NTRS Code of Ethics and Interpretive Guidelines

A Special Publication of the
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This Guide is intended to serve members of the National Therapeutic Recreation Society in interpreting the Code of Ethics adopted by the Society in 1990. Like the Code, this Guide is intended as a tool for therapeutic recreation professionals across the many different service settings and administrative levels of their practice. Because therapeutic recreation, like all human service professions, is continually developing, both the Code and the Guide are subject to periodic revision. Input from the membership is imperative if ethical standards of practice are to reflect developing service needs.

The scope of professional practice in therapeutic recreation makes it impossible for this Guide to address all possible situations calling for ethical clarification. It is, however, the intention of NTRS to establish a panel of advisors who will be available to assist therapeutic recreation practitioners with ethical dilemmas arising in their practice. In addition to the advisory panel, the Society will appoint a committee to review any charges of unethical professional conduct brought against a member, and to recommend to the Board appropriate action.
Applying Ethical Principles

The ethical principles listed in the Code apply to all areas of professional practice; however, in applying these principles, varying circumstances may present a number of alternatives. The Guide is intended to help practitioners clarify their choices. This is not always a simple or swift matter. Moral philosophers disagree about whether ethical principles can be applied absolutely. For the absolutists, an ethics code could be written to cover every situation, and ethical practice would consist in following the very detailed (and lengthy) rule book. Holding the opposite position are the relativists who see ethical decision making as residing almost entirely in the situation, an approach which can leave the impression that there are no universal ethical principles. The professions try to establish a position along the continuum between absolutism and relativism. Indeed, it is expected that members of a profession, through dialogue, will arrive at consensus about best ethical practice in given situations.

Since, moreover, ethical decisions are best made in anticipation, rather than in the midst of a complex ethical dilemma, practitioners are expected to familiarize themselves with all the principles of the Code which may have bearing upon any situation in which they may need to exercise ethical judgment, and to make that judgment in a manner consistent with not only the letter but also the spirit of the Code. The importance of moral judgment cannot be sufficiently stressed. Professional judgment, and above all, moral judgment, is the core of professionalism.

Many service settings have established their own standards of ethical practice for all the professionals serving their clients. NTRS, while recognizing the responsibility of the membership to live up to the guidelines of their service agencies, require, over and above these, the specific behaviors indicated in the Code as characteristic of the profession.

Ethical decision-making can be very demanding, especially in times of fiscal austerity, and in situations where advances in technology make possible treatments which affect the quality and quantity of life in ways previously unimagined. Implications arising from such treatment
possibilities may be far-reaching, requiring very careful, often very painful decisions. Therapeutic recreation professionals must be prepared to take part in the ethical reflections being made in the settings in which they serve. Practitioners need to be cautioned that even the most carefully thought out ethical decision, resulting in the best possible ethical practice, will not leave them completely free of doubt. It is hoped, however, that the Code and Guidelines will help therapeutic recreation professionals to arrive at a sense of confidence in dealing with the ethical dilemmas which confront them in their practice, so that they may grow in the moral discernment which should be the hallmark of every professional.

Editor’s Note: Information shown in italics is verbatim text from the Code of Ethics.

National Therapeutic Recreation Society
Code of Ethics
(Approved, 1990)

and

Interpretive Guidelines
(Approved, 1994)

PREAMBLE

Leisure, recreation, and play are inherent aspects of the human experience, and are essential to health and well-being. All people, therefore, have an inalienable right to leisure and the opportunities it affords for play and recreation. Some human beings have disabilities, illnesses, or social conditions which may limit their participation in the normative structure of society. These persons have the same need for and right to leisure, recreation, and play.
Accordingly, the purpose of therapeutic recreation is to facilitate leisure, recreation and play for persons with physical, mental, emotional or social limitations in order to promote their health and well-being. This goal is accomplished through professional services delivered in clinical and community meetings. Services are intended to develop skills and knowledge, to foster values and attitudes, and to maximize independence by decreasing barriers and by increasing ability and opportunity.

