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ETHICS AND ETHICS CODES FOR PSYCHOLOGISTS

Stephen H. Behnke and Stanley E. Jones

The field of psychology examines nearly every aspect of human experience. A field that so profoundly explores both what humans think, feel, and do, as well as the behaviors and thought processes of nonhuman animals, must have clear and strong ethical underpinnings. In this chapter, we provide an overview of the ethics of the profession of psychology. The overview is an exploration of the substance of the *Ethical Principles of Psychologists and Code of Conduct* (the Ethics Code; American Psychological Association [APA], 2010), the processes by which the Ethics Code is applied in practice, the relationship between the Ethics Code and the law, a comparison of how different mental health disciplines address a frequently encountered ethical issue, and concluding thoughts on the future of the ethics of the profession.

The chapter is divided into six parts. The first part discusses the concepts of ethics and ethical decision making. The purpose of this discussion is to offer a definition of professional ethics that provides a context for the whole chapter. The second part of the chapter discusses the purpose and function of a professional association ethics program, that of the APA. Professional ethics do not exist in a vacuum. Rather, associations write ethics codes so that members of the discipline and the public will be aware of the boundaries of ethical practice. This second part of this chapter illustrates an ethics program in practice by discussing how the APA responded to a societal issue with significant ethical implications

involving psychologists. The third part of the chapter provides an overview of the 2010 Ethics Code. This overview, an examination of the structure and content of the Ethics Code as well as the substantive issues that the Ethics Code addresses, provides a good sense of how the APA frames the ethical issues that are most relevant to the work of its members. The fourth part of the chapter compares how different associations address a specific issue, that of multiple relationships. A comparative approach highlights differences and similarities in how associations approach the ethical challenges their members face. The fifth part of the chapter examines the relationship between ethics and law. Psychology is practiced in the context of a society. Society has its own values and norms, which generally are embodied in the laws of the different states, provinces, and territories. These laws apply to psychologists both in their capacity as citizens and as members of a profession; even calling oneself a psychologist is a legally relevant statement in jurisdictions that regulate the title. This discussion is an examination of the complex and multifaceted ways in which the law and the profession of psychology interact. The sixth and final part of the chapter provides concluding thoughts and places the chapter in a developmental context by considering ethical issues and challenges that psychology is likely to face in the coming years.

The chapter is designed to provide an overview of the concepts and application of ethics in psychology. It is important to stress the notion of overview.

The opinions in this chapter represent the personal views of the authors and do not represent the official views of the American Psychological Association.

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Any one of the six discussions in the chapter could easily be the subject of an entire volume—or set of volumes—in its own right. Nonetheless, this overview should give the reader a good grasp of the contours of the ethical practice of psychology and a good understanding of how these contours are placed in the context of the larger society in which psychologists work.

THE ETHICAL PRACTICE OF PSYCHOLOGY: ETHICS AND ETHICAL DECISION MAKING

To examine the role of ethics in psychology or any field, one must first consider what one means by ethics, why ethics is important, and how ethics differs from other related but distinct concepts, such as risk management and law. A definition of *ethics* is by no means obvious because people use the term in many different ways. At times, for example, ethical practice is equated with competent practice. At other times, being an ethical psychologist is equated with being a moral person. Although a relationship clearly exists between ethics and competence, and ethics and personal morality, professional ethics should not be confined to competence, nor should it be viewed as nothing other than being a “good” person as defined in a particular religious, spiritual, or humanistic tradition. Rather, professional ethics must be grounded in the ethics of the profession.

To illustrate this idea, consider the following hypothetical. An applicant to a psychology program is a thoroughly good and moral individual. He belongs to a religious tradition, practices within his faith, does good works, and is respectful of his familial and community relationships. He applies to a graduate program in clinical or research psychology and is accepted, but because of a pressing family obligation, he requests to be released from the 1st-year ethics course. His request is made on the basis of his being a moral person who therefore will be an ethical psychologist. The program director turns down the request. She explains to the new student that he has understandably but mistakenly equated being a moral person with being an ethical psychologist. The program director takes out a copy of the APA Ethics Code and randomly chooses a standard to illustrate the point: The Ethics Code is

not a document that an individual, regardless of how good and moral, could draft outside the context of experiences in the role of a psychologist. An individual could not sit down and intuitively come up with the 89 standards in the APA Ethics Code. The substance of the Ethics Code is drawn from decades of psychologists’ experiences working in the profession. The purpose of an ethics course is not to teach new psychology students how to be good people, although it may be consistent with that goal, but rather to train the students how to be ethical psychologists. (More information on the issue of integrating personal and professional ethics can be found in the discussion of the ethics acculturation model in Chapter 19 of this volume.)

In another instance, a faculty member in the program objects to having an ethics course. The faculty member argues that ethics should be embedded into all courses because ethics is nothing other than competent practice or competently conducted research. The faculty member explains that because competence is the be-all and end-all of ethics, students should focus on enhancing their clinical, counseling, and research skills to increase their level of competence, and good ethics will follow.

The program director agrees that, indeed, competence is central to ethics. Principle A in the 2010 Ethics Code is Beneficence and Nonmaleficence: do good and do no harm. The director explains that it is difficult for a psychologist to do good if he or she is not competent, and in the absence of competence, the risk of doing harm rises dramatically. Nonetheless, the director continues, professional ethics embodies more than competence. Much of ethics has to do with how psychologists treat people in their professional roles. Competence may be considered a foundation of professional ethics, but it is not the sole foundation. Competence is a necessary but not a sufficient condition of psychology’s ethics.

These two anecdotes capture common misperceptions about ethics. How, then, might one define ethics, and why is having an ethics code important?

We define ethics in a simple but hopefully not simplistic manner. In our definition, ethics is thinking about reasons in terms of values in a manner that is open to public scrutiny. This definition of ethics has three components: First, when it comes to

professional ethics, psychologists are prepared to give reasons for the choices they make. Ethical decision making, therefore, always begins with *why*, as in, “Why did I choose this course of action over another? Why did I reject that course of action? Why did I give one value precedence over another competing value?” (More information on ethical decision making can be found in Chapter 4 of this volume.)

Second, the reasons psychologists give for their ethical decision making are placed in the context of psychology’s values. The Ethics Code begins with five principles: Beneficence and Nonmaleficence, Fidelity and Responsibility, Integrity, Justice, and Respect for Peoples’ Rights and Dignity. Psychologists’ ethical reasoning is based on these five principles. An ethical dilemma arises when a tension exists between two or more values, in which case the psychologist must determine which value takes precedence. Examples of ethical dilemmas include choosing between confidentiality and safety in a duty to warn or protect situation that pits beneficence and respect for privacy against one another or addressing a terminally ill patient’s wish to commit suicide that pits beneficence and self-determination against one another. In each of these instances, two of psychology’s core values are in tension, and the psychologist must decide which of the values will give way to the other. Although these choices have risk management implications, the focus of an ethical analysis is on how to resolve the dilemma between two competing values, each of which is good in and of itself. The focus of a risk management analysis is somewhat different, insofar as a risk management analysis is conducted to manage the psychologist’s exposure to legal liability. Nonetheless, some authors base their risk management strategies on overarching ethical principles, so that risk management may be grounded in ethics. (More information on risk management can be found in Chapter 19 of this volume.)

Third, ethics involves public scrutiny. Psychology is a profession that is practiced within the context of the society in which psychologists live. An inextricable link exists between psychologists’ ability to practice the profession and societal norms. As two examples, psychologists in clinical practice

receive a license from the state, and research psychologists submit their proposals to institutional review boards governed by federal regulations. At times, psychologists may be called on to explain their reasoning to a group of peers, that is, to subject their reasoning to public scrutiny. Such public scrutiny may consist of a hearing before a licensing board, ethics committee, or institutional review board. Public scrutiny does not mean disclosure in a public forum such that confidentiality is no longer protected. Rather, public scrutiny means that the work and reasoning of the psychologist is made available to an entity with a review function.

This definition of ethics—thinking about reasons in terms of values in a manner that is open to public scrutiny—implies that ethical decision making involves a process of weighing and balancing the values of the profession. Brief passages from three professional codes of ethics illustrate the centrality of the ethical decision-making process to the ethical practice of the profession. Process is central to each of these codes. It is noteworthy how these passages highlight common themes: reasonable differences of opinion regarding how values ought to be weighed and balanced against one another, the role of the individual member’s informed judgment or conscience in the process of ethical decision making, and the public scrutiny that is part of practice in a profession.

APA Ethics Code

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field (APA, 2010, Introduction and Applicability).

National Association of Social Workers *Code of Ethics*

Reasonable differences of opinion can and do exist among social workers with respect to the ways in

which values, ethical principles, and ethical standards should be rank ordered when they conflict. Ethical decision making in a given situation must apply the informed judgment of the individual social worker and also should consider how the issues would be judged in a peer review process during which the ethical standards of the profession would be applied (National Association of Social Workers [NASW], 2008, Purpose of the NASW *Code of Ethics*).

American Counseling Association *Code of Ethics*

When counselors are faced with ethical dilemmas that are difficult to resolve, they are expected to engage in a carefully considered ethical decision-making process. Reasonable differences of opinion can and do exist among counselors with respect to the ways in which values, ethical principles, and ethical standards would be applied when they conflict. Although no one ethical decision-making model is the most effective, counselors are expected to be familiar with a credible decision-making model that can bear public scrutiny and its application (American Counseling Association, 2005, Purpose).

These passages illustrate a strong convergence in how three different associations approach the process of resolving ethical dilemmas. This convergence suggests that different disciplines in American society have reached a degree of consensus on how mental health professionals should approach ethical dilemmas in their professional lives.

A definition of ethics and a review of how professional associations address ethical decisions presume a more fundamental question: Why should a psychological organization have an ethics code? After all, many laws, regulations, and policies govern the practice of psychology, and one could argue that yet another document setting forth obligations and prohibitions is unnecessary. The *Canadian Code of Ethics for Psychologists* (Canadian Psychological Association, 2000) provides a compelling reason for why a state-sanctioned profession should have a text whose role is to set forth the ethics of the profession.

Canadian Code of Ethics for Psychologists

Every discipline that has relatively autonomous control over its entry requirements, training, development

of knowledge, standards, methods, and practices does so only within the context of a contract with the society in which it functions. This social contract is based on attitudes of mutual respect and trust, with society granting support for the autonomy of a discipline in exchange for a commitment by the discipline to do everything it can to ensure that its members act ethically in conducting the affairs of the discipline within society. In particular, the discipline must make a commitment to ensure that each member will place the welfare of the society and individual members of that society above the welfare of the discipline and its own members. By virtue of this social contract, psychologists have a higher duty of care to members of society than the general duty of care that all members of society have to each other (Canadian Psychological Association, 2000, Preamble, Introduction).

This passage from the *Canadian Code of Ethics for Psychologists* gives a clear and compelling reason why a discipline should have an ethics code. The reason is that an ethics code embodies a foundation of the social contract, a commitment by the discipline to the society to ensure that members of the profession—who practice by virtue of permission by the state—abide by a “higher duty of care.” One could say that defining this higher duty of care is the work of “doing ethics.”

It is fruitful to consider that a member of the discipline should read an ethics code on many levels. Most superficially, a code can be viewed as a list of ethical obligations and prohibitions, a laundry list of do’s and don’ts. This manner of reading an ethics code is entirely legitimate and can be considered a starting point for introducing new students and trainees to the ethics of the profession. If one adopts a development perspective on ethics education, a firm grounding in the boundaries of ethical practice is an essential aspect of an introductory course.

