The Psychotherapists Board of Aotearoa New Zealand
Psychotherapist Standards of Ethical Conduct

These Standards of Ethical Conduct have been developed by the Psychotherapists Board of Aotearoa New Zealand under section 118(i) of the Health Practitioners Competence Assurance Act 2003.

Introduction
The purpose of these ethical standards is to set out guidelines for professional conduct for psychotherapists and to inform the public about what conduct might be expected of psychotherapists.

Such standards can be considered as deriving from tika, pono and aroha - that is,
- principles, or mātāpono
- statements on ethical conduct, or mātātika
- practical guidelines, or aroha ki te tangata

This document deals with principles and statements, with some practical advice on application. It is anticipated that further advice, and guidelines, will be developed by the Board over time.

Psychotherapists will have regard for the content and principles derived from the Treaty of Waitangi and for the cultural diversity of Aotearoa New Zealand. These standards apply to all psychotherapists, and may be used as a guide in psychotherapy training.

Practitioners are advised to bring the existence of these standards to the attention of clients.

Such a document as this cannot resolve all ethical dilemmas, but psychotherapists are invited to use it to make thoughtful decisions in their practice.

The structure of the document
The document starts with ten ethical principles, five drawn from the Pākehā world view, and five from the Māori.

These principles are the core of the standards and guidelines and should be referred to in all areas of professional practice, especially if there is no clear standard covering the issue in question. Practitioners of all cultures, working with clients of all cultures, should consider all the principles.

The standards are organised in sections dealing with aspects of practice and based on a psychotherapist’s responsibilities to:
- Clients
- Colleagues and self
- Education, training, professional development, research and publications
- Agencies and employers
- Society and community

The document also has a glossary section, references and acknowledgements.
**Principles**

The following core values / mātāpono have been adopted by the Board for the guidance of all professional behaviour. Definitions have been included in the glossary of this document.

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1 Responsibilities to clients

1.1 Working with clients

 Psychotherapists will:

1.1.1 Hold the needs and well-being of clients paramount, giving priority to the psychotherapeutic aspect of the relationship with clients.

1.1.2 Provide a service that recognises each client’s uniqueness and takes into account their particular needs, values and beliefs.

1.1.3 Uphold their clients’ best interests and seek to avoid doing harm in all their professional work.

1.1.4 Recognise the needs of clients who are unable to exercise self-determination or to ensure their own personal safety and act to protect the clients’ best interests, rights and well-being.

1.1.5 Form respectful relationships with clients that include clear, effective open and honest communication, and in language, attitude and every other means of communication, demonstrate this respect.

1.1.6 Foster psychological maturity in clients through the capacity for interdependence as well as independence.

1.1.7 Conduct themselves so as to deserve the trust vested in them by clients and the public.

1.1.8 Affirm the importance of relationships, and particularly family and whānau relationships, to all human development.

1.1.9 Bear in mind when working with Māori, wellbeing for Māori is often derived from whānau, hapū and iwi, and seek to foster these links. All psychotherapists need to be informed about the structure and significance of whānau, hapū and iwi in Māori society.

1.1.10 Be aware of their own personal values and beliefs and how these may affect their work and impact on clients, ensuring their personal values and beliefs do not disadvantage those with whom they work.

1.1.11 Take reasonable steps to ensure that clients, whether in individual, whānau, family or group settings, suffer no physical, spiritual or psychological harm during the conduct of psychotherapy, accepting that some distress may be an inevitable part of the process.

1.1.12 Seek to increase the range of choices and opportunities for their clients.
1.1.13 Foster client self-determination and choice, at a developmentally appropriate level, except where these may cause harm to self or others.

1.1.14 Be familiar with and operate by the Code of Health and Disability Services Consumers’ Rights.

1.1.15 Be familiar with the Children, Young Persons and their Families Act (1989), particularly with respect to the care and protection of children.

1.2 Working with infants, children and adolescents

**Psychotherapists will also:**

1.2.1 In any work where infants, children and adolescents are involved, recognise that the interests and welfare of infants, children and adolescents are paramount, and therefore given precedence over other considerations.

