



CODE OF ETHICS

PURPOSE

Male Survivors Te Tai Tokerau ('MSTTT') Code of Ethics (the 'Code') defines the ethical principles and core values governing the professional practice of its members. Its main purpose is to encourage and guide ethical practice within MSTTT.

SCOPE

This Code provides the MSTTT guideline for the ethical practices and behaviours of all trustees, managers, employees, contractors, consultants and volunteers working for MSTTT to enable or provide support services to male survivors (the 'practitioners and advisors').

The Code is intended to provide a useful framework for addressing ethical practice related issues including helping practitioners and advisors to make ethical decisions and assisting with resolving complaints about ethical practice.

OBJECTIVES

Applying the Code will:

- Educate MSTTT, male survivors and the public regarding the ethical behaviours required of, and to be practised by, practitioner and advisors;
- Enable and encourage practitioners and advisors to operate ethically in their dealings with male survivors, colleagues, agencies and the wider community.
- Enable and encourage practitioners and advisors to evaluate and regulate their own ethical practices and behaviours.
- Enable MSTTT to evaluate the ethical practices and behaviours of practitioners and advisors;
- Assist MSTTT to resolve grievances concerning the professional practices and ethical behaviour of practitioners and advisors.

CORE VALUES

The Male Survivors Aotearoa (MSA) core values, which are shared by MSTTT, respect the worth, dignity and capability of every human being, embrace the cultural diversity of New Zealand and acknowledge the special relationship with the Tangata Whenua as an overarching value that is reflected in the spirit and intent of the Treaty of Waitangi.

The particular values that MSA has adopted to characterise the national organisation and inform the support services provided by MSTTT are described as follows:

Mutuality

The authentic two-way relationships between people through 'the kinship of common experience'.

Experiential knowledge	The learning, knowledge and wisdom that comes from personal lived experience of sexual abuse and recovery
Self determination	The right for people to make free choices about their life and to be free from coercion on the basis of their mental distress or victimisation.
Participation	The right for people to participate and lead in sexual abuse recovery services including in the development or running of services as well as in their own treatment and recovery.
Equality	The right of people who experience sexual abuse to have equal opportunities to other citizens and to be free of discrimination.
Recovery and hope	The belief that there is always hope and that resiliency and meaningful recovery is possible for everyone

CORE ELEMENTS

The Code has three 'core elements' that reflect the broader working environment and the responsibilities of all practitioners and advisors:

1. Self-responsibility

Practitioners and advisors carry personal responsibility and accountability for their own ethical practice, and for maintaining competence by continual learning. It is expected that the practitioners and advisors maintain a high level of ethical understanding and practice such that the ability to provide survivor support services is not compromised or brought into disrepute.

2. Responding to survivors

The primary professional responsibility is to male survivors who seek the support services provided by MSTTT. In providing these services, practitioners and advisors are expected at all times to promote an environment in which the human rights, values, customs and spiritual beliefs of the male survivor, his family and his community are respected and upheld.

3. Professional practice

Practitioner and advisors assume a major role in determining and implementing acceptable standards of ethical practice, management, research and education. It is expected that practitioners and advisors are active in developing support services that reflect a core of research-based professional knowledge and that they participate in creating and maintaining equitable social and economic working conditions within their organisations.

ETHICAL PRINCIPLES

The Code articulates 10 principles that collectively embrace the MSA/MSTTT core values:

- **Respect for human dignity**
- **Beneficence (doing good) and non-maleficence (avoiding harm)**
- **Confidentiality and privacy**
- **Trust**
- **Promotion of autonomy**
- **Honesty & Integrity**
- **Fairness**
- **Skilfulness**
- **Professionalism**
- **Cultural sensitivity**

The following table articulates the practitioner's particular responsibilities to apply those principles and the implications for the inclusion of those principles in the design and implementation of support services for the male survivors of sexual abuse.

