

## ETHICS

# On Calvin and Hobbes and Ethics: Principles vs Consequences

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I like Calvin and Hobbes. In one story, as Calvin wants Santa to bring him presents for Christmas, he ponders "Do I really have to BE good or do I just have to ACT good? ... So, exactly how good do you think I have to act? REALLY good, or just PRETTY good?" "All I'm doing is saying I can be bribed".

As psychologists we sometimes ask similar questions on where to draw the line between minimally acceptable behaviour and what falls below the minimum for which rewards may be denied and disciplinary sanctions imposed. Does reward and punishment determine for us what is right and wrong, or, are these considerations simply a matter of risk management? Can we operate simultaneously on different levels of moral development ranging from the concrete reward/punishment level to that of internalized values superseding external consequences?

The question often arises whether professional codes of ethics should only prescribe conduct for professional relationships, or, whether they should also describe virtuous principles. Codes of conduct tend to prescribe conduct in behavioural terms and are useful in adjudicating disciplinary complaints. Codes of ethics usually contain principles and aspirational statements as well. The distinction can be seen as between merely acting good or also being good. For example, in my professional role do I refrain from acting in ways which are discriminatory to ... (which may be observable), or am I the kind of person who respects everyone regardless of ... (which may be difficult to operationalize).

A philosophical question is whether good is defined for its own inherent value, or only for its utilitarian consequences. Is something good because it brings Calvin Christmas presents or me greater income, or because the consequences for the individuals receiving my services are beneficial, or because the consequences may serve the greater good of society? Our *Canadian Code of Ethics for Psychologists* emphasizes the inherent good of Respect for the Dignity of Persons, Responsible Caring, Integrity in Relationships, and Responsibility to Society, and, in the event that these principles

should be in conflict, then priority is rank-ordered as listed. However, there may be exceptions to respect for the wishes of individuals if their behaviour poses dangerous consequences to others.

Research ethics require fully informed consent of participants regardless of a researcher's claim that deception or coercion might serve the greater interests of society (a small exception is made for temporary deception in exceptional circumstances.) Also respect and responsible caring for research participants in-

cludes protection from harm. Today there is outrage at gross violations of respect for research participants, not only in Nazi Germany's era of experimentation, but in brain-washing experiments at the Alan Memorial Institute in Montreal, and in the nuclear radiation experiments on unsuspecting subjects recently disclosed the United States, all of which may have been considered justified at the time for the greater interests of society.

There is a current issue on whether political correctness has gone too far. Speech and behaviour which respects all persons without discrimination or disempowerment certainly fits within our professional codes of ethics. However, it can be argued that talk is cheap when virtuous statements have no means of enforcement. It can be argued that enforcing politically correct behaviour protects the vulnerable, increases consciousness of issues, and in the long run changes attitudes in society. For others, coercive measures are deemed to be arbitrary, narrowly ideological, and to restrict honesty, freedom of enquiry, the advancement of scientific knowledge, the academic freedom. However, whatever the outcome on the political correctness issues, academics should be able to abide by ethical principles in ways which do not diminish scholarly integrity or their sensitiv-

ity to the potential abuse inherent in authority relationships.

The present economy will not accommodate professional self-indulgence, and in driving us to be responsible, competent and relevant it may drive us to ignore other than utilitarian values. The utilitarian values of efficiency in the use of resources and effectiveness in visible measurable outcomes are being emphasized more and more as justification for government financial support for academic teaching and research activities, and for professional services. Our educational and health systems are being restructured. Is there value in advancing truth and knowledge for its own sake or only for what has visible immediate benefits for society? Should government supported health services be limited to bare essentials? Should the elderly, the disabled, the poor, and children have a lower priority for services because they are seen to be less productive in society?

Do you believe in ethical principles, and/or rules of conduct, or does it all depend on the utilitarian consequences? Are you aware of the work of the Canadian Psychological Association in advocating with others for continued financial support for research and scholarly activities, and for preserving post-secondary education and universal health care across Canada? These value-based activities deserve recognition and support.

As Calvin says, "Still, in the real world, people care about success, not principles ... Then again, maybe that's why the world is in such a mess. What a dilemma". Where do you and I stand? ♦

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# HEAL: "Getting to the Core"

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The Health Action Lobby (HEAL) just released its awaited discussion paper addressing the thorny issue involved in maintaining a comprehensive health care system. HEAL is a consortium of health provider, health institution and consumer groups. It has developed a process to mine which health services should be provided in the national health care system while studiously avoiding producing a list of insured health services.

The heart of the model is the decision making process. Demands for health services are ever increasing and come from a variety of consumer, provider and institutional sources. All current and future services must first meet a test of empirical efficacy before being considered for provision as a health benefit. Basic research, applied research and program evaluation are essential components. Empirical evidence will be examined by independent health research groups composed of scientists. The question to be satisfied is "Does it work?"

If the tests of scientific efficacy are passed, the services would then be examined by a policy advisory group composed of consumers and providers. The questions to be answered by this group are "Is it needed?" and "Is it worth it?" Consumers and providers have a vested interest in ensuring responsibility to ensure that health benefits are used wisely and prudently.

The final stage rests with Governments. They are responsible to manage the budget and to balance what is needed with what is requested and what is affordable. Governments must decide between competing social policy objectives, of which is health care.

The HEAL paper is available from CPA on a cost-recovery basis. Provincial HEAL groups are encouraged to obtain the document for possible use in provincial discussions with provincial health officials.

The second HEAL document examining the federal and provincial fiscal arrangements required to maintain the Canadian national health care system will be available within the next several weeks.

## The Prime Minister's Health Forum

HEAL has been meeting with the Minister of Health, Honourable Diane Marleau and her officials around several issues, not the least of which is the Prime Minister's Initiative on Health Reform. The Forum has a three to four year mandate to examine Canada's national health care system in great detail. The Federal Government believes that after twenty five years of operating one of the best health care systems in the world, it is time for a period of reexamination and reflection. It is very heartening to understand that this initiative is not based solely on economic factors. Executive Director of the Forum has just been named. HEAL believes that Dr. Marie Fortier is an excellent candidate. She brings a wide range of knowledge and experience to the position. Further appointments and the Forum's mandate will be made available in the coming weeks. ♦