

SOUTH AFRICAN PROFESSIONAL CONDUCT GUIDELINES IN PSYCHOLOGY 2007

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Preamble

These Ethical Guidelines (hereinafter referred to as the Guidelines) developed by the Psychological Society of SA (PsySSA) recognize individual responsibility to assure ethical behaviour and attitudes on the part of all professionals in the discipline (i.e. psychologists, registered counsellors, intern psychologists, post-graduate students, psychometrists, psychotechnicians). All such person's will hereafter be referred to generically in this document as "psychologists". Attempts to ensure ethical behaviour and attitudes include articulating ethical principles, values and standards; promoting those principles, values, and standards through education, peer modelling, and consultation; developing and implementing methods to help psychologists monitor the ethics of their behaviour and attitudes; adjudicating complaints of unethical behaviour; and, taking corrective action when warranted.

These Guidelines articulate ethical principles and rules of ethical conduct to guide all psychologists, whether scientists, practitioners, or scientist practitioners, or whether acting in a research, direct service, teaching, student, administrative, supervisory, management, consultative, peer review, editorial, expert witness, social policy or any other role related to the discipline of psychology.

These Guidelines consist of a Preamble, six Guiding Principles (I-VI), and specific Ethical Standards. The Preamble discusses the intent, context, organization, and scope of application of these Guidelines. The Preamble and Guiding Ethical Principles are *aspirational* goals to guide psychologists and should be considered by psychologists in arriving at an ethical course of action and may be considered by ethics bodies in interpreting the Ethical Standards. The Ethical Standards set forth specific *enforceable* rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied practice roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a specific conduct is not specifically addressed by these Guidelines does not mean that it is necessarily either ethical or unethical.

Notwithstanding recourse to these Guidelines, psychologists will be faced with ethical dilemmas which are difficult to resolve. In these circumstances, psychologists are expected to engage in an ethical decision-making process that is explicit enough to bear public - especially disciplinary committee - scrutiny. In some cases, resolution may be a matter of personal conscience. However, decisions of personal conscience are also expected to be the result of a decision-making process, which is based on a reasonably coherent set of ethical principles and which can bear public scrutiny. If the psychologist can demonstrate that every reasonable effort was made to apply the principles of this Ethical Code and resolution of the conflict has

had to depend on the personal conscience of the psychologist, such a psychologist would be deemed to have followed this Ethical Code.

Some ethical dilemmas may be easily resolved through the clear-cut application of the Ethical Rules embedded within these Guidelines. On the other hand, some ethical issues (particularly those in which ethical principles conflict) are not easily resolved and might require time-consuming deliberation. Psychologists engaged in time-consuming deliberation are encouraged and expected to consult with colleagues and/ or professional bodies (such as PsySSA's Ethics Committee) when such persons/bodies can add knowledge and/or objectivity to the decision-making process. Although the decision for action remains with the individual psychologist, the seeking and consideration of such assistance reflects an ethical approach to ethical decision-making.

These Guidelines apply to psychologists' work related activities, that is, activities that are part of the psychologist's scientific and professional functions or that are psychological in nature. It includes the clinical, counselling or therapeutic practice of psychology, research, teaching, supervision of trainees, development of assessment instruments, conducting assessments, educational, counselling, organizational consulting, social intervention, administration, and other activities as well.

These Guidelines are intended to guide and regulate only those activities a psychologist engages in by virtue of being a psychologist. There is no intention to guide or regulate a psychologist's activities outside of this context. Personal behaviour becomes a concern of the discipline of psychology only if it is of such a nature that it undermines public trust in the discipline as a whole or if it raises questions about the psychologist's ability to carry out appropriately his/her responsibilities as a psychologist.

These Guidelines are intended to provide standards of professional conduct that are applicable to the performance of any psychological activity. In the process of making decisions regarding their professional behaviour, psychologists must consider these Guidelines in addition to the Health Professions Act No. 56 of 1974 (as amended) and specifically the Ethical Rules of Conduct for Practitioners Registered under the Health Professions Act, 1974, published under Government Notice R717 in Government Gazette 29079 of 4 August 2006 (as amended) and particularly Annexure 12: Rules of Conduct Pertaining Specifically to the Profession of Psychology, which define the parameters of the profession of psychology in SA.

Psychologists work to develop a valid and reliable body of scientific knowledge based on research. They may apply that knowledge to human behaviour in a variety of contexts. In so doing, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, manager, social interventionist, and expert witness. Their goal is to broaden knowledge of behaviour and where appropriate, to apply it pragmatically to improve the condition of both the individual and society. Psychologists respect the central importance of freedom of inquiry and expression in research, teaching, and publication. They also strive to help the public in developing informed judgment and choices concerning human behaviour.

The development of a dynamic set of ethical standards for a psychologist's work related conduct requires a personal commitment to a lifelong effort to act ethically; to encourage ethical behaviour by students, supervisors, employees, colleagues, as appropriate; and to consult with others concerning ethical problems and dilemmas. Each psychologist supplements, but does not violate, these Guidelines' values and rules on the basis of the guidance drawn from societal values, culture, and experience.

Membership of PsySSA commits psychologists:

- To adhere to these Guidelines.
- To assess and discuss ethical issues and practices with colleagues on a regular basis.
- To bring concerns about possible unethical actions by a psychologist directly to that psychologist, when appropriate, and to attempt to reach an agreement on the issue and, if needed, on the appropriate action to be taken.
- To consider seriously others' concerns about one's own possibly unethical actions and attempt to reach an agreement on the issue and, if needed, take appropriate action.
- To cooperate with duly constituted ethical committees which are concerned with ethics and ethical conduct.
- 1. To bring to the attention of PsySSA and/or the Board ethical issues which require clarification or the development of new guidelines or standards.

The procedures for reporting, investigating and resolving complaints of unethical conduct are described in this document. Ethical practice of psychology is an organic process in that the parameters of ethicality may evolve over time (and) according to local contextual circumstances and needs. As a result these Ethical Guidelines must necessarily be seen as

being a process of development. It will be reviewed by the PsySSA Council at least once quadrennially. Psychologists are invited to forward comments and suggestions to the PsySSA Ethics Committee. Similarly, an invitation is extended to all readers of the document (including members of other disciplines and the public). Consumers of psychological services are invited to participate in the shaping of these Guidelines in the professional practice of psychology.

PsySSA is indebted to the American Psychological Association (APA), the Canadian Psychological Association (CPA), and the American Association of State and Provincial Boards (ASPPB) for permission to access and replicate aspects of their respective Ethics Codes and Codes of Professional Conduct in developing these SA Ethical Guidelines.

GUIDING ETHICAL PRINCIPLES

Introduction

Psychologists respect the dignity and worth of the individual and strive for the preservation and protection of fundamental human rights. Herein psychologists shall be guided by the SA Constitution and the Bill of Rights enshrined therein. They are committed to increasing knowledge of human behaviour and of people's understanding of themselves and others, and to the utilization of such knowledge for the promotion of human welfare. While pursuing these objectives, they make every effort to protect the wellbeing of others. They use their skills only for purposes consistent with these values and do not knowingly permit their misuse of others. While demanding for themselves freedom of inquiry and communication, psychologists accept the responsibility this freedom requires: competence, objectivity in the application of skills, and concern for the best interest of clients, colleagues, students, research participants, and society. In the pursuit of these ideals psychologists subscribe to Principles in the areas of: Competence, Integrity, Professional and Scientific Responsibility, Respect for People's Human Rights and Dignity, Concern for Others' Welfare and Social Responsibility.