Principle & Core Value	Survivor/community – practitioner relationships	Implications for professional practice
Self-responsibility focus	Survivor/community focus	Professional practice/service focus

1. Respect for the dignity of others

Respect for human dignity indicates that every individual is treated with respect for his/her intrinsic human value and uniqueness.	The practitioner ensures that care and support is delivered in a way that is acceptable to the survivor and his family and community.	The professional responsibility is to maintain the dignity, welfare and rights of the survivor (individuals, whanau, families, groups, community) that they are serving.
	The practitioner will show sensitivity towards client values, customs and spiritual beliefs.	Professional practices should always be compatible with the safety, dignity and rights of survivors.
	The practitioner recognises that each survivor is a unique individual worthy of one to one attention.	Practitioners should take the time to examine each client's belief system in sufficient detail and respond accordingly.
	It is the responsibility of practitioners to avoid dual or multiple relationships and other	Each new survivor should be taken on only if, and when, such conflicts can be clearly avoided. Any such conflict that occurs during support

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	conflicts of interest when appropriate and possible	should deal with the promptly and openly.

2. Beneficence (to do good) and non-maleficence (to do no harm)

The good that is sought is both the individual good of the survivor, and includes his whanau/ family, community and the public	The practitioner recognises that the good that is sought for each survivor relates to the seeking of a positive outcome in both the eyes of the survivor and the practitioner.	The practitioner should discuss the overall aim of the support services that will be offered to him and his family or any other nominated support person/s.
	In situations where harm to the survivor is possible the practitioner's goal should be to minimise harm and trauma.	The practitioner should examine all possible avenues with the survivor for the minimisation of harm and the promotion of good outcomes.
	The practitioner should establish and maintain a partnership with the survivor where each has equal input in achieving and maintaining good outcomes.	Practitioner discussions should allow a high degree of give and take, compromise and include restatement of the aim of the support service.
	The practitioner should be mindful of the need to respond to situations where client safety is a central concern at all times.	Professional practices should be compatible with the safety, dignity and rights of people.
	The practitioner recognises that there is a particular need to respond appropriately in situations where the survivor feels threatened or in danger from others.	The practitioner takes appropriate action to safeguard individuals when a co-worker or any other person endangers their recovery.

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	In any work that involves children/ young persons their welfare is paramount.	Special care and attention to the needs of young people is required.

3. Trust

Trust is of paramount importance in any relationship between the survivor and the support provider	Practitioners recognise that there is an intense level of affective involvement inherent in a professional relationship.	Practitioners should avoid or try to stop any practices that may be seen as taking advantage of survivors.
	Practitioners should ensure that the difference between professional and personal involvement with survivors is explicitly understood and respected	Practitioners must never abuse a position of trust to seek special benefits, financial or personal gain. Practitioners must not engage in or encourage sexual intimacy with a survivor at any time during the professional relationship or for at least two years following its termination.
	Of special concern is the provision of incomplete disclosure when obtaining informed consent for a proposed support service. In such cases, the survivor's right to self-determination and the importance of individual and public trust in the practitioner's discipline should not be placed in jeopardy.	It is the responsibility of practitioners to avoid dual or multiple relationships and other conflicts of interest when appropriate and possible. When such situations cannot be avoided practitioners have a responsibility to declare that they have a conflict of interest, to seek advice, and to establish safeguards to ensure that the best interests of members of the public are protected.
	Practitioners understand that both individual and public trust must be protected in all activities. This means that the practitioner will always act	Conflict-of-interest situations should be avoided because they can lead to distorted judgment and can motivate practitioners to act in ways that meet their own

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	in the best interests of the survivor and public.	personal interests rather than the best interests of the public.

4. Confidentiality and privacy

Confidentiality signifies loyalty towards a survivor and his/her family/whanau when entrusted with information that should normally remain private.	Practitioners recognise and promote survivors' rights to privacy; are aware of relevant legislation and follow procedures that provide for informed consent, and confidentiality.	Professional practices include measures taken to ensure privacy during consultations, the safe storage of information, and constant vigilance concerning the disclosure of any client details.
	Whenever possible, survivors should be the primary source of information about themselves and their own issues.	Confidentiality must be maintained from first contact until after the professional relationship has ended. Information is retrievable as long as necessary for interests of the survivor, or as required by law.
	In situations where family/whanau input is desirable or necessary, the practitioner should ensure that confidentiality is maintained within the group.	Practitioners should convey to family/whanau the responsibilities they have for the protection of each other's confidentiality.
	Privacy and confidential matters are treated with great care throughout the entire professional relationship.	Practitioners will explain to survivors the limitations to confidentiality. No disclosure without informed consent except for survivor or public safety, diminished capacity or legal requirement
	Practitioners operate with a desire to maintain privacy whenever possible but are also guided by an equally important desire to	Practitioners will permit survivors the opportunity to check the accuracy of all documentation about them except for information that is confidential to others.

