

CODE COMPARISON:
The Canadian Code of Ethics for Psychologists
Compared With
The APA and ASPPB Codes

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Foreword

The following pages contain comparisons between the following three codes:

1. Canadian Psychological Association. (2000). *Canadian code of ethics for psychologists. Third edition*. Ottawa, ON: Author. <http://www.cpa.ca>
2. American Psychological Association. (2002). *Ethical principles of psychologists and code of conduct*. Washington, DC: Author. <http://apa.org>
3. Association of State and Provincial Psychology Boards. (2005). *Model publications: ASPPB code of conduct*. Montgomery, AL: Author. <http://asppb.org>

With the exception of references and addresses, the entire contents of the three codes appear in some way on the following pages.

Each page of the comparison is divided into three columns. The left column contains the Canadian Psychological Association (CPA) code in its normal sequence. The middle column contains excerpts from the American Psychological Association (APA) code that relate to the same topic or ethical theme of the section(s) of the CPA code appearing in the left column. Similarly, the right column contains excerpts from the Association of State and Provincial Psychology Boards (ASPPB) code.

Occasionally, two or more consecutive CPA standards appear within a single cell of the left column. These standards should be considered together when compared to the excerpts from the two other codes. The same excerpt (in full or in part) from the APA and ASPPB codes sometimes appears beside more than one paragraph or standard of the CPA code. Within cells, excerpts from the APA and ASPPB codes appear in the same order as in the original document.

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
Preamble		
<p>Introduction</p> <p>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 assure that its members act ethically in conducting the affairs of the discipline within society; in particular, a commitment to try to assure 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.</p>	<p>Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. . . (<i>General Principles - Principle B: Fidelity and Responsibility</i>)</p>	<p>Certain concepts should be kept in mind while reviewing and applying the rules contained in the Code. Regulatory rules of conduct protect the public welfare by assuring that the client of a licensed psychologist can have a reasonable, legally protected, understanding of the rules that will govern the professional's behavior in the professional relationship. Effective rules of conduct, in the opinion of the Model Licensure Committee, would have several characteristics of note: . . .</p> <ol style="list-style-type: none"> 2. They primarily protect the public interest. They secondarily protect the interests of the profession only as they assure public confidence and trust in the predictability integrity (<i>sic</i>) of the professional relationship. 3. They are as non-intrusive as possible, interfering as little as possible with professional work while still accomplishing their necessary function of protecting the public from exploitation and harm secondary to particular characteristics of the professional relationship <p>. . . (<i>Foreword, para 6</i>)</p>
<p>The Canadian Psychological Association recognizes its responsibility to help assure ethical behaviour and attitudes on the part of psychologists. Attempts to assure ethical behaviour and attitudes include articulating ethical principles, values, and standards; promoting those principles, values, and standards through education, peer modelling, and consultation; developing and implementing methods to help</p>		

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<p>psychologists monitor the ethics of their behaviour and attitudes; adjudicating complaints of unethical behaviour; and, taking corrective action when warranted.</p>		
<p>This <i>Code</i> articulates ethical principles, values, and standards to guide all members of the Canadian Psychological Association, whether scientists, practitioners, or scientist practitioners, or whether acting in a research, direct service, teaching, student, trainee, administrative, management, employer, employee, supervisory, consultative, peer review, editorial, expert witness, social policy, or any other role related to the discipline of psychology.</p>	<p>. . . Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. . . (<i>Introduction and Applicability, para 2</i>)</p> <p>. . . In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work. (<i>Preamble, para 1</i>)</p>	<p>The rules within this Code of Conduct constitute the standards against which the required professional conduct of a psychologist is measured. (<i>I. Introduction - A. Purpose.</i>)</p> <p>The psychologist shall be governed by this Code of Conduct whenever providing psychological services in any context. . . This Code shall apply to the conduct of all licensees and applicants, including the applicant’s conduct during the period of education, training, and employment which is required for licensure. The term “psychologist” as used within this Code, shall be interpreted accordingly. (<i>I. Introduction - B. Scope.</i>)</p>
<p>Structure and Derivation of Code</p> <p><i>Structure.</i> Four ethical principles, to be considered and balanced in ethical decision making, are presented. Each principle is followed by a statement of those values that are included in and give definition to the principle. Each values statement is followed by a list of ethical standards that illustrate the application of the specific</p>	<p>The American Psychological Association’s (APA’s) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A – E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural</p>	<p>. . . Effective rules of conduct, in the opinion of the Model Licensure Committee, have several characteristics of note: . . .</p> <p>4. They are essentially unambiguous concerning what behavior is acceptable and what is not.</p> <p>5. Among other functions, they assure the creation/existence/retention of appropriate</p>

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<p>principle and values to the activities of psychologists. The standards range from minimal behavioural expectations (e.g., Standards I.28, II.28, III.33, IV.27) to more idealized, but achievable, attitudinal and behavioural expectations (e.g., Standards I.12, II.12, III.10, IV.6). In the margin, to the left of the standards, key words are placed to guide the reader through the standards and to illustrate the relationship of the specific standards to the values statement.</p>	<p>considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by an Ethical Standard does not mean that it is necessarily either ethical or unethical. <i>(Introduction and Applicability, para 1)</i></p> <p>This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose. <i>(General Principles, para 1)</i></p>	<p>information with which the regulatory board can judge compliance with or deviation from its requirements.</p> <p>6. They are intended to be sufficient unto themselves, without dependence for interpretation on additional explanatory materials, since they will be applied in a judicial/legal context interpreting the regulatory code which they are a part (<i>sic</i>), and the explanatory materials would not be an incorporated part of the regulatory code.</p> <p>7. They are non-optional and always pertain. They are coercive, not advisory or aspirational. They are nontrivial, to the extent that any violation is basis for formal disciplinary action, including loss of licensure. <i>(Foreword, para 6)</i></p> <p>Rules of conduct differ in function in critical ways from a professional association ethics code, with which they are sometimes confused. The professional association ethics code is the profession's own standards and guidelines to its own professionals about how to handle the professional-client relationship. Its purpose is to protect the welfare of the public and to educate and promote the integrity of the profession. Professional association codes may incorporate the basic concepts or structure of regulatory rules of conduct. Rules of conduct in a professional association ethics code may be less specific, however, than is desirable for a regulatory code. They may also often address aspirational or advisory issues as well as enforceable issues, and professional matters as well as regulatory matters. <i>(Foreword, para 7)</i></p>
<p><i>Derivation.</i> The four principles represent those</p>		<p>The ASPPB Code of Conduct was first approved</p>

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<p>ethical principles used most consistently by Canadian psychologists to resolve hypothetical ethical dilemmas sent to them by the CPA Committee on Ethics during the initial development of the <i>Code</i>. In addition to the responses provided by Canadian psychologists, the values statements and ethical standards have been derived from interdisciplinary and international ethics codes, provincial and specialty codes of conduct, and ethics literature.</p>		<p>by the Delegates to the Annual Meeting in October, 1990. The original work in drafting the Code was carried out by the ASPPB Model Licensure Committee consisting of David Rodgers (OH), Chair; Stephen DeMers (KY); Terez Retfalvi (NB); Norma Simon (NY); Robert Tipton (VA); and Randolph Reaves (AL). (<i>Foreword, para 1</i>)</p> <p>The development of the Code of Conduct began with the review and distillation of similar codes from fourteen (14) U.S. and Canadian jurisdictions. The Rules contained in the Code reflected input from many jurisdictions and concerned individuals and much debate and scrutiny by the Model Licensure Committee which spent approximately two years in the drafting stage. (<i>Foreword, para 2</i>)</p> <p>The committee represented considerable geographic and professional diversity, yet was able to reach an essentially enthusiastic consensus on nearly all of the rules contained in the Code. Generally favorable reaction by many boards and board members, as well as the vote of the delegates, supported the impression that a consensus Code of Conduct was possible. (<i>Foreword, para 3</i>)</p> <p>Over the years, several suggestions for minor revisions were incorporated by the Model Licensure Committee. In 2000, the Canadian Psychological Association approved the Third Edition of the Canadian Code of Ethics for Psychologists. In 2002, the American Psychological Association approved its revision of</p>

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		<p>Ethical Principles of Psychologists and Code of Conduct. During the 2003 Mid-Winter Meeting of ASPPB, attendees were invited to discuss the ASPPB Code of Conduct in light of the recent revisions to the ethical code of the two national psychology associations. <i>(Foreword, para 4)</i></p> <p>In 2003-2004, ASPPB appointed a task force to develop proposed revisions to the Code. Catherine Yarrow (ON), Chair; Kenneth G. Roy (NJ); Marty Greenberg (CA); Randolph Reaves (AL); and Alex Siegel (PA) reviewed the APA and CPA Codes as well as feedback from the Mid-Winter Meeting. They prepared a draft revision of the Code which was circulated for consultation to member boards of ASPPB, various national psychology organizations and other interested stakeholders. The Task Force, joined by Nancy Rainer (AL) met again to consider the consultation feedback and to revise the proposed amendments to the Code. The revised ASPPB Code of Conduct was provided to the Board of Directors in April 2005 and approved by the Board. <i>(Foreword, para 5)</i></p>
<p>When Principles Conflict</p> <p>All four principles are to be taken into account and balanced in ethical decision making. However, there are circumstances in which ethical principles will conflict and it will not be possible to give each principle equal weight. The complexity of ethical conflicts precludes a firm ordering of the principles. However, the four principles have been ordered according to the weight each generally should be given when they</p>	<p>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. . . <i>(Introduction and Applicability, para 7)</i></p> <p>. . . When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids</p>	

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<p>conflict, namely:</p> <hr/> <p>Principle I: Respect for the Dignity of Persons. This principle, with its emphasis on moral rights, generally should be given the highest weight, except in circumstances in which there is a clear and imminent danger to the physical safety of any person.</p> <p>Principle II: Responsible Caring. This principle generally should be given the second highest weight. Responsible caring requires competence and should be carried out only in ways that respect the dignity of persons.</p> <p>Principle III: Integrity in Relationships. This principle generally should be given the third highest weight. Psychologists are expected to demonstrate the highest integrity in all of their relationships. However, in rare circumstances, values such as openness and straightforwardness might need to be subordinated to the values contained in the Principles of Respect for the Dignity of Persons and Responsible Caring.</p> <p>Principle IV: Responsibility to Society. This principle generally should be given the lowest weight of the four principles when it conflicts with one or more of them. Although it is necessary and important to consider responsibility to</p>	<p>or minimizes harm. . . (<i>General Principles - Principle A: Beneficence and Nonmaleficence</i>)</p> <hr/> <p>. . . If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing</p>	<p>. . . This Code shall not supersede state, federal or provincial statutes. . . (<i>I. Introduction - B. Scope.</i>)</p> <p>. . . this Code of Conduct shall prevail whenever any conflict exists between this Code and any</p>

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<p>society in every ethical decision, adherence to this principle must be subject to and guided by Respect for the Dignity of Persons, Responsible Caring, and Integrity in Relationships. When a person’s welfare appears to conflict with benefits to society, it is often possible to find ways of working for the benefit of society that do not violate respect and responsible caring for the person. However, if this is not possible, the dignity and well-being of a person should not be sacrificed to a vision of the greater good of society, and greater weight must be given to respect and responsible caring for the person.</p>	<p>legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. . . . (Introduction and Applicability, Para 7)</p>	<p>professional association standard. (I. Introduction - E. Aids to Interpretation.)</p>
<p>Even with the above ordering of the principles, psychologists will be faced with ethical dilemmas that are difficult to resolve. In these circumstances, psychologists are expected to engage in an ethical decision-making process that is explicit enough to bear public scrutiny. In some cases, resolution might be a matter of personal conscience. However, decisions of personal conscience are also expected to be the result of a decision-making process that is based on a reasonably coherent set of ethical principles and that can bear public scrutiny. If the psychologist can demonstrate that every reasonable effort was made to apply the ethical principles of this Code and resolution of the conflict has had to depend on the personal conscience of the psychologist, such a psychologist would be deemed to have followed this Code.</p>	<p>The modifiers used in some of the standards of this Ethics Code (e.g., <i>reasonably, appropriate, potentially</i>) are included in the standards when they would (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. As used in this Ethics Code, the term <i>reasonable</i> 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. (Introduction, and Applicability para 6)</p> <p>In applying the Ethics Code to their professional work, psychologists may consider other materials</p>	<p>. . . Effective rules of conduct, in the opinion of the Model Licensure Committee, would have several characteristics of note: 1. They pertain to the process or “mechanics” of the professional relationship, not to the content of the professional judgment itself. They set the boundaries within which the professional relationship functions and are not intended to determine or dictate professional judgment as such. . . . (Foreword, para 6)</p>

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	<p>and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience . . . (<i>Introduction and Applicability, para 7</i>)</p>	
<p>The Ethical Decision-Making Process</p>		
<p>The ethical decision-making process might occur very rapidly, leading to an easy resolution of an ethical issue. This is particularly true of issues for which clear-cut guidelines or standards exist and for which there is no conflict between principles. On the other hand, some ethical issues (particularly those in which ethical principles conflict) are not easily resolved, might be emotionally distressful, and might require time-consuming deliberation.</p>		
<p>The following basic steps typify approaches to ethical decision making:</p> <ol style="list-style-type: none"> 1. Identification of the individuals and groups potentially affected by the decision. 2. Identification of ethically relevant issues and practices, including the interests, rights, and any relevant characteristics of the individuals and groups involved and of the system or circumstances in which the ethical problem arose. 		

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<p>3. Consideration of how personal biases, stresses, or self-interest might influence the development of or choice between courses of action.</p> <p>4. Development of alternative courses of action.</p> <p>5. Analysis of likely short-term, ongoing, and long-term risks and benefits of each course of action on the individual(s)/group(s) involved or likely to be affected (e.g., client, client's family or employees, employing institution, students, research participants, colleagues, the discipline, society, self).</p> <p>6. Choice of course of action after conscientious application of existing principles, values, and standards.</p> <p>7. Action, with a commitment to assume responsibility for the consequences of the action.</p> <p>8. Evaluation of the results of the course of action.</p> <p>9. Assumption of responsibility for consequences of action, including correction of negative consequences, if any, or re-engaging in the decision-making process if the ethical issue is not resolved.</p>	<p>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. <i>(Introduction and Applicability, para 7)</i></p> <p>. . . Psychologists . . . accept appropriate responsibility for their behavior . . . <i>(General Principles - Principle B: Fidelity and Responsibility)</i></p>	<p>The psychologist shall be responsible for his/her own professional decisions and professional actions. <i>(I. Introduction - C. Responsibility for Own Actions.)</i></p>

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<p>10. Appropriate action, as warranted and feasible, to prevent future occurrences of the dilemma (e.g., communication and problem solving with colleagues; changes in procedures and practices).</p>		
<p>Psychologists engaged in time-consuming deliberation are encouraged and expected to consult with parties affected by the ethical problem, when appropriate, and with colleagues and/or advisory bodies when such persons can add knowledge or objectivity to the decision-making process. Although the decision for action remains with the individual psychologist, the seeking and consideration of such assistance reflects an ethical approach to ethical decision making.</p>	<p>In applying the Ethics Code to their professional work, psychologists may . . . consult with others within the field. . . (<i>Introduction and Applicability, para 7</i>)</p> <p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically . . . and to consult with others concerning ethical problems. (<i>Preamble, para 3</i>)</p>	
<p>Uses of the Code</p>		
<p>This Code is intended to guide psychologists in their everyday conduct, thinking, and planning, and in the resolution of ethical dilemmas; that is, it advocates the practice of both proactive and reactive ethics.</p>	<p>The Ethics Code is intended to provide guidance for psychologists . . . (<i>Introduction and Applicability, para 5</i>)</p> <p>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. (<i>Preamble, para 2</i>)</p>	<p>. . . Effective rules of conduct, in the opinion of the Model Licensure Committee, would have several characteristics of note:</p> <p>1. They pertain to the process or “mechanics” of the professional relationship, not to the content of the professional judgment itself. They set the boundaries within which the professional relationship functions and are not intended to determine or dictate professional judgment as such.</p> <p>. . . (<i>Foreword, para 6</i>)</p> <p>The psychologist shall be governed by this Code of Conduct whenever providing psychological services in any context. . . (<i>I. Introduction - B. Scope.</i>)</p>

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<p>The <i>Code</i> also is intended to serve as an umbrella document for the development of codes of conduct or other more specific codes. For example, the <i>Code</i> could be used as an ethical framework for the identification of behaviours that would be considered enforceable in a jurisdiction, the violation of which would constitute misconduct; or, jurisdictions could identify those standards in the <i>Code</i> that would be considered of a more serious nature and, therefore, reportable and subject to possible discipline. In addition, the principles and values could be used to help specialty areas develop standards that are specific to those areas. Some work in this direction has already occurred within CPA (e.g., <i>Guidelines for the Use of Animals in Research and Instruction in Psychology, Guidelines for Non-Discriminatory Practice, Guidelines for Psychologists in Addressing Recovered Memories</i>). The principles and values incorporated into this <i>Code</i>, insofar as they come to be reflected in other documents guiding the behaviour of psychologists, will reduce inconsistency and conflict between documents.</p>	<p>The Ethics Code is intended to provide . . . standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. . . (<i>Introduction and Applicability, para 5</i>)</p>	
<p>A third use of the <i>Code</i> is to assist in the adjudication of complaints against psychologists. A body charged with this responsibility is required to investigate allegations, judge whether unacceptable behaviour has occurred, and determine what corrective action should be taken. In judging whether unacceptable conduct has occurred, many jurisdictions refer to a code of conduct. Some complaints, however, are about conduct that is not addressed directly in a code of conduct. The <i>Code</i> provides an ethical framework</p>	<p>Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. Lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct. (<i>Introduction and Applicability, para 3</i>)</p> <p>The procedures for filing, investigating, and resolving complaints of unethical conduct are</p>	<p>. . . Effective rules of conduct, in the opinion of the Model Licensure Committee, have several characteristics of note: . . .</p> <p>5. Among other functions, they assure the creation/ existence/retention of appropriate information with which the regulatory board can judge compliance with or deviation from its requirements.</p> <p>6. They are intended to be sufficient unto themselves, without dependence for interpretation on additional explanatory materials, since they</p>

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<p>for determining whether the complaint is of enough concern, either at the level of the individual psychologist or at the level of the profession as a whole, to warrant corrective action (e.g., discipline of the individual psychologist, general educational activities for members, or incorporation into the code of conduct). In determining corrective action for an individual psychologist, one of the judgments the adjudicating body needs to make is whether an individual conscientiously engaged in an ethical decision-making process and acted in good faith, or whether there was a negligent or willful disregard of ethical principles. The articulation of the ethical decision-making process contained in this <i>Code</i> provides guidance for making such judgements.</p>	<p>described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the standards of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the standards of the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure. When the sanction to be imposed by APA is less than expulsion, the 2001 Rules and Procedures do not guarantee an opportunity for an in-person hearing, but generally provide that complaints will be resolved only on the basis of a submitted record. (<i>Introduction and Applicability, para 4</i>)</p> <p>The Ethics Code is not intended to be a basis of civil liability. Whether a psychologist has violated the Ethics Code standards does not by itself determine whether the psychologist is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur. (<i>Introduction and Applicability, para 5</i>)</p> <p>. . . The standards in this Ethics Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective</p>	<p>will be applied in a judicial/legal context interpreting the regulatory code which they are a part (<i>sic</i>), and the explanatory materials would not be an incorporated part of the regulatory code. 7. . . They are nontrivial, to the extent that any violation is basis for formal disciplinary action, including loss of licensure. (<i>Foreword, para 6</i>)</p> <p>A violation of this Code of Conduct constitutes unprofessional conduct and is sufficient reason for disciplinary action or denial of either original licensure or reinstatement of licensure. (<i>I. Introduction - D. Violations.</i>)</p> <p>Ethics codes and standards for providers promulgated by the American Psychological Association, the Canadian Psychological Association, and other relevant professional groups shall be used as an aid in resolving ambiguities which may arise in the interpretation of this Code of Conduct, except that this Code of Conduct shall prevail whenever any conflict exists between this Code and any professional association standard. (<i>I. Introduction - E. Aids to Interpretation.</i>)</p>

