

The British Association for Counselling and Psychotherapy's 2014 Consultation on Ethics: Blog Extracts

Arthur Musgrave

The British Association for Counselling and Psychotherapy (BACP) is in the midst of a revision of its ethical commitments. In the summer of 2014, as part of a consultation with members, it ran three 2½-hour Saturday morning webinar seminars.

Following changes in the field of health and social care resulting from the Francis Inquiry into the Mid Staffordshire hospital scandal, BACP has proposed that supervisors take on a more active role in focusing on the best interests of their supervisees' clients. It could even be a requirement that therapists have to reveal the name of their supervisor to all their clients.

Here is some of the written response that I submitted to BACP in July this year:

When in role as a supervisor it's not a question of choosing between the best interests of the supervisee and the best interests of the client. The focus is the work of supervision, and the supervisor approaches it primarily through the lens of the supervisee's view of that work. At present, when doing so, supervisors can be encouraged to give their undivided attention to supporting the supervisee in doing the best work they possibly can.

It will confuse this focus if BACP is to promote a public relations document insisting that the therapist's and the supervisor's 'most important concern' is 'the best interests of the client'. There are several reasons for this confusion, but one arises straightforwardly out of what we mean when we say something is our 'most important concern'. Do we mean we give it most of our time and attention? Or, as I think you do,

that – in the ultimate analysis – if there's a choice to be made, the client's needs take priority over the supervisee's? As you point out, in most instances this need not alter practice, since the best way of supporting the client is usually to do so by working through the supervisee...


But when BACP rewrites the Ethical Framework so that it becomes a set of promises about what a client can expect when in therapy – in other words, when it is deemed to be a part of each and every working alliance – the phrase 'best interests' acquires additional weight, and the ambiguity in its meaning is brought into the heart of the work. The interpretation of this phrase is further complicated where, as well as the kind of ordinary everyday ambiguity highlighted in the previous paragraph, there is a lack of clarity about its meaning within society at large, including within the legal system.

As a result, supervisors will be required to split their attention between two points of focus. One, which is perfectly manageable at present, is a deep concentration on facilitating the supervisee's development as a therapist....The other is on a mix of possible legal interpretations of 'best interests', and whether or not anything that the supervisor might do to intervene would involve 'acting out' some element of the therapeutic dynamic. If supervisors are to be held to account by BACP for what their supervisees do to the point where they are not only identifiable and contactable but can be expected by clients to intervene on their behalf, this leaves private practice sole traders intolerably exposed.... There is a further important point that needs mentioning.

Whatever changes are made to the Ethical Framework in the short term as a result of this review, you have indicated a longer-term objective of embedding definitions of therapy and supervision within a discourse about quality assurance within the health and care system. But, it can reasonably be asked, does therapy sit comfortably within such a discourse? You deploy a definition of it that highlights its role in the alleviation of distress without acknowledging that this needs to be held within a broader understanding of do with collaborative and contextual meaningmaking. Wampold has shown that the research data is unequivocal in supporting this wider definition.¹

This distinction is important because, if therapy is to be restricted to the goal of distress alleviation, it can readily be encompassed within the aims and objectives of organizational programmes designed to alleviate different kinds of distress – for instance, that which arises as a result of addiction, eating difficulties, any form of abuse and so on. Therapy can then come to be viewed, not as a discrete area of professional expertise, but as one way of helping amongst many – for example, peer support, support groups, one-to-one listening support, and so forth. It's not hard to see how therapy might no longer be considered to be in 'the best interests' of clients, if that means that limited resources can be spread more thinly, and more people can be helped.

On the other hand, if the definition of therapy rightly embraces its collaborative and meaningmaking dimensions, it becomes much more obvious that there must be a sharp distinction between the role of the supervisor and that of the line manager. I don't see why the problems you have identified can't be addressed in a relatively low-key manner. Why can't guidelines be written for supervisors under the umbrella of the existing Ethical Framework so as to take account of managers' new responsibilities following the Francis Report? This won't lead to the ambitious changes on which you pin your hopes, but it won't result in a potentially disastrous split within the profession, either.

A much fuller presentation of the issues raised by the BACP initiative, and my responses to it, can be found at: <https://arthurmusgrave.wordpress.com> 

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Note

1 See Bruce E. Wampold, *The Great Psychotherapy Debate: Models, Methods and Findings*, London: Lawrence Erlbaum Associates, 2001. A second edition of this book is due out in the Spring of 2015.

Announcing... 'Self & Society Events, 2015'

AN EXCITING NEW HUMANISTIC WORKSHOP SERIES (London)

Starting in January 2015, the newly constituted AHP board is launching a new series of innovative CPD workshops in London, which we're calling 'Self & Society Events'.

Full details still have to be agreed by the board, but we envisage holding ten monthly, reasonably priced events a year (excluding August and December), which would be held of an evening at an accessible venue in London, and would last for 2 to 2½ hours.

This new series is a key aspect of our re-launching of the AHPB, to rest alongside the purchase of the journal by international publisher Taylor & Francis (*aka* Routledge). This is a great opportunity to put Humanistic Psychology back on the 'psy' map where it rightly belongs, so that the core values of Humanistic Psychology are more easily made available to a world which sorely needs them.

This is therefore about *re-imagining the AHPB*, offering a place regularly to meet like-minded people and have enjoyable and growthful experiences, while at the same time gaining CPD through access to cutting-edge theory from leading figures in the HP field.

All the talks will have an experiential, participative aspect,

as well as leading-edge theory; and we may also look to have a round-table discussion at the end of each session, with invited guest panelists.

The workshops will be well publicized across all the usual networks, with AHP administering the bookings and payment, and S&S Events will both raise funds for the AHP and generate a fee for the workshop presenter (probably based on a percentage of the fees taken).

If you'd be interested in running a workshop under this banner, do please let **Serra Pitts** know ASAP at serra@arresmedia.com, as there will be just ten places to fill for 2015, and we're also writing to a substantial list of practitioners with an initial invitation to offer a workshop.

Finally, our first launch event has been fixed for **Sunday 11 January** at the **Open Centre, London, 2 till 5 p.m.** – this will be a general introductory session to the new Events series, chaired by **Andrew Samuels** – and also a party celebration! All most welcome – and there will be no charge for this first Event of the series. (Details for finding the Open Centre are available from <http://www.opencentre.com/ocloc.html>.)

Richard House, on behalf of the new AHPB Board