

**SANDU FRUNZĂ, IULIA MEDVESCHI,
MIHAELA FRUNZĂ, NICOLAE OVIDIU GRAD**

ASPECTS REGARDING ETHICAL COUNSELING IN ORGANIZATIONS

Sandu Frunză

Babes-Bolyai University, Department of Communication, Public Relations, and Advertising, Faculty of Political, Administrative and Communication Sciences, Cluj-Napoca, Romania.

Email: sfrunza@yahoo.com

Iulia Medveschi

Babes-Bolyai University, Doctoral School of Communication, Public Relations, and Advertising, Faculty of Political, Administrative and Communication Sciences, Cluj-Napoca, Romania.

Email: medveschiulua@yahoo.com

Mihaela Frunză

Babes-Bolyai University, Faculty of History and Philosophy, Cluj-Napoca, Romania.

Email: mihaefrunza@gmail.com

Nicolae Ovidiu Grad

University of Medicine and Pharmacy "Iuliu Hatieganu", Cluj-Napoca, Romania.

Email: ovidiugrad@gmail.com

Abstract: In this paper, we analyze a particular form of philosophical counseling, namely the organizational ethical counseling. In this respect, we are interested in the ethical development of organizations through axiological, spiritual and/or religious means, that would be consistent with individual action, the organizational one and the right action for satisfying the needs of different publics or clients. Organizational ethical counseling can be integrated into the wider categories of practices concerning business ethics, transforming ethics into an instrument that can contribute to increasing the quality of work, creating harmonious professional relations, consolidating the relations with contractual partners or developing some complex processes of ethical and efficient communication. Having in mind the creation of an ethical climate for organizations, the counselor uses both philosophical practices and reflections, as well as interventions through the means of spiritual exercises. The spiritual intervention can be done in agreement with the organizational values and the values of the individuals who take part in the organizational life. We chose to refer primarily to the counseling of organizations that are also involved in research practices. We have discussed the example of medical organizations and the way in which the principles underpinned by philosophical and spiritual practices can intersect one another into a general framework dominated by medical ethics and bioethics.

Key words: organizational ethical counseling, philosophical counseling, spiritual practices, religious values, medical ethics, ethical communication, integrity, philosophical practice.

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1. Organizational ethical counseling as philosophical practice

Philosophical counseling can take the form of organizational ethical counseling, especially as a way of improving the quality of work, efficiency, prestige and organizational community engagement. Organizational ethical counseling can embrace a variety of aspects, amongst which: 1) conceptual clarifications, analysis and ethical interpretations on the mission and the objectives of the organization; 2) a better prioritization of the organizational values and the harmonization of these values with the categories of public they aim to serve; 3) developing ethical codes or, if they already exist, establishing an agreement between the existing codes and the organizational mission, objectives and vision; 4) developing an image for individuals who have the role of leaders - one that is in accordance with the principles of ethical communication and social responsibility; 5) developing work relations based on respect and the continuous affirmation of moral values; 6) using spiritual principles as a vector of professional development; 7) instituting competence and professionalism as moral values and existential coordinates for the members of professional community; 8) developing an ethical climate meant to loosen existing tensions in the work environment; 9) integrating all these approaches into a vision that would encourage a life philosophy based on the principles of integrity etc.

From the perspective of philosophical counseling, we consider that this field of action should be reserved for experts who hold a degree in philosophy or for specialists from other fields who resort to various complementary training programs in philosophy. Those who can provide the best expertise in the field of research ethics are the practitioners with professional training in the field of philosophy in a general sense, and of applied ethics in particular (Frunză 2013; Valentinovich 2018; Sandu 2019). In this respect, when we consider that the philosopher can be the carrier of this type of professional expertise, we aim to place the organizational ethical counseling in organizations that, among other activities, also include research activities. The level we take into account are the one of the internal practices of organizations, and the ethical and spiritual commitment of the professionals activating in these organizations. As an example of a connection between what is personal, spiritual and communitarian, we chose to address examples of several aspects of counseling concerning the research and medical practices from the health system.

