



dapaanz

fostering excellence in addiction practice

Code of Ethics

ADDICTION PRACTITIONERS' ASSOCIATION AOTEAROA-NEW ZEALAND



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Foreword

This Code of Ethics (“the Code”) has been written for addiction treatment practitioners in a country in which society is continually changing. The heart of the Code has remained constant: competence and professionalism continue to be central concepts to the practice of addiction treatment in Aotearoa – New Zealand. The development of this edition of the Code has been a useful and constructive process with input, ideas, and comments from different ethnic, cultural, employment, and practice backgrounds. The result has been to create a Code of Ethics unique to New Zealand which has been developed by dapaanz members. With the many challenges facing members, it is acknowledged that the Code of Ethics is not static and has implications for practice in the 21st Century. Professional practice is ethical in nature. I hope that this Code of Ethics will strengthen members’ practice.

Tim Harding

Chair
Dapaanz

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Preamble

This document is a major revision of the previous Code first introduced in 2002. In recognising its purpose of promoting professional and ethical practice as a means of reducing addiction-related harm related harm to individuals, families and communities, dapaanz has further developed its Code of Ethics and Professional Practice to offer guidance, promote good practice and define acceptable behaviours for practitioners who choose to join the association.

It is recognised that members may come from a variety of professional disciplines and will in many cases have existing Codes of Ethics/Practice within which they are obliged to practice. While acknowledging other Codes of Ethics/Practice, and relevant legislation, dapaanz requires all members to be familiar with and practise in accordance with the dapaanz Code of Ethics.

There are two purposes to this document. Firstly to set the values which guide the Association and its membership; secondly to exemplify ethically appropriate behaviour based upon these values.

The Code sits alongside and is complementary to other related Codes and Standards such as the NZ Alcohol and Drug Treatment Sector Standards, and the Addiction Intervention Competency Framework.

Purpose

The Code provides a structure for defining ethical principles and core values governing the professional practice of its members.

Its main purpose is therefore to encourage and guide ethical practice by the members of dapaanz.

Scope

This Code provides for the ethical practices and behaviours of all members of the Addiction Practitioners Association Aotearoa-New Zealand (dapaanz).

This Code is updated and amended from time to time and in its current form is binding upon all members of the Association.

The Code cannot resolve all ethical issues but rather provides a framework within which ethically focused practice related issues may be addressed.

Core values

Dapaanz members respect the worth, dignity and capability of every human being. In practice, this implies working within a diverse and multicultural society that is the result of a unique and special social arrangement forged originally between two parties, Maori and non Maori. Hence, the spirit and intent of the Treaty of Waitangi is a crucial and overarching value to be treasured and maintained. Members should therefore acknowledge and have respect for cultural diversity in the practise of treatment for addiction disorders.

Structural and core elements

The Code presents three 'core elements' throughout as a 'backdrop' for consideration and to help to frame any given issues. These three elements are self responsibility and practitioner status, responding to clients and community, and professional practice within agencies and organisations. Essentially, these main elements reflect the broader working environment and responsibilities of every member; i.e. their responsibilities to self, clients, community and profession. Subsequently, the three elements provide an overarching structure to the Code and provide a frame for each main ethical principle (please see 'Example", on page 18, for an example of how this framework may be applied).

The core elements involve the following responsibilities:

1. Self responsibility and practitioner status

The practitioner carries personal responsibility and accountability for his or her own ethical practice, and for maintaining competence by continual learning. In this, it is expected that the practitioner maintains a high level of ethical understanding and practice such that the ability to provide care is not compromised or brought into disrepute. Such a level of moral practice demands a keen awareness of crucial ethics principles and/or core values.

2. Responding to clients and community

The practitioner's primary professional responsibility is to people requiring their intervention. In providing this, the practitioner is expected at all times to promote an environment in which the human rights, values, customs and spiritual beliefs of the individual, family and community are respected and upheld.

3. Professional practice within agencies and organisations

The practitioner assumes the major role in determining and implementing acceptable standards of ethical practice, management, research and education. The practitioner is active in developing a core of research-based professional knowledge. The practitioner, acting through an appropriate professional organisation, participates in creating and maintaining equitable social and economic working conditions.