Principle I: Competence

Psychologists strive to maintain high standards of competence in their work. They recognize the boundaries of their particular competencies and the limitation of their expertise. They provide only these services and use only those techniques for which they are qualified by education, training, or experience. Psychologists are cognizant of the fact that the competence required in serving teaching, and/or studying groups of people vary with the distinctive characteristics of those groups. In those areas in which recognized professional standards do not yet exist, psychologists exercise careful judgement and take appropriate precautions to protect the welfare of those with whom they work. They maintain knowledge of relevant scientific and professional information related to the services they render, and they recognize the need for ongoing education. Psychologists make appropriate use of scientific, professional, technical and administrative resources.

Principle II: Integrity

Psychologists seek to promote integrity in the science, teaching and practice of psychology. In these activities, psychologists are honest, fair and respectful of others. In describing or reporting their qualifications, services, products, fees, research or teaching, they do not make statements that are false or misleading or deceptive. Psychologists strive to be aware of their own belief systems, values, needs, and limitations and the effect of these on their work. To the extent feasible, they attempt to clarify for relevant parties the roles they are performing and to function appropriately in accordance with those roles. Psychologists avoid improper and potentially harmful dual relationships.

Principle III: Professional and Scientific Responsibility

Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behaviour, and adapt their methods to the needs of different populations. Psychologists consult with, refer to, and cooperate with, other professionals and institutions to the extent needed to serve the best interests of their patients, clients, or other recipients of their services. Psychologists' moral standards and conduct are personal matters to the same degree as is true for any other person, except as psychologists' conduct may compromise their professional responsibilities or reduce the public's trust in psychology and psychologists. Psychologists are concerned about the ethical compliance of his/her colleagues' scientific ad professional conduct. When appropriate, they consult with colleagues in order to prevent or avoid unethical conduct.

Principle IV: Respect for People's Human Rights and Dignity

Psychologists accord appropriate respect to the fundamental human rights, dignity and worth of all people. They respect the rights of individuals to privacy, confidentiality, self-determination, and autonomy, and are mindful that legal and other obligations may lead to inconsistency and conflict with the exercise of these rights. Psychologists are aware of cultural, individual and role differences, including those due to age, gender, race, ethnicity, national origin, religion, sexual

orientation, disability, language and socioeconomic status. Psychologists try to eliminate the effect on their work of biases based on these factors and they do not knowingly participate in or condone unfair discriminatory practices.

Principle V: Concern for Others' Wellbeing

Psychologists seek to contribute to the welfare of those with whom they interact professionally. In their professional actions, psychologists weigh the welfare and rights of his/her patients or clients, students, supervisees, human research participants, and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns they attempt to resolve these conflicts and to perform their roles in a responsible fashion that avoids or minimizes harm. Psychologists are sensitive to real and ascribed differences in power between themselves and others, and they do not exploit or mislead other people during or after professional relationships.

Principle VI: Social Responsibility

Psychologist are cognizant of their professional and scientific responsibilities to the community and the society in which they work and lives. Psychologists apply and make public their knowledge of psychology in order to contribute to human wellbeing. Psychologists are concerned about and work to mitigate the causes of human distress and science of psychology. Psychologists try to avoid misuse of their work. Psychologists comply with the law and encourage the development of law and social policy that serve the interests of their patients and clients and the public. They are encouraged to contribute a portion of their professional time for little or no personal advantage.

ETHICAL STANDARDS

Preamble

Registration with the Professional Board of Psychology of the Health Professions Council of SA mandates compliance with the Ethical Standards delineated in this Chapter.

This Ethical Code constitutes the standards against which the required professional conduct of a psychologist is measured. Psychologists shall be governed by the rules delineated in these

Guidelines whenever they provide psychological services to any context. This Ethical Code shall apply to the conduct of all persons registered with the Board, including the applicant's conduct during the period of education, training, and employment which is required for registration with the Board.

Definition of Terms

For the purposes of this Ethical Code:

1. **Client** means a receiver of psychological services. An individual, family, or group (including an organization or community) can be a client when the recipient of professional psychological services.

2. **Clients**, research participants, students, and any other persons with whom psychologists come in contact in the course of their work, are independent if they can independently contract or give informed consent. Such persons are partially dependent if the decision to contract or give informed consent is shared between two or more parties (e.g., parents and school authorities, workers and Worker Compensation Boards, adult members of a family, Employee Assistance Programme). Such persons are considered to be fully dependent if they have little or no choice about whether or not to receive service or participate in an activity (e.g., patients who have been involuntarily committed to a psychiatric facility, or very young children involved in a research project).

3. **Others** means any individual or group with whom psychologists come in contact in the course of their work. It may include, but is not limited to: research participants; clients seeking help with personal, family, organizational, governmental, industrial, or community issues; students; supervisees; employees; colleagues; employers; third party payers; and, members of the general public.

4. **Legal or civil rights** means those rights protected under laws and statutes recognized in SA.

5. Human rights means fundamental and inalienable human rights which may or may not be fully protected by the Bill of Rights enshrined in the Constitution of the Republic of

SA. Of particular significance to psychologists, for example, are rights to: equal justice; fairness and due process; and developmentally appropriate privacy, self-determination, and personal liberty. Protection of some aspects of these rights may involve practices which are not contained or controlled within existing legislation.

6. **Unjust discrimination** or unjustly discriminatory means activities which are prejudicial or promote prejudice to persons because of their culture, nationality, ethnicity, colour, race, religion, gender, marital status, sexual orientation, physical or mental abilities, age, socio-economic status, and/or any other preference or personal characteristic, condition, or status.

- 7. Sexual harassment includes either or both of the following:
 - The use of power or authority in an attempt to coerce another person to engage in or tolerate sexual activity. Such uses include explicit or implicit threats of reprisal for noncompliance or promises of reward for compliance.

1. Engaging in deliberate and/or repeated unsolicited sexually oriented comments, anecdotes, gestures, or touching, if such behaviours: are offensive and unwelcome; create an offensive, hostile or intimidating working environment; or, can be expected to be harmful to the recipient.

8. **The discipline of psychology** refers to the scientific and applied methods and knowledge of psychology, and to the structures and procedures used by its members for conducting their work in relationship to society, to members of the public, to students, and to each other.

9. **Student** means any person being taught psychological content by a psychologist who is operating in a teacher or professional role.

10. **Confidential Information** means information disclosed by the client or otherwise obtained by a psychologist, where there is reasonable expectation that because of the relationship between the client and the psychologist or the circumstances under which the information was revealed or obtained, the information shall not be disclosed by the

psychologist without the informed written consent of the client. When a corporation or other organization is the client, rules of confidentiality apply to information pertaining to the organization, including personal information about individuals when such information is obtained in the proper course of that contract. Such information about individuals is subject to confidential control of the organization, not of the individual, and can be made available to the organization, unless there is reasonable expectations by such individual that such information was obtained in a separate professional relationship with that individual and is, therefore, subject to confidentiality requirements in itself.

11. **Court Order** means the written or oral communication of a member of the judiciary, or other appropriate court official.

12. **Professional Relationship** means a mutually agreed upon relationship between a psychologist and a client or student, i.e. client pays money to the psychologist for the purpose of obtaining the psychologist's professional expertise, time or service.

13. **Professional Service** means all actions of the psychologist in the context of a professional relationship with a client or student.

14. **Supervisee** means any person who is not able to practice psychology independently and who functions under the extended authority of the psychologist, the internship supervisor or secondary supervisor in the provision of psychological services.

15. Supervisor means a psychologist who supervises a supervisee.

1. GENERAL STANDARDS

1.1 Limits on Practice

Psychologists limit practice to the areas of competence in which they have become proficient through education, training, supervised experience, and/or appropriate professional experience.

