

**THE CODE OF PROFESSIONAL ETHICS
OF
THE RUSSIAN SOCIETY OF PSYCHIATRISTS**

Preamble

Since ancient times and until now, professional ethics has been an essential part of medicine. Professionalism in medicine has always meant a combination of special knowledge and the art of healing with high ethical standards.

The role of ethics is especially important in the professional activities of a psychiatrist, owing to the delicate nature of the therapist-patient relationship and the unique nature of the moral problems encountered.

As psychiatry has at its disposal means of affecting the human mind, it is an object of intense scrutiny by society. Through a psychiatrist, like any other physician, should be guided in his activity by compassion, kindness and charity, it is necessary to draw up a documentary version of generally accepted rules of professional psychiatric ethics.

This code is based on humanistic *traditions* of Russian psychiatry as well as on fundamental principles of human rights and freedoms. It was developed in accordance with ethical standards acknowledged by the international professional community.

The purpose of the Code is to highlight moral perspectives, to provide psychiatrist with a “key” to making decisions in situations that present difficult problems from ethical, legal, and medical points of view; to minimize the risk of making mistakes; and to protect psychiatrists from possible unlawful demands. The Code is also to contribute to consolidation of the professional psychiatric community of Russia.

Article 1

The main aim of the professional activity of the psychiatrist is to provide psychiatric care to anyone who needs it and to contribute to the promotion and protection of the mental health of the population.

The health and the welfare of the patient are the paramount value for the psychiatrist in his professional activity.

The psychiatrist must always be ready to help every patient irrespective of his age, race, nationality, social or financial status, religious affiliations, political beliefs, or other differences.

The psychiatrist ought not to show superiority to patients or to give preference to some of them for non-medical reasons.

The psychiatrist must take care to protect the mental health of the people; to participate in the development and improvement of psychiatric care; to draw the attention of the public and mass medical to its problems, achievements, and drawbacks; and to contribute to public education on problems of mental health.

Each psychiatrist is morally accountable of the activities of the professional psychiatric community the psychiatrist belongs to.

Article 2

Professional competence of the psychiatrist---encompassing his special knowledge and the art of healing---is the essential prerequisite for psychiatric activity.

The psychiatrist must always develop his professional knowledge and skills using all accessible sources of medical knowledge, results of scientific research, personal experience and the experience of his colleagues. Professional competence gives the psychiatrist the moral right to make important decisions independently and to guide other specialists and the staff.

The psychiatrist should seek assistance from his colleagues in case of difficulties encountered in providing psychiatric care and should help his colleagues if they have similar problems.

Article 3

The psychiatrist must not violate the ancient ethical rule of the doctor: "First of all do no harm!"

The psychiatrist must not harm his patient, causing moral, physical or financial injury, either intentionally or through neglect. The psychiatrist must not be indifferent to the actions of other persons who may be instrumental in causing such injury to the patient.

If an examination or treatment is associated with side effects, pain sensations, possible complications, application of coercive measures, and other negative phenomena, the psychiatrist must carefully balance the risk of damage and the expected positive effect.

Psychiatric intervention can be morally justified only if realistically attainable benefits for the patient out weight the possible negative effects: "The medicine must not be worse than the disease."

Article 4

Any abuse of psychiatric knowledge or the position of the doctor is incompatible with professional ethics.

The psychiatrist must not use his professional knowledge and abilities against the medical interest of patients or in order to distort the truth; nor should the psychiatrist either take medical measures or refuse them to those in need, without sufficient grounds.

The psychiatrist must not thrust his philosophical, religious, or political views on the patient. Personal prejudices or other nonprofessional motives must not influence diagnosis and treatment. The diagnosis of mental illness cannot be based only on the differences between the patient's beliefs and opinions and the generally accepted ones.

When providing psychiatric care, the psychiatrist must not take advantage of the patient's mental disability or his position as a doctor to make commercial transactions with the patient, to use the patient's labor for his own purposes, or to have sexual relations with the patient.

The psychiatrist must not assist in the patient's suicide.

The psychiatrist must not use medical methods for punishing the patient or for the convenience of the staff or other persons; and the psychiatrist must not take part in tortures, executions, or other forms of cruel and inhumane treatment towards human beings.

Article 5

The psychiatrist is morally obligated to respect the patient's autonomy, honor, and dignity and to look after the patient's rights and legal interests.

Humiliation of the patient and inhumane and unmerciful attitudes towards him are serious violations of professional ethics.

The psychiatrist must be extremely careful with the private life of his patient: he must not interfere in it without the patient's consent, and if there are medical indications for controlling the patient's behaviors, the interference should be confined to clinical necessity; in such cases the psychiatrist should inform the patient about the nature of the measures taken and the reasons for them.

In caring of his patients, the psychiatrist should follow the principle of minimal constraint of freedom and should help develop the patient's responsibility for his actions.

