

# Code of Ethics for Occupational Therapists in Sweden



SWEDISH ASSOCIATION OF  
**OCCUPATIONAL THERAPISTS**

**Code of Ethics for Occupational Therapists in Sweden**

Adopted by the Swedish Association of Occupational Therapists's  
General Assembly in 1992, revised in 2004, 2012 and 2018.

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Layout: Tina Sandulf  
Translation: Michael Eyre  
Photo: Mostphotos AB

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# Introduction

Human occupations and activities are central to professional practice in occupational therapy. Together with the individual concerned, in his/her unique circumstances, occupational therapy interventions aim towards enabling as good a daily life as possible, with meaningful and manageable activities despite, for example, the recipient's disability/impairment or/and exposed situation.

As occupational therapists' work places great demands on the ability to weigh different norms and values against one another, a supportive professional code of ethics is required to set out the values and norms that professional practitioners are expected to comply with within the framework of the profession.

## **PURPOSE OF THE CODE**

The Code of Ethics for Occupational Therapists aims to provide guidance and support for reflection and analysis concerning professional standpoints when professional decisions are required. Regardless of an occupational therapist's field of activity, the Code of Ethics constitutes a starting point for approach and decision making within the framework of professional practice.

## Status and structure of the code

The Code of Ethics for Occupational Therapists is not a legal document and thereby does not set aside applicable laws. The Code provides guidance by stating obligations that occupational therapists have to take into consideration within the framework for practicing their profession.

The introduction defines the goals of the profession, basic assumptions and professional tasks. Thereafter ethical obligations of occupational therapists are described in correlation with those of interested parties: recipients, close relations and similar interested persons, professional colleagues and other professionals, students, employers, the general public and societal actors. Finally, ethical obligations in connection with research and development are covered.

It is not always the case that different ethical obligations can be met in a simple manner, so conflicts may arise. An occupational therapist must, therefore, strive to balance such various obligations in an ethically insightful manner.

The obligations stated in the Code are not to be regarded as absolute. It may not be possible to fulfill each and every one of them in situations in which they come into conflict with one-another.

*A Model for Ethical Analysis* as well as examples have been published (available in Swedish only) to supplement the Code of Ethics for Occupational Therapists in Sweden. These provide tools and guidance when it comes to dealing with ethical issues.

## Goal of occupational therapy, basic assumptions and tasks

The goal of occupational therapy is to support persons in need thereof to carry out that which they need and want to do in a way that promotes the opportunity to live as full a life as possible. This takes place on the basis of the recipient's view of her/his circumstances wishes and needs, as well as taking into consideration contextual possibilities and hindrances.

Occupational therapy is based on a basic philosophical assumption – that people are active beings with the potential to develop continuously. Human development, experience, and understanding of surroundings requires involvement in meaningful and goal-oriented activities. An individual's experience of health throughout her/his life entails a basic right to activity.

Knowledge of occupational therapy includes knowing how that which people do affects, or is affected by, health. For an occupational therapist the starting point is that health is when an individual can and wants to do whatever he/she needs to do in a way that he/she desires in the prevailing circumstances. People should have as great a freedom and be given as good conditions as possible to do activities which contribute to experiencing health and development throughout their lives.

Occupational therapy is based on a person-centred approach. This means that interventions are designed and implemented in partnership with the recipient or in consultation with other interested parties. Occupational therapy interventions are always related to the recipient's unique circumstances i.e. her/his everyday life and the unique experiences this provides.

Occupational therapists' interventions can be carried out at individual, group or community level, maintaining high quality and in accordance with relevant laws and regulations.

Occupational therapists exhibit personal integrity, reliability, openness and loyalty in all perspectives concerning their professional role. Occupational therapists are continuously involved in improvement work that develops the profession and professional practice.

Occupational therapists' professionalism entails long-term learning throughout their working lives by means of which acquired knowledge and skills, based on proven experience and the best knowledge available, are implemented in professional practice.

When occupational therapists disseminate information about the profession, its goals, tasks and input to the general public, organizations, authorities or decision makers at local, regional, national or international level, this is to occur in line with the obligations stated in the Code of Ethics.