The National Therapeutic Recreation Society exists to promote the development of therapeutic recreation in order to ensure quality services and to protect and promote the rights of persons receiving services. The National Therapeutic Recreation Society and its members are morally obligated to contribute to the health and well-being of the people they serve. In order to meet this important social responsibility, the National Therapeutic Recreation Society and its members endorse and practice the following ethical principles.

The Preamble to the Code of Ethics presents the central values and ideals of the Society which express the commitment of the profession to the common good. The professions differ from commercial enterprises because of the altruistic values which shape their relationship to society. These values are fundamental to an understanding of therapeutic recreation. Since the purpose of the profession is to serve the public interest, issues of personal advancement, or even the advancement of the profession are secondary to the purpose of the Society indicated in the Preamble.

In order to fulfill its obligations to promote leisure values in society, and to facilitate the leisure, recreation, and play for persons with limitations, members of the National Therapeutic Recreation Society obligate themselves to be bound by specific ethical principles.

I. The Obligation of Professional Virtue

Professionals possess and practice the virtues of integrity, honesty, fairness, competence, diligence, and self-awareness.
A. Integrity: Professionals act in ways that protect, preserve and promote the soundness and completeness of their commitment to service. Professionals do not forsake nor arbitrarily compromise their principles. They strive for unity, firmness, and consistency of character. Professionals exhibit personal and professional qualities conducive to the highest ideals of human service.

The virtue of integrity creates moral coherence. As its name suggests, it is the ability to integrate multiple moral obligations and commitments into a balanced whole. For example, commitment to the advancement of the profession would not outweigh concern for the leisure needs of deprived groups within the population, or specific duties to clients. A professional of integrity is characterized by wholeness, a consistent incorporation of all parts of practice into a moral totality.

Although the private practice of virtue is a personal matter, in the fulfillment of professional responsibilities, members of the Society are required to maintain the highest standards of personal conduct. Each member should distinguish clearly between statements and actions made as a private citizen and those made as a representative of the profession or member of NTRS. Therapeutic recreation professionals should be alert to and resist any pressures that interfere with the exercise of professional discretion and impartial judgment in carrying out professional functions. They should likewise avoid any actions which may reduce the public trust in the profession. It is not an objective of NTRS to achieve growth in the number of members at the expense of professional standards, but rather to encourage more qualified individuals to meet the high standards which have always characterized the Society.

B. Honesty: Professionals are truthful. They do not misrepresent themselves, their knowledge, their abilities, or their profession. Their communications are sufficiently complete, accurate, and clear in order for individuals to understand the intent and implications of services.

Therapeutic recreation professionals shall not engage in any act or omission of a dishonest, deceitful or fraudulent nature. They should neither misrepresent nor conceal a fact or information which is
material to determining the suitability, efficacy, scope, or limitations of service.

Far from misrepresenting qualifications, the members of the Society make every effort to be accurate and objective in describing the scope and limits of their professional service, affiliations, and functions. They base any public statements about services and outcomes on scientifically acceptable findings and techniques, with full recognition of the limits and uncertainties of such evidence. Practitioners accept the obligation to correct those who misrepresent the qualifications and functions of therapeutic recreation professionals. Since the general public will have difficulty distinguishing between NTRS and ATRA, it may become increasingly necessary to explain the differences between them.

C. Fairness: Professionals are just. They do not place individuals at unwarranted advantage or disadvantage. They distribute resources and services according to principles of equity.

The principle of justice requires professionals to treat equitably all those with whom they are involved—clients, colleagues, agencies and any other associates. In times of economic austerity, this ethical principle can be extremely demanding. For example, while the good of the client clearly requires that all professions operate in a spirit of cooperation, economic constraints can generate a spirit of interdisciplinary competition which works against the fair and equitable distribution of available resources.

Affirmative action guidelines in hiring and promotion of staff, as well as in selection and treatment of clients, are not simply legal issues. Meeting minimal standards set by law may not suffice for ethical practice, which looks beyond the sanction of law to a spirit of justice in providing access equally to all. Thus, it is not enough not to refuse a minority applicant a position, or a promotion; we must actively recruit a pool of minority candidates, and once they are hired, we must provide them with the professional development opportunities which will enable them to meet promotion standards.
Competing claims among clients, both individuals and groups, pose many an ethical dilemma for the therapeutic recreation professional seeking to serve conscientiously. Cuts in funding and in personnel mean that staff are asked to do more with less; at times an impossible task, where quality of service is sometimes pitted against quantity of clients served. For example, in times of fiscal austerity, therapeutic recreation staff may be required to cut back on some of their more specialized programs which seem to be very effective with selected groups of clients, in order to offer general programs serving larger groups.

