

# **CODE OF ETHICS**

# **PREAMBLE**

The Singapore Association of Counselling (SAC) is a professional organisation established to continually improve the standard and conduct of Members and is dedicated to the provision of competent and ethical counselling services to clients. SAC strives to enhance the worth, dignity, potential and uniqueness of individuals, couples, families and the society at large. SAC is aware of the diversity of role definitions and work settings of its Members. These include a wide variety of academic disciplines, level of academic training and agency settings. Such diversity reflects the extent of SAC's influences, interests and inclusivity. The Code of Ethics sets out the paramount duties to clients and the manner of honourable discharge of Members' responsibilities to clients. It defines the professional obligations and sets out principles of competent and ethical practice.

# CODE OF ETHICS AND STANDARDS OF PROFESSIONAL CONDUCT

# Section A: Counselling Relationship

#### 1. Introduction

1.1 Clients' interests are paramount in the conduct of counselling relationship. Members facilitate clients' growth and development that foster the interests and welfare of the clients and promote a healthy relationship. Trust is the cornerstone of the relationship and Members must actively strive to protect their clients' interests.

# 2. Legal Relationship

- 2.1 Members and clients have the right to choose to enter or terminate the legal relationship. Members have an obligation to furnish in whatever manner the terms of the engagement for their counselling services. Informed consent to the clients to enter counselling relationship is required in all instances.
- 2.2 When counselling minors or adults with incapacity, Members must seek the consent of the parents or guardians or such other appropriate person before the commencement of counselling.

# 3. Prohibited Relationship

- 3.1 Members shall not have sexual and/or romantic relationships with current clients and/or their family members.
- 3.2 Members are not to be engaged in counselling services for clients with whom they had prior sexual and/or romantic relationship.
- 3.3 Members shall not have sexual relationships with the clients for five (5) years following the last professional contact or the termination of the counselling engagement.
- 3.4 Members do not engage in counselling engagement with family members, associates or other acquaintances of the clients with whom they have an inability to remain objective and helpful to the clients

## 4. Fees

- 4.1 The following guidelines are not mandatory but are useful in assisting Members to set the benchmark of fair compensation for their services. Fees chargeable are a contractual matter between Members and their clients. Generally, fee charges take into account the Members' qualifications and skill, specialised knowledge and responsibility involved, the complexity of the matter and the time expended.
- 4.2 Members must inform or publish in any of their publications the fee structure so that the clients are aware of the fees payable.
- 4.3 Members shall not participate in fee sharing arrangements with third party agent(s).

4.4 Members may provide on their own volition reasonable Pro Bono work to such persons as they deem fit.

### 5. Referrals and Termination

- 5.1 Members should refrain from making referrals to each other based solely on their personally held values, beliefs, attitudes, and behaviours.
- 5.2 If Members determine an inability to be of professional assistance to the clients, they must avoid initiating the counselling relationship or immediately terminate that relationship upon being aware of the inability and make appropriate alternative or referral. If clients decline the suggested alternatives, Members should discontinue the relationship.
- 5.3 Members may terminate a professional relationship when it becomes reasonably clear that the client no longer requires the service, refuses to accept the Members' advice, is not benefiting, is being harmed by continued service or such other acts by the clients that evinced an intention not to want to continue with the counselling relationship.
- 5.4 Prior to termination for whatever reason, except where precluded by the clients' conduct, Members should discuss the client's views and needs, provide appropriate pre-termination counselling, suggest alternative providers as appropriate, and take other reasonable steps to facilitate transfer of responsibility to another provider if the client needs one immediately.

#### Section B: Ethics and General Conduct of Members

### 1. Introduction

- 1.1 Ethical standards of practice are important in promoting safe and professional counselling. These are important in order that Members can deliver professional level of services that cater to the best interests of the clients and the general public.
- 1.2 Good ethical practice is also important as it promotes public confidence in the services provided by the Members. It also safeguards the interests of the Members.
- 1.3 It is not possible to enumerate every principle. Broadly they include Beneficence (to do good), Non-maleficence (do no harm), Respect for Autonomy, Fairness and Truthfulness.