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	<p>date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Ethics Code that was in effect at the time the conduct occurred. <i>(History and Effective Date Footnote, para 1)</i></p>	
<p>Responsibility of the Individual Psychologist</p> <p>The discipline's contract with society commits the discipline and its members to act as a moral community that develops its ethical awareness and sensitivity, educates new members in the ethics of the discipline, manages its affairs and its members in an ethical manner, is as self-correcting as possible, and is accountable both internally and externally.</p>		
<p>However, responsibility for ethical action depends foremost on the integrity of each individual psychologist; that is, on each psychologist's commitment to behave as ethically as possible in every situation. Acceptance to membership in the Canadian Psychological Association, a scientific and professional association of psychologists, commits members:</p>	<p>Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. . . <i>(Introduction and Applicability, para 3)</i></p> <p>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. <i>(Preamble, para 3)</i></p> <p>. . . Psychologists . . . accept appropriate responsibility for their behavior . . . <i>(General Principles - Principle B: Fidelity and Responsibility)</i></p>	<p>The psychologist shall be responsible for his/her own professional decisions and professional actions. <i>(I. Introduction - C. Responsibility for Own Actions.)</i></p>
<p>1. To adhere to the Association's <i>Code</i> in</p>	<p>In the process of making decisions regarding their</p>	<p>The psychologist shall be governed by this Code</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
all current activities as a psychologist.	professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. <i>(Introduction and Applicability, para 7)</i>	of Conduct whenever providing psychological services in any context. . . <i>(I. Introduction - B. Scope.)</i>
2. To apply conscientiously the ethical principles and values of the <i>Code</i> to new and emerging areas of activity.	(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm. <i>(2. Competence - 2.01 Boundaries of Competence)</i>	The psychologist, when developing competency in a service or technique that is either new to the psychologist or new to the profession, shall engage in ongoing consultation with other psychologists or relevant professionals and shall seek appropriate education and training in the new area. The psychologist shall inform clients of the innovative nature and the known risks associated with the services, so that the client can exercise freedom of choice concerning such services. <i>(III. Rules of Conduct - A. Competence. 4. Adding new services and techniques)</i>
3. To assess and discuss ethical issues and practices with colleagues on a regular basis.	In applying the Ethics Code to their professional work, psychologists may . . . consult with others within the field. . . <i>(Introduction and Applicability, para 7)</i> The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to . . . consult with others concerning ethical problems. <i>(Preamble, para 3)</i>	
4. To bring to the attention of the Association ethical issues that require clarification or the development of new guidelines or standards.		
5. To bring concerns about possible unethical actions by a psychologist directly to the psychologist when the	. . . They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. . . <i>(General Principles -</i>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>action appears to be primarily a lack of sensitivity, knowledge, or experience, and attempt to reach an agreement on the issue and, if needed, on the appropriate action to be taken.</p>	<p><i>Principle B: Fidelity and Responsibility)</i></p> <p>When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.) <i>(I. Resolving Ethical Issues - 1.04 Informal Resolution of Ethical Violations)</i></p>	
<p>6. To bring concerns about possible unethical actions of a more serious nature (e.g., actions that have caused or could cause serious harm, or actions that are considered misconduct in the jurisdiction) to the person(s) or body(ies) best suited to investigating the situation and to stopping or offsetting the harm.</p>	<p>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. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.) <i>(I. Resolving Ethical Issues - 1.05 Reporting Ethical Violations)</i></p>	<p>The psychologist who has substantial reason to believe that there has been a violation of the statutes or rules of the Board, that might reasonably be expected to harm a client, may report such violation to the Board, or if required by statute shall report to the Board. Unless required by statute, the client's name may be provided only with the written consent of the client. <i>(III. Rules of Conduct - L. Reporting Suspected Violations. 1. Reporting of violations to Board)</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
7. To consider seriously others' concerns about one's own possibly unethical actions and attempt to reach an agreement on the issue and, if needed, take appropriate action.		
8. In bringing or in responding to concerns about possible unethical actions, not to be vexatious or malicious.	Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation. (<i>Resolving Ethical Issues - 1.07 Improper Complaints</i>)	
9. To cooperate with duly constituted committees of the Association that are concerned with ethics and ethical conduct.	Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute noncooperation. (<i>1. Resolving Ethical Issues - 1.06 Cooperating With Ethics Committees</i>)	
Relationship of Code to Personal Behaviour		
This Code is intended to guide and regulate only those activities a psychologist engages in by virtue of being a psychologist. There is no intention to guide or regulate a psychologist's activities outside of this context. Personal behaviour becomes a concern of the discipline only if it is of such a nature that it undermines public trust in the discipline as a whole or if it raises questions about the psychologist's ability to carry out appropriately his/her responsibilities as a psychologist.	This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. . . These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code. (<i>Introduction and Applicability, para 2</i>) . . . In addition, APA may take action against a member after his or her conviction of a felony . . . (<i>Introduction and Applicability, para 4</i>)	

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<p>Relationship of Code to Provincial Regulatory Bodies</p> <p>In exercising its responsibility to articulate ethical principles, values, and standards for those who wish to become and remain members in good standing, the Canadian Psychological Association recognizes the multiple memberships that some psychologists have (both regulatory and voluntary). The <i>Code</i> has attempted to encompass and incorporate those ethical principles most prevalent in the discipline as a whole, thereby minimizing the possibility of variance with provincial/territorial regulations and guidelines. Psychologists are expected to respect the requirements of their provincial/territorial regulatory bodies. Such requirements might define particular behaviours that constitute misconduct, are reportable to the regulatory body, and/or are subject to discipline.</p>	<p>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 . . . (<i>Introduction and Applicability, para 7</i>)</p>	<p>Rules of conduct differ in function in critical ways from a professional association ethics code, with which they are sometimes confused. The professional association ethics code is the profession's own standards and guidelines to its own professionals about how to handle the professional-client relationship. Its purpose is to protect the welfare of the public and to educate and promote the integrity of the profession. Professional association codes may incorporate the basic concepts or structure of regulatory rules of conduct. Rules of conduct in a professional association ethics code may be less specific, however, than is desirable for a regulatory code. They may also often address aspirational or advisory issues as well as enforceable issues, and professional matters as well as regulatory matters. (<i>Foreword, para 7</i>)</p> <p>Ethics codes and standards for providers promulgated by the American Psychological Association, the Canadian Psychological Association, and other relevant professional groups shall be used as an aid in resolving ambiguities which may arise in the interpretation of this Code of Conduct, except that this Code of Conduct shall prevail whenever any conflict exists between this Code and any professional association standard. (<i>I. Introduction - E. Aids to Interpretation.</i>)</p>
<p>Definition of Terms</p> <p>For the purposes of this <i>Code</i>:</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>a) “Psychologist” means any person who is a Fellow, Member, Student Affiliate or Foreign Affiliate of the Canadian Psychological Association, or a member of any psychology voluntary association or regulatory body adopting this <i>Code</i>. (Readers are reminded that provincial/territorial jurisdictions might restrict the legal use of the term psychologist in their jurisdiction and that such restrictions are to be honoured.)</p>	<p>Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. . . (<i>Introduction and Applicability, para 3</i>)</p>	<p>. . . This Code shall apply to the conduct of all licensees and applicants, including the applicant’s conduct during the period of education, training, and employment which is required for licensure. The term “psychologist,” as used within this Code, shall be interpreted accordingly. (<i>I. Introduction - B. Scope.</i>)</p>
<p>b) “Client” means an individual, family, or group (including an organization or community) receiving service from a psychologist.</p>		<p>“Client” means one who engages the professional services or advice of a psychologist. Clients may include individuals, couples, families, groups or organizations. . . (<i>II. Definitions - A. Client.</i>)</p>
<p>c) Clients, research participants, students, and any other persons with whom psychologists come in contact in the course of their work, are “independent” if they can independently contract or give informed consent. Such persons are “partially dependent” if the decision to contract or give informed consent is shared between two or more parties (e.g., parents and school boards, workers and Workers’ Compensation Boards, adult members of a family). Such persons are considered to be “fully dependent” if they have little or no choice about whether or not to receive service or participate in an activity (e.g., patients who have been involuntarily committed to a psychiatric facility, or very young</p>		<p>. . . In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for:</p> <ol style="list-style-type: none"> 1. Issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitive multiple relationships, and 2. Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship. (<i>II. Definitions - A. Client.</i>)

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>children involved in a research project).</p> <p>d) “Others” means any persons with whom psychologists come in contact in the course of their work. This may include, but is not limited to: clients seeking help with individual, family, organizational, industrial, or community issues; research participants; employees; students; trainees; supervisees; colleagues; employers; third party payers; and, members of the general public.</p> <p>e) “Legal or civil rights” means those rights protected under laws and statutes recognized by the province or territory in which the psychologist is working.</p> <p>f) “Moral rights” means fundamental and inalienable human rights that might or might not be fully protected by existing laws and statutes. Of particular significance to psychologists, for example, are rights to: distributive justice; fairness and due process; and, developmentally appropriate privacy, self-determination, and personal liberty. Protection of some aspects of these rights might involve practices that are not contained or controlled within current laws and statutes. Moral rights are not limited to those mentioned in this definition.</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>g) “Unjust discrimination” or “unjustly discriminatory” means activities that are prejudicial or promote prejudice to persons because of their culture, nationality, ethnicity, colour, race, religion, sex, gender, marital status, sexual orientation, physical or mental abilities, age, socio-economic status, or any other preference or personal characteristic, condition, or status.</p>		
<p>h) “Sexual harassment” includes either or both of the following: (i) The use of power or authority in an attempt to coerce another person to engage in or tolerate sexual activity. Such uses include explicit or implicit threats of reprisal for noncompliance, or promises of reward for compliance. (ii) Engaging in deliberate and/or repeated unsolicited sexually oriented comments, anecdotes, gestures, or touching, if such behaviours: are offensive and unwelcome; create an offensive, hostile, or intimidating working, learning, or service environment; or, can be expected to be harmful to the recipient. (Footnote 1.)</p>	<p>. . . Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist’s activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. . . (3. <i>Human Relations</i> - 3.02 <i>Sexual Harassment</i>)</p>	
<p>i) The “discipline of psychology” refers to the scientific and applied methods and knowledge of psychology, and to the structures and procedures used by its members for conducting their work in relationship to society, to members of the public, to students or trainees, and to each other.</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>. . . As used in this Ethics Code, the term <i>reasonable</i> 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. (<i>Introduction and Applicability, para 6</i>)</p> <p>(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. (<i>3. Human Relations - 3.05 Multiple Relationships</i>)</p> <p>(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. (<i>5. Advertising and Other Public Statements - 5.01 Avoidance of False or Deceptive Statements</i>)</p> <p>Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. (<i>6. Record Keeping and Fees - 6.05</i>)</p>	<p>“Confidential information” means information revealed by a client or clients or otherwise obtained by a psychologist, where there is reasonable expectation that because of the relationship between the client(s) and the psychologist, or the circumstances under which the information was revealed or obtained, the information shall not be disclosed by the psychologist without the informed written consent of the client(s). (<i>II. Definitions - B. Confidential Information.</i>)</p> <p>“Court order” means the written or oral communication of a member of the judiciary, or other court magistrate or administrator, if such authority has been lawfully delegated to such magistrate or administrator. (<i>II. Definitions - C. Court Order.</i>)</p> <p>“Licensed” means licensed, certified, registered, or any other term when such term identifies a person whose professional behavior is subject to regulation by the Board. (<i>II. Definitions - D. Licensed.</i>)</p> <p>“Professional relationship” means a mutually agreed upon relationship between a psychologist and a client(s) for the purpose of the client(s) obtaining the psychologist’s professional expertise. (<i>II. Definitions - E. Professional Relationship.</i>)</p> <p>“Professional service” means all actions of the psychologist in the context of a professional relationship with a client. (<i>II. Definitions - F. Professional Service.</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p><i>Barter With Clients/Patients)</i></p> <p>(a) The term <i>test data</i> refers to raw and scaled scores, client/patient responses to test questions or stimuli, and psychologists' notes and recordings concerning client/patient statements and behavior during an examination. Those portions of test materials that include client/patient responses are included in the definition of <i>test data</i>. . . (9. <i>Assessment - 9.04 Release of Test Data)</i></p> <p>The term <i>test materials</i> refers to manuals, instruments, protocols, and test questions or stimuli and does not include <i>test data</i> as defined in Standard 9.04, Release of Test Data. (9. <i>Assessment - 9.11 Maintaining Test Security)</i></p>	<p>“Supervisee” means any person who functions under the extended authority of the psychologist to provide, or while in training to provide, psychological services. (II. <i>Definitions - G. Supervisee)</i></p> <p>Psychologists recognize that multiple relationships may occur because of the psychologist's present or previous familial, social, emotional, financial, supervisory, political, administrative or legal relationship with the client or a relevant person associated with or related to the client. . . (III. <i>Rules of Conduct - B. Multiple Relationships. 1. Definition of multiple relationships)</i></p>
<p>Review Schedule</p> <p>To maintain the relevance and responsiveness of this <i>Code</i>, it will be reviewed regularly by the CPA Board of Directors, and revised as needed. You are invited to forward comments and suggestions, at any time, to the CPA office. In addition to psychologists, this invitation is extended to all readers, including members of the public and other disciplines.</p>		<p>ASPPB views this Code as one which may change over time as opinion regarding the proper conduct of psychologists evolves. We trust that it will continue to be a useful and productive document for boards, board members, staff and board attorneys. As always we welcome your comments and suggestions. (<i>Foreword, para 8)</i></p>
<p>Principle I: Respect for the Dignity of Persons</p>		
<p>Values Statement</p> <p>In the course of their work as scientists, practitioners, or scientist-practitioners, psychologists come into contact with many different individuals and groups, including: research participants; clients seeking help with</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>individual, family, organizational, industrial, or community issues; students; trainees; supervisees; employees; business partners; business competitors; colleagues; employers; third party payers; and, the general public.</p>		
<p>In these contacts, psychologists accept as fundamental the principle of respect for the dignity of persons; that is, the belief that each person should be treated primarily as a person or an end in him/herself, not as an object or a means to an end. In so doing, psychologists acknowledge that all persons have a right to have their innate worth as human beings appreciated and that this worth is not dependent upon their culture, nationality, ethnicity, colour, race, religion, sex, gender, marital status, sexual orientation, physical or mental abilities, age, socio-economic status, or any other preference or personal characteristic, condition, or status.</p>	<p>Psychologists respect the dignity and worth of all people . . . Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices. <i>(General Principles - Principle E: Respect for Peoples' Rights and Dignity)</i></p>	<p>The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. <i>(III. Rules of Conduct - D. Client Welfare. 3. Stereotyping.)</i></p> <p>The psychologist shall respect the dignity . . . of his/her research participants . . . <i>(III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</i></p>
<p>Although psychologists have a responsibility to respect the dignity of all persons with whom they come in contact in their role as psychologists, the nature of their contract with society demands that their greatest responsibility be to those persons in the most vulnerable position. Normally, persons directly receiving or involved in the psychologist's activities are in such a position (e.g., research participants, clients, students). This responsibility is almost always greater than their responsibility to those indirectly involved (e.g., employers, third party payers, the general public).</p>	<p>If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code. <i>(1. Resolving Ethical Issues - 1.03 Conflicts Between Ethics and Organizational Demands)</i></p>	<p>. . . In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for:</p> <ol style="list-style-type: none"> 1. Issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitive multiple relationships, and 2. Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship. <i>(II. Definitions - A. Client.)</i>
<p>Adherence to the concept of moral rights is an essential component of respect for the dignity of persons. Rights to privacy, self-determination,</p>	<p>Psychologists respect and protect civil and human rights . . . <i>(Preamble, para 1)</i></p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>personal liberty, and natural justice are of particular importance to psychologists, and they have a responsibility to protect and promote these rights in all of their activities. As such, psychologists have a responsibility to develop and follow procedures for informed consent, confidentiality, fair treatment, and due process that are consistent with those rights.</p>	<p>In their professional actions, psychologists seek to safeguard the . . . rights of those with whom they interact professionally and other affected persons (<i>General Principles - Principle A: Beneficence and Nonmaleficence</i>)</p> <p>Psychologists respect . . . the rights of individuals to privacy, confidentiality, and self-determination. (<i>General Principles - Principle E: Respect for People's Rights and Dignity</i>)</p>	
<p>As individual rights exist within the context of the rights of others and of responsible caring (see Principle II), there might be circumstances in which the possibility of serious detrimental consequences to themselves or others, a diminished capacity to be autonomous, or a court order, would disallow some aspects of the rights to privacy, self-determination, and personal liberty. Indeed, such circumstances might be serious enough to create a duty to warn or protect others (see Standards I.45 and II.39). However, psychologists still have a responsibility to respect the rights of the person(s) involved to the greatest extent possible under the circumstances, and to do what is necessary and reasonable to reduce the need for future disallowances.</p>	<p>(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 . . . (3) protect the client/patient, psychologist, or others from harm . . . in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.) (<i>4. Privacy and Confidentiality - 4.05 Disclosures</i>)</p>	<p>The psychologist may disclose confidential information without the informed written consent of the client when the psychologist judges that disclosure is necessary to protect against a clear and substantial risk of imminent serious harm being inflicted by the client on the client or another person. In such case, the psychologist shall limit disclosure of the otherwise confidential information to only those persons and only that content which would be consistent with the standards of the profession in addressing such problems. When the client is an organization, disclosure shall be made only after the psychologist has made a reasonable and unsuccessful attempt to have the problems corrected within the organization. (<i>III. Rules of Conduct - F. Protecting Confidentiality of Clients. 2. Disclosure without informed written consent</i>)</p>
<p>Psychologists recognize that, although all persons possess moral rights, the manner in which such rights are promoted, protected, and exercised varies across communities and cultures. For instance, definitions of what is considered private vary, as does the role of families and other</p>	<p>. . . Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these</p>	<p>The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (<i>III. Rules of</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>community members in personal decision making. In their work, psychologists acknowledge and respect such differences, while guarding against clear violations of moral rights.</p>	<p>factors when working with members of such groups. . . (General Principles - Principle E: Respect for Peoples' Rights and Dignity)</p>	<p><i>Conduct - D. Client Welfare. 3. Stereotyping)</i></p>
<p>In addition, psychologists recognize that as individual, family, group, or community vulnerabilities increase, or as the power of persons to control their environment or their lives decreases, psychologists have an increasing responsibility to seek ethical advice and to establish safeguards to protect the rights of the persons involved. For this reason, psychologists consider it their responsibility to increase safeguards to protect and promote the rights of persons involved in their activities proportionate to the degree of dependency and the lack of voluntary initiation. For example, this would mean that there would be more safeguards to protect and promote the rights of fully dependent persons than partially dependent persons, and more safeguards for partially dependent than independent persons.</p>	<p>. . . Psychologists are aware that special safeguards may be necessary to protect the rights . . . of persons or communities whose vulnerabilities impair autonomous decision making. . . (General Principles - Principle E: Respect for People's Rights and Dignity)</p>	<p>. . . In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for:</p> <ol style="list-style-type: none"> 1. Issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitive multiple relationships, and 2. Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship. (II. Definitions - A. Client.)
<p>Respect for the dignity of persons also includes the concept of distributive justice. With respect to psychologists, this concept implies that all persons are entitled to benefit equally from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists, regardless of the person's characteristics, condition, or status. Although individual psychologists might specialize and direct their activities to particular populations, or might decline to engage in activities based on the limits of their competence</p>	<p>Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. 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. (General Principles - Principle D: Justice)</p>	

