colleagues**

### **Support**

The member supports their colleagues in the application of the Ethical Framework.

Examples:

- If contacted by a colleague with an ethical dilemma, the member is supportive and helpful to the best of their skills and knowledge.
- Should the member not be able to support adequately, they could refer the colleague to the local association, supervision or another colleague.

### **Respect**

The member provides constructive feedback, when appropriate, according to the principles and guidelines of the Ethical Framework. Example:

- If a colleague's actions or behaviours raise ethical and/or professional concerns to a member, the member will be ethically congruent and provide constructive feedback in an appropriate and agreed channel.

## **Responsibility**

Members should support their colleagues to respect and meet the guidelines and the general Ethical Framework of the profession.

In case of concern, if they are not meeting the guideline, the member will bring it to their attention. In case of disagreement, the member may turn to other colleagues, to a deontology committee of their association or a legal institute.

Example:

- A member discloses details of a confidential file: it is the responsibility of a colleague to question and discuss this action with other colleagues, especially if it is not possible to discuss it with the member concerned.
- The member will not undermine colleagues by reducing costs to recruit clients. This does not apply to financial difficulties situations.

## **3. Toward our Trainees**

The trainee psychotherapist experiences a dual role:

- a) Personal psychological vulnerability during personal development, and in dependency on those delivering training, to whom they must defer.
- b) Professional vulnerability as a new and inexperienced practitioner working with clients, requiring supervision and support for appropriate professional development.

The educating member respects their own potential influence over a trainee, and manages boundaries with the trainee to facilitate professional growth for the individual, and the profession as a body.

Examples:

- A trainee develops romantic or sexual feelings toward their tutor.
- A trainee is unable to prioritise their own wellbeing during training, and becomes dependent on colleagues or tutor for guidance.

## **4. Toward Society**

### **Professionalism**

The member is proactive in maintaining a service that benefits the client.

The member remains up to date with education and academic research and development within the profession, the legal status in their practicing country, and other requirements for membership of ethical bodies, for example accreditation requirements, or using play/art therapy as adjuncts, to include those memberships.

Example:

- The member will not undermine colleagues by reducing costs to recruit clients.
- The member will promote clear and honest opinions and information about their practice and the profession in order to maintain a fair and realistic image of the profession.

### **Publicity/ Promoting your services**

In publications and lectures, the member reflects the possibilities and limitations of PCE practice or counselling.

The member may disclose their professional services on condition that they are presented objectively.

Example:

- The member does not advertise their professional service with comparative references to colleagues or with better financial conditions.
- The member does not enter in competition with their colleagues, stating that their approach is better than another.

This Ethical Framework has been constructed with considerable discussion and deliberation to the best of our abilities as professionals and individuals invested in the Person Centred Approach. We accept the limitations of such a document and welcome challenge and constructive feedback from our members. The document, once published, will be reviewed on a regular basis for suitability for purpose.

### **The function of the Ethical Committee**

1. Design, implement and update of the Ethical Framework in collaboration with the members through Roundtables and the General Assembly (GA).
2. Design and implementation of an education program through presentations, workshops and roundtables.
3. Offering guidance for member requests to support them in ethical issues and dilemmas.

The first 2 years (2022 – 2024) will serve as a pilot phase for questions and input.