# 2. General Conduct

- 2.1 Members shall respect the rights of clients to hold values, attitudes, and opinions and lifestyle that differ from theirs
- 2.2 Members must acknowledge and respect differences of amongst other things; age, race, language, religion, disabilities, economic status, sexual orientation and gender identity. Members must recognise the clients' rights of choice and not impose on them personal views, prejudices or preferences on any matter in the course of the counselling.
- 2.3 Members must recognise that regardless of their personal views, clients with differing values, attitudes and lifestyle must not be counselled in a manner that is detrimental to their well-being. Members should seek advice or supervision to ensure that they are equipped to handle such matters when it may conflict with the Members' personal values.
- 2.4 Members shall not knowingly engage in behaviour that is harassing (sexual in nature or otherwise) or demeaning in nature to persons with whom they interact in their work, based on factors including persons' age, gender, race, ethnicity, cultural background, religion, sexual orientation, gender identity, disability, language, or socio-economic status.
- 2.5 Members should not solicit goods, services, or other non-monetary remuneration from clients in return for counselling services in order to avoid potential exploitation or distortion of the professional relationship.
- 2.6 Members must be clear of the challenges of accepting unsolicited gifts from clients and recognise that in some cultures, small gifts are tokens of appreciation of gratitude and respect. In accepting gifts, Members must be mindful of the purpose of the gifts, value of the gifts, the known purpose for giving or declining to accept the gifts.
- 2.7 Members are to avoid establishing dual relationships with clients that could impair professional judgement or potentially lead to a conflict-of-interest situation.

#### 3. Communication

- 3.1 Communication with clients is a vital aspect of counselling. Members should discuss with clients as early as practicable in the therapeutic relationship appropriate issues such as the nature and anticipated course of counselling, fees, and confidentiality.
- 3.2 Members shall make reasonable efforts to answer clients' questions and to avoid misunderstanding about the counselling relationship.
- 3.3 Where interacting with clients, Members must ensure that the communication is feasible, failing which Members should refer the clients to another appropriate Member who is proficient in the client's language.

# 4. Confidentiality

- 4.1 Members recognise that trust is the foundation of counselling relationships and hence must maintain confidentiality of all information acquired by them in the course of counselling.
- 4.2 Members shall not disclose any information, documents, notes, photographs, or such materials that contain clients' information without client's consent unless required by law.
- 4.3 The general requirement of confidentiality does not apply when the Members are required to protect the clients from harm or harm to a third party.

### 5. Records and Documents

- 5.1 Members must take reasonable precautions to ensure that all records and documentation are kept secured and no unauthorised person has access to them.
- 5.2 All documentation, including notes taken by the Members, photographs taken in the course of counselling and recordings including audio-visuals are the properties of the Members. Members may in their discretion provide such information if requested by Clients and on such terms and conditions as they deem fit.
- 5.3 Members shall apply careful discretion and deliberation before destroying records that may be needed which they may reasonably foresee that may be required in the future.

# **Section C: Professional Competencies**

### 1. Introduction

- 1.1 In addition to personal integrity and ethical behaviour and conduct, professional competencies are the hallmarks of Members.
- 1.2 Members must attain and maintain professional knowledge and skill at a level required to ensure that clients receive competent professional services and to act diligently in accordance with the acceptable professional standards.
- 1.3 Members must exercise sound judgment in applying their professional skill.

### 2. Practice Within Area of Expertise

- 2.1 Members have a responsibility to practise only in areas within their competence based on their education, prior training, supervised experiences, professional credentials and appropriate professional experience.
- 2.2 Where it is an issue that is not within the area of practice of the Members, they should make referrals to other Members who have competency in that area.
- 2.3 Members shall practise in specialty areas that are new to them only after appropriate education, training, and supervised experience. Whilst developing skills in new areas, Members must ensure the competence of their work
- 2.4 Members shall not claim or imply professional qualifications exceeding those possessed by them and are responsible for correcting any misrepresentations of those qualifications by others.
- 2.5 Where interns are having conduct of any counselling, the clients must be notified as such, and the interns must work under supervision.
- 2.6 Members must also be aware of the cultural and social diversities in which they operate so that they can render counselling, which takes into account clients' background.

