

Canadian Code of Ethics for Psychologists

Fourth Edition

(Draft – February 2015)

Preamble

Introduction

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.

The Canadian Psychological Association recognizes its responsibility to help assure ethical behaviour and ethical attitudes on the part of psychologists. Attempts to assure ethical behaviour and ethical attitudes include: (a) articulating ethical principles, values, and standards; (b) promoting those principles, values, and standards through formative and continuing education, supervision, peer modelling, and consultation; (c) developing and implementing methods to help psychologists monitor the ethics of their behaviour and attitudes; (d) adjudicating complaints of unethical behaviour; and (e) taking corrective action when warranted.

This *Code* articulates ethical principles, values, and standards to guide all members of the Canadian Psychological Association, whether scientists, practitioners, or scientist practitioners. Although some of its ethical standards are specific to particular activities or contexts, its ethical principles and values are applicable whether members are acting in a research, direct service, teaching, administrative, management, employer, employee, student, supervisory, consultative, peer review, editorial, expert witness, social policy, or any other role related to the discipline of psychology. The ethical principles and values also are applicable regardless of the modality of any activity (e.g., in print, in person, through electronic media).

Structure of the Code

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 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. Some standards are specific to particular types of psychology activity (e.g., direct service, research, teaching); however, the majority of standards are applicable to all types of psychology activities.

Ethical Decision Making

Ethical choices need to be made when ethical questions, issues, or dilemmas arise. Such choices involve ethical decision making.

The ethical decision-making process might occur very rapidly, leading to an easy resolution of an ethical question or issue. This is particularly true of questions or issues for which clear-cut guidelines or standards exist and for which there is no conflict between principles, values, or the interests of parties involved. On the other hand, some ethical issues (particularly those in which ethical principles, values, or interests conflict) are not easily resolved, might be emotionally distressful, and might require time-consuming deliberation.

All four principles are to be taken into account and balanced in ethical decision making. However, in circumstances in which the ethical principles themselves conflict, it might not be possible to give each principle equal weight. The complexity of many 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 conflict, namely:

Principle I: Respect for the Dignity of Persons and Peoples. This principle, with its emphasis on inherent worth, non-discrimination, moral rights, and distributive justice, generally should be given the highest weight, except in circumstances in which there is a clear and imminent danger of bodily harm to someone.

Principle II: Responsible Caring. This principle generally should be given the second highest weight. Responsible caring requires competence, maximization of benefit, and minimization of harm, and should be carried out only in ways that respect the dignity of persons and peoples.

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 some circumstances, Principle III values (e.g., openness, straightforwardness) might need to be subordinated to the values contained in the Principles of Respect for the Dignity of Persons and Peoples, and Responsible Caring.

Principle IV: Responsibility to Society. This principle generally should be given the fourth highest weight of the four principles when it conflicts with one or more of them. Although it is necessary and important to consider responsibility to society in every ethical decision, adherence to this principle needs to be subject to and guided by Respect for the Dignity of Persons and Peoples, Responsible Caring, and Integrity in Relationships. When the welfare of an individual or group 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 for dignity, responsible caring or integrity. However, if this is not possible, the dignity and well-being of persons and peoples, and integrity in relationships, should not be sacrificed to a vision of the greater good of society.

Although the above ordering of principles can be helpful in resolving some ethical questions, issues, or dilemmas, the complexity of many situations requires consideration of other factors and engagement in a creative, self-reflective, and deliberative ethical decision-making process that includes consideration of many other factors. The following basic steps typify approaches to such a process:

1. Identification of the individuals and groups potentially affected by the decision.

2. Identification of ethically relevant issues and practices, including the moral rights, values, well-being, interests, and any other relevant characteristics of the individuals and groups involved, as well as the cultural, social, economic, institutional, legal or political context or other circumstances in which the ethical problem arose.
3. Consideration of how one's own biases, stresses, self-interest, or cultural, social, economic, institutional, legal, or political context and background, might influence the development of or choice between courses of action.
4. Development of alternative courses of action.
5. Analysis of likely short-term, ongoing, and long-term risks and benefits of each course of action on the individuals and groups involved or likely to be affected, taking into account relevant individual and cultural, social, economic, institutional, legal, and political contextual factors.
6. Choice of course of action after conscientious application of existing principles, values, and standards (which includes, but would not be limited by relevant laws and regulations).
7. Action, with a commitment to assume responsibility for the consequences of the action.
8. Evaluation of the results of the course of action.
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.
10. Appropriate action, as warranted and feasible, to prevent future occurrences of the dilemma (e.g., communication and problem solving with colleagues and team members or other collaborators; changes in procedures and practices).