In this type of organizational counseling, we draw the attention on the necessity of assuming some ethical values and spiritual principles. The commitment we speak about is the one of the moral agent liberated from

any dependence concerning the absolute values, the restrictive religious practices, the dogmatic limitations that may arise on the premises of moral theology. The philosophical ethics brought by the organizational ethical counseling is one that is liberated by any dogmatic authority, precisely because it invokes the cultural dimension of an open spirituality. Philosophical counseling understood as organizational ethical counseling does not have to refer to practices that are typical for pastoral counseling, not even when it attempts to combine the moral rules with the spiritual practices. Philosophical counseling can effectively use religious or spiritual aspects without distancing itself from the ideal of an ethical reconstruction of organizations that bring into play this type of ethical counseling. We can even state that we refer to a cultivation of a practical wisdom, of an emancipatory practice and of a personal commitment in an organizational context. We speak about an open attitude that engages the professional practices on the one side and the organizational reality on the other into a dialogue (Sulavikova 2015; Douglas 2016).

The professional practice of counseling offers suitable solutions for providing the culture of an ethical workplace using deontological tools. Although we do not disregard the existence of other approaches of applied ethics, we believe that the advantage of using the concept of deontology lies in the fact that it encompasses both theories and principles, as well as rules and practices. Our introductory approach aims to highlight some ethical and professional issues for counseling in organizations involved in research activities. Clients should be aware that although there are different perspectives from which ethics can be regarded, even applied ethics, effective action in research activities coexists best with deontological perspectives. Deontology goes beyond the dispute between theory and practice, being a form of applied ethics that addresses professional ethics as a complex phenomenon. In addition to providing foundational information about ethical codes and legal statutes, deontology encourages counseling personnel to perceive ethical issues as challenges that will lead to personal and professional growth. For once, organizations are allowed to standardize the moral world, setting the conceptual models and clearly outlining the rules that help us differentiate between what is desirable and what is ethically forbidden.

The philosophical counselor should place concerns of professional ethics within a deontological framework because, to a large extent, deontology (understood as professional practice) manages to harmonize ethical principles with moral practices within a horizon of organizational ethics assumed by the individual in the name of his professional identity. Employees place themselves under the authority of professional associations and shape ethical choices in accordance with the organizational demands. A basic deontological principle indicates that within professional practices there is an overlap between ethics and competence. More than that, in deontological practices, competence

becomes an ethical value in itself, it can no longer be detached from the ethical register (Borțun 2012; James 2014). The issue of integrity is also discussed in a similar register (Whitton 2009; Miroiu, Blebea Nicolae 2001).

A very important advisory aspect for the organizations that carry out research activities comes down to issues regarding the promotion of excellence. In this sense, an interesting etymological example is provided and explained by Carol W. Lewis and Stuart C. Gilman (Lewis, Gilman 2005, 26). The authors establish one of the possible meanings of the word virtue in accordance with the process of attaining excellence associated with virtue and moral excellence. If we are to expand this aspect of professional excellence into a virtue of any organization (in contrast with the restrictive role that some authors attempt, by limiting it to the public sector), then competence and professional excellence become an ethical ideal that philosophical counseling must promote, as an axiological center for the entire organizational activity. In such a perspective, in the interventions one is performing to ethically shape research organizations, the counselor must assume the fact that excellence in the research activity should be pursued as a fact interfering with the everyday activity. Professional excellence is in itself a moral virtue precisely because it is part of the daily routine of the personnel committed to support excellence in research.

