

Submission to the Psychologists Board of Australia in relation to a Code of Ethics

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We are concerned at the proposed interim adoption of the current Australian Psychological Society Code of Ethics. We believe that the APS Code of Ethics fails to make appropriate distinctions between clients and other individuals and groups who are not clients, but for whom the psychologist has some ethical obligations. This fundamental failure to make appropriate distinction can potentially lead to any number of foreseeable problems with the application of a code of ethics.

The APS Code of Ethics defines a "client" in the following way:

"Client means a party or parties to a psychological service involving teaching, supervision, research, and professional practice in psychology. Clients may be individuals, couples, dyads, families, groups of people, organisations, communities, facilitators, sponsors, or those commissioning or paying for the professional activity."

One of the key terms in this definition is "psychological service", which the APS further defines as:

"Psychological service means any service provided by a psychologist to a client including but not limited to professional activities, psychological activities, professional practice, teaching, supervision, research practice, professional services, and psychological procedures."

Another key term in this definition is "professional", which the APS further defines as:

"Professional relationship or role is the relationship between a psychologist and a client which involves the delivery of a psychological service."

The definitions of "client", "psychological service", and "professional relationship" are circular. A "*client*" means a party or parties to a *psychological service* involving teaching, supervision, research, and *professional* practice in psychology". However, what constitutes "professional practice in psychology"? "Professional relationship or role is the relationship between a psychologist and a *client* which involves the delivery of a *psychological service*." So it comes it comes down to what is meant by "psychological service", which the APS defines as "any service provided by a psychologist to a *client*". So, if "any service provided by a psychologist to a *client*" constitutes a "professional relationship", then according to the APS, a "client" is any "party or parties" to "any service provided by a psychologist".

The APS code of ethics distinguishes a "client" from "associated parties" which is defines as any person or organisation other than clients with whom psychologists interact in the course of rendering a psychological service."

Problems with these definitions:

- 1) It is impossible for a psychologist to have a "different professional relationship" (p. 9), if any service provided by a psychologist constitutes a psychological service. For example, a psychologist cannot distinguish between work with a client by saying one set of services was therapy, and another set of

services was sports coaching, if any service provided by a psychologist constitutes a psychological service.

- 2) If any party or parties to any service provided by a psychologist is/are a “client”, then there can be no “multiple relationship” based on disparate and conflicted services. For example, a psychologist can provides clinical supervision, provide personal therapy, mark clinical coursework, and provide research supervision to the same person because they only have one relationship with that person, that of a “client”.
- 3) If any party or parties to any service provided by a psychologist is/are a “client”, then this may create a situation where the psychologists cannot reasonably know who all their “clients” and “associated parties” are.
 - a) For example, an organisational psychologist does some work for Qantas (purely for illustrative purposes). Qantas would be the “client”, and this would clearly include all employees of Qantas (most of whom the hypothetical psychologist has never met). “Associated parties” would include all the friends and relatives of the Qantas employees. It is impossible that the psychologist could reasonably know who all these people are, much less avoid a possible multiple relationship.
 - b) Another example might be a community psychologist who does some community building work for the local Council in a rural town. The Council, its employees, and the entire community of that town are “clients”. “Associated parties” becomes virtually indeterminable. How could that psychologist live in that town without having a dual relationship with someone? Ironically, the clients in this later example could even include the psychologist’s own husband or wife.
 - c) An even more worrying example is if a client expressly includes “those commissioning or paying for the professional activity”, then the entire Australian population (by virtue of the Federal governments Medicare scheme) are the “clients”. One need not even go to “associated parties” to realise the problem with this definition of “client”.
 - d) Finally, another example might be a psychologist who is a lecturer in a university. All their students are clearly identified as clients, but because the university pays their salary, the university and all its employees are also their client. This would make something as common as dinner with colleagues a dual relationship with clients.
- 4) In the case of professionally supervised practice where the supervisee has a clear responsibility to their clients, the supervisor only has a responsibility to their supervisee as their client (not to the supervisee’s clients by the APS definition of “client”). This is clearly a problem when one of the functions of professional supervision is to protect the supervisee’s clients. This also places the supervisor in the position of assessing, and perhaps even failing their "client's" work.

We note that the American Psychological Association (<http://www.apa.org/ethics/code/code-1992.aspx>) does not define “client”. They easily get around issues such as this by articulating standards that separate “General Standards” from standards associated with “Evaluation, Assessment, of Intervention”; from “Advertising and Other Public Statements”; from “Therapy”; from “Privacy and Confidentiality”, from “Teaching, Training Supervision, Research, and Publishing”; and from “Forensic Activities”.

We strongly recommend that the Psychology Board of Australia adopt the American Psychological Association’s Ethical Principles of Psychologists and Code of Conduct rather than the APS Code of Ethics until an adapted code that better suits the Australian context can be developed.