Those in administrative positions have a special responsibility to ensure that staff are treated fairly in the allocation of resources, including opportunities for development and training. Furthermore, supervisors need to be alert to the possibility that some staff are asked to bear more of the burdens of stress and burn-out which result from reduction in resources.

D. Competence: Professionals function to the best of their knowledge and skill. They only render services and employ techniques of which they are qualified by training and experience. They recognize their limitations, and seek to reduce them by expanding their expertise. Professionals continuously enhance their knowledge and skills through education and by remaining informed of professional and social trends, issues and developments.

Every member has the obligation to grow in knowledge and in capacity to respond to the specific societal needs served by the profession. This means much more than learning new skills, techniques, or programs of intervention, important as those are. It suggests, too, that practitioners have the obligation to wrestle with philosophical questions which shape decisions made by the profession as it grows in response to changes in the world around it.

The concept of continuing education reaches far beyond the narrow counting of points gathered as a means of compliance; rather, the ideal ethical practice requires that the professional be on the cutting edge of discovery, eager to learn more about client groups being served, about new ways of contributing to leisure, alert for possibilities of enhancing the general quality of life through leisure.
When the increasing complexity of human service delivery places professionals in a situation which may exceed their level of competence, they must exercise judgment in accepting responsibilities, seeking appropriate consultation, and assigning responsibilities to other therapeutic recreation practitioners. Similarly, professionals who find that they lack the competence or experience necessary to perform functions assigned them have the obligation to refuse such assignments, for the client's protection and their own. Thus, for example, an inexperienced therapeutic recreation worker who is asked to fill in on a unit with severely incapacitated clients must make it clear that she or he is not prepared to deal with such clients without very close supervision, and, if pressed, must refuse the assignment.

E. Diligence: Professionals are earnest and conscientious. Their time, energy and professional resources are efficiently used to meet the needs of the persons they serve.

The public has a right to expect of a professional not only competence, in the sense of abilities, but also diligent performance, in the sense of consistently applying those abilities in serving their clients. Furthermore, professionals are obligated to support efforts to effect such improvements in procedure as will benefit the client and increase the overall efficiency of therapeutic recreation service.

Sometimes connotations generated around the concept of leisure lead others to perceive the profession as one which does not take seriously responsibilities of the workplace. Indeed, the element of the "non-serious" can give the profession a distinct advantage in working with some clients, particularly in clinical settings. It would be a mistake, however, for therapeutic recreation professionals to fail to see themselves as seriously committed to their work—to the clients, and to the agencies, whom they serve. Particularly in times of budgetary restrictions, every profession has the duty to demonstrate careful stewardship of resources, so that optimal service gains may be preserved.
It is important to note, in this context, that diligent effort is not equated with a stressful over-extension; indeed, prudence would suggest that diligent effort has more to do with consistent, well-organized allocation of energies, than with frantic efforts to make up for periods of negligence. An abiding sense of accountability will lead to efficient and effective utilization of available resources for maximum client benefit.

F. Awareness: Professionals are aware of how their personal needs, desires, values, and interests may influence their professional actions. They are especially cognizant of where their personal needs may interfere with the needs of the persons they serve.

Since the therapeutic relationship plays an important role in treatment, all professionals have the obligation to take the measure of their own strengths, and of those areas in themselves which need strengthening. The therapist holds a position of power. In order that power be used to help and not to harm clients, professionals need to assess carefully and honestly that power, and their reaction to it. Emotional maturity, patience, the ability to be open to many different kinds of persons, give and receive constructive suggestions—these qualities are sometimes taken for granted until tested in a demanding work scene.

An important attribute required of the helping professional is the ability to leave personal problems outside the therapeutic relationship. Without this quality of congruence, the professional runs the risk of using clients to meet personal needs, something which is contrary to the ethical principle of respect for persons.