1.2.2 Recognise that each young person’s individuality has to be respected.

1.2.3 Recognise in work with infants, children and adolescents that their responsibility includes consideration of the infant, child and adolescent in the context of their family, whānau and culture.

1.2.4 Seek to increase the range of choices and opportunities that meet the needs of infants, children and adolescents, appropriately involving their families and whānau.

1.2.5 Advocate for any infant, child or adolescent who is directly a client, or part of a client group, in situations where the welfare and best interests of that infant, child or adolescent are threatened.

1.2.6 Pay particular attention so that the infants, children and adolescents are able to give informed consent appropriate to their stage of development.¹

1.3 Working with couples and groups

**Psychotherapists will also:**

1.3.1 Strive to be impartial and offer psychotherapeutic services without favouritism or bias when dealing with more than one party.

1.3.2 Pay particular attention so that each party in a couple or group is able to give informed consent.

¹ This standard is based on a decision of the House of Lords in the case Gillick v West Norfolk and Wisbech Area Health Authority [1985] 3 All ER 402 (HL – the Gillick principle which set down that the authority of parents to make decisions for their minor children is not absolute, but diminishes with the child’s evolving maturity; except in situations that are regulated otherwise by statute, the right to make a decision on any particular matter concerning the child shifts from the parent to the child when the child reaches sufficient maturity to be capable of making up his or her own mind on the matter requiring decision.)
2  Professional integrity

**Psychotherapists will:**

2.1 Practise within the limits of their competence, acknowledging the limits of their practice, skills and methodologies, and referring clients or supervisees to others when appropriate.

2.2 Assist the public to make informed choices about the type of service they access, including services other than psychotherapy.

2.3 Be honest in their dealings with others, including clients, the public and colleagues.

2.4 Be guided by the Treaty of Waitangi, which provides a framework for integrity between Māori and non-Māori.

2.5 Represent their qualifications and experience, and that of others, accurately.

2.6 Be open and transparent as far as possible within a framework of safe and effective practice.

2.7 Provide detailed information regarding fees and payment requirements, especially where there is a third party involved.

2.8 Adhere to professional standards in conducting their practices and advertising services.

2.9 Be accurate and clear in reporting assessments, progress reports and other summary information about clients.

2.10 Facilitate client access to other services.

2.11 Make information available to clients about complaints procedures, recognising their clients’ right to make a complaint and seek to address and resolve complaints in a timely manner.

2.12 Practise safely and responsibly in their professional capacity within the clinical competencies as set out by the Board website (www.pbanz.org.nz) and practise within their scope of practice.

3  Sensitivity to diversity and culturally safe practice

**Psychotherapists will:**

3.1 Be responsive to cultural diversity and seek training and guidance to ensure competent and culturally safe practice.

3.2 Be aware that each modality has a cultural context which may differ from that of the client.
3.3 Be sensitive to diversity and not discriminate on the grounds of age, disability, membership of distinctive groups and organisations, ethnicity, gender, migrant experience, occupation, political beliefs, racial identity, religion, sexual orientation, social economic status or spiritual beliefs.

3.4 Support the rights of clients to an autonomous, independent life within the context of their own worldview and culture.

3.5 Be aware that Tangata Whenua have the right to access treatment in an indigenous cultural context, to be cared for within a Māori framework of practice.

3.6 Ensure that when offering therapy to Maori they will be aware of the cultural factors bearing on the therapeutic relationship and will seek appropriate cultural expertise.

4    Maintaining boundaries

Psychotherapists will:

4.1 Establish and maintain appropriate boundaries with clients and not condone or engage in any form of discrimination, coercion, harassment or exploitation for sexual, financial or other reasons.

4.2 Recognise the power imbalance in the psychotherapeutic relationship and neither abuse this power, nor exploit the relationship with the client for personal gain or gratification.

