Ethical guidelines for researching counselling and psychotherapy

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Introduction

The British Association for Counselling and Psychotherapy is committed to fostering the best possible research into its areas of activity, whether this is undertaken by its own members or by independent researchers. Research is taken to include systematic monitoring and evaluation of services, as well as small and large-scale academically-based studies of issues related to counselling and psychotherapy.

The aim is to promote and inform good research practice. The guidelines are applicable to the wide range of research positions and methodologies that contribute to the advancement of knowledge and understanding in the field of counselling and psychotherapy. BACP is committed to methodological pluralism, which actively values different approaches to research and promotes dialogue and collaboration across different research traditions.

These Guidelines are consistent with and should be read alongside the Ethical Framework for Good Practice in Counselling and Psychotherapy (BACP 2002). As this Association is firmly committed to public safety, these Guidelines may be used within the Professional Conduct Procedure, to consider issues arising from research undertaken by any of its members. The Guidelines are also intended to be of assistance to independent academics and others conducting research in the field of counselling and psychotherapy.

This guidance is designed to address two levels of ethical practice. Baseline issues that concern protecting public safety are indicated by the use of the imperatives, such as ‘must’ or ‘should’. Matters which are directed towards informing the practice of ethically conscientious practitioners working above a minimal level of safety are presented in a more educative voice in order to promote ethical mindfulness in all aspects of research.

The credibility and public standing of counselling and psychotherapy requires that practitioners systematically and continually seek to enhance the quality, effectiveness and safety of their practice on well-founded evidence. Research has a major part to play in providing this evidence. Public policy and commercial practice have combined to create a strong expectation that all professions undertake research in order to extend, challenge or transform existing knowledge and practice and as a way of demonstrating accountability for their therapeutic work.

1 Trustworthiness

The distinctive ethical dimension of counselling and psychotherapy practice is the trust placed by clients in practitioners. This trust is not only essential to achieving the client’s aspirations but also for the practitioner to establish the quality of relationship and interaction that makes the work possible. Counselling and psychotherapy require a high level of frankness on the part of the client. The client needs to feel able to tell the truth, as he or she understands it, without withholding information merely because it is personally sensitive or discredits the speaker.

Trust is also required to face the uncertainties and sense of personal vulnerability that may be involved in the counselling and psychotherapeutic process. It is part of the practitioner’s responsibility to be sufficiently trustworthy to enable constructive working relationships with clients. Trust requires a quality of relationship between service user and provider that is sufficient to withstand any challenges arising from inequality, difference, uncertainty and risk in their work together.

Ethical researchers not only take account of the quality of trust required to make counselling and psychotherapy possible but also seek the highest possible levels of trustworthiness and integrity for themselves with regard to
  ■ the relationship with the people being researched and all other people involved directly in the research
• the discovery or construction of new knowledge and the ways in which this knowledge is communicated, and
• the application of the research to practice.

An ethic of trustworthiness sets a high standard. It requires the careful consideration of ethical issues at the appropriate time. It also requires that the appropriate actions be taken in order to justify the trust placed in the researcher(s) by all participants involved in the research and those affected by its outcome. This is a particularly challenging ethic in situations where there are differences in culture or power and status. It requires an active sense of ethical responsibility that is best supported by a commitment to openness and accountability throughout the research process.

2 Managing the risks of research

All researchers in this field are expected to have given careful consideration to any risks arising from the research with regard to
• the people potentially affected, and
• the integrity of the work undertaken.

A tension may exist between these two aspects of research. For example, the research design may arguably be strengthened by deliberately withholding information from participants or misleading them as to the purpose of the research. Such practices are usually incompatible with an ethic of trust and contrary to other ethical approaches to research involving human subjects. Reasonable steps should be taken to control and eliminate all adverse risks to participants.

