ORDER OF PORTUGUESE PSYCHOLOGISTS
CODE OF ETHICS
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ORDER OF PORTUGUESE PSYCHOLOGISTS
CODE OF ETHICS
This Code of Ethics aims to incorporate the ethical principles of the professional practice of Psychology, in any context or area in which it is applied, to guide psychologists towards best practice, ensuring that the benchmark of professional practice is to the highest ethical standards and not the minimum acceptable.

The Code of Ethics is organised into three sections – the preamble, the general principles and the specific principles. In the preamble, the objectives and application of the Code of Ethics are described. Its structure and relationship with the legislation in force and other ethical guidelines are also presented. Finally, the aim is to define some of the basic concepts used throughout the Code.

In the section on general principles, the structural and aspirational principles are laid down. In the section on specific principles, the rules of ethical conduct for psychologists are set forth. These principles are not exhaustive, although they refer to the various areas and contexts in which psychologists practice their professional duties and the various ethical dilemmas they may face. The ultimate goals of the Code of Ethics, include not only the promotion of quality of life and the protection of individuals, couples, families, groups, organisations and communities with whom psychologists conduct activities within the scope of their professional, scientific and/or educational roles as psychologists. A psychologist is any person who has undertaken specific training in Psychology, according to the rules in force (Article 51 of Law no. 57/2008 of the 4th September) and who performs a professional role in any area or context of Psychology. In order to practice Psychology, it is mandatory to be registered as a member of the Order of Psychologists (Ordem dos Psicólogos) or as a trainee member when practising professionally under supervision. Members of the Order of Psychologists (Ordem dos Psicólogos) undertake to abide by the principles laid down in this Code of Ethics.

This Code is an element of a constitutive building of the ethical dimension of Psychology, which shall be built in a tripartite manner:

1. Legislation (Chapter VI of Law no. 57/2008 and other legislation in force applicable to the various contexts and professional duties of psychologists,

2. the Code of Ethics, and

3. the various specific guidelines, to be developed over time regarding areas of application or private issues.

Thus, when established principles conflict, it is the responsibility of the professional to make the final decision on how to resolve the ethical dilemma, from his/her ethical thinking. In the process, psychologists may and should turn to the Code of Ethics or the Law. They should be mindful of the usual procedures in identical circumstances; consult the Ethical Commission of the institution in which they work, colleagues and superiors. The general principles constitute a set of accepted methods of action, given that they are developed and inspired from the person’s natural characteristics, the result of a secular philosophical thinking and based on the nature of psychological intervention. It is therefore, a collection of principles that are felt to be intuitively correct which adapt when resolving ethical dilemmas.
Respect for the person’s rights and dignity

Psychologists should respect a person’s decisions and rights, providing they are placed within a framework of rationality and respect for others. From this perspective, distinctions should not be made between clients in terms of other criteria that are unrelated to the problems and/or issues presented, and they must, with their intervention, encourage clients to exercise autonomy.

Dignity consists of a universal value, which is characteristic to human beings, in that it is due to their rational and relational nature that they are able to distinguish between right and wrong and forge interpersonal relationships. Dignity is, therefore, a specific and exclusive value of human beings which must be respected under penalty of their own condition being denied. To respect dignity is to accept all the person’s decisions, providing they are part of a framework of rationality, from a broad and reflected consciousness. However, these decisions cannot be taken out of the framework of the social reality surrounding the person and which determines their self and behaviour. Thus, the reference to rights and the relational nature of the person. An essential goal of such rights is to regulate the person’s life in society, to guide them in their interpersonal relationships, at least from certain boundaries. It is from the awareness of the existence of a right, that it is assumed that such right is recognised in the other person, which thus makes it a duty. It is therefore, an ethical or legal duty of all people, given their rational nature, to respect the rights of each and every person. Naturally, psychologists are also under the same obligation, increasingly so, due to the characteristics and objectives of the professional relationships they forge. This general principle corresponds to the obligation of all psychologists to see a person as a unique being, who is different from everyone else, who has free will and who, besides being respected, should be promoted in the relational context which is characteristic of human beings. This principle obliges psychologists to respect and promote the autonomy and self-determination of their client, unconditionally accepting all their opinions, preferences, beliefs and all the characteristics resulting from the affirmation of their character, providing they fit into a framework of coherence and respect for others. Psychologists are obliged to treat people from an unequal equality, considering a fair perspective in promoting conditions which take into account each person’s individual differences, and which, from the start, do not prevent certain people from achieving an essential minimum for an equal dignity as human beings.

