EMDR Europe Association
Code of Ethics

Statement of Ethical Principles

Authors: Kerstin Bergh Johannesson, Sweden
Maeve Crowley, UK
Bruna Maccarrone, Italy
Antonio Onofri, Italy
Helle Rathenborg, Denmark

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EMDR Europe Statement of Code of Ethics

INTRODUCTION

- EMDR Europe recognizes its obligation to set and uphold the highest standards of professionalism, and to promote ethical behavior, attitudes and judgements on the part of affiliated Associations and EMDR members by:
  - being mindful of the need for protection of the public
  - expressing clear ethical principles, values and standards when dealing with clients, colleagues, members of the National Association, members of the National and European boards
  - promoting such standards by education and consultation
  - developing and implementing methods to help EMDR members monitor their professional behavior and attitudes
  - assisting EMDR members with ethical decision making
  - providing opportunities for discourse on these issues.

- Under the terms of the Constitution EMDR Europe has identified the need for a Code of Ethics and the need for it to be regularly reviewed and updated.

- The Code of Conduct (in preparation) is now a part of the EMDR Code of Ethics.

- The Code of Ethics should be considered in conjunction with other EMDR Europe policies and procedures.

- The existence of this code means that any breaches can be evaluated by EMDR Europe and National EMDR Associations and appropriate corrective action taken.

- Any conflict between the code and any professional practice should be referred to EMDR national association initially, and if necessary to EMDR Europe for consideration and deliberation.

- It is essential that all National Associations of EMDR Europe and their individual members commit to the ethical principles of this code as it is an integral part of the accreditation process.

- In making decisions on what constitutes ethical practice EMDR members will need to consider the application of technical competence in the use of their professional skill and judgement.

- EMDR members cooperate fully with their professional body, National Associations, with EMDR Europe, and the laws of their country. This is to be done in a prompt and responsive manner to relevant bodies. Collaborative and ethical behavior is expected towards colleagues, members of the National Association, and members of the EMDR Europe Association. This means that all interaction should comply with the concepts of dignity, respect, fairness and honesty, respecting the rights of clients, colleagues and others with which there are interpersonal relationships.

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1 EMDR Members are all professionals who have officially joined their EMDR National Association (pre-accreditation, practitioner, consultant, facilitator, trainer).
In accepting the Code of Ethics as well as the Code of Conduct, EMDR Europe Associations need to accept that the code has to operate in relation to and within the established legal framework of each country.

DECISION MAKING

a) Thinking about ethics should pervade all professional activity. Ethics can be defined as the science of morals or rules of behavior. Before embarking on professional work, the ethical implications should be considered as part of the work context together with legal, professional and other frameworks.

b) Areas of ethical concern that have been identified include:
   - multiple relationships – where the EMDR members owe an allegiance to several different stakeholders
   - personal relationships – where the EMDR members infringe or violate the agreed rules and regulations
   - unclear or inadequate standards of practice – where the EMDR members are unaware of or disregard the current systems in use by peers or others in similar work
   - breaches of confidentiality – where rules and constraints are broken or not clarified in advance with stakeholders
   - competence – where excessive or misleading claims are made or where inadequate safeguards or inadequate monitoring exist for new areas of work;
   - research issues including falsifying data, failing to obtain consent, plagiarism or failing to acknowledge another’s work or contribution
   - health problems affecting performance or conduct, and
   - bringing professions, organizations or treatment processes into disrepute, or creating conflicts, being insulting, etc.

c) Many of the above concerns involve unethical behavior but others involve lack of information, poor planning or carelessness. Reflective practice, peer support and transparency of professional activity would prevent problems occurring or developing into serious concerns.

STRUCTURE OF THE CODE

a) This code is based on four ethical principles, which constitute the main domains of responsibility within which ethical issues are considered.
   These are:
   - Respect
   - Competence
   - Responsibility
   - Integrity

b) Each ethical principle is described in a statement of values, reflecting the fundamental beliefs that guide ethical reasoning, decision making, and behavior.

c) Each ethical principle described is further defined by a set of standards, setting out the ethical conduct that EMDR Europe expects of its members.

ETHICAL PRINCIPLES

1. RESPECT
   Statement of values
EMDR members value the dignity and worth of all persons, with sensitivity to the dynamics of perceived authority or influence over clients or colleagues, and with particular regard to people’s right including those of privacy and self-determination.

1.1. Standard of general respect
EMDR Members should:

a) Respect individual, cultural and role differences, including (but not exclusively) those involving age, disability, education, ethnicity, gender, gender identity, language, national origin, race, religion, sexual orientation, health choices, marital or family status and socio-economic status. They should avoid any action that will violate or diminish the human, legal and civil rights of clients or others who may be affected.

b) Respect the knowledge, insight, experience and expertise of others of their profession and of related professions, clients, relevant third parties and of the public and make every effort, in so far as they are able and where that does not conflict with the interests of their clients, to provide full information and give mutual respect.

c) Avoid practices that are unfair or prejudiced.

d) Be willing to explain the basis for their ethical decision making.

e) Support and respect the policy, decisions and the constitution of the National and of Europe EMDR association.

f) Not engage in any activities that will misrepresent or bring the National Association, EMDR Europe or EMDR therapy into disrepute.