Main objectives

The following Code will provide a means:

- To educate Addiction Practitioners (members) regarding the ethical behaviours required of, and to be practised by, members of the Association.
- To require members' acceptance of the Code and their responsibility to clients, colleagues, the Association, agencies and the wider community.
- For members to evaluate and regulate their own ethical practices and behaviours.
- For employers to evaluate the ethical practices and behaviours of employees who are members of dapaanz.
- For the dapaanz Executive to resolve grievances concerning the professional practices and ethical behaviour of dapaanz members.

Main ethical principles

In the Code there are 10 main principles and/or core values. They are:

- Respect for human dignity
- Beneficence (doing good) and non-maleficence (avoiding harm)
- Confidentiality and privacy
- Trust
- Promotion of autonomy
- Honesty & Integrity
- Fairness
- Skilfulness
- Professionalism
- Cultural praxis

Applying the main ethical principles

The core contextual elements of the Code allied with the main ethical principles provide a framework for the standards of ethical behaviour in practice. The following chart should assist the practitioner to more easily translate these main principles/core values into action.

You are encouraged to:

- Study the recommended client focussed statements of intent and practice based implications under each main element of the Code.
- Reflect on what each main principle/core value means to you. Think about how you can apply ethics in your own practice, education, research or management activities.
- Discuss the Code with co-workers and others.
- Use a specific example from experience to identify ethical dilemmas and standards of conduct as outlined in the Code. Identify how you would resolve the dilemma.
- Work in groups to clarify ethical decision making and reach a consensus on standards of ethical conduct.
- Collaborate with dapaanz, co-workers, and others in the continuous application of ethical standards in your dapaanz activities.