Competence

Psychologists are obliged to practice their activity in accordance with the technical and scientific assumptions of the profession, starting from having the appropriate training and constantly updating their professional skills, in order to achieve the goals of psychological intervention.

Otherwise, the psychologist increases the possibility of harming the client and contributing towards bringing the profession into disrepute. Competence is acquired through specialised theoretical and practical training, acquired in higher education and constantly updated, as well as practical training, which is supervised by psychologists. Each psychologist should ensure that their particular qualifications are by virtue of their studies, specific training and experience, through which they establish their own boundaries. Competence is the recognition that psychologists must be aware that it is their fundamental obligation to conduct themselves in accordance with good practice based on updated scientific knowledge, due to the fact that there is an added risk of seriously harming someone if they provide a service for which they are not duly qualified. Great weight is therefore placed on training and supervised practice, as well as the need for the professional to constantly update their skills. Furthermore, a poor performance could lead to questioning the professional’s credibility and the profession itself. Psychologists must be aware that when they practice their activity less competently, they are contributing to discrediting Psychology, as well as the harm their client may suffer as a result. Given that Psychology is a science which aims to study people in their various contexts, in that the main instrument of intervention is the interpersonal relationship, naturally it is recognised that different professionals have different characteristics, therefore, each person should be aware of their specific needs, as the best judge of their competence. This assumption, as well as increasing psychologists’ responsibility, draws attention to the difficulty in formally controlling the competence of each member of the profession. For such reason, independently of the importance of regulating access to the profession through strictly controlling training, the individual conscience of each person is one of the main conditions for good practice. In parallel, it is easy to understand that the only way in which the professional may be accountable for his actions and to have the most objective view possible of his intervention, is to develop a practice which is based on updated scientific knowledge. Only in this manner, shall psychologists be able to anticipate the likely outcome of their intervention, which therefore makes them accountable for it.
Responsibility

Psychologists must be mindful of the consequences their work may have for people, the profession and society in general. They should contribute to the good results of the practice of their activity in these different dimensions and assume responsibility for it. They should know how to assess the level of fragility of their clients, basing their interventions on the absolute respect for their vulnerability, and to promote and dignify their activity.

From the knowledge acquired during their training, psychologists are responsible for providing, within their power, the return of autonomy to the client who seeks their help. Therefore, a definition that could merely refer to the simple concept of “accountability” becomes a broader concept which makes psychologists responsible for helping everyone who requires their professional services.

Therefore, the aim is to ensure that psychologists are mindful of the consequences of their work and that they apply it for the person’s welfare and respect them.

The notion of accountability is also implicit in this principle, due to the fact that it refers not only to the client but to the community in general and, furthermore, to the professional group as a whole. It entails the need for the professional to undertake the choice, application and consequences of the methods and techniques he applies, as well as his opinions, before other people, groups and society. Furthermore, he undertakes to strictly abide by the Code of Ethics.

Integrity

Psychologists must be loyal to the principles of practice of the profession, and actively promote them. They should prevent and avoid conflicts of interest, and when these arise, they must contribute towards their resolution, always acting in accordance with their professional obligations.

Integrity is a quality that reveals a moral wholeness, also defined as a virtue, a coherent conjugation of the aspects of the self. For psychologists, it is necessary for together with this coherence of character, to add loyalty to the principles of practice of the profession, which should be defended when they come under threat. Therefore, in a professional context, moral integrity should be upheld as a character trait that consists of the coherent integration of professional values which are reasonably stable and justifiable, accompanied by an active loyalty to such values in both judgement and action. Only in such a manner, shall it be possible to promote the integrity of Psychology, which is the main goal of this principle.

Thus, integrity, as it has been stated, may be compromised whenever a professional allows himself to be influenced by his own motivations or beliefs, moral prejudices and judgements, in cases in which personal, professional and institutional conflicts arise, dilemmas centered on hierarchies, or even from unreasonable requests from clients.

When faced with the above mentioned difficulties, the professional should promote the discussion of the different perspectives in the equation, attempting to seek a compromise which respects the general and specific principles and guidelines for the practice of Psychology.
Beneficence and Nonmaleficence

Psychologists must help their client to promote and protect their legitimate interests. They must not intervene so as to cause the client any harm or damage, whether by actions or by omission.