When concentrating on advisory activities – required in the implementation process of excellence programs and the cultivation of the virtue of excellence among researchers, it is necessary to insist on the regular, everyday character of excellence. Individuals conducting research activities must demonstrate their exceptionality by irreproachably integrating within their academic community – being in full resonance with the traditional core precepts of professional ethics covered in considerable detail: confidentiality, informed consent, boundaries and the use of power, and competency and professional responsibility. Within an organizational framework an individuals are remarkable not by greatness, heroic attitudes, but by the fact that they fulfill the expectations and effective actions necessary for the well-functioning of the community. From the perspective of ethical counseling, the exceptional man is the embodiment of the community spirit by itself.

2. Integrity as an ideal and practice of our professional life

Considering as moral agent the person who is committed to the virtue of professional excellence, philosophical counseling must rely on the idea that integrity has to be cultivated as an ideal and a practice of personal and professional life.

By its very specificity, integrity brings out the idea of a complex and integrative approach, achievable by combining the tools of interdisci-

plinary research and those of philosophical reflection. The researchers interested in the issue of integrity show that, most often, discourses about integrity become particular discourses, carried by spokesmen of various disciplines, from personal development coaches to marketing strategists, or communication and personal branding consultants, from researchers in hard sciences, to lawyers or experts in administrative sciences, from specialists in psychology and education sciences to economists and consultants in managerial art, from anthropologists to philosophers. Everyone wants to build their own discourse of integrity. Overall, the process is not wrong, but leaving the discussion in a somewhat shady area, causes the erosion of the complex nature of integrity in the name of disciplinary fragmentations. Integrity does not belong to a singular field of human creation, but rather should be assumed as the center of coherence and a combination of reflection and ethical action (Bretag 2016).

In order to fully represent the complexity of the philosophical approach, a counselor may apply in practice Marvin T. Brown's five dimensions of corporate life, that should be included in the integrity discourse: the cultural, the interpersonal, the organizational, the civic, and the environmental one. From such a position of putting in relation and harmonizing possible contradictions, we can note that: „the integrity challenge is to develop appropriate relationships for individuals, for corporations, and for corporations and other civic organizations. Improving the quality of these relationships will improve integrity” (Brown 2005, ix).

The proliferation of discourse on integrity brings along at least two aspects. On the one hand, we note an excessive fragmentation of the concerns about integrity. On the other hand, there is an increasing interest in the thematization of integrity. Integrity becomes a topic that can no longer be avoided in any area of human activity. However, taking a closer look at discourses of experts that deal with the topic of integrity, we deduce that, in fact, the more diverse and simple the discussion about integrity becomes, the more it is demanded to integrate the concept in an interdisciplinary debate, meant to make us aware of its essence. Given these issues, Tracey Bretag states that only interdisciplinarity can save integrity from its triviality and its loss in fragmentary explanations, lacking any authority (Bretag 2016a, v).

In the case of organizational counseling, such a vision can be transposed into practice by including the ethical aspect in all the communication materials, both internal and external communication. When discussing integrity in the context of communication, it is advisable to embrace a cross-disciplinary approach that brings it closer to philosophy in general, and to applied ethics in particular. Philosophical counseling can ultimately stimulate this kind of holistic approach, being associated with the approach that focuses on the instrumentalization of

philosophy and philosophical practices in the ethical reconstruction of organizations.

From the perspective of organizational ethical counseling, merging philosophical counseling with managerial ethics is beneficial. Increasing the competence and professionalism of those involved in organizational activities can be understood as increasing ethical virtues and establishing ethical relations at the workplace. One may draw attention to the important role of the ethical manager in the counseling activities when implementing a managerial ethics that would stimulate the professional virtues of all the employees and collaborators.

Philosophical counseling can contribute to the development of managerial ethics, to the institutionalization of ethics as an instrument for effective organizational growth, as a way of developing the ethical culture and ethical climate within an organization. It can also show how ethics can serve as a model of ethical and efficient communication under the form of social responsibility (Becke 2016; Muhr, Sorensen, Vallentin 2010). The theoretical models we propose for illustrating counseling practices are prominent in the field of medical ethics.