1.2 Maintaining Competency

Psychologists shall maintain current competency in their areas of practice through continuing education, consultation, and/or other procedures in conformance with current standards of scientific or professional knowledge.

1.3 Adding New Services and Techniques

When psychologist are developing competency in a service or technique that is either new to the psychologists or new to the profession, they shall engage in ongoing consultation with other psychologists or relevant professions and shall seek and obtain appropriate education and training in the new area. The psychologists shall inform clients of the innovative nature and the known risks associated with the services or techniques, so that clients can exercise freedom of choice concerning the receipt of such services or the application of such techniques.

1.4 Describing the Nature and Results of Psychological Services

When psychologists provide assessment, evaluation, treatment, psychotherapy, counselling, teaching, consultation, research, or other psychological services to an individual, group or organization, they use language that is reasonably understandable to the recipient of those services and provides appropriate information beforehand about the nature of such services and appropriate information later about results and conclusions. If psychologists will be precluded, by law or by organizational roles from providing such information to particular individuals or groups as described above, they so inform those individuals or groups at the outset of the provision of service.

1.5 Respect for Human Differences

Where differences of age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socio-economic status significantly affect psychologists' work concerning particular individuals or groups, psychologists obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals.

In their work- related activities, psychologists do not engage in unfair discrimination based discrimination based on age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socio-economic status, or any basis proscribed by law.

1.6 Sexual harassment.

Sexual harassment by a psychologist means sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's professional activities or role(s) as a psychologist, and that either: (1) is unwelcome, is offensive, or creates a hostile work place environment, and the psychologist knows or is told this; (2) is sufficiently severe or intense to be abusive to a reasonable person in the situation. Sexual harassment can consist of a single intense or severe act, or of multiple, persistent, or pervasive acts.

1.7 Other harassment

Psychologists do not knowingly engage in behaviour that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socio-economic status.

1.8 Sufficient Professional Information

A psychologist rendering a professional opinion about a person, for example about the fitness of a parent in a custody hearing, does not do so without direct and substantial and professional contract with, or a normal assessment of, that person.

1.9 Maintenance and Retention of Records

The psychologist who renders professional services maintains records that include:

• The presenting problem(s) or purpose or diagnosis;

- The fee arrangement
- The date and substance of each billed contact or service
- Any test results or other evaluative results obtained and any basic test data from which they were derived;
- Notation and results of formal consults with other providers;
- A copy of all tests or other evaluative reports prepared as part of the professional relationship.

To meet the requirements of this Rule, so as to provide a formal record for review, but not necessarily for other legal purposes, the psychologist shall assure that all data entries in the professional records are maintained for a period of not less than three years after the last date that service was rendered. The psychologist shall also abide by other legal requirements for record retention, even if longer periods of retention are required for other purposes.

The psychologist stores and dispose of written, electronic, and other records of patients and clients in such a manner as to insure their confidentiality.

1.10 Continuity of Care

Psychologists make arrangements for another appropriate professional or professionals to deal with the emergency needs of their clients, as appropriate, during periods of foreseeable absence from professional availability

1.11 Interruption of Services

Psychologists make reasonable efforts to plan for continuity of care in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability or relocation, or by the client's relocation or financial limitations.

When psychologists enters into an employment or contractual relationship, they provide for orderly and appropriate resolution of responsibility for client care in the event that the employment or contractual relationship ends, with paramount consideration being given to the welfare of the patient or client.

1.12 Impaired Practitioner

- 1.12.1. Psychologists recognize that their personal problems and conflicts may interfere with their effectiveness. Accordingly they do not undertake or continue a professional relationship with a client when the psychologist is, or could reasonably be expected by the Board to be, impaired due to mental, emotional, physiological, pharmacological, or substance abuse conditions. If such a condition develops after a professional relationship has commenced and has been conducted in an appropriate manner, the practitioner shall notify the client in writing of the termination, and shall assist the patient or client in obtaining services from another professional.
- 1.12.2. Psychologists have an obligation to be alert to signs of, and to obtain assistance for, their personal problems at an early stage, in order to prevent significantly impaired performance.
- 1.12.3. When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate, their work-related duties.

1.13 Dual Relationships

1.13.1 The psychologist does not undertake or continue a professional relationship with a client, supervisee, employee, research participant, or student when the objectivity or competency of the psychologist is, or could reasonably be expected by the Board to be, impaired because of the psychologist's present or previous familial, social, emotional, supervisory, political, administrative, or legal relationship with the client, or a relevant person associated with or related to the client. If such dual relationship develops or is discovered after the professional relationship has been initiated, the psychologist is in violation of these Guidelines and shall terminate the professional relationship in appropriate manner, shall notify the client in writing of this termination, shall assist the client, in obtaining services from another professional, and shall not engage in any self-enhancing relationship with the client until at least a period of 24 months has elapsed after the termination.

The psychologist, in interacting with a supervisee, research participant, student, or others over whom the psychologist has or has had authority within the previous 24 months, shall not:

- engage in any verbal or physical behavior toward the individual which is sexually seductive, demeaning, or harassing; or
- engage in sexual intercourse or other physical intimacies with the individual; or
- enter into a financial or other potentially exploitative relationship with the individual.
- 1.13.2 It is not a prohibited dual relationship for either a post-master's or post-doctoral intern or fellow engaged in a supervised work experience to be in training with or under the supervision of a psychologist, and thereafter to be employed by that psychologist.

The prohibition set out above shall not be limited to the 24-month period, but shall extend indefinitely if the supervisee, research participant, student, or others over whom the psychologist has had authority is proven to be clearly vulnerable, by reason of emotional or cognitive disorder, to exploitative influence by the psychologist.

1.14 Multiple Relationships

- 1.14.1 In many communities and situations, it may not, be feasible or reasonable for psychologists to avoid social or other non-professional contacts with persons such as patients, clients, students, supervisees, or research participants.
- 1.14.2 Psychologists must always be sensitive to the potential harmful effects of social or other nonprofessional contacts on their work and on those persons

with whom they deal.

- 1.14.3 A psychologist refrains from entering into or promising another personal, scientific, professional, financial, or other relationship with such persons if it appears likely that such a relationship reasonably might impair the psychologist's objectivity or otherwise interfere with the psychologist's effectively performing his or her functions as a psychologist, or might harm or exploit the other party.
- 1.14.4 Whenever feasible, a psychologist refrains from taking on professional or scientific obligations when preexisting relationships would create the potential for harm.
- 1.14.5 If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist attempts to resolve the conflict(s) with due regard for the best interests of the affected person and maximal compliance with the Code of Conduct.

1.15 Third-Party Requests for Services

- 1.15.1. When a psychologist agrees to provide services to a person or entity at the request of a third party, the psychologists clarifies at the outset of the service, the nature of the relationship with each party. This clarification includes the role of the psychologist (such as therapist, organizational consultant, diagnostician, or expert witness), the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality.
 - 1.15.2 If there is a foreseeable risk of the psychologist's being called upon to perform conflicting roles because of the involvement of a third party, the psychologist clarifies the nature and direction of his or her responsibilities, keeps all parties appropriately informed as matters develop, and resolves the situation in accordance with this Ethical Code.

1.16 Barter with Clients

Psychologists ordinarily refrain from accepting goods, services, or other non-monetary remuneration from clients in return for psychological services because such arrangements create inherent potential for conflicts, exploitation, and distortion of the professional relationship. A psychologist may participate in such an exchange only if it is not clinically contraindicated, and if by so doing, the relationship is not exploitative.

1.17 Basis for Scientific and Professional Judgments

Psychologists rely at all times on scientifically and professionally derived knowledge when making scientific or professional judgements or when engaging in scholarly or professional endeavours.