If Psychology has a very broad spectrum of action, whereby it is present in almost all human activities, the truth is that it should be assumed as an activity at the service of the welfare of the human being. In that sense, the assisting role it has must always be present, whereby psychologists should be deemed to be professionals who develop their work in promoting the physical, psychological and social well-being of people, groups, organisations and communities. Therefore, one of the priority duties is to endeavour to do the best for your client, and avoid harming him, at all costs. Therefore, by defining this principle as one of the core principles in the practice of Psychology, it is assumed that even in intervention processes whereby the main motivation is not to promote the interests of people, such as, for example, in some situations of forensic psychology or organisational psychology, the professional must always ensure that it is people who are the focus of his concerns.

This concern should be extended to all those involved in psychologists’ work, including clients, participants in research (humans or animals), students, trainees or any other person directly or indirectly related to such work. Even when conflicts of interest arise at this level, psychologists must endeavour to minimise the damage.

Psychologists must place the client’s best interests first, seeking to help and never harm them. Any intervention may, to some extent, cause the person potential harm. However, providing the balance between the risks and benefits is positive for the client, the intervention is legitimate. Any harm to be avoided shall be that caused by whoever fails to take this equation into account, as well as all the losses that shall result from wrongful action, which is negligent and purposely malevolent or not based on current scientific knowledge.

1. Informed Consent

Psychologists respect the autonomy and self-determination of the people with whom they forge professional relationships, in accordance with the general principle regarding their dignity and rights.

Therefore, they accept their opinions and decisions and all the characteristics that result from their personal affirmation, providing they are part of a framework of self-respect and respect for others. In this context, the term informed consent is understood as the voluntary choice by the client to participate in a psychological act, after they have been informed of the nature and foreseeable course of such act, their fees (when applicable), the confidential nature of the information that shall result, as well as its ethical and legal limitations. Such consent means that it is deemed that the person is able to consent and that they have been appropriately informed about the nature of the professional relationship and have stated their agreement of their own free will.

The client’s autonomy and self-determination further dictates that that they have the general right to start, interrupt or terminate the professional relationship with the psychologist at any time. Similarly, the procedure to obtain informed consent is interpreted as being instrumental in building a relationship based on trust with the client. Thus, it also constitutes a means of corresponding to that already mentioned through the principle of beneficence and nonmaleficence, which increases the results of the psychological intervention.

1.1. Informed consent. In the context of their activity, psychologists provide information to their clients and must ensure that they have understood it. This information refers to their professional actions, procedures and likely consequences, confidentiality of the information gathered and its ethical and legal limitations.

1.2. The procedure for obtaining informed consent. The explanation and discussion about the information necessary to obtain informed consent take place at the outset of the professional relationship and is continuously mentioned as warranted, with a view to optimising the work performed with the client. When this is not fully possible, the procedure to obtain informed consent is extended and not limited to the start of the professional relationship.

1.3. Voluntary participation. The participation of the client in psychological assessment and intervention activities, consultancy and research is voluntary, except for situations in which their self-determination is limited due to age (children and teenagers, in accordance with the legislation in force), cognitive competencies, mental health or legal constraints. However, respect for the client shall always remain to the same standard.
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1.4. Limits of self-determination. In situations where self-determination is limited due to age, cognitive competencies, mental health or an episode of acute imbalance, informed consent should be requested from the client’s legal representative. However, emphasis is placed on the collaborative nature of the relationship of the client with the psychologist, who should explain his role, seeking the client’s agreement and acting with a view to promoting the client’s rights and wellbeing.

1.5. Acute situations. In obvious emergency situations (e.g. serious risk of suicide or homicide, acute loss of impulse control), and it being impossible to obtain the timely informed consent of the client or his/her legal representative, psychologists must intervene promptly in order to ensure the welfare of their client or third parties.

1.6. Impositions determined by a legal process. When psychologists provide services to a client who is subject to impositions determined by a legal process, they must explain their role and the limitations of maintaining confidentiality of the information gathered, emphasising the importance of the collaborative nature of the work and discuss the likely outcome of the intervention for the client, regardless of the involvement of third parties.