On a somewhat deeper level, an ethics code can be read as a guide to the values of the profession. APA’s Standard 1.05, Reporting Ethical Violations, provides an excellent example. Consider a competent adult patient who discloses to a clinical or counseling psychologist that she has had a sexual involvement with a previous treating psychologist. After several sessions, the current psychologist finds the patient’s narrative about the sexual involvement

highly credible and concludes that the previous treating psychologist may well be a sexual predator, given the totality of the patient's description of the events in question. The current psychologist has a strong desire to call the behavior of the previous psychologist to the attention of the licensing board. The psychologist reads Standard 1.05, Reporting Ethical Violations, in the Ethics Code:

If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution under Standard 1.04, Informal Resolution of Ethical Violations, or is not resolved properly in that fashion, psychologists take further action appropriate to the situation. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities. This standard does not apply when an intervention would violate confidentiality rights or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question.

This psychologist is in an ethical dilemma that potentially pits protecting the public (Principle B, Fidelity and Responsibility) against the patient's right to self-determination (Principle E, Respect for People's Rights and Dignity).

Standard 1.05 helps the psychologist resolve this dilemma. According to Standard 1.05, in the context of treating a competent adult client, protecting the public yields to client autonomy. The psychologist will not disclose any identifying information or take any action that risks such a disclosure without the consent of the client. However much the psychologist may wish to take action to call this psychologist's behavior to the attention of the licensing board or an ethics committee, the Ethics Code gives precedence to the client's autonomy so that client consent is necessary before the disclosure. The client may well consent to the psychologist's disclosing information to an adjudicatory body. This decision, however, rests with the client and not with the psychologist.

This analysis raises two exceptions. First, if the client were a minor, it is very likely that a mandatory child abuse reporting law will require the psychologist to report the sexual involvement. In this instance, no Standard 1.05 "confidentiality right" would be violated because such statutes generally explicitly waive confidentiality in the context of child abuse or neglect. Even without an explicit waiver, Standard 4.05, Disclosures, the disclosure would be allowed given the statute's mandate to disclose information. Standard 4.05 allows disclosures for the purpose of protecting children from harm. Second, in jurisdictions that require reporting a sexual involvement between health professionals and a client or that require reporting a violation of the jurisdiction's statutes or regulations, confidentiality rights might again be waived. In these two exceptional cases, an outcome different than the initial analysis might be permitted or even required given the relevant confidentiality laws. Thus, resolving this ethical dilemma must be placed in the context of society's laws governing the practice of the profession. Reading the Ethics Code may not be enough for the psychologist to resolve the dilemma because correctly interpreting the psychologist's ethical obligations may depend on the jurisdiction's law.

The Ethics Code can be read in at least one more way in addition to reading it as a laundry list of ethical obligations and prohibitions and as a guide to the values of the profession. Behind every rule is a reason. Psychologists can read the Ethics Code and ask whether the Ethics Code gets it "right," that is, whether the rule adequately advances the reason behind the rule. This way of reading the Ethics Code is enormously important because it is one of the impetuses behind revising the Ethics Code. APA published its first ethics code in 1953. The 2010 Ethics Code is the 12th version. In each revision process, one of the questions posed in reviewing the Ethics Code is whether the standards adequately promote the goods APA seeks to promote and adequately prevent the harms APA seeks to prevent. Reading the Ethics Code with a critical eye therefore represents an important contribution to moving forward the ethics of the profession. We encourage all psychologists to approach the Ethics Code in this manner.

This discussion should not leave the reader with the impression that the APA Ethics Code can, or even should, govern every dilemma a psychologist will encounter. Many areas of professional activity are outside the “realm” of ethics enforcement under the APA Ethics Code. As three examples, a psychologist may decide not to engage in pro bono work, even though the Ethics Code encourages psychologists “to contribute a portion of their professional time for little or no compensation” (Principle B, Fidelity and Responsibility). Because the principles in the Ethics Code are aspirational rather than enforceable, a psychologist who does not give professional time without compensation could still abide by all the enforceable standards in the Ethics Code and thus not be considered an “unethical” psychologist according to this definition. Second, practice guidelines govern a number of areas such as record keeping and child custody evaluations. These guidelines are not part of the Ethics Code, so departing from them would not necessarily constitute unethical behavior. Guidelines nonetheless can be helpful to psychologists in identifying sound practice. Finally, many psychologists inform themselves about international codes of ethics. Although such codes, which have proliferated in recent years, do not provide the sole basis for an ethics action by the APA in an ethics committee proceeding, they may be helpful to psychologists in more clearly defining what constitutes ethical behavior in different countries and cultures. Thus, psychologists should be aware of the benefits of adhering to the APA Ethics Code as well as the benefits of the many other resources available to them.

THE APA ETHICS PROGRAM: AN OVERVIEW

Professional ethics does not exist in a vacuum. It exists in the context of a defined discipline that very likely has an organization that represents the members’ interests. One aspect of a professional group will be promoting the ethics of the profession. Generally, an association’s ethics office or ethics officer, working together with an ethics committee, will carry out this function.

A frequent misunderstanding about association ethics programs is that they are able to take action on a member’s license. Professional associations may be recognized by the state in various ways, but nonetheless they generally remain private entities. As a result, association ethics programs do not have the authority to remove an individual’s ability to practice; only the relevant jurisdiction has this power. For a variety of reasons, certain association ethics programs offer ethics education and consultation and do not adjudicate ethics matters. Thus, the APA’s ethics program offers only one example of how a professional organization addresses ethics as part of its work.

APA’s ethics program consists of the Ethics Committee and the Ethics Office. The Ethics Committee is composed of eight members who are elected by APA’s governing body, the Council of Representatives. One of the eight members is a public member. The other seven are members of the APA chosen to fill slots that represent issues that frequently come before the Ethics Committee as well as different geographic areas of the Association’s membership. Members serve 3-year terms and are joined in their work by Ethics Committee associates who are chosen directly by the Ethics Committee members (rather than being elected by the Council of Representatives). Associates are like full members in every respect except they do not have a final vote on Ethics Committee matters.

The second part of the APA’s ethics program consists of the Ethics Office. The Ethics Office is composed of APA staff hired by APA’s chief operating officer. The Ethics Office staff assists and supports the Ethics Committee in all its functions, in addition to having such functions as offering educational workshops that the staff provides on its own initiative.

The goal of APA’s ethics program, both the Ethics Office and the Ethics Committee, is to promote ethics in psychology. The Ethics Office and Ethics Committee do so in four ways: adjudication, education, consultation, and special projects. The discussion of ethics consultation is lengthier than the other three discussions and is designed to convey both the importance of ethics consultation and the process by which the APA

Ethics Office provides a consultation in a complex dilemma.

Ethics Adjudication

Ethics adjudication consists of the Ethics Committee, with the assistance of the Office staff, reviewing and responding to complaints against APA members. Cases may come before the Ethics Committee in three ways. First, an individual may file an ethics complaint against an APA member that claims the member has violated the Ethics Code. Second, an entity such as a licensing board or court of law may render a serious decision against an APA member, and the adverse decision comes to the attention of the Ethics Committee. The first path is called a *complainant* matter, and the second path is called a *show cause* matter because the member must now show cause why he or she should not be expelled from APA. One important note about show cause matters is that only matters deemed expellable reach the Ethics Committee through this path. Third and finally, the Ethics Committee may hear a *sua sponte* case, which occurs when the Ethics Committee initiates an ethics case on its own accord by virtue of some information in the public domain. As an example of how a *sua sponte* matter begins, a newspaper may carry a story about a psychologist alleged to have engaged in insurance fraud or sexual improprieties with a patient. Every case that comes before the Ethics Committee is a complainant, show cause, or *sua sponte* matter.

Investigations are closed if they do not meet criteria for becoming cases. The Ethics Committee hears cases, assisted in its investigation by the Ethics Office staff. The Ethics Committee then makes a recommendation, which, for all show cause cases and any other cases involving expulsion, ultimately go to the Board of Directors. The Board of Directors has the final determination regarding the resolution of the case. Generally, cases at both the Ethics Committee and the Board of Directors level are reviewed on the basis of materials submitted by the psychologist alleged to have engaged in inappropriate behavior. The exception is a formal hearing, which is offered in complainant and *sua sponte* cases following an Ethics Committee recommendation of expulsion, the most serious sanction. At a formal hearing,

the psychologist appears in person and has the prerogative to have an attorney present. APA ethics adjudications are conducted under the provisions of the Ethics Committee's "Rules and Procedures" (APA, Ethics Committee, 2002).

Ethics Education

The second function of the ethics program, in addition to adjudicating ethics cases, is ethics education. In the late 1990s, the APA Board of Directors reviewed the ethics program, although historically its function had focused on adjudication. The Board of Directors requested that the Ethics Committee and Ethics Office enhance APA's ethics education efforts. Over the next several years, significant efforts were put into developing an education aspect to the program, and currently, APA offers 40 to 50 ethics workshops and seminars across the country each year. Part of the education program involves a student ethics writing prize, sponsored jointly with APA's graduate student program, and travel grants to the biennial multicultural conference and summit. A goal central to these education efforts is to promote thinking about ethics in a preventative manner so that problems are identified and addressed before they become violations. The education program seeks to promote interest in ethics among psychology students and trainees.

Ethics Consultation

The third function of the ethics program, in addition to adjudication and education, is ethics consultation. The Ethics Office staff answers phone calls from APA members and the public each working day. Typical questions involve providing services over the Internet, billing and the use of collection agencies, appropriate termination, multiple roles and relationships, exceptions to confidentiality, and media ethics. Less frequently, but nonetheless on a regular basis, the Ethics Office receives questions regarding psychologists' stolen cars with charts in them and stolen laptops with patient records. Gifts, bequests in wills, and a psychologist's desiring to adopt a child the psychologist has met in a clinical setting are also subjects of requests for consultation. Given that APA has approximately 150,000 members, associates, and affiliates, all of whom have the

ethics program as a resource, it is not surprising that the Ethics Office receives calls on such a wide range of subjects. In addition to responding to questions received by phone, the ethics program also has electronic means of responding to members' requests for consultations. In such cases, the Ethics Office and Ethics Committee may work together to provide written responses.

That offering ethics consultations has become central to the work of the Ethics Office is natural given the importance of consultation in the professional life of an ethical psychologist. The Preamble to the Ethics Code remarks on the role of consultation:

The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

Ethics consultation is one means by which psychologists remain connected to the community of their peers. Consultation is a check on impulses, a way of ensuring that idiosyncratic perspectives remain grounded in good science, and a reminder that openness to the perspective of one's professional colleagues can be a good antidote to conflicts of interest and to absolute certainty regarding the correctness of one's position. Consultation can be sought when situations are upsetting and it is useful to help regain emotional equilibrium by talking things out, or to double-check one's thinking on a particular situation. Consultations also have the benefit of reducing a psychologist's exposure to legal liability.

On a practical level, offering ethics consultation can be a complex endeavor. One complexity is the necessity of differentiating ethical issues from legal, clinical, and risk management issues, all of which are often—and sometimes inevitably—embedded in calls to the Ethics Office and Ethics Committee. Psychologists contact the Ethics Office when they are faced with a complex dilemma. Simple or clear situations rarely stimulate a psychologist to contact

APA. Situations and dilemmas are often complex precisely because they contain aspects that reach beyond ethics. Frequently, therefore, a primary task in responding to a request for an ethics consultation is to identify the ethical issues and to examine the relationship between the different kinds of issues that the call presents.

Several examples of calls that come to the Ethics Office illustrate this differentiation process. Psychologists call the Ethics Office and ask about information they have received in session that may require a duty to file a mandatory child abuse report to the local child protection agency. The question regarding whether the psychologist must file the report is first a legal question: The psychologist must determine whether the information meets the reporting requirement in the relevant jurisdiction. After this question is answered, the psychologist then applies the Ethics Code.

Standard 4.05, Disclosures

(a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law.

(b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose.

In the same manner, a psychologist may contact the Ethics Office and ask whether he or she now has a duty to warn or protect by virtue of some threatening communication a client has made. For both the mandatory child abuse reporting call and the duty to protect or warn call, the ethical analysis rests on the legal analysis. When the psychologist determines

whether a legal mandate to disclose is present, the psychologist may then apply Standard 4.05.

