



# FACT-Alberta

FEDERATION OF ASSOCIATIONS OF COUNSELLING THERAPISTS IN ALBERTA

## **CODE OF ETHICS** **(DRAFT)**

**For the Proposed:**  
**College of Counselling Therapy of Alberta**

**March 2019**

**Prepared by: Federation of Associations of Counselling Therapists – Alberta (FACT-AB)**  
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**Approved by: the Steering Committee of FACT-AB, March 18, 2018**

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## Preamble

The Code of Ethics expresses the ethical principles and values of the College of Counselling Therapy of Alberta and serves as a guide to the professional conduct of all its registered members. It also informs the public of the standards of ethical conduct for which members are to be responsible and accountable.

Registered members of the College of Counselling Therapy, including Counselling Therapists (CT), Addiction Counsellors (AC), and Child and Youth Care Counsellors (CYCC), together hereinafter referred to as “Members”, are held to standards of this Code of Ethics. Members of the College have a responsibility to ensure that they are familiar with this Code of Ethics, to understand its application to their professional conduct, and to strive to adhere to its principles and values. Members should also be familiar with the Standards of Practice of the College, as well as with other sources of information which will assist them in making informed professional decisions. Members of the College represent counselling professionals with diverse specialization. Members continue to abide by the Code of Ethics and Standards of Practice related to their area of specialized training.

The College of Counselling Therapy and its members respect the dignity and worth of the individual, and strive to protect, respect, and promote the rights and welfare of all those who receive services from members of the College. The Code reflects such values as integrity, competence, responsibility and an understanding of and respect for the cultural diversity of society. Members see the client as the expert in their own experience, and provide client-centered care aimed at addressing the relevant psychological, social, cultural, spiritual, biological, and developmental needs of the clients and families they serve.

This Code represents the commitment of Members to act ethically in the provision of professional services. Members are responsible to act in accordance with Common Law, Federal and Provincial Human Rights Legislation, the Alberta Mental Health Act, and the laws, regulations, and policies which are professionally relevant to their working environment. Members are accountable to both the public and their peers and are therefore subject to the complaints and disciplinary procedures of the College of Counselling Therapy of Alberta.

Although a Code of Ethics is essential to ethical practice, it cannot be a substitute for the active process of ethical decision making. Members are encouraged to maintain awareness of their own values and their implications for practice, and to see themselves as a growing, learning, and strengthening professionals with the capacity to make complex ethical decisions. Members are encouraged to use the section on ethical decision-making for guidance in resolving ethical dilemmas.

This Code of Ethics is a living document, which will be revised over time, as our understanding and ethical knowledge grow. College members and members of the public are invited to submit comments and suggestions at any time to the College.

## **Ethical Principles**

The expectations for ethical conduct as expressed in this Code are based on the following fundamental principles:

- a) Beneficence** - being proactive in promoting the client's best interests
- b) Fidelity** - honouring commitments to clients and maintaining integrity in counselling relationship
- c) Nonmaleficence** - not willfully harming clients and refraining from actions that risk harm
- d) Autonomy** - respecting the rights of clients to self-determination
- e) Justice** - respecting the dignity and just treatment of all persons
- f) Societal Interest** - respecting the need to be responsible to society

## Ethical Decision-Making Process

This brief overview of approaches to the process of ethical decision-making provides counselling therapists with some direction when engaging in ethical discernment and making ethical decisions. Members are advised to consult the Ethics Committee, knowledgeable colleagues, or other ethics resources as needed.

### 1. Principle-Based Ethical Decision-Making

- Step One** — **What are the key ethical issues in this situation?**
- Step Two** — **What ethical articles from the College Code of Ethics are relevant to this situation?**
- Step Three** — **Which of the six ethical principles are of major importance in this situation?** (This step also involves securing additional information, consulting with knowledgeable colleagues or the College Ethics Committee, and examining the probable outcomes of various courses of action.)
- Step Four** — **How can the relevant ethical articles be applied in this circumstance and any conflict between principles be resolved and what are the potential risks and benefits of this application and resolution?**
- Step Five** — **What do my feelings and intuitions tell me to do in this situation?** (Members may consider “**2. Virtue-Based Ethical Decision-Making**” at this point).
- Step Six** — **What plan of action will be most helpful in this situation?**