1.7. Recording Information. Informed consent should be obtained verbally or in writing and later documented in the client’s file. In specific situations, such as photographic, audio or video recordings, consent must be given in writing and specify not only such consent but also the later use of the recordings obtained.

2. Privacy and Confidentiality

Psychologists are obliged to ensure that privacy and confidentiality is maintained of all the information pertaining to their client, obtained directly or indirectly, including the professional relationship itself, and to be aware of specific situations in which confidentiality has some ethical and legal limitations.

2.1. Information from the client. The subject of confidentiality and its limitations should be discussed with the client at the outset of the professional relationship and thereafter as warranted.

2.2. Privacy of the records. Psychologists should gather and record only information that is strictly necessary about the client, according to the objectives in question.

2.3. Subsequent use of the records. The client should also be informed about the type of subsequent use of such records, as well as the period of time such material shall be preserved and in which conditions. The filing, handling, preservation and destruction of records, reports or any other documents pertaining to the client, must be performed in such a manner as to ensure that the privacy and confidentiality of the information is maintained, in accordance with the legislation in force. In the event of death or grave mental incapacity of the psychologist, the records should be sealed and sent to the Order of Portuguese Psychologists (Ordem dos Psicólogos Portugueses).

2.4. Client access to information about himself/herself. The client should have access to information about himself/herself and be provided suitable assistance for a better understanding of such information.

2.5. Organisational clients. When the client is an institutional or organisational entity, the information regarding people obtained within the scope of the assessment or training activities shall be given to the person requesting them, without exceeding that which is deemed strictly necessary for the objectives outlined. Whenever possible, the persons assessed should be informed of the information produced. However the limitations of such information must always be the object of prior discussion with those concerned.

2.6. Interruption or termination of the intervention. In any event whereby the relationship with the client is interrupted or terminated, psychologists must ensure that privacy is maintained regarding information about the client.

2.7. Permission to disclose information. Psychologists may disclose confidential information about their client, when they or their legal representative has given prior informed consent to do so.

2.8. Limitations of confidentiality. The client and others with whom psychologists maintain a pro-
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Professional relationship [e.g. employer, colleagues, auxiliary staff, volunteers, services with whom they have an inter-institutional relationship] must be informed and aware of the nature of confidentiality and its ethical and legal limitations.

The failure to maintain confidentiality may be justified whenever there is a situation of danger for the client or third parties that may gravely threaten their physical or psychic integrity – their life is in danger, there is a significant risk of harm, or any form of abuse of minors or adults who are particularly defenceless, due to age, deficiency, illness or other vulnerable conditions.

2.9. Communication of confidential information. Confidential information may only be transmitted to whoever is deemed to be legally and absolutely necessary for a suitable and timely intervention in view of the situation in question. The client should be informed about confidential information being shared, prior to it occurring, except in situations where it is obviously impossible, the aim being to minimise the harm that the breach in confidentiality may cause to the professional relationship.

2.10. Teamwork. When psychologists work in a team or in situations of interdisciplinary or inter-institutional coordination, they are permitted to transmit information deemed confidential about a client, in the latter’s interests and restricting it to that which is strictly necessary for the objectives in question. The client must be aware and have been previously clarified on the possibility of this sharing of information within the working team or between different departments and professionals. In certain circumstances, the client may refuse to allow confidential information being shared, which may ultimately prevent the intervention from taking place.

2.11. Special cases. When the client is a child, teenager or adult who is particularly defenceless due to age, deficiency, illness or other vulnerable conditions, the psychologist may only share information with their legal representatives, which is strictly necessary for action to be taken for their benefit and in accordance with the legislation in force.

2.12. Electronic means. When services or information are provided by electronic means, the client should be informed of the possible risks and limitations with regard to maintaining privacy and confidentiality.

2.13. Didactic or training situations. In situations with didactic or other objectives (education, oral presentations of clinical or illustrative cases, written publications, supervision) the client’s identity must always be protected. If this sharing of information may, in any way, result in the possibility of the client being identified by third parties, psychologists must ensure that the client has given his prior informed consent.

2.14. Legal situations: Whenever there is a legal request to disclose confidential information about a client (records, reports, other documents and/or opinions), it must be provided to a specific recipient, and only the information which is relevant to the situation in question must only be provided, taking the purpose of such disclosure into account, whereby the disclosure of information that is not deemed essential may be refused. The client should be previously informed of such situation, as well as the content of the information to be disclosed, except in situations where it is clearly impossible.