In case of conflicting interests, the psychiatrist must give preference to the interests of the patient, unless their realization could cause serious damage to the patient and threaten the rights of other persons.

Article 6

The psychiatrist aspires to a "therapeutic relationship" with the patient, based on mutual agreement, trust, honesty, and mutual responsibility.

In case the patient fails to establish such a relationship because of his mental status, it is established with his legal representative, a relative, or other close person acting in the patient's interest. If and when the relationship is established for non-therapeutic purposes, such as for a forensic examination, its nature must be thoroughly explained to the person concerned.

The psychiatrist must discuss with the patient his mental health problems, the proposed plan of examination and treatment, and the advantages and disadvantages of relevant medical methods, without concealing from the patient any side effects and complications that have a significant probability of occurring. The psychiatrist should spare the patient psychological trauma and aspire to instill optimism for the future.

The psychiatrist must not promise his patient the impossible and must keep his word to the patient. His task is to turn the patient into an ally for achieving his health and well being.

Article 7

The psychiatrist must respect the patient's right to consent to or to refuse the offered psychiatric care after having been provided with the necessary information.

Psychiatric intervention cannot be used against or irrespective of the patient's own will, except where, because of severe mental disorder, the patient is incapable of forming a judgment as to what is beneficial for him, and when lack of such an interference might cause serious damage to the patient or to other people. Application of involuntary measures is necessary in such cases and is morally justified, though it is acceptable only within the limits defined by such a necessity.

Absence of a legal foundation for the application of involuntary measures to a patient whose mental condition seems problematic for the psychiatrist does not relieve the psychiatrist of the moral duty to search for other actions that are devoid of coercive elements. A patient's refusal of psychiatric care is a matter of concern for the doctor's conscience.

In special cases, when the psychiatrist is responsible for a compulsory examination of the patient or for other compulsory psychiatric measures ordered by the court or by another authorized body, the psychiatrist must implement such measures in strict accordance with law. If the psychiatrist does not find medical indications for compulsory measures, his moral duty is to inform the body that has made such a decision.

Article 8

Whatever the psychiatrist has been told by the patient in the course of examination and treatment, including the very fact of the provision of psychiatric care, must not be disclosed without permission of the patient or his legal representative.

The psychiatrist must not divulge confidential information obtained from another doctor, from medical documents, or from other sources, without proper permission.

The patient's death does not relieve the psychiatrist of the obligation to preserve confidentiality.

The psychiatrist is permitted to disclose confidential information to other persons irrespective of the patient's or his representative's consent only in cases specified by law or when the psychiatrist has no other means to prevent serious harm to the patient or other persons. In these cases, the patient should be informed of the disclosure whenever possible.

Article 9

In research of clinical trials of new medical methods or agents involving the patients, the parameters and conditions of the study should be determined beforehand by means of meticulous balancing of the risks for the patient and the positive effect expected.

The patient's welfare must always be more important to the researcher than public benefits or scientific interests.

Research and experiments may be carried out only with the informed consent of the patient or his legal representative, after all relevant information has been given, and it must comply with other regulations established by law.

The psychiatrist should respect the patient's right to refuse to take part in a research project for any reason. The refusal must never adversely affect the patient's psychiatric care.

Article 10

It is the moral right and duty of the psychiatrist to uphold professional independence.

When taking care of patients and participating in commissions and consultations, acting as an expert, the psychiatrist must openly declare his opinion, defend his point of view, and if subjected to outside pressures, should demand legal and public protection.

The psychiatrist should refuse to collaborate with the representatives of patients or other persons who are seeking actions that contradict ethical principles or law.

The right of the psychiatrist to defend his point of view should be combined with high personal standards and the ability to acknowledge and to correct his own mistakes, whether he discovers them himself or they are pointed out by colleagues.

Article 11

Honesty, justice, decency, respect for the knowledge and experience of others, as well as readiness to share one's own experience and knowledge, constitute the ethical foundation for relationships with colleagues.

The psychiatrist must do his best to consolidate the professional community inspired by moral principles, and to defend the honor and dignity of colleagues as one's own..

The psychiatrist is obliged to analyze impartially his own mistakes as well as the mistakes of colleagues. The psychiatrist's disagreement or criticism concerning the judgments and the actions of his colleagues should be objective, well grounded, and polite. The psychiatrist should avoid negative statements about the work of one's colleagues in the presence of patients or their relatives, except in cases of legal proceedings concerning the doctor's actions. Any attempt to enhance one's reputation by casting discredit on one's colleague is not ethical.

The psychiatrist has a moral duty to restrain dishonest and incompetent colleagues, as well as any nonprofessionals, from doing harm to the health of the patient.

Article 12

The responsibility for violation of the professional ethical code of the psychiatrist is regulated by the charter of the Russian Psychiatric Society (the charter of a professional community that adopts the present code).