II. The Obligation of the Professional to the Individual

A. Well-Being: Professionals' foremost concern is the well-being of the people they serve. They do everything reasonable in their power and within the scope of professional practice to benefit them. Above all, professionals cause no harm.

Therapeutic recreation professionals enter into or continue professional relationships based on their ability to meet the needs of clients
appropriately. Similarly, they terminate service and professional relationships which are no longer required or which cease to serve the client's best interests. Recognizing that the private and personal nature of the therapeutic relationship may unrealistically intensify clients' feelings toward them, they take special efforts to maintain professional objectivity. They are careful to avoid, and do not initiate, personal relationships or dual roles with clients.

Appropriate settings are chosen for one-on-one interactions, in order to protect both the client and the professional from actual or imputed physical or mental harm.

When the client's condition indicates that there is clear and imminent danger to the client or others, the therapeutic recreation professional must take reasonable personal action or inform responsible authorities. Consultation with other professionals must be used where possible. The assumption of responsibility for the client's behavior must be taken only after careful deliberation.

A professional who knows that he or she has an infectious disease, which if contracted by another would pose a significant risk, should not engage in any activity which creates a risk of transmission of that disease to any others with whom he or she would come in contact. The precautions taken to prevent the transmission of a contagious disease to others should be appropriate to the seriousness of the disease and must be particularly stringent in the case of a disease that is potentially fatal.

B. **Loyalty: Professionals' first loyalty is to the well-being of the individuals they serve. In instances of multiple loyalties, professionals make the nature and the priority of their loyalties explicit to everyone concerned, especially where they may be in question or in conflict.**

Professionals serving in group settings may sometimes find themselves expected to balance a number of competing loyalties—to a large number of residents/patients, to family members or surrogates, to the administrators of the service facility, to the funding source, to the accrediting agency. They are careful to clarify, first to themselves, then to all parties involved, the primacy of their loyalty to
patients/residents, while at the same time honoring obligations to other claimants.

When serving individuals with diminished competence, who are represented by surrogates, the professional is careful to honor the interests and concerns of the client, insofar as these can be determined, above those of the surrogate. It happens sometimes that family members and surrogates have their own agendas which do not necessarily match those which the client has evidenced in the past.

When procedures mandated by regulating agencies seem not to be in the best interests of clients, professionals have the obligation to make this known, and to make every effort to facilitate appropriate changes in the regulation.

C. Respect: Professionals respect the people they serve. They show regard for their intrinsic worth and for their potential to grow and change. The following areas of respect merit special attention:

1. Freedom, Autonomy, and Self-Determination: Professionals respect the ability of people to make, execute, and take responsibility for their own choices. Individuals are given adequate opportunity for self-determination in the least restrictive environment possible. Individuals have the right of informed consent. They may refuse participation in any program except where their welfare is clearly and immediately threatened and where they are unable to make rational decisions on their own due to temporary or permanent incapacity. Professionals promote independence as appropriate for each individual. They avoid fostering dependence and other behaviors that manipulatively control individuals against their will or best interest. In particular, sexual relations with clients is expressly unethical.

Professionals recognize the obligation to do good for their clients, but the question of who decides what is in the client's best interests is not so easily answered. Precisely because of their knowledge and competence, and because they want to do good, many professionals find themselves slipping into an attitude of paternalism toward clients. Fostering independence, self-determination, and autonomy is sometimes a labor-intensive process. It is much easier and quicker to make choices for a client whose processes may be slower, or whose
confidence may be faltering. Sometimes too, in response to their limiting condition, clients develop a relationship of dependency which the professional who lacks insight may find flattering. Such attitudes and behaviors are not ethically acceptable in any profession, but in therapeutic recreation they are especially to be avoided, since the heart of play, leisure, and recreation is freedom.

In every treatment plan, the client should be closely involved, and in fact, as far as is reasonably possible, should play the primary role in determining treatment goals. Because the profession tends to follow a medical model—a model which has publicly acknowledged the need to correct its own paternalistic approach—there is often an attempt to prescribe recreation for clients. Respect for client autonomy would suggest that this be done only in those very rare situations where clients are not able to make their own choices.