## **2. Virtue-Based Ethical Decision-Making**

The virtue ethics approach is based on the belief that Members are motivated to be virtuous and caring because they believe it is the right thing to do. Virtue ethics focus on the counselling therapist as an ethical agent with the capacity to make complex ethical decisions. Although there is no step-by-step methodology for virtue ethics, the following questions may help the counselling therapist in the process of virtue-based ethical decision-making:

1. What emotions and intuition am I aware of as I consider this ethical dilemma and what are they telling me to do?
2. How can my values best show caring for the client in this situation?
3. How will my decision affect other relevant individuals in this ethical dilemma?
4. What decision would I feel best about publicizing?
5. What decision would best define who I am as a person?

## **3. Quick Check**

1. **Universality** - Would I make the same decision for everyone? If every Counselling therapist made this decision, would it be a good thing?
2. **Justice** - Is everyone being treated fairly by my decision?
3. **Publicity** - Would I want this ethical decision announced on the front page of a major newspaper?

## **A. Professional Responsibility**

### **A1. General Responsibility**

Members maintain high standards of professional competence and ethical behaviour, and recognize the need for continuing education and personal care in order to meet this responsibility. Members regularly evaluate their own counselling knowledge, skills and abilities, to assess their fitness to practice and determine their learning needs. As needed, the Members will seek appropriate assistance for personal issues that could impair practice. (See also **C1, F1**)

### **A2. Respect for Rights**

Members participate in only those practices that are respectful of the legal, civic, and moral rights of others, and act to safeguard the dignity and rights of their clients, students, and research participants.

### **A3. Boundaries of Competence**

Members limit their counselling services and practices to those within their professional competence by virtue of their education and professional experience, and consistent with any requirements for provincial and national credentials. They refer to other professionals, when the needs of clients exceed their level of competence. (See also **F2**)

### **A4. Supervision and Consultation**

Members take reasonable steps to obtain supervision and/or consultation with respect to their counselling practices and, particularly, with respect to doubts or uncertainties which may arise during their professional work. Members are advised to consult knowledgeable colleagues, the Ethics Committee, or other professional resources as needed. (See also **B10, C4, C7**)

### **A5. Representation of Professional Qualifications**

Members claim or imply only those professional qualifications they possess, and are responsible for correcting any known misrepresentation of their qualifications by others.

### **A6. Responsibility to Counsellors and Other Professionals**

Members understand that ethical behaviour among themselves and other professionals is expected at all times.

### **A7. Unethical Behaviour by Other Counsellors**

Members have an obligation when they have serious doubts as to the ethical behaviour of another counsellor, to seek an informal resolution with the

counsellor, when feasible and appropriate. When an informal resolution is not appropriate or feasible, or is unsuccessful, Members report their concerns to the Ethics Committee.

**A8. Responsibility to Clients**

When Members have reasonable grounds to believe that a client has an ethical complaint about the conduct of a College member, Members inform the client of the College Procedures for Processing Complaints of Ethical Violations and how to access these procedures.

**A9. Sexual Misconduct**

Members do not condone or engage in sexual misconduct. "Sexual misconduct" is defined by the HPA as any incident or repeated incidents of objectionable or unwelcome conduct, behaviour or remarks of a sexual nature by a regulated member towards a patient, that a regulated member knows, or should know, would cause offence, humiliation, or adversely affect the patient's health and wellbeing. Sexual misconduct can include electronic, or written comments, gestures, or physical contacts of a sexual nature. "Sexual Nature" (defined in HPA) as not including "any conduct, behaviour, or remarks that are appropriate to the service provided."

**A10. Sensitivity to Diversity**

Members strive to understand and respect the diversity of their clients, including but not limited to, differences related to age, ethnicity, culture, language, body size, ability, religion and spirituality, sexual orientation, gender identity, gender expression, political belief, and socio-economic status. (See also **B9, D10**)

**A11. Extension of Ethical Responsibilities**

Services and products provided by Members through classroom instruction, public lectures, demonstrations, publications, radio and television programs, computer technology and other media must meet the appropriate ethical standards consistent with this Code of Ethics.