1.2. Standard of privacy and confidentiality
EMDR Member should:

a) Normally obtain the consent of clients who are considered legally competent or their duly authorized representatives, for disclosure of confidential information.

b) Restrict the scope of disclosure to that which is consistent with professional purposes, the specifics of the initiating request or event, and (so far as required by the law) the specifics of the client’s authorization.

c) Record, process, and store confidential information in a fashion designed to avoid inadvertent disclosure and in keeping with national GDPR guidelines.

d) Ensure from the first contact that clients are aware of the limitations of maintaining confidentiality, with specific reference to:
   a. potentially conflicting or supervening legal and ethical obligations
   b. the likelihood that consultation/supervision with colleagues may occur in order to enhance the effectiveness of service provision, and
   c. the possibility that third parties such as translators or a family member may assist in ensuring that the activity concerned is not compromised by a lack of communication.

e) Restrict breaches of confidentiality to those exceptional circumstances under which there appears sufficient evidence to raise serious concern about:
   a. the safety of clients
   b. the safety of other persons who may be endangered by the client’s behavior or
   c. the health, welfare or safety of children or vulnerable adults.

f) Consult a professional colleague, a supervisor, or a relevant governmental authority when contemplating a breach of confidentiality.

g) Document any breach of confidentiality and the reasons compelling disclosure without consent in a contemporaneous note.

h) When disclosing confidential information directly to clients, safeguard the confidentiality of information relating to others, and provide adequate assistance in understanding the nature and contents of the information being disclosed.
i) Make audio, video or photographic recordings of clients only with the explicit permission of clients who are considered legally competent, or their duly authorized representatives.

j) Endeavour to ensure that colleagues, staff, trainees, and supervisees with whom EMDR Members work understand and respect the provisions of this code concerning the handling of confidential information in line with national GDPR guidelines.

1.3. Standard of informed consent

EMDR Members should:

a) Ensure that clients, particularly children and vulnerable adults, are given appropriate opportunity to understand the nature, purpose, and anticipated consequences of any professional services or research participation, so that they may give informed consent to the extent that their capabilities allow.

b) Seek to obtain the informed consent of all clients to whom professional services or research participation are offered.

c) Keep adequate records of when, how and from whom consent was obtained.

d) Remain alert to the possibility that those people for whom professional services or research participation are contemplated may lack legal capacity for informed consent.

e) When informed consent cannot be obtained from clients, no duly authorized representative can be identified and a pressing need for the provision of professional services is indicated, consult when feasible a person well-placed to appreciate the potential reactions of clients (such as a family, or current or recent provider of care or services), for assistance in determining what may be in their best interests.

f) When the specific nature of contemplated professional services or research precludes obtaining informed consent from clients or their duly authorized representatives, obtain specific approval from appropriate institutional ethics authorities before proceeding. Where no institutional ethics authority exists, peers and colleagues should be consulted.

h) Avoid intentional deception of clients unless: (a) deception is necessary in exceptional circumstances to preserve the integrity of research or the efficacy of professional services; (b) any additional safeguards required for the preservation of client welfare are specifically considered; and (c) the nature of the deception is disclosed to clients at the earliest feasible opportunity.

1.4. Standards of self-determination

EMDR Members should:

a) Endeavour to support the self-determination of clients, while at the same time remaining alert to potential limits placed upon self-determination by personal characteristics or by externally imposed circumstances.

b) Ensure from the first contact that clients are aware of their right to withdraw at any time from the receipt of professional services or from research participation.

c) Comply with requests by clients who are withdrawing from research participation that any data by which they might be personally identified, including recordings, be destroyed.

2. COMPETENCE

Statement of values

The EMDR members value the continuing development and maintenance of high standards of competence in their professional work. They need to practice within their
level of competence which is determined by education, training and experience.

2.1. **Standard of awareness of professional ethics**
EMDR members should:

a) Develop and maintain a comprehensive awareness of professional ethics, including familiarity with this code, not only referred to clients, but also to colleagues and to the National and European organization (pre-accreditation, practitioner, consultant, facilitator, trainer).

b) Integrate ethical considerations into their professional practice as a core element of continuing professional development.

2.2. **Standard of competence and competence development**
EMDR members should:

a) Commit to and engage in Continued Professional Development.

b) Keep up to date with scientific, ethical, and legal innovations essential to their professional activities, while attending to ongoing developments in the broader social, political and organizational contexts in which they work.