This differentiation is an important aspect of ethics consultation because a legal question must be answered before determining how the Ethics Code applies. How the Ethics Code will apply therefore will depend on a legal analysis. Providing an ethics consultation may thus highlight the close and important relationship between ethics and law by demonstrating that to interpret a psychologist's ethical obligation correctly may require knowledge of the jurisdiction's law.

Another example of the differentiation between legal and ethics questions may arise in the context of treating children whose parents are divorced. A psychologist will call the Ethics Office, indicating that a single parent with joint legal custody has brought a child in for treatment. The psychologist asks whether the single parent is able to provide adequate consent to treat the child. Again, in this instance, the ethical analysis will follow on the legal analysis.

Standard 3.10, Informed Consent

(a) When psychologists conduct research or provide assessment, therapy, counseling, or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code.

(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law.

What constitutes appropriate informed consent for treating a child will depend on who is "a legally

authorized person." This question, in turn, will depend on the jurisdiction's law. In certain jurisdictions, it may be that a single parent with legal custody is allowed to consent to psychological treatment without the consent or even knowledge of the other parent. In other jurisdictions, it may be necessary that both parents provide consent or at the very least both parents be informed about the treatment.

As with mandatory child abuse reporting and duty to protect or warn, consent to a child's treatment in the context of divorce is first a legal question on which the ethical analysis rests. One implication is that for the purposes of the consultation, the Ethics Office will refer the psychologist to an individual with expertise in the jurisdiction's law. Rendering such legal determinations lies outside of the APA Ethics Office's expertise.

In differentiating ethics from legal, clinical, and risk management considerations, it is essential to have a broad view of what kinds of questions belong to which domain. The ability to differentiate these kinds of questions from one another is important for two reasons. First, different kinds of questions require distinct expertise. As stated previously, the APA Ethics Office does not—nor could it—have expertise in the specific mental health laws of every jurisdiction. Knowing what aspects of a situation rest on knowledge of a specific jurisdiction's laws therefore is essential in determining when to refer the psychologist to an attorney with that specific expertise. Second, the process of offering a consultation entails assisting the psychologist to integrate ethical, legal, clinical, and risk management perspectives into a coherent response. The integration aspect to the consultation process rests on a clear differentiation. For both these reasons, offering ethics consultation involves determining what kinds of questions are being asked.

It is sometimes a challenge to differentiate clearly and definitively what aspects of a situation belong in the legal, clinical, risk management, and ethical categories. Nonetheless, a generally adequate way of differentiating and categorizing the issues can be used. The legal issues are those that depend on the relevant statutes and regulations. The question posed from the legal question is, therefore,

is this course of action required by or consistent with the relevant law? The clinical issues are those that relate to the goals of the treatment or assessment. The question posed from the clinical perspective is, therefore, will this course of action further the treatment or assessment goals? The risk management issues are those that relate to the psychologist's exposure to legal liability. The question posed from the risk management perspective is, therefore, will this course of action expose me to an undue degree of legal liability? The ethical issues are those that relate to the APA Ethics Code and the psychologist's informed professional judgment regarding how to abide by the Ethics Code. The questions from the perspective of ethics are, therefore, what course of action is most consistent with the Ethics Code, and how will I best do right by my client and other people affected by this decision? After having differentiated these questions from one another and integrated the answers into a coherent response, the psychologist will be able to move forward. This differentiation and integration is central to the process of obtaining an ethics consultation.

Special Projects and Issues

The fourth and final function of the ethics program, in addition to adjudication, education, and consultation, is special projects. Professional ethics can be viewed from a developmental perspective. As the field of psychology evolves, new issues emerge that highlight new ethical challenges for psychologists. As these challenges crystallize, they become incorporated into the Ethics Code. A review of the Ethics Code's history illustrates how the evolution of the field is reflected in the Ethics Code. As examples, ethical standards that address work in organizations, such as Standard 3.11, Psychological Services Delivered to or Through Organizations, are relatively recent additions in the context of the Ethics Code's six-decade history:

- (a) Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the services, (2) the intended

recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits of confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.

This standard is the result of the involvement of industrial and organizational psychologists in the most recent revision of the Ethics Code and represents an important contribution to the ethics of this area of practice.

Another example of the evolving nature of psychological ethics is found in Standard 7.04, Student Disclosure of Personal Information, which resulted from the active involvement of a graduate student on the Ethics Code Task Force, the task force charged with drafting the 2002 Ethics Code:

Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

Standards 3.11 and 7.04 illustrate how individuals from specific areas of the field can identify possible harms and contribute their knowledge to the Ethics Code revision process to facilitate the growth

and development of psychologists' professional ethics.

Since the last revision of the Ethics Code, which was adopted in August 2002 and became effective in June 2003, two issues have emerged that have come to the attention of the Ethics Office and Ethics Committee. These issues are the involvement of psychologists in military interrogations, and the ethical aspects of psychologists responding to international humanitarian disasters. A review of the process by which APA addressed the role of psychologists in military interrogations illustrates how APA responds to events in society that affect psychologists and psychology.

The involvement of psychologists in military interrogations has challenged APA on many fronts. Memos written during the George W. Bush administration gave legal permission to engage in behaviors that would meet virtually any psychologist's definition of torture. In response, the APA Council of Representatives passed a series of resolutions, and the APA membership adopted a resolution that established APA's position on the issue of appropriate techniques of interrogation and the nature of settings in which psychologists could do national security-related work. APA has a 20-year history of statements against torture, and the Council of Representatives stated repeatedly that engagement in torture and abuse was always and in every instance unethical. These statements, however, did not elaborate on what constitutes torture. In response to techniques that were being used on detainees, the Council of Representatives adopted a resolution explicitly prohibiting specific techniques of interrogation (the APA website contains a timeline of all APA actions related to the interrogation issue at <http://www.apa.org/news/press/statements/interrogations.aspx>).

In addition to the Council of Representatives prohibiting specific behaviors, in September 2008, the APA membership passed a petition resolution that addressed the issue of setting:

Be it resolved that psychologists may not work in settings where persons are held outside of, or in violation of, either International Law (e.g., the UN Convention

Against Torture and the Geneva Conventions) or the US Constitution (where appropriate), unless they are working directly for the persons being detained or for an independent third party working to protect human rights. (APA, 2008)

In June 2009, the Ethics Committee issued an explicit statement that there is no defense to torture under the Ethics Code.

Finally, in February 2010, the Council of Representatives amended the sections of the Ethics Code that addressed conflicts between ethics and law and between ethics and organizational demands. Previously, these sections had stated that when faced with such a conflict, a psychologist would engage in a process of attempting to resolve the conflict. If the attempt at resolution was unsuccessful, the Ethics Code was silent regarding the psychologist's further ethical obligations. The Council of Representatives amended the Ethics Code to state that the Ethics Code does not offer a defense to a violation of human rights. The amended version of Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, states,

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

Amending the Ethics Code outside of a full revision—a rare occurrence in the history of APA's ethics program—was the culmination of intense discussion and debate about the role of psychologists and the relationship between ethics and law in the context of a legal framework that APA members concluded did not adequately protect the rights, welfare, and interests of detainees in U.S. custody.

The actions of the APA members, the Council of Representatives, and the Ethics Committee over a relatively brief period of time highlight the impact the issue of military interrogations has had on the APA. These actions also highlight the evolving nature of psychology's ethics and how APA has addressed an issue that emerged in the context of events in American society that had significant implications for members of APA both as citizens and as psychologists. (More information on military interrogations can be found in Chapter 5 of this volume.)

THE STRUCTURE AND CONTENT OF THE 2010 ETHICS CODE: AN OVERVIEW

The 2010 Ethics Code is divided into four parts: the Introduction and Applicability section, the Preamble, the Ethical Principles, and the Ethical Standards. The purpose of the Ethics Code is found in the Preamble:

This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

The entire Ethics Code should be read and applied in the context of this passage setting forth the Code's purpose.

History of the Ethics Code

APA published its first ethics code in 1953, nearly 6 decades after the Association was founded. This timing makes sense if one places ethics in a developmental perspective. Over time, psychologists had come to realize that their work could lead to significant benefits for individuals and for society. During this time, psychologists also were learning that significant harms could result when their techniques were not applied properly. The discovery of these harms led APA to begin the process of developing its first ethics code.

The history of the APA's ethics codes can be traced in terms of several key concepts or processes.

The first is the unique origin of the first formal code in APA's use of the critical-incident method. Members of APA were asked to "describe a situation they knew of first-hand, in which a psychologist made a decision having ethical implications, and to indicate ... the ethical issues involved" (APA, 1953, p. vi). This process led to the first APA ethics code, published in 1953, which was 171 pages and included 310 rule elements. This level of detail was abandoned in the 1959 revision, amid criticism that the code was too long, codified etiquette, and was redundant. APA addressed removing the original incidents from the code by requesting that the Ethics Committee develop a casebook that would anchor the code in behavioral descriptions. These behavioral descriptions are the precursors of the ethical standards in the 2010 Ethics Code.

A second process has been the evolving role of enforcement of the Ethics Code. Even before adoption of an ethics code, APA took action on concerns about the behavior of its members. While considering whether to have a formal ethics code, committees took action "informally." Later, these actions were taken by the Ethics Committee, but with few rules for the process of handling complaints. An expulsion was handled by having the member appear before the Council of Representatives. The rules evolved over the years until the bylaws were changed to provide that the Ethics Committee would adopt formal rules, which the Board of Directors would approve on behalf of the Council of Representatives. Again, if one places the evolution of APA's Ethics Code in a developmental framework, it is clear that the processes used by APA to discipline members in the early years of the Association would not withstand 21st-century legal scrutiny.

Two major events in the late 1980s and early 1990s influenced the further development of the Ethics Code. First, the Bureau of Competition of the Federal Trade Commission conducted an investigation and found several provisions in the code of concern. APA entered into a consent agreement in which the Association agreed to rescind several principles in the code that restricted how psychologists related to their work in the public domain. The less obvious but no less important effect of the Federal Trade Commission action was for APA to

enhance the procedural safeguards for members under investigation. Although a number of such safeguards were already in place, the Federal Trade Commission action stimulated a significant enhancement of the “Rules and Procedures” (APA, Ethics Committee, 2002) that govern the Ethics Committee’s work.

The second event in the development of the APA code during this time was a North Carolina court ruling. The court found that several provisions in the APA Ethics Code were “unconstitutionally vague for purposes of being cited for specific violations” (*White v. the North Carolina State Board of Examiners of Practicing Psychologists*, 1990). The court found that psychologists were not given sufficient specificity regarding what behaviors were considered ethics violations that could lead to sanction by the North Carolina licensure board. Because North Carolina was using the APA Ethics Code for its standards and such specificity is considered an element of fairness in a legal proceeding, this action had an impact on APA and other licensure boards. Until the 1992 APA Ethics Code revision, there was no differentiation between aspirational and enforceable provisions in the code. The *White v. North Carolina Board* case was a prime motivation in differentiating principles that are aspirational in nature from enforceable ethical standards that could form the basis of a sanction.

Another important concept in the evolution of the Ethics Code has been the view of the code as a living document. Revisions to the code reflect psychology’s development as a field and in society as a whole. One could use the Ethics Code as a window into the relationship between psychology and society over the past six decades. The addition in the 1965 revision of a standard regarding use of drugs in research came in response to the drug culture of the 1960s. As another example, the original code included provisions that could be interpreted to prohibit sexual involvement with clients. In light of society’s growing awareness of sexual involvements between mental health professionals and clients and the resulting harms, it was felt that a rule explicitly prohibiting this behavior was required. Such a rule was added in the 1977 code. A rule regarding sexual involvement with former clients was added in the

1992 code. Likewise, the amendments adopted by the Council of Representatives in 2010 were a response to concerns that the 2002 Ethics Code could be interpreted to allow psychologists to engage in the abuse of detainees and thus were a reflection of and response to current events in society.