There are, indeed, very few clients who are not able to participate at any time, in any way, in decisions regarding their treatment. Professionals sometimes engage in labeling clients as incompetent on the basis of superficial assessments or incorrect diagnoses. Labeling, whether spoken, written, or thought, can be very harmful to clients, either because the client internalizes the label and acts in accordance with it, or because the professional reduces quality of life expectations for the labeled client, and thus does not engage in serious rehabilitative efforts which might, in fact, improve client functioning.

In some cases, the nature and extent of impairment may be so severe as to justify imposition of the professional's judgment on a client. Discernment is needed in such cases, and in making a judgment of this sort, priority should always be given to the possibility that the client's decision-making capacity is operational.

One facet of respect for personal autonomy is the provision of information necessary to consent to treatment. Legally, this process can be reduced to a routine signing of a standard form, but ethical practice requires full explanation of treatment procedures, expected outcomes, and options, including the option of refusing treatment.
The continuum of service delivery followed in therapeutic recreation ranges from programs for clients with serious limitations (assuming that these are genuine, and not the result of incorrect labeling) to those for clients with only mild limits to functioning. Ethical practice would encourage clients, whenever possible, to move along the treatment continuum until they are able to manage their own leisure. Freeing clients from the need for professional intervention is the goal of every profession. To the extent that clients require treatment, the professional must provide it thoroughly, but always with the underlying objective of client empowerment.

Professionals need to recognize and carefully protect boundaries between themselves and their clients, as well as those between client and client. In cases where the limiting condition of clients may be centered precisely in the ability to set and maintain appropriate boundaries, professionals have the obligation to exercise special care, lest their communication of respect and support be misinterpreted by the client.

Any sexual exchange between professional and client is clearly unethical, as the Code notes. However, sexual needs of clients, even those with severe limitations, are very real, and need to be recognized. Special precautions must be taken when working with those who are not fully capable of making decisions about the exercise of their sexuality. Staff need to be fully aware of their responsibility in this area, and must be educated thoroughly in this, as in other aspects of client background. In other cases, the right to sexual expression between consenting adult clients is not always respected by professionals in some service settings. In fact, at times clients who choose to engage in appropriate sexual relations with other clients are treated with ridicule by staff who are not emotionally mature enough to deal with this choice, or whose personal value system might not support such behavior. This very delicate area of personal choice can be particularly problematic in the institutional setting, and requires very sensitive handling by professionals.

Although the need for scientific research in the field is recognized, clients may not be pressed into participation, either by coercion or persuasion. Legislation on the rights of human subjects attempts to protect against such abuses of authority, especially with vulnerable populations, but ethical practice requires, further, that professionals
not exploit their special relationship with clients for the purpose of gaining knowledge, however valuable, let alone for personal prestige.

2. **Cultural Beliefs and Practices** Professionals respect cultural diversity and provide services that are responsive to the cultural backgrounds and needs of clients. They use "person-first" language to acknowledge and honor individual uniqueness above any disability, illness, impairment, or condition.

3. **Privacy: Professionals respect the privacy of individuals.** Communications are kept confidential except with the explicit consent of the individual or where the welfare of the individual or others is clearly imperiled. Individuals are informed of the nature and the scope of confidentiality.

The value placed on privacy varies greatly among people of different personality type, family background, and ethnic group. This does not usually present serious ethical problems in dealings among peers; but in the therapeutic setting, professionals hold power over clients, and are in a position to impose their values. They thus have the obligation to be cognizant of the many different ways of viewing privacy and to carefully guard the spatial and informational privacy of those they serve. Since much information of a very private nature is needed in order to offer effective treatment, great pains must be taken to share that information only with other professionals, and then on a need-to-know basis. Although the law protects confidentiality of patient information, ethical practice requires that such information be held in a spirit of reverence.