4.3 Abstain from sexual relations with clients, sexual harassment and any behaviours or comments which might reasonably be interpreted as being sexually demeaning or as a sexual advance.

4.4 Not encourage or engage in sexual intimacy, either during the time of that professional relationship, or for that period of time following during which the power relationship could be expected to influence personal decision-making.

4.5 Not terminate a professional relationship in order to facilitate an intimate relationship.

4.6 Not encourage clients to give, lend or bequeath money or gifts to the psychotherapist or put pressure on clients to make donations to other people or organisations.

5    Privacy and confidentiality

Psychotherapists will:

5.1 Respect the client’s right to privacy.

5.2 Maintain client confidentiality noting that considerations of safety or legal obligations may on occasion override confidentiality; psychotherapists will discuss these limits with clients.
5.3 Not disclose personal information obtained from an individual, family, whānau or community group without the informed consent of those who provided the information, except in circumstances of diminished capacity, children/young persons, urgent need, legal requirements and/or client or public safety. The consequences of informing significant others should always be specifically considered.

5.4 When working with children and young people, treat symbolic material such as drawings and paintings etc. as confidential communication, and as such, the child or young person’s consent must be sought with regard to showing or discussing this material with others, including parents.

5.5 Protect information gained second hand (e.g., from a colleague about their client or student) in activities as a therapist, and where it could be anticipated that the information would be regarded by the person/s it concerns to be confidential.

6 Informed consent

Psychotherapists will:

6.1 Ensure informed consent (which is an ongoing process) and seek to ensure that the client is willingly engaging in psychotherapy and has an understanding of the process to be undertaken relevant to the stage of therapy. Consent may be obtained verbally or by written agreement.

6.2 Explain the nature of the services being provided, the risks and benefits of available treatment options and share the information necessary to obtain informed consent from their client.

6.3 In obtaining informed consent, provide as much information as a reasonable or prudent person, family, whānau, or community would want to know before making a decision or consenting to an activity. This includes warning of any potential risks or consequences.

6.4 In obtaining informed consent, relay information in language that is easily understood, and give sufficient time for the recipients to respond to the information. Take whatever reasonable steps are necessary to ensure that the information has been in fact, understood, including providing translation into another language.

6.5 When working with a person or persons from whom explicit informed consent cannot be obtained, proceed in accord with current statutory provisions.

6.6 Ensure that informed consent is the result of an agreement to work collaboratively and take all reasonable steps to ensure that consent is not given under conditions of coercion or undue pressure. It is recognised that in certain work settings, psychotherapists are required to conduct assessments where consent may not be
readily forthcoming (e.g., child protection work, forensic work).

6.7 When working with a person or persons who are unable to give explicit consent for reasons of diminished capacity, age and/or intellectual and/or emotional immaturity, gain the consent of the person’s guardian(s).

6.8 Be aware of the HDC Code of Health and Disability Services Consumers' Rights Regulation 1996, relevant Acts and Standards and follow procedures that provide for informed consent, confidentiality, fair treatment and due process as laid out in the Code and those Acts and Standards.

7 Record keeping

Psychotherapists will:

7.1 Keep records that are accessible and legible.

7.2 Take all reasonable steps to ensure that information remains retrievable as long as is necessary to serve the interests of those to whom they refer and/or the purpose for which they are collected, or as required by law.

7.3 Be familiar with and operate by the Health Information Privacy Code 1994 and its amendments which detail requirements for the collection, storage, security, access, correction and retention of health information.

7.4 Ensure the security of communications to the best of their ability and be informed about the inherent limitations in the security of electronic communications such as email.

7.5 Make adequate plans for access to and disposal of records in the event of serious illness or death of the psychotherapist.

8 Ending the client relationship

Psychotherapists will:

8.1 Once a professional relationship has been established, provide services until the relationship is properly ended. Wherever possible, proper termination of a professional relationship will occur with due regard to the client’s needs.