Before undertaking any kind of research, the researcher should consult someone who is independent of the research and competent to identify both any potential risks to participants and also whether these have been adequately taken into account in the research design. Consultations with user groups, sponsors or host institutions may be appropriate and can strengthen the risk assessment of the proposed research. A commitment to avoiding harm to research participants may require the provision of additional support or remedial services as an integral part of the research design. Whenever unavoidable risks are identified, the researcher should consider, in consultation with appropriate others, whether it is ethically justifiable to carry the research forward and, if so, what safeguards are required.

These consultations should be at a level of thoroughness that corresponds to the anticipated level of risk. In circumstances of low risk, the use of independent mentoring or supervision may be sufficient. In circumstances that involve withholding or significantly altering the provision of services to clients, it is necessary to convene an ethics committee, in which

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1 The World Medical Association Declaration of Helsinki (2000) states that ‘considerations related to the wellbeing of the human subject should take precedence over the interests of science and society’. The Preface to the latest edition of the Research Governance Framework for Health and Social Care (2003) concludes, ‘In whatever context research takes place, the interests of research participants come first. Those responsible must be satisfied they have taken all reasonable steps to protect the dignity and rights of participants and to manage any risks to their safety or wellbeing.’

2 For example, the implications of monitoring client ‘non-attendances’ may be adequately addressed within the usual supervision of practice arrangements. Similarly, the use of externally validated instruments may be adequately considered within counselling or psychotherapy supervision, unless they are considered likely to be problematic to clients in ways that require additional consultations. However, development of substantially ‘home grown’ or ‘in-house’ instruments may require additional input on their design and implementation.
representatives of a variety of perspectives, including lay members, are represented. In some settings (for example the National Health Service) this task is undertaken by an established system of ethics committees.

Some studies may be relatively unproblematic in the way that data is collected or analysed but may raise significant ethical issues over how the research is published or disseminated. For example, case studies of work with clients may require careful consideration as to how personally sensitive information is reported and the consequences for the people concerned following publication. This issue is considered further in the section 3.2 on ‘protection of personally sensitive information’ and section 4.2 concerning ‘publication and dissemination’.

In research that requires an extended relationship between researcher and participants and/or the disclosure of personally sensitive issues, it is best practice to ensure that the researcher is supported by regular and ongoing supervision, that is comparable to the ethical requirements for supervision in counselling and psychotherapy*. Receiving adequate personal and professional support in which ethical issues can be addressed lowers the exposure to adverse risk(s) for both the research participants and the researcher – see also section 4.6.

In spite of thorough initial risk assessment, some risks may only become apparent as the research progresses. Best practice includes the possibility of consultations with sources of appropriate expertise whenever the researcher encounters unanticipated risks or faces significant ethical dilemmas.

Identifying and responding to the risks associated with any research project are basic ethical responsibilities of all researchers, for which they should be willing to be fully accountable. The avoidance of harm to research participants should be the overriding ethical concern.

3 Relationships with research participants

The relationship between the researcher and the participants in the research is a major focus for ethical consideration in all types of research. The way the relationship is constructed and managed may vary according to whether the researcher is positioning him- or herself as a detached and impartial observer, or as an involved and value-committed participant. The integrity of the research requires that researchers

■ establish relationships that are consistent with the type of research being undertaken, and
■ respond to the ethical challenges of that mode of relationship.

In all types of research, there are a number of issues requiring careful consideration.

3.1 Consent

The right to give or withhold consent to participate in research is a basic human and civil right. Good practice requires that:

1. The adequately-informed, full and freely-given consent of all participants should be obtained prior to their contribution to the research.
2. Careful consideration should be given to linguistic or cultural barriers to the consent process.
3. It is normally good practice to give participants a written statement of the research aims, procedures and information about any potential risks. This statement constitutes the basis on which the research will be conducted. Where appropriate, it may take the form of a contract to be signed by both participant and researcher.
4. All participants should receive information about the name and address of an independent

* See sections 25-27 in Guidance on Good Practice in Counselling and Psychotherapy (BACP, 2002)
person or body with whom they may consult, or to whom they may complain, regarding any concerns arising from their involvement in the research study.