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or acknowledgment of problems in some relationships, psychologists must not exclude persons on a capricious or unjustly discriminatory basis.		
By virtue of the social contract that the discipline has with society, psychologists have a higher duty of care to members of society than the general duty of care all members of society have to each other. However, psychologists are entitled to protect themselves from serious violations of their own moral rights (e.g., privacy, personal liberty) in carrying out their work as psychologists.	(b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship. <i>(10. Therapy - 10.10 Terminating Therapy)</i>	. . . A psychologist may terminate a professional relationship when threatened or otherwise endangered by the client or another relevant person associated with or related to the client. <i>(III. Rules of Conduct - D. Client Welfare. 2. Termination of services)</i>
<p>Ethical Standards</p> <p>In adhering to the Principle of Respect for the Dignity of Persons, psychologists would:</p>		
<i>General respect</i>		
I.1 Demonstrate appropriate respect for the knowledge, insight, experience, and areas of expertise of others.		
I.2 Not engage publicly (e.g., in public statements, presentations, research reports, or with clients) in degrading comments about others, including demeaning jokes based on such characteristics as culture, nationality, ethnicity, colour, race, religion, sex, gender, or sexual orientation.	Psychologists do not knowingly engage in behavior that is demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status. <i>(3. Human Relations - 3.03 Other Harassment)</i>	<p>Psychologists do not engage in any verbal or physical behavior with clients which is . . . demeaning . . . <i>(III. Rules of Conduct - D. Client Welfare. 6. Harassment)</i></p> <p>The psychologist shall not engage in any verbal or physical behavior with supervisees which is . . . demeaning . . . <i>(III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</i></p> <p>The psychologist shall not engage in any verbal or</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
		physical behavior with students which is . . . demeaning . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)
I.3 Strive to use language that conveys respect for the dignity of persons as much as possible in all written or oral communication.		
I.4 Abstain from all forms of harassment, including sexual harassment.	<p>Psychologists do not engage in sexual harassment. . . (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.) (3. Human Relations - 3.02 Sexual Harassment)</p> <p>Psychologists do not knowingly engage in behavior that is harassing . . . to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status. (3. Human Relations - 3.03 Other Harassment)</p>	<p>Psychologists do not engage in any verbal or physical behavior with clients which is seductive . . . or harassing. (III. Rules of Conduct - D. Client Welfare. 6. Harassment)</p> <p>The psychologist shall not engage in any verbal or physical behavior with supervisees which is seductive . . . or harassing . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall not engage in any verbal or physical behavior with students which is seductive . . . or harassing . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
<i>General rights</i>		
I.5 Avoid or refuse to participate in practices disrespectful of the legal, civil, or moral rights of others.	Psychologists respect and protect civil and human rights . . . (Preamble, para 1)	
I.6 Refuse to advise, train, or supply information to anyone who, in the psychologist's judgement, will use the		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
knowledge or skills to infringe on human rights.		
I.7 Make every reasonable effort to ensure that psychological knowledge is not misused, intentionally or unintentionally, to infringe on human rights.		
I.8 Respect the right of research participants, clients, employees, supervisees, students, trainees, and others to safeguard their own dignity.	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. (7. Education and Training - 7.04 Student Disclosure of Personal Information)	The psychologist shall respect the dignity . . . of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)
<i>Non-discrimination</i>		
I.9 Not practice, condone, facilitate, or collaborate with any form of unjust discrimination.	In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law. (3. Human Relations - 3.01 Unfair Discrimination)	The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (III. Rules of Conduct - D. Client Welfare. 3. Stereotyping)
I.10 Act to correct practices that are unjustly		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
discriminatory.		
I.11 Seek to design research, teaching, practice, and business activities in such a way that they contribute to the fair distribution of benefits to individuals and groups, and that they do not unfairly exclude those who are vulnerable or might be disadvantaged.		
<i>Fair treatment/due process</i>		
I.12 Work and act in a spirit of fair treatment to others.	(e) If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.) (6. Record Keeping and Fees - 6.04 Fees and Financial Arrangements)	
I.13 Help to establish and abide by due process or other natural justice procedures for employment, evaluation, adjudication, editorial, and peer review activities.	Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information. (1. Resolving Ethical Issues - 1.08 Unfair Discrimination Against Complainants and Respondents) (b) Psychologists evaluate students and supervisees on the basis of their actual	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>performance on relevant and established program requirements. (7. Education and Training - 7.06 Assessing Student and Supervisee Performance)</p> <p>Psychologists who review material submitted for presentation, publication, grant, or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it. (8. Research and Publication - 8.15 Reviewers)</p>	
<p>I.14 Compensate others fairly for the use of their time, energy, and knowledge, unless such compensation is refused in advance.</p>	<p>When psychologists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation With Other Professionals.) (6. Record Keeping and Fees - 6.07 Referrals and Fees)</p> <p>(a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals . . . This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information. (8. Research and Publication - 8.14 Sharing Research Data for Verification)</p>	<p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
<p>I.15 Establish fees that are fair in light of the time, energy, and knowledge of the psychologist and any associates or employees, and in light of the market value of the product or service. (Also see</p>	<p>. . . Psychologists may barter only if . . . (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.) (6. Record Keeping and Fees - 6.05 Barter With</p>	<p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
Standard IV.12.)	<i>Clients/Patients)</i>	<p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (<i>III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students</i>)</p> <p>The psychologist shall not exploit the client or responsible payer by charging a fee that is excessive for the services performed or by entering into an exploitive bartering arrangement in lieu of a fee. (<i>III. Rules of Conduct - H. Fees and Statements. 2. Reasonableness of fee</i>)</p>
<i>Informed consent</i>		
<p>I.16 Seek as full and active participation as possible from others in decisions that affect them, respecting and integrating as much as possible their opinions and wishes.</p>	<p>(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 . . . (<i>3. Human Relations - 3.10 Informed Consent</i>)</p> <p>(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed. (<i>9. Assessment - 9.03 Informed Consent in Assessments</i>)</p>	<p>The psychologist providing services to a client shall, if feasible, make an appropriate referral of the client to another professional when requested to do so by the client. (<i>III. Rules of Conduct - D. Client Welfare. 5. Referrals on request</i>)</p> <p>At the beginning of a professional relationship, to the extent that the client can understand, the psychologist shall inform a client who is below the age of majority or who has a legal guardian, of the limit the law imposes on the right of confidentiality with respect to his/her communications with the psychologist. (<i>III. Rules of Conduct - F. Protecting Confidentiality of Clients. 5. Legally dependent clients</i>)</p>
<p>I.17 Recognize that informed consent is the result of a process of reaching an agreement to work collaboratively, rather than of simply having a consent form signed.</p>	<p>In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists . . . discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion and</p>	<p>. . . The psychologist shall keep the client fully informed as to . . . the client's right to freedom of choice regarding services provided. (<i>III. Rules of Conduct - D. Client Welfare. 1. Providing explanation of procedure</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues. (10. Therapy - 10.04 Providing Therapy to Those Served by Others)</p>	
<p>I.18 Respect the expressed wishes of persons to involve others (e.g., family members, community members) in their decision making regarding informed consent. This would include respect for written and clearly expressed unwritten advance directives.</p>		
<p>I.19 Obtain informed consent from all independent and partially dependent persons for any psychological services provided to them except in circumstances of urgent need (e.g., disaster or other crisis). In urgent circumstances, psychologists would proceed with the assent of such persons, but fully informed consent would be obtained as soon as possible. (Also see Standard I.29.)</p>	<p>(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. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.) (3. Human Relations - 3.10 Informed Consent)</p>	<p>The psychologist shall respect the dignity . . . of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</p>
<p>I.20 Obtain informed consent for all research activities that involve obtrusive measures, invasion of privacy, more than minimal risk of harm, or any attempt to change the behaviour of research participants.</p>	<p>Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.) (4. Privacy and</p>	<p>The psychologist shall ensure that observation or electronic recording of a client occur only with the informed written consent of the client. (III. Rules of Conduct - F. Protecting Confidentiality of Clients. 11. Observation and electronic recording)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p><i>Confidentiality - 4.03 Recording)</i></p> <p>Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services. <i>(5. Advertising and Other Public Statements - 5.06 In-Person Solicitation)</i></p> <p>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. <i>(8. Research and Publication - 8.01 Institutional Approval)</i></p> <p>Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07, Deception in Research.) <i>(8. Research and Publication - 8.03 Informed Consent for</i></p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p><i>Recording Voices and Images in Research)</i></p> <p>Psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations. (8. <i>Research and Publication - 8.05 Dispensing With Informed Consent for Research)</i></p> <p>(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data. (8. <i>Research and Publication - 8.14 Sharing Research Data for Verification)</i></p> <p>(a) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except when (1) testing is mandated by law or governmental regulations; (2) informed consent is</p>	

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	<p>implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity. . . (9. Assessment - 9.03 Informed Consent in Assessments.)</p> <p>(c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter . . . (9. Assessment - 9.03 Informed Consent in Assessments)</p>	
<p>I.21 Establish and use signed consent forms that specify the dimensions of informed consent or that acknowledge that such dimensions have been explained and are understood, if such forms are required by law or if such forms are desired by the psychologist, the person(s) giving consent, or the organization for whom the psychologist works.</p> <p>I.22 Accept and document oral consent, in situations in which signed consent forms are not acceptable culturally or in which there are other good reasons for not using them.</p>	<p>(d) Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.) (3. Human Relations - 3.10 Informed Consent)</p>	<p>. . . With the exceptions set forth below, or in accordance with any federal, state or provincial statute or regulation, the psychologist shall disclose confidential information to others only with the informed written consent of the client. (III. Rules of Conduct - F. Protecting Confidentiality of Clients, 1. In general)</p> <p>The psychologist shall ensure that observation or electronic recording of a client occur only with the informed written consent of the client. (III. Rules of Conduct - F. Protecting Confidentiality of Clients. 11. Observation and electronic recording)</p>
<p>I.23 Provide, in obtaining informed consent, as much information as reasonable or prudent persons would want to know before making a decision or consenting to the activity. The psychologist would relay this information in language that the persons understand (including</p>	<p>(a) . . . psychologists . . . obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons . . . (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.) (3. Human Relations - 3.10</p>	<p>. . . In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for:</p> <p>1. Issues directly affecting the physical or emotional safety of the individual, such as sexual</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>providing translation into another language, if necessary) and would take whatever reasonable steps are needed to ensure that the information was, in fact, understood.</p> <p>I.24 Ensure, in the process of obtaining informed consent, that at least the following points are understood: purpose and nature of the activity; mutual responsibilities; confidentiality protections and limitations; likely benefits and risks; alternatives; the likely consequences of non-action; the option to refuse or withdraw at any time, without prejudice; over what period of time the consent applies; and, how to rescind consent if desired. (Also see Standards III.23-30.)</p>	<p><i>Informed Consent)</i></p> <p>(a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.) (4. <i>Privacy and Confidentiality - 4.02 Discussing the Limits of Confidentiality)</i></p> <p>(c) Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality. (4. <i>Privacy and Confidentiality - 4.02 Discussing the Limits of Confidentiality)</i></p> <p>Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service) . . . and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties. (7. <i>Education and Training - 7.02 Description of Education and Training Programs)</i></p> <p>(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the</p>	<p>or other exploitive multiple relationships, and 2. Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship. (II. <i>Definitions - A. Client.</i>)</p> <p>The psychologist, when developing competency in a service or technique that is either new to the psychologist or new to the profession . . . shall inform clients of the innovative nature and the known risks associated with the services, so that the client can exercise freedom of choice concerning such services. (III. <i>Rules of Conduct - A. Competence. 4. Adding new services and techniques)</i></p> <p>. . . The psychologist shall keep the client fully informed as to the purpose and nature of any evaluation, treatment, or other procedures, and of the client's right to freedom of choice regarding services provided. (III. <i>Rules of Conduct - D. Client Welfare. 1. Providing explanation of procedures)</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. They provide opportunity for the prospective participants to ask questions and receive answers. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.) (8. <i>Research and Publication - 8.02 Informed Consent to Research</i>)</p> <p>(b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.)</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p data-bbox="779 253 1268 310"><i>(8. Research and Publication - 8.02 Informed Consent to Research)</i></p> <p data-bbox="779 350 1304 561">(a) . . . Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers. <i>(9. Assessment - 9.03 Informed Consent in Assessments)</i></p> <p data-bbox="779 602 1314 846">(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed. <i>(9. Assessment - 9.03 Informed Consent in Assessments)</i></p> <p data-bbox="779 886 1310 1260">(a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties, and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.) <i>(10. Therapy - 10.01 Informed Consent to Therapy)</i></p> <p data-bbox="779 1292 1220 1382">(b) When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.) (<i>10. Therapy - 10.01 Informed Consent to Therapy</i>)</p> <p>(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor. (<i>10. Therapy - 10.01 Informed Consent to Therapy</i>)</p>	
<p>I.25 Provide new information in a timely manner, whenever such information becomes available and is significant enough that it reasonably could be seen as relevant to the original or ongoing informed consent.</p>	<p>(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant. (<i>4. Privacy and Confidentiality - 4.02 Discussing the Limits of Confidentiality</i>)</p>	<p>. . . The psychologist shall keep the client fully informed as to the purpose and nature of any evaluation, treatment, or other procedures, and of the client's right to freedom of choice regarding services provided. (<i>III. Rules of Conduct - D. Client Welfare. 1. Providing explanation of procedures</i>)</p>
<p>I.26 Clarify the nature of multiple relationships to all concerned parties before obtaining consent, if providing services to or conducting research at the request or for the use of third parties. This would include, but not be limited to: the purpose of the service or research; the reasonably anticipated use that will be made of information collected; and, the limits on confidentiality. Third parties may include schools, courts, government</p>	<p>(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.) (<i>3. Human Relations - 3.05 Multiple Relationships</i>)</p> <p>When psychologists agree to provide services to a</p>	<p>. . . In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for:</p> <ol style="list-style-type: none"> 1. Issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitive multiple relationships, and 2. Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a

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<p>agencies, insurance companies, police, and special funding bodies.</p>	<p>person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standards 3.05, Multiple Relationships, and 4.02, Discussing the Limits of Confidentiality.) (3. <i>Human Relations - 3.07 Third-Party Requests for Services</i>)</p> <p>(c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding. (3. <i>Human Relations - 3.10 Informed Consent</i>)</p> <p>(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. . (3. <i>Human Relations - 3.11 Psychological Services Delivered To or Through Organizations</i>)</p>	<p>therapy relationship. (II. <i>Definitions - A. Client.</i>)</p> <p>In a situation in which more than one party has an appropriate interest in the professional services rendered by the psychologist to a client or clients, the psychologist shall, to the extent possible, clarify to all parties prior to rendering the services the dimensions of confidentiality and professional responsibility that shall pertain in the rendering of services. Such clarification is specifically indicated, among other circumstances, when the client is an organization. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 3. Services involving more than one interested party</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service. (3. <i>Human Relations - 3.11 Psychological Services Delivered To or Through Organizations</i>)</p> <p>(a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) . . . (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.) (4. <i>Privacy and Confidentiality - 4.02 Discussing the Limits of Confidentiality</i>)</p> <p>(a) . . . Informed consent includes an explanation of . . . involvement of third parties, and limits of confidentiality . . . (9. <i>Assessment - 9.03 Informed Consent in Assessments</i>)</p> <p>(b) Psychologists inform persons . . . for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services . . . (9. <i>Assessment - 9.03 Informed Consent in Assessments</i>)</p> <p>(a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the . . . involvement of third parties, and limits of confidentiality . . . (See also Standards 4.02,</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.) (10. Therapy - 10.01 Informed Consent to Therapy)</p> <p>(a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.) (10. Therapy - 10.02 Therapy Involving Couples or Families)</p>	
<p><i>Freedom of consent</i></p> <hr/> <p>I.27 Take all reasonable steps to ensure that consent is not given under conditions of coercion, undue pressure, or undue reward. (Also see Standard III.32.)</p>	<p>Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. . . However, this prohibition does not preclude . . . (2) providing disaster or community outreach services. (5. Advertising and Other Public Statements - 5.06 In-Person Solicitation)</p> <p>(a) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation. (8. Research and Publication - 8.06</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<i>Offering Inducements for Research Participation)</i>	
I.28 Not proceed with any research activity, if consent is given under any condition of coercion, undue pressure, or undue reward. (Also see Standard III.32.)		
I.29 Take all reasonable steps to confirm or re-establish freedom of consent, if consent for service is given under conditions of duress or conditions of extreme need.		
I.30 Respect the right of persons to discontinue participation or service at any time, and be responsive to non-verbal indications of a desire to discontinue if a person has difficulty with verbally communicating such a desire (e.g., young children, verbally disabled persons) or, due to culture, is unlikely to communicate such a desire orally.		
<i>Protections for vulnerable persons</i>		
I.31 Seek an independent and adequate ethical review of human rights issues and protections for any research involving members of vulnerable groups, including persons of diminished capacity to give informed consent, before making a decision to proceed.		
I.32 Not use persons of diminished capacity to give informed consent in research studies, if the research involved may be carried out equally well with persons		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>who have a fuller capacity to give informed consent.</p>		
<p>I.33 Seek to use methods that maximize the understanding and ability to consent of persons of diminished capacity to give informed consent, and that reduce the need for a substitute decision maker.</p>	<p>(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. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights . . . (3. Human Relations - 3.10 Informed Consent)</p>	<p>. . . In the case of individuals with legal guardians, including minors and legally incompetent adults, the legal guardian shall be the client for decision making purposes, except that the individual receiving services shall be the client for:</p> <ol style="list-style-type: none"> 1. Issues directly affecting the physical or emotional safety of the individual, such as sexual or other exploitive multiple relationships, and 2. Issues specifically reserved to the individual, and agreed to by the guardian prior to rendering of services, such as confidential communication in a therapy relationship. (II. Definitions - A. Client.)
<p>I.34 Carry out informed consent processes with those persons who are legally responsible or appointed to give informed consent on behalf of persons not competent to consent on their own behalf, seeking to ensure respect for any previously expressed preferences of persons not competent to consent.</p>	<p>(b) Psychologists inform persons with questionable capacity to consent . . . about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed. (9. Assessment - 9.03 Informed Consent in Assessments)</p>	<p>At the beginning of a professional relationship, to the extent that the client can understand, the psychologist shall inform a client who is below the age of majority or who has a legal guardian, of the limit the law imposes on the right of confidentiality with respect to his/her communications with the psychologist. (III. Rules of Conduct - F. Protecting Confidentiality of Clients. 5. Legally dependent clients)</p>
<p>I.35 Seek willing and adequately informed participation from any person of diminished capacity to give informed consent, and proceed without this assent only if the service or research activity is considered to be of direct benefit to that person.</p>	<p>(b) Psychologists inform persons with questionable capacity to consent . . . about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed. (9. Assessment - 9.03 Informed Consent in Assessments)</p>	<p>At the beginning of a professional relationship, to the extent that the client can understand, the psychologist shall inform a client who is below the age of majority or who has a legal guardian, of the limit the law imposes on the right of confidentiality with respect to his/her communications with the psychologist. (III. Rules of Conduct - F. Protecting Confidentiality of Clients. 5. Legally dependent clients)</p>
<p>I.36 Be particularly cautious in establishing the freedom of consent of any person who is in a dependent relationship to the psychologist (e.g., student, employee). This may include, but is not limited to, offering that person an alternative activity to fulfill their educational or employment goals, or offering a range of research studies or experience opportunities from which the person can</p>	<p>Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees. (See also Standards 3.05, Multiple Relationships; . . . 7.07, Sexual Relationships With Students and Supervisees; . . .) (3. Human Relations - 3.08 Exploitative Relationships)</p> <p>Psychologists responsible for education and</p>	<p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of</p>