## **B. Counselling Relationships**

**B1. Primary Responsibility**

Members have a primary responsibility to respect the integrity and promote the welfare and well-being of their clients. They work collaboratively with clients to devise integrated, individualized counselling plans that offer reasonable promise of success and are consistent with the abilities and circumstances of clients.

**B2. Confidentiality**

Counselling relationships and information resulting therefrom are kept confidential. However, there are the following exceptions to confidentiality:



- (i) when disclosure is required to prevent clear and imminent danger to the client or others;
- (ii) when legal requirements demand that confidential material be revealed;
- (iii) when a child or vulnerable person is in need of protection. (See also **B15, B17, E6, E7, F8**)

**B3. Duty to Warn**

When Members become aware of the intention or potential of clients to place others in clear or imminent danger, they use reasonable care to give threatened persons such warnings as are essential to avert foreseeable dangers.

**B4. Client's Rights and Informed Consent**

When services are initiated, and throughout the counselling process as necessary, Members inform clients of the purposes, goals, techniques, procedures, limitations, potential risks and benefits of services to be performed, and other such pertinent information. Members make sure that clients understand the implications of diagnosis, fees and fee collection arrangements, record-keeping, and limits of confidentiality. Clients have the right to participate in the ongoing counselling plans, to refuse any recommended services, and to be advised of the consequences of such refusal. (See also **C5, E5**)

**B5. Children and Persons with Diminished Capacity**

Members conduct the informed consent process with those legally appropriate to give consent when counselling, assessing, and having as research subjects children and/or persons with diminished capacity. These clients also give consent to such services or involvement commensurate with their capacity to do so. Members understand that the parental or guardian right to consent on behalf of children diminishes commensurate with the child's growing capacity to provide informed consent.

**B6. Maintenance of Records**

Members maintain records in sufficient detail to track the sequence and nature of professional services rendered and consistent with any legal, regulatory, agency, or institutional requirement. They secure the safety of such records and create, maintain, transfer, and dispose of them in a manner compliant with the requirements of confidentiality and the other articles of this Code of Ethics.

**B7. Access to Records**

Members understand that clients have a right of access to their counselling records, and that disclosure to others of information from these records only occurs with the written consent of the client and/or when required by law.

**B8. Dual Relationships**

Members make every effort to avoid dual relationships with clients that could impair professional judgment or increase the risk of harm to clients. Examples of dual relationships include, but are not limited to, familial, social, financial, business, or close personal relationships. When a dual relationship cannot be avoided, Members take appropriate professional precautions such as role clarification, informed consent, consultation, and documentation to ensure that judgment is not impaired and no exploitation occurs. (See also **B11, B12, B13, B18, C5, C7, F10**)

**B9. Respecting Diversity**

Members actively work to understand the diverse cultural background of the clients with whom they work, and do not condone or engage in discrimination based on, but not limited to, age, ethnicity, culture, language, body size, ability, religion and spirituality, sexual orientation, gender identity, gender expression, political belief, and socio-economic status. (See also **A10, D10**)

**B10. Consulting With Other Professionals**

Members may consult with other professionally competent persons about the client. However, if the identity of the client is to be revealed, it is done with the written consent of the client. Members choose professional consultants in a manner that avoids placing the consultant in a conflict of interest situation.

**B11. Relationships with Former Clients**

Members remain accountable for any relationships established with former clients. Those relationships could include, but are not limited to those of a friendship, social, financial, and business nature. Members exercise caution about entering any such relationships and take into account whether or not the issues and relational dynamics present during the counselling have been fully resolved and properly terminated. In any case, Members seek consultation on such decisions.

**B12. Sexual Intimacies**

Members avoid any type of sexual intimacies with clients and they do not counsel persons with whom they have had a sexual relationship. Members do not engage in sexual intimacies with former clients within a minimum of three years after terminating the counselling relationship. This prohibition is not limited to the three year period but extends indefinitely if the client is clearly vulnerable, by any reason, to exploitative influence by the Member. Members, in all such circumstances, clearly bear the burden to ensure that no such exploitative influence has occurred, and to seek consultative assistance.

**B13. Multiple Clients**

When Members agree to provide counselling to two or more persons who have a relationship (such as husband and wife, or parents and children), Members

clarify at the outset which person or persons are clients and the nature of the relationship they will have with each person. If conflicting roles emerge for Members, they must clarify, adjust, or withdraw from roles appropriately.