Interviews, which often deal with confidential matters, are to be conducted in places where not only is the information safeguarded, but the sense of respect is communicated to clients. This is not always easy in institutional settings which sometimes fail to provide for the privacy needs of residents. Where the institution is clearly deficient in this matter, professionals have the obligation to contribute to rectifying the deficiency. Indeed, most institutions find it impossible to grant residents the full measure of privacy which they desire. For this very reason, professionals in institutional settings have the obligation to be on their guard against a spirit of easily disregarding residents' privacy.
In view of the extensive data storage and processing capacities of the computer, the professional must ensure that data maintained on the computer is limited to information that is necessary to service delivery, destroyed when it is no longer necessary for service provision, and restricted in access by using appropriate computer security methods. The informal nature of recreation can add to this problem, and thus requires careful watchfulness.

D. **Professional Practices: Professionals provide quality services based on the highest professional standards. Professionals abide by standards set by the profession, deviating only when justified by the needs of the individual. Care is used in administering tests and other measurement instruments. They are used only for their express purposes. Instruments should conform to accepted psychometric standards. The nature of all practices, including tests and measurements are explained to individuals. Individuals are also debriefed on the results and the implications of professional practices. All professional practices are conducted with the safety and well-being of the individual in mind.**

In order to provide service based on the highest professional standards, therapeutic recreation practitioners have the obligation to thoroughly understand those standards and their implications. In a field such as therapeutic recreation, which is characterized not only by its own existing complexities, but also by rapid changes in the many environments in which it functions, individual practitioners must continue studying throughout their working lives. Indeed, like members of all professions, they must consider themselves lifelong learners. Their study should not be confined to their own profession solely, but should include knowledge about specific client groups which they serve, and those aspects of related fields which touch upon the practice of therapeutic recreation.

Tests and instruments of measurement should be used only by fully qualified persons; they should not be selected lightly, nor should results be taken absolutely, especially where validity and reliability are doubtful. Projective and other indirect methods of testing which rely strongly on interpretation should be used with caution. Consent, in writing, should be obtained from individuals being tested, or from their
authorized representatives. Professionals must recognize the effects of socioeconomic, ethnic, and cultural factors on test performance. It must be remembered that test results constitute only one of a variety of pertinent sources of information to be used in professional service. Ethical practice mandates the avoidance and prevention of the misuse of test results which have become obsolete.

To the professional standards which govern the practice of therapeutic recreation, NTRS members must also add other standards governing service in particular settings or to specific client groups. They practice their profession in compliance with legal standards, and do not participate in arrangements undermining the law. Indeed, obedience to and respect for law and regulatory authority should be viewed as an absolute minimum standard of professional conduct below which no therapeutic recreation professional should fall. The potential consequences of violating this admonition extend beyond those which may fall upon the person of a violator, since one member of NTRS may indeed bring discredit upon the profession by violating laws or regulations which govern the conduct of therapeutic recreation service.

III. The Obligation of the Professional to Other Individuals and to Society

A. General Welfare: Professionals make certain that their actions do not harm others. They also seek to promote the general welfare of society by advocating the importance of leisure, recreation, and play.

In their efforts to promote leisure values, therapeutic recreation professionals are not seeking their own narrow self interest or that of their own profession. While it is clear that in the long run, both they as individuals, and the profession as a whole, will gain by the promotion of leisure values, the primary focus of the profession is to others. It is this altruistic value system which sets the professions apart. Professions differ from commercial enterprises precisely by their special social role, the promise they make, implicitly and explicitly, to contribute to the common good.
B. Fairness: Professionals are fair to other individuals and to the general public. They seek to balance the needs of the individuals they serve with the needs of other persons according to principles of equity.

Professionals recognize that the burdens and benefits of living and working in any group must be distributed fairly. In bidding for the resources needed to deliver therapeutic recreation services, they will be mindful that other services also need funding. Similarly, when cutbacks are called for, they will accept their fair share of these, not seeking special exceptions.

Any professional who has acquired a unified body of knowledge is necessarily indebted to predecessors and contemporaries who have shared freely their knowledge, skills, and understanding of the profession. In fairness, the professional is bound to repay that debt by sharing freely with contemporaries, and, thus, future generations, the fruits of his or her experience and insights. A corollary of this principle is that professionals are required to share in the burden of research activities which will enable them to make a fair contribution to knowledge of the discipline, and thus manifest their genuine concern for the public good.