Psychologists engaged in time-consuming deliberation are encouraged to consult with the individuals and groups affected by the ethical problem if appropriate. In addition, they are encouraged and expected to consult with colleagues or relevant others, including advisory bodies, when such individuals or groups 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.

Even with all of the above, psychologists may be faced with ethical dilemmas that are still 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*.

Uses of the Code

This *Code* is intended to guide psychologists in their everyday conduct, thinking, and planning, and in the resolution of ethical questions, issues, and dilemmas; that is, it advocates the practice of both proactive and reactive ethics.

The *Code* also is intended to serve as an umbrella document for the development of codes of conduct or other more specific codes. For example, the *Code* 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 *Code* 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., *Guidelines for Non-Discriminatory Practice; Guidelines for Ethical Psychological Practice with Women; Ethical Guidelines for Supervision in Psychology: Teaching, Research, Practice, and Administration*). The principles and values incorporated into this *Code*, insofar as they come to be reflected in other documents guiding the behaviour of psychologists, will reduce inconsistency and conflict between documents.

A third use of the *Code* 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 *Code* provides an ethical framework 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; 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 psychologist 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 *Code* provides guidance for making such judgments.

Responsibility of the Individual Psychologist

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.

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 commits members to:

1. Adhere to the Association's *Code* in all current activities as a psychologist.

2. Apply conscientiously the ethical principles and values of the *Code* to new or emerging areas of activity.
 - i. Engage in ongoing development and maintenance of their ethical sensitivity and commitment, ethical knowledge, and ethical decision-making skills.
3. Assess and discuss ethical issues and practices with colleagues and appropriate others on a regular basis.
4. Bring to the attention of the Association ethical issues that require clarification or the development of new guidelines or standards.
5. Bring concerns about possible unethical actions by a psychologist directly to the psychologist when the 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.
6. Bring concerns about possible unethical actions of a more serious nature (e.g., actions that have caused or could cause serious harm; 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.
7. Consider seriously others' concerns about one's own possibly unethical actions or unrecognized biases and attempt to reach an agreement on the issue and, if needed, take appropriate action.
8. Not be vexatious or malicious if bringing or responding to concerns about possible unethical actions.
9. Cooperate with duly constituted committees of the Association that are concerned with ethics and ethical conduct.

Relationship of the 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, although an individual psychologist might make a personal decision to be guided by the *Code*'s principles and values 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.

Relationship of the Code to Provincial Regulatory Bodies

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 *Code* 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.

Definition of Terms for the Purposes of this Code

A. Terms related to persons and peoples.

“Primary client” means an *individual*¹ or *group* (e.g., couples, families, *organizations*, *communities*, *peoples*) that has contracted for and/or is receiving services that are intended to help with the *individual*'s or *group*'s own issues, responsibilities, questions, or problems. More than one *individual* or *group* can be primary clients in a single service contract. Primary clients may be *independent*, *partially dependent*, or *fully dependent* in terms of their decision making regarding their involvement.

“Community” means a *group* of *individuals* of any size whose members are connected to each other by relatively durable social relations that extend beyond immediate family ties, and share a common sense of identity and interests. A community may or may not live in the same geographic area.

“Contract examinee” is an *individual* or *group* that is the subject of a psychological assessment at the request of a *retaining party*, for the purpose of assisting an external decision maker (e.g., court, insurance company, or employer) to make a decision. Contract examinees may be *independent*, *partially dependent*, or *fully dependent* in terms of their decision making regarding their involvement.

“Group” refers to a number of human beings connected by a shared activity, interest, or quality. A group includes such entities as couples, families, *organizations*, *communities*, and *peoples*.

“Independent”, **“partially dependent,”** and **“fully dependent”** are terms that can apply to *primary clients*, contract examinees, research participants, students, and any other *persons* with whom *psychologists* come in contact in the course of their work. Such persons are **“independent”** if they can independently contract or give informed consent, 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; *retaining party* and *contract examinee*; adult members of a family coming for service), and **“fully dependent”** if they have little or no choice about whether or not to receive a particular service or participate in a particular activity (e.g., patients who have been involuntarily committed to a psychiatric facility; very young children involved in a research project).

“Individual” refers to a human being as a separate entity, distinct from other human beings.

“Organization” means a *group* of *persons* organized for some end or work.

“Others” means any *individual* or *group* with whom *psychologists* come in contact in the course of their work. This may include, but is not limited to: *primary clients* seeking help with *individual*, family, *organizational*, industrial, or *community* issues; *contract examinees*; research participants; employees; students; trainees; supervisees; colleagues; interdisciplinary or intradisciplinary team members; other collaborators; employers; third party payers; and members of the general public.