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<p>select, none of which is so onerous as to be coercive.</p>	<p>training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service) . . . and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties. <i>(7. Education and Training - 7.02 Description of Education and Training Programs)</i></p> <p>(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.) <i>(7. Education and Training - 7.05 Mandatory Individual or Group Therapy)</i></p> <p>(b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.) <i>(7. Education and Training - 7.05 Mandatory Individual or Group Therapy)</i></p> <p>(a) When psychologists conduct research with clients/patients, students, or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation. <i>(8. Research and Publication - 8.04 Client/Patient, Student, and Subordinate Research</i></p>	<p><i>students)</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p><i>Participants)</i></p> <p>(b) When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities. (8. <i>Research and Publication - 8.04 Client/Patient, Student, and Subordinate Research Participants)</i></p>	
<i>Privacy</i>		
<p>I.37 Seek and collect only information that is germane to the purpose(s) for which consent has been obtained.</p>	<p>(a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made. (4. <i>Privacy and Confidentiality - 4.04 Minimizing Intrusions on Privacy)</i></p>	
<p>I.38 Take care not to infringe, in research, teaching, or service activities, on the personally, developmentally, or culturally defined private space of individuals or groups, unless clear permission is granted to do so.</p>	<p>(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters. (4. <i>Privacy and Confidentiality - 4.04 Minimizing Intrusions on Privacy)</i></p> <p>When consulting with colleagues, . . . (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.) (4. <i>Privacy and Confidentiality - 4.06 Consultations)</i></p>	
<p>I.39 Record only that private information necessary for the provision of continuous, coordinated service, or for the goals of the particular research study being conducted, or that is required or</p>	<p>(a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made. (4. <i>Privacy and Confidentiality - 4.04 Minimizing Intrusions on</i></p>	

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justified by law. (Also see Standards IV.17 and IV.18.)	<i>Privacy)</i>	
I.40 Respect the right of research participants, employees, supervisees, students, and trainees to reasonable personal privacy.	<p>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. (7. Education and Training - 7.04 Student Disclosure of Personal Information)</p> <p>(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.) (7. Education and Training - 7.05 Mandatory Individual or Group Therapy)</p>	<p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall respect the dignity . . . of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
I.41 Collect, store, handle, and transfer all private information, whether written or unwritten (e.g., communication during service provision, written records, e-mail or fax communication, computer files,	Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or	b. To meet the requirements of this rule, so as to provide a formal record for review, but not necessarily for other legal purposes, the psychologist shall assure that all data entries in the professional records are maintained for a period of

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<p>video-tapes), in a way that attends to the needs for privacy and security. This would include having adequate plans for records in circumstances of one's own serious illness, termination of employment, or death.</p> <p>I.42 Take all reasonable steps to ensure that records over which they have control remain personally identifiable only as long as necessary in the interests of those to whom they refer and/or to the research project for which they were collected, or as required or justified by law (e.g., the possible need to defend oneself against future allegations), and render anonymous or destroy any records under their control that no longer need to be personally identifiable. (Also see Standards IV.17 and IV.18.)</p>	<p>established by institutional rules or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others.) (4. <i>Privacy and Confidentiality - 4.01 Maintaining Confidentiality</i>)</p> <p>Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.) (6. <i>Record Keeping and Fees - 6.01 Documentation of Professional and Scientific Work and Maintenance of Records</i>)</p> <p>(a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standards 4.01, Maintaining Confidentiality, and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.) (6. <i>Record Keeping and Fees - 6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work</i>)</p> <p>(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to</p>	<p>not less than five years after the last date that service was rendered or for a longer period if required by law.</p> <p>c. The psychologist shall store and dispose of written, electronic and other records in such a manner as to insure their confidentiality. . . (III. <i>Rules of Conduct - A. Competence. 7. Maintenance and retention of records</i>)</p> <p>The psychologist shall limit access to client records to preserve their confidentiality and shall assure that all persons working under the psychologist's authority comply with the requirements for confidentiality of client material. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 6. Limited access to client records</i>)</p> <p>When rendering professional services as part of a team or when interacting with other appropriate professionals concerning the welfare of the client, the psychologist may share confidential information about the client provided the psychologist takes reasonable steps to assure that all persons receiving the information are informed about the confidential nature of the information and abide by the rules of confidentiality. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 9. Discussion of client information among professionals</i>)</p>

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	<p>by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers. (6. Record Keeping and Fees - 6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work)</p> <p>(c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice. (See also Standards 3.12, Interruption of Psychological Services, and 10.09, Interruption of Therapy.) (6. Record Keeping and Fees - 6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work)</p>	
<i>Confidentiality</i>		
<p>I.43 Be careful not to relay information about colleagues, colleagues' clients, research participants, employees, supervisees, students, trainees, and members of organizations, gained in the process of their activities as psychologists, that the psychologist has reason to believe is considered confidential by those persons, except as required or justified by law. (Also see Standards IV.17 and IV.18.)</p>	<p>(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters. (4. Privacy and Confidentiality - 4.04 Minimizing Intrusions on Privacy)</p> <p>Psychologists who review material submitted for presentation, publication, grant, or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it. (8. Research and Publication - 8.15 Reviewers)</p>	<p>The psychologist shall respect the dignity . . . of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</p> <p>The psychologist shall safeguard the confidential information obtained in the course of practice, teaching, research, or other professional services. . . (III. Rules of Conduct - F. Protecting Confidentiality of Clients. 1. In general)</p>
<p>I.44 Clarify what measures will be taken to protect confidentiality, and what responsibilities family, group, and</p>	<p>(a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and</p>	<p>When service is rendered to more than one client during a joint session, for example to a family or a couple or a parent and child or a group, the</p>

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<p>community members have for the protection of each other's confidentiality, when engaged in services to or research with individuals, families, groups, or communities.</p>	<p>children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, <i>Discussing the Limits of Confidentiality</i>.) (10. <i>Therapy - 10.02 Therapy Involving Couples or Families</i>)</p> <p>When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality. (10. <i>Therapy - 10.03 Group Therapy</i>)</p>	<p>psychologist shall at the beginning of the professional relationship clarify to all parties the manner in which confidentiality will be handled. All parties shall be given opportunity to discuss and to accept whatever limitations to confidentiality adhere in the situation. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 4. Multiple clients</i>)</p>
<p>I.45 Share confidential information with others only with the informed consent of those involved, or in a manner that the persons involved cannot be identified, except as required or justified by law, or in circumstances of actual or possible serious physical harm or death. (Also see Standards II.39, IV.17, and IV.18.)</p>	<p>(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. (4. <i>Privacy and Confidentiality - 4.05 Disclosures</i>)</p> <p>(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. (See also Standard 6.04e, <i>Fees and Financial Arrangements</i>.) (4. <i>Privacy</i>)</p>	<p>c. The psychologist shall . . . maintain the confidentiality of all psychological records in the psychologist's possession or under the psychologist's control except as otherwise provided by law or pursuant to written or signed authorization of a client specifically requesting or authorizing release or disclosure of the client's psychological records. (III. <i>Rules of Conduct - A. Competence. 7. Maintenance and retention of records</i>)</p> <p>. . . With the exceptions set forth below or in accordance with any federal, state or provincial statute or regulation, the psychologist shall disclose confidential information to others only with the informed written consent of the client. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 1. In general</i>)</p>

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	<p><i>and Confidentiality - 4.05 Disclosures)</i></p> <p>When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided . . . (See also Standard 4.01, Maintaining Confidentiality.) (4. <i>Privacy and Confidentiality - 4.06 Consultations)</i></p> <p>Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so. (4. <i>Privacy and Confidentiality - 4.07 Use of Confidential Information for Didactic or Other Purposes)</i></p> <p>(a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected . . . (8. <i>Research and Publication - 8.14 Sharing</i></p>	<p>The psychologist may disclose confidential information without the informed written consent of the client when the psychologist judges that disclosure is necessary to protect against a clear and substantial risk of imminent serious harm being inflicted by the client on the client or another person. In such case, the psychologist shall limit disclosure of the otherwise confidential information to only those persons and only that content which would be consistent with the standards of the profession in addressing such problems. When the client is an organization, disclosure shall be made only after the psychologist has made a reasonable and unsuccessful attempt to have the problems corrected within the organization. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 2. Disclosure without informed written consent)</i></p> <p>The psychologist may release confidential information upon court order, as defined in Section II of this Code, or to conform with state, federal or provincial law, rule, or regulation. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 7. Release of confidential information)</i></p> <p>The psychologist shall be familiar with any relevant law concerning the reporting of abuse of children and vulnerable adults, and shall comply with such laws. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 8. Reporting of abuse of children and vulnerable adults)</i></p> <p>When rendering professional services as part of a team or when interacting with other appropriate professionals concerning the welfare of the client,</p>

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	<p><i>Research Data for Verification)</i></p> <p>(a) . . . Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release. Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.) (9. <i>Assessment - 9.04 Release of Test Data)</i></p> <p>(b) In the absence of a client/patient release, psychologists provide test data only as required by law or court order. (9. <i>Assessment - 9.04 Release of Test Data)</i></p>	<p>the psychologist may share confidential information about the client provided the psychologist takes reasonable steps to assure that all persons receiving the information are informed about the confidential nature of the information and abide by the rules of confidentiality. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 9. Discussion of client information among professionals)</i></p> <p>When case reports or other confidential information is used as the basis of teaching, research, or other published reports, the psychologist shall exercise reasonable care to insure that the reported material is appropriately disguised to prevent client identification. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 10. Disguising confidential information)</i></p> <p>The psychologist shall continue to treat as confidential information regarding a client after the professional relationship between the psychologist and the client has ceased. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Client. 12. Confidentiality after termination of professional relationship)</i></p> <p>The psychologist shall treat an assessment result or interpretation regarding an individual as confidential information. (III. <i>Rules of Conduct - I. Assessment Procedures. 1. Confidential information)</i></p> <p>The psychologist who has substantial reason to believe that there has been a violation of the statutes or rules of the Board, that might</p>

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		reasonably be expected to harm a client, may report such violation to the Board, or if required by statute shall report to the Board. Unless required by statute, the client's name may be provided only with the written consent of the client. <i>(III. Rules of Conduct - L. Reporting Suspected Violations. 1. Reporting of violations to Board)</i>
<i>Extended responsibility</i>		
I.46 Encourage others, in a manner consistent with this <i>Code</i> , to respect the dignity of persons and to expect respect for their own dignity.	The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to . . . encourage ethical behavior by students, supervisees, employees, and colleagues . . . <i>(Preamble, para 3)</i>	
I.47 Assume overall responsibility for the scientific and professional activities of their assistants, employees, students, supervisees, and trainees with regard to Respect for the Dignity of Persons, all of whom, however, incur similar obligations.	(c) Psychologists using the services of an interpreter . . . ensure that confidentiality of test results . . . are maintained . . . (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01 . . . (c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.) <i>(9. Assessment - 9.03 Informed Consent in Assessments)</i>	. . . This Code shall apply to the conduct of all licensees and applicants, including the applicant's conduct during the period of education, training, and employment which is required for licensure. . . <i>(I. Introduction - B. Scope.)</i> The psychologist shall exercise appropriate supervision over supervisees, as set forth in the rules and regulations of the Boards. <i>III. Rules of Conduct - A. Competence. 9. Providing supervision)</i> The psychologist shall . . . assure that all persons working under the psychologist's authority comply with the requirements for confidentiality of client material. <i>(III. Rules of Conduct - F. Protecting Confidentiality of Clients. 6. Limited access to client records)</i>

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		<p>When rendering professional services as part of a team or when interacting with other appropriate professionals concerning the welfare of the client, the psychologist may share confidential information about the client provided the psychologist takes reasonable steps to assure that all persons receiving the information are informed about the confidential nature of the information and abide by the rules of confidentiality. (III. Rules of Conduct - F. Protecting Confidentiality of Clients. 9. Discussion of client information among professionals)</p>
Principle II: Responsible Caring		
Values Statement		
<p>A basic ethical expectation of any discipline is that its activities will benefit members of society or, at least, do no harm. Therefore, psychologists demonstrate an active concern for the welfare of any individual, family, group, or community with whom they relate in their role as psychologists. This concern includes both those directly involved and those indirectly involved in their activities. However, as with Principle I, psychologists' greatest responsibility is to protect the welfare of those in the most vulnerable position. Normally, persons directly involved in their activities (e.g., research participants, clients, students) are in such a position. Psychologists' responsibility to those indirectly involved (e.g., employers, third party payers, the general public) normally is secondary.</p>	<p>Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. (General Principles - Principle A: Beneficence and Nonmaleficence)</p>	<p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall . . . protect the welfare of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
<p>As persons usually consider their own welfare in their personal decision making, obtaining</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>informed consent (see Principle I) is one of the best methods for ensuring that their welfare will be protected. However, it is only when such consent is combined with the responsible caring of the psychologist that there is considerable ethical protection of the welfare of the person(s) involved.</p>		
<p>Responsible caring leads psychologists to take care to discern the potential harm and benefits involved, to predict the likelihood of their occurrence, to proceed only if the potential benefits outweigh the potential harms, to develop and use methods that will minimize harms and maximize benefits, and to take responsibility for correcting clearly harmful effects that have occurred as a direct result of their research, teaching, practice, or business activities.</p>	<p>. . . Psychologists accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to . . . harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. . . (<i>General Principles - Principle B: Fidelity and Responsibility</i>)</p> <p>Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable. (<i>3. Human Relations - 3.04 Avoiding Harm</i>)</p>	
<p>In order to carry out these steps, psychologists recognize the need for competence and self-knowledge. They consider incompetent action to be unethical per se, as it is unlikely to be of benefit and likely to be harmful. They engage only in those activities in which they have competence or for which they are receiving supervision, and they perform their activities as competently as possible. They acquire, contribute to, and use the existing knowledge most relevant to the best interests of those concerned. They also engage in</p>	<p>. . . Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work. (<i>General Principles - Principle A: Beneficence and Nonmaleficence</i>)</p> <p>Psychologists' work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.0b, Informed Consent to Therapy.) (<i>2. Competence - 2.04 Bases for</i></p>	<p>The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (<i>III. Rules of Conduct - D. Client Welfare. 3. Stereotyping</i>)</p>

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<p>self-reflection regarding how their own values, attitudes, experiences, and social context (e.g., culture, ethnicity, colour, religion, sex, gender, sexual orientation, physical and mental abilities, age, and socio-economic status) influence their actions, interpretations, choices, and recommendations. This is done with the intent of increasing the probability that their activities will benefit and not harm the individuals, families, groups, and communities to whom they relate in their role as psychologists. Psychologists define harm and benefit in terms of both physical and psychological dimensions. They are concerned about such factors as: social, family, and community relationships; personal and cultural identity; feelings of self-worth, fear, humiliation, interpersonal trust, and cynicism; self-knowledge and general knowledge; and, such factors as physical safety, comfort, pain, and injury. They are concerned about immediate, short-term, and long-term effects.</p>	<p><i>Scientific and Professional Judgments)</i></p>	
<p>Responsible caring recognizes and respects (e.g., through obtaining informed consent) the ability of individuals, families, groups, and communities to make decisions for themselves and to care for themselves and each other. It does not replace or undermine such ability, nor does it substitute one person's opinion about what is in the best interests of another person for that other person's competent decision making. However, psychologists recognize that, as vulnerabilities increase or as power to control one's own life decreases, psychologists have an increasing responsibility to protect the well-being of the individual, family, group, or community involved.</p>	<p>. . . Psychologists are aware that special safeguards may be necessary to protect the . . . welfare of persons or communities whose vulnerabilities impair autonomous decision making. . . (<i>General Principles - Principle E: Respect for People's Rights and Dignity</i>)</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>For this reason, as in Principle I, psychologists consider it their responsibility to increase safeguards proportionate to the degree of dependency and the lack of voluntary initiation on the part of the persons involved. However, for Principle II, the safeguards are for the well-being of persons rather than for the rights of persons.</p>		
<p>Psychologists' treatment and use of animals in their research and teaching activities are also a component of responsible caring. Although animals do not have the same moral rights as persons (e.g., privacy), they do have the right to be treated humanely and not to be exposed to unnecessary discomfort, pain, or disruption.</p>	<p>. . . psychologists seek to safeguard the welfare of . . . animal subjects of research. . . (<i>General Principles - Principle A: Beneficence and Nonmaleficence</i>)</p>	
<p>By virtue of the social contract that the discipline has with society, psychologists have a higher duty of care to members of society than the general duty of care all members of society have to each other. However, psychologists are entitled to protect their own basic well-being (e.g., physical safety, family relationships) in their work as psychologists.</p>	<p>(b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship. (<i>10. Therapy - 10.10 Terminating Therapy</i>)</p>	<p>. . . A psychologist may terminate a professional relationship when threatened or otherwise endangered by the client or another relevant person associated with or related to the client. (<i>III. Rules of Conduct - D. Client Welfare. 2. Termination of services</i>)</p>
<p>Ethical Standards</p> <p>In adhering to the Principle of Responsible Caring, psychologists would:</p>		
<p><i>General caring</i></p>		
<p>II.1 Protect and promote the welfare of clients, research participants, employees, supervisees, students, trainees, colleagues, and others.</p>	<p>(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to . . . protect clients/patients, students, supervisees, research participants,</p>	<p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (<i>III. Rules of Conduct - E. Welfare of Supervisees and Research Participants and Students. 1. Welfare of supervisees</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>II.2 Avoid doing harm to clients, research participants, employees, supervisees, students, trainees, colleagues, and others.</p>	<p>organizational clients, and others from harm. (2. <i>Competence - 2.01 Boundaries of Competence</i>)</p> <p>Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable. (3. <i>Human Relations - 3.04 Avoiding Harm</i>)</p> <p>(b) For persons who are legally incapable of giving informed consent . . . When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's . . . welfare. (3. <i>Human Relations - 3.10 Informed Consent</i>)</p> <p>Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received. (6. <i>Record Keeping and Fees - 6.03 Withholding Records for Nonpayment</i>)</p> <p>Psychologists may barter only if (1) it is not clinically contraindicated . . . (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.) (6. <i>Record Keeping and Fees - 6.05 Barter With Clients/Patients</i>)</p> <p>(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm. (8. <i>Research and Publication - 8.08 Debriefing</i>)</p>	<p>The psychologist shall . . . protect the welfare of his/her research participants . . . (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants</i>)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>(a) . . . Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm . . . , recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.) (9. <i>Assessment - 9.04 Release of Test Data</i>)</p>	
<p>II.3 Accept responsibility for the consequences of their actions.</p>	<p>. . . Psychologists . . . accept appropriate responsibility for their behavior . . . (<i>General Principles - Principle B: Fidelity and Responsibility</i>)</p> <p>(c) Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services. (9. <i>Assessment - 9.09 Test Scoring and Interpretation Services</i>)</p>	<p>The psychologist shall be responsible for his/her own professional decisions and professional actions. (<i>I. Introduction - C. Responsibility for Own Actions.</i>)</p>
<p>II.4 Refuse to advise, train, or supply information to anyone who, in the psychologist's judgment, will use the knowledge or skills to harm others.</p>		
<p>II.5 Make every reasonable effort to ensure that psychological knowledge is not misused, intentionally or unintentionally, to harm others.</p>	<p>If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation. (<i>I. Resolving Ethical Issues - 1.01 Misuse of Psychologists' Work</i>)</p> <p>(a) . . . Psychologists may refrain from releasing test data to protect a client/patient or others from substantial . . . misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also</p>	<p>The psychologist offering an assessment procedure or automated interpretation service to other professionals shall . . . identify special qualifications required to administer and interpret it properly. . . (<i>III. Rules of Conduct - I. Assessment Procedures. 5. Information for professional users</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>Standard 9.11, Maintaining Test Security.) (9. Assessment - 9.04 Release of Test Data)</p> <p>Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.) (9. Assessment - 9.07 Assessment by Unqualified Persons)</p>	
<p><i>Competence and self-knowledge</i></p> <hr/> <p>II.6 Offer or carry out (without supervision) only those activities for which they have established their competence to carry them out to the benefit of others.</p>	<p>(a) Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience. (2. Competence - 2.01 Boundaries of Competence)</p> <p>(c) Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study. (2. Competence - 2.01 Boundaries of Competence)</p> <p>(d) When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if they make a reasonable effort to</p>	<p>The psychologist shall limit practice and supervision to the areas of competence in which proficiency has been gained through education, training, and experience. (III. Rules of Conduct - A. Competence. 1. Limits on practice)</p> <p>The psychologist, when developing competency in a service or technique that is either new to the psychologist or new to the profession, shall engage in ongoing consultation with other psychologists or relevant professionals and shall seek appropriate education and training in the new area. . . (III. Rules of Conduct. - A. Competence. 4. Adding new services and techniques)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>obtain the competence required by using relevant research, training, consultation, or study. (2. <i>Competence - 2.01 Boundaries of Competence</i>)</p> <p>(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm. (2. <i>Competence - 2.01 Boundaries of Competence</i>)</p> <p>In emergencies, when psychologists provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available. (2. <i>Competence - 2.02 Providing Services in Emergencies</i>)</p>	
<p>II.7 Not delegate activities to persons not competent to carry them out to the benefit of others.</p>	<p>Psychologists who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to . . . (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; . . . (See also Standards 2.02, Providing Services in Emergencies; . . . 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments;</p>	<p>The psychologist shall exercise appropriate supervision over supervisees, as set forth in the rules and regulations of the Boards. <i>III. Rules of Conduct - A. Competence. 9. Providing supervision</i>)</p> <p>The psychologist shall not delegate professional responsibilities to a person not appropriately credentialed or otherwise appropriately qualified to provide such services. (<i>III. Rules of Conduct - A. Competence. 10. Delegating professional responsibility</i>) and (<i>III. Rules of Conduct - K.</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.) (2. Competence - 2.05 Delegation of Work to Others)</p> <p>Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.) (9. Assessment - 9.07 Assessment by Unqualified Persons)</p>	<p><i>Aiding Unauthorized Practice. 2. Delegating professional responsibility)</i></p> <p>The psychologist offering an assessment procedure or automated interpretation service to other professionals shall . . . identify special qualifications required to administer and interpret it properly. . . (III. Rules of Conduct - I. Assessment Procedures. 5. Information for professional users)</p>
<p>II.8 Take immediate steps to obtain consultation or to refer a client to a colleague or other appropriate professional, whichever is more likely to result in providing the client with competent service, if it becomes apparent that a client's problems are beyond their competence.</p>	<p>(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Emergencies. (2. Competence . . . 2.01 - Boundaries of Competence)</p> <p>(c) Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study. (2. Competence - 2.01 Boundaries of Competence)</p> <p>In emergencies, when psychologists provide</p>	<p>The psychologist shall make or recommend referral to other professional, technical, or administrative resources when such referral is clearly in the best interests of the client. (III. Rules of Conduct - A. Competence. 5. Referral)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available. (2. <i>Competence - 2.02 Providing Services in Emergencies</i>)</p>	
<p>II.9 Keep themselves up to date with a broad range of relevant knowledge, research methods, and techniques, and their impact on persons and society, through the reading of relevant literature, peer consultation, and continuing education activities, in order that their service or research activities and conclusions will benefit and not harm others.</p>	<p>(f) When assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles. (2. <i>Competence - 2.01 Boundaries of Competence</i>)</p> <p>Psychologists undertake ongoing efforts to develop and maintain their competence. (2. <i>Competence - 2.03 Maintaining Competence</i>)</p>	<p>The psychologist shall maintain current competency in the areas in which he/she practices, through continuing education, consultation, and/or other procedures, in conformance with current standards of scientific and professional knowledge. (III. <i>Rules of Conduct - A. Competence. 2. Maintaining competency</i>)</p>
<p>II.10 Evaluate how their own experiences, attitudes, culture, beliefs, values, social context, individual differences, specific training, and stresses influence their interactions with others, and integrate this awareness into all efforts to benefit and not harm others.</p>	<p>. . . 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. (<i>General Principles - Principle D: Justice</i>)</p>	<p>The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (III. <i>Rules of Conduct - D. Client Welfare. 3. Stereotyping</i>)</p>
<p>II.11 Seek appropriate help and/or discontinue scientific or professional activity for an appropriate period of time, if a physical or psychological condition reduces their ability to benefit and not harm others.</p>	<p>(a) Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner. (2. <i>Competence - 2.06 Personal Problems and Conflicts</i>)</p> <p>(b) When psychologists become aware of personal</p>	<p>The psychologist shall not undertake or continue a professional relationship with a client when the psychologist is, or could reasonably be expected by the Board to be, impaired due to mental, emotional, physiologic, pharmacologic, or substance abuse conditions. If such a condition develops after a professional relationship has been initiated, the psychologist shall terminate the relationship in an appropriate manner . . . (III.</p>