A process that occurred within the Association and that had a significant impact on the ethics program involved discussions during the late 1990s regarding the possibility of discontinuing the adjudication aspect of APA’s ethics program, that is, of stopping ethics enforcement. The Board of Directors reviewed the entire ethics program with a focus on whether APA’s ethics resources were being used effectively. The Board of Directors affirmed continuing ethics adjudication but directed the Ethics Office and Ethics Committee to enhance their ethics education and consultative functions. To ensure that the resources were available for these initiatives, the Board of Directors streamlined the adjudication process by allowing members to resign when under ethics investigation and by automatically expelling members who had received discipline such as loss of license or conviction of a felony. The board determined that as part of this process, a member would be given the opportunity to show cause why expulsion from APA was not appropriate.

The substance and process of the ethics program has evolved since APA published its first Ethics Code in 1953. This evolution reflects developments of the field and events in society as well as a greater emphasis on procedural protections afforded to psychologists who are under ethics scrutiny. A thorough and much lengthier history would review each of the Ethics Code’s 10 revisions, including the 2010 amendments, but this review provides a basic overview of how the 2010 Ethics Code attained its current form.

Introduction and Applicability

The Introduction and Applicability section has seven paragraphs, each of which conveys an important point about the Ethics Code’s application. The first paragraph distinguishes ethical principles from ethical standards. Principles in the Ethics Code are aspirational, whereas standards form enforceable

rules of conduct. The first paragraph makes clear that the standards are not exhaustive and that silence in the standards regarding a particular behavior does not mean that the behavior is ethical or unethical for psychologists.

The second paragraph distinguishes psychologists' professional behavior from their behavior that is "purely private." Purely private conduct is not within the Ethics Code's purview, although behavior that constitutes a felony unrelated to the practice of psychology may fall within the Ethics Committee's jurisdiction and result in a sanction by the Ethics Committee. The second paragraph also states that activities on the "telephone, Internet, and other electronic transmissions" fall within the Ethics Code's purview. This point is important because psychologists increasingly engage in telemedicine and make use of social network sites. (More information on issues related to telehealth can be found in Volume 2, Chapter 10, this handbook.) The Ethics Code's statement makes clear that the Ethics Code covers all psychologists' professional activities regardless of the venue in which they occur.

The third paragraph in the Introduction and Applicability section makes two points. First, membership in the APA commits one to abide by the Ethics Code. Second, a lack of awareness about an ethical standard is not an excuse for unethical conduct. The fourth paragraph addresses the process of ethics adjudication, which is largely governed by the Ethics Committee's "Rules and Procedures" (APA, Ethics Committee, 2002). The fifth paragraph states that the Ethics Code is not intended as the basis for civil liability and should not be the sole foundation for a finding in a court action.

The sixth paragraph explains how the words *reasonably*, *appropriate*, and *potentially* are used in the Ethics Code. In the process of revising the Ethics Code, these words became the subject of considerable discussion and debate. Certain members felt that such words could generate ambiguity about a psychologist's ethical obligations and therefore should be avoided. Other members felt that such words provide flexibility in situations in which a psychologist would need to apply his or her informed, professional judgment. The drafters of the 2002 Ethics Code decided to retain the words for

four reasons. The drafters explained that these words

- (1) allow professional judgment on the part of psychologists, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated.

The drafters gave special attention to the word *reasonable*: "The term *reasonable* means the prevailing professional judgment of psychologists engaged in similar activities in similar circumstances, given the knowledge the psychologist had or should have had at the time."

This explanation is important because it means that a psychologist should be held to the prevailing standard of psychologists working "in similar activities in similar circumstances" and thus limits the conditions against which a psychologist's professional activities are to be measured.

The seventh and final paragraph in the Introduction and Applicability section is a discussion of the process of ethical decision making and the appropriate response of psychologists confronted with a conflict between ethics and law. This paragraph gives a role to the psychologist's own conscience in resolving ethical dilemmas, in addition to the role of the Ethics Code, laws and regulations, and policies adopted by other psychological associations. In terms of the relationship between ethics and law, the Introduction and Applicability section states that psychologists abide by the higher standard when the two differ. If a conflict exists between the two such that ethics and law cannot be reconciled, the Ethics Code sets forth a process for the psychologist to follow. A 2010 amendment to the Introduction and Applicability section clarifies that the Ethics Code may never be used to justify or defend a violation of human rights.

The Preamble

The Preamble is a three-paragraph statement setting forth the goals of the Ethics Code and describing what is required in a psychologist's professional commitment to act ethically. Two of the Preamble's

three paragraphs have been reproduced in this chapter. Central to the Preamble is its statement that the Ethics Code “provides a common set of principles and standards upon which psychologists build their professional and scientific work.” This sentence is important because it establishes that psychologists have a common set of principles and standards that govern their work. Although the Introduction and Applicability section, coming just a few sentences before the Preamble, identifies the psychologist’s personal conscience as having a role in ethical decision making, the Preamble soon makes clear that professional ethics is more than merely the application of a psychologist’s own judgment.

General Principles

APA’s Ethics Code is based on principlism, an approach to ethics that begins with setting forth a set of principles from which can be derived rules for ethical behavior (Beauchamp & Childress, 2009). Different systems of ethics that use a principle-based approach vary in the number of principles they see as foundational. In addition, there is no universally agreed on manner to conceptualize these principles, so some authors may separate beneficence and non-maleficence into two separate ethical principles. APA’s Ethics Code has five principles. Each principle has a paragraph that elaborates on the meaning of the principle for psychologists.

The first principle is Principle A, Beneficence and Nonmaleficence, that is, do good and do no harm. The principle contains several core ideas: When psychologists’ obligations conflict, psychologists resolve conflicts in a manner that avoids or minimizes harm; psychologists are alert to conflicts of interest; and psychologists engage in self-care. This first principle can be viewed as the foundation of all psychology ethics, but the mandate to do no harm often is misunderstood to say that psychologists may never act in such a manner that will bring harm to an individual with whom they work. Filing a mandatory child abuse report regarding a client may harm the client. The good that comes from filing the mandatory report, however—protecting a vulnerable child—outweighs the harm to the client, and so filing the report is consistent with the Ethics Code. It is for this reason that the language under Principle A

states that psychologists attempt to avoid “or” minimize harm.

Principle B, Fidelity and Responsibility, is about establishing trust with clients and others with whom psychologists work. Principle B also calls on psychologists to be aware of their responsibilities to society. Two additional concepts in Principle B have special importance to maintaining the ethics and the ethical identity of the profession. First, psychologists take responsibility for the behavior of their colleagues’ professional conduct. Second, psychologists should strive to contribute a portion of their time for pro bono activities. Principle B thus moves outward from a focus on psychologists’ ethical obligations to the individuals and groups whom they serve, to psychologists’ responsibility for the behavior of other psychologists, to psychologists’ willingness to give back to the community and society for little or no compensation.

Principle C, Integrity, emphasizes accuracy, honesty, and truthfulness among psychologists. In short, Principle C says that psychologists should not lie, cheat, or steal. This principle can also be read in the context of the entire Ethics Code to crystallize and demonstrate the concept of an ethical dilemma. Social psychology has a long and distinguished history of conducting studies that involve deception. A tension exists between Principle C and the methodology of these studies: Accuracy, honesty, and truthfulness are pitted against the advancement of knowledge. This tension represents a dilemma because two core values—integrity and advancing the science of psychology—are in opposition.

Standard 8.07, Deception in Research, provides guidance on how to resolve the tension:

(a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study’s significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.

(b) Psychologists do not deceive prospective participants about research that

is reasonably expected to cause physical pain or severe emotional distress.

(c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data.

Standard 8.07 resolves the tension between accuracy, honesty, and truthfulness on the one hand and advancing science through a study using deception on the other through the mechanism of informed consent (8.07c). The relationship between Principle C and Standard 8.07 provides an example of how the standards may help psychologists resolve the tension between competing values in an ethical dilemma.

Justice is Principle D. The Ethics Code uses the concept of justice as fairness to elaborate on Principle D. Fairness in Principle D means equal access and equal quality in the services psychologists offer. Principle D also highlights the issue of bias in the provision of services. This emphasis raises complex ethical questions. Principle D states the following: “Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.”

At times, psychologists may choose to refer an individual to another psychologist for services. The basis for the referral may be that the referring psychologist does not feel competent to provide the requested services. At what point, however, the decision not to accept clients on the basis of characteristics such as age, gender, sexual orientation, or race becomes an issue of bias and unjust discrimination rather than an issue of professional competence is not always clear. Principle D calls on psychologists to be aware of how their own biases may have a role in these decisions. The statements against bias in Principle D foreshadow Principle E, Respect for People’s Rights and Dignity, which further elaborates on this concept.

Principle E focuses on two related but distinct concepts. The principle calls on psychologists to respect first “the dignity and worth of all people” and second “the rights of individuals to privacy, confidentiality, and self-determination.” The concepts are related because respecting an individual’s dignity and worth may entail respecting his or her privacy, confidentiality, and self-determination. The concepts are distinct because of cultural differences. Privacy, confidentiality, and self-determination may be viewed differently by non-Western cultures than they are in North American contexts. The concepts also are distinct because psychologists work with individuals whose ability to exercise self-determination is compromised in some measure, a possibility that Principle E explicitly recognizes, “Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making.” Thus, respecting the dignity and work of people may have substantially different implications depending on an individual’s capacity to exercise self-determination. Resonating with Principle D, Justice, Principle E ends by identifying impermissible bases for bias and calling on psychologists to eliminate the effect of such biases in their work.

Impermissible biases identified in Principle E include age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status. This list is another example of how the principles resonate with the standards. A number of standards also contain a list of these characteristics, which psychologists are prohibited from using as a basis for their actions.

Ethical Standards

The Ethics Code has 89 ethical standards grouped into 10 sections. Each section addresses an area of ethics. The 89 standards are enforceable and thus establish minimum acceptable standards of conduct for psychologists. When the APA Ethics Committee receives an ethics complaint against a psychologist, the Ethics Committee examines which, if any, of the ethical standards the psychologist has violated. Although the psychologist’s behavior may have been

inconsistent with one or more of the five ethical principles, to make a finding of unethical conduct in a complainant or *sua sponte* case the Ethics Committee must identify a specific standard that has been violated because standards, not principles, form the basis of an ethics action.

Section 1 of the Ethics Code's 10 sections is Resolving Ethical Issues and contains eight standards that address some aspect of the adjudicatory and ethics decision-making processes. Read as a whole, these standards set a tone for how psychologists apply the Ethics Code in their professional lives.

The first standard in the Ethics Code (Standard 1.01, Misuse of Psychologists' Work) obliges psychologists to "correct or minimize" misuse or misrepresentation of their work. The next two ethical standards (Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands) address how psychologists resolve conflicts between ethics and other obligations, such as those imposed by the law or by their workplace. The next two standards (Standards 1.04, Informal Resolution of Ethical Violations, and 1.05, Reporting Ethical Violations) address how psychologists respond to possible ethical violations of colleagues. The final three standards in the first section obligate psychologists to cooperate with ethics committees (Standard 1.06, Cooperating With Ethics Committees), prohibit psychologists from filing improper ethics complaints (Standard 1.07, Improper Complaints), and proscribe psychologists from acting against individuals solely for having filed or being the subject of an ethics complaint (Standard 1.08, Unfair Discrimination Against Complainants and Respondents).

Section 1 of the Ethics Code highlights the centrality of ethics processes to the professional life of the individual psychologist and to the field of psychology as a whole. The section locates psychology within the context of a larger society by setting forth the relationship between the Ethics Code and other obligations in psychologists' lives, such as those presented by the law and in the work setting. Finally, Section 1 defines psychologists' obligations to be aware of the ethical conduct of their colleagues and

thus makes all psychologists responsible for the ethical practice of the profession.