# 3. Counselling Supervisors

3.1 The primary obligation of Counselling Supervisors is to monitor the services provided by other counsellors or interns. Counselling Supervisors must monitor clients' welfare and supervise clinical performances and professional development.

3.2 Counselling Supervisors need to be trained in supervision methods and techniques and pursue regular continuing education including counselling and supervision subjects and skills. They are responsible for incorporating into their supervision the principles of informed consent and participation. Supervisees must be informed of the policies and procedures to which they are to adhere and the mechanism for due process appeal of individual supervisory actions.

# 3.3 Counselling Supervisors must:

- 3.3.1 Meet regularly with supervisees to review case notes, samples of clinical work and/or live observation. Supervisees have responsibility to understand and follow SAC Code of Ethics.
- 3.3.2 Address the scope of the supervision, expectations and responsibilities associated with each role.
- 3.3.3 Be aware of and address the role of multiculturalism and diversity in the supervisory relationship.
- 3.3.4 Define and maintain ethical relationship with their supervisees. They must avoid unethical relationship with current supervisees that compromises the supervisory relationship.

# **Section D: Clinical Responsibilities**

# 1. Introduction

- 1.1 Any task or duty involving the professional aspect of counselling requires the exercise of judgment and with the exercise of judgment comes clinical responsibilities to the clients.
- 1.2 The extent and nature of Members' clinical responsibilities must be that of competent counsellors abiding by the acceptable international standard of counselling.

# 2. Duty of Care to Clients

- 2.1 The primary obligation of Members is to respect the integrity and promote the welfare of the clients, whether the clients are assisted individually or in a group situation.
- 2.2 When the clients' conditions indicate that there is clear and imminent danger to the clients or others, Members must take reasonable personal action or inform responsible authorities. Consultation with other professionals may be used where possible.
- 2.3 When Members engage in short-term group treatment or training programmes, they must ensure that there is professional assistance available during and following the group experience.
- 2.4 Members have responsibility to the clients who are served and to the agencies within which the service is provided to maintain high standards of professional conduct and competence in their work.
- 2.5 Members' professional judgements and actions may affect the lives of others, and they are to guard against any personal, financial, social, organisational, or political factors that might lead to misuse of their influence.

#### 3. Procedural Considerations

- 3.1 Prior to commencement of counselling, Members must have all the relevant information about the clients and the proper authorisation to proceed with counselling. Clients must be informed of the fees chargeable (if not published) and the general approach that the counselling will take place.
- 3.2 Members must obtain permission from clients prior to recording sessions through any electronic or other means.
- 3.3 Counselling should be conducted in an environment that is suitable, appropriate and which also would protect the identity and privacy of the clients.
- 3.4 Records of the counselling relationship, including interview notes, test data, correspondence, case notes, photographs, video and audio recordings, and other documents, are to be kept and are considered professional information acquired by the Members.
- 3.5 All records are to be kept confidential and stored in a safe manner.

# **Section E: Continual Education and Development**

#### 1. Introduction

- 1.1 Members recognise the importance of continuing professional development as it ensures continued competency in the profession.
- 1.2 Continual education and development ensure that Members and their knowledge stay relevant and current as otherwise the currency of their knowledge and skill becomes outdated.

1.3 Continual education and development help improve the professional standing of Members and help increase public confidence in our profession. This is especially so in a specialised area of practice.

### 2. Remaining Relevant and Updated

- 2.1 SAC will recommend and/or provide Members with high quality seminars and other opportunities for Members to remain fully informed about contemporary counselling development in today's fast-paced world to meet Members' multi-faceted needs.
- 2.2 Members are required to attend recognised seminars, talks, conferences and other such continuing education programme as may be organised by or recognised by the SAC.
- 2.3 Members shall attend 25 hours of such programme annually or at such rate as the SAC may from time to time prescribe.