5. Participants should retain the right to modify or withdraw their consent at any point during the research, including following the completion of data collection and analysis.

6. Considerable care should be exercised if a participant is unable to give personal consent on his or her own behalf for any reason, including lack of capacity due to immaturity, illness, distress or intoxication. Consideration needs to be given to whether there is adequate justification for continuing with the research or whether consent from someone who is the primary carer of the person concerned could suffice until such time as the participant is able to give an adequate consent. Any research undertaken on this basis requires demonstrable attentiveness to the wellbeing of the research participant(s), adequate independent ethical scrutiny and accountability to people responsible for their wellbeing.

Best practice in striving for trustworthiness will take account of the difficulty of consenting to something that may only seem a remote possibility at the time of giving consent. The validity of the consent may be called into question where it has been made some time earlier or in significantly different circumstances. Best practice in this area approaches consent as a process, in which participant consent is reviewed at key points during the course of a study.

Seeking consent for participation in a research study at some point after the person has entered counselling or psychotherapy (for example, contacting clients who are in the process of receiving therapy to invite them to take part in a follow-up interview) raises serious issues about the potential for coercion. The practitioner-researcher needs to consider how free clients would feel to refuse in these circumstances. Research procedures in such studies must be based on an appropriately rigorous preparatory risk assessment – see sections 2 and 3.5.

A client’s refusal to participate in research must not interfere with the counselling or psychotherapeutic relationship.

3.2 Protection of personally sensitive information

The adequate protection of personally-sensitive information about identifiable individuals is a major ethical concern for anyone conducting research about counselling and psychotherapy and associated activities. Good practice requires that:

1. The standards and procedures adopted for the research should be as consistent as possible with the relevant services to clients. Careful consideration needs to be given to adequately protecting personally sensitive information from unauthorised disclosure. The researcher(s) should offer no less protection of personally sensitive information about identifiable individuals than a conscientious frontline practitioner in a similar area of work.

2. Careful consideration is required regarding best contemporary practice and legal requirements concerning data protection. This will include: ensuring adequate consent; restricting the collection, storage and use of data gathered to the purpose for which the participant's consent has been given; the accuracy of data; providing adequate protection for the data against unauthorised access, use or disclosure; and limiting the duration of the storage of any data to the purpose or time limit for which consent has been obtained.

3. Honouring any promises about confidentiality carries special ethical weight because this is central to practitioner and researcher trustworthiness in this field of work.

4. Researchers should be mindful of potential situations in which a commitment to confidentiality may conflict with other ethical considerations, particularly regarding preventing serious harm to the research participant or others, and circumstances in which disclosure of information may be legally required. Reasonable care should be taken in considering the possibility of such circumstances arising in the research. Any foreseeable limitations that could impact adversely on participants should be explicitly included in any promises made to participants, or in the terms of their consent. Some participants may require reminders of any limitations to confidentiality before they incur unwanted consequences. During the planning stage of any research study, careful consideration should be given to how any disclosure of information about abuse, malpractice or criminal behaviour will be managed. The likelihood of such disclosures and the appropriate response(s) to these should form part of the preparatory risk analysis – see section 2.
One of the valid reasons for undertaking research may be to bring into public awareness matters that have previously been kept invisible, either intentionally or unintentionally. For example, research undertaken in association with counselling and psychotherapy has contributed to better understanding of aspects of in-patient care for children, sexual abuse, bullying and domestic violence that had previously been concealed by privacy and confidentiality. This is a salutary reminder that confidentiality and privacy are not in themselves always the primary ethical imperatives. Some types of secrecy can assist or conceal harm to people. Researchers can expect to encounter dilemmas over the protection of personally sensitive information because research in this field is frequently about private experience, with the aim of generating knowledge and understanding for a wider audience. Some of the ways of resolving these dilemmas may require innovative ways of approaching the dissemination and publication of research results and outcomes – see section 4.2.