Section 2 of the Ethics Code, Competence, consists of six standards on various aspects of competence. This section distinguishes the 2002 Ethics Code from its predecessor the 1992 Ethics Code (APA, 1992), which did not have an entire set of standards devoted specifically to competence. This reorganization reflects how the drafters of the 2002 Ethics Code envisioned competence as a concept that should be addressed as unitary and cohesive within the Ethics Code.

The first standard in Section 2 (Standard 2.01, Boundaries of Competence) emphasizes the necessity of competence in psychologists' professional lives. The standard indicates that multiple paths to competence include "education, training, supervised experience, consultation, study, or professional experience." This standard also recalls Principle E, Respect for Peoples' Rights and Dignity, by identifying specific individual characteristics that may be essential for psychologists to consider in providing services.

Standard 2.01 emphasizes competence across the spectrum of psychologists' activities by explicitly addressing competence in forensic practice. This language regarding forensic work in the section on competence also distinguishes the 2002 Ethics Code from the 1992 Ethics Code, which had an entire section devoted exclusively to forensic work. The 2002 Ethics Code removed a separate forensic section. Matters covered in the 1992 forensic standards can be found throughout the 2010 Ethics Code, as the section on competence demonstrates.

The second standard in Section 2 (Standard 2.02, Providing Services in Emergencies) creates an exception to the requirement of competence in emergency situations but requires psychologists without the relevant competence to stop working when the emergency ends or when others with the relevant competence are available. The third standard (Standard 2.03, Maintaining Competence) requires psychologists to maintain competence throughout their professional lives. The fourth standard (Standard 2.04, Bases for Scientific and Professional Judgments) underscores the science of psychology by stating that psychologists base their work on "established scientific and professional

knowledge of the discipline.” The fifth standard (Standard 2.05, Delegation of Work to Others) imposes on supervisors the obligation to ensure that the work of supervisees and others is performed in a competent fashion.

The sixth and final standard in Section 2 (Standard 2.06, Personal Problems and Conflicts) involves an issue that has received an increasing amount of attention in the professional literature. Standard 2.06 address psychologists’ responsibilities when a personal problem or conflict potentially interferes with their professional work. This standard highlights the importance of self-care in ensuring that psychologists are able to carry out their work-related responsibilities. In this way, Standard 2.06 “reaches into” a psychologist’s personal life by placing on psychologists an obligation to examine their personal behavior and be alert to times when events in their private lives may affect their work as psychologists.

Section 2 in the Ethics Code requires psychologists to work within the boundaries of their competence. The section then grounds psychologists in the science of the profession. Finally, the section focuses psychologists inward to underscore the connection between the personal and the professional.

Section 3 is Human Relations and has 12 standards. The standards in Section 3 cover a wide range of psychologists’ activities and are relevant to psychologists’ relationships with all the individuals and groups with whom psychologists work. The first three standards in Section 3 (Standards 3.01, Unfair Discrimination; 3.02, Sexual Harassment; and 3.03, Other Harassment) prohibit psychologists from engaging in discriminatory and harassing behaviors. Standards 3.01 and 3.03 relate to Principle E, Respect for Peoples’ Rights and Dignity, by prohibiting discrimination on impermissible bases that closely match Principle E’s list of characteristics.

Standard 3.04, Avoiding Harm, can be considered the heart of Section 3 and even of the standards as a whole. The standard places on psychologists an obligation to avoid harm when it is avoidable and to minimize harm when harm cannot be avoided. By this twofold approach, the Ethics Code recognizes the complexity of psychologists’ work by acknowledging that in certain situations psychologists may not be able to avoid harm entirely.

Standards 3.05, Multiple Relationships, and 3.06, Conflicts of Interest, use similar language to address one of the most vexing ethical challenges to psychologists. Psychologists often misunderstand the Ethics Code to say that all multiple relationships are unethical. Rather, the Ethics Code gives a test to determine which multiple relationships are inappropriate. According to the standard, psychologists should avoid a multiple relationship that “could reasonably be expected to impair the psychologist’s objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm.” Standard 3.06 has similar language alerting psychologists to avoid a potential conflict of interest. These standards are important because they provide two related but distinct reasons why psychologists should avoid certain relationships: interference with professional duties and exploitation. Not all problematic multiple relationships are exploitative; that is to say, some multiple relationships are problematic not by virtue of exploitation but rather because they diminish the effectiveness, competence, or objectivity of psychologists in their professional role and thus create a risk of harm.

Psychologists frequently provide services at the request of a third party. Psychologists who work in court settings, for employee assistance programs, and in schools may find themselves treating or assessing an individual who may not understand the nature of the relationships among the various parties. Standard 3.07, Third-Party Requests for Services, addresses such situations, largely through the mechanism of informed consent. Standard 3.07 requires psychologists to inform all parties involved about essential aspects of the arrangement. Standard 3.08, Exploitative Relationships, prohibits psychologists from exploiting those with whom they work. Standard 3.09, Cooperation With Other Professionals, states that psychologists cooperate with other professionals “in order to serve their clients/patients effectively and appropriately.”

Standard 3.10 addresses informed consent, which is considered central to the ethical practice of all health care–related professions. The standard says that when engaged in any professional activity, psychologists obtain informed consent “in language

that is reasonably understandable to that person,” and provides for certain limited exceptions when psychologists are not required to obtain informed consent. The standard says that psychologists seek the “assent” of individuals who are not legally capable of giving their informed consent and inform individuals of the nature of services that are mandated by law. Finally, the standard requires psychologists to document consent. Such documentation does not require psychologists to obtain signed, written consent forms. Rather, the standard requires that psychologists “appropriately” document consent, which may entail making a note in the chart rather than obtaining a form.

Standard 3.11, Psychological Services Delivered To or Through Organizations, reflects the involvement of psychologists engaged in industrial and organizational work during the Ethics Code revision process. This standard is at heart an informed consent standard because it sets forth what information psychologists provide to their clients when psychologists work in an organizational setting. Finally, Standard 3.12, Interruption of Psychological Services, describes what steps psychologists take to prepare for an anticipated or unanticipated interruption in their services.

Section 3 covers a wide range of relationships. It begins by prohibiting harassment and discrimination, continues by providing a test to determine when to avoid certain relationships, emphasizes the centrality of informed consent in multiple settings where psychologists work, prohibits exploitation and mandates cooperation, and finally requires that psychologists anticipate that their work may be interrupted for unanticipated reasons. Section 3 can best be described as ordering the fundamentals of the relationships that will constitute a psychologist’s professional life.

Section 4, Privacy and Confidentiality, covers the concept of confidentiality. The seven ethical standards in Section 4 address different areas of psychologists’ work. The standards can be read as directing psychologists how to resolve the dilemmas that arise when confidentiality is in tension with other values of the profession such as doing good, avoiding harm, and advancing science. (More information on privilege can be found in Chapter 13 of this volume.)

Standard 4.01, Maintaining Confidentiality, emphasizes the centrality of confidentiality to psychologists. The standard states that “Psychologists have a primary obligation and take reasonable precautions to protect confidential information.” The standard then locates a psychologist’s obligations to maintain confidentiality under the APA Ethics Code in the context of other relevant laws and policies by continuing that psychologists protect confidentiality while “recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship.” This caveat is important because psychologists work in a range of settings in which policies that are in tension with the Ethics Code may govern confidentiality. As a consequence, psychologists must negotiate competing tensions over when, how much, and to whom to disclose confidential information.

Standard 4.02, Discussing the Limits of Confidentiality, is another standard in the Ethics Code that has informed consent as its underlying concern. Standard 4.02 requires psychologists to inform individuals and groups with whom they have a professional relationship about the limits of confidentiality. The standard says that psychologists provide this information at the beginning of the relationship “unless it is not feasible or is contraindicated.” This exception in the standard recognizes beneficence as a consideration that informs when and how the limits of confidentiality will be discussed. It would not be clinically appropriate to inform an individual in a crisis situation of all the limitations to confidentiality. Finally, the standard explicitly calls on psychologists to inform clients about the limits of confidentiality when electronic transmission is used.

Standard 4.03, Recording, states that psychologists must obtain permission before recording voices or images. Standard 4.04, Minimizing Intrusions on Privacy, says that psychologists include in their reports only information relevant to the purpose of the communication. Psychologists write reports for a range of clients and often obtain information that, if disclosed, would have significant implications for an individual’s life, such as a criminal history or medical status. Standard 4.04 indicates that the psychologist should examine whether the information

is relevant to the purpose of the communication. If the information is not relevant to the reason a report is being written, the information should not be included. Standard 4.04 also cautions psychologists to limit their disclosures of information to “persons clearly concerned” and for “appropriate scientific or professional purposes.”

Standard 4.05, Disclosures, sets forth three conditions that allow a psychologist to disclose confidential information: client consent, legal mandate, and legal permission. Client consent is a frequent reason for disclosing confidential information and is consistent with the value of autonomy. Often clients want or even need psychologists to provide information to a third party on their behalf. In the absence of client consent, psychologists disclose information in response to a legal mandate, such as a mandatory child abuse report. In such an instance, a value other than confidentiality, such as protecting a vulnerable child, takes precedence over confidentiality. Mandatory child abuse reporting laws are a reminder that psychology is practiced in the context of a society with laws that affect the work psychologists do. Standard 4.05 also states that psychologists may disclose confidential information when they have legal permission to do so. As an example, the Health Insurance Portability and Accountability Act allows psychologists to share treatment-related information with other professionals for treatment purposes even in the absence of client consent.

Standard 4.06, Consultations, allows psychologists to obtain information for the purpose of a consultation without consent “only if the disclosure cannot be avoided” and then requires psychologists to disclose only the minimum amount of information necessary for the purpose of the consultation. Standard 4.06 thus negotiates the tension between beneficence and confidentiality and gives precedence to beneficence when both goals cannot be met. Standard 4.07, Use of Confidential Information for Didactic or Other Purposes, addresses the disclosure of information in academic publications and at professional conferences. Standard 4.07 states that disclosures for didactic purposes are permitted with the client’s consent. In the absence of client consent, the material must be disguised or the disclosure must be legally authorized. Standard 4.07 raises a

complex and important dilemma for psychologists who use clinical material for didactic purposes. The standard allows disclosure without client consent if identifying information is disguised, but disguise inevitably represents a distortion of the material. Hence, disguise may complicate the very didactic mission that it is intended to further.

Section 5, Advertising and Other Public Statements, has six standards that govern how psychologists present themselves in public forums. Several concepts are firmly embedded in Section 5. First, psychologists do not misrepresent themselves or their work. Second, when psychologists provide public advice or comment, they abide by the Ethics Code and ground their comments in their professional knowledge and experience. Third, psychologists do not exert undue influence over clients or potential clients for their own financial or business gain.

Standard 5.01, Avoidance of False or Deceptive Statements, prohibits psychologists from making false or misleading statements about any aspect of their professional life. Standard 5.02, Statements by Others, places on psychologists the burden of ensuring that statements prepared by others on their behalf are not misleading. Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs, requires that psychologists provide accurate descriptions of non-degree-granting programs. Standard 5.04, Media Presentations, states that psychologists provide public advice or comment in a manner that is consistent with the Ethics Code and grounded in the psychologist’s “professional knowledge, training, or experience in accord with appropriate psychological literature and practice.” Standard 5.04 also prohibits psychologists from indicating that a professional relationship is created with the recipients of media-given advice. Standard 5.05, Testimonials, and Standard 5.06, In-Person Solicitation, address undue influence. These standards state that psychologists do not seek testimonials or solicit business from two classes of people: current clients and “other persons who because of their particular circumstances are vulnerable to undue influence.” In sum, Section 5 underscores the value of accuracy, honesty, and truthfulness, as embodied in Principle C, Integrity, and the value of

nonexploitation, as embodied in Principle A, Beneficence and Nonmaleficence.