### Section F: Measurements and Evaluation

### 1. Introduction

- 1.1 Assessments often include the use of psychometric instruments or tests. It encompasses assessing all relevant variables that may influence an outcome on the counselling and treatment plan.
- 1.2 Contextual and cultural aspects are to be taken into consideration when understanding assessment results. In the global environment that we operate, members must consider:
  - 1.2.1 Country of origin
  - 1.2.2 Language
  - 1.2.3 Values
  - 1.2.4 Customs
  - 1.2.5 Beliefs
  - 1.2.6 The nature of work and the workforce
  - 1.2.7 Other pertinent factors like,
    - a) Racial and ethnic identity
    - b) Acculturation
    - c) Worldview
    - d) Socio-economic status
    - e) Gender role expectations
    - f) Family expectations and responsibilities
    - g) Primary language, and
    - h) Relationships

This list may not be exhaustive.

### 2. Factors to Consider in Test Administration

- 2.1 Members must provide specific orientation or information to the client prior to and following the test administration so that the results of testing may be placed in proper perspective with other relevant factors. In so doing, members must recognise the effects of socio-economic, race, ethnic and cultural factors on test scores.
- 2.2 In selecting tests for use in a given situation or with a particular client, members must consider carefully the specific validity, reliability, and appropriateness of the test(s).
- 2.3 Members make appropriate adjustments in the administration or interpretation of the test based on factors such as race, ethnicity, cultural background or socio-economic status.
- 2.4 The purpose of testing and the explicit use of the results must be made known to the client prior to testing.
- 2.5 Reasonable steps must be taken by members to explain the results of the test(s) using language that is understandable to the client assessed or to another legally authorised person on behalf of the client.
- 2.6 The client's welfare and explicit prior understanding must be the criteria for determining the recipients of the test results. The interpretation of test data must be related to the client's particular concerns.
- 2.7 Members must guard against the appropriation, reproduction, or modifications of published tests or parts thereof without acknowledgement and permission from the previous publisher.

#### Section G: Research and Publication

#### 1. Introduction

1.1 In addition to counselling of clients, Members are encouraged to research and publish their findings. Research increases our frontier and boundaries of our knowledge and publication of such research helps other Members in acquiring further knowledge. The ultimate responsibility for ethical research practice lies with the principal researchers. All others involved share the same ethical obligations and responsibility.

#### 2. Procedural Considerations for Research

- 2.1 Where Members intend to conduct any experimental methods of treatment, clients have the right to decline participation. Members must plan, design, conduct and report research in a manner that is consistent with ethical principles and law.
- 2.2 In seeking clients' consent, Members must ensure that they accurately explain the purpose and procedure and:
  - 2.2.1 Identify procedures that are experimental or relatively untried
  - 2.2.2 Risks and benefits involved
  - 2.2.3 Disclose alternative procedure
  - 2.2.4 Describe the method of treatment
  - 2.2.5 Inform clients they can discontinue or withdraw consent at any time
  - 2.2.6 Indicate to clients the possible adverse effects and safety precautions that are to be adhered to.
- 2.3 Any other pertinent information or risks or procedures to ensure the safety of clients.
- 2.4 Members are responsible for the welfare of the clients in the research and should take reasonable precautions to avoid causing psychological, emotional or physical injuries.

### 3. Publications

- 3.1 Members when conducting and/or publishing research must give recognition to previous work on that topic, copyright laws and full recognition to those whose credit is due. Members must not plagiarise.
- 3.2 Members must give credit through joint authorship and acknowledge in an appropriate manner contribution from sources that were used. Members must acknowledge joint researchers in an appropriate manner.
- 3.3 When Members provide information to the public or to subordinates, peers or supervisors, they have a responsibility to ensure that the content is general and consists of objective, factual data.
- 3.4 If Members learn of misuse or misrepresentations of their work, they take reasonable steps to correct or minimise the misuse or misrepresentation.

# Section H: Role of Technology in Counselling

# 1. Introduction

- 1.1 Traditional method of face-to-face counselling between Members and clients is undergoing change. The increasing use of technology introduces a new dimension as to how counselling is conducted and has a profound effect on our practice. Cross-jurisdiction counselling has become more frequent as is the use of various technology driven media of communication or messaging.
- 1.2 Members must meet these new challenges of cross-jurisdiction counselling and technologically driven means of communication by being knowledgeable as to how they operate and the legal and ethical implications of their use.