1.18 Respecting Others

In their work-related activities, psychologists respect the rights of others to hold values, attitudes, and opinions that differ from their own.

1.19 Nondiscrimination

In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, race, ethnicity, national origin, sexual orientation, disability, socioeconomic status, social class, or any basis proscribed by law.

1.20 Misuse of Psychologists' Influence

Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence.

1.21 Exploitative Relationships

- 1.21.1. Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as students, supervisees, employees, research participants, and clients.
- 1.21.2 Psychologists do not engage in sexual relationships with students or supervisees in training over whom the psychologist has evaluative or direct authority, because such relationships are so likely to impair judgment or be exploitative.

1.22 Consultations and Referrals

- 1.22.1. Psychologists arrange for appropriate consultations and referrals based principally on the best interests of their clients, with appropriate consent, and subject to other relevant considerations, including law and contractual obligations.
- 1.22.2 When indicated and professionally appropriate, psychologists co-operate with other professionals in order to serve their clients effectively and appropriately.

2.WELLBEING OF CLIENTS AND OTHER PROFESSIONAL RELATIONSHIPS

2.1 Providing Explanation of Procedures

Psychologists give a truthful, understandable, and appropriate account of the client's condition to the client or to those responsible for their care. The psychologist shall keep the client fully informed as to the purpose and nature of any evaluation, treatment, or other procedures, and of the client's right to freedom of choice regarding services provided. In this regard psychologists are mindful of the rights of the consumer of psychological services as stipulated by the Board.

2.2 Structuring the Psychologist-Client Relationship

2.2.1 Psychologists discuss with clients as early as it is feasible in the therapeutic relationship appropriate issues, such as the nature and anticipated course of therapy, fees, and confidentiality.

2.2.2 When the psychologist's work with clients will be supervised, the explanation of procedures includes information about the supervision, and the name of the supervisor when the supervisor has legal responsibility for the case.

2.2.3 When the professional is a pre- or post-doctoral intern psychologist the client is informed of that fact.

2.2.4 Psychologists make reasonable efforts to answer clients' questions and to avoid apparent misunderstandings about their interventions. Whenever possible, psychologists provide oral and/or written information, using language that is reasonably understandable to the client.

2.3 Informed Consent to Professional Procedures

2.3.1 Psychologists obtain appropriate informed consent to a treatment or related procedures, by using language that is reasonably understandable to participants. The content of informed consent will vary depending on many circumstances; however, informed consent generally implies that the person has the capacity to consent, has been informed of significant information concerning the procedure, has freely and without undue influence expressed consent, and consent has been documented appropriately.

2.3.2 When persons are legally incapable of giving informed consent, psychologists obtain informed permission from a legally authorized person, if law permits such substitute consent. Knowledge of the Mental Health Care Act, the Children's Act, and the Charter of Patients' Rights are essential in determining the appropriateness of the signature. 2.3.3 In addition, psychologists inform those persons who are legally incapable of giving informed consent about the proposed interventions in a manner commensurate with the persons' psychological capabilities, seek his/her assent to those interventions, and consider such persons' preferences and best interests.

2.4 Couple and Family Relationships

2.4.1 When a psychologist agrees to provide services to several persons who have a relationship (such as husband and wife or parents and children), the psychologist clarifies at the outset which of the individuals are patients or clients and the relationship the psychologist will have with each person. This clarification includes an explanation of the role of the psychologist and the probable uses of the services provided or the information obtained.

2.4.2 As soon as it becomes apparent that the psychologist may be called on to perform potentially conflicting roles (such as marital counselor to husband and wife, and then witness for one party in a divorce proceeding), the psychologist immediately attempts to clarify and adjust, or withdraw from, roles in an appropriate manner.

2.4.3 When a psychologist is approached to engage in professional services to a minor it is imperative that the practitioner obtain the informed consent of the legal guardian of the minor child. The psychologist must also ascertain the legal status of each parent in relation to the minor and preferably gain both parents' consent to the professional activities conducted with the minor.

2.5 Providing Mental Health Services to those Served by Others

When a psychologist decides whether to offer services to those who are already receiving mental health services elsewhere, the psychologist carefully considers the treatment issues and the potential client's welfare. The psychologist discusses these issues with the client, or another legally authorized person on behalf of the client, in order to minimize the risk of confusion and conflict, consults with the other service providers when appropriate, and proceeds with caution and sensitivity to the therapeutic issues.

2.6 Stereotyping

The psychologist shall not impose on a client, student, supervisee, employee, research participant, or others over whom the psychologist has or has had authority any stereotypes of behavior, values or roles related to age, gender, religion, race, disability, nationality, or sexual preference with the objective provision of psychological services to the client.

2.7 Sexual or Other Dual Relations with a Client

The psychologist shall not enter into a sexual or other dual relationship as defined above with a client or former client.

2.8 Therapy with Former Sexual Partners.

Psychologists do not enter into a therapy relationship with persons with whom they have engaged in sexual intimacies.

2.9 Sexual Intimacies with Former Therapy Clients

2.9.1 Psychologists do not engage in sexual intimacies with a former therapy client. Because sexual intimacies with a former patient or client are so frequently harmful to the client, and because such intimacies undermine public confidence in the psychology profession and thereby deter the public's use of needed services, psychologists do not engage in sexual intimacies with former therapy clients ever except in the most unusual circumstances.

2.9.2 The psychologist who engages in such activity following the cessation or termination of the professional relationship bears the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including:

(a) the amount of time that has passed since the professional relationship terminated,

- (b) the nature and duration of the professional relationship,
- (c) circumstances of termination,
- (d) the client's personal history,
- (e) the client's current mental status,
- (f) the likelihood of adverse impact on the client and others, and

(g) any statements or actions made by the therapist during the course of the professional relationship suggesting or inviting the possibility of a post-termination sexual or romantic relationship with the client.

2.10 Solicitation of Business by Clients.

The psychologist who provides services to an individual client shall not induce that client to solicit business on behalf of the psychologist.

2.11 Consultations and Referrals

2.11.1 Psychologists arrange for appropriate consultations and referrals based principally on the best interests of their clients, with appropriate consent, and subject to other relevant considerations, including applicable legal and contractual obligations.

2.11.2 When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients effectively and appropriately.

2.11.3 Psychologists' referral practices are consistent with law.

2.12 Terminating the Professional Relationship

2.12.1 Psychologists do not abandon patients or clients.

2.12.2 The psychologist who provides services to a client shall make an appropriate referral of the client to another professional when requested to do so by the client.

2.12.3 Psychologists terminate a professional relationship when it becomes reasonably clear that the client no longer needs the service, is not benefiting from, or is being harmed by, continued service.

2.12.4 Prior to termination of services for any reason, except when precluded by the patient's or client's conduct, the psychologist discusses the client's views and needs, provides appropriate pre-termination counselling, suggests alternative service providers as appropriate, and takes other reasonable steps to facilitate transfer of responsibility to another provider, if the client needs one immediately.

2.13 Avoiding harm

Psychologists take reasonable steps to avoid harming their clients, research participants, students, supervisees and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

2.14 Delegation and Supervision of Psychological Services

2.14.1 Psychologists do not delegate professional responsibilities to a person who is not qualified to provide such services. Psychologists delegate to supervisees, with the appropriate level of supervision, only those responsibilities that such persons can reasonably be expected to perform competently and ethically based on the supervisee's education, training, and experience.

2.14.2 Psychologists do not delegate responsibilities or accept supervisory responsibilities for work that they are not qualified and personally competent to perform.

Psychologists must retain full, complete, and ultimate authority and responsibility for the professional acts of supervisees.