Section 6, Record Keeping and Fees, has seven standards that address both how and why psychologists keep records as well as how psychologists make their fee arrangements and respond when they are not paid for their services. The relevance of this section for psychologists is highlighted by reviewing the extensive documentation requirements in federal and state law that govern clinical practice as well in federal regulations and institutional policies that govern psychological research. Regardless of their professional interests and expertise, psychologists will almost certainly engage in record keeping to document their work.

Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records, is one of the few ethical standards that explicitly sets forth reasons for the rule contained in the standard. Standard 6.01 gives five reasons why psychologists keep records: to assist in the provision of services, to allow for replication of research design and research analyses, to meet the requirements of the psychologist's institution, to comply with the law, and to ensure accuracy of billing and payments. This standard illustrates how the Ethics Code can be used in multiple ways. The Ethics Code sets minimal standards of conduct. The Ethics Code can also serve as a guide for thoughtful psychologists in understanding the reasons behind the Code's rules. Standard 6.01 says that keeping records has clinical, research, and risk management aspects, all of which may be helpful to psychologists and to the field of psychology.

Standard 6.02, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work, addresses three aspects of record keeping. Psychologists maintain confidentiality in all aspects of their record retention and maintenance, take steps such as encoding to protect confidentiality when third parties have access to records without the client's consent, and make plans to protect the confidentiality of records in the case of withdrawal from practice or transfer of professional responsibilities. This standard's emphasis on confidentiality resonates with Section 4, Privacy and Confidentiality, and highlights a central ethical concern of documentation: access to confidential

information by individuals not authorized to view the material.

Standard 6.03, Withholding Records for Nonpayment, addresses a situation that clinical and counseling psychologists encounter with unfortunate regularity: clients who do not pay for services and who request records. Standard 6.03 prohibits psychologists from refusing to provide records for a client's emergency treatment for the sole reason that the client has not paid for services. Standard 6.03 does not prohibit a psychologist from withholding records for reasons unrelated to nonpayment, such as clinical reasons, for example if the psychologist determined that reading the record could be harmful to the client.

Standard 6.04, Fees and Financial Arrangements, is a wide-ranging standard that covers multiple issues related to fees and financial arrangements. The standard has an informed consent foundation by stating first, that psychologists reach an agreement "as early as is feasible" in the professional relationship regarding financial arrangements and, second, that anticipated limitations to services because of financing are likewise addressed at the outset of the professional relationship. The standard states that psychologists do not misrepresent their fees and that fee practices are consistent with law. Finally, Standard 6.04 allows psychologists to use collection agencies or legal means to collect an unpaid fee. To behave consistently with Standard 6.04 in collecting a fee, the psychologist must inform the client of the psychologist's intent to collect the fee and disclose the minimum amount of information necessary to do so.

Standard 6.05, Barter With Clients/Patients, allows barter when barter is not clinically contraindicated or exploitative. Standard 6.06, Accuracy in Reports to Payors and Funding Sources, requires psychologists to be accurate in their reports. Such accuracy includes not only the nature, timing, and extent of services provided but also the findings and diagnosis. Thus, Standard 6.06 prohibits psychologists from rendering diagnoses they know to be inaccurate to secure payment for treatment. Standard 6.07, Referrals and Fees, prevents psychologists from accepting fees solely for having made a referral. Standard 6.07

does not preclude a psychologist from receiving a fee based on the administrative costs of transferring a client to another treating psychologist. Rather, the standard's prohibition is for receiving a fee simply for the act of making the referral.

Section 7, Education and Training, consists of seven standards that primarily are focused on protecting students and trainees from harm. This section benefited by the active involvement of a student representative on the Ethics Code Task Force during the revision process leading up to the 2002 Ethics Code. The standards in Section 7 promote informed consent and guard against exploitation and multiple relationships that are likely to be harmful to students.

Standards 7.01, Design of Education and Training Programs; 7.02, Descriptions of Educational and Training Programs; and 7.03, Accuracy in Teaching, underscore two points fundamental to the ethics of training. The first point is that psychology training programs must adequately prepare students for the field. The second point is that academic and training programs must inform students about what the program as a whole and specific program courses offer. The ethical foundations for these two points are informed consent and nonexploitation. If programs accept students for training, the programs must provide students an adequate education and inform students of what they have to offer and will require.

Standard 7.04, Student Disclosure of Personal Information, addresses what has been the source of considerable distress among psychology trainees: the requirement of disclosing personal information. This standard prohibits the required disclosure of a trainee's "history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others" except under two conditions. Such disclosures may be part of a program's curriculum if the program has informed applicants. Second, the disclosure may be required if necessary to evaluate or treat a trainee whose personal problems are interfering with work-related responsibilities or pose harm to the student or others. Like Standard 7.04, Standard 7.05, Mandatory Individual or Group Therapy, addresses a problem that has caused difficulties in training programs, that of required psychotherapy. Standard 7.05 is consistent

with Standard 3.05, Multiple Relationships, by stating that students in programs that require psychotherapy be allowed to select psychotherapists who are unaffiliated with the program and that faculty members who are likely to evaluate students do not provide such psychotherapy.

Standard 7.06, Assessing Student and Supervisee Performance, requires faculty to establish a "timely and specific" process for providing feedback to students. One benefit of Standard 7.06 is that students whose performance is not meeting program expectations are placed on notice and can respond accordingly. Standard 7.06 also states that students are assessed on their actual performance on the basis of "established program requirements." The standard thus requires programs to inform students about what is required for successful completion of the program and to tell students who are not meeting a program's expectations.

Standard 7.07, Sexual Relationships With Students and Supervisees, resonates with Standard 3.05, Multiple Relationships, and Standard 3.08, Exploitative Relationships. This standard prohibits psychologists from having sexual relationships with students over whom they "have or are likely to have evaluative authority" or students or supervisees who are in the psychologist's "department, agency, or training center." This standard represents an expansion of the 1992 Ethics Code standard, which prohibited relationships only when the psychologist had evaluative authority over the student or supervisee. This expansion reflects the Ethics Code Task Force's concern with the harms that could arise from sexual relationships between program faculty and trainees.

Section 8, Research and Publication, has the most standards of any section, a total of 15. Section 8 sets forth the standards of conduct for psychologists who conduct research and publish in the areas of both human and nonhuman animal research studies. The central ethical concerns of Section 8 are informed consent, nonexploitation, and preserving the integrity of the academic enterprise.

Standard 8.01, Institutional Approval, states that psychologists obtain institutional approval when required. This standard locates psychology in the scientific community whose research is governed by

federal and state regulations. The standard does not preclude psychologists from obtaining review by an institutional review board even when not required, and many psychologists do so both because their research is improved and because such review is likely to reduce exposure to liability.

Standards 8.02, Informed Consent to Research, and 8.03, Informed Consent for Recording Voices and Images in Research, are consistent with Standards 3.10, Informed Consent, and 4.03, Recording. Standard 8.02 sets forth the elements of informed consent to research and explicitly addresses what aspects of intervention research psychologists must discuss with patients. Standard 8.03 requires informed consent for recording voices or images, with two exceptions: naturalistic observations when it is not likely that the recording will harm the individuals observed and studies involving deception, when informed consent is obtained at a later stage in the research.

Standard 8.04, Client/Patient, Student, and Subordinate Research Participants, emphasizes that students must be given the same protections as research participants because that is precisely what students are when they participate in research studies. Undergraduate pools are a means of obtaining participants on which much psychological research depends. Even if participating in a subject pool is an undergraduate course requirement, however, research conducted in college and university settings must comply with human subject protections.

Standard 8.05, Dispensing With Informed Consent to Research, sets forth the conditions under which psychologists need not obtain informed consent. The conditions are research in education, work, or public settings when the research does not reasonably present a risk of distress or harm to the participants, and archival research and anonymous questionnaires where the research would not place participants at risk for civil or criminal liability or would not harm other interests of the participant. An exception allowing psychologists to dispense with informed consent also arises when the laws, regulations, or institutional policies (that are consistent with law) permit research without the necessity of obtaining informed consent. Standard 8.06, Offering Inducements for Research, prohibits

psychologists from offering excessive inducements for participation in research.

Standard 8.07, Deception, addresses the ethical dilemma posed by research in which participants are deceived about some important aspect of the study. Although the use of deception is inconsistent with Principle C, Integrity, some of the most important findings in social psychology have been discovered through the use of deception. Standard 8.07 delineates the use of deception in several ways. First, the use of deception must be warranted by the study's prospective value; second, the deception cannot involve physical pain or severe emotional distress; and, third, psychologists must explain the use of deception and provide participants the opportunity to withdraw their data. These delineations represent negotiations between the value of integrity and the value of advancing the science of psychology. Standard 8.08, Debriefing, says that psychologists provide a "prompt" opportunity for participants to obtain information about a study after they have participated. If values justify a delay in providing the information, or withholding the information, psychologists take steps to reduce the potential harm.

Ethical Standard 8.09, Humane Care and Use of Animals in Research, governs psychologists' use of nonhuman animals for research purposes. The standard requires psychologists to abide by relevant laws and professional standards in their use of such animals in research, and to ensure that individuals under their supervision are appropriately trained in the use of animals for research purposes. Standard 8.09, like Standard 8.07, Deception in Research, provides a balancing test: Animals may be subjected to pain or distress only when the study's prospective value warrants doing so. The standard thus represents the resolution of an ethical dilemma by negotiating between two values that are in tension.

Standards 8.10, Reporting Research Results; 8.11, Plagiarism; 8.12, Publication Credit; 8.13, Duplicate Publication of Data; 8.14, Sharing Research Data for Verification; and 8.15, Reviewers, are designed to protect the integrity of the research and publication process. Each of these standards addresses conduct that threatens the academic enterprise in some manner. Examining the reasons behind these rules illustrates potential harm not

only to other psychologists but also to the public. Behavior inconsistent with these standards undermines the value to the public of psychologists' research and writings.

Section 9, Assessment, presents a wide-ranging set of standards related to psychological testing and assessment. The standards address psychologists' obligations both to the individuals whom they are assessing as well as to the field of psychology by emphasizing the scientific bases for psychologists' work. In this way, Section 9 highlights both the interpersonal nature of assessment and the scientific foundation for what psychologists do.

A central concept provides the basis for Standard 9.01, Bases for Assessments: Psychologists base their opinions and recommendations on "information and techniques sufficient to substantiate their findings." A corollary to this concept is that psychologists opine about the psychological characteristics of an individual only after having examined the individual in person, or they appropriately limit their statements. This standard has become highly relevant with the media's dramatically increased interest in the psychological characteristics of individuals in the public domain.

Standard 9.02, Use of Assessments, has several important concepts. These include that psychologists use assessment techniques and methods in a manner appropriate in light of the relevant research, that psychologists use instruments whose validity and reliability are appropriate for the population being assessed, and that psychologists conducting assessment are mindful of an evaluatee's language preference. The foundation of Standard 9.02 is the significant impact that psychological assessment may have on an individual's life and the corresponding ethical responsibility for psychologists to ensure that their assessments consider factors that may affect the outcome.

Standard 9.03, Informed Consent in Assessments, resonates with the other informed consent standards in the Ethics Code, such as Standard 3.10, Informed Consent, and 8.02, Informed Consent to Research. Standard 9.03 requires psychologists to obtain informed consent in assessment contexts, with several exceptions. The exceptions include when the assessment is mandated by law, when

informed consent may be assumed by virtue of the context, or when the testing is for the purpose of evaluating decision-making capacity.