**B14. Multiple Helpers**

If, after entering a counselling relationship, a Member discovers the client is already in a counselling relationship, the Member is responsible for discussing the issues related to continuing or terminating counselling with the client. It may be necessary, with client consent, to discuss these issues with the other helper to avoid compromise to the treatment plan of either helper or the risk of exacerbating client symptoms. Interdisciplinary team models and Members working in differing modalities may be considered.

**B15. Group Work**

Members have the responsibility to screen prospective group members, especially when group goals focus on self-understanding and growth through self-disclosure. Members inform clients of group member rights, issues of confidentiality, and group techniques typically used. They take reasonable precautions to protect group members from physical and/or psychological harm resulting from interaction within the group, both during and following the group experience.

**B16. Computer Use**

When computer applications are used as a component of counselling services, Members ensure that: (a) client and Member identities are verified; (b) the client is capable of using the computer application; (c) the computer application is appropriate to the needs of the client; (d) the client understands the purpose and operation of client-assisted and/or self-help computer applications; and (e) a follow-up of client use of a computer application is provided to assist subsequent needs. In all cases, computer applications do not diminish the Member's responsibility to act in accordance with the Code of Ethics, and in particular, to ensure adherence to the principles of confidentiality, informed consent, and safeguarding against harmful effects. All data (including servers) must be stored in Canada and abide by Canadian privacy laws. (See also **D5**)

**B17. Delivery of Services by Telephone, Teleconferencing, and Internet**

Members follow all additional ethical guidelines for services delivered by telephone, teleconferencing, and the Internet, including appropriate precautions regarding confidentiality, security, informed consent, records and counselling plans, as well as determining the right to provide such services in regulatory jurisdictions. All data (including servers) must be stored in Canada and abide by Canadian privacy laws.

**B18. Social Media**

Members recognize that the Code of Ethics and ethical principles apply to the use of social media. They take precautions in their use of social media to maintain professional boundaries, to respect issues of safety, and to avoid disclosing confidential information.

**B19. Referral**

When Members determine their inability to be of professional assistance to clients, they avoid initiating a counselling relationship or terminate the professional relationship appropriately and immediately. In either event, members suggest appropriate alternatives, including making a referral to resources about which they are knowledgeable. Should clients decline the suggested referral, Members are not obligated to continue the relationship.

**B20. Termination of Counselling**

Members terminate counselling relationships, with client agreement whenever possible, when it is reasonably clear that: the goals of counselling have been met, the client is no longer benefitting from counselling, the client does not pay fees charged, previously disclosed agency or institutional limits do not allow for the provision of further counselling services, and the client or another person with whom the client has a relationship threatens or otherwise endangers the Member. However, Members make reasonable efforts to facilitate the continued access to counselling services when services are interrupted by these factors and by counsellor illness, client or counsellor relocation, client financial difficulties and so forth.

## **C. Consulting and Private Practice**

**C1. General Responsibility**

Members provide consultative services only in those areas in which they have demonstrated competency by virtue of their education and experience.

**C2. Undiminished Responsibility and Liability**

Members who work in private practice, whether incorporated or not, must ensure that there is no diminishing of their individual professional responsibility to act in accordance with the Code of Ethics, or in their liability for any failure to do so.

**C3. Accurate Advertising**

Members, when advertising services as private practitioners, do so in a manner that accurately and clearly informs the public of their services and areas of expertise.

**C4. Consultative Relationships**

Members ensure that consultation occurs within a voluntary relationship between a counselling therapist and a help-seeking individual, group, or organization, and that all parties concerned understand the goals.

**C5. Informed Consent**

Members who provide services for the use of third parties, acknowledge and clarify for the informed consent of clients, all obligations of such multiple relationships, including purpose(s), entitlement to information, and any restrictions on confidentiality. Third parties include: courts, public and private institutions, funding agencies, employees, and so forth.

**C6. Respect for Privacy**

Members limit any discussion of client information obtained from a consulting relationship to persons clearly involved with the case. Any written and oral reports restrict data to the purposes of the consultation and, every effort is made to protect client identity and to avoid undue invasion of privacy. Members respect the privacy of their clients presence on social media unless given consent to view such information.