One manner of expressing the role that philosophy – understood as applied ethics and professional practice – can play in promoting ethics in organizations is by cultivating the social responsibility of each individual involved in the activities of medical organizations. This can be tracked in reports regarding the ethical responsibility of the individuals and of the organizations involved in the public health system, both through the lenses of the actions of professionals and at the level of the managerial function. At this level, ethical counseling might even help the manager develop a powerful personal brand. The cultivation of ethical values as part of the identity of the personal brand of the manager of the organization carrying out research activities is related to the fact that the manager acquires leadership qualities necessary for an ethical and efficient functioning of an organization. The recognition of one's leadership qualities can lead to the development of an informal leader for individuals engaged in both practical and research activities. In this way, the ethical counseling can encourage an organizational culture to place itself under the umbrella of responsibility. This might stimulate the wish of organizations to take part in developing symbolical resources for the identity of their professional community.

3. Philosophical counseling, spiritual intervention and medical ethics

A good example for the intervention of philosophical counseling in the organizational activities is embodied by the philosophical practices related to the medical ethics. As we can see from the analysis proposed by

Mark Siegler, Edmund D. Pellegrino, and Peter A. Singer, „The goal of clinical ethics is to improve the quality of patient care by identifying, analyzing, and attempting to resolve the ethical problems that arise in the practice of clinical medicine. Clinical ethics emphasizes that the starting point for ethical analysis is the encounter between patient and health care provider” (Siegler, Pellegrino, Singer 1990). In this way, the therapeutic dialogue, understood both as an anamnesis and as a Socratic dialogue, sheds a new light on medical practice, including the idea of participating in a dialogue in which those involved in the therapeutic relationship communicate their own values, their life options, their views about the body, about health and even their vision of the world. The patients enter the therapeutic dialogue with their whole world. The distinction between what is private and what becomes a common good of medical intervention becomes very fluid. The treatment regards not only the disease as such, but also changes in the way of thinking, the way of being in relation to one’s illness, one’s way of relating and one’s way of living. Therefore, ethical engagement in medical and health practice brings a paradigm shift. Thus, „during the past decade, clinical ethics teaching, and research programs have evolved, and ethics committees and consultation services have become increasingly accessible to health professionals, patients, and families. Both physician-ethicists and professional ethicists have contributed to these developments, and continuing collaboration between these groups should be encouraged” (Siegler, Pellegrino, Singer 1990). This way, the organizational ethical counseling is combined with a strong ethical basis for the member of the medical community and with the ethical commitment of the patients, their families and the different categories of people they interact with. Ethical counseling can be carried out by ethicists trained in various multidisciplinary contexts, but its results gain greater efficiency under the form of philosophical counseling.

In their intervention, ethics counselors can use both classical ethical documents relevant to medicine, as well as the Deontological Codes of the medical organization with which the philosophical counselor enters into an ethical counseling relation. Among the important documents that we work with in this process we can mention: *The Nuremberg Code* (1948), *Geneva Declaration of the World Medical Association* (first version 1948; last version 2006), *International Ethical Guidelines for Biomedical Research Involving Human Subjects* (2002), but also results of research conducted by members of the professional community interested in ethical engagement. The combination of medical ethics and organizational philosophical counseling can also be achieved in the form of what has been established in the literature as the philosophical residences in medicine. A very illustrative program for how philosophy can be used in this context is one that was developed within the *Philosophers in Medical Centers* project (1976-1980) (Ruddick 1981, 12).

The “philosophical residency” program from the *Philosophers in Medical Centers* project (1976-1980) consisted in the involvement of four philosophers in the daily activities of a New York hospital – from organizing trainings for the staff, to their participation in meetings of the institutional committees and respectively counseling in several difficult cases, either from the point of view of ethical dilemmas, or from the perspective of existential commitment. For more than 40 years we accustom ourselves with the idea that „teaching hospitals are using philosophers in their day-to-day operations to help their medical staffs make better decisions affecting the life and death of patients” (Sullivan 1982). This type of presence of philosophical counselors becomes a constant in medical organizations as the practice of dialogue between physicians and philosophers and as a means of intervention of philosophers as theoreticians or as support staff, but not as therapists (Veatch 2006; Baker 2018). In such a context, philosophical counseling can propose not only the frameworks of ethical reflection, but also those of wisdom from different cultures, of Western philosophy, or spiritual thematizations that combine spiritual exercise with philosophical dialogue.