2.14.3 The supervisee must have appropriate education and training, including training in ethical issues, to perform the delegated functions. The psychologist is responsible for determining the competency of the supervisee and will not assign or allow the supervisee to undertake tasks beyond the scope of the supervisee's training and/or competency. The psychologist is also responsible for providing the supervisee with specific instructions regarding the limits of his/her role as supervisee.

2.14.4 The supervisee must fully inform the patient or client receiving services of his or her role as supervisee, and the right of the patient or client to confer with the supervising psychologist with regard to any aspect of the services, care, treatment, evaluation, or tests being performed.

2.14.5 When clinical psychological services are rendered, the psychologist takes part in the intake process, must personally make the diagnosis when a diagnosis is required, and must personally approve a treatment plan for each patient or client. The psychologist must meet personally with the supervisee on a continuous and regular basis concerning each patient or client and must review the treatment record, including progress notes, on a regular basis as appropriate to the task(s). The psychologist must provide a minimum of one hour of supervision for every 20 hours of face-to-face clinical contact.

2.14.6 The selection and interpretation of psychological tests shall only be made by the psychologist. The psychologist must personally interview the patient when a diagnosis is made or is requested. In any written report, including psychological evaluations, the psychologist must approve and sign the report. When the supervisee does not participate in the actual writing of a report, but does administer and/or score psychological tests, the supervisee is not required to sign the report, but his or her name must be listed as the person who participated in the collection of the data in the report. When the supervisee personally participates in the writing of any report, then both the psychologist and the supervisee must sign the report.

2.14.7 Psychologists comply with the Rules regarding Internships and other supervised work experience.

3.CONFIDENTIALITY

3.1. In General

The psychologist safeguards the confidential information obtained in the course of practice, teaching, research, or other professional duties. Subject only to the exceptions set forth below, the psychologist shall disclose confidential information to others only with the informed written consent of the client or patient.

3.2 Discussing the Limits of Confidentiality

3.2.1 Psychologists discuss with persons and organizations with whom they establish a scientific or professional relationship (including, to the extent feasible, minors and their legal representative) the relevant limitations on confidentiality, including any limitations on confidentiality that may apply to group, marital, and family therapy or to organizational consulting, and the foreseeable uses of the information obtained.

3.2.2 Unless it is not feasible or is contraindicated, psychologists discuss confidentiality at the outset of the relationship and thereafter as new circumstances warrant its discussion.

3.3.3 Psychologists obtain permission from clients for electronic recording of interviews prior to such recording.

3.3 Disclosures

3.3.1 Psychologists disclose confidential information only with the permission of the individual or as mandated by law, or when permitted by law for a valid purpose, such as to provide needed professional services to the patient or organizational client, to obtain appropriate professional consultations, to protect the patient or client or others from harm, or to obtain payment for services, in which instance disclosure is limited to the minimum necessary to achieve that purpose.

3.3.2 Psychologists may disclose confidential information with the appropriate consent of the client (or another legally authorized person on behalf of the patient or client), unless prohibited by law.

3.4 Services Involving More than One Interested Party

In a situation in which more than one party has an appropriate interest in the professional services rendered by the psychologist to the client(s), the psychologist shall, to the extent possible, clarify to all parties prior to providing the services, the dimensions of confidentiality and professional responsibilities that shall pertain in the provision of services. Such clarification is specifically indicated, among other circumstances, when the client is an organization.

3.5 Multiple Clients

When services are provided to more than one client during a joint session (for example to a family or couple, or parent and child, or group) the psychologist, at the beginning of the professional relationship, clarifies to all parties the manner in which confidentiality will be handled. All parties are given an opportunity to discuss and to accept whatever limitations on confidentiality adhere to the situation.

3.6 Legally Dependent Clients

At the beginning of a professional relationship, psychologists inform clients who are below the age of majority or who have a legal guardian, of the limits the law imposes on the right of confidentiality with respect to their communications with the psychologist.

3.7 Limited Access to Client Records

Psychologist shall limit access to client records to preserve confidentiality and shall assure that all persons working under the psychologist's authority comply with the requirements for confidentiality of client material.

3.8 Release of Confidential Information

Psychologist may release confidential information upon court order or to conform with legal imperatives or upon the written authorization of the client, parent of a minor patient or client, or legal guardian.

3.9 Reporting of Abuse of Children and Vulnerable Adults

Psychologist comply with the conditions concerning the reporting of abuse of children and vulnerable adults in the Child Care Act and the Mental Health Care Act.

3.10 Discussion of Client Information Among Professionals

When psychologists renders professional services as part of a team or when they interact with other appropriate professionals concerning the welfare of the patient or client, psychologists may share confidential information about the client, provided the psychologist takes reasonable steps to assure that all persons who receive the information are informed about the confidential nature of the information and abide by the rules of confidentiality.

3.11 Disguising Confidential Information

When case reports or other confidential information are used as the basis of teaching, research, or other published reports, the psychologist exercises reasonable care to insure that the reported material is appropriately disguised to prevent patient or client identification.

3.12 Post-Termination Confidentiality

Psychologist shall continue to treat as confidential, information regarding a client after the professional relationship between psychologist and client has ceased.

3.13 Confidential Information in Databases

(a) If confidential information concerning recipients of psychological services is to be entered into databases or systems of records available to persons whose access has not been consented to by the recipient, then psychologists use coding or other techniques to avoid the inclusion of personal identifiers.

(b) If a research protocol approved by an institutional review board or similar body requires the inclusion of personal identifiers, such identifiers are deleted before the information is made accessible to persons other than those of whom the subject was advised.

(c) If such deletion is not feasible, then before psychologists transfer such data to others or review such data collected by others, they take reasonable steps to determine that appropriate consent of personally identifiable individuals have been obtained.

3.14 Use of Confidential Information for Didactic or Other Purposes

- 3.14.1. Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients (individual or organizational), students, research participants, or other recipients of their services that they obtained during the course of their work, unless the person or organization has consented in writing or unless there is other ethical or legal authorization for doing so.
- 3.14.2. Ordinarily, in such scientific and professional presentations, psychologists disguise confidential information concerning such persons or organizations so that they are not individually identifiable to others and so that discussions do not cause harm to subjects who might identify themselves.

3.15 Preserving Records and Data

A psychologist makes plans in advance so that confidentiality of records and data is protected in the event of the psychologist's death, incapacity, or withdrawal from the position or practice.

3.16 Informed Consent to Interventions

3.16.1 Psychologists obtain appropriate informed consent to interventions or related procedures, using language that is reasonably understandable to participants. The contents of informed consent will vary depending on many circumstances; however, informed consent generally implies that the person (1) has the capacity to consent, (2) has been informed of significant information concerning the procedure, (3) has freely and without undue influence expressed consent, and (4) consent has been appropriately documented.

3.16.2 When persons are legally incapable of giving informed consent, psychologists obtain informed permission from a legally authorized person, if law permits such substitute consent.

3.16.3 In addition, psychologists (1) inform those persons who are legally incapable of giving informed consent about the proposed interventions in a manner commensurate with the person's psychological capacities, (2) seek their assent to those interventions, (3) consider such persons' preferences and best interests.

4. FEES AND FINANCIAL ARRANGEMENTS

4.1 Fees Contracting

As early as is feasible in a professional or scientific relationship, the psychologist and the client, or other appropriate recipient of psychological services shall reach an agreement specifying the compensation and the billing arrangements.
4.2 Fees Overcharging

4.2.1 Psychologists do not exploit recipients of services or payers with respect to fees. They charge fees commensurate with the acceptable professional rate for their level of expertise and competence.