8.2 Make provision for alternative professional care in the event of the therapist suddenly becoming unable to work; and if it is clear that the client is or seems unlikely to benefit from the continued professional relationship, end the professional relationship.
9 Responsibilities to colleagues

Psychotherapists will:

9.1 Form respectful relationships with colleagues, supervisees, supervisors, trainers and trainees that include clear, effective, open and honest communication and treat them with courtesy and fairness.

9.2 Respect collegial confidences and respect the trust placed in them by colleagues, supervisees, supervisors, trainers and trainees.

9.3 Clarify and make explicit their role and responsibilities with the person(s) with whom they are working.

9.4 Not misuse information given in confidence.

9.5 Establish and maintain appropriate boundaries with supervisees, supervisors, trainers and trainees.

9.6 Not assume responsibility for another psychotherapist's client without encouraging appropriate communication with the colleague concerned, unless there is good reason to do so.

9.7 Help colleagues to receive assistance if they are unwell and not ‘fit to practise’ by bringing concerns regarding their behaviour to the attention of appropriate regulatory bodies, authorities, and/or committees, in a manner consistent with the ethical principles of this document and the HPCA Act.

9.8 Act if they become aware of unethical behaviour by a colleague. In the first instance, resolution or correction of the situation should be attempted through bringing the matter to the attention of the colleague concerned. Where this is not appropriate or possible, or is unsuccessful in resolving the issue, they should then bring the matter to the attention of those charged with the responsibility to investigate it, including employers and/or managers as appropriate.

9.9 Not delegate activities to persons not competent or lacking the authority to carry them out.

9.10 In matters relating to incompetence or unethical behaviour, seek to minimise damage to clients, colleagues and the profession, without compromising integrity.

10 Supervision

Psychotherapists will:

10.1 Continue to develop their professional knowledge and skills through clinical supervision.
10.2 Work within the Board’s policy on supervision available on the Board’s homepage located at www.pbanz.org.nz.

10.3 Abstain from sexual relations with current supervisees and trainees, and with former supervisees, supervisors and trainers and trainees when the dynamics of the supervision and/or training relationship continues in ways that may create a power imbalance.

11 **Self care**

**Psychotherapists will:**

11.1 Practise in surroundings that support safe practice.

11.2 Have regard for their own health and well-being so as to ensure that their standards of practice are not impaired.

11.3 Practise safely and responsibly in their professional capacity and maintain adequate levels of knowledge and skills in order to practise in a particular area.

12 **Education, training and professional development**

**Psychotherapists will:**

12.1 Continue to develop their professional knowledge and skills by further training and personal therapy as appropriate, and maintain participation in the profession as well as clinical supervision and collegial activities.

12.2 Preserve the anonymity of clients, colleagues, supervisees or trainees when clinical material is used in education and training, unless explicit prior informed consent has been obtained.

13 **Research and publishing**

**Psychotherapists will:**

13.1 Protect the welfare and privacy of the people or organisations involved in research taking all reasonable steps to maintain the anonymity of clients, colleagues, supervisees or trainees when clinical material is used in research or publications, unless explicit prior informed consent has been obtained.

13.2 Take responsibility to debrief research participants in such a way that any harm caused by research participation can be discerned.

13.3 Give accurate acknowledgement of sources of ideas and information and accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status in their publications, and not present others’ work or data as their own.

13.4 Avoid actions that may, or have the potential to, violate clients or diminish mana when publishing or researching.
13.5 Gain informed consent from those individuals involved in the research as required by the research protocols, which include the right to do research and the responsibilities of the researcher and ethics approval.

13.6 Record only that information necessary for the goals of the particular research study being conducted, or which is required by law.

14 Responsibilities to agencies and employers

Psychotherapists will:

14.1 Avoid compromising their professional standards when these conflict with institutional requirements.

14.2 Seek to maintain and improve the policies and quality of service in organisations, institutions or agencies in which they work.

14.3 Recognise the limits and responsibilities of the agencies in which they are employed.

14.4 Recognise that the decision to exclude persons from their services or activities, to fail to provide interventions that might reasonably be expected to assist, or to otherwise minimise the services provided, are serious decisions and must not be made on capricious or unjustly discriminatory grounds.