IV. The Obligation of the Professional to Colleagues

A. Respect: Professionals show respect for colleagues and their respective professions. They take no action that undermines the integrity of their colleagues.

In order to act with due regard for the needs, special competencies, and obligations of their colleagues, professionals need to know and take into account the traditions and practices of related professions. The absence of formal relationships with other professional workers does not relieve the therapeutic recreation practitioner of the obligation to exercise foresight, diligence, and tact in obtaining assistance from other professional colleagues which could be beneficial to their own clients.
B. Cooperation and Support: Professionals cooperate with and support their colleagues for the benefit of the persons they serve. Professionals demand the highest professional and moral conduct of each other. They approach and offer help to colleagues who require assistance with an ethical problem. Professionals take appropriate action toward colleagues who behave unethically.

The therapeutic milieu profits greatly when there is a spirit of cooperation among the different service professions. It would be particularly reprehensible to attempt to involve clients in any competitive strife or personal animosities which might arise between professionals, or to exploit a dispute between a colleague and employers to obtain a position or otherwise advance one's own interests. The professional should seek arbitration or mediation when conflicts require resolution for compelling professional reasons.

The spirit of collegiality is fostered when professionals represent accurately and fairly the qualifications, views, and findings of colleagues and use appropriate channels to express judgments on these matters. Sharing of resources is essential for the successful functioning of the interdisciplinary team.

The professional should create and maintain conditions of practice that facilitate ethical and competent professional performance by colleagues. When he or she becomes aware, however, of inappropriate or questionable practice in the provision of care, concern should be expressed to the person carrying out the questionable practice, and attention called to the possible detrimental effect upon client welfare. If necessary, the questionable conduct should be reported to the appropriate authority both within the service delivery institution, and to the worker's professional organization. There should be an established process for the reporting and handling of incompetent, unethical, or illegal practice within the employment setting, so that such reporting can go through established channels without fear of reprisal. The therapeutic recreation professional needs to be informed about the process of reporting questionable practice and be prepared to use it if necessary.

In order to deal effectively with ethical dilemmas, it is helpful to have in the service setting an established Ethics Committee, composed of
representatives of all the professional disciplines serving in the facility. Therapeutic recreation professionals should take their place on the Ethics Committee, and, if there be no such committee in their place of service, should take the leadership in establishing one.

V. The Obligation of the Professional to the Profession

A. Knowledge: Professionals work to increase and improve the profession's body of knowledge by supporting and/or by conducting research. Research is practiced according to accepted canons and ethics of scientific inquiry. Where subjects are involved, their welfare is paramount. Prior permission is gained from subjects to participate in research. They are informed of the general nature of the research and any specific risks that may be involved. Subjects are debriefed at the conclusion of the research, and are provided with results of the study on request.

The professional is obliged not only keep up with the growing body of knowledge, but also contributes to it. Being involved in research is the duty of every professional. For those engaged in a therapeutic intervention it is imperative that the evaluation of processes and outcomes be shared with the professional community.

In the conduct of research they establish with research participants, prior to the research, a clear disclosure of all aspects of the research that might reasonably be expected to influence willingness to participate. Research with children, or with those whose impairments might limit understanding, requires special safeguarding procedures. The same is true of those studies in which the use of some measure of concealment or deception is necessary.

After the data are gathered, the researcher debriefs the participant, and in the process attempts to clear up any misconceptions about the study. The researcher has responsibility for any harm, physical or emotional, which participants may experience during the research process.
Individuals and groups participating in research have the right to be informed about the results. The researcher is scrupulously honest in every aspect of presenting research findings, not only in discussion of results, both disappointing and encouraging, but also in acknowledging the use of sources.

B. **Respect:** Professionals treat the profession with critical respect. *They strive to protect, preserve, and promote the integrity of the profession and its commitment to public service.*

Knowledge of the history of the profession is a prerequisite for preserving the integrity of its goals and ideals. Participation in the democratic process of selecting officers of the Society is a duty of all members. They are, furthermore, obligated to contribute to the shaping of professional policy by participating in discussions, communications, or surveys at local, state, and national levels. They are careful to offer constructive suggestions for the improvement of the Society, or, when necessary, for restoring its traditional prioritization among values.