Standards 9.04, Release of Test Data, and 9.11, Maintaining Test Security, may be read as a pair. These standards delineate psychologists' competing responsibilities to protect test security and simultaneously to respect autonomy by releasing test data pursuant to a client request. Taken together, the standards state that psychologists release test data pursuant to a client's consent, but define test data in such a manner that psychological testing materials, such as test protocols and scoring manuals, are protected from disclosure. These standards have been the subject of considerable discussion since the 1992 Ethics Code was adopted. The discussion and debate around what an appropriate release standard should allow and require involves multiple parties, such as plaintiff and defense attorneys, courts, companies that develop psychological tests, and the individuals who are being assessed.

Ethical Standard 9.05, Test Construction, emphasizes the scientific foundation for psychological tests. Standard 9.06, Interpreting Assessment Results, requires psychologists to consider factors such as language and culture that may affect the appropriate interpretation of test results. Standards 9.07, Assessment by Unqualified Persons, and 9.08, Obsolete Tests and Outdated Test Results, preclude test administration by individuals who have not had the proper training and ban the use of tests that are obsolete and are no longer appropriate for use. Standard 9.09, Test Scoring and Interpretation Services, places on psychologists the responsibility for the appropriate application of test scoring and interpretation services used by the psychologists or other professionals with whom the psychologists work. Standard 9.10, Explaining Assessment Results, requires psychologists to take reasonable steps to ensure that the individual assessed or a representative of the individual, for example, a parent or guardian, receives an explanation of assessment results unless some aspect of the assessment context precludes such an explanation and the individual has been so informed.

Section 10, Therapy, consists of 10 standards governing the therapeutic relationship. These standards

correspond to many other standards in the Ethics Code. Such resonance makes perfect sense because the Ethics Code is built on a single set of ethical principles that then are applied in various contexts.

Standard 10.01, Informed Consent to Therapy, is part of a set of informed consent standards in the Ethics Code that includes Standards 3.10, Informed Consent; 8.02, Informed Consent to Research; and 9.03, Informed Consent in Assessments. Standard 10.01 requires psychologists to obtain informed consent to psychotherapy. When a trainee is providing the psychotherapy, Standard 10.01 indicates that the client is informed of the trainee's status and given the name of the supervisor.

Standards 10.02, Therapy Involving Couples or Families, and 10.03, Group Therapy, highlight the importance of informed consent and confidentiality when psychotherapy is offered in a group situation. These standards thus resonate with such standards as Standard 3.07, Third-Party Requests for Services, and 3.11, Psychological Services Delivered To or Through Organizations, by virtue of their focus on multiple clients or potential clients in the provision of services. Although none of the standards in this set of four has the term *informed consent* in the title, the standards nonetheless serve as a helpful guide for psychologists in shaping their informed consent process.

Standard 10.04, Providing Therapy to Those Served by Others, is consistent with Standard 3.09, Cooperation With Other Professionals, by highlighting how relationships with other professionals may affect a mutual client. These standards illustrate how the Ethics Code focuses psychologists on sources of possible harm to clients that do not involve exploitation or incompetence in the direct provision of services. Given the increasing degree to which psychologists work in settings that involve multiple caregivers, Standards 10.04 and 3.09 will likely take an increasing role in psychologists' ethical thinking.

Standards 10.05, Sexual Intimacies With Current Therapy Clients/Patients; 10.06, Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients; 10.07, Therapy With Former Sexual Partners; and 10.08, Sexual Intimacies With Former Therapy Clients/Patients,

focus psychologists on the ethical aspects of sexual involvements with current and former clients, former sexual partners, and individuals related to those whom psychologists are treating. These standards highlight that sexual involvements with a range of individuals in or near to the psychologist's professional life are incompatible with a psychotherapeutic relationship. The standards also resonate with Standards 3.05, Multiple Relationships, and 3.06, Conflicts of Interest, because sexual intimacies risk placing the interests of the psychologist over those of the client.

Standards 10.09, Interruption of Therapy, and the final standard in the Ethics Code, 10.10, Terminating Therapy, resonate with Standard 3.12, Interruption of Services. These standards focus psychologists on taking reasonable steps to ensure that clients' needs are met when services are interrupted or end. Standard 10.10 gives three criteria for when it is appropriate to terminate therapy: The client no longer needs the service, is not likely to benefit for additional services, or will suffer from continued service. Standard 10.10 also allows psychologists to terminate therapy when threatened. The Ethics Code Task Force felt that it was important to allow psychologists to protect themselves from possible danger.

The Ethics Code is a document whose four parts—Introduction and Applicability, Preamble, General Principles, and Ethical Standards—form an organic whole. The Ethics Code is built on a set of five principles with ethical standards that apply the principles across the range of psychologists' activities. The Ethics Code is written flexibly to allow for the evolution of the science of psychology but has clear and focused standards that prohibit behavior psychologists have learned likely will lead to harm. Because the standards are written on the basis of the same principles, there is strong resonance between standards in different sections of the Code. This resonance highlights the unity of the field across the many diverse areas in which psychologists practice. Although a thorough examination of the entire Ethics Code would require a textbook in and of itself, this overview provides the substance and contours of the ethics of psychology.

COMPARING CODES OF ETHICS: MULTIPLE RELATIONSHIPS

Ethics codes of associations whose members provide health and mental health services address many of the same issues. Similarities in the issues addressed make sense because close relationships often exist among what mental health professionals of various disciplines do. Codes of ethics also generally adopt a principlist approach, which tends to align the codes even further because both the principles under discussion in this chapter as well as their interpretation and application derive from and are placed in a Western, industrial context.

The similarities among codes highlight their differences. Excerpts from four codes of ethics that address the issue of multiple relationships are discussed in the paragraphs that follow. Mental health professionals of all disciplines regardless of whether they work in urban, rural, or frontier communities must confront the challenges posed by multiple relationships. Questions regarding multiple relationships are consistently among the most frequent topics of phone calls to the APA Ethics Office.

APA has a five-paragraph ethical standard on multiple relationships, two paragraphs of which are provided here. These paragraphs define what a multiple relationship is and then provide a test for determining which multiple relationships a psychologist should avoid.

Standard 3.05, Multiple Relationships

(a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's

objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

Three elements of these paragraphs highlight similarities and differences among different ethics codes regarding multiple relationships. First, the definition has several parts, each of which implies simultaneity: The relationships are concurrent (the numbered parts begin "at the same time," "at the same time," and "promises," which involves a present action regarding a future behavior). Second, the rule gives distinct criteria for identifying problematic multiple relationships: It is reasonably likely that the relationship will impair the psychologist's objectivity, competence, or effectiveness or that the relationship will lead to exploitation. Third, the "or" in the criteria indicates that not all multiple relationships are exploitative. Some problematic multiple relationships do not lead to exploitation but are rather problematic for reasons independent of exploitation.

The NASW *Code of Ethics* (NASW, 2008) places their rule on dual relationships under the heading "Conflicts of Interest." APA has Standard 3.06, Conflict of Interest, which follows its Standard 3.05, Multiple Relationships. APA Standard 3.06 uses nearly identical criteria as does Standard 3.05, so the NASW and APA codes are similar in this regard. The NASW *Code of Ethics* has three paragraphs, the last of which is as follows:

1.06 Conflicts of Interest

(c) Social workers should not engage in dual or multiple relationships with clients or former clients in which there is a risk of exploitation or potential harm to the client. In instances when dual or multiple relationships are unavoidable, social workers should take steps to protect clients and are responsible for setting clear, appropriate, and culturally sensitive boundaries. (Dual or multiple relationships occur when social workers relate to clients in more than one relationship, whether professional,

social, or business. Dual or multiple relationships can occur simultaneously or consecutively.)

In this paragraph, the NASW *Code of Ethics* (2008) emphasizes the risk of exploitation as a reason to avoid multiple relationships, as does the APA Ethics Code. The NASW code then introduces the concept of “culturally sensitive boundaries.” This concept has enormous implications for defining problematic multiple relationships because the appropriateness of a multiple relationship may depend on culture. The NASW code brings culture directly into the analysis for social workers. Perhaps the feature that most distinguishes the NASW rule from that of APA is the final clause, which states that multiple relationships can occur “simultaneously or consecutively.” This clause removes the aspect of simultaneity found in APA’s Ethics Code and makes explicit that a relationship occurring after the professional relationship has ended—be it professional, social, or business—may constitute an ethically problematic multiple relationship. APA has only one standard (Standard 10.08, Sexual Intimacies with Former Clients/Patients) that explicitly asserts the Ethics Code’s jurisdiction over relationships that follow termination of the professional relationship. The APA Ethics Code also incorporates the concept of sequential relationships, for example, a friendship promised during therapy, but this prohibition is based on a promise that takes place concurrent with the professional relationship so the requirement of simultaneity is retained.

The Feminist Therapy Institute’s *Feminist Therapy Code of Ethics* (Feminist Therapy Institute, 1999) is based on a feminist theoretical orientation. This code places the rule on multiple relationships in the context of the power differential between therapist and client. The code calls on feminist therapists to engage in a process of negotiating this power differential, as these excerpts from the rule demonstrate:

II. Power Differentials

A. A feminist therapist acknowledges the inherent power differentials between client and therapist and models effective use of personal, structural, or institutional power. In using the power differential to

the benefit of the client, she does not take control or power that rightfully belongs to her client.

C. A feminist therapist negotiates and renegotiates formal and/or informal contacts with clients in an ongoing mutual process. As part of the decision-making process, she makes explicit the therapeutic issues involved.

III. Overlapping Relationships

A. A feminist therapist recognizes the complexity and conflicting priorities inherent in multiple or overlapping relationships. The therapist accepts responsibility for monitoring such relationships to prevent potential abuse of or harm to the client.

The feminist code does not use the word *exploitation*, as do the APA and NASW codes, but the concept is clearly present. All three codes place responsibility on the mental health professional and not the client to abide by the rule. The feminist approach is different in nuance by placing the responsibility squarely on the psychotherapist yet also highlighting the mutuality inherent in the relationship. This difference in nuance, which can be described as a parallel rather than a top-down orientation, arises from a feminist theoretical orientation.

The American Counseling Association’s *Code of Ethics* (American Counseling Association, 2005) introduces an idea not found in any of the other three codes: that some multiple relationships may benefit the client.

A.5.c. Nonprofessional Interactions or Relationships (Other Than Sexual or Romantic Interactions or Relationships)

Counselor–client nonprofessional relationships with clients, former clients, their romantic partners, or their family members should be avoided, except when the interaction is potentially beneficial to the client.

(See A.5.d.)

A.5.d. Potentially Beneficial Interactions

When a counselor–client nonprofessional interaction with a client or former client may be potentially beneficial to the client or former client, the counselor must document in case records, prior to the interaction (when feasible), the rationale for such an interaction ... Examples of potentially beneficial interactions include, but are not limited to, attending a formal ceremony (e.g., a wedding/commitment ceremony or graduation); purchasing a service or product provided by a client or former client (excepting unrestricted bartering); hospital visits to an ill family member; mutual membership in a professional association, organization, or community.

The American Counseling Association ethics code reflects the wide range of roles that counselors take. The explicit recognition of benefit is an affirmation that at times it may be helpful for counselors to enter a multiple relationship in these roles and an acknowledgment that it also may be potentially harmful for the counselor to decline the multiple relationship. The concept of benefit sets the American Counseling Association's code apart from the other three codes, which are generally disapproving, or at best neutral, regarding multiple relationships.

This comparison of how four ethics codes address the issue of multiple relationships illustrates how the codes may be similar in substance but differ markedly in their nuance. The differences arise from various factors, such as the culture of the discipline and the theoretical orientation on which the code is based. Although a thorough comparison of ethics codes is well beyond the scope of this chapter, the analysis in this section can be applied to ethics codes more broadly in reviewing the ethical frameworks and rules the authors of the codes establish for their respective disciplines.

THE RELATIONSHIP BETWEEN ETHICS AND LAW

Psychology is practiced in a wide variety of settings. These include courts and correctional facilities,

education systems from nursery schools through universities, hospitals, corporations, and nonprofit organizations. A common denominator to all of these settings is that they operate within the context of a society. As a consequence, psychologists must be aware of both the policies that apply in their particular workplace as well as the laws of the society in which they live as citizens and practice as professionals. Of particular note is how society's laws relate to the ethics of the profession.