4.2.2 Psychologists' fee practices are consistent with recommended tariff schedules.

4.3 Accuracy in Billing

Psychologists do not misrepresent their fees and bill for services not fully delivered.

4.4 Limitations

If limitations on the provision of services can be anticipated because of financial limitations, this is discussed with the client or other appropriate recipient of services as early as feasible.

4.5 Collection of Outstanding Fees

If the client or other recipient of services does not pay for services as agreed, and if the psychologist wishes to use collection agencies or legal measures to collect the fees, the psychologist first informs the person that such measures will be taken and must provide that person an opportunity to make prompt payment.

4.6 Withholding Information/Reports

Psychologists may not withhold records under their control that are requested and imminently needed for a client's treatment or case or project management solely because they has not received payment, except as otherwise provided by law.

4.7 Account Itemization

A psychologist submits billing claims to third party payers that clearly state who provided the services. When a psychologists supervise other professionals, including psychometrists and/or registered counsellors, who primarily provided the services, the itemized bill and/or reimbursement form must contain the psychologists' signature as supervisor and the other professional's signature as service provider. There must be no ambiguity as to who was the direct service provider.

5. ASSESSMENT PROCEDURES

5.1 Assessment within a Professional Context

5.1.1 Psychologists perform evaluations and diagnostic services only within the context of a defined professional relationship.

5.1.2 Psychologists assessments, recommendations, reports, and psychological diagnostic or evaluative statements are based on information and techniques (including personal interviews of the individual where appropriate) sufficient to provide appropriate substantiation for their findings.

5.2 Appropriate Use of Assessment Techniques

5.2.1 Psychologists who develop, administer, score, interpret, or use psychological assessment techniques, interviews, tests, or instruments do so in a manner and for purposes that are appropriate in light of the research or evidence of the usefulness and proper application of the techniques.

5.2.2 Psychologists refrain from the misuse of assessment techniques, interventions, results, and interpretations and take reasonable steps to prevent others from misusing the information these techniques provide. This includes refraining from releasing raw test results or raw data to persons, other than to clients as appropriate, who are not qualified to use such information.

5.3 Test Construction

Psychologists who develop and conduct research with tests and other assessment techniques use scientific procedures and current professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.

5.4 Population-specific Use of Assessment

5.4.1 Psychologists who perform interventions or administer, score, or use assessment techniques are familiar with the reliability, validation, and related standardization or outcome studies of, and proper applications and uses of, the techniques they use.

5.4.2 Psychologists recognize limits to the certainty with which diagnoses, judgments, or predictions can be made about individuals.

5.4.3 Psychologists attempt to identify situations in which particular assessment techniques or norms may not be applicable or may require adjustment in administration or interpretation because of factors such as the individual's gender, age, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socioeconomic status.

5.5 Confidential Information

Psychologists shall treat an assessment result or interpretation regarding an individual as confidential information.

5.6 Substantiation of Findings

Psychologists' assessments, recommendations, reports, and psychological diagnostic or evaluative statements are based on information and techniques (including personal interviews of the individual when appropriate) that substantiate their findings.

5.7 Communication of Results

Psychologists shall accompany communication of results of assessment procedures to the client, parents, legal guardians, or other agents of the client by adequate interpretive aids or explanations, if necessary.

5.8 Reservations Concerning Results

Psychologists shall include in their report of the results of an assessment procedure any deficiencies of the assessment norms for the individual assessed and any relevant reservations or qualifications, which affect the validity, reliability, or other interpretation of results.

5.9 Protection of Integrity of Assessment Procedures

Psychologists shall not reproduce or describe in popular publications, lectures, or public presentations psychological tests or other assessment devices in ways that might compromise their validity.

5.10 Information for Professional Users

Psychologist who offers an assessment procedure or automated interpretation service to other professionals shall conduct the service in line with the "Best practices for Psychometry Guidelines" as issued by the Professional Board for Psychology. In keeping with these guidelines the psychologist shall explicitly state the purpose and application for which the procedure is recommended and identify special qualifications required to administer and interpret it properly. The psychologist shall ensure that the advertisements for the assessment procedure or interpretive service are factual and descriptive.

5.11 Interpreting Assessment Results

When psychologists interpret assessment results, including automated interpretations, psychologists take into account the various test factors and characteristics of the person being assessed that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant reservations they have about the accuracy or limitations of their interpretations.

5.12 Unqualified Persons

Psychologists do not promote the use of psychological assessment techniques by unqualified persons.

5.13 Competence

Psychologists retain appropriate responsibility for the application, interpretation, and use of assessment instruments, whether the psychologists score and interpret such tests themselves, use a supervisee, or use automated or other services.

5.14 Explaining Assessment Results

Unless the nature of the relationship is clearly explained to the person being assessed in advance and precludes provision of an explanation of results (such as in some organizational consulting, pre-employment or security screening, and forensic evaluations), psychologists ensure that the explanation of the results that is provided uses language that is reasonably understandable to the person assessed or to another legally authorized person on behalf of the client. Regardless of whether the scoring and interpretation are done by the psychologist, by supervisees, or by automated or other outside services, psychologists take reasonable steps to ensure that appropriate explanations of results are given.

5.15 Test Scoring and Interpretation Services

5.15.1 Psychologists who offer assessment or scoring procedures to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures any special qualifications applicable to their use.

5.15.2 Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the programme and procedures as well as on other appropriate considerations.

5.15.3 Psychologists retain appropriate responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

5.16 Obsolete Tests and Outdated Test Results

5.16.1 Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.

5.16.2 Similarly, psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

5.17 Maintaining Test Security

Psychologists make reasonable efforts to maintain the integrity and security, of tests and other assessment techniques consistent with law, contractual obligations, and in a manner that permits compliance with the requirements of this Ethics Code.

6.PSYCHO-LEGAL ACTIVITIES

6.1 Competence

Psychologists who perform psycho-legal (including forensic) functions, such as assessments, interviews, consultations, reports, or expert testimony, must comply with all the other provisions of this Ethics Code to the extent that they apply to such activities. In addition, psychologists base their psycho-legal work on appropriate knowledge of and competence in the areas underlying such work, including specialized knowledge concerning special populations.

6.2 Basis for Psycho-Legal Opinion

Psychologists ensure that psycho-legal assessment, recommendations, and reports are based on information and techniques (including personal interviews of the individual, when appropriate) sufficient to provide appropriate substantiation for his/her findings.

6.3 Limits to Opinion

Psychologists provide written or oral psycho-legal reports or testimony of the psychological characteristics of an individual only after they have conducted an examination of the individual adequate to support their statements or conclusions. Provided, however, that when, despite reasonable efforts, such an examination is not feasible, psychologists clarify the impact of their limited information on the reliability and validity of their reports and testimony, and they appropriately limit the nature and extent of their conclusions or recommendations.

6.4 Truthfulness and Candour

In psycho-legal testimony and reports, psychologists testify truthfully, honestly, and candidly and, consistent with applicable legal procedures, describe fairly the basis for their testimony and conclusions,

6.5 Conflicting Roles

In most circumstances, psychologists avoid performing multiple and potentially conflicting roles in forensic matters. When psychologists may be called on to service in more than one role in a legal proceeding (for example, as consultant or expert for one party or for the court and as a fact witness) they clarify role expectations and the extent of confidentiality in advance to the extent feasible, and thereafter, as changes occur, in order to avoid compromising their professional judgment and objectivity, and in order to avoid misleading others regarding their role.

6.6 Maintenance of Expert Witness Role

In performing psycho-legal roles, psychologists are reasonably familiar with the rules governing their roles. Psychologists are aware of the occasionally competing demands placed upon them by these conduct rules and the requirements of the court system, and attempt to resolve these conflicts by making known their commitment to this Ethical Code and taking steps to resolve the conflict in a responsible manner.