If psychologists deem that the disclosure of confidential information may be detrimental to their client, they can invoke the right to be excused (pursuant to Article 135 of the Code of Criminal Procedure).

2.15. Legal defence of the psychologist. The failure to maintain confidentiality may also give rise to the psychologist being sued by the client. In this situation, the psychologist should only disclose the information deemed strictly necessary for his defense process.
3. Professional Relationships

The exercise of Psychology strives towards a human and social goal, which can be expressed in terms of wellbeing, health, quality of life and the full development of people. Psychologists are not the only professionals to pursue these objectives, it being appropriate and even necessary in some cases, to collaborate with other professionals, in spite of each one’s competences and knowledge. Psychologists respect professional relationships, specific competences, the duties and responsibilities of colleagues and other professionals. In parallel, psychologists are the first to be responsible for the excellence of their professional performance, assisting colleagues in the pursuit of this goal.

3.1. To promote good practice in Psychology. Psychologists should cooperate with colleagues, except in cases in which they are justifiably prevented from doing so. They must not discredit colleagues, regardless of whether or not they use the same theoretical models or intervention methods, which are scientifically valid.

3.2. Client referral. Psychologists should recommend the services of other colleagues whenever they do not have the necessary competencies or cannot undertake the intervention, in which case, with the informed consent of the client or his/her legal representative, they should forward the details necessary for the proper transfer of their case.

3.3. Professional autonomy. Psychologists practice their activity in accordance with the principle of independence and professional autonomy in relation to other professionals and higher-ranking authorities.

3.4. Institutional cooperation. Psychologists should contribute towards the goals of the organisations in which they work, providing such goals are not contrary to the general and specific principles laid down in this Code.

3.5. Professional integrity. Psychologists should base their professional relationships on integrity, not capturing the clients of other professionals, not judging or criticising other colleagues or professionals in an unfounded manner.

3.6. Respect for competencies. Psychologists should respect professional relationships, the duties and responsibilities of others and limit their work to the scope of their skills. They should assist clients in obtaining appropriate and necessary support from other professionals in situations that exceed their competence.

3.7. Duplication of interventions. Psychologists should not establish professional relationships with clients being assisted by a colleague, for the same purpose. They should obtain informed consent from the client prior to contacting other colleagues with whom the client has established a professional relationship, or with whom they currently have a relationship for another purpose.

3.8. Professional responsibility. It is the responsibility of psychologists to raise the awareness of other colleagues of good practice in Psychology, including respect for this Code. Upon learning of grave misconduct or that reiterated by a colleague, psychologists should a) inform the colleague in question of their misconduct in accordance with the current Code of Ethics, and b) make a complaint in writing addressed to the Judicial Committee of the Order of Portuguese Psychologists (Ordem dos Psicólogos Portugueses), the competent body which analyses such matters. Psychologists should inform against people performing duties which only psychologists are qualified to practice.
4. Psychological Assessment

Psychological assessment is a process which is comprehensive (covering areas relating to the assessment request and problems identified) and varied (by possibly resorting to various representatives it may take on different objectives, it recognises different types of information and considers various results). It also aims to be a fair process (recognising and not penalising differences in relation to minority groups, including people with physical, sensorial or linguistic disabilities or other frailties, unless these are the variables to be measured and considering the consequences of the results). The psychological assessment is performed by means of valid protocols and must meet objective information needs, safeguarding the person’s respect and privacy.

4.1. Nature of the psychological assessment. The psychological assessment is an exclusively psychological act and an element that distinguishes the technical autonomy of psychologists from other professionals.

4.2. Specific skills. Assessment techniques and instruments are used by qualified psychologists and based on up-to-date training, specific experience and training, except when such use is performed with the appropriate supervision, for practice or training purposes.

4.3. Appropriate use. The appropriate use of assessment techniques and instruments refers to the administration, grading, interpretation (including the use of computer programmes) and use of the information obtained, and requires research and evidence of its use.

4.4. Informed consent for assessment. Psychologists obtain informed consent for assessment or diagnosis procedures, except when these are part of the institutional, organisational or educational routine procedures, which correspond to a request that is regulated in the law or which aim to identify the capacity to make decisions.