A dimension often neglected in ethical counseling is the counseling regarding the usefulness of spiritual intervention in therapeutic intervention or in counseling provided by the physician for his patients. After emptying the symbolic meanings of the body that occurs with modernity, we find that the postmodern world perceives the body as a sphere of the intersection between horizontal and vertical. Karoly Veress points out that „The most complete “embodiment” of corporeality and sensuality, as they are emptied out of and broken away from the spiritual, can be apprehended within the contemporary technical and technological formations, relatively to whom natural human corporality and sensuality are degraded to the level of mere accessory. They manifest the fact that contemporary processes lead to a kind of reversed/twisted *verticalization* of horizontal transcendence, identified already in the last decades of the 20th century” (Veress 2018, 58). There is a tendency to remove the body from its horizontality, loading it with the attributes of a longing for the transcendence on the verticality of its axiological modulation. This kind of resignification of the body is based on both the centrality that the body occupies in the way of thinking of the relational structure of the human being (Codoban 2013; Stancu et al. 2016; Ruah-Midbar Shapiro 2018), as well as the instrumentalization of the body through its reintegration from the perspective of a diffuse religious consciousness, present at the level of postmodern spirituality. It is obvious that in medical practice we rely on deontological principles that derive from the Deontological Codes and from the legal regulations present in a certain cultural space. But when it is possible for spiritual intervention to duplicate the philosophical and the scientific ones, it is good to encourage it. Specialists in the medical field

can be advised to enter training programs that open interdisciplinary perspectives in which the spiritual component plays an important role. They can also be integrated in research activities in which multidisciplinary teams bring the results of their research together in a complex knowledge approach in which the medical dimension is complementary to the other existential dimensions – social, personal, spiritual and religious. In order to make spirituality functional in the lives of patients, it would be good to have doctors who can use this extraordinary force in medical practices and research. The philosophical counselor must insist on the fact that by creating an ethical climate in the organization and especially in the relation between the patient and the doctor, the path towards a complementary use of physical, social, personal and spiritual valences in medical practices is open. In such contexts of professional practice, it is useful if “doctors and other health care professionals are competent in discussing spiritual and religious issues with their patients. (...) Furthermore, the physician’s duty of beneficence requires respect for patient spirituality. Training medical students and junior doctors to address these needs of their patients is becoming increasingly important in the current context of striving toward delivering comprehensive medical care” (Abdulla, Hossain, Barla 2019). This type of interventions must be realized as a placement within the spiritual dimension inherent to human nature. It must be related to the person’s need for transcendence, a person who mustn’t remain captive of their vulnerabilities of physical nature. However, it must not be parasitized by any form of religious dogmatism. Without affecting in any way the religious or spiritual beliefs of the patients, the medical staff and the support and care staff must intervene in all the areas of experience that are accessible to them according to the competences they have acquired during their training and in the exercise of their profession. Spiritual intervention must be open, not marked by prohibitions, and it must not entrap the individual in the sphere of his/her shortcomings and vulnerabilities. He/she must open themselves to a philosophy of life that will ease their situation and will not create difficulties that they did not initially have.