This section provides an overview of the relationship between ethics and law. This relationship is complex both because psychology is regulated as a profession and also because the interaction between psychology and law takes place in so many venues. Consider the wide range of roles and issues with which psychologists become involved in civil and criminal legal matters, from jury consulting to determining whether an individual has the capacity to write a will to assessing whether a criminal defendant had the requisite mental state at the time he committed a crime. These are but a tiny fraction of the questions that psychologists who work in and with courts assist the legal system to answer each day. Courts, in turn, represent only one of the many venues in which psychologists whose work touches on the law serve. Although a review of all the ways in which psychologists interact with the law would require a multivolume text, it is important for psychologists to be aware of why every psychologist should be familiar with basic elements of how the law and the ethics of the profession interact. (More information on the regulation of professional psychology can be found in Chapter 18 of this volume.)

Several reasons support why even psychologists who do not work in a role or setting that has a direct relationship to the law or legal issues should be familiar with their jurisdiction's law governing psychologists and the practice of psychology. First, many jurisdictions have statutes and regulations that govern both the title psychologist and the practice of psychology. Calling oneself a psychologist or engaging in the practice of psychology therefore has legal significance and legal implications. Second, many jurisdictions adopt or follow APA's Ethics Code as the ethical standard of practice. Thus, familiarity with the APA Ethics Code is necessary to

abide by the standard of practice established in the jurisdiction. Third, the Ethics Code uses the word *law* or some variant more than 20 times. Therefore, at times, a psychologist must be familiar with the jurisdiction's law to assess his or her responsibilities under the Ethics Code. For these three reasons, every psychologist, regardless of how directly involved in legal matters, should have a basic understanding of how the jurisdiction regulates psychology to abide by the ethical standards of the profession. A sample of laws from several jurisdictions illustrates the close relationship between ethics and law and highlights the importance of psychologists being familiar with the laws in their jurisdiction.

The laws of North Dakota give an example of a title statute and a practice statute, that is, statutes that govern who may call themselves a psychologist and who may engage in the work psychologists do. The practice statute (North Dakota Code, 2010) states that "a person may not engage in the practice of psychology unless that person is licensed as a psychologist or is registered as a psychology resident under this chapter." The statute also states that "a person may not use the title 'psychologist' or similar title unless that person is licensed as a psychologist."

Some jurisdictions have both a title and a practice act, whereas others have one or the other. In nearly all jurisdictions, however, either the practice of psychology or the title psychologist is regulated by law. If an individual violates the jurisdiction's law, either by inappropriately referring to him- or herself as a psychologist or by engaging in an activity that the individual is not licensed to do, the jurisdiction may take legal action in response.

Over and above a jurisdiction's recognition of the title psychologist and of the practice of psychology, another reason that psychologists should be familiar with law is that many jurisdictions adopt or follow APA's Ethics Code as the ethical standard of practice in the jurisdiction. A recent review by the APA Ethics Office indicated that approximately 34 jurisdictions have some mention of APA's Ethics Code in their statutes or regulations. Massachusetts is an example of a jurisdiction that explicitly adopts the APA Ethics Code as the standard of ethical practice.

Other jurisdictions, such as Maryland, do not adopt the APA Ethics Code but rather use the Ethics Code as a guide in writing the jurisdiction's own code of ethics. Still other jurisdictions, such as New York, have adopted a code of ethics that does not make any explicit mention of APA's Ethics Code. Nonetheless, a review of codes that do not mention APA shows that they have considerable overlap with APA's Ethics Code.

Additionally, psychologists should be familiar with their jurisdiction's laws governing psychology because the Ethics Code incorporates the law into the ethical standards. Two examples of how the Ethics Code links ethics and law are Standards 4.02, *Discussing the Limits of Confidentiality*, and 6.01, *Documentation of Professional and Scientific Work and Maintenance of Records*. Each of these standards illustrates how familiarity with the law may be necessary for a psychologist to understand what the Ethics Code requires.

Standard 4.02 requires psychologists to discuss the limits of confidentiality with their clients at the beginning of the relationship absent a compelling reason why the discussion should not take place at that time. The limits of confidentiality are jurisdiction specific and require that the psychologist understand what the law allows and how to apply the Ethics Code properly. Virtually every jurisdiction has a legal mandate to disclose child abuse, and most jurisdictions mandate disclosure of elder abuse and abuse of persons with disabilities as well. Some jurisdictions require disclosure of health professionals' sexual involvements with clients when discovered by another licensed health professional, and other jurisdictions mandate disclosure when a psychologist becomes aware that another licensed psychologist has violated a law of the jurisdiction regarding the practice of psychology. Duty to protect and warn laws vary widely, with some jurisdictions having specific duties and other jurisdictions having no explicit duty to protect or warn a third party at all. Although jurisdictions have considerable common ground regarding the limits of confidentiality, they also have significant variation. As a consequence, psychologists need to be familiar with their jurisdiction's laws to know how to apply Ethical Standard 4.02 properly.

Standard 6.01, Documentation of Professional and Scientific Work and Maintenance of Records, sets forth a series of reasons why psychologists keep records, which includes the requirement to “ensure compliance with law.” A variety of state and federal laws govern how psychologists document their work. Certain jurisdictions state what psychologists must keep in their records with a high degree of specificity. In other jurisdictions, psychologists may be allowed not to keep records of a client in psychotherapy if the client makes such a request. Jurisdictions likewise vary in the length of time they require psychologists to keep records. A psychologist must be familiar with the record-keeping laws in the jurisdiction to comply with Standard 6.01. In sum, to understand what the Ethics Code requires, psychologists need to know their jurisdiction’s laws.

Each of these three reasons—the regulation of psychology, the recognition of the APA Ethics Code by a majority of jurisdictions in North America, and the incorporation of the law into the ethical standards—illustrates the close relationship between ethics and law for licensed psychologists. Many psychologists who conduct research and publish are not licensed. These psychologists may work in colleges, universities, and sometimes in high schools. The relationship between ethics and law remains important for these psychologists as well, as shown by Standard 8.01, Institutional Approval: “When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.”

For research that involves certain types of funding, approval by an institutional review board is required. Such research will be governed by an extensive set of federal regulations that are based on ethical principles closely related to the principles on which the 2010 Ethics Code is based.

The U.S. Department of Health and Human Services has a website devoted to the Office of Human Subject Protections (<http://www.hhs.gov/ohrp/>). This website provides information about ethics codes and federal regulations that govern research with human participants. Standard 8.01 represents

a direct link with the Office of Human Subject Protections by stating that psychologists obtain institutional review board review and approval when required to do so. Thus, the relationship between ethics and law is central to the work of unlicensed psychologists who conduct research with human participants that requires approval under federal regulations. Even psychologists whose research does not require institutional review board approval often seek such approval nonetheless, given that approval by a review board will lessen potential exposure to legal and ethical liability.

The relationship between ethics and law is also relevant to psychologists who use nonhuman animals in their research. Standard 8.09, Humane Care and Use of Animals in Research, refers to “compliance with current federal, state, and local laws and regulations.” The Office of Laboratory Animal Welfare in the Department of Health and Human Services has a website devoted to the use of animals in research (<http://grants2.nih.gov/grants/olaw/olaw.htm>). The Office of Laboratory Animal Welfare website, like the Office of Human Research Protections website, provides extensive resources that include relevant laws. Standards 8.01 and 8.09 highlight the close relationship between ethics and law for unlicensed psychologists conducting research on human and nonhuman animals.

Psychologists engage in activities that are relevant to virtually every aspect of the society in which they live. Society, in turn, has an interest in ensuring that psychologists do their work in an ethical and competent manner. To abide by what society requires, it is important for psychologists to be informed about the relationship between the ethics of their professional and the laws that govern their work.

CONCLUDING THOUGHTS AND FUTURE DIRECTIONS

The purpose of this chapter is to give the reader an overview of ethics in the field of psychology. This overview provides an examination of ethics and ethical decision making; the structure and function of the APA ethics program; the different parts of the APA Ethics Code, including a detailed discussion of

the Ethics Code's five general principles and 89 ethical standards; the manner in which different ethics codes address the issue of multiple relationships; and the relationship between ethics and law. Although not intended to be an exhaustive discussion of these topics, the chapter gives the reader a good sense of the current state of ethics in the profession.

Ethics is a developmental process that evolves over time. As a consequence, a chapter on ethics in the profession of psychology is by definition a snapshot of the state of the field at a given time. This chapter written 10 years from now will not be the same. APA likely will have adopted the next version of its Ethics Code and new challenges and issues requiring ethical analysis will have emerged.

Writings on professional ethics are limited by their historical context. This statement does not mean that psychology—or any profession—abandons its deeply held beliefs or principles. To the contrary, bedrock principles, such as do no harm, justice, and respect, have endured for centuries. Being limited by a historical context implies that one must locate the writings in time and place to appreciate their application fully.

Four issues currently emerging in the field of psychology illustrate this point. These issues are the increasing use of technology, psychologists' responding to complex international humanitarian disasters, coaching, and the involvement of psychologists in national security–related activities. Each of these areas of practice will require thorough ethical analysis as it develops. (More information on redundant psychologists in security-related institutions can be found in Chapter 5 of this volume; more information on coaching can be found in Volume 2, Chapter 9, this handbook; and more information on telehealth can be found in Volume 2, Chapter 10, this handbook.)

The use of telehealth by psychologists has increased substantially over the past 15 years and likely will continue to do so. Telehealth raises a myriad of legal and ethical questions. The dramatic emergence of the technology, however, has not been matched by developments in law and ethics. As a consequence, the legal and ethical infrastructure for the technology has yet to be developed; the rapid rise of this technology has outpaced developments

in laws and ethics. Questions regarding how best to protect confidentiality, what competence is necessary to provide various services over the Internet, and how the reach of the electronic transmissions across jurisdiction lines relates to the jurisdictional oversight of psychologists' activities are all issues that are yet to be settled and that the current version of the Ethics Code does not address.

Psychologists' responding to complex international humanitarian disasters is another issue that merits additional ethical analysis. For many years, psychologists have been responding to humanitarian disasters locally to provide enormous help and relief to victims. In recent years, psychologists increasingly have traveled to international disaster sites. Providing assistance to victims and conducting research far removed from one's own culture and sociopolitical context raises ethical issues regarding confidentiality, competence, and even exploitation that have yet to be addressed and fully considered by organized psychology.

Many psychologists have begun to engage in coaching in addition to other activities. Coaching shares aspects of psychotherapy yet is different in important respects. The differences between coaching and psychotherapy raise questions regarding how the Ethics Code applies to this relatively new area of practice. How informed consent, confidentiality, and the section of the Ethics Code on therapy apply to coaching are questions that merit further ethical consideration, which they undoubtedly will receive in the coming years.

The involvement of psychologists in national security–related activities is a fourth example of an emerging area of practice whose ethical aspects have not been fully considered. APA has addressed the involvement of psychologists in military interrogations in a series of policy statements and Council of Representative resolutions that provide a foundation for additional ethical analyses. As this area of practice continues to develop, the ethical issues will further crystallize for examination in the next Ethics Code revision process. Psychologists' national security–related work will be reviewed in the context of ethical standards on informed consent, confidentiality, and assessment to determine how these standards apply.

Even an activity as familiar to psychology as supervision likely will receive considerable attention by the next Ethics Code revision task force. In the past several years, supervision has received an increasing amount of attention. The Canadian Psychological Association has written a set of ethical guidelines for supervision (Canadian Psychological Association, 2009), and texts have been written on supervision as a unique competence, a relatively new concept for psychology. Supervision serves as an excellent example of how the profession's work in ethics is never done.

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