Public policy and legislation are undergoing a period of relatively rapid change with regard to data protection and freedom of information that has implications for undertaking research (see Information Commissioner’s Office in section 7 for research being undertaken in the UK).

3.3 Researching areas of vulnerability in people’s lives
Much of the research undertaken in this area of work will include or be exclusively concerned with areas of vulnerability in people’s lives. Research concerning socially sensitive issues may create areas of vulnerability for people who are fully functioning in all other ways. Some people may be socially vulnerable due to age, disability, physical or mental health, social, relational or financial circumstances. Vulnerability in research can arise in many different ways. It is possible that areas of unanticipated vulnerability may only become apparent during the research process and may form part of the findings. Good practice includes:
1. Taking adequate account of the vulnerabilities of participants in research design and implementation, as fundamental to the integrity of the research. Inadequate consideration of sources of vulnerability will compromise the quality and completeness of information offered by participants to the researcher(s).
2. Ensuring that the wellbeing of participants experiencing vulnerability is respected and that they are not caused any avoidable distress. Care should be taken to minimise and, when possible, to alleviate any distress caused to research participants.
3. Avoiding vulnerable groups becoming over-researched.
4. Considering the impact on clients of being excluded from the research when other clients of the same practitioner or service are included. For example, will they conclude that they are deficient in ways that may adversely affect their wellbeing?

3.4 Cultural and social diversity
All research is likely to involve the researcher looking through the lens of his or her personal values at the experiences of others that may be shaped by different values. This issue is particularly relevant to ethnographic research but is not confined to this research methodology. Good practice requires:
1. Sensitivity to cultural and social diversity in the treatment of participants and information concerning them.
2. Researcher reflexivity concerning the impact of differences in values and social or cultural experience on the research and transparency about any effects in collecting, processing and reporting the outcomes.
3. Seeking appropriate consultative support to understand significant cultural or social differences and to enhance researcher sensitivity.
4. Where appropriate and possible, actively seeking research collaboration with members of the cultural or social group being studied.

The overall ethical aim is that all people involved in the research should be treated respectfully and with appropriate cultural sensitivity at all points in the research.

3.5 Research by practitioner providing a counselling or psychotherapeutic service
In the field of counselling and psychotherapy there is a long history of the practitioner researching work being undertaken with his or her own clients. However, the nature of the
client-therapist relationship raises significant ethical issues with regard to this form of inquiry. The dual relationship created by practitioners undertaking research on their own counselling or psychotherapeutic service is very likely to affect, either positively or negatively, both the therapy and the research. Good practice requires that:

1. Care is taken to ensure that the undertaking of any research by the practitioner is both beneficial to the client and also consistent with the integrity of the research.

2. Thorough consultation, with both a research consultant or ethics committee, and the practitioner's counselling or psychotherapy supervisor, is undertaken before the research commences and continues throughout the duration of the research.

3. The challenge of obtaining free and informed consent in these circumstances is adequately considered and the procedures for obtaining consent outlined in section 3.1 followed.

4. The impact of the dual relationship is carefully monitored and, when appropriate, addressed in any reports of the research process and outcomes.

5. The use of any records is restricted to the purpose(s) for which they were created and authorised by the client's consent.

4 Research integrity

Research integrity requires a robust ethical commitment to fairness, honesty and competence in all aspects of the work.

4.1 Management of data collection and analysis

There is increasing awareness of the messiness and complexity of conducting all types of social research. This Guidance encourages openness about the challenges and difficulties of researching this field, as a valued aspect of the educational potential of the research undertaken. Good practice requires:

1. A firm commitment to striving for fairness and honesty in the collection and analysis of all data and in how those findings are presented, as fundamental to the integrity of the research.

