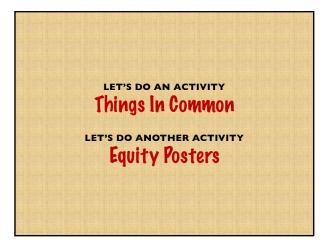
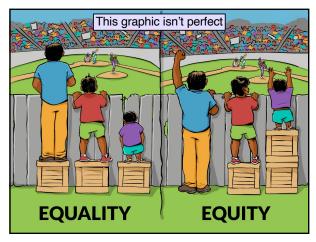


A FEW GROUND RULES

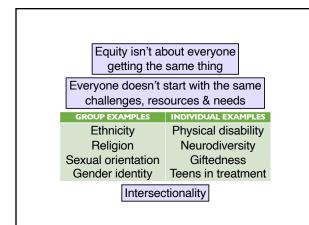
- This workshop is a non-judgmental, confidential space
- I'm not a lawyer
- I'm here to facilitate, not teach
- We're all learning & that includes me
- Participate as you choose
- Disclose as you choose

There's nothing inherently political about this topic





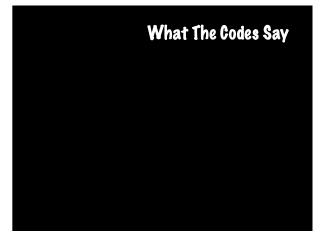












NAADAC CODE OF ETHICS

I-1 Client Welfare. Addiction professionals shall accept their responsibility to ensure the safety and welfare of their client, and shall act for the good of each client while exercising respect, sensitivity, and compassion. Providers shall treat each client with dignity, honor, and respect, and act in the best interest of each client.

IV-4 Personal Beliefs. Addiction professionals shall develop an understanding of their own personal, professional, and cultural values and beliefs. Providers shall recognize which personal and professional values may be in alignment with or in conflict with the values and needs of the client. Providers shall not use cultural or values differences as a reason to engage in discrimination. Providers shall obtain supervision and/or consultation to address areas of difference and to decrease bias, judgment, and micro-aggressions, and shall document the recommendations.

IV-9 Advocacy. Addiction Professionals advocate for the needs of the diverse populations they serve. Find NAADAC's entire Code of Ethics online

www.naadac.org/code-of-ethics

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AMHCA CODE OF ETHICS

C.1.g. Recognize the important need to be competent with respect to cultural diversity; CMHCs are sensitive to the diversity of different populations and to changes in cultural expectations and values over time.

C.1.m. Actively attempt to understand the diverse cultural backgrounds of the clients with whom they work. This includes learning how the CMHC's own cultural/ethical/racial/religious identities impact their own values and beliefs about the counseling process.

C.2.c. CMHCs have a responsibility to educate themselves about their own biases toward those of different races, creeds, identities, orientations, cultures, and physical and mental abilities, and then to seek consultation, supervision, and/or counseling in order to prevent those biases from interfering with the counseling process.

Find AMHCA's entire Code of Ethics online www.amhca.org/events/publications/ethics

ACA CODE OF ETHICS #I

A.4.b. Personal Values Counselors are aware of —and avoid imposing —their own values, attitudes, beliefs, and behaviors. Counselors respect the diversity of clients, trainees, and research participants and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor's values are inconsistent with the client's goals or are discriminatory in nature.

A.11.b. Values Within Termination and Referral Counselors refrain from referring prospective and current clients based solely on the counselor's personally held values, attitudes, beliefs, and behaviors. Counselors respect the diversity of clients and seek training in areas in which they are at risk of imposing their values onto clients, especially when the counselor's values are inconsistent with the client's goals or are discriminatory in nature.

> Find ACA's entire Code of Ethics online www.counseling.org/ethics

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ACA CODE OF ETHICS #2

E.5.c. Historical and Social Prejudices in the Diagnosis of Pathology Counselors recognize historical and social prejudices in the misdiagnosis and pathologizing of certain individuals and groups and strive to become aware of and address such biases in themselves or others.

E8. Multicultural Issues / Diversity in Assessment Counselors select and use with caution assessment techniques normed on populations other than that of the client. Counselors recognize the effects of age, color, culture, disability, ethnic group, gender, race, language preference, religion, spirituality, sexual orientation, and socioeconomic status on test administration and interpretation, and they place test results in proper perspective with other relevant factors.

How do you rate the GAIN on this?

Find ACA's entire Code of Ethics online www.counseling.org/ethics

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ACA PRINCIPLES

Autonomy Respect for independence & self-determination

Beneficence

Do good, be proactive, prevent harm when possible

Non-maleficence

Don't make things worse

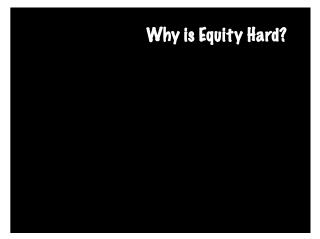
Fidelity

Be trustworthy and reliable

Justice

Treat others equitably

IN SMALL GROUPS Complete Case Study: Andrew



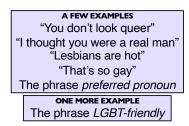




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MICROAGRESSIONS

Definition: A comment or action that subtly – perhaps unconsciously or unintentionally – expresses a prejudiced attitude toward a member of a marginalized group





THINKING SYSTEMICALLY

That definition one more time: Prejudice against somebody because of their race when those views are reinforced by systems of power

Can we adapt this definition to other oppressed or marginalized groups?

Prejudice against somebody because of their religion, sexual orientation, gender identity, etc when those views are reinforced by systems of power

What are some ways systemic oppression shows up in behavioral health settings?

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