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	maintain survivor safety, or the safety of those associated with the survivor.	
	The practitioner holds in confidence personal information about survivors and uses judgement in sharing this information.	Unless the client has agreed beforehand, the practitioner should not share personal information about the survivor with other practitioners.

5. Promotion of client autonomy

This indicates an understanding that the survivor should normally be allowed to choose his own support/care - within the realms of safety.	Practitioners should support survivors to achieve their own recovery goals and potential by supporting their right to self-determination but without infringing on the rights of others.	The survivor should be given enough information and support/care options, including the right to refuse, to allow him/her to make a fully informed decision about their future care.
	The practitioner ensures that the individual survivor receives sufficient information on which to base consent for their care/support.	Each survivor should be provided with all rights information as required by NZ legislation, and information regarding support service options and processes.
	Good communication and information sharing between practitioner and the survivor is essential if the survivor is not able to give fully informed consent for any proposed support service	Use clear, understandable and appropriate language to convey to survivors the purpose of the support services offered and sufficient to provide a basis for informed consent.
	Whenever possible, survivors should be the usual primary source of information about	Every effort should be made to obtain as much information as possible from the client himself.

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	themselves and their own issues.	
	The practitioner must use their professional judgement regarding individual competence when accepting and/or delegating responsibility or proposing support service options for each survivor and/or their family.	If necessary for survivor welfare, other important sources of information might include members of the whanau, and/or significant others.

6. Honesty & Integrity

Honesty requires that practitioners use complete openness, frankness and sincerity (and plain speech) when communicating with survivors.	Practitioners must represent themselves and their profession in an open clear fashion that avoids any possibility of deception.	Practitioners must maintain their competence in the declared area(s) of competence, as well as in their current area(s) of activity.
	Practitioners are aware of the need to avoid any action that may damage the trust of the survivors or bring their colleagues into disrepute.	Practitioners should accurately represent their own and their colleagues' activities, functions, contributions, and likely or actual outcomes of support activities.
	Practitioners must be prepared to honestly admit the limits of their capabilities to survivors if, and when necessary.	Practitioners acknowledge the limitations of their own and their colleagues' knowledge, and support services.
	Practitioners are expected to accurately identify their own qualifications and experience and avoiding claiming or implying any personal capabilities or professional qualifications	Practitioners make very effort to fully inform the survivor of the practitioner's status.

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	beyond those one has actually attained.	
	Practitioner are not expected to be totally value-free or without self interest in conducting their activities. However, they are expected to understand how their biases must be put aside when dealing in an open and sincere way with each survivor.	Practitioners should not treat any survivor in an insincere or cavalier fashion, or show any distaste, dislike or disregard for a survivor’s chosen way of expression or being.
	Practitioner recognise that personal issues may interfere with professional practice and relationships.	Practitioners should act promptly if personal issues prevent their ability to deliver a professional service for survivors.

7. Fairness

Fairness indicates that the practitioner will operate within a spirit of even-handedness and impartiality with all survivors	Practitioners recognise that all persons are entitled to benefit equally from the contributions of the practitioner’s discipline, and to equal quality in the processes, procedures, and services being offered, regardless of the person’s characteristics, condition, or status.	Although individual practitioners might specialise and direct their activities to particular populations or might decline to engage in activities based on the limits of their competence or acknowledgment of problems in some relationships, they must not exclude persons on a whimsical or unjustly discriminatory basis.
	Practitioners should not show bias or favouritism towards any particular survivor. That is, each survivor should be treated in a fair and similar fashion.	All survivors must be treated in ways that reflect a willingness on behalf of the practitioner to meet their needs without favouritism or bias. However, practitioners are entitled to protect themselves from serious violations of their own

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		moral rights (e.g., privacy, personal liberty) in carrying out their work.
	Practitioners should not mislead survivors in regard to the availability of services that may be more appropriate in an alternative delivery system.	Practitioners ensure all clients are informed, where relevant, of the availability of other relevant services.