2. Openness about the methods of data collection and analysis and any difficulties or limitations that have been encountered. A commitment to transparency greatly enhances the usefulness of the research to the end users.

3. Ensuring that data is adequately protected from interference or unauthorised access and use.

4. Ensuring that data collection and analysis are undertaken competently and accurately.

5. Making careful use of opportunities that arise during data collection and analysis for deliberation about the applicability of any findings or about any limitations in their applicability.

What is considered to be good practice in data collection and analysis is highly dependent on the selected research design and its underpinning philosophy about the nature of being (ontology), the theory of knowledge (epistemology) and the systematic application of research design and methods (methodology).

Technology for gathering, organising and analysing information is developing at a considerable pace. Established practices with traditional approaches to research do not always transfer directly to new technology. One of the recurrent characteristics of information technology has been to create new ethical and technical challenges with each innovation. For example, the advantages of conducting web-based surveys can be considerable in terms of expanding the range of potential participants and achieving greater efficiency in researcher time and costs. However these advantages may need to be balanced by the difficulty the researcher will have controlling and evaluating the circumstances in which the replies are made. A respondent may be influenced by a third party, intoxicated, consulting other sources of information or simply acting frivolously. Further refinement of the research process may be required to ensure the quality of the data collected. Technological innovation not only opens up opportunities but also creates challenges for producing good research – see section 7 about searching for further guidance.
4.2 Publication and dissemination

There is an ethical expectation of researchers that they actively seek opportunities to communicate any learning from research that is relevant to participants, practitioners, policy makers, academics and others with valid interest in the research. Participants may reasonably regard this as an expression of respect for the time and effort they have contributed to the research. Counselling and psychotherapy have a growing need for research-based knowledge. Significant findings will only become known if they are communicated effectively to the relevant audiences. Different audiences may require different forms of communication, if the research is to be perceived as relevant and comprehensible. Good practice requires that:

1. All reports of research should be fair and honest.
2. The researcher makes reasonable efforts to communicate effectively with the intended audience.
3. Careful consideration is given to communicating the outcome of any research to those who have contributed to the process, especially voluntary participants, as an acknowledgement of their contribution.
4. The researcher takes into account that communication of the research outcomes may conflict with the obligation to protect personally sensitive information about identifiable individuals. The nature of these challenges and the safeguards required may vary between audiences. Audiences who know the identity of practitioners in the research can be particularly challenging as they are often well placed to deduce the identity of other people, especially clients, who would otherwise remain anonymous. Deductive disclosure of the identity of participants is a hazard of this area of research and one that can cause considerable distress. Where anonymity is required, a variety of methods may be used. These include aggregating the data into groups; excluding personally identifiable data, although this alone may not be sufficient to protect someone’s identity from a close colleague or family member; conflation of several experiences into a representative account or case study; explicitly producing fictional accounts that convey salient aspects of the research findings.
5. Careful consideration is given to the potential vulnerability of participants who have freely and rationally consented to publication of sensitive information about themselves. Experience suggests that some people may be unexpectedly shocked at the experience of personal exposure in ways that can undermine the relationship with the researcher and/or other practitioners. It is often advisable to explore in concrete terms how the person is likely to respond and to clarify what, if anything, can be done in the event of an adverse reaction.
6. Claims about the application of the research should be coherent with the approach to the research undertaken, carefully considered and presented in ways likely to inform or enhance good practice. For example, some approaches to research are more suitable for producing generalisations, whereas others provide insight into contextually specific situations. Both contribute to knowledge but entail different challenges for the researcher in ensuring that the research design supports the type of finding(s) presented and any recommendations for practice based on these.
7. Attribution of authorship, copyright or other moral claims to the research should be fair and accurate.

Transparency about the nature of the challenges associated with the publication and dissemination of research findings and the strategies adopted to resolve those challenges enhances the fairness and honesty of the report.