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	<p>problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties. (See also standard 10.10, Terminating Therapy.) (2. <i>Competence - 2.06 Personal Problems and Conflicts</i>)</p>	<p><i>Rules of Conduct - C. Impairment. 1. Impaired psychologist)</i></p>
<p>II.12 Engage in self-care activities that help to avoid conditions (e.g., burnout, addictions) that could result in impaired judgment and interfere with their ability to benefit and not harm others.</p>		
<i>Risk/benefit analysis</i>		
<p>II.13 Assess the individuals, families, groups, and communities involved in their activities adequately enough to ensure that they will be able to discern what will benefit and not harm the persons involved.</p>	<p>(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services . . . , except as provided in Standard 2.02, Providing Services in Emergencies. (2. <i>Competence - 2.01 Boundaries of Competence</i>)</p>	<p>A psychologist rendering a formal professional opinion about a person, for example about the fitness of a parent in a custody hearing, shall not do so without direct and substantial professional contact with or a formal assessment of that person. (III. <i>Rules of Conduct - A. Competence. 6. Sufficient professional information</i>)</p>
<p>II.14 Be sufficiently sensitive to and knowledgeable about individual, group, community, and cultural differences and vulnerabilities to discern what will benefit and not harm persons involved in their activities.</p>	<p>(a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also</p>	<p>The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (III. <i>Rules of Conduct - D. Client Welfare. 3. Stereotyping</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>Standard 2.04, Bases for Scientific and Professional Judgments.) (9. Assessment - 9.01 Bases for Assessments)</p> <p>(a) Psychologists administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques. (9. Assessment - 9.02 Use of Assessments)</p> <p>(b) Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation. (9. Assessment - 9.02 Use of Assessments)</p> <p>(c) Psychologists use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues. (9. Assessment - 9.02 Use of Assessments)</p> <p>When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test-taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.) (9. Assessment - 9.06 Interpreting Assessment Results)</p> <p>(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose. (9. Assessment - 9.08 Obsolete Tests and Outdated Test Results)</p> <p>(b) Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose. (9. Assessment - 9.08 Obsolete Tests and Outdated Test Results)</p> <p>(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c, Boundaries of Competence.) (9. Assessment - 9.09 Test Scoring and Interpretation Services)</p>	
<p>II.15 Carry out pilot studies to determine the effects of all new procedures and techniques that might carry more than minimal risk, before considering their use on a broader scale.</p>		
<p>II.16 Seek an independent and adequate ethical review of the balance of risks and potential benefits of all research and new interventions that involve procedures of</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>unknown consequence, or where pain, discomfort, or harm are possible, before making a decision to proceed.</p>		
<p>II.17 Not carry out any scientific or professional activity unless the probable benefit is proportionately greater than the risk involved.</p>		
<p><i>Maximize benefit</i></p>		
<p>II.18 Provide services that are coordinated over time and with other service providers, in order to avoid duplication or working at cross purposes.</p>	<p>When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.) (3. <i>Human Relations - 3.09 Cooperation With Other Professionals</i>)</p> <p>In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. Psychologists discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues. (10. <i>Therapy - 10.04 Providing Therapy to Those Served by Others</i>)</p>	
<p>II.19 Create and maintain records relating to their activities that are sufficient to support continuity and appropriate coordination of their activities with the activities of others.</p>	<p>Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by</p>	<p>a. The psychologist rendering professional services to an individual client (or a dependent), or services billed to a third party payer, shall maintain professional records that include:</p> <ol style="list-style-type: none"> 1. the name of the client and other identifying

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	<p>them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.) (6. <i>Record Keeping and Fees - 6.01 Documentation of Professional and Scientific Work and Maintenance of Records</i>)</p>	<p>information, 2. the presenting problem(s) or purpose or diagnosis, 3. the fee arrangement, 4. the date and substance of each billed or service-count contact or service, 5. any test results or other evaluative results obtained and any basic test data from which they were derived, 6. notation and results of formal consults with other providers, 7. a copy of all test or other evaluative reports prepared as part of the professional relationship, 8. any releases executed by the client. b. To meet the requirements of this rule, so as to provide a formal record for review, but not necessarily for other legal purposes, the psychologist shall assure that all data entries in the professional records are maintained for a period of not less than five years after the last date that service was rendered or for a longer period if required by law. (III. <i>Rules of Conduct - A. Competence. 7. Maintenance and retention of records</i>)</p> <p>d. For each person professionally supervised, the psychologist shall maintain for a period of not less than five years after the last date of supervision a record that shall include, among other information, the type, place, and general content of the supervision. (III. <i>Rules of Conduct - A. Competence. 7. Maintenance and retention of records</i>)</p>
<p>II.20 Make themselves aware of the knowledge and skills of other disciplines</p>	<p>When indicated and professionally appropriate, psychologists cooperate with other professionals</p>	<p>The psychologist shall make or recommend referral to other professional, technical, or</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>(e.g., law, medicine, business administration) and advise the use of such knowledge and skills, where relevant to the benefit of others.</p>	<p>in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.) (3. <i>Human Relations - 3.09 Cooperation With Other Professionals</i>)</p>	<p>administrative resources when such referral is clearly in the best interests of the client. (III. <i>Rules of Conduct - A. Competence. 5. Referral</i>)</p>
<p>II.21 Strive to provide and/or obtain the best possible service for those needing and seeking psychological service. This may include, but is not limited to: selecting interventions that are relevant to the needs and characteristics of the client and that have reasonable theoretical or empirically-supported efficacy in light of those needs and characteristics; consulting with, or including in service delivery, persons relevant to the culture or belief systems of those served; advocating on behalf of the client; and, recommending professionals other than psychologists when appropriate.</p>	<p>Psychologists' work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.01b, Informed Consent to Therapy.) (2. <i>Competence - 2.04 Bases for Scientific and Professional Judgments</i>)</p> <p>When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training, or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with this Ethics Code; . . . (See also Standard 2.04, Bases for Scientific and Professional Judgments.) (5. <i>Advertising and Other Public Statements - 5.04 Media Presentations</i>)</p> <p>(a) Psychologists administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques. (9. <i>Assessment - 9.02 Use of Assessments</i>)</p> <p>(b) Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or</p>	<p>The psychologist offering an assessment procedure or automated interpretation service to other professionals shall accompany this offering by a manual or other printed materials which fully describes the development of the assessment procedure or service, the rationale, evidence of validity and reliability, and characteristics of the normative population. The psychologist shall explicitly state the purpose and application for which the procedure is recommended and identify special qualifications required to administer and interpret it properly. . . (III. <i>Rules of Conduct - I. Assessment Procedures. 5. Information for professional users</i>)</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation. (9. Assessment - 9.02 Use of Assessments)</p> <p>(c) Psychologists use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues. (9. Assessment - 9.02 Use of Assessments)</p> <p>Psychologists who develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use. (9. Assessment - 9.05 Test Construction)</p> <p>(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose. (9. Assessment - 9.08 Obsolete Tests and Outdated Test Results)</p> <p>(b) Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose. (9. Assessment - 9.08 Obsolete Tests and Outdated Test Results)</p> <p>(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c,</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	Boundaries of Competence.) (9. <i>Assessment - 9.09 Test Scoring and Interpretation Services</i>)	
II.22 Monitor and evaluate the effect of their activities, record their findings, and communicate new knowledge to relevant others.	Psychologists create . . . records . . . relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, . . . (See also Standard 4.01, <i>Maintaining Confidentiality</i> .) (6. <i>Record Keeping and Fees - 6.01 Documentation of Professional and Scientific Work and Maintenance of Records</i>)	
II.23 Debrief research participants in such a way that the participants' knowledge is enhanced and the participants have a sense of contribution to knowledge. (Also see Standards III.26 and III.27.)		The psychologist shall . . . protect the welfare of his/her research participants . . . (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants</i>)
II.24 Perform their teaching duties on the basis of careful preparation, so that their instruction is current and scholarly.	(b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, <i>Maintaining Competence</i> .) (7. <i>Education and Training - 7.03 Accuracy in Teaching</i>)	
II.25 Facilitate the professional and scientific development of their employees, supervisees, students, and trainees by ensuring that these persons understand the values and ethical prescriptions of the discipline, and by providing or arranging for adequate working conditions, timely evaluations, and constructive consultation and experience opportunities.	Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, <i>Descriptions of Workshops and Non-Degree-Granting Educational Programs</i> .) (7. <i>Education and Training - 7.01 Design of Education and Training Programs</i>)	d. For each person professionally supervised, the psychologist shall maintain for a period of not less than five years after the last date of supervision a record that shall include, among other information, the type, place, and general content of the supervision. (III. <i>Rules of Conduct. 1. Competence. 7. Maintenance and retention of records</i>) The psychologist shall exercise appropriate supervision over supervisees, as set forth in the

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>(a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision. (7. Education and Training - 7.06 Assessing Student and Supervisee Performance)</p>	<p>rules and regulations of the Boards. (III. Rules of Conduct - A. Competence. 9. Providing supervision)</p> <p>The psychologist shall not engage in any verbal or physical behavior with supervisees which is seductive, demeaning or harassing or exploit a supervisee in any way -- sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall not engage in any verbal or physical behavior with students which is seductive, demeaning or harassing or exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
<p>II.26 Encourage and assist students in publication of worthy student papers.</p>	<p>(c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student’s doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.) (8. Research and Publication - 8.12 Publication Credit)</p>	<p>The psychologist shall not . . . exploit a supervisee in any way -- sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
<p><i>Minimize harm</i></p>		
<p>II.27 Be acutely aware of the power relationship in therapy and, therefore, not</p>	<p>Psychologists do not engage in sexual intimacies with current therapy clients/patients. (10. Therapy</p>	<p>a. Psychologists do not engage in sexual intimacies with current clients. (III. Rules of</p>

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<p>encourage or engage in sexual intimacy with therapy clients, neither during therapy, nor for that period of time following therapy during which the power relationship reasonably could be expected to influence the client's personal decision making. (Also see Standard III.31.)</p>	<p>- 10.05 <i>Sexual Intimacies With Current Therapy Clients/Patients</i></p> <p>(a) Psychologists do not engage in sexual intimacies with former clients/patients for at least two years after cessation or termination of therapy. (10. <i>Therapy - 10.08 Sexual Intimacies With Former Therapy Clients/Patients</i>)</p> <p>(b) Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated; (2) the nature, duration, and intensity of the therapy; (3) the circumstances of termination; (4) the client's/patient's personal history; (5) the client's/patient's current mental status; (6) the likelihood of adverse impact on the client/patient; and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a posttermination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.) (10. <i>Therapy - 10.08 Sexual Intimacies With Former Therapy Clients/Patients</i>)</p>	<p><i>Conduct - B. Multiple relationships. 3. Sexual relationships</i>)</p> <p>c. Psychologists do not terminate the professional relationship to circumvent this standard. (III. <i>Rules of Conduct - B. Multiple relationships. 3. Sexual relationships</i>)</p> <p>e. Psychologists do not engage in sexual intimacies with former clients to whom the psychologist has at any time within the previous 24 months provided a psychological service including but not limited to performing an assessment or rendering counseling, psychotherapeutic, or other professional psychological services for the evaluation, treatment or amelioration of emotional distress or behavioral inadequacy.</p> <p>f. The prohibitions set out in (e) above shall not be limited to the 24-month period but shall extend indefinitely if the client is proven to be clearly vulnerable, by reason of emotional or cognitive disorder, to exploitative influence by the psychologist. (III. <i>Rules of Conduct - B. Multiple relationships. 3. Sexual relationships</i>)</p> <p>Psychologists do not engage in any verbal or physical behavior with clients which is seductive. . . or harassing. (III. <i>Rules of Conduct - D. Client Welfare. 6. Harassment</i>)</p>
<p>II.28 Not encourage or engage in sexual intimacy with students or trainees with whom the psychologist has an evaluative</p>	<p>Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or</p>	<p>The psychologist shall not engage in any verbal or physical behavior with supervisees which is seductive . . . or harassing or exploit a supervisee</p>

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<p>or other relationship of direct authority. (Also see Standard III.31.)</p>	<p>over whom psychologists have or are likely to have evaluative authority. (See also Standard 3.05, Multiple Relationships.) (7. Education and Training - 7.07 Sexual Relationships With Students and Supervisees)</p>	<p>in any way -- sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees)</p> <p>The psychologist shall not engage in any verbal or physical behavior with students which is seductive . . . or harassing or exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p>
<p>II.29 Be careful not to engage in activities in a way that could place incidentally involved persons at risk.</p>		
<p>II.30 Be acutely aware of the need for discretion in the recording and communication of information, in order that the information not be misinterpreted or misused to the detriment of others. This includes, but is not limited to: not recording information that could lead to misinterpretation and misuse; avoiding conjecture; clearly labelling opinion; and, communicating information in language that can be understood clearly by the recipient of the information.</p>	<p>(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.) (9. Assessment - 9.01 Bases for Assessments)</p> <p>(c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or</p>	<p>The psychologist shall accompany communication of results of assessment procedures to the client, parents, legal guardians or other agents of the client by adequate interpretive aids or explanations. (III. Rules of Conduct - I. Assessment Procedures. 2. Communication of results)</p> <p>The psychologist shall include in his/her report of the results of a formal assessment procedure, for which norms are available, any deficiencies of the assessment norms for the individual assessed and any relevant reservations or qualifications which affect the validity, reliability, or other interpretation of results. (III. Rules of Conduct - I. Assessment Procedures. 3. Reservations concerning results)</p>

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	<p>necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations. (9. <i>Assessment - 9.01 Bases for Assessments</i>)</p>	
<p>II.31 Give reasonable assistance to secure needed psychological services or activities, if personally unable to meet requests for needed psychological services or activities.</p>	<p>Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.) (3. <i>Human Relations - 3.12 Interruption of Psychological Services</i>)</p>	<p>The psychologist shall make arrangements for another appropriate professional or professionals to deal with emergency needs of his/her clients, as appropriate, during periods of his/her foreseeable absences from professional availability. (III. <i>Rules of Conduct - A. Competence. 8. Continuity of care</i>)</p>
<p>II.32 Provide a client, if appropriate and if desired by the client, with reasonable assistance to find a way to receive needed services in the event that third party payments are exhausted and the client cannot afford the fees involved.</p>	<p>(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.) (6. <i>Record Keeping and Fees - 6.04 Fees and Financial Arrangements</i>)</p>	<p>The psychologist shall not continue a professional relationship . . . when the psychologist is, or could reasonably be expected by the Board to be, impaired due to mental, emotional, physiologic, pharmacologic, or substance abuse conditions. If such a condition develops after a professional relationship has been initiated, the psychologist shall terminate the relationship in an appropriate manner, shall notify the client in writing of the termination, and shall assist the client in obtaining services from another professional. (III. <i>Rules of Conduct - C. Impairment. 1. Impaired psychologist</i>)</p>
<p>II.33 Maintain appropriate contact, support, and responsibility for caring until a colleague or other professional begins service, if referring a client to a colleague or other professional.</p>	<p>When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.) (10. <i>Therapy - 10.09 Interruption of Therapy</i>)</p>	<p>Whenever professional services are terminated, if feasible, the psychologist shall offer to help locate alternative sources of professional services or assistance when indicated. The psychologist shall . . . prepare the client appropriately for such termination. . . (III. <i>Rules of Conduct - D. Client Welfare. 2. Termination of services</i>)</p>
<p>II.34 Give reasonable notice and be reasonably assured that discontinuation will cause no harm to the client, before discontinuing services.</p>		