6.7 Prior Relationships

A prior professional relationship with a party does not preclude psychologists from testifying as fact witnesses or testifying to their services to the extent permitted by applicable law. Psychologists appropriately take into account the ways in which the prior relationship might affect their professional objectivity or opinions and disclose the potential conflict to the relevant parties.

6.8 Fact Witness Role

Psychologists may be required by the courts to appear as a fact witness. Under such circumstances psychologists are legally obliged to present evidence. Psychologists may declare their reluctance to doing so by appearing as witness under protest. Despite protest psychologists are nevertheless compelled to serve as truthful and fully disclosing witnesses.

7. VIOLATIONS OF LAW

7.1 Violation of Applicable Statutes

Psychologists do not violate any applicable statute or administrative rule regulating the practice of psychology as specified in Act 56 of 1974 (as amended) (referred to as the Act). Psychologists have an obligation to be familiar with the Act, this Ethical Code, and their application to psychologists' work. Lack of awareness or misunderstanding of a standard is not itself a defense to a charge of unprofessional conduct.

7.2 Use of Fraud, Misrepresentation or Deception.

Psychologists do not use fraud, misrepresentation, or deception in obtaining a psychology registration, in passing a psychology examination, in assisting another to obtain a psychology registration or to pass a psychology examination, in billing clients or third party payers, in providing psychological services, in reporting the results of psychological evaluations or services, or in conducting any other activity related to the practice of psychology.

7.3 Aiding Unauthorized Practice

Psychologists do not aid or abet another person in misrepresenting their professional credentials or illegally engaging in the practice of psychology.

7.4 Delegating Professional Responsibility

Psychologists do not delegate professional responsibilities to persons who are not qualified and/or not appropriately licensed to provide such services.

7.5 Reporting of Violations to the Board

Psychologists who have substantial reason to believe that there has been a serious

violation of the law or rules of the Board shall so inform the Board in writing. However, psychologists who receive such information in a professional relationship with a client, shall report it only with the written permission of the client.

7.6 Co-operation with Board Inquiries

Psychologists do cooperate in national investigations, proceedings, and resulting requirements of the Board .In doing so, they make reasonable efforts to resolve any issues as to confidentiality. Failure to cooperate is itself a violation.

7.7 Frivolous complaints

Psychologists do not file or encourage the filing of complaints that are frivolous or maliciously intended.

8. ADVERTISING AND OTHER PUBLIC STATEMENTS AND ACTIVITIES

8.1 Registration

The psychologist possesses a current registration to practice psychology. Proof of registration must be available to client scrutiny.

8.2 Misrepresentation of Qualifications

Psychologists do not misrepresent directly or by implication their professional qualifications in regard to education, experience or areas of competence.

8.3 Misrepresentation of Affiliations

Psychologists do not misrepresent directly or by implication their affiliations, or the purpose or characteristics of institutions and organizations with which the psychologist is associated.

8.4 False or Misleading Information

Psychologists do not include false or misleading information in public statements or public documentation concerning the psychological services they offer.

8.5 Misrepresentation of Services or Products

Psychologists do not associate with or permit names name to be used in connection with any services or products in such a way as to misrepresent the services or products, the degree of their responsibility for the services or products or the nature of their association with the services or products.

8.6 Correction of Misrepresentation by Others

Upon discovery, the psychologist corrects others who misrepresent the psychologist's professional qualifications or affiliations.

8.7 Advertising Misrepresentation

8.7.1 Psychologists adhere to recommended formatting of stationery that advertises and represents their licensure, qualifications, and areas of service competence.

8.7.2 Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.

8.7.3 Psychologists make reasonable efforts to prevent others whom they do not control (such as employers, publishers, sponsors, organizational clients, and representatives of the print or broadcast media) from making deceptive statements concerning psychologists' practice or professional or scientific activities.

8.7.4 If psychologists learn of deceptive statements about their work made by others, psychologists make reasonable efforts to correct such statements.

8.7.5 Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item.

8.7.6 A paid advertisement relating to the psychologist's activities must be identified as such, unless it is already apparent from the context of the advertisement.

8.7.7 Psychologists do not make public statements that are false, deceptive, misleading, or fraudulent, based on their statements and/or suggestions, or the omission of information, concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated. For example (and not in limitation of this standard), psychologists do not make false or deceptive statements concerning (a) their training, experience or competence; (b) their academic degrees; (c) their credentials; (d) their institutional or association affiliations; (e) their services; (f) the scientific or clinical basis for, or results or degree of success of their services; (g) their fees; or (h) their publications or research findings.

8.7.8 Psychologists claim as credentials for their psychological work, only degrees earned from accredited educational institutions.

8.7.9 When psychologists provide advice or comment by means of public lectures, demonstrations, radio or television programs, prerecorded tapes, printed articles, mailed material, or other media, they take reasonable precautions to ensure that (a) the statements are based on appropriate psychological literature and practice, (b) the statements are otherwise consistent with this Code, and (c) the recipients of the information are not encouraged to infer that a relationship has been established with them personally.

8.7.10 Psychologists do not solicit testimonials from current psychotherapy clients or patients or other persons who because of their particular circumstances are vulnerable to undue influence.

9. TEACHING, TRAINING SUPERVISION, RESEARCH, AND PUBLISHING

9.1 Design of Education and Training Programs

Psychologists who are responsible for education and training programs seek to ensure that the programs are competently designed, provide the proper experiences, and meet the requirements for licensure, certification, or other goals for which claims are made by the program.

9.2 Descriptions of Education and Training Programs

9.2.1 Psychologists responsible for education and training programs seek to ensure that there is a current and accurate description of the program content, training goals and objectives, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

9.2.2 Psychologists seek to ensure that statements concerning their course outlines are accurate and not misleading, particularly regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences.

9.2.3 To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programmes ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

9.3 Accuracy and Objectivity in Teaching

9.3.1 When engaged in teaching or training, psychologists present psychological information accurately and with a reasonable degree of objectivity.

9.3.2 When engaged in teaching or training, psychologists recognize the power they hold over students or supervisees and therefore make reasonable efforts to avoid engaging in conduct that is personally demeaning to students or supervisees.

9.4 Limitation on Teaching

Psychologists do not teach the use of techniques or procedures that require specialized training, licensure, or expertise, including but not limited to hypnosis, biofeedback, and projective techniques, to individuals who lack the prerequisite training, legal scope of practice, or expertise.

9.5 Assessing Student and Supervisee Performance

9.5.1 In academic and supervisory relationships, psychologists establish an appropriate process for providing feedback to students and supervisees.

9.5.2 Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

9.6 Planning Research

9.6.1 Psychologists design. conduct, and report research in accordance with recognized standards of scientific competence and ethical research.

9.6.2 Psychologists plan their research so as to minimize the possibility that results will be misleading.

9.6.3 In planning research, psychologists consider its ethical acceptability under these Guidelines. If an ethical issue is unclear, psychologists seek to resolve the issue through consultation with institutional review boards, animal care and use committees, peer consultations, or other proper mechanisms.

9.6.4 Psychologists take reasonable steps to implement appropriate protections for the rights and welfare of human participants, other persons affected by the research, and the welfare of animal subjects.

9.7 Responsibility

9.7.1 Psychologists conduct research competently and with due concern for the dignity and welfare of the participants.

9.7.2 Psychologists are responsible for the ethical conduct of research conducted by them or by others under their supervision or control. Researchers and assistants are permitted to perform only those tasks for which they are appropriately trained and prepared.