## Ethical obligations towards interested parties

In their efforts to achieve the goals of the profession and perform occupational therapeutic interventions occupational therapists have a number of ethical obligations vis-à-vis interested parties. In some concrete situations it is not always the case that all of these different obligations can be met.

It is important to emphasize that the ethical obligations apply subject to employers establishing conditions for occupational therapists to fulfill them. This is essential in order to reduce the experience of ethics-related stress.

Ethical obligations must be weighed against each other in each case. If an ethical dilemma occurs, the Code can be combined with the *Model for Ethical Analysis* (available in Swedish only) to provide guidance. It is important to emphasize that, in most cases, ethical obligations in respect of the recipient weigh more heavily than obligations towards other interested parties.

The ethical obligations for occupational therapists are based on UN human rights conventions and are thus to be followed regardless of the sex of the parties, gender identity or expression, ethnicity, religion or other belief, impairment or disability, sexual orientation, or age.

Occupational therapists have an ethical obligation to pay attention to any inequality in treatment and, should such occur, try to influence it. This is essential in order to be able to contribute to equal healthcare for all, but it is important to emphasize that equal healthcare in a population is dependent on a variety of different determinants outside the undertakings of occupational therapists.

## **ETHICAL OBLIGATIONS TOWARDS RECIPIENTS**

An occupational therapist is to interact with a recipient in an appropriate manner. This means:

- Respecting and treating the recipient as a unique and competent person capable of self-determination in matters concerning his/her life.
- Taking available knowledge into consideration, avoiding initiating interventions and discontinuing those which are not beneficial to the recipient.

Occupational therapists are to strive towards just and fair use of available resources. This means:

- Giving priority of resources to persons with greatest need for interventions.
- Using resources in a cost-effective manner so that costs thereof are in reasonable proportion to benefits.
- Avoiding giving priority to interventions based on a recipient's request unless the occupational therapist assesses that there is a need for such interventions.

Occupational therapists are to respect a recipient's integrity by

- Respecting the recipient's privacy.
- Obtaining only the information that is necessary for the occupational therapist's interventions.
- Complying with statutory confidentiality and using information about the recipient with due care so that he/she is not harmed or violated.
- Ensuring confidentiality except in circumstances in which legislation permits making exceptions.
- Ensuring that all documentation is factual and relevant.

Occupational therapists are to respect recipients' self-determination.

This means:

- Based on his/her own perspectives and circumstances, carrying out occupational therapy interventions in partnership with the recipient insofar as these are consistent with professional goals, tasks and available resources.
- Seeking to ascertain the recipient's own opinion about goals and needs even in cases in which the recipient's own abilities to express these are limited.
- Giving a recipient, who is competent to take a decision, the basis for making informed choices by continuously informing him/her about the purpose of interventions, methods, the recipient's own input, consequences for the recipient and the expected benefits of various interventions.
- Supporting a recipient who is competent to make decisions to take responsibility for activities and encouraging participation that can contribute to improved health.
- Refraining from commencing an intervention until a recipient who is competent to make decisions agrees to do so. For children it is usually the case that custodians give consent for interventions but the child recipient gets increasingly involved in decisions with growing maturity.
- Having the responsibility to make decisions about interventions for adult persons who are not competent to make the decision required. This should take place on the basis of consultation with close relatives (or similar), guardians, appointed agents (attorneys-in-fact) or persons who manage the affairs of recipients if it cannot be assumed that a recipient is opposed to the intervention in question or it is clear that divulging information will not cause him/her harm. If a recipient has previously expressed a declaration of intent, this should also be taken into consideration when making decisions.

## **ETHICAL OBLIGATIONS TOWARDS CLOSE RELATIVES OR SIMILAR PERSONS**

Occupational therapists are to respect those close to a recipient. This means:

- Informing those closely related (or similar) if they so wish, provided that the recipient has given consent.
- Informing a close relative (or similar) or an appointed agent if a recipient is not capable of making decisions and when it can be assumed that the recipient has no objection, nor risks harm if such information is divulged.
- Providing opportunities for closely related persons (or similar) to participate in interventions, given that they wish to do so, provided that the recipient has agreed to this and it is compatible with the treatment of the recipient.