The dapaanz code

Principles and Core Values <i>(Self/practitioner focused)</i>	Client/community - practitioner relationships <i>(Client/community focused)</i>	Implications for practice/ profession <i>(Practice/profession focused)</i>
<p>1. Respect for the dignity of others</p> <p>Respect for human dignity indicates that every individual is treated with respect for his/her intrinsic human value and uniqueness.</p>	<p>Members recognise that:</p> <p>The practitioner ensures that the care is delivered in such a fashion that is acceptable to the client and his/her family.</p>	<p>In practice, this implies that:</p> <p>Their primary professional responsibility is to maintain the dignity, welfare and rights of the client (individuals, whanau, families, groups, community) that they are serving.</p>
	<p>They will show sensitivity towards client values, customs and spiritual beliefs.</p>	<p>For instance, in the use of new techniques, technology and research based developments, members should ensure that they are compatible with the safety, dignity and rights of his/her clients.</p>
	<p>Each client is a unique individual worthy of one to one attention.</p>	<p>Members should take the time to examine each client's belief system in sufficient detail and respond accordingly.</p>
	<p>It is the responsibility of practitioners to avoid dual or multiple relationships and other conflicts of interest when appropriate and possible.</p>	<p>Each new client should be taken on only if, and when, such conflicts can be clearly avoided. If such conflict e.g. research, reports, personal relationships occurs during therapy, then the practitioner should deal with the issue promptly and openly.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>2. Beneficence (to do good) and non-maleficence (to do no harm)</p> <p>The good that is sought is both the individual good of the client, and also includes whanau/ family, community and general population.</p>	<p>Members recognise that:</p> <p>There are contextual variations concerning the meaning of 'good' and 'harm' between individuals and/or groups within society. However, in general, the good that is sought for each client relates to the seeking of a positive outcome in both the eyes of the client and the practitioner.</p>	<p>In practice, this implies:</p> <p>The practitioner should discuss the overall aim of the treatment that will be attempted with the client and or his/her family if desired, or any other nominated support person/s.</p>
	<p>In situations where harm to the client and/or other related individuals is unavoidable, then the goal should be to minimise harm and trauma</p>	<p>The practitioner should examine all possible avenues with the client for the minimisation of harm and the promotion of good consequences after intervention.</p>
	<p>To be effective in the production of good outcomes, it is necessary that the practitioner establishes and maintains a partnership with the client where each has equal input in maintaining good outcomes.</p>	<p>Adequate discussions are therefore necessary between the client and the practitioner where a high degree of give and take, compromise and restatement of the aim of treatment are required.</p>
	<p>They should be mindful of the need to respond to situations where client safety is a central concern at all times.</p>	<p>The practitioner, in providing care, ensures that use of technology and scientific advances are compatible with the safety, dignity and rights of people.</p>
	<p>There is a particular need to respond appropriately in situations where the client feels threatened or in danger from others.</p>	<p>The practitioner takes appropriate action to safeguard individuals when their care is endangered by a co-worker or any other person.</p>
	<p>In any work that involves children/ young persons their welfare is paramount.</p>	<p>Special care and attention to the needs of young people is required.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>3. Trust</p> <p>Trust is of paramount importance in any relationship between client, provider and community in any health related service for the public.</p>	<p>Members recognise that:</p> <p>There is an intense level of affective involvement inherent in a professional relationship.</p>	<p>In practice, this implies that:</p> <p>Practitioners should avoid (or, in the case of another provider, try to stop) any practices that may be seen as taking advantage of clients.</p>
	<p>Ensure that the difference between professional and personal involvement with individuals is explicitly understood and respected and that one's behaviour as a member of dapaanz is as a professional.</p>	<p>Refrain from abusing a position of trust to seek special benefits, financial or personal gain. Practitioners must not engage in or encourage sexual intimacy with a client at any time during the professional relationship or for at least two years following its termination. The Code recognises, however, that the power relationship may not cease to influence personal decision making and that sexual relationships with former clients may never be appropriate or ethical.</p>
	<p>Of special concern is the provision of incomplete disclosure when obtaining informed consent for a proposed therapy or research participation. In such cases, the client's right to self-determination and the importance of individual and public trust in the practitioner's discipline should not be placed in jeopardy.</p>	<p>It is the responsibility of practitioners to avoid dual or multiple relationships and other conflicts of interest when appropriate and possible. When such situations cannot be avoided or are inappropriate to avoid, practitioners have a responsibility to declare that they have a conflict of interest, to seek advice, and to establish safeguards to ensure that the best interests of members of the public are protected.</p>
	<p>Public trust includes trusting that any member will act in the best interests of individual and public.</p> <p>Members understand that both individual and public trust must be protected in all activities.</p>	<p>Conflict-of-interest situations should be avoided if possible because they can lead to distorted judgment and can motivate members to act in ways that meet their own personal, political, financial, or business interests at the expense of the best interests of members of the public.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>4. Confidentiality and privacy</p> <p>Confidentiality signifies loyalty towards a client and his/her family/whanau when entrusted with information that should normally remain private.</p>	<p>Members recognise that:</p> <p>Members recognise and promote clients' rights to privacy. Practitioners are aware of relevant legislation and follow procedures that provide for informed consent, and confidentiality.</p>	<p>In practice, this implies that:</p> <p>Measures are taken to ensure privacy during consultations, the safe storage of information, and constant vigilance concerning the disclosure of any client details.</p>
	<p>Whenever possible, clients should be the usual primary source of information about themselves and their own issues.</p>	<p>Confidentiality from first contact until after the professional relationship has ended. Information is retrievable as long as necessary for interests of client, or as required by law.</p>
	<p>In situations where family/whanau input is desirable or necessary, the practitioner should ensure that confidentiality is maintained within the group.</p>	<p>Practitioners convey to family/whanau the responsibilities on them for the protection of each others confidentiality.</p>
	<p>Privacy and confidential matters are treated with great care throughout the entire professional relationship.</p>	<p>Members will explain to clients the limitations to confidentiality. No disclosure without informed consent except for client or public safety, diminished capacity or legal requirement</p>
	<p>Members operate with a desire to maintain privacy whenever possible, but are also are guided by an equally important desire to maintain client safety, or the safety of those associated with the client.</p>	<p>Members will permit clients the opportunity to check the accuracy of all documentation about them by the member, except for information that is confidential to others.</p>
	<p>The practitioner holds in confidence personal information about clients and uses judgement in sharing this information.</p>	<p>Unless the client has agreed beforehand, the practitioner should not share personal information about that client with other practitioners.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>5. Promotion of client autonomy</p> <p>This indicates an understanding that the client should normally be allowed to choose his/her own treatment/care - within the realms of safety.</p>	<p>Members recognise that:</p> <p>Support clients to achieve their therapeutic goals and maximum potential by supporting their right to self determination but without infringing on the rights of others.</p>	<p>In practice, this implies:</p> <p>The client should be given enough information and treatment options, including the right to refuse, to allow him/her to make a fully informed decision about their future treatment.</p>
	<p>The practitioner ensures that the individual client receives sufficient information on which to base consent for care and related treatment.</p>	<p>Provide each client with all client rights information as required by NZ legislation, and information regarding service delivery options and procedures.</p>
	<p>Good communication and information sharing between practitioner and client is essential if the client is to be able to give his/her fully informed consent for any proposed service</p>	<p>Use clear, understandable and age appropriate language to convey to clients the purposes, risks, benefits, limitations and fees (where applicable) of the services offered sufficient to provide a basis for informed consent for all services offered.</p>