4.5. Assessment materials, their protection and safety. Psychologists are responsible for selecting and appropriately using assessment protocols that are sufficiently valid, updated and scientifically based. These protocols include interviews, tests and other psychological assessment instruments which are used to justify the formulations and conclusions included in assessments, diagnoses, reports, opinions, recommendations and other methods of communication. The assessment materials and protocols, including manuals, items, and grading and interpretation systems, are not made available to clients or other professionals who are not qualified. Psychologists are responsible for protecting and safeguarding assessment materials and for preventing their disclosure in the public domain.

4.6. Instruments. Psychologists use assessment instruments that were the object of prior scientific studies which were duly supported, and that include psychometric tests regarding the validity and reliability of their results with people from specific populations examined with such instruments, as well as updated and representative data of a normative nature. The use of instruments requires strict knowledge of the respective manuals, including the field of underlying theoretical models, conditions of administration, grading, interpretation, as well as knowledge of updated scientific research.

4.7. Dimensions of the interpretation. In interpreting the results, psychologists must consider the objective of the assessment, the variables that the tests entail, the characteristics of the person being assessed (including individual differences – whether linguistic, cultural or others), and situations and contexts which may reduce objectivity or influence judgements made.

4.8. Informing the results. Psychologists provide objective explanations about the nature and goals of the assessment, as well as the limitations of the instruments, results, interpretations and judgements to the person or their legal representative, or to other professionals or institutions to which they provide assessment services, the latter with the client’s consent.

The client has the right to access the assessment results, as well as additional information relevant for their interpretation.

4.9. Basis for opinions. Psychologists base their assessment, decisions relating to the intervention or recommendations on data or test results that are recognised as being useful and appropriate for the general and specific objectives of the assessment.

4.10. Psychological reports. Psychological reports should be written documents that are objective, accurate and intelligible for the recipient, aiming to include only information that is relevant that enables questions to be answered and assessment requests deemed pertinent. Psychologists should weigh up the consequences of the information given in psychological reports, and critically consider the character in regard to the assessments and interpretations, and specify the scope, limits and degree of certainty of the content reported. For identification purposes, the reports include the psychologist’s name and certificate number.

4.11. Professional relationships. If the client requires a second opinion from another psychologist, a more detailed assessment may be sent directly to the latter, to avoid misinterpretation by the client and ensure the safety and integrity of the assessment materials.
5. Psychological Practice and Intervention

In addition to the methods and techniques used, psychological practice and intervention take into account various theoretical models available and principles associated to a scientifically informed practice, accurate and responsible Psychology, namely principles such as beneficence and nonmaleficence or specific competence. Psychological practice and intervention occur in addition to safeguarding respect for individual differences and informed consent.

5.1. Scientific evidence. Psychologists develop activities based on valid scientific knowledge and seek to maintain and update their competencies over the course of their professional life.

5.2. Training. Psychologists practice their professional intervention within the limits of their specific competencies, based on their academic and/or professional training, specific training, supervision experience, consultancy and/or professional development activities.

5.3. Informed consent in practice and intervention. In all psychological practice or intervention areas, psychologists should obtain informed consent at the outset of their professional activity with the client.

5.4. Impartiality concerns and objectivity during the intervention. Psychologists must be mindful of the importance of their individual characteristics in the intervention process, in that they seek to ensure the highest level of impartiality and objectivity, informing the client of the limitations of the process itself and of possible intervention options which are deemed suitable.

5.5. Non-discrimination. Psychologists do not discriminate against clients due to any reason or condition.

5.6. Cultural minorities. When practice is aimed at minority populations, psychologists seek to obtain professional and scientific knowledge in order to intervene abiding by the ethics and efficiently, adapting their intervention to factors associated to sex, age, sexual orientation, gender identity, ethnicity, cultural origins, nationality, religion, language, socio-economic level, capacity, or others.

5.7. Conflicts of interest. Psychologists must prevent and avoid possible conflicts of interest.

5.8. Multiple relationships. Psychologists should not establish a professional relationship with whom they maintain or have maintained a previous relationship of another nature. Similarly, they should not develop another type of relationship with their clients or people close to their clients. In all circumstances the professional relationship must be safeguarded in relation to any other which in the meantime has been established, and psychologists are responsible for any harm which may occur in such context.