2.3 **Standard of recognizing limits of competence**
EMDR members should:

a) Recognize and practice within the boundaries of their competence. They only provide services and use therapies for which they are qualified by training and experience.

b) Seek consultation and supervision regularly, particularly as circumstances begin to challenge their scientific or professional expertise.

c) Strive to ensure that those working under their direct supervision also comply with each of the requirements of this standard and that they are not required to work beyond their limits of competence.

2.4. **Standard of recognizing limits of methods**
EMDR members should:

a) Remain aware of and acknowledge the limits of their methods, as well as the limits of the conclusions that may be derived from such methods under different circumstances and for different purposes.

b) Perform their duties on the basis of careful preparation and readiness so that their practice is of the highest standard and communication is accurate, current and relevant.

2.5. **Standard of limitations due to external frameworks**
The EMDR member is attentive to how work-related and societal conditions can facilitate or hinder adequate application of their competence or method.

3. **RESPONSIBILITY**
Statement of Values
EMDR members value their responsibilities to clients and trainees, to the public, to the colleagues and other members of the Association, and to their core profession, including the avoidance of harm and the prevention of misuse or abuse of their contributions to society.

3.1 **Standards of general responsibility**
EMDR members should:

a) Be aware of the professional and scientific responsibilities to their clients, to the trainees, to the community, and to the society in which they work and live.
b) Avoid doing harm and are responsible for their own actions, and assure themselves, as far as possible, that their services are not misused.

c) Remain aware of the scientific and professional activities of others with whom they work, with particular attention to the ethical behavior of employees, assistants, supervisees and students.

d) Have a responsibility to be aware of any potential risks to themselves.

3.2. Standards of termination and continuity of care
EMDR members should:

a) Make clear at the first contact, or at the earliest opportunity, the conditions under which the professional services may be terminated.

b) Take advice where there appears to be ambiguity about continuing with professional services.

c) Terminate professional services when clients do not appear to be deriving benefit and are unlikely to do so.

d) Refer clients to alternative sources of assistance, if possible and appropriate, facilitating the transfer and continuity of care through reasonable collaboration with other professionals.

4. INTEGRITY
Statement of values
EMDR Members value honesty, accuracy, clarity, truthfulness and fairness in science, teaching, and practice in their interactions with colleagues, clients and all persons and in all facets of their scientific and professional endeavors.

4.1 Standard of honesty and accuracy
EMDR Members should:

a) Be honest and accurate in representing their professional affiliations and qualifications, including such matters as knowledge, skill, training, education, and experience.

b) Claim as evidence of professional training, qualifications, and accreditation in EMDR only those recognized by EMDR Europe.

c) Acknowledge trainings, qualifications and accreditation in EMDR only those that are accredited by the EMDR Europe Association and by their EMDR National Association.

d) Refrain from engaging unfair discrimination in their work-related activities, based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, health choices, disability, socioeconomic status, or any basis proscribed by law

e) In their activities not steal, cheat or engage in fraud, subterfuge, or intentional misrepresentation of facts.

f) Be honest and accurate in representing the financial and other parameters and obligations of supervisory, training, employment, and other contractual relationships.

g) Be honest and accurate in advertising their professional services.

h) Ensure that clients are aware from the first contact of costs and methods of payment for the provision of professional services.

i) Claim only appropriate ownership or credit for their research, published writings, or other scientific and professional contributions, and provide due acknowledgement of the contributions of others to a collaborative work.

j) As teachers/trainers/facilitators/consultants, EMDR Members ensure that statements in course outlines are accurate and not misleading, and accurately represent the education, training, and experience of the EMDR Members presenting the programs and any fees involved.
4.2 Standard of avoiding exploitation and conflicts of interest
EMDR Members should:

a) Remain aware of the problems that may result from dual or multiple relationships, for example, supervising trainees to whom they are related, teaching students with whom they already have a familial relationship, or providing psychological therapy to a friend.

b) Avoid forming relationships that may impair professional objectivity or otherwise lead to exploitation of or conflicts of interest with a client.

c) Clarify for clients and other relevant parties the professional roles currently assumed and conflicts of interest that might potentially arise.

d) Do not exploit nor harm persons over whom they have supervisory, evaluative or other authority such as clients/patients, students, supervisees, research participants, colleagues and employees, organizational clients, and others with whom they work.

e) Do not make false, deceptive, or fraudulent statements concerning their training, experience, or competence; their academic degrees; their credentials; their institutional or association affiliations; their services; the scientific or clinical basis for, or results or degree of success of, their services; their fees; or their publications or research findings.

f) Do not participate in, facilitate, assist, or otherwise engage in physical or mental torture, defined as any act by which severe pain or suffering has intentionally inflicted on a person, or in any other cruel, inhuman, or degrading behavior.

g) Recognize that potential conflicts of interests and inequity of power may still reside after professional relationships are formally terminated, such that professional responsibilities may still apply.