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	©) Except where precluded by the actions of clients/patients or third-party payors, prior to termination psychologists provide pretermination counseling and suggest alternative service providers as appropriate. (10. Therapy - 10.10 Terminating Therapy)	
II.35 Screen appropriate research participants and select those least likely to be harmed, if more than minimal risk of harm to some research participants is possible.		The psychologist shall . . . protect the welfare of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)
II.36 Act to minimize the impact of their research activities on research participants' personalities, or on their physical or mental integrity.	Psychologists take reasonable steps to . . . minimize harm where it is foreseeable and unavoidable. (3. Human Relations - 3.04 Avoiding Harm) (c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm. (8. Research and Publication - 8.08 Debriefing)	The psychologist shall . . . protect the welfare of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)
<i>Offset/correct harm</i>		
II.37 Terminate an activity when it is clear that the activity carries more than minimal risk of harm and is found to be more harmful than beneficial, or when the activity is no longer needed.	(a) Psychologists terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service. (10. Therapy - 10.10 Terminating Therapy)	. . . The psychologist shall terminate a professional relationship when it is reasonably clear that the client is not benefiting from the relationship . . . (III. Rules of Conduct - D. Client Welfare. 2. Termination of services)
II.38 Refuse to help individuals, families, groups, or communities to carry out or submit to activities that, according to current knowledge, or legal or professional guidelines, would cause serious physical or psychological harm to		

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<p>themselves or others.</p> <p>II.39 Do everything reasonably possible to stop or offset the consequences of actions by others when these actions are likely to cause serious physical harm or death. This may include reporting to appropriate authorities (e.g., the police), an intended victim, or a family member or other support person who can intervene, and would be done even when a confidential relationship is involved. (Also see Standard I.45.)</p>	<p>(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 . . . (3) protect the client/patient, psychologist, or others from harm . . . in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.) (4. <i>Privacy and Confidentiality - 4.05 Disclosures</i>)</p>	<p>The psychologist may disclose confidential information without the informed written consent of the client when the psychologist judges that disclosure is necessary to protect against a clear and substantial risk of imminent serious harm being inflicted by the client on the client or another person. In such case, the psychologist shall limit disclosure of the otherwise confidential information to only those persons and only that content which would be consistent with the standards of the profession in addressing such problems. When the client is an organization, disclosure shall be made only after the psychologist has made a reasonable and unsuccessful attempt to have the problems corrected within the organization. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 2. Disclosure without informed written consent</i>)</p>
<p>II.40 Act to stop or offset the consequences of seriously harmful activities being carried out by another psychologist or member of another discipline, when there is objective information about the activities and the harm, and when these activities have come to their attention outside of a confidential client relationship between themselves and the psychologist or member of another discipline. This may include reporting to the appropriate regulatory body, authority, or committee for action, depending on the psychologist's judgment about the person(s) or body(ies) best suited to stop</p>	<p>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. (See also</p>	<p>The psychologist who has substantial reason to believe that there has been a violation of the statutes or rules of the Board, that might reasonably be expected to harm a client, may report such violation to the Board, or if required by statute shall report to the Board. Unless required by statute, the client's name may be provided only with the written consent of the client. (III. <i>Rules of Conduct - L. Reporting Suspected Violations. 1. Reporting of violations to Board</i>)</p> <p>When a psychologist learns from a client of a possible violation of the statutes or rules of the Board, or when a psychologist receives a request</p>

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<p>or offset the harm, and depending upon regulatory requirements and definitions of misconduct.</p>	<p>Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.) (<i>1. Resolving Ethical Issues - 1.05 Reporting Ethical Violations</i>)</p>	<p>from a client for information on how to file a complaint with the Board, the psychologist has an obligation to inform the client of the standards of practice of psychology and how to file a complaint with the Board. (<i>III. Rules of Conduct - L. Reporting Suspected Violations. 2. Providing information to client</i>)</p>
<p>II.41 Act also to stop or offset the consequences of harmful activities carried out by another psychologist or member of another discipline, when the harm is not serious or the activities appear to be primarily a lack of sensitivity, knowledge, or experience, and when the activities have come to their attention outside of a confidential client relationship between themselves and the psychologist or member of another discipline. This may include talking informally with the psychologist or member of the other discipline, obtaining objective information and, if possible and relevant, the assurance that the harm will discontinue and be corrected. If in a vulnerable position (e.g., employee, trainee) with respect to the other psychologist or member of the other discipline, it may include asking persons in less vulnerable positions to participate in the meeting(s).</p>	<p>When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.) (<i>1. Resolving Ethical Issues - 1.04 Informal Resolution of Ethical Violations</i>)</p>	
<p>II.42 Be open to the concerns of others about perceptions of harm that they as a psychologist might be causing, stop activities that are causing harm, and not</p>	<p>Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made . . . an ethics complaint. . . (<i>1.</i></p>	

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punish or seek punishment for those who raise such concerns in good faith.	<i>Resolving Ethical Issues - 1.08 Unfair Discrimination Against Complainants and Respondents)</i>	
II.43 Not place an individual, group, family, or community needing service at a serious disadvantage by offering them no service in order to fulfill the conditions of a research design, when a standard service is available.		
II.44 Debrief research participants in such a way that any harm caused can be discerned, and act to correct any resultant harm. (Also see Standards III.26 and III.27.)	(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm. (8. Research and Publication - 8.08 Debriefing)	The psychologist shall . . . protect the welfare of his/her research participants. . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)
<i>Care of animals</i>		
II.45 Not use animals in their research unless there is a reasonable expectation that the research will increase understanding of the structures and processes underlying behaviour, or increase understanding of the particular animal species used in the study, or result eventually in benefits to the health and welfare of humans or other animals.		
II.46 Use a procedure subjecting animals to pain, stress, or privation only if an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.	(e) Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value. (8. Research and Publication - 8.09 Humane Care and Use of Animals in Research)	

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<p>II.47 Make every effort to minimize the discomfort, illness, and pain of animals. This would include performing surgical procedures only under appropriate anaesthesia, using techniques to avoid infection and minimize pain during and after surgery and, if disposing of experimental animals is carried out at the termination of the study, doing so in a humane way.</p>	<p>(d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects. (<i>8. Research and Publication - 8.09 Humane Care and Use of Animals in Research</i>)</p> <p>(f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery. (<i>8. Research and Publication - 8.09 Humane Care and Use of Animals in Research</i>)</p> <p>(g) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures. (<i>8. Research and Publication - 8.09 Humane Care and Use of Animals in Research</i>)</p>	
<p>II.48 Use animals in classroom demonstrations only if the instructional objectives cannot be achieved through the use of video-tapes, films, or other methods, and if the type of demonstration is warranted by the anticipated instructional gain.</p>		
<i>Extended responsibility</i>		
<p>II.49 Encourage others, in a manner consistent with this <i>Code</i>, to care responsibly.</p>	<p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to . . . encourage ethical behavior by students, supervisees, employees, and colleagues . . . (<i>Preamble, para 3</i>)</p>	
<p>II.50 Assume overall responsibility for the</p>	<p>Psychologists who delegate work to employees,</p>	<p>. . . This Code shall apply to the conduct of all</p>

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<p>scientific and professional activities of their assistants, employees, supervisees, students, and trainees with regard to the Principle of Responsible Caring, all of whom, however, incur similar obligations.</p>	<p>supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to . . . (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and (3) see that such persons perform these services competently. (See also Standards 2.02, Providing Services in Emergencies; . . . Maintaining Confidentiality; 9.01, Bases for Assessments; 9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.) (2. <i>Competence - 2.05 Delegation of Work to Others</i>)</p> <p>(b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment. (8. <i>Research and Publication - 8.09 Humane Care and Use of Animals in Research</i>)</p> <p>(c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others.) (8. <i>Research and Publication - 8.09 Humane Care and Use of Animals in Research</i>)</p> <p>Psychologists do not promote the use of psychological assessment techniques by</p>	<p>licensees and applicants, including the applicant's conduct during the period of education, training, and employment which is required for licensure. . . (I. <i>Introduction - B. Scope.</i>)</p> <p>The psychologist shall exercise appropriate supervision over supervisees, as set forth in the rules and regulations of the Boards. III. <i>Rules of Conduct - A. Competence. 9. Providing supervision</i>)</p>

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	unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.) (9. Assessment - 9.07 Assessment by Unqualified Persons)	
Principle III: Integrity in Relationships		
Values Statement		
<p>The relationships formed by psychologists in the course of their work embody explicit and implicit mutual expectations of integrity that are vital to the advancement of scientific knowledge and to the maintenance of public confidence in the discipline of psychology. These expectations include: accuracy and honesty; straightforwardness and openness; the maximization of objectivity and minimization of bias; and, avoidance of conflicts of interest. Psychologists have a responsibility to meet these expectations and to encourage reciprocity.</p>	<p>Psychologists . . . clarify their professional roles and obligations . . . (General Principles - Principle B: Fidelity and Responsibility)</p> <p>Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. . . Psychologists strive to keep their promises and to avoid unwise or unclear commitments. . . (General Principles - Principle C: Integrity)</p>	
<p>In addition to accuracy, honesty, and the obvious prohibitions of fraud or misrepresentation, meeting expectations of integrity is enhanced by self-knowledge and the use of critical analysis. Although it can be argued that science is value-free and impartial, scientists are not. Personal values and self-interest can affect the questions psychologists ask, how they ask those questions, what assumptions they make, their selection of methods, what they observe and what they fail to observe, and how they interpret their data.</p>	<p>. . . In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. . . (General Principles - Principle C: Integrity)</p>	<p>The psychologist shall not use fraud, misrepresentation, or deception in obtaining a psychology license, in passing a psychology licensing examination, in assisting another to obtain a psychology license or to pass a psychology licensing examination, in billing clients or third party payers, in providing psychological service, in reporting the results of psychological evaluations or services, or in conducting any other activity related to the practice of psychology. (III. Rules of Conduct - J. Violations of Law. 2. Use of fraud,</p>

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<p>Psychologists are not expected to be value-free or totally without self-interest in conducting their activities. However, they are expected to understand how their backgrounds, personal needs, and values interact with their activities, to be open and honest about the influence of such factors, and to be as objective and unbiased as possible under the circumstances.</p>	<p>. . . 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. (<i>General Principles - Principle D: Justice</i>)</p>	<p><i>misrepresentation, or deception</i>)</p> <p>The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (<i>III. Rules of Conduct - D. Client Welfare. 3. Stereotyping</i>)</p>
<p>The values of openness and straightforwardness exist within the context of Respect for the Dignity of Persons (Principle I) and Responsible Caring (Principle II). As such, there will be circumstances in which openness and straightforwardness will need to be tempered. Fully open and straightforward disclosure might not be needed or desired by others and, in some circumstances, might be a risk to their dignity or well-being, or considered culturally inappropriate. In such circumstances, however, psychologists have a responsibility to ensure that their decision not to be fully open or straightforward is justified by higher-order values and does not invalidate any informed consent procedures.</p>		
<p>Of special concern to psychologists is the provision of incomplete disclosure when obtaining informed consent for research participation, or temporarily leading research participants to believe that a research project has a purpose other than its actual purpose. These actions sometimes occur in research where full disclosure would be likely to influence the responses of the research participants and thus invalidate the results.</p>	<p>. . . In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques. (<i>General Principles - Principle C: Integrity</i>)</p>	<p>The psychologist shall respect the dignity and protect the welfare of his/her research participants . . . (<i>III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants</i>)</p>

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<p>Although research that uses such techniques can lead to knowledge that is beneficial, such benefits must be weighed against the research participant's right to self-determination and the importance of public and individual trust in psychology. Psychologists have a serious obligation to avoid as much as possible the use of such research procedures. They also have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects from their use.</p>		
<p>As public trust in the discipline of psychology includes trusting that psychologists will act in the best interests of members of the public, situations that present real or potential conflicts of interest are of concern to psychologists. Conflict-of-interest situations are those that can lead to distorted judgment and can motivate psychologists to act in ways that meet their own personal, political, financial, or business interests at the expense of the best interests of members of the public. Although avoidance of all conflicts of interest and potential exploitation of others is not possible, some are of such a high risk to protecting the interests of members of the public and to maintaining the trust of the public, that they are considered never acceptable (see Standard III.31). The risk level of other conflicts of interest (e.g., dual or multiple relationships) might be partially dependent on cultural factors and the specific type of professional relationship (e.g., long-term psychotherapy vs. community development activities). It is the responsibility of psychologists to avoid dual or multiple relationships and other conflicts of interest when</p>	<p>. . . Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. . . (<i>General Principles - Principle A: Beneficence and Nonmaleficence</i>)</p> <p>Psychologists . . . seek to manage conflicts of interest that could lead to exploitation or harm. (<i>General Principles - Principle B: Fidelity and Responsibility</i>)</p> <p>(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.</p> <p>A psychologist refrains from entering into a</p>	<p>Psychologists recognize that multiple relationships may occur because of the psychologist's present or previous familial, social, emotional, financial, supervisory, political, administrative or legal relationship with the client or a relevant person associated with or related to the client. Psychologists take reasonable steps to ensure that if such a multiple relationship occurs, it is not exploitative of the client or a relevant person associated with or related to the client. (<i>III. Rules of Conduct - B. Multiple Relationships. Definition of multiple relationships</i>)</p> <p>a. A multiple relationship that is exploitative of the client or a relevant person associated with or related to the client is prohibited. Psychologists take all reasonable steps to ensure that any multiple relationships do not impair the psychologist's professional judgment or objectivity or result in a conflict of interest with the client or a relevant person associated with or related to the client.</p> <p>b. Multiple relationships that would not reasonably be expected to impair a psychologist's</p>

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<p>appropriate and possible. When such situations cannot be avoided or are inappropriate to avoid, psychologists have a responsibility to declare that they have a conflict of interest, to seek advice, and to establish safeguards to ensure that the best interests of members of the public are protected.</p>	<p>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.</p> <p>Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical. (3. <i>Human Relations - 3.05 Multiple Relationships</i>)</p>	<p>judgment or objectivity or risk harm to the client or relevant person associated with or related to the client are not expressly prohibited. (III. <i>Rules of Conduct - B. Multiple Relationships. 2. Prohibited multiple relationships</i>)</p>
<p>Integrity in relationships implies that psychologists, as a matter of honesty, have a responsibility to maintain competence in any specialty area for which they declare competence, whether or not they are currently practising in that area. It also requires that psychologists, in as much as they present themselves as members and representatives of a specific discipline, have a responsibility to actively rely on and be guided by that discipline and its guidelines and requirements.</p>	<p>. . . Psychologists uphold professional standards of conduct . . . (General Principles - Principle B: <i>Fidelity and Responsibility</i>)</p> <p>Psychologists undertake ongoing efforts to develop and maintain their competence. (2. <i>Competence - 2.03 Maintaining Competence</i>)</p>	<p>The psychologist shall maintain current competency in the areas in which he/she practices . . . in conformance with current standards of scientific and professional knowledge. (III. <i>Rules of Conduct - A. Competence. 2. Maintaining competency</i>)</p>
<p>Ethical Standards</p> <p>In adhering to the Principle of Integrity in Relationships, psychologists would:</p>		
<p><i>Accuracy/honesty</i></p> <p>III.1 Not knowingly participate in, condone, or be associated with dishonesty, fraud, or misrepresentation.</p>	<p>(a) Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated. (5. <i>Advertising and Other Public Statements - 5.01 Avoidance of False or Deceptive Statements</i>)</p>	<p>The psychologist shall not misrepresent directly or by implication his/her professional qualifications such as education, experience, or areas of competence. (III. <i>Rules of Conduct - G. Representation of Services. 2. Misrepresentation of qualifications</i>)</p>

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	<p>(b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings. (5. Advertising and Other Public Statements - 5.01 Avoidance of False or Deceptive Statements)</p> <p>(c) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such. (5. Advertising and Other Public Statements - 5.02 Statements by Others)</p> <p>(c) Psychologists do not misrepresent their fees. (6. Record Keeping and Fees - 6.04 Fees and Financial Arrangements)</p> <p>(a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.) (8. Research and Publication - 8.10 Reporting Research Results)</p> <p>Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally. (8. Research and Publication - 8.11 Plagiarism)</p> <p>Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment. (8. Research and Publication - 8.13 Duplicate</p>	<p>The psychologist shall not misrepresent directly or by implication his/her affiliations, or the purposes or characteristics of institutions and organizations with which the psychologist is associated. (III. Rules of Conduct - G. Representation of Services, 3. Misrepresentation of affiliations)</p> <p>The psychologist shall not include false or misleading information in public statements concerning professional services offered. (III. Rules of Conduct - G. Representation of Services, 4. False or misleading information)</p> <p>The psychologist shall not associate with or permit his/her name to be used in connection with any services or products in such a way as to misrepresent (a) the services or products, (b) the degree of his/her responsibility for the services or products, or (c) the nature of his/her association with the services or products. (III. Rules of Conduct - G. Representation of Services, 5. Misrepresentation of services or products)</p> <p>The psychologist shall not mislead . . . the client, a prospective client, or third party payer, information about the cost of his/her professional services. (III. Rules of Conduct - H. Fees and Statements, 1. Disclosure of cost of services)</p> <p>The psychologist shall not use fraud, misrepresentation, or deception in obtaining a psychology license, in passing a psychology licensing examination, in assisting another to obtain a psychology license or to pass a psychology licensing examination, in billing clients or third party payers, in providing</p>

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	<i>Publication of Data)</i>	<p>psychological service, in reporting the results of psychological evaluations or services, or in conducting any other activity related to the practice of psychology. (III. Rules of Conduct - J. Violations of Law. 2. Use of fraud, misrepresentation, or deception)</p> <p>The psychologist shall not aid or abet another person in misrepresenting his/her professional credentials or in illegally engaging in the practice of psychology. (III. Rules of Conduct - K. Aiding Unauthorized Practice. 1. Aiding unauthorized practice)</p>
<p>III.2 Accurately represent their own and their colleagues' credentials, qualifications, education, experience, competence, and affiliations, in all spoken, written, or printed communications, being careful not to use descriptions or information that could be misinterpreted (e.g., citing membership in a voluntary association of psychologists as a testament of competence)</p>	<p>(c) Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice. (5. Advertising and Other Public Statements - 5.01 Avoidance of False or Deceptive Statements)</p>	<p>A licensee shall accurately represent his or her areas of competence, education, training, experience, and professional affiliations to the board, the public, and colleagues. (III. Rules of Conduct - A. Competence. 3. Accurate representation)</p> <p>The psychologist shall display his/her current (name of jurisdiction) license to practice psychology, on the premises of his/her professional office. (III. Rules of Conduct - G. Representation of Services. 1. Display of license)</p>
<p>III.3 Carefully protect their own and their colleagues' credentials from being misrepresented by others, and act quickly to correct any such misrepresentation.</p>	<p>(a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements. (5. Advertising and Other Public Statements - 5.02 Statements by Others)</p>	<p>The psychologist shall correct others who misrepresent the psychologist's professional qualifications or affiliations. (III. Rules of Conduct - G. Representation of Services. 6. Correction of misrepresentation by others)</p>
<p>III.4 Maintain competence in their declared area(s) of psychological competence, as well as in their current area(s) of activity.</p>	<p>Psychologists undertake ongoing efforts to develop and maintain their competence. (2. Competence - 2.03 Maintaining Competence)</p>	<p>The psychologist shall maintain current competency in the areas in which he/she practices, through continuing education, consultation, and/or</p>

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(Also see Standard II.9.)		other procedures, in conformance with current standards of scientific and professional knowledge. (<i>III. Rules of Conduct - A. Competence. 2. Maintaining competency</i>)
<p>III.5 Accurately represent their own and their colleagues' activities, functions, contributions, and likely or actual outcomes of their activities (including research results) in all spoken, written, or printed communication. This includes, but is not limited to: advertisements of services or products; course and workshop descriptions; academic grading requirements; and, research reports.</p>	<p>To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved. (<i>5. Advertising and Other Public Statements - 5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs</i>)</p> <p>When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training, or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with this Ethics Code; and (3) do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.) (<i>5. Advertising and Other Public Statements - 5.04 Media Presentations</i>)</p> <p>In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable,</p>	<p>The psychologist offering an assessment procedure or automated interpretation service to other professionals shall accompany this offering by a manual or other printed materials which fully describes the development of the assessment procedure or service, the rationale, evidence of validity and reliability, and characteristics of the normative population. The psychologist shall explicitly state the purpose and application for which the procedure is recommended and identify special qualifications required to administer and interpret it properly. The psychologist shall ensure that the advertisements for the assessment procedure or interpretive service are factual and descriptive. (<i>III. Rules of Conduct - I. Assessment Procedures. 5. Information for professional users</i>)</p>