5.9. Romantic or sexual relationships. Psychologists should not engage in romantic or sexual relationships with clients.

5.10. Professional advertising. Advertising of services is undertaken accurately and rigorously and is restricted to divulging information, such as intervention types and the titles that the psychologist holds.

5.11. Facilities. Psychologists should develop their professional practice in suitable facilities that ensure respect for the privacy of the client and allow the use of the means deemed necessary.

5.12. Long-distance intervention. Psychologists must be aware of the limitations and difficulties of this intervention (e.g. telephone, internet, among others) and discuss them in advance with their clients. In this context, the responsibility of psychologists is the same as in any other type of intervention.

5.13. Fees. Fees are set so as to represent fair payment for the services provided and are discussed with the client prior to establishing a professional relationship. Fees laid down for any other additional services to the intervention process (e.g. travel, drawing up reports or issuing opinions), must be done in an equally fair manner and agreed in advance with the client. Psychologists should refuse offers made by clients, except those of little value (monetary) and at the appropriate time, when such refusal would be damaging to the intervention.

5.14. Conclusion of the intervention. The conclusion of the intervention occurs when the objectives outlined have been achieved, when the intervention is deemed to be ineffective or when any constraint is observed in the pursuit of such objectives, including threatening situations by clients. These situations must be discussed with the client, who may be referred to another professional to continue the intervention process in a suitable manner.
Specific Principles

6. Education, Training and Supervision In Psychology

Education, training and supervision in Psychology are governed by the rules of this Code of Ethics. The Code of Ethics must be broadly disseminated in the different contexts and levels of education in Psychology.

6.1. Teaching Psychology. Psychology teaching programmes must be designed to reflect current thinking, be representative of the subjects covered and refer to substantiated analysis.

6.2. Programmes. Teaching, training and supervision programmes must have clearly outlined contents, objectives and admission and assessment requirements.

6.3. Specialisation and updating knowledge. Psychologists are aware of the need for specialisation training and to keep themselves updated on the scientific and professional developments in their areas of practice.

6.4. Supervision. Psychologists are aware that supervision is a specialised psychological activity, which itself is based on theoretical and empirical knowledge. Therefore, it requires training and the responsibility for keeping updated on scientific knowledge, ethical principles, legislation and other relevant documents for the promotion of quality in the activity of supervision.

6.5. Responsibility in supervision. Supervisors share responsibility with the supervisee for the client’s welfare and the privacy and confidentiality of the information. Supervisors should undertake the responsibility for assessing the supervisee, as well as undertaking the broader role of social responsibility.

6.6. Informed consent. Supervisors / advisors should establish a process of informed consent with supervisees/advisees with the aim of outlining each person’s responsibilities beforehand, as well as the objectives to be achieved.

6.7. Multiple relationships. Teachers, trainers, supervisors or advisors should not engage in romantic or sexual relationships with students, pupils, supervisees or trainees over whom they may have authority in assessment terms. Similarly, they should also avoid any other type of relationship that may impair their objectivity in the assessment process.

6.8. Application of the Code of Ethics. Teachers, trainers, supervisors and advisors strive for the application of this Code of Ethics by students, pupils, supervisees and advisees in the practice of their skills.

6.9. Reflection on ethical issues. Students and professionals, during their learning process, training and supervision, must be provided the opportunity to reflect on ethical issues associated to the professional practice and research of Psychology.

7. Research

In the context of scientific research, it may occur that the legitimate desire to learn more and increase knowledge enters into conflict with human and social values that are legitimate themselves. This is especially pertinent, due to the fact that it is the psychologist who seeks the participant, whereby respect for autonomy is undertaken as a core principle. Psychologists, as researchers, take into account the general principle of beneficence and nonmaleficence, which obliges them to consider the wellbeing of the participants in the research first, and the general principle of social responsibility towards the production and communication of valid scientific knowledge, which could lead to improving people’s wellbeing. Two areas of specific principles in relation to the treatment of participants in scientific research and the researcher’s professional conduct arise at this point, and are explained in the following paragraphs.

7.1. Not to cause harm. Researchers ensure that their research, with all that it entails, does not cause physical and/or psychological harm to the participants.

7.2. The assessment of potential risks. Researchers assess the potential risks for the participant prior to deciding to undertake the research. Researchers seek to identify potential risks to the health, well-being, values and dignity of the participant, and eliminate or minimise them. Whenever a preliminary assessment of the consequences of the research leads to anticipate physical and/or psychological harm to participants, it must be duly considered whether or not it should be performed. Participants must be properly informed of the potential risks and benefits.