## **ETHICAL OBLIGATIONS TOWARDS PROFESSIONAL COLLEAGUES AND OTHER PROFESSIONS**

Occupational therapists are to respect professional colleagues and other professionals. This means:

- Collaborating with colleagues, other professional groups and bodies to best meet a recipient's needs.
- Clarifying his/her own area of expertise in order to determine limits for an occupational therapist's responsibilities with respect to other professions.
- Showing respect for professional colleagues' and others' competence, obligations and responsibilities.
- Acting to promote trustworthy inter-professional collaboration to best promote common goals.
- Assisting colleagues and other professionals with advice, knowledge and experience when so required, whilst respecting the frameworks of each other's expertise.

## **ETHICAL OBLIGATIONS TOWARDS STUDENTS**

Occupational therapists should respect and support students by:

- Supervising students as and when required to do so
- Showing respect for a student's knowledge and skills as well as the student's level of education.
- Providing support for students who want to confide ethical dilemmas that they experience during vocational training.

## **ETHICAL OBLIGATIONS TOWARDS EMPLOYERS**

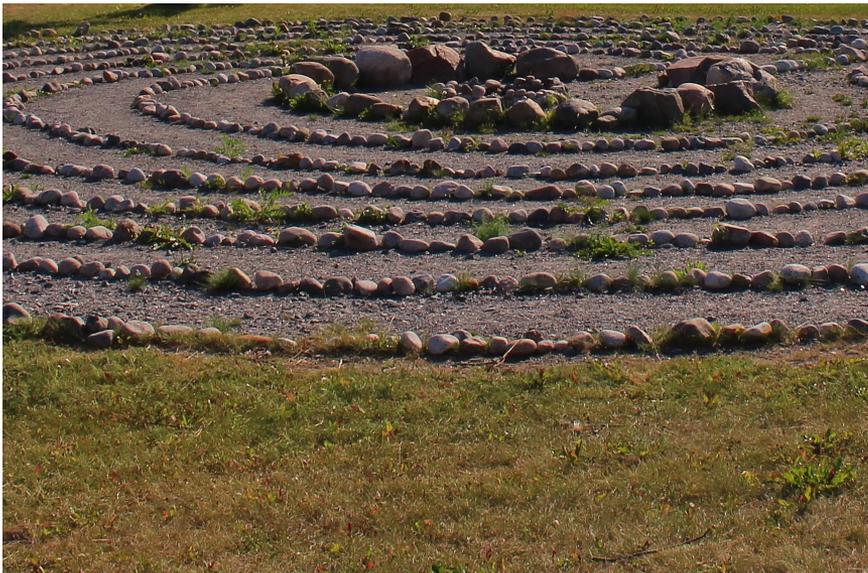
Occupational therapists are to show respect towards an employer. This means:

- Following an employer's guidelines and showing loyalty to the employer as far as this is consistent with professional ethics.
- Drawing an employer's attention to cases in which the employer's guidelines do not comply with the professional ethics of occupational therapy.
- Exhibiting sound judgment in the use of employers' property.
- Supporting employers in working towards continuous improvement.

## **ETHICAL OBLIGATIONS TOWARDS THE GENERAL PUBLIC AND SOCIAL ACTORS**

Occupational therapists have ethical obligations towards the general public and social actors. This means:

- Providing information and contributing knowledge on issues related to occupational therapy when such is in line with professional practice.
- In public contexts, clarifying whether they represent themselves, their profession, their trade union, or their activities.
- In professional practice, promoting sustainable development in line with the UN's global goals.



## Ethical obligations in research and development

Occupational therapists have obligations in research and development work. This means:

- Safeguarding that a recipient's interest weighs more heavily than the interest of society or that of research or development.
- When participating in research projects, complying with laws concerning assaying research ethics and the ethical rules and guidelines that apply to research.
- Being responsible for ensuring that research ethical aspects are taken into account when acting as a supervisor in education conducted at undergraduate, graduate or postgraduate levels.







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Planiavägen 13 • Box 760 • 131 24 Nacka • Sweden  
kansli@arbetsterapeuterna.se  
+46 8 507 488 00 • [www.arbetsterapeuterna.se](http://www.arbetsterapeuterna.se)