15 Responsibilities to society and community

Psychotherapists will:

15.1 Be legally responsible and practise within the law. Where ethical conduct conflicts with the law, both professional and legal advice should be sought.

15.2 Seek to prevent or correct practices that are unjustly discriminatory.

15.3 Seek to improve social conditions through advocacy and empowerment strategies and seek the fair and equitable distribution of community resources.

15.4 Encourage socially just practices in their professional relationships within the community.

15.5 Participate and support debate in the shaping of social policies and social institutions.
Glossary and definitions

**Autonomy/Mana motuhake**
To freely make judgements and act on decisions which are grounded in values of the profession and respect the right of each person, family or community to make decisions based on self-sufficiency and the ability to control their own destiny.

In a professional code, autonomy refers to self-discipline of the practitioner, to safeguard against external control or interference. Knowledge, understanding and insight is exercised so the practitioner practises within the values framework of the profession.

A set of practical skills through which the practitioner makes judgements and acts in accord with the values of the profession.

**Care/Tiaki**
To actively regard and nurture the welfare of others, responding with compassion to their misfortune or suffering.

All individuals are interdependent for achieving their interests. Those particularly vulnerable to our choices and their outcomes deserve extra consideration to be measured according to the level of their vulnerability to one’s choices and the level of their affectedness by one’s choices and no one else’s.

**Colleagues**
In this document ‘colleagues’ includes peers, supervisees and supervisors, trainers and trainees, students and other health professionals.

**Clients – tangata whai ora**
In this document ‘client’ refers to any individual, child, adolescent or adult, couple or group the psychotherapist has a professional relationship with and has committed to work with. Noting that when working with Māori, wellbeing for Māori is often derived from whānau, hapu and iwi, and will seek to foster these links and be informed about the structure and significance of whānau, hapu and iwi in Māori society.

The literal meaning of ‘tangata whai ora’ is person or people seeking wellness, whereas tangata whaiora is one who has wellbeing. It has been a term (in Maori) that referred to someone who was the subject of care, assessment and treatment processes in mental health. Today it is used in many different ways. For the purposes of this document it refers to clients engaged in psychotherapy with a psychotherapist as above.

**Informed consent**
Every consumer has the right to the information that a reasonable consumer, in that consumer’s circumstances needs, to make an informed choice or give informed consent. This is spelt out in detail in the HDC’s Code of Health and Disability Services Consumers’ Rights.

In terms of informed consent for children this statement takes into account the decision of the House of Lords in the case of Gillick v West Norfolk and Wisbech Area Health Authority [1985] 3 All ER 402 (HL – the Gillick principle which set down that the authority of parents to make decisions for their minor children is not absolute, but diminishes with the child’s

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http://www.moh.govt.nz/moh.nsfl/e5b227081a8cdd95cc256a8f00168afe/$FILE/GuidanceNotes.pdf
evolving maturity; except in situations that are regulated otherwise by statute, the right to make a decision on any particular matter concerning the child shifts from the parent to the child when the child reaches sufficient maturity to be capable of making up his or her own mind on the matter requiring decision.

**Integrity/Mana Tangata**

Strive to integrate expertise, care and respect in one's professional self so as to demonstrate adherence to the values of the profession.

*He tangata ki tahi*

*A person whose word needs speaking but once*

There are two aspects to integrity. One is to ensure that the various elements of the professional self complement and support, rather than undermine or frustrate, one another. The other is to show compliance with professional standards and to defend them when needed.

**Justice/Mahi Pono**

Treat people fairly and appropriately in light of what is their due.

The basic idea is what is ‘due’ or ‘deserved’ is the basis for the provision of appropriate treatment. Injustice may involve denying people what they are entitled to. Injustice may also involve depriving someone or a section of society of its fair share of some benefit, or imposing a disproportionately heavy share of some burden.

**Mātāpono**

Defined as principles or standards of conduct.