	<p>Whenever possible, clients should be the usual primary source of information about themselves and their own issues.</p>	<p>Every effort should be made to obtain as much information as possible from the client him/herself.</p>
	<p>The practitioner must use their professional judgement regarding individual competence when accepting and delegating responsibility or proposing treatment options for each client and/or their family.</p>	<p>If necessary for client welfare, other important sources might include members of the whanau, significant others or professionals in particular circumstances (such as may be required under the Mental Health Act).</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>6. Honesty & Integrity</p> <p>Honesty requires that members use complete openness, frankness and sincerity (and plain speech) when communicating with clients.</p>	<p>Members recognise that:</p> <p>They must represent themselves and their profession in an open and clear fashion that avoids any possibility of deception.</p>	<p>In practice, this implies that:</p> <p>The maintenance of competence in the declared area(s) of competence, as well as in their current area(s) of activity.</p>
	<p>They are aware of the need to avoid any action that may damage the trust of the client or bring their colleagues into disrepute.</p>	<p>It also involves accurately representing their own and their colleagues' activities, functions, contributions, and likely or actual outcomes of their activities (including research results) in all spoken, written, or printed communication.</p>
	<p>They must be prepared to honestly admit the limits of their capabilities to their clients if, and when necessary.</p>	<p>There is acknowledgement of the limitations of their own and their colleagues' knowledge, methods, findings, interventions, and views.</p>
<p>Integrity means that the practitioner's behaviour should be at all times sincere, honourable and reliable in their dealings with their clients.</p>	<p>Members are expected to accurately identify their own qualifications, and avoiding claiming or implying any personal capabilities or professional qualifications beyond those one has actually attained. That is, competency gained in one field of activity must not be used to improperly imply competency in another.</p>	<p>Every effort is made to fully inform the client of the practitioner's status via ample visual material and preliminary explanations.</p>
	<p>Members are not expected to be totally value-free or without self-interest in conducting their activities. However, they are expected to understand how their biases must be put aside when dealing in an open and sincere way with each client.</p>	<p>Practitioners should not treat any client in an insincere or cavalier fashion, or show any distaste, dislike or disregard for a client's chosen way of expression or being.</p>
	<p>Personal issues may interfere with professional practice and relationships.</p>	<p>Practitioners should act promptly if personal issues prevent their ability to deliver a professional service for their client/s.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>7. Fairness</p> <p>Fairness indicates that the practitioner will operate within a spirit of even-handedness and impartiality with all clients.</p>	<p>Members recognise that:</p> <p>All persons are entitled to benefit equally from the contributions of the practitioner’s discipline, and to equal quality in the processes, procedures, and services being offered, regardless of the person’s characteristics, condition, or status.</p>	<p>In practice, this implies:</p> <p>Although individual practitioners might specialise and direct their activities to particular populations, or might decline to engage in activities based on the limits of their competence or acknowledgment of problems in some relationships, they must not exclude persons on a whimsical or unjustly discriminatory basis.</p>
	<p>By virtue of the assigned roles that members may have with society, they have a higher duty of care to members of society than the general duty of care all members of society have to each other.</p>	<p>Practitioners should exhibit behaviours that reflect a higher standard of the application of the principles of equity and justice ensuring that their actions are worthy of public respect.</p>
	<p>Practitioners should not show bias or favouritism towards any particular client. That is, each client should be treated in a fair and similar fashion.</p>	<p>All clients must be treated in ways that reflect a willingness on behalf of the practitioner to meet their needs without favouritism or bias. However, practitioners are entitled to protect themselves from serious violations of their own moral rights (e.g., privacy, personal liberty) in carrying out their work.</p>
	<p>Practitioners should not mislead their clients in regard to the availability of services that may be more affordable or appropriate in an alternative delivery system.</p>	<p>Practitioners in private practice ensure all clients are informed, where relevant, of the availability of publicly funded services.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>8. Skilfulness</p> <p>Skilfulness involves the practitioner in striving for therapeutic excellence in all dealings with clients.</p>	<p>Members recognise that:</p> <p>They aim at all times to enable client recovery through proficient practitioner practices.</p>	<p>In practice, this implies that:</p> <p>This implies working within the limits of one's competence and qualifications, and being prepared to hand over treatment if and when the practitioner's expertise is no longer adequate.</p>
	<p>They are obliged to acquire, contribute to, and use existing knowledge that is most relevant to the best interests of those concerned.</p>	<p>The practitioner carries personal responsibility and accountability for practice, and for maintaining competence by continual learning.</p>
	<p>They should undertake addiction work that they are personally and professionally competent to handle.</p>	<p>Competency gained in one field of activity must not be used to improperly imply competency in another.</p>
	<p>They share with society the responsibility for initiating and supporting actions that meet the health and social needs of the public, in particular those of vulnerable populations</p>	<p>Engaging in self-reflection regarding how their own values, attitudes, experiences, and social context influence their actions, interpretations, choices, and recommendations.</p>
	<p>Services for Maori, Pacific and other cultural groups are best delivered by practitioners who have the knowledge and skills to respond to the needs of clients.</p>	<p>Practitioners engage in professional development in cultural competence, recognise any limitations they may have, and work with legislation, policy and partnership with the cultural community.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>9. Professional conduct</p> <p>Professional conduct implies that practitioners will act in a responsible, proficient and skilful manner when dealing with clients in pursuit of meeting the requirements of their registered profession by:</p>	<p>Members recognise that:</p> <p>They serve the best interests of clients by enhancing every client's quality of life through carefully considered therapeutic and professional interventions.</p>	<p>In practice, this implies that:</p> <p>This implies working within the limits of one's competence and qualifications and keeping up to date with developments in their own and related fields.</p>
<ul style="list-style-type: none"> • Accepting full responsibility for his/her own interventions. 	<p>The practitioner accepts professional responsibility for one's own actions, decisions, and the ensuing consequences.</p> <p>This also implies that the practitioner is fully aware that his/her interventions will impact significantly on the lives of the client, his/her whanau, and within the community.</p>	<p>Members only engage in those activities in which they have competence or for which they are receiving supervision.</p> <p>The practitioner at all times maintains standards of personal conduct which reflect well on the profession and enhance public confidence.</p>
<ul style="list-style-type: none"> • Avoiding any acts that will damage the reputation of the profession. 	<p>This involves accurately identifying one's own qualifications, and avoiding claiming or implying any personal capabilities or professional qualifications beyond those one has actually attained.</p>	<p>This is done with the intent of increasing the probability that their activities will benefit and not harm the individuals, families, groups, and communities to whom they relate in their role as therapist.</p>
<ul style="list-style-type: none"> • Maintaining professional affiliations, skills and practices. 	<p>The practitioner at all times maintains standards of personal conduct which reflect well on the profession and enhance public confidence.</p>	<p>This involves keeping up to date, reading suitable research and journal articles, attending and contributing to conferences, etc.</p>
<ul style="list-style-type: none"> • Sustaining a co-operative relationship with co-workers in ethical practice and other fields. 	<p>Every member will play his/her own part in maintaining adequate links with other practitioners and members of the public and keeping up to date with community orientated developments.</p>	<p>Participate in ongoing professional development, continuing in and contributing to addiction practitioner knowledge and education, and liaison with colleagues and other professional associations relevant to one's field.</p>