**C7. Conflict of Interest**

Members who engage in consultation avoid circumstances where the duality of relationships or the prior possession of information could lead to a conflict of interest.

**C8. Sponsorship and Recruitment**

Members present any of their organizational affiliations or membership in such a way as to avoid misunderstanding regarding sponsorship or certification. They also avoid the use of any institutional affiliation to recruit private practice clients.

## **D. Evaluation and Assessment**

**D1. General Orientation**

Members adequately orient and inform clients so that evaluation and assessment results can be placed in proper perspective along with other relevant information.

**D2. Purposes and Results of Evaluation and Assessment**

Members take responsibility to inform clients about the purpose of any evaluation and assessment instruments and procedures and the meaning of evaluation and assessment results.

**D3. Evaluation and Assessment Competence**

Members recognize the limits of their competence and offer only those evaluation and assessment services for which they have appropriate preparation and which meet established professional standards.

**D4. Administrative and Supervisory Conditions**

Members ensure that evaluation and assessment instruments and procedures are administered and supervised under established conditions consistent with professional standards. They note any departures from standard conditions and any unusual behaviour or irregularities which may affect the interpretation of results.

**D5. Use of Technology**

Members recognize that their ethical responsibilities are not altered, or in any way diminished, by the use of technology for the administration of evaluation and assessment instruments. Members retain their responsibility for the maintenance of the ethical principles of privacy, confidentiality, and responsibility for decisions regardless of the technology used.

**D6. Appropriateness of Evaluation and Assessment**

Members ensure that evaluation and assessment instruments and procedures are valid, reliable, and appropriate to both the client and the intended purposes.

**D7. Reporting Evaluation and Assessment Results**

Members ensure that when reporting evaluation and assessment results to clients and other individuals care is taken to provide, in an appropriate manner, accurate and sufficient information for an understanding of any conclusions and recommendations made, and to identify the basis for any reservations which might exist.

**D8. Release of Evaluation and Assessment Data**

Counselling therapists ensure that evaluation and assessment data are released appropriately and only to the client and persons qualified to interpret and use them properly.

**D9. Integrity of Evaluation and Assessment Instruments and Procedures**

Members who use psychological tests and other assessment instruments, the value of which depends on their novelty to the client, ensure that they are limited to and safeguarded by those with the professional interest and competence to do so.

**D10. Sensitivity to Diversity when Assessing and Evaluating**

Members proceed with caution when judging and interpreting the performance of minority group members and any other persons not represented in the group on which the evaluation and assessment instruments and procedures were standardized. They recognize and take into account the potential effects of age, ethnicity, culture, language, body size, ability, religion and spirituality, sexual orientation, gender identity, gender expression, and socio-economic status on both the administration of, and the interpretation of data from, such instruments and procedures. (See also **A10, B9**)

**D11. Security Maintenance**

Members ensure the integrity and security of evaluation and assessment instruments and procedures consistent with any legal and contractual obligations. They refrain from appropriating, reproducing, or modifying established evaluation and assessment instruments without the expressed permission and adequate recognition of the original author, publisher and copyright holder.

## **E. Research and Publications**

**E1. Researcher Responsibility**

Members plan, conduct, and report on research in a manner consistent with relevant ethical principles, professional standards of practice, federal and provincial laws, institutional regulations, cultural norms, and standards governing research with human subjects.

**E2. Subject Welfare**

Members are responsible for protecting the welfare of their research subjects during research, and avoid causing injurious psychological, physical or social effects to persons who participate in their research activities.

**E3. Principal Researcher Responsibility**

Members, when in the role of principal researcher are responsible for ensuring that appropriate ethical research practices are followed and, with respect to research involving human subjects, for obtaining an independent and appropriate ethical review before proceeding with the research. Research associates involved in the research activities share ethical obligations and full responsibility for their own actions.

**E4. Voluntary Participation**

Members ensure that participation in research is voluntary. However, involuntary participation may be appropriate when it can be shown that participation will have no harmful effects on subjects, is essential to the research, and meets ethical review requirements.

**E5. Informed Consent of Research Subjects**

Members inform all research subjects of the purpose(s) of their research. In addition, subjects are made aware of any experimental procedures, possible risks, disclosures and limitations on confidentiality. Subjects are also informed that they are free to ask questions and to discontinue at anytime.