In this respect, philosophical counselors shouldn’t propose passages from the revealed texts, as pastoral counseling would find legitimate to happen. Rather, they should resort to data coming from research that reveals the support that can be provided by referring to a spiritual reality understood as the ultimate reality, as the ultimate point of support in the universe. At the same time, philosophical counseling can be useful for raising awareness of the ability of the human being, as a free being, to choose to integrate in an effort to spiritualize the vulnerable body, to transfigure weaknesses, to project all mental contents on the screen of a positive thinking. A positive thinking can nurture from both philosophical traditions and the spiritual history of humanity, from the religious beliefs

of the patient or even from the models of relating to the miraculous of the community to which the patient belongs. The counseling, concerning this kind of search for an answer that addresses the spiritual needs of man, should help the physician to better understand how the patient resonates with the spiritual sphere and how the patient relates to the disease, to suffering and even to the problem of finitude. The spiritual intervention must be performed as a philosophical exercise. Without becoming theological, such a supportive intervention could start from the sphere of religion, understood as a cultural phenomenon, but it should appeal to a common language of therapeutic dialogue based on the consciousness of the fact that “religious beliefs and practices help patients to cope better with their illnesses, enhance their social support, and help them to avoid self-destructive behaviors” (Koenig 2004, 1195). Understood this way, the philosophical exercises can create an existential comfort that is beneficial both for the patient and for the specialist treating him.

It is widely accepted that such spiritual interventions may be beneficial in the case of mental illness. They are considered to be a kind of disease of the soul and the idea that the spiritual ones can find their panacea in the spiritual solutions offered in different cultural traditions is widespread. It is known that “the vast majority of psychiatrists appreciate the importance of religion and/or spirituality at least at a functional level. Compared to other physicians, psychiatrists also appear to be more comfortable, and have more experience, addressing religion/spirituality concerns in the clinical setting” (Curlin et al. 2007). In a similar manner, the philosophical counselors must be open to solutions of a spiritual nature so that they can offer full confidence not only to those dealing with the “diseases of the soul”, but also to those who are particularly concerned with the problems the body is facing.

It is obvious that the corporality dimension also affects the way in which the body is conceived as the subject of the passage of time, as a way of being over which time passes leaving burdensome traces. The feeling of the irreversible degradation of the body, even if it is not experienced in painful forms, can be a reason for dissatisfaction and may even be somatized in forms that create a discomfort sufficiently high that an intervention of a spiritual nature can be claimed. Caroline Young and Cyndie Koopsen have convincingly pointed out that “Trends that appear to be driving this new interest in spirituality include the many studies that have demonstrated a strong connection between spirituality and improved health, client demand for a greater personal attention from their physicians, the growing importance of end-of-life care and the increasingly dissatisfaction among physicians with what they view as an increasingly depersonalized practice” (Young, Koopsen 2009, 6). In recent years, philosophical counseling is acknowledged as a cultural fashion and as a practice of existential clarification in the most varied environments (Sandu 2019; Hațegan 2018; Frunză 2019). On the one hand, there is an

emergence of philosophical counseling at the organizational levels already occupied by the psychological counseling, constantly expanding; on the other hand, a two-dimensional intervention must be considered. One that aims to establish the effective presence of philosophers in medical care units, and another one that aims to address the ethical and spiritual training of the medical personnel. The research in the field of clinical ethics can provide an effective basis for action in this regard.

Theoreticians of medical ethics stress the need for organizations to assimilate the principles of philosophical ethics, those of a religious morality, those that derive from the legal framework as well as from the public policies specific to a certain cultural space. The ethical research that addresses the clinical situations may consider and „may involve 1) an analysis of cases (e.g., the case of an incompetent woman who refused a brain biopsy while competent); 2) an examination of conceptual and/or legal and public policy issues such as the termination of medical care, active euthanasia, or the concept of futility; 3) an exploration of the ethical ramifications of major medical or surgical innovations (e.g., reduced-size liver transplantation or liver transplantation using living donors); or 4) an examination of the role of clinical ethics itself in teaching, research, and patient care” (Siegler, Pellegrino, Singer 1990). On every occasion, the research must have significant resorts from the point of view of the ethical decisions that come to meet the well-being of the patients and the professional satisfaction achieved by the medical personnel contributing to its creation. The medical field assimilates the cultural trends related to the need for counseling, to an increasing extent, in the form of the ethical counseling of the organizations.