### 2. Applicable Law

2.1 Where cross-border counselling is conducted by the Member in Singapore, the applicable law is the laws of Singapore and clients must be made aware of the applicable law. All contractual matters such as terms of engagement, matters concerning confidentiality and privilege between Members and clients and dispute resolution must be made known to clients before counselling is conducted.

### 3. Consent and Security

3.1 Prior to the commencement of cross-jurisdiction counselling or the use of any form of technologically assisted communication, Members should verify clients' identity, obtain their consent for the use of such

- communication and inform them of the risks involved. Members should also inform clients of alternative methods of counselling in the event of failure of technology.
- 3.2 Members shall endeavour to take reasonable measures to ensure the security and protection of all information transmitted during the course of counselling, including the storage of such information.

# 4. Effectiveness of Technology

- 4.1 Before the commencement of technology assisted counselling, Members must determine that clients are intellectually, emotionally, physically, linguistically and functionally capable of using such technology. Members must ensure that clients understand that in the use of technology, there is the absence of direct personal contact, lack of visual cues and direct voice intonations which exist in face-to-face counselling.
- 4.2 Where in the course of the use of technology, Members are of the opinion that the use of technology is not appropriate or unsuitable for the clients, Members should discuss alternative methods of counselling or make such other recommendations as deemed appropriate.

#### 5. Social Media

- 5.1 Social media plays an increasingly important part in everyday life. Where Members use social media as a medium for their professional services, they must clearly distinguish it from any personal account.
- 5.2 Members must respect the privacy of their clients' presence on social media unless informed consent is given to view or participate in the clients' media.

# **Section I: Public Statements**

### 1. Introduction

1.1 Members in the course of their work may be required to give public statements either by way of advertisements in various forms, interviews with the press which are published in any media or publication of their research papers.

# 2. The following are guidelines that applies to public statements that are to be made by Members:

- 2.1 Public statements relating to professional services, products or publications in whatever form must comply with the SAC Code of Ethics. These include paid or unpaid advertising, brochures, printed matters, directory listings, personal resume, interviews or comments for use in the media, lectures and public oral presentation.
- 2.2 Members shall not make any public statements that are deceiving or misleading concerning their work and those of persons or organisations they are affiliated.
- 2.3 Members shall not make any statement which is false or deceptive concerning:
  - 2.3.1 Academic qualifications
  - 2.3.2 Training, experience or competence
  - 2.3.3 Institutions or associations they are associated with
  - 2.3.4 Services rendered
  - 2.3.5 The degree of their counselling success
  - 2.3.6 Publications or findings
  - 2.3.7 Fees
- 2.4 Members shall not make any statement on matters concerning the SAC without the expressed approval of the Executive Committee of SAC.

### **Section J: List of References**

# 1. Sections of this Code of Ethics are influenced by or adapted from the following:

- 1.1 American Counseling Association. (2014). ACA Code of Ethics. Retrieved from https://www.counseling.org/knowledge-center/ethics (or download from https://www.counseling.org/resources/aca-code-of-ethics.pdf)
- 1.2 Association for Lesbian, Gay, Bisexual, and Transgender Issues in Counseling (n.d.). Competencies for Counseling Lesbian, Gay, Bisexual and Transgender (LGBT) Clients. Retrieved from <a href="http://www.algbtic.org/competencies.html">http://www.algbtic.org/competencies.html</a>
- 1.3 Association for Multicultural Counseling and Development. (2015). Multicultural and Social Justice Counseling Competencies. Retrieved from <a href="https://www.counseling.org/knowledge-center/competencies">https://www.counseling.org/knowledge-center/competencies</a>
- 1.4 Association for Spiritual, Ethical, and Religious Values in Counselling. (2018). Spiritual and Religious Competencies for Addressing Spiritual and Religious Issues in Counselling. Retrieved from <a href="http://www.aservic.org/resources/spiritual-competencies/">http://www.aservic.org/resources/spiritual-competencies/</a>
- 1.5 British Association for Counselling & Psychotherapy. (2016). Ethical Framework for the Counselling Professions. Retrieved from <a href="https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/">https://www.bacp.co.uk/events-and-resources/ethics-and-standards/ethical-framework-for-the-counselling-professions/</a>