**E6. Research Confidentiality**

Members ensure that research information on subjects is confidential and the identity of participants is protected unless otherwise authorized by them, consistent with all informed consent procedures.

**E7. Use of Confidential Information for Didactic or Other Purposes**

Members do not disclose in their writings, public presentation, or public media, any personally identifiable information obtained in confidence about clients, research participants, students, or organizational clients unless (1) there is legal authorization to do so, (2) reasonable steps are taken not to identify the person or organization, or (3) the person or organizational client has given informed written consent.

**E8. Further Research**

Members have an obligation to collaborate with colleagues by making available original research data to qualified researchers who may wish to replicate or verify the research.

**E9. Research Sponsors**

Members, when conducting research, obtain informed consent from sponsors and institutions and ensure that sponsors and institutions are given feedback information and proper acknowledgement.

**E10. Review of Manuscripts**

Members who review material submitted for publication, research or other scholarly purposes respect the confidentiality and proprietary rights of those who submitted the research.

**E11. Reporting Results**

In reporting research results, Members mention any variables and conditions that might affect the outcome of the investigation or the interpretation of the results, and provide information sufficient for others who might wish to replicate the research.



**E12. Research Contributions**

Members give due credit through joint authorship, acknowledgement, footnote statements, or other appropriate means to those who have contributed significantly to the research and/or publication, and to those who have done previous work on the topic. For an article that is based mainly on a student thesis or dissertation, the student is listed as principal author.

**E13. Submission for Publication**

Members do not submit the same manuscript or one essentially similar in content for simultaneous publication consideration by two or more journals. In addition, manuscripts published in whole or in substantial part in another journal or published work should not be submitted for publication without acknowledgement and permission from the previous publication.

## **F. Counselling Therapist Education, Training, & Supervision**

**F1. General Responsibility**

Counselling therapists who are responsible for counsellor education, training and supervision adhere to current College guidelines and standards with respect to such activities and conduct themselves in a manner consistent with the Code of Ethics and Standards of Practice for Counselling Therapists.

**F2. Boundaries of Competence**

Members who conduct counsellor education, training and supervision have the necessary knowledge and skills to do so, and limit their involvement to such competencies.

**F3. Ethical Orientation**

Members who are responsible for counsellor education, training and supervision have an obligation to make their students, trainees, and supervisees aware of the ethical responsibilities as expressed in the Code of Ethics and Standards of Practice of the College.

**F4. Clarification of Roles and Responsibilities**

Members who engage in counselling supervision of students or trainees take responsibility for clarifying their respective roles and obligations.

**F5. Welfare of Clients**

Members who engage in counselling supervision of students or trainees take steps to ensure the welfare of clients during the supervised practice period, and intervene, when necessary, to ensure that this obligation is met.

**F6. Program Orientation**

Members responsible for counsellor education programs and training activities take responsibility to orient prospective students and trainees to all core elements of such programs and activities, including to a clear policy with respect to all supervised practice components, both those simulated and real.

**F7. Relational Boundaries**

Members who work as counsellor educators, trainers, and supervisors establish relationships with their students, trainees and supervisees such that appropriate relational boundaries are clarified and maintained, and dual relationships avoided.

**F8. Obligation to Inform**

Members who work as educators, trainers, and supervisors take steps to inform students, trainees, and supervisees, at the beginning of activities associated with these roles, of all reasonably foreseeable circumstances under which confidentiality may be breached during such activities.

**F9. Self-Development and Self-Awareness**

Members who work as educators, trainers and supervisors, encourage and facilitate the self-development and self-awareness of students, trainees and supervisees, so that they learn to integrate their professional practice and personal insight.

**F10. Dealing with Personal Issues**

Members responsible for education, training, and supervision recognize when such activities evoke significant personal issues for students, trainees, and supervisees and refer to other sources when necessary to avoid counselling those for whom they hold administrative or evaluative responsibility.

**F11. Self-Growth Activities**

Members, who work as educators, trainers, and supervisors, ensure that any professional experiences which require self-disclosure and engagement in self-growth activities are managed in a manner consistent with the principles of informed consent, confidentiality, and safeguarding against any harmful effects.