Departing from the statement of Stephen Toulmin, according to which medical science had saved ethics, Ole Thyssen shows how the use of new medical technology generated a major repositioning of ethical concerns, firstly in the realm of medical research, then related to the other spheres of society. Thus, the preoccupation towards ethics moves from the isolated spheres of academic reflection and research towards becoming more and more relevant for the entire society. Thus, both individual ethics and organizational ethics become a major concern for philosophers and other specialists from various fields where ethics emerged, such as applied or practical ethics (Thyssen 2009).

4. Instead of conclusions: Towards an ethical and efficient organization

From the perspective of philosophical counseling, the thematization of integrity must be understood under the sign of bringing together organizational ethics and character ethics. Ethics is a philosophical discipline that can be practiced both by the philosophers who could

contribute to the ethical shaping of organizations, and by specialists having an interdisciplinary training and the necessary culture to profess ethics in an efficient way. From the standpoint of philosophy of communication, we can state that in order to implement a strategy for developing communication ethics we could follow at least two paths: 1) one that emphasizes the institutionalization of ethics and its institutional development; 2) another one that focuses in particular on the personal growth of each member of the community by developing the character starting from the values of a professional community. There is a dialectical movement in which the development of the qualities of a personal brand blends in very well with the institutional brand, each of them enriching the other (Gibea 2018; Committee 2002). To this end, philosophical counseling practiced as an organizational ethical counseling must use a great variety of structures that coagulate philosophical thematizations, religious aspects, spiritual practices and exercises, but also juridical elements and specific professional rulings. All these can be correlated with an integrity discourse that needs to be harmonized with the necessity of assuming a life philosophy that gives consistence to the action at the personal level and to networking at the community level.

As we have seen, examples of the kind from the field of counseling in the health system can reveal the fact that through organizational ethical counseling one can reach the implementation of measures regarding increasing responsibility, productivity, assuming values and correlating personal identity with the organizational one. In their efforts of ethical shaping of organizations, philosophical counsellors must take into account that „the beliefs and the values of the members of the organization constitute two of the most important elements of the organizational culture, given the fact that they nourish its spiritual dimension. One of the most important sources of these beliefs and values is represented by the organization’s ethics” (Grad 2017, 117). Organizational ethical counseling must always aim a double goal. On the one hand, to stimulate the engagement of professional practices implemented by each individual under the sign of promoting excellence through each intervention in the professional sphere; on the other hand, to create the structures that are required for cultivating an ethical climate of relations that are developed at the workplace and to provide the relational identity of the professional community. It is the prerogative of philosophical counseling to place these two layers of action into a common structure, under the sign of ethics and organizational efficiency.

Edwin Hartman believes that the main problem of ethics is of an organizational nature. Either if we take into account interpersonal relations, or business ethics, the problems that need to be solved lead towards a common issue: that of the need to live a good life. The ethical counselor should find answers to the questions concerning the way in which individuals can be pursued to give up their own individual options

and adhere to the organizational common values. Such an engagement to change the way of thinking and of participating to a new axiological edifice should aim at correlating the ethical climate that brings harmony to the working place and the individuals living a good life in all their own circumstances (Hartman 1996).

The role of philosophical counseling is to use the practical creativity of philosophy in order to create structures that make it possible to harmonize personal ethics with organizational ethics. It also has to aim to put the organization's interests in dialogue with those of the different categories of public with which they interact. One of the main ways in which organizational ethical counseling manages to do it is to stimulate the embracing of deontology by all the professionals involved in both internal and external communication. Implementing a style of ethical communication is significant for the ethical practices in research activities, for spiritual intervention, for managerial action and informal leadership. Yet, first and foremost, it is essential for promoting excellence as organizational policy in general. Ethical communication understood as organizational lifestyle brings about the commitment to a philosophy of integrity as part of the organizational vision and identity.

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