When conflicts of interest arise between clients and EMDR Members' employing institutions, EMDR Members clarify the nature and direction of their loyalties and responsibilities and keep all parties informed of their commitments.

4.3. Standard of Maintaining Personal Boundaries
EMDR Members should:

a) Refrain from engaging in any form of sexual or romantic relationship with persons to whom they are providing professional services, or to whom they owe a continuing duty of care. This might include a former patient, a student or trainee, or a junior staff member.

b) Refrain from engaging in harassing or demeaning persons with whom they interact in their professional work or in the EMDR Association based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, health choices, disability, language, or socioeconomic status.

c) Recognize as harassment any unwelcome verbal or physical behavior that ridicules, disparages, or abuses a person and that may consist of a single serious act or multiple persistent or pervasive acts, including sexual advances, that interfere with another person's work or create an intimidating, hostile or offensive working environment, also within the National and European EMDR Associations.

4.4 Standard of Addressing Ethical Misconduct
EMDR Members should:

a) Challenge colleagues who appear to have engaged in ethical misconduct, and/or consider bringing allegations of such misconduct to the attention of those charged with the responsibility to investigate them, including national EMDR Associations and EMDR Europe, particularly when members of the public appear to have been, or may be, affected by the behavior in question.

b) Bring allegations of misconduct by a colleague without malice and with no breaches of confidentiality other than those necessary to the proper investigatory
processes.
c) Any concern about contravening the code of ethics can be investigated utilizing relevant EMDR Europe policies and procedures.
REFERENCES
American Psychological Association Ethics Committee, Rules and Procedures, June 2018
EMDR Europe Code of Ethics, 2010
European Federation of Psychologists Associations, Guidance for Ethical Codes of Members Associations, Revised by General Assembly Granada, July 2005
APPENDIX

Code of ethics concerning specifically research in EMDR

Standard of protection of research participants

When institutional approval is required, EMDR members provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

Informed Consent to Research

(a) When obtaining informed consent as required, Informed Consent, EMDR members inform participants about (1) the purpose of the research, expected duration and procedures; (2) their right to decline to participate and to withdraw from the research also once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. They provide opportunities for the prospective participants to ask questions and receive answers.

(b) EMDR members conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought.

EMDR members should:

(i) Consider all research from the standpoint of research participants, for the purpose of eliminating potential risks to psychological well-being, physical health, personal values, or dignity.
(ii) Accept responsibility for the selection of their research topics and methods used in investigation, analysis and reporting.
(iii) Undertake such consideration with due concern for the potential effects of, for example, age, disability, education, ethnicity and community belonging, gender, language, national origin, religion, marital or family status, or sexual orientation, seeking consultation as needed from those knowledgeable about such effects.
(v) Refrain from using financial compensation or other inducements for research participants to risk harm beyond that which they face in their normal lifestyles.
(vi) Exercise particular caution when research participants are in a commercial setting and therapist remuneration may influence treatment.
(vii) Obtain the considered and non-subjective approval of independent advisors
whenever concluding that harm, unusual discomfort, or other negative consequences may follow from research, and obtain supplemental informed consent from research participants specific to such issues.

(viii) Inform research participants from the first contact that their right to withdraw at any time is not affected by the receipt or offer of any financial compensation or other inducements for participation.

(ix) Inform research participants from the first contact that they may decline to answer any questions put to them, while conveying as well that this may lead to termination of their participation, particularly when safety issues are implicated.

(x) Inform research participants when evidence has obtained of a psychological or physical problem of which they are apparently unaware, if it appears that failure to do so may endanger their present or future wellbeing.

(xi) Exercise particular caution when responding to requests for advice from research participants concerning psychological or other issues, and offer to make a referral for assistance if the inquiry appears to involve issues sufficiently serious to warrant professional services.

Standard of debriefing of research participants

EMDR members should:

(i) Debrief research participants at the conclusion of their participation, in order to inform them of the outcomes and nature of the research, to identify any unforeseen harm, discomfort, or misconceptions, and in order to arrange for assistance as needed.

(ii) Take particular care when discussing outcomes with research participants, since evaluative statements may carry unintended weight.

Informed Consent for Recording Voices and Images in Research

EMDR members obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing.

Informed Consent for Research

EMDR members may do without informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or institutional regulations.
Debriefing

(a) EMDR members provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research. (b) When EMDR members become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

Reporting Research Results

(a) EMDR members do not fabricate data. (b) If members discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

Plagiarism

EMDR members do not present portions of another's work or data as their own.

Sharing Research Data for Verification

(a) After research results are published, EMDR members do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude EMDR members from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

(b) Researchers who request data from others to verify the substantive claims through reanalysis may use shared data only for the declared purpose.