

The Ethics of Caring for Self While Caring for Others

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Life happens. Changes happen. Sometimes changes bubble up at a pleasant and positive pace. Sometimes they come in torrents and can flood us—figuratively or literally. Sometimes major changes in our lives and in the lives of those with whom we live and work can spring upon us without warning. Then what ... especially when we work to help others through therapy, consulting, teaching, or research?

As psychologists we seek to adhere to the APA Ethics Code (2010), providing the best possible care for those we serve (Principle A). At the same time, we are ethically bound to avoid harming clients through our own personal limitations (Standard 3.04). The Ethics Code Principle A (Beneficence and Nonmaleficence), tells us: “Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.” Knapp, Younggren, VandeCreek, Harris, & Martin (2013) advise assessing our “personal skills inventory,” so we can be cognizant of our current strengths and weaknesses. For example, taking on a new patient with a significant personality disorder may be a welcome and challenging opportunity at one point in our life. At another time, however, when our physical, mental, or emotional resources are already taxed by personal issues with which we are dealing, that potential new patient would be better served by working with someone else.

Studies of “MAP” (the acronym used by researchers for Mental and Physical exercise) inform us about taking care of our own mental and physical health. For example, Barrett (2016) wrote: “Critical brain regions increase in activity when people perform difficult tasks, whether the effort is physical or mental. You can therefore help keep these regions thick and healthy through vigorous exercise and bouts of strenuous mental effort.” That researcher advises “pushing past the temporary unpleasantness of intense effort. Studies suggest that the result is a more youthful brain that helps maintain a sharper memory and a greater ability to pay attention.” Our patients and clients surely benefit when we have “a sharper memory and a greater ability to pay attention.” Taking steps such as healthy exercise can be considered part of the direction we receive in Standard 2.03 (Maintaining Competence). While we typically think of maintaining competence as referring directly to our clinical knowledge and skills, keeping our brains healthy is certainly part of that process.



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As Pope and Vasquez (2016) comment, “For many therapists, self-care includes creating opportunities during the day for moving, stretching, and physical exercise. Physical exercise is a major self-care strategy for many therapists, not only for its physical benefits and the break it provides from work, but also for its psychological benefits.” They warn that “neglecting self-care can lead to an empty professional life that no longer brings excitement, joy, growth, meaning, and fulfillment; as a result, we may lose interest in it.”

In conclusion, the lack of self-care could lead to conditions described in Section 2.06 (b) when a psychologist becomes aware of “personal problems that may interfere with their performing work-related duties adequately.” Then ethical psychologists will “determine whether they should limit, suspend, or terminate their work-related duties.” Here again, 3.04 is relevant. Attentiveness to our personal situations and possible limitations might lead us to make changes in how we are available to our clients, which clients and how many we choose to see in our practices, and even whether or not to take a leave of absence from our practices. ■

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