9.7.3 As part of the process of development and implementation of research projects, psychologists consult those with expertise concerning any special population under investigation or most likely to be affected.

9.8 Compliance With Law and Standards

Psychologists plan and conduct research in a manner consistent with national and provincial law and regulations (such as the SA Constitution and the Bill of Rights), as well as professional standards governing the conduct of research, and particularly those standards governing research with human participants and animal subjects.

9.9 Institutional Approval

Psychologists obtain from host institutions or organizations appropriate approval prior to conducting research, and they provide accurate information about their research proposals. They conduct the research in accordance with the approved research protocol.

9.10 Research Responsibilities

Prior to conducting research (except research involving only anonymous surveys, naturalistic observations, or similar research), psychologists enter into an agreement with participants that clarifies the nature of the research and the responsibilities of each party.

9.11 Informed Consent to Research

9.11.1 Psychologists use language that is reasonably understandable to research participants in obtaining their appropriate informed consent. Such informed consent is appropriately documented.

9.11.2 Using language that is reasonably understandable to participants, psychologists inform participants of the nature of the research; they inform participants that they are free to participate or to decline to participate or to withdraw from the research; they explain the foreseeable consequences of declining or withdrawing; they inform participants of significant factors that may be expected to influence their willingness to participate (such as risks, discomfort. adverse effects, or limitations on confidentiality); and they explain other aspects about which the prospective participants inquire.

9.11.3 When psychologists conduct research with individuals such as students or subordinates, psychologists take special care to protect the prospective participants from adverse consequences of declining or withdrawing from participation.

9.11.4 When research participation is a course requirement or opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

9.11.5 For persons who are legally incapable of giving informed consent, psychologists nevertheless

- provide an appropriate explanation,
- obtain the participant's assent, and
- obtain appropriate permission from a legally authorized person, if law permits such substitute consent.

9.12 Dispensing With Informed Consent

Before determining that planned research (such as research involving only anonymous questionnaires, naturalistic observations, or certain kinds of archival research) does not require the informed consent of research participants, psychologists consider applicable regulations and institutional review board requirements, and they consult with colleagues as appropriate.

9.13 Informed Consent in Research Filming or Recording

Psychologists obtain informed consent from research participants prior to filming or recording them in any form, unless the research involves simply naturalistic observations in public places and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm.

9.14 Offering Inducements for Research Participants

9.14.1 In offering professional services as an inducement to obtain research participants, psychologists make clear the nature of the services, as well as the risks, obligations, and limitations.

9.14.2 Psychologists do not offer excessive or inappropriate financial or other inducements to obtain research participants, particularly when it might tend to coerce participation.

9.15 Deception in Research

9.15.1 Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's prospective scientific, educational, or applied value and that equally effective alternative procedures that do not use deception are not feasible.

9.15.2 Psychologists never deceive research participants about significant aspects that would affect their willingness to participate, such as physical risks, discomfort, or unpleasant emotional experiences.

9.15.3 Any other deception that is an integral feature of the design and conduct of an experiment must be explained to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the research.

9.16 Sharing and Utilizing Data

Psychologists inform research participants of their anticipated sharing or further use of personally identifiable research data and of the possibility of unanticipated future uses.

9.17 Minimizing Invasiveness

In conducting research, psychologists interfere with the participants or milieu from which data are collected only in a manner that is warranted by an appropriate research design and that is consistent with psychologists' roles as scientific investigators.

9.18 Providing Participants with Information about the Study

9.18.1 Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and psychologists attempt to correct any misconceptions that participants may have.

9.18.2 If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.

9.19 Honoring Commitments

Psychologists take reasonable measures to honor all commitments they have made to research participants.

9.20 Care and Use of Animals in Research

9.20.1 Psychologists who conduct research involving animals treat them humanely.

9.20.2 Psychologists acquire, care for, use, and dispose of animals in compliance with current laws and regulations, and with professional standards.

9.20.3 Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.

9.20.4 Psychologists ensure that all individuals using animals under their supervision have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role.

9.20.5 Responsibilities and activities of individuals assisting in a research project are consistent with their respective competencies.

9.20.6 Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.

9.20.7 A procedure subjecting animals to pain, stress, or privation is used only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.

9.20.8 Surgical procedures are performed under appropriate anesthesia; techniques to avoid infection and minimize pain are followed during and after surgery.

9.20.9 When it is appropriate that the animal's life be terminated, it is done rapidly, with an effort to minimize pain, and in accordance with accepted procedures.

9.21 Reporting of Results

9.21.1 Psychologists do not fabricate data or falsify results in their publications.

9.22.2 If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

9.22 Plagiarism

Psychologists do not present substantial portions or elements of another's work or data as their own, even if the other work or data source is cited occasionally.

9.23 Publication Credit

9.23.1 Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have contributed.

9.23.2 Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as Department Chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are appropriately acknowledged such as in footnotes or in an introductory statement.

9.23.3 A student is usually listed as principal author on any multiple-authored article that is substantially based on the student's dissertation or thesis.

9.24 Duplicate Publication of Data

Psychologists do not publish. as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

9.25 Sharing Data

After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release.

9.26 Professional Reviewers

Psychologists who review material submitted for publication, grant, or other research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.

10. RESOLVING ETHICAL ISSUES

10.1 Familiarity With Ethical Code

Psychologists have an obligation to be familiar with this Ethical Code, other applicable ethics codes (such as issued by PsySSA), and their application to psychologists' work. Lack of awareness or misunderstanding of an ethical standard is not itself a defense to a charge of unethical conduct.

10.2 Confronting Ethical Issues

When a psychologist is uncertain whether a particular situation or course of action would violate this Ethical Code, the psychologist ordinarily consults with other psychologists knowledgeable about ethical issues, with national psychology (PsySSA) ethics committees, or with other appropriate authorities in order to choose a proper response.

10.3 Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which psychologists are affiliated conflict with this Ethical Code, psychologists clarify the nature of the conflict, make known their commitment to these Guidelines, and to the extent feasible, seek to resolve the conflict in a way that permits the fullest adherence to these Guidelines.

10.4 Informal Resolution of Ethical Violations

When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved.

10.5 Reporting Ethical Violations

If an apparent ethical violation is not appropriate for informal resolution or is not resolved properly in that fashion, psychologists take further action appropriate to the situation, unless such action conflicts with confidentiality rights in ways that cannot be resolved. Such action might include referral to the national (PsySSA) ethics committees for arbitration, conciliation, or advice on further courses of action.

10.6 Reporting Colleague Impairment

Psychologists, if they have reasonable basis for suspecting a colleague is professionally impaired due to psychological disturbance, physical illness, substance abuse, are within their rights to inform the Board of their concerns, They do not have to provide factual proof of their concerns. The Board will consider the matter and possibly instigate an investigation by the Impaired Practitioner Programme.

10.7 Co-operating With Ethics Committees

Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the Professional Board of Psychology or national psychological association (PsySSA). In doing so, they make reasonable efforts to resolve any issues as to confidentiality. Failure to cooperate is itself an ethics violation.

10.8 Improper Complaints

Psychologists do not file or encourage the filing of ethics complaints that are frivolous and are intended to harm the respondent rather than to protect the public.

10.9 Disciplinary Sanctions

10.9.1 The Society shall have the authority to discipline a psychologist or refuse to grant membership to an applicant upon a finding by a disciplinary committee that the psychologist has committed a violation.

10.9.2 Behaviours (acts, knowledge, and practices) that are unprofessional, immoral, unethical, deceptive or which fail to meet the minimal reasonable standards of the acceptable and prevailing practice of psychology shall include but not be limited to any act or practice which violates these Ethical Guidelines. This applies to the psychologist and to anyone under his or her supervision.

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