4.3 Competence

Competence in the design, planning and conduct of research is necessary to safeguard the wellbeing of participants and to ensure that the investment of time and effort made by them will result in meaningful and valid contributions to knowledge. Researchers are responsible for ensuring that they have received sufficient training in order to design and implement a study that reflects best practice within the particular methodology they are using. Training should include a thorough exploration of ethical dilemmas and a review of practical strategies for addressing these.

Research studies require high levels of researcher competence if they involve any of the following:
complexity of design or implementation
- vulnerable aspects of participants’ lives or sensitive topics
- exposure of participants to risk
- the collection of legally sensitive information
- dual therapist-researcher relationships with participants.

All research should be undertaken by someone who is sufficiently trained, experienced and supported to be considered competent for that work. A basic-level qualification for an independent researcher working mostly autonomously is usually at Master’s level. The competence of the researcher(s) to undertake the proposed research should be considered in the initial risk assessment – see section 2.

4.4 Research culture
A research culture that fosters open exchange of knowledge and discussion of differences of opinion can contribute greatly to enhancing the quest for research integrity. Research involving contributions from different research traditions or academic disciplines can help to create greater mutual understanding between researchers and provides opportunities for studying the same subject or issue from several different perspectives. Good practice in research:
1. Encourages multidisciplinary work that fosters open discussion across research, therapeutic and academic traditions.
2. Prohibits researchers from accepting research contracts that demand a particular outcome. It obliges researchers to consider carefully whether a requirement to use a particular methodology is consistent with the research aims, or an inappropriate constraint that could distort the findings.
3. Demonstrates respect for the intellectual property of others and financial probity.

4.5 Working relationships with other researchers
Good practice in research:
1. Encourages personally and professionally respectful relationships between researchers.
2. Fosters open-minded and rigorous debate, especially when this is undertaken with appropriate respect of other researchers as people and for their considered views.

4.6 Researcher’s responsibilities to self
Researchers have responsibilities to themselves to ensure personal safety and an entitlement to be treated ethically. Good practice in research requires:
1. Careful consideration of the personal challenges and vulnerabilities involved in undertaking the research.
2. Adequate professional and personal support to overcome challenges posed by the research.
3. Actively seeking conditions for undertaking the research that are compatible with self respect, as set out in the Ethical Framework for Good Practice in Counselling and Psychotherapy (BACP, 2002).

An ethic of trust requires combining a robust personal ethical commitment to being trustworthy with actively striving to secure a place within the network of professional relationships and organisational systems that will enable this ethical commitment to be honoured. The researcher makes an important contribution to securing the opportunity to be trustworthy but may not be solely responsible for the relational and systemic aspects of his or her role.

iv This requirement permits case studies to be conducted that are primarily intended as training in practitioner skills or research at lower levels of qualification than Master’s. It also permits students on Master’s level courses to undertake suitable research, typically as part of a dissertation, provided that they have received sufficient research training and are adequately supported to undertake their proposed study. Accountability for the suitability of any research undertaken within a course is primarily the responsibility of the training provider. The student is responsible for day to day implementation within an appropriate infrastructure. Guidance for researching social care (Department of Health 2004 s1.2.8) explicitly includes research undertaken by students within its governance requirements.
4.7 Responding to complaints

Research integrity is strengthened by deploying strategies and procedures for responding to complaints promptly and fairly. Sometimes an apology is an appropriate response. Complaints concerning the conduct of BACP members can be considered by the formal Professional Conduct Procedures of this Association (BACP 2002).

5 Research governance

Research governance is a relatively new development in the field of health and social care. It addresses the previous two sections on relationships with research participants and research integrity and may increasingly be applied to research in other sectors where counselling and psychotherapy are provided. Research governance aims to ensure continuous improvement and the reduction of unjustifiable variations in the conduct of research within defined fields of activity. Its purpose is to safeguard public confidence in research and the services studied by:

- enhancing ethical and academic quality
- promoting good practice
- reducing adverse incidents and ensuring that lessons are learned
- preventing poor performance and misconduct.