7.3. Voluntary participation. No one can be forced or coerced into participating in research. For this purpose, researchers must obtain the consent of the participants. In an academic context where the participation in research constitutes a frequent occurrence or assessment factor, alternatives to participating must be offered. Any compensation, monetary or other, cannot be an incentive for the participant to disregard the possible risks of participating.

7.4. Informed participation. Researchers must provide participants the information necessary about the research to be undertaken, to enable them to make an informed decision in respect of the potential risks and benefits of participating and the general characteristics of their participation.

7.5. Capacity to consent. Special attention must be given to cases in which participants lack the capacity to give their informed and voluntary consent due to their self-determination being limited. In such cases, researchers must obtain consent from others appointed to guarantee their rights, namely, their legal representatives. However, if the participant clearly refuses, such refusal may be deemed as impeditive.
7.6. Anonymity and confidentiality of the data gathered. Researchers are bound to the same duties in regard to confidentiality and anonymity of the data gathered as those in other areas of psychological practice. In the context of research, only personal details that are strictly necessary for the research being undertaken may be gathered and must remain confidential. Data that identifies participants must be kept only for as long as necessary and turned into anonymous data as soon as possible. Possible limitations to confidentiality are governed by the same specific principles as those in other areas of psychological practice.

7.7. Use of deception in research. Given the increased potential risks of this procedure for participants, deception in research is used only when it is duly justified and scientifically supported and when non-deceptive alternative procedures would not be feasible for the purpose of the research.

7.8. Post-research debriefing. In all research processes the participants are given the opportunity to obtain appropriate information on the objectives, results and conclusions of the research performed. This post-research stage also provides the opportunity to monitor and correct any possible adverse effects that were not anticipated as a result of the research performed. The existence of a post-investigation debriefing must not be deemed to be justification for harm caused during the research, namely for harm that was anticipated in a preliminary assessment. Post-research debriefing is mandatory when deception was part of the procedure.

7.9. Animal Research. When performing research on animals, researchers must ensure that their treatment guarantees a suitable standard of quality of life and avoids them being subjected to unnecessary suffering.

7.10. Scientific Integrity. Researchers strive to ensure that their research, and all that it entails, is performed in accordance with the highest standards of scientific integrity.

7.11. Reporting true research results. Researchers to not fabricate data, including inventing, manipulating or selectively presenting results and publicly correct any errors found.

7.12. Publication of research results in a suitable manner for the scientific community and general public. Psychologists recognise the importance of disseminating and sharing research performed with their peers and the general community. Researchers to not make public statements that are false or fraudulent and minimise the possibility of misinterpretation of the results obtained, publicly correcting errors or misinterpretations.

7.13. Publication credit for ideas and work. Researchers do not publish portions of work or ideas by other authors as their own, and, on the other hand, they only acknowledge authorship credit in work published by those who actually performed it and significantly contributed to it.

7.14. Responsibility for research teams. Researchers not only abide by these rules, but ensure they are informed to and complied with by all those with whom they collaborate and/or are under their supervision.

8. Public Statements

Public statements given in a wide range of contexts, including radio and television programmes, newspaper and magazine articles, conferences and on the internet, must strictly comply with the ethical rules of the profession. In publicly broadcasting the knowledge of Psychology, the principles of specific competence, privacy and confidentiality, respect for the person’s dignity, integrity, beneficence and nonmaleficence must be taken into account.

8.1. Accuracy. When making public statements, in their various forms – orally or in writing – using the media or other forms of broadcasting, psychologists must observe the principle of accuracy and independence, refraining from making false statements or statements which are scientifically unfounded. They should selectively report facts which are based on appropriate scientific grounds, using the right to rectify, without suppressing critical positions and allowing the existence of contradictory views.

8.2. Competence and Specificity. Psychologists should limit their public statements to subjects in which they have had specific training and experience.

8.3. Responsibility. Psychologists recognise the impact of their statements on the public, due to the credibility of the science they represent. This increases their responsibility in relation to their statements, due to the fact that psychologists represent a professional class.

8.4. Private Cases. When requested to publicly comment on private cases, psychologists should speak of the psychological problems in question, but not about specific cases.