Principles and Core Values	Client/community - practitioner relationships	Implications for practice/ profession
<p>10. Cultural praxis</p> <p>To have a responsive and positive regard for cultural diversity that refuses to allow any individual to feel unappreciated, ignored or even insecure because of their real or even presumed cultural belief and values.</p>	<p>Members recognise that:</p> <p>Every human being has an innate worth that is reflected in the ways that he/she responds to their environment and community.</p>	<p>In practice, this implies that:</p> <p>In their ethical conduct, the member's behaviour upholds and protects the client's cultural identity by acting only in a manner that is supportive of the client's mana or cultural wellbeing.</p>
<p>Cultural praxis implies that the practitioner will practice with full and positive regard for the socio-cultural beliefs and practices of every client.</p>	<p>An individual, or a collection of related individuals, may define themselves, or choose to be defined by identifying themselves as being part of a culture, national or ethnic origin, colour, race, religion, sex, age, gender, marital status or sexual orientation.</p>	<p>Every client has a cultural background that is usually of relevance to them. In cases involving Maori clients, that background is often related to place, mana and relationships in a fashion that is sometimes significantly different from non-Maori. In other cases, such as non-Maori, the need for cultural recognition and respect is often important to them in a variety of different ways depending on their chosen cultural mores.</p>
	<p>In New Zealand, the Bill of Rights and the Human Rights Act makes it implicit that the socio-cultural beliefs of every individual are to be protected.</p>	<p>Practitioners should be familiar with any appropriate legislation, agreements, policies or documents that aim to enhance the rights of all cultural affiliations in New Zealand.</p>
	<p>Furthermore, The Treaty of Waitangi (and associated legislative changes) is the basis for the principles of protection, participation and partnership between Maori and non-Maori.</p>	<p>Practitioners should be informed about the meaning and implementation of the principles within the Treaty of Waitangi, and seek advice and training in the appropriate way to show respect for the dignity and needs of Maori in their practice.</p>