“Peoples” means a special type of *community* whose members are linked by a common culture, history, customs, and collective interests.

¹ Within each definition, any other terms for which there is a definition are italicized.

“**Persons**” means human beings both as *individuals* and as members of *groups*, including couples, families, *organizations*, *communities*, and *peoples*.

“**Psychologist**” means any *individual* who is a member of the Canadian Psychological Association, or a member of any psychology voluntary association or regulatory body that adopts, endorses, or ratifies this *Code*. (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.)

“**Retaining Party**” means the *individual* or *group* that has retained a *psychologist* to assess a *contract examinee* for the purpose of helping an external decision maker (e.g., court, insurance company, or employer) to make a decision.

“**Society**” means a highly structured system of human *organization* and relationships, which normally provides protection and continuity for its members. Although it can refer to such systems on a small scale (e.g., neighbourhood, *community*), in the Code, it generally refers to such systems on a very large scale (e.g., individual nations; the entire *community* of nations; the global *community*).

B. Other terms.

“**Critical inquiry studies**” refers to research that uses critical thinking approaches to analyze the structures, policies, activities, and/or social impact of an institution, *organization*, or other social entity. Such studies are carried out for the benefit of ethical societal improvement. They do not normally involve the institution, *organization*, or other social entity as *primary clients*, although some institutions, *organizations*, or other social entities might commission such a study for their own benefit in addition to potential societal benefit.

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.

“**Moral rights**” means rights that are grounded in moral reasoning (e.g., reasoning that helps to identify and justify the fundamental and inalienable rights of all human beings). Some aspects of moral rights may be contained within and protected by international, regional, and national declarations, constitutions, laws, and statutes (e.g., human rights declarations; laws defining the legal and civil rights of *persons* living in a country or region). However, other aspects may not be so contained or protected. Of particular significance to *psychologists* are moral rights to: distributive justice; fairness and due process; and developmentally appropriate privacy, self-determination, and personal liberty. Moral rights are not limited to those mentioned in this definition.

“**Sexual harassment**” includes either or both of the following: (i) the use of power or authority in an attempt to coerce another *individual* or *group* to engage in or tolerate sexual activity (e.g., explicit or implicit threats of reprisal for noncompliance; 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.²

² Adapted from: Canadian Psychological Association. (1985). *Guidelines for the elimination of sexual harassment*. Ottawa, Author.

“Unjust discrimination” or **“unjustly discriminatory”** means activities that are prejudicial to or promote prejudice against *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. The word “unjust” is used to differentiate such activities from the justifiable recognition and understanding of differences needed to determine, for instance, what might benefit or harm persons and peoples.

Review Schedule

To maintain the relevance and responsiveness of this *Code*, 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.

Principle I: Respect for the Dignity of Persons and Peoples

Values Statement

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; primary clients seeking help with individual, family, organizational, industrial, or community issues or problems; contract examinees; students; trainees; supervisees; employees; business partners; business competitors; colleagues; interdisciplinary or intradisciplinary team members; other collaborators; employers; retaining parties; third party payers; and the general public.

In these contacts, psychologists strive to develop and maintain constructive and collaborative relationships that reflect the fundamental principle of respect for dignity. Respect for the dignity of persons is the most fundamental and universally found ethical principle across disciplines, and includes the concepts of equal inherent worth, non-discrimination, moral rights, and distributive justice.

In respecting dignity, psychologists acknowledge that each human being should be treated primarily as a person or an end in him/herself, not as an object or a means to an end, and is worthy of equal moral consideration. In doing so, psychologists acknowledge that all human beings have a moral right to have their innate worth as human beings appreciated and that this inherent worth is not dependent on a human being's 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. As such, psychologists do not engage in unjust discrimination based on such factors and promote non-discrimination in all of their activities.

Psychologists also acknowledge that all human beings, in addition to being individuals, are interdependent social beings who are born into, live in, and are a part of the history and evolution of social groupings (e.g., couples, families, organizations, communities, peoples). The different cultures, ethnicities, religions, histories, social structures, and other such characteristics of social groupings are often integral to the identity of the individuals who belong to them and give meaning to their lives. As such, respect for the dignity of human beings includes respect and moral consideration for social groupings such as couples, families, organizations, communities, and peoples. Psychologists acknowledge and respect the uniqueness, diversity, and role structures involved.