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	<p>the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.) (6. <i>Record Keeping and Fees - 6.06 Accuracy in Reports to Payors and Funding Sources</i>)</p> <p>Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties. (7. <i>Education and Training - 7.02 Description of Education and Training Programs</i>)</p> <p>(a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.) (7. <i>Education and Training - 7.03 Accuracy in Teaching</i>)</p> <p>Psychologists do not require students or</p>	

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	<p>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 . . . (7. Education and Training - 7.04 Student Disclosure of Personal Information)</p> <p>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. (8. Research and Publication - 8.01 Institutional Approval)</p>	
<p>III.6 Ensure that their own and their colleagues' activities, functions, contributions, and likely or actual outcomes of their activities (including research results) are not misrepresented by others, and act quickly to correct any such misrepresentation.</p>	<p>If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation. (1. Resolving Ethical Issues - 1.01 Misuse of Psychologists' Work)</p> <p>(a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements. (5. Advertising and Other Public Statements - 5.02 Statements by Others)</p> <p>(a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special</p>	

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	<p>qualifications applicable to their use. (9. <i>Assessment - 9.09 Test Scoring and Interpretation Services</i>)</p> <p>(b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means. (8. <i>Research and Publication - 8.10 Reporting Research Results</i>)</p>	
<p>III.7 Take credit only for the work and ideas that they have actually done or generated, and give credit for work done or ideas contributed by others (including students), in proportion to their contribution.</p>	<p>Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally. (8. <i>Research and Publication - 8.11 Plagiarism</i>)</p> <p>(a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.) (8. <i>Research and Publication - 8.12 Publication Credit</i>)</p> <p>(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement. (8. <i>Research and Publication - 8.12 Publication Credit</i>)</p> <p>(c) Except under exceptional circumstances, a</p>	<p>The psychologist shall not . . . exploit a supervisee in any way -- sexually, financially or otherwise. (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees</i>)</p> <p>The psychologist shall not . . . exploit a student in any way -- sexually, financially or otherwise. (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students</i>)</p>

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	<p>student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.) (<i>8. Research and Publication - 8.12 Publication Credit</i>)</p>	
<p>III.8 Acknowledge the limitations of their own and their colleagues' knowledge, methods, findings, interventions, and views.</p>	<p>(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.) (<i>9. Assessment - 9.01 Bases for Assessments</i>)</p> <p>(c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations. (<i>9. Assessment - 9.01 Bases for Assessments</i>)</p> <p>(b) Psychologists use assessment instruments</p>	<p>The psychologist shall include in his/her report of the results of a formal assessment procedure, for which norms are available, any deficiencies of the assessment norms for the individual assessed and any relevant reservations or qualifications which affect the validity, reliability, or other interpretation of results. (<i>III. Rules of Conduct - 1. Assessment Procedures. 3. Reservations concerning results</i>)</p>

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	<p>whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation. (9. Assessment - 9.02 Use of Assessments)</p> <p>(c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.) (9. Assessment - 9.03 Informed Consent in Assessments)</p> <p>When interpreting assessment results, including automated interpretations, psychologists . . . indicate any significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.) (9. Assessment - 9.06 Interpreting Assessment Results)</p>	
<p>III 9. Not suppress disconfirming evidence of their own and their colleagues' findings and views, acknowledging alternative hypotheses and explanations.</p>		

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<i>Objectivity/lack of bias</i>		
III.10 Evaluate how their personal experiences, attitudes, values, social context, individual differences, stresses, and specific training influence their activities and thinking, integrating this awareness into all attempts to be objective and unbiased in their research, service, and other activities.	. . . Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases . . . do not lead to or condone unjust practices. (<i>General Principles - Principle D: Justice</i>)	The psychologist shall not impose on the client any stereotypes of behavior, values, or roles related to age, gender, religion, race, disability, nationality, sexual orientation, or diagnosis which would interfere with the objective provision of psychological services to the client. (<i>III. Rules of Conduct - D. Client Welfare. 3. Stereotyping</i>)
III.11 Take care to communicate as completely and objectively as possible, and to clearly differentiate facts, opinions, theories, hypotheses, and ideas, when communicating knowledge, findings, and views.		
III.12 Present instructional information accurately, avoiding bias in the selection and presentation of information, and publicly acknowledge any personal values or bias that influence the selection and presentation of information.	(b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Competence.) (<i>7. Education and Training - 7.03 Accuracy in Teaching</i>)	
III.13 Act quickly to clarify any distortion by a sponsor, client, agency (e.g., news media), or other persons, of the findings of their research.	If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation. (<i>1. Resolving Ethical Issues - 1.01 Misuse of Psychologists' Work</i>)	
<i>Straightforwardness/openness</i>		
III.14 Be clear and straightforward about all information needed to establish informed consent or any other valid written or unwritten agreement (for example: fees,	(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the	In a situation in which more than one party has an appropriate interest in the professional services rendered by the psychologist to a client or clients, the psychologist shall, to the extent possible,

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<p>including any limitations imposed by third-party payers; relevant business policies and practices; mutual concerns; mutual responsibilities; ethical responsibilities of psychologists; purpose and nature of the relationship, including research participation; alternatives; likely experiences; possible conflicts; possible outcomes; and, expectations for processing, using, and sharing any information generated).</p>	<p>outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.) (3. <i>Human Relations - 3.05 Multiple Relationships</i>)</p> <p>(a) As early as is feasible in a professional or scientific relationship, psychologists and recipients of psychological services reach an agreement specifying compensation and billing arrangements. (6. <i>Record Keeping and Fees - 6.04 Fees and Financial Arrangements</i>)</p> <p>(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.) (6. <i>Record Keeping and Fees - 6.04 Fees and Financial Arrangements</i>)</p> <p>(e) If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.) (6. <i>Record Keeping and Fees - 6.04 Fees and Financial Arrangements</i>)</p> <p>Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of</p>	<p>clarify to all parties prior to rendering the services the dimensions of confidentiality and professional responsibility that shall pertain in the rendering of services. Such clarification is specifically indicated, among other circumstances, when the client is an organization. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 3. Services involving more than one interested party</i>)</p> <p>When service is rendered to more than one client during a joint session, for example to a family or a couple or a parent and child or a group, the psychologist shall at the beginning of the professional relationship clarify to all parties the manner in which confidentiality will be handled. All parties shall be given opportunity to discuss and to accept whatever limitations to confidentiality adhere in the situation. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 4. Multiple clients</i>)</p> <p>At the beginning of a professional relationship, to the extent that the client can understand, the psychologist shall inform a client who is below the age of majority or who has a legal guardian, of the limit the law imposes on the right of confidentiality with respect to his/her communications with the psychologist. (III. <i>Rules of Conduct - F. Protecting Confidentiality of Clients. 5. Legally dependent clients</i>)</p> <p>The psychologist shall display his/her current (name of jurisdiction) license to practice psychology, on the premises of his/her professional office. (III. <i>Rules of Conduct - G. Representation of Services. 1. Display of license</i>)</p>

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	<p>the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties. <i>(7. Education and Training - 7.02 Description of Education and Training Programs)</i></p> <p>(a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.) <i>(7. Education and Training - 7.03 Accuracy in Teaching)</i></p> <p>(a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision. <i>(7. Education and Training - 7.06 Assessing Student and Supervisee Performance)</i></p> <p>(b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research</p>	<p>The psychologist shall not mislead or withhold from the client, a prospective client, or third party payer, information about the cost of his/her professional services. <i>(III. Rules of Conduct - H. Fees and Statements. 1. Disclosure of cost of services)</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>(1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.) <i>(8. Research and Publication - 8.02 Informed Consent to Research)</i></p> <p>(b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.) <i>(8. Research and Publication - 8.06 Offering Inducements for Research Participation)</i></p> <p>(b) When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.) <i>(10. Therapy - 10.01 Informed Consent to Therapy)</i></p> <p>(c) When the therapist is a trainee and the legal</p>	

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	<p>responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor. (10. Therapy - 10.01 Informed Consent to Therapy)</p> <p>(a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.) (10. Therapy - 10.02 Therapy Involving Couples or Families)</p> <p>When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality. (10. Therapy - 10.03 Group Therapy)</p>	
<p>III.15 Provide suitable information about the results of assessments, evaluations, or research findings to the persons involved, if appropriate and if asked. This information would be communicated in understandable language.</p>	<p>. . . As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons. (3. Human Relations - 3.11 Psychological Services Delivered To or Through Organizations)</p> <p>Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other</p>	<p>The psychologist shall give a truthful, understandable, and appropriate account of the client's condition to the client or to those responsible for the care of the client. . . (III. Rules of Conduct - D. Client Welfare. 1. Providing explanation of procedures)</p> <p>The psychologist shall accompany communication of results of assessment procedures to the client,</p>

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	<p>outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance. (9. Assessment - 9.10 Explaining Assessment Results)</p>	<p>parents, legal guardians, or other agents of the client by adequate interpretive aids or explanations. (III. Rules of Conduct - I. Assessment Procedures. 2. Communication of results)</p>
<p>III.16 Fully explain reasons for their actions to persons who have been affected by their actions, if appropriate and if asked.</p>		
<p>III.17 Honour all promises and commitments included in any written or verbal agreement, unless serious and unexpected circumstances (e.g., illness) intervene. If such circumstances occur, then the psychologist would make a full and honest explanation to other parties involved.</p>	<p>. . . Psychologists strive to keep their promises . . . (General Principles - Principle C: Integrity)</p> <p>When institutional approval is required , psychologists . . . conduct the research in accordance with the approved research protocol. (8. Research and Publication - 8.01 Institutional Approval)</p> <p>(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data. (8. Research and Publication - 8.14 Sharing Research Data for Verification)</p>	
<p>III.18 Make clear whether they are acting as private citizens, as members of specific organizations or groups, or as representatives of the discipline of</p>		

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<p>psychology, when making statements or when involved in public activities.</p>		
<p>III.19 Carry out, present, and discuss research in a way that is consistent with a commitment to honest, open inquiry, and to clear communication of any research aims, sponsorship, social context, personal values, or financial interests that might affect or appear to affect the research.</p>	<p>(a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information. (8. <i>Research and Publication - 8.14 Sharing Research Data for Verification</i>)</p>	
<p>III.20 Submit their research, in some accurate form and within the limits of confidentiality, to persons with expertise in the research area, for their comments and evaluations, prior to publication or the preparation of any final report.</p>		
<p>III.21 Encourage and not interfere with the free and open exchange of psychological knowledge and theory between themselves, their students, colleagues, and the public.</p>		
<p>III.22 Make no attempt to conceal the status of a trainee and, if a trainee is providing direct client service, ensure that the client is informed of that fact.</p>	<p>(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor. (10.</p>	

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	<i>Therapy - 10.01 Informed Consent to Therapy)</i>	
<i>Avoidance of incomplete disclosure</i>		
<p>III.23 Not engage in incomplete disclosure, or in temporarily leading research participants to believe that a research project or some aspect of it has a different purpose, if there are alternative procedures available or if the negative effects cannot be predicted or offset.</p>	<p>(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. (8. <i>Research and Publication - 8.07 Deception in Research)</i></p>	
<p>III.24 Not engage in incomplete disclosure, or in temporarily leading research participants to believe that a research project or some aspect of it has a different purpose, if it would interfere with the person's understanding of facts that clearly might influence a decision to give adequately informed consent (e.g., withholding information about the level of risk, discomfort, or inconvenience).</p>	<p>(b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress. (8. <i>Research and Publication - 8.07 Deception in Research)</i></p>	<p>The psychologist shall respect the dignity of his/her research participants . . . (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</i></p>
<p>III.25 Use the minimum necessary incomplete disclosure or temporary leading of research participants to believe that a research project or some aspect of it has a different purpose, when such research procedures are used.</p>		<p>The psychologist shall respect the dignity . . . of his/her research participants . . . (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</i></p>
<p>III.26 Debrief research participants as soon as possible after the participants' involvement, if there has been incomplete disclosure or temporary leading of research participants to believe that a research project or some aspect of</p>	<p>Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless . . . (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07,</p>	<p>The psychologist shall respect the dignity and protect the welfare of his/her research participants . . . (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</i></p>

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<p>it has a different purpose.</p> <p>III.27 Provide research participants, during such debriefing, with a clarification of the nature of the study, seek to remove any misconceptions that might have arisen, and seek to re-establish any trust that might have been lost, assuring the participants that the research procedures were neither arbitrary nor capricious, but necessary for scientifically valid findings. (Also see Standards II.23 and II.44.)</p> <p>III.28 Act to re-establish with research participants any trust that might have been lost due to the use of incomplete disclosure or temporarily leading research participants to believe that the research project or some aspect of it had a different purpose.</p> <p>III.29 Give a research participant the option of removing his or her data, if the research participant expresses concern during the debriefing about the incomplete disclosure or the temporary leading of the research participant to believe that the research project or some aspect of it had a different purpose, and if removal of the data will not compromise the validity of the research design and hence diminish the ethical value of the participation of the other research participants.</p>	<p>Deception in Research.) (8. <i>Research and Publication - 8.03 Informed Consent for Recording Voices and Images in Research</i>)</p> <p>(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. (See also Standard 8.08, Debriefing.) (8. <i>Research and Publication - 8.07 Deception in Research</i>)</p> <p>(a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware. (8. <i>Research and Publication - 8.08 Debriefing</i>)</p> <p>(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm. (8. <i>Research and Publication - 8.08 Debriefing</i>)</p> <p>(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm. (8. <i>Research and Publication - 8.08 Debriefing</i>)</p>	
<p>III.30 Seek an independent and adequate ethical</p>		<p>The psychologist shall respect the dignity and</p>

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<p>review of the risks to public or individual trust and of safeguards to protect such trust for any research that plans to provide incomplete disclosure or temporarily lead research participants to believe that the research project or some aspect of it has a different purpose, before making a decision to proceed.</p>		<p>protect the welfare of his/her research participants. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</p>
<p><i>Avoidance of conflict of interest</i></p> <p>III.31 Not exploit any relationship established as a psychologist to further personal, political, or business interests at the expense of the best interests of their clients, research participants, students, employers, or others. This includes, but is not limited to: soliciting clients of one's employing agency for private practice; taking advantage of trust or dependency to encourage or engage in sexual intimacies (e.g., with clients not included in Standard II.27, with clients' partners or relatives, with students or trainees not included in Standard II.28, or with research participants); taking advantage of trust or dependency to frighten clients into receiving services; misappropriating students' ideas, research or work; using the resources of one's employing institution for purposes not agreed to; giving or receiving kickbacks or bonuses for referrals; seeking or accepting loans or investments from clients; and, prejudicing others against a colleague for reasons of</p>	<p>Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to . . . (2) expose the person or organization with whom the professional relationship exists to harm or exploitation. (3. Human Relations - 3.06 Conflict of Interest)</p> <p>Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees. (See also Standards 3.05, Multiple Relationships; 6.04, Fees and Financial Arrangements; 6.05, Barter With Clients/Patients; 7.07, Sexual Relationships With Students and Supervisees; 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.) (3. Human Relations - 3.08 Exploitative Relationships)</p>	<p>a. A multiple relationship that is exploitative of the client or a relevant person associated with or related to the client is prohibited. . . (III. Rules of Conduct - B. Multiple Relationships. 2. Prohibited multiple relationships)</p> <p>b. Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients.</p> <p>c. Psychologists do not terminate the professional relationship to circumvent this standard. (III. Rules of Conduct - B. Multiple relationships. 3. Sexual relationships)</p> <p>The psychologist providing services to an individual client shall not induce that client(s) to solicit business on behalf of the psychologist. (III. Rules of Conduct - D. Client Welfare. 4. Solicitation of business by clients)</p> <p>The psychologist shall not . . . exploit a supervisee in any way - sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of</p>

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<p>personal gain.</p>	<p>(b) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists' Work.) (5. Advertising and Other Public Statements - 5.02 Statements by Others)</p> <p>Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. (5. Advertising and Other Public Statements - 5.05 Testimonials)</p> <p>Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services. (5. Advertising and Other Public Statements - 5.06 In-Person Solicitation)</p> <p>. . . Psychologists may barter only if . . . (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.) (6. Record Keeping and Fees - 6.05 Barter With Clients/Patients)</p> <p>When psychologists pay, receive payment from, or divide fees with another professional, other</p>	<p><i>supervisees)</i></p> <p>The psychologist shall . . . protect the welfare of his/her research participants . . . (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students)</p> <p>The psychologist shall not exploit the client or responsible payer by charging a fee that is excessive for the services performed or by entering into an exploitive bartering arrangement in lieu of a fee. (III. Rules of Conduct - H. Fees and Statements. 2. Reasonableness of fee)</p>

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	<p>than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation With Other Professionals.) (6. Record Keeping and Fees - 6.07 Referrals and Fees)</p> <p>Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients/patients. Psychologists do not terminate therapy to circumvent this standard. (10. Therapy - 10.06 Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients)</p>	
<p>III.32 Not offer rewards sufficient to motivate an individual or group to participate in an activity that has possible or known risks to themselves or others. (Also see Standards I.27, I.28, II.2, and II.49.)</p>	<p>(a) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation. (8. Research and Publication - 8.06 Offering Inducements for Research Participation)</p> <p>(b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.) (8. Research and Publication - 8.06 Offering Inducements for Research Participation)</p>	
<p>III.33 Avoid dual or multiple relationships (e.g. with clients, research participants, employees, supervisees, students, or trainees) and other situations that might</p>	<p>(a) . . . 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</p>	<p>a. A multiple relationship that is exploitative of the client or a relevant person associated with or related to the client is prohibited. Psychologists take all reasonable steps to ensure that any</p>

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<p>present a conflict of interest or that might reduce their ability to be objective and unbiased in their determinations of what might be in the best interests of others.</p>	<p>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.</p> <p>Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical. (3. <i>Human Relations - 3.05 Multiple Relationships</i>)</p> <p>(b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.) (7. <i>Education and Training - 7.05 Mandatory Individual or Group Therapy</i>)</p> <p>(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.) (10. <i>Therapy - 10.02 Therapy Involving Couples or Families</i>)</p> <p>Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies. (10. <i>Therapy - 10.07 Therapy With Former Sexual Partners</i>)</p>	<p>multiple relationships do not impair the psychologist's professional judgment or objectivity or result in a conflict of interest with the client or a relevant person associated with or related to the client.</p> <p>b. Multiple relationships that would not reasonably be expected to impair a psychologist's judgment or objectivity or risk harm to the client or relevant person associated with or related to the client are not expressly prohibited. (III. <i>Rules of Conduct - B. Multiple Relationships. 2. Prohibited multiple relationships</i>)</p> <p>The psychologist shall not . . . exploit a supervisee in any way -- sexually, financially or otherwise. (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 1. Welfare of supervisees</i>)</p> <p>The psychologist shall . . . protect the welfare of his/her research participants . . . (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants</i>)</p> <p>The psychologist shall not . . . exploit a student in any way – sexually, financially or otherwise. (III. <i>Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 3. Welfare of students</i>)</p>
<p>III.34 Manage dual or multiple relationships that are unavoidable due to cultural norms or other circumstances in such a manner that bias, lack of objectivity, and risk of exploitation are minimized. This</p>	<p>(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance</p>	<p>. . . Psychologists take reasonable steps to ensure that if such a multiple relationship occurs, it is not exploitative of the client or a relevant person associated with or related to the client. (III. <i>Rules of Conduct - B. Multiple Relationships. 1.</i></p>