## Footnotes

1. Leitner A., Schuch, H. W., „Life satisfaction--a dimension of psychotherapeutical prevention. Critical reflections and results of empirical research”, 2004, pp.555–563
2. "Ethics is grounded in the experience of encounter. This means being called to respond by other persons in need and when responding, to do so out of responseability and solidarity. In this respect, developed by the Lithuanian encounter philosopher Emmanuel Levinas (1961; 1974), psychotherapy must be seen as an ethical enterprise (Schmid, 2002c). So Person-Centred Psychotherapy is always simultaneously an individual, social and political way of acting."
3. The [Universal Declaration of Human Rights](#) of United Nations General Assembly in Paris on 10 December 1948, Art 1,2.
4. The Principle of Beneficence in Applied Ethics” - First published Wed Jan 2, 2008; substantive revision : Sursa online: <https://plato.stanford.edu/entries/principle-beneficence/#HumeTheo>
5. The [Universal Declaration of Human Rights](#) of United Nations General Assembly in Paris on 10 December 1948, Art 1,2.
6. Peter F. Schmid, Person and society: towards a person-centered sociotherapy, Pages 217-235 PersonCentered & Experiential Psychotherapies, Volume 14, 2015 - Issue 3: Special issue on Group Psychotherapy
7. Within the erspective of person- centred therapy, ethical practice is to maintain a consistent offer of authentic relating to the Other( Schmid, 2001) based on an attitude of deep respect for the uniqueness and psychological freedom of the other person ( Grant, 2004)."
8. Matiti, Milika R., Trorey, Gillian M., „Patients’ expectations of the maintenance of their dignity”, Ed. Journal of Clinical Nursing, 2008, p. 2709
9. "Throughout the 1940s he perfected this view while writing on the relationships among the capacity for self-understanding, self-direction, and growth potential of the human organism. In these writings a view of human nature emerges. Rogers argued that a person has a latent capacity for change and growth, but only the self can discover and free that potential. The task of psychotherapy was merely to make an alliance with these forces and facil- itate their release (1943, 1947, 1948, 1950a, 1950b).
10. "View people as capable and autonomous, as having the ability to solve their difficulties, to realize their potential and to change their lives in positive ways". Linda Seligman Seligman, L. (2006). Theories of counseling and psychotherapy: Systems, strategies, and skills. (2nd ed.). Upper Saddle River, New Jersey: Pearson Education, Ltd.
11. Kampf, Annegret, „Confidentiality in Therapeutic Relationships: The Need to Develop Comprehensive Guidelines for Mental Health Professionals”, 2008, p. 125 Sursa online: [https://www.researchgate.net/publication/228169561\\_Confidentiality\\_in\\_Therapeutic\\_Relationships\\_The\\_Need\\_to\\_Develop\\_Comprehensive\\_Guidelines\\_for\\_Mental\\_Health\\_Professionals](https://www.researchgate.net/publication/228169561_Confidentiality_in_Therapeutic_Relationships_The_Need_to_Develop_Comprehensive_Guidelines_for_Mental_Health_Professionals)
12. Gendlin, E. T. (1988). Obituary: Carl Rogers (1902–1987). American Psychologist, 43(2):
13. "He proclaimed new ethics: Recording requires the client’s permission. Confidentiality was emphasized, and the answer to all inquiries was only “The person was in therapy here.”
14. Donner, Michael B., „Balancing Confidentiality: Protecting Privacy and Protecting the Public”, 2008, p. 370 Sursa online: [https://www.researchgate.net/publication/232549706\\_Balancing\\_Confidentiality\\_Protecting\\_Privacy\\_and Prctecting\\_the\\_Public](https://www.researchgate.net/publication/232549706_Balancing_Confidentiality_Protecting_Privacy_and_Prctecting_the_Public)
15. Carl Rogers borrowed from Soren Kierkegaard the quote that the goal of life is "to be that self which one truly is," thereby placing the existential concept of authenticity at the forefront of his views on ethics. Roy Jose Decarvalho, Leijssen, M. (2001). Beroepsethiek. Gepubliceerd in: In W. Trijsburg, S. Colijn, E. Collumbien, & G. Lietaer, (Red.), *Handboek Integratieve Psychotherapie* (pp. VIII 5-1 – VIII 5-50). Utrecht: De Tijdstroom
16. Vyskocilova, Jana, Prasko,, Jan, „Ethical questions and dilemmas in psychotherapy”, Ed. Activitas Nervosa Superior Rediviva, 2013, p. 7, Sursa online: <http://www.rediviva.sav.sk/55i1/4.pdf> - Ethical practice is to maintain a consistent offer of authentic relating to the Other (Schmid, 2001) based on an attitude of deep respect for the uniqueness and psychological freedom of the other person: Barry Grant

## References for further reading

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