Adherence to the concept of moral rights is an essential component of respect for the dignity of persons and peoples. Moral rights to developmentally appropriate privacy, self-determination, and liberty, and to cultural identity, social participation, and natural justice are of particular importance to psychologists in their work, 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.

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, other community members, and community leaders in personal decision making. In their work, psychologists acknowledge and respect such differences, while guarding against clear violations of moral rights.

As moral rights exist within the context of the moral 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 aspects of

some rights (e.g., privacy, self-determination, 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 moral rights of the person(s) involved to the greatest extent possible under such circumstances, and to do what is necessary and reasonable to reduce the need for future disallowances.

Although psychologists have a responsibility to respect the dignity of all persons and peoples 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 persons and peoples in the most vulnerable position. Vulnerability can be permanent or temporary, and can be increased by such factors as limited capacity to consent, reduced voluntariness to their consent or their involvement, economic disadvantage, cultural discrimination or oppression, or urgency of a situation. Normally, the individuals and groups directly receiving or involved in the psychologist's activities (e.g., research participants, primary clients, contract examinees, students) are in a more vulnerable position than those indirectly involved (e.g., employers, colleagues, interdisciplinary or intradisciplinary team members, other collaborators, organizational or community leaders, government, retaining parties, third party payers, the general public). Psychologists recognize that as the vulnerabilities of individuals and groups (e.g., couples, families, organizations, communities, peoples) increase, or their power to control their environment or their lives decreases, psychologists have an increasing responsibility to seek ethical advice and to establish safeguards to protect the moral rights of the persons involved. For this reason, psychologists consider it their responsibility to increase safeguards to protect and promote the moral rights of the persons involved in their activities proportionate to the degree of vulnerability of these persons.

Respect for the dignity of persons and peoples also includes the concept of distributive justice. With respect to psychologists, this concept implies that all individuals and groups (e.g., couples, families, organizations, communities, peoples) are entitled to benefit equitably from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists, regardless of their 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 or acknowledgment of difficulties (e.g., in relationships with some types of primary clients), psychologists do not exclude individuals and groups (e.g., couples, families, organizations, communities, peoples) 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, liberty) in carrying out their work as psychologists.

Ethical Standards

In adhering to the Principle of Respect for the Dignity of Persons and Peoples, psychologists would:

General respect

- I.1 Demonstrate appropriate respect for the knowledge, insight, experience, areas of expertise, and cultural perspectives and values of others, including those that are different from their own, limited only by those that seriously contravene the ethical principles of this *Code*.

- I.2 Not engage publicly (e.g., in public statements, presentations, research reports, with primary clients or other contacts) in degrading comments about others, including demeaning jokes based on such characteristics as culture, nationality, ethnicity, colour, race, religion, sex, gender, or sexual orientation.
- I.3 Strive to use language that conveys respect for the dignity of persons and peoples as much as possible in all spoken, written, electronic, or printed communication.
- I.4 Abstain from all forms of harassment, including sexual harassment.

General rights

- I.5 Avoid or refuse to participate in practices disrespectful of the moral rights of others.
- I.6 Refuse to advise, train, or supply information to anyone who, in the psychologist's judgment, will use the knowledge or skills to infringe on moral rights.
- I.7 Make every reasonable effort to ensure that psychological knowledge is not misused, intentionally or unintentionally, to infringe on moral rights.
- I.8 Respect the moral right of research participants, primary clients, contract examinees, employees, supervisees, students, trainees, and others to safeguard their own dignity.

Non-discrimination

- I.9 Not practice, condone, facilitate, or collaborate with any form of unjust discrimination.
- I.10 Act to correct practices that are unjustly 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 (e.g., couples, families, organizations, communities, peoples), and that they do not unfairly exclude those who are vulnerable or might be disadvantaged.

Fair treatment/due process

- I.12 Work and act in a spirit of fair treatment to others.
- I.13 Help to establish and abide by due process or other natural justice procedures for employment, evaluation, adjudication, editorial, and peer review activities.
- I.14 Compensate others fairly for the use of their time, energy, and knowledge, unless such compensation is refused in advance.
- 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 Standard IV.12.)

Informed consent

- I.16 Seek as full and active participation as possible from individuals and groups (e.g., couples, families, organizations, communities, peoples) in decisions that affect them, respecting and integrating as much as possible their opinions and wishes. This would include respect for

written or clearly expressed unwritten advance directives. Also, when working in an organizational or community context, it would include seeking participation of relevant individuals and subgroups that may not be represented by or may not have a role in the formal leadership.