Responsibility for each of these issues is divided between key stakeholders in the research in order to clarify and enhance lines of responsibility and accountability.

The Research Governance Framework for Health and Social Care defines research as ‘the attempt to derive generalisable new knowledge by addressing clearly defined questions with systematic and rigorous methods’ (Department of Health, 2003: 1.9). Later interpretation of the definition positions it as ‘deliberately inclusive’ covering ‘most forms of disciplined enquiry involving systematic collection of data and using explicit research methods and techniques.’ Generalisability is also defined inclusively. It ‘covers conceptual as well as statistical level [generalisation] and includes studies that aim to generate, rather than test hypotheses’ (Department of Health, 2004: 1.2.6).

While there is widespread support across the social sciences for maximising the integrity and utility of research, there are academically and ethically-based differences of view about how best to achieve these aims for the full range of research approaches and applications. Research concerning counselling and psychotherapy undertaken outside health and social care may need to develop contextually appropriate ways of addressing governance issues.

Research integrity and researcher trustworthiness are interdependent in reinforcing or undermining each other. Research governance reminds researchers that the quest for good practice in research requires not only the commitment of researchers to work to the highest possible standards as individuals but also for researchers to collaborate effectively with other researchers and stakeholders to ensure research quality.

This Association encourages the research community to carry out research into the impact and effects of ethical procedures and is committed to reviewing the present Guidelines on a regular basis, through a process of open consultation.
6 References


7 Other sources of ethical guidance


Data Commissioner’s Office. www.informationcommissioner.gov.uk

Internet-based research – search for ‘internet mediated research’

National Institute for Clinical Excellence. Research and development strategy. www.nice.org.uk

Office for Human Research Protections, US Department of Health and Human Services. ohrp.osophs.dhhs.gov/polasur

Summary of key ethical issues to be addressed during the research process

**Ethical orientation**
- having an adequate knowledge of the *Ethical Framework for Good Practice in Counselling and Psychotherapy* (BACP, 2002)
- ensuring that the research is consistent with the requirements of trustworthiness in the practice of counselling and psychotherapy

**Risk**
- a thorough risk assessment of any harm to participants or to the integrity of the research, including the competence of the researcher to undertake the work, is to be undertaken prior to starting the research (sections 2 and 4.3)
- ensuring that participants are adequately protected from harm and that the researcher is fully accountable for any risks associated with the research
- ensuring adequate consultations take place about ethical issues prior to and during the research process

**Relationships with research participants**
- obtaining participants’ consent prior to involvement in research (section 3.1)
- protecting participants’ rights to modify, consent or withdraw throughout research process and ensuring that a refusal to participate does not adversely affect services to that person
- managing and protecting personally sensitive information within the research in ways that are compatible with the service being researched (section 3.2)
- taking reasonable steps to anticipate any conflicts between confidentiality and other ethical obligations (section 2.4)
- taking adequate account of any vulnerabilities of participants (section 3.3)
- ensuring that all participants are treated respectfully and with adequate cultural sensitivity (section 3.4)
- adequately protecting the client’s interests and vulnerabilities where the researcher is also the provider of services to the client (section 3.5)

**Research integrity**
- ensuring fairness and honesty in the collection and analysis of research data (section 4.1)
- communicating any new learning or knowledge effectively to the appropriate audience (section 4.2)
- being competent to undertake the research (section 4.3)
- fostering a research culture that supports the open exchange of knowledge (section 4.4) and constructive relationships with other researchers (section 4.5)
- taking adequate account of own needs as researchers for personal safety and being treated ethically (section 4.6)
- making provision for prompt and adequate responses to any complaints (section 4.7)

**Research governance**
- conscientiously considering any research governance requirements applicable to the research being undertaken (section 5)