**Manaakitanga/Show respect**

Manaakitanga is always reciprocated. It reflects an expected standard of behaviour, an ideal that one should aspire to.

Mana-aki – mana is addressed and restored.

Manaakitanga – the quality of relationships is further defined.

**Privacy and confidentiality**

In terms of the statements on privacy and confidentiality:

- 'Diminished capacity' is where a person is judged incapable of giving explicit informed consent themselves.

- 'Urgent need' is where a situation arises when it is impossible or impracticable to obtain informed consent in time to prevent harm or injury to the person, persons, family, whanau, community group or some other person.

- 'Legal requirement' is where a psychotherapist’s actions are mandated by law. In such circumstances informed consent procedures are carried out with those who are legally authorised to represent their interests (e.g. parents of children, legal guardians of mentally incapacitated persons) as in some treatments or assessments contracted by the Courts (e.g. those carried out under criminal, mental health or...
family law). Psychotherapists should inform the client of these limits at the commencement of their work.

**Pūkenga/Expertise**
Maintain and develop all aspects of psychotherapeutic expertise for the betterment of client, self and profession.

*He reinga niho, he paraoa nga kauae*
*A whale's tooth in a whale's jaw*

The emphasis here is on a particular role and a particular body of expertise. In any profession there will be some professional obligations which arise directly out of that role and which are incurred only by those who enter the profession.

**Respect**
To act so as to acknowledge the right of others to make choices and take actions based on their own beliefs and values.

*Huihuitia ō tātou ritenga; whakanuia ō tātou rerekētanga*
*Share together our communities; celebrate our differences*

As self-governing agents we live and work in a world of other self-governing agents, whether clients, colleagues, employers or others, and respect in them the decision-making processes we value in our case. This requires more than non-interference and extends to supporting and strengthening agency, and working to mitigate factors which may undermine or even destroy it.

**Ūkaipō/Nurturing**
In promoting a person’s wellbeing take full account of the people, places and traditions which nurture that person’s wellbeing.

*Kia maumahara ki te toka i haua mai ai koe*
*Make sure you are mindful of the rock from which you have been hewn*

The archetype of nurturing is the infant at its mother’s breast. The mother is the woman through whom the child comes into the world; in other words, there is an intimate connection between nurturing and origins. Just as the placenta (whenua) provides the baby with its first environment and nourishment, so too the growing child is further nurtured by the land (whenua), literally and culturally, and the adult needs periodic refreshment through return to his or her origins, or places that provide the same.

*E hoki koe ki o maunga, kia purea koe e nga hau o Tawhirimatea.*
*Go back to your mountain, so that you may be cleansed by the winds of Tawhirimatea*

**Wairuatanga/Spirituality**
Act so as to respect the spiritual as well as the physical presence of people.

*Mehemea na te wairua i tohu, aroha*
*If guidance comes from the spirit, heed it respectfully*
Whānaunga/Community
Act as to strengthen the bonds of those with a shared heritage or some shared common purpose.

He ora te whakapiri, he mate te whakatākiri
Thriving through drawing close together, disaster through scattering apart

Often defined as deriving from bonds of whakapapa, of bloodline and descent, as well as close relative-like connections may grow through shared endeavours for a common purpose. Another definition of whānau means ‘to lean together’.

Much is achieved by common effort rather than by any one person standing alone. Another relevant ‘whakataukī’ is:

Ehara taku toa i te toa takitahi, engari he toa takitini
My strength is not that of a person standing alone, but of many standing together
References, acknowledgements and thanks
The Ethics Committee Working Party Report to the Psychotherapists Board of Aotearoa New Zealand (4 November 2009) – Psychotherapists Board of Aotearoa New Zealand Ethics Committee Working Party
The HDC Code of Health and Disability Services Consumers' Rights Regulation 1996
The Code of Ethics, 2008 – New Zealand Association of Psychotherapists
ANZSJA Code of Ethics, 2008 - Australian and New Zealand Society of Jungian Analysts

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