Members must carefully distinguish between promoting the integrity of the profession, which the Code requires, and promoting the profession for gain. It is especially important to avoid degenerating into mere special interest groups engaged in a struggle for privilege, power, and position.

C. **Reform:** Professionals are committed to regular and continuous evaluation of the profession. *Changes are implemented that improve the profession's ability to serve society.*

Evaluation of the profession can only be done on the basis of a philosophical consensus. When such consensus is lacking, the members have the obligation to work collaboratively toward establishing or re-establishing it, in a spirit of collegiality and honesty.

Once philosophical consensus is established, the members must engage in on-going dialogue in order to see that the values of the Society are applied in the developing circumstances in which they
must practice. It is quite usual in the development of professions that controversies arise about directions and policies. Ethical practice indicates that such controversies not be exploited for the gain of individuals or sub-groups within the membership. Rather, therapeutic recreation professionals will strive to perceive differences of opinion as opportunities of growth for the Society, and will endeavor to work through to decisions which will best serve the common good.

**VI. The Obligation of the Profession to Society**

A. *Service: The profession exists to serve society. All of its activities and resources are devoted to the principle of service.*

In order to render appropriate service, the members must be familiar with changes in society which suggest new ways for the profession to exercise its mission to the common good. For example, it is the obligation of the profession to seek out new groups within the population, who do not have adequate access to leisure, and to generate public policy to address the leisure needs of such groups.

Furthermore, therapeutic recreation professionals should do their utmost to assist in minimizing the costs of their service, without compromising the quality of benefits they provide, not only by helping to improve the operational efficiency of therapeutic recreation programs, but also by contributing to the solution of economic, legal, political, and social problems which demonstrably increase the cost of health care services. The therapeutic recreation practitioner should not neglect his or her personal duty, as a good citizen and a professional, to become actively involved in the search for underlying causes of and long-run solutions to such problems.

B. *Equality: The profession is committed to equality of opportunity. No person shall be refused service because of race, gender, religion, social status, ethnic background, sexual orientation, or inability to pay. The profession neither conducts nor condones discriminatory practices. It actively seeks to correct inequities that unjustly discriminate.*
Since the profession exists to serve society, the members must be on guard about their manner of selecting clients. A profession does not serve society simply by selecting from it a small group whom it is profitable to serve. Following the medical model of service too closely, for example, might lead to practice that is elitist, too easily conscious of prestige or monetary gains. Selecting clients whom it is in the profession's financial interest to serve is tantamount to using the clients, something that is ethically unacceptable. Furthermore, selecting clients on the basis of diagnoses which are advantageous for the profession, whether in terms of monetary reward, or presumed prestige, amounts to a kind of discrimination.

Clients with contagious diseases are not to be refused treatment, although due precautions are to be exercised in the settings where they are served. In order to correct misinformation about such clients, professionals need to be fully informed about all facets of their conditions.

Members do not condone or engage in sexual harassment, which is defined as deliberate or repeated comments, gestures, or physical contacts of a sexual nature.

C. Advocacy: The profession advocates for the people it is entrusted to serve. It protects and promotes their health and well-being and their inalienable right to leisure, recreation, and play in clinical and community settings.

Therapeutic recreation must be faithful to the values of play, leisure, and recreation—the primary focus of the profession which in some service situations can sometimes be relegated to a secondary position behind measurable clinical gains, and perhaps neglected altogether.

Members of NTRS recognize responsibility not only to their own clients, but also to society. The public duties of the profession include playing a part in the formation of social philosophy and policies, a part which goes far beyond providing technical expertise, to making a contribution to addressing society’s underlying problems and needs.
In order to fulfill their public duties, professionals must strengthen their commitment to the concept of the common good, thus helping society to resist the influence of self-interested values which pose a threat to the common good. The special contribution which therapeutic recreation professionals can make to the development of a public philosophy is through their presentation of the relation between leisure/play/recreation and the quality of individual and community life in a just social order. By nurturing the value of leisure in society, NTRS members can shape our cultural heritage and way of life.

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