Approach to ethical decision making

The following basic steps typify an approach to ethical decision making:

1. Identification of the individuals and groups potentially affected by the decision.
2. Identification of ethically relevant issues and practices, including the interests, rights, and any relevant characteristics of the individuals and groups involved and of the system or circumstances in which the ethical problem arose.
3. Consideration of how personal biases, influences, stresses, or self-interest might influence the development of or choice between courses of action.
4. Analysis of likely short-term, ongoing, and long-term risks and benefits of each course of action on the individual(s)/group(s) involved or likely to be affected (e.g., client, client's family or employees, employing institution, students, research participants, colleagues, the discipline, the profession, society, self).
5. Choice of course of action after conscientious application of existing values, principles, and standards.
6. Action, with a commitment to assume responsibility for the consequences of the action.
7. Evaluation of the results of the course of action.
8. Assumption of responsibility for consequences of action, including correction of negative consequences, if any, or re-engaging in the decision-making process if the ethical issue is not resolved.
9. Appropriate action, as warranted and feasible, to prevent future occurrences of the dilemma (e.g., communication and problem solving with colleagues; changes in procedures and practices).

(N.B. Slightly adapted from the Canadian Code of Ethics for Psychologists, 2000.)

An illustrated example

You are the peer/supervisor of Practitioner A. He comes to you with a concern about his client Z, who is a twenty year old woman who has admitted that she has driven her car with her two young children aboard whilst intoxicated on several occasions.