- I.17 Recognize that informed consent is not simply a matter of having a consent form signed; rather, it is a process and may need to be obtained more than once (e.g., if significant new information becomes available), and involves taking time to establish an appropriate trusting relationship and to reach an agreement to work collaboratively.
- I.18 Respect the expressed wishes of individuals to involve others (e.g., family members, community members, community leaders) in their decisions regarding informed consent.
- I.19 Obtain informed consent from all independent and partially dependent individuals and groups (e.g., couples, families, organizations, communities, peoples) 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 individuals and groups, but fully informed consent would be obtained as soon as possible. (Also see Standard I.29.)
- I.20 Obtain informed consent for all research activities that involve obtrusive observation or measures, invasion of privacy, more than minimal risk of harm, or any attempt to change the behaviour of research participants.
- 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 individuals or groups giving consent, or the organization for whom the psychologist works.
- I.22 Accept and document non-written consent (e.g., oral, a verbal agreement, a handshake or other culturally normative exchange) in situations in which signed consent forms are not acceptable culturally or in which there are other good reasons for accepting non-written consent.
- I.23 Provide, in obtaining informed consent, as much information as reasonable or prudent individuals and groups (e.g., couples, families, organizations, communities, peoples) peoples would want to know before making a decision or consenting to the activity. The psychologist would relay this information in language that the individuals and groups involved understand (including providing translation into another language, if necessary), and would take whatever reasonable steps are needed to ensure that the information was, in fact, understood.
- 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; whether a team or other collaborators are involved; confidentiality limitations, protections, and risks; likely risks and benefits of the activity, including any particular risks or benefits of the methods and modalities used; alternatives; 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.)
- 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.

- I.26 Clarify the nature of multiple relationships to all concerned parties, including collateral contacts, before obtaining consent, if providing services or conducting research at the request of or for the use of a retaining or other third party. This would include, but not be limited to clarifying: the purpose of the service or research; the role and responsibilities of the psychologist; the reasonably anticipated use that will be made of the information collected; access to records or the information contained therein; the limits of confidentiality; and any special legal requirements or limitations. Third parties may include schools, employers, community, or organizational leaders, third-party payers, courts, government, police, and research funding bodies.

Freedom of consent

- 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.)
- 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 moral right of individuals and groups (e.g., couples, families, organizations, communities, peoples) to discontinue participation or service at any time, and be responsive to non-verbal indications of a desire to discontinue if the individuals or groups involved have difficulty with verbally communicating such a desire (e.g., young children, persons with language disabilities) or, due to culture, are unlikely to communicate such a desire orally.

Protections for vulnerable individuals and groups

- I.31 Seek an independent and adequate ethical review of moral rights issues and protections for any research involving vulnerable groups or individual members of vulnerable groups, including persons of diminished capacity to give informed consent, before making a decision to proceed.
- I.32 Not use vulnerable groups or individual members of vulnerable groups, including persons of diminished capacity to give informed consent, in research studies, if the research involved may be carried out equally well with groups or individuals without such vulnerabilities.
- I.33 Seek to use methods that maximize the understanding and ability to consent of vulnerable groups or members of vulnerable groups, including persons of diminished capacity to give informed consent.
- 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, and clarifying protections and limitations regarding the privacy of such persons.
- 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.

- I.36 Be particularly cautious in establishing the freedom of consent of any prospective research participant 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 select, none of which is so onerous as to be coercive.

Privacy

- I.37 Seek and collect only information that is germane to the purpose(s) for which consent has been obtained.
- I.40 Respect the moral right of research participants, employees, supervisees, students, and trainees to reasonable personal privacy, and take care not to infringe, in research, teaching, or service activities, on the personally, developmentally, or culturally defined private space of individuals or groups (e.g., couples, families, organizations, communities, peoples), unless clear permission is granted to do so.
- I.39 Collect and record only that private information necessary for the provision of continuous, coordinated or collaborative service, or for the goals of the particular research study being conducted, or that is required or justified by law. (Also see Standards IV.17 and IV.18.)
- I.i Respect the moral right of persons whose identifiable personal information is collected and recorded to access that information in the record (including obtaining copies), except as required or justified by law, and to request corrections with regard to the accuracy or completeness of the information.
- I.41 Collect, record, store, handle, and transfer all private information, whether written or unwritten (e.g., paper or electronic records, e-mail or fax communications, computer files, recordings), in a way that attends to the needs for privacy and security. This would include protection from loss or unauthorized access, appropriate education of staff or other agents, and having adequate plans in circumstances of one's own serious illness, termination of employment, or death.
- 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.)

Confidentiality

- I.43 Be careful not to relay incidental information about colleagues, team members, other collaborators, the primary clients or contract examinees of