8. Skilfulness

Skilfulness involves the practitioner in striving for best practice in all dealings with survivors.	Practitioners aim at all times to enable survivor recovery through proficient practitioner practices.	This means working within the limits of one's competence and qualifications and being prepared to hand over support if and when the practitioner's expertise is no longer adequate.
	Practitioners are obliged to acquire, contribute to, and use existing knowledge that is most relevant to the best interests of those concerned.	The practitioner carries personal responsibility and accountability for his practice, and for maintaining competence by continual learning.
	Practitioners should only undertake survivor support services that they are personally and professionally competent to handle.	Competency gained in one field of activity must not be used to improperly imply competency in another.
	Practitioners share with society the responsibility for initiating and supporting actions that meet the health and social needs of the public, in particular those of vulnerable populations	Engaging in self-reflection regarding how their own values, attitudes, experiences, and social context influence their actions, interpretations, choices, and recommendations.

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	Practitioners understand that the delivery of services for Maori, Pacific and other cultural groups requires special knowledge of the needs of these groups and particular cultural skills.	Practitioners engage in professional development in cultural competence, recognise any limitations they may have, and work with legislation, policy and partnership with the cultural community.

9. Professional conduct

Professional conduct implies that practitioners will act in a responsible, proficient and skilful manner when dealing with survivors by:		
– Accepting full responsibility for his own interventions	The practitioner accepts professional responsibility for one's own actions, decisions, and the ensuing consequences.	Members only engage in those activities in which they have competence or for which they are receiving supervision.
	The practitioner is fully aware that his/her interventions will impact significantly on the lives of the survivor, his whanau, and within the community.	The practitioner at all times maintains standards of personal conduct that reflects well on the profession and enhance public confidence.
– Avoiding any acts that will damage the reputation of the profession.	The practitioner accurately identifies his own qualifications and avoids claiming or implying any personal capabilities or professional qualifications beyond those one has actually attained.	The intent of this ethic is to increase the probability that practitioner's activities will benefit and not harm the survivors, their families, and communities
– Maintaining professional affiliations, skills and practices.	The practitioner at all times maintains standards of personal conduct that reflect well on the	The practitioner keeps up to date, reading suitable research and journal articles, attending and contributing to conferences, etc.

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	profession and enhance public confidence.	
<ul style="list-style-type: none"> – Sustaining a cooperative relationship with co-workers in ethical practice and other fields. 	Every practitioner will play his/ own part in maintaining adequate links with other practitioners and members of the public and keeping up to date with community orientated developments.	Participate in ongoing professional development, continuing in and contributing to male survivor knowledge and education, and liaison with colleagues and other professional associations relevant to one's field.

10. Cultural sensitivity

To have a responsive and positive regard for cultural diversity that refuses to allow any individual to feel unappreciated, ignored or even insecure because of their real or even presumed cultural beliefs and values.	Practitioners recognise that every human being has an innate worth that is reflected in the ways that he responds to their environment and community.	The practitioner upholds and protects the survivor's cultural identity by acting only in a manner that is supportive of the client's mana or cultural wellbeing.
	An individual, or a collection of related individuals, may define themselves, or choose to be defined by identifying themselves as being part of a culture, national or ethnic origin, colour, race, religion, sex, age, gender, marital status or sexual orientation.	Survivors have a cultural background that is of relevance to them. In cases involving Maori clients, that background is often related to place, mana and relationships in a fashion that is sometimes significantly different from non- Maori. In other cases, such as non-Maori, the need for cultural recognition and respect is often important to them in a variety of different ways depending on their chosen cultural mores.
	In New Zealand, the Bill of Rights and the Human Rights Act makes it implicit that the socio-cultural beliefs of every	Practitioners should be familiar with any appropriate legislation, agreements, policies or documents that aim to enhance the rights of all cultural affiliations in New Zealand.

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	individual are to be protected.	
	In New Zealand, the Bill of Rights and the Human Rights Act makes it implicit that the socio-cultural beliefs of every individual are to be protected.	Practitioners should be familiar with any appropriate legislation, agreements, policies or documents that aim to enhance the rights of all cultural affiliations in New Zealand.
	Furthermore, The Treaty of Waitangi (and associated legislative changes) is the basis for the principles of protection, participation and partnership between Maori and non-Maori.	Practitioners should be informed about the meaning and implementation of the principles within the Treaty of Waitangi, and seek advice and training in the appropriate way to show respect for the dignity and needs of Maori in their practice.