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<p>might include obtaining ongoing supervision or consultation for the duration of the dual or multiple relationship, or involving a third party in obtaining consent (e.g., approaching a client or employee about becoming a research participant).</p>	<p>with the Ethics Code. (3. Human Relations - 3.05 Multiple Relationships)</p>	<p><i>Definition of multiple relationships</i></p> <p>a. . . . Psychologists take all reasonable steps to ensure that any multiple relationships do not impair the psychologist's professional judgment or objectivity or result in a conflict of interest with the client or a relevant person associated with or related to the client. (III. Rules of Conduct - B. Multiple Relationships. 2. Prohibited multiple relationships)</p>
<p>III.35 Inform all parties, if a real or potential conflict of interest arises, of the need to resolve the situation in a manner that is consistent with Respect for the Dignity of Persons (Principle I) and Responsible Caring (Principle II), and take all reasonable steps to resolve the issue in such a manner.</p>	<p>(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.) (3. Human Relations - 3.05 Multiple Relationships)</p> <p>(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.) (10. Therapy - 10.02 Therapy Involving Couples or Families)</p>	
<p><i>Reliance on the discipline</i></p>		
<p>III.36 Familiarize themselves with their discipline's rules and regulations, and abide by them, unless abiding by them would be seriously detrimental to the</p>	<p>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. . .</p>	<p>The psychologist shall not violate any applicable statute or administrative rule regulating the practice of psychology. (III. Rules of Conduct - J. Violations of Law. 1. Violation of applicable</p>

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rights or welfare of others as demonstrated in the Principles of Respect for the Dignity of Persons or Responsible Caring. (See Standards IV.17 and IV.18 for guidelines regarding the resolution of such conflicts.)	<i>(Introduction and Applicability, para 7)</i>	<i>statutes)</i>
III.37 Familiarize themselves with and demonstrate a commitment to maintaining the standards of their discipline.		
III.38 Seek consultation from colleagues and/or appropriate groups and committees, and give due regard to their advice in arriving at a responsible decision, if faced with difficult situations.	<p>In applying the Ethics Code to their professional work, psychologists may . . . consult with others within the field. . . <i>(Introduction and Applicability, para 7)</i></p> <p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to . . . consult with others concerning ethical problems. <i>(Preamble, para 3)</i></p>	
<i>Extended responsibility</i>		
III.39 Encourage others, in a manner consistent with this <i>Code</i> , to relate with integrity.	<p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to . . . encourage ethical behavior by students, supervisees, employees, and colleagues . . . <i>(Preamble, para 3)</i></p>	
III.40 Assume overall responsibility for the scientific and professional activities of their assistants, employees, supervisees, students, and trainees with regard to the Principle of Integrity in Relationships, all	Psychologists who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a	. . . This Code shall apply to the conduct of all licensees and applicants, including the applicant's conduct during the period of education, training, and employment which is required for licensure. . . <i>(I. Introduction - B. Scope.)</i>

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of whom, however, incur similar obligations.	multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; . . . (See also Standards 3.05, Multiple Relationships; 4.01, Maintaining Confidentiality; . . . 9.03, Informed Consent in Assessments; . . .) <i>(2. Competence - 2.05 Delegation of Work to Others)</i>	The psychologist shall exercise appropriate supervision over supervisees, as set forth in the rules and regulations of the Boards. <i>III. Rules of Conduct - A. Competence. 9. Providing supervision)</i>
Principle IV: Responsibility to Society		
Values Statement		
Psychology functions as a discipline within the context of human society. (Footnote 2.) Psychologists, both in their work and as private citizens, have responsibilities to the societies in which they live and work, such as the neighbourhood or city, and to the welfare of all human beings in those societies.	. . . They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. . . <i>(General Principles - Principle B: Fidelity and Responsibility)</i>	
Two of the legitimate expectations of psychology as a science and a profession are that it will increase knowledge and that it will conduct its affairs in such ways that it will promote the welfare of all human beings.	Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the conditions of individuals. . . They strive to help the public in developing informed judgments and choices concerning human behavior. <i>(Preamble, para 1)</i>	
Freedom of enquiry and debate (including scientific and academic freedom) is a foundation of psychological education, science, and practice. In the context of society, the above expectations imply that psychologists will exercise this	. . . Psychologists respect and protect the central importance of freedom of inquiry and expression in research, teaching, and publication. . . <i>(Preamble, para 1)</i>	

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<p>freedom through the use of activities and methods that are consistent with ethical requirements.</p>		
<p>The above expectations also imply that psychologists will do whatever they can to ensure that psychological knowledge, when used in the development of social structures and policies, will be used for beneficial purposes, and that the discipline's own structures and policies will support those beneficial purposes. Within the context of this document, social structures and policies that have beneficial purposes are defined as those that more readily support and reflect respect for the dignity of persons, responsible caring, integrity in relationships, and responsibility to society. If psychological knowledge or structures are used against these purposes, psychologists have an ethical responsibility to try to draw attention to and correct the misuse. Although this is a collective responsibility, those psychologists having direct involvement in the structures of the discipline, in social development, or in the theoretical or research data base that is being used (e.g., through research, expert testimony, or policy advice) have the greatest responsibility to act. Other psychologists must decide for themselves the most appropriate and beneficial use of their time and talents to help meet this collective responsibility.</p>	<p>. . . Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. . . (<i>General Principles - Principle A: Beneficence and Nonmaleficence</i>)</p> <p>. . . Psychologists strive to . . . avoid unwise or unclear commitments . . . (<i>General Principles - Principle C: Integrity</i>)</p>	
<p>In carrying out their work, psychologists acknowledge that many social structures have evolved slowly over time in response to human need and are valued by the societies that have developed them. In such circumstances, psychologists convey respect for such social</p>		

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<p>structures and avoid unwarranted or unnecessary disruption. Suggestions for and action toward changes or enhancement of such structures are carried out through processes that seek to achieve a consensus within those societies and/or through democratic means.</p>		
<p>On the other hand, if structures or policies seriously ignore or oppose the principles of respect for the dignity of persons, responsible caring, integrity in relationships, or responsibility to society, psychologists involved have a responsibility to speak out in a manner consistent with the principles of this <i>Code</i>, and advocate for appropriate change to occur as quickly as possible.</p>		
<p>In order to be responsible and accountable to society, and to contribute constructively to its ongoing development, psychologists need to be willing to work in partnership with others, be self-reflective, and be open to external suggestions and criticisms about the place of the discipline of psychology in society. They need to engage in even-tempered observation and interpretation of the effects of societal structures and policies, and their process of change, developing the ability of psychologists to increase the beneficial use of psychological knowledge and structures, and avoid their misuse. The discipline needs to be willing to set high standards for its members, to do what it can to assure that such standards are met, and to support its members in their attempts to maintain the standards. Once again, individual psychologists must decide for themselves the most appropriate and beneficial use of their time and</p>	<p>. . . Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. . . (<i>General Principles - Principle B: Fidelity and Responsibility</i>)</p> <p>. . . Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage. (<i>General Principles - Principle B: Fidelity and Responsibility</i>)</p> <p>If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation. (<i>1. Resolving Ethical Issues - 1.01 Misuse of Psychologists' Work</i>)</p>	

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talents in helping to meet these collective responsibilities.		
<p>Ethical Standards</p> <p>In adhering to the Principle of Responsibility to Society, psychologists would:</p>		
<i>Development of knowledge</i>		
<p>IV.1 Contribute to the discipline of psychology and of society's understanding of itself and human beings generally, through free enquiry and the acquisition, transmission, and expression of knowledge and ideas, unless such activities conflict with other basic ethical requirements.</p> <p>IV.2 Not interfere with, or condone interference with, free enquiry and the acquisition, transmission, and expression of knowledge and ideas that do not conflict with other basic ethical requirements.</p>	<p>. . .Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. . . (<i>Preamble, para 1</i>)</p>	
<p>IV.3 Keep informed of progress in their area(s) of psychological activity, take this progress into account in their work, and try to make their own contributions to this progress.</p>	<p>Psychologists undertake ongoing efforts to develop and maintain their competence. (<i>2. Competence - 2.03 Maintaining Competence</i>)</p>	
<i>Beneficial activities</i>		
<p>IV.4 Participate in and contribute to continuing education and the professional and scientific growth of self and</p>	<p>Psychologists undertake ongoing efforts to develop and maintain their competence. (<i>2. Competence - 2.03 Maintaining Competence</i>)</p>	

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colleagues.		
<p>IV.5 Assist in the development of those who enter the discipline of psychology by helping them to acquire a full understanding of their ethical responsibilities, and the needed competencies of their chosen area(s), including an understanding of critical analysis and of the variations, uses, and possible misuses of the scientific paradigm.</p>	<p>Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.) (7. <i>Education and Training - 7.01 Design of Education and Training Program</i>)</p>	
<p>IV.6 Participate in the process of critical self-evaluation of the discipline's place in society, and in the development and implementation of structures and procedures that help the discipline to contribute to beneficial societal functioning and changes.</p>		
<p>IV.7 Provide and/or contribute to a work environment that supports the respectful expression of ethical concern or dissent, and the constructive resolution of such concern or dissent.</p>		
<p>IV.8 Engage in regular monitoring, assessment, and reporting (e.g., through peer review, and in programme reviews, case management reviews, and reports of one's own research) of their ethical practices and safeguards.</p>		
<p>IV.9 Help develop, promote, and participate in accountability processes and procedures</p>		<p>The psychologist shall display his/her current (name of jurisdiction) license to practice</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>related to their work.</p>		<p>psychology, on the premises of his/her professional office. <i>(III. Rules of Conduct - G. Representation of Services. 1. Display of license)</i></p> <p>When a psychologist learns from a client of a possible violation of the statutes or rules of the Board, or when a psychologist receives a request from a client for information on how to file a complaint with the Board, the psychologist has an obligation to inform the client of the standards of practice of psychology and how to file a complaint with the Board. <i>(III. Rules of Conduct - L. Reporting Suspected Violations. 2. Providing information to client)</i></p>
<p>IV.10 Uphold the discipline's responsibility to society by promoting and maintaining the highest standards of the discipline.</p>		
<p>IV.11 Protect the skills, knowledge, and interpretations of psychology from being misused, used incompetently, or made useless (e.g., loss of security of assessment techniques) by others.</p>	<p>If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation. <i>(I. Resolving Ethical Issues - 1.01 Misuse of Psychologists' Work)</i></p> <p>(c) Psychologists using the services of an interpreter . . . ensure that . . . and test security are maintained . . . (See also Standards 2.05, Delegation of Work to Others; 4.01, . . . and 9.07, Assessment by Unqualified Persons.) <i>(9. Assessment - 9.03 Informed Consent in Assessments)</i></p> <p>. . . Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques</p>	<p>The psychologist shall not reproduce or describe in popular publications, lectures, or public presentations psychological tests or other assessment devices in ways that might invalidate them. <i>(III. Rules of Conduct - I. Assessment Procedures. 4. Protection of integrity of assessment procedures)</i></p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code. (9. Assessment - 9.11 Maintaining Test Security)	
IV.12 Contribute to the general welfare of society (e.g., improving accessibility of services, regardless of ability to pay) and/or to the general welfare of their discipline, by offering a portion of their time to work for which they receive little or no financial return.	. . . Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage. (General Principles - Principle B: Fidelity and Responsibility)	
IV.13 Uphold the discipline's responsibility to society by bringing incompetent or unethical behaviour, including misuses of psychological knowledge and techniques, to the attention of appropriate authorities, committees, or regulatory bodies, in a manner consistent with the ethical principles of this Code, if informal resolution or correction of the situation is not appropriate or possible.	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. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.) (1. Resolving Ethical Issues - 1.05 Reporting Ethical Violations)	The psychologist who has substantial reason to believe that there has been a violation of the statutes or rules of the Board, that might reasonably be expected to harm a client, may report such violation to the Board, or if required by statute shall report to the Board. . . (III. Rules of Conduct - L. Reporting Suspected Violations. 1. Reporting of violations to Board) When a psychologist learns from a client of a possible violation of the statutes or rules of the Board, or when a psychologist receives a request from a client for information on how to file a complaint with the Board, the psychologist has an obligation to inform the client of the standards of practice of psychology and how to file a complaint with the Board. (III. Rules of Conduct - L. Reporting Suspected Violations. 2. Providing information to client)
IV.14 Enter only into agreements or contracts that allow them to act in accordance with the ethical principles and standards of this Code.	. . . Psychologists strive to . . . avoid unwise or unclear commitments. . . (General Principles - Principle C: Integrity)	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
	<p>When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.) (<i>10. Therapy - 10.09 Interruption of Therapy</i>)</p>	
<p><i>Respect for society</i></p>		
<p>IV.15 Acquire an adequate knowledge of the culture, social structure, and customs of a community before beginning any major work there.</p>		
<p>IV.16 Convey respect for and abide by prevailing community mores, social customs, and cultural expectations in their scientific and professional activities, provided that this does not contravene any of the ethical principles of this <i>Code</i>.</p>		
<p>IV.17 Familiarize themselves with the laws and regulations of the societies in which they work, especially those that are related to their activities as psychologists, and abide by them. If those laws or regulations seriously conflict with the ethical principles contained herein, psychologists would do whatever they could to uphold the ethical principles. If upholding the ethical principles could result in serious personal consequences (e.g., jail or physical harm), decision for</p>	<p>. . . If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. . . (<i>Introduction and Applicability, para 7</i>)</p> <p>If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the</p>	<p>. . . This Code shall not supersede state, federal, or provincial statutes. . . (<i>I. Introduction - B. Scope.</i>)</p> <p>Ethics codes and standards for providers promulgated by the American Psychological Association, the Canadian Psychological Association, and other relevant professional groups shall be used as an aid in resolving ambiguities which may arise in the interpretation of this Code of Conduct, except that this Code of Conduct shall prevail whenever any conflict exists between this Code and any professional</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>final action would be considered a matter of personal conscience.</p> <p>IV.18 Consult with colleagues, if faced with an apparent conflict between abiding by a law or regulation and following an ethical principle, unless in an emergency, and seek consensus as to the most ethical course of action and the most responsible, knowledgeable, effective, and respectful way to carry</p>	<p>requirements of the law, regulations, or other governing legal authority. <i>(I. Resolving Ethical Issues - 1.02 Conflicts Between Ethics and Law, Regulation, or Other Governing Authority)</i></p> <p>(b) Psychologists' fee practices are consistent with law. <i>(6. Record Keeping and Fees - 6.04 Fees and Financial Arrangements)</i></p> <p>(a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards. <i>(8. Research and Publication - 8.09 Humane Care and Use of Animals in Research)</i></p> <p>. . . Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code. <i>(9. Assessment - 9.11 Maintaining Test Security)</i></p>	<p>association standard. <i>(I. Introduction - E. Aids to Interpretation.)</i></p> <p>b. To meet the requirements of this rule, so as to provide a formal record for review, but not necessarily for other legal purposes, the psychologist shall assure that all data entries in the professional records are maintained for a period of not less than five years after the last date that service was rendered or for a longer period if required by law. <i>(III. Rules of Conduct - A. Competence. 7. Maintenance and retention of records)</i></p> <p>The psychologist shall . . . comply with all relevant statutes and administrative rules concerning treatment of research participants. <i>(III. Rules of Conduct - E. Welfare of Supervisees, Research Participants and Students. 2. Welfare of research participants)</i></p> <p>The psychologist may release confidential information upon court order, as defined in Section II of this Code, or to conform with state, federal or provincial law, rule, or regulation. <i>(III. Rules of Conduct - F. Protecting Confidentiality of Clients. 7. Release of confidential information)</i></p> <p>The psychologist shall be familiar with any relevant law concerning the reporting of abuse of children and vulnerable adults, and shall comply with such laws. <i>(III. Rules of Conduct - F. Protecting Confidentiality of Clients. 8. Reporting of abuse of children and vulnerable adults)</i></p> <p>The psychologist shall not violate any applicable</p>

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
		<p>statute or administrative rule regulating the practice of psychology. (<i>III. Rules of Conduct - J. Violations of Law. 1. Violation of applicable statutes</i>)</p> <p>The psychologist shall not aid or abet another person in misrepresenting his/her professional credentials or in illegally engaging in the practice of psychology. (<i>III. Rules of Conduct - K. Aiding Unauthorized Practice. 1. Aiding unauthorized practice</i>)</p> <p>The psychologist who has substantial reason to believe that there has been a violation of the statutes or rules of the Board, that might reasonably be expected to harm a client . . . if required by statute shall report to the Board. . . (<i>III. Rules of Conduct - L. Reporting Suspected Violations. 1. Reporting of violations to Board</i>)</p>
<i>Development of society</i>		
IV.19 Act to change those aspects of the discipline of psychology that detract from beneficial societal changes, where appropriate and possible.		
IV.20 Be sensitive to the needs, current issues, and problems of society, when determining research questions to be asked, services to be developed, content to be taught, information to be collected, or appropriate interpretation of results or findings.		
IV.21 Be especially careful to keep well informed of social issues through		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>relevant reading, peer consultation, and continuing education, if their work is related to societal issues.</p>		
<p>IV.22 Speak out, in a manner consistent with the four principles of this <i>Code</i>, if they possess expert knowledge that bears on important societal issues being studied or discussed.</p>		
<p>IV.23 Provide thorough discussion of the limits of their data with respect to social policy, if their work touches on social policy and structure.</p>		
<p>IV.24 Consult, if feasible and appropriate, with groups, organizations, or communities being studied, in order to increase the accuracy of interpretation of results and to minimize risk of misinterpretation or misuse.</p>		
<p>IV.25 Make themselves aware of the current social and political climate and of previous and possible future societal misuses of psychological knowledge, and exercise due discretion in communicating psychological information (e.g., research results, theoretical knowledge), in order to discourage any further misuse.</p>	<p>If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation. (<i>1. Resolving Ethical Issues - 1.01 Misuse of Psychologists' Work</i>)</p>	
<p>IV.26 Exercise particular care when reporting the results of any work regarding vulnerable groups, ensuring that results are not likely to be misinterpreted or misused in the development of social policy, attitudes, and practices (e.g.,</p>		

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>encouraging manipulation of vulnerable persons or reinforcing discrimination against any specific population).</p>		
<p>IV.27 Not contribute to nor engage in research or any other activity that contravenes international humanitarian law, such as the development of methods intended for use in the torture of persons, the development of prohibited weapons, or destruction of the environment.</p>		
<p>IV.28 Provide the public with any psychological knowledge relevant to the public's informed participation in the shaping of social policies and structures, if they possess expert knowledge that bears on the social policies and structures.</p>	<p>. . . They strive to help the public in developing informed judgments and choices concerning human behavior. . . (<i>Preamble, para 1</i>)</p>	
<p>IV.29 Speak out and/or act, in a manner consistent with the four principles of this <i>Code</i>, if the policies, practices, laws, or regulations of the social structure within which they work seriously ignore or contradict any of the principles of this <i>Code</i>.</p>	<p>If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code. (<i>1. Resolving Ethical Issues - 1.03 Conflicts Between Ethics and Organizational Demands</i>)</p>	
<p><i>Extended responsibility</i></p>		
<p>IV.30 Encourage others, in a manner consistent with this <i>Code</i>, to exercise responsibility to society.</p>	<p>The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong</p>	

CPA Code (2000)	APA Code (2002)	ASPPB Code (2005)
<p>IV.31 Assume overall responsibility for the scientific and professional activities of their assistants, employees, supervisees, students, and trainees with regard to the Principle of Responsibility to Society, all of whom, however, incur similar obligations.</p>	<p>effort to . . . encourage ethical behavior by students, supervisees, employees, and colleagues . . . (Preamble, para 3)</p>	<p>. . . This Code shall apply to the conduct of all licensees and applicants, including the applicant's conduct during the period of education, training, and employment which is required for licensure. . . (I. Introduction - B. Scope.)</p> <p>The psychologist shall exercise appropriate supervision over supervisees, as set forth in the rules and regulations of the Boards. III. Rules of Conduct - A. Competence. 9. Providing supervision)</p>
<p>Footnotes</p>		
<p>1. Adapted from: Canadian Psychological Association (1985). <i>Guidelines for the elimination of sexual harassment</i>. Ottawa, ON: Author.</p> <p>2. Society is used here in the broad sense of persons living as members of one or more human communities, rather than in the limited sense of state or government.</p>	<p><i>History and Effective Date Footnote</i></p> <p>This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, August 21, 2002, and is effective beginning June 1, 2003. . .</p>	

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