The practitioner believes that he can help her by offering accommodation and childcare at his Aunt's home; he has already implied to her that social work is a part of his usual role as a dapaanz worker.

Ethical Considerations

It should be reasonably clear from the onset that this situation highlights a number of ethical concerns. In the first instance, you are placed in a position of trust by A, who clearly wants your advice. He has suggested, in his response to Z's situation, the possibility of involving a 'lay person', his Auntie. However, of paramount importance in this case are the lives of two young children.

The issues include safety of the mother Z and her children, the wellbeing and coping skills of the Auntie, and the skilfulness and professionalism of A.

Your situation is not an easy one. As A's supervisor, your decision not only will have implications for all of those involved in the situation, but for yourself and the profession as well. Your relationship to A is therefore more than a personal one, it is a professional one.

A brief analysis of A's intentions should reveal at least a significant underlying risk to those involved. A's Auntie will not have all of the necessary skills to deal with a woman who clearly has an alcohol related problem, neither might she have the wherewithal to adequately support the mother and her children. A himself may consider a more personal involvement through his family to be an adequate response, but such a commitment takes the issue away from a more professional and long term approach towards what may well be a difficult and unsuccessful response that at best might only work in the short term. Because the Auntie is not trained to fully assist a person in Z's situation, and because therefore the children may remain at risk, it should be obvious that A's idea is not supportable.

However, to clarify these initial thoughts, the Code may be used as a guide. There are a number of principles that may be involved in this case, and for the sake of brevity, the most obvious ones are outlined below in a rough approximation of the order of importance:

1. Doing good, avoiding harm.

The actions of A and perhaps his Auntie seem to be aimed at achieving both of these principles, but may not be entirely successful because of the Auntie's lack of knowledge on how to correctly respond to a significant crisis brought about by alcohol abuse. It is possible, admittedly, the children may be safer with the Auntie rather than in the car with the mother, but this remains only a short term solution, and does not guarantee that they will remain safe in the future. It should be remembered, as noted in the Code (p. 9) that "In any work involving children/young persons, their welfare is paramount."

2. Confidentiality and privacy.

For Z and her children to live with the Auntie, there would have to be a considerable widening of the confidential circle. The Auntie would become heavily involved for a start, and she is not bound by legal and moral concerns in the same way that A is, or any of those practitioners that A might use instead. Z's privacy, and most certainly her children's privacy, should be respected, even if there are immediate safety concerns. As noted in the Code: "Members operate with a desire to maintain privacy whenever possible, but are also guided by an equally important desire to maintain client safety, or the safety of those associated with the client" (p.9).

3. Skilfulness.

It is not in Z's best interests, or her children's, if the main person offering assistance at this time is a relative (and lay person) of her practitioner. The Auntie does not have the necessary skill or experience to cope in what may be a very traumatic situation. She may well have plenty of other skills in dealing with those in need that are indeed noble and worthy; however this situation is quite likely beyond her limitations. As the Code states: "[Members recognise that] they aim at all times to enable client recovery through proficient practitioner practices" (p. 13).

4. Professional conduct.

It seems that A is not accepting full responsibility for his actions, nor is he utilising all of the possible professional services that may be available to assist in the case of Z and her children. Public confidence could well be severely shaken if it were widely known that a professional practitioner "passed on" the immediate care of a client and her young children to a woman who was not able to respond effectively to Z's condition or her needs. If Z eventually went on to harm her children, as could occur if she had an accident whilst driving her car with the children on board, then the public outcry could well be a major one. A would therefore not only damage his own reputation, but that of his profession as well. In this way, it may be seen that the phrase from the Code: "The practitioner at all times maintains standards of personal conduct which reflect well on the profession and enhance public confidence" (p. 16) is indeed good ethical advice.

All of the above discussion invariably points to one moral conclusion. A's intentions cannot be ethically supported, and more suitable alternatives will have to be considered and implemented. As A's supervisor, you would have little choice but to strongly recommend to A that he did not pursue his chosen course of action. You would therefore also be morally committed to helping A to find a more suitable (i.e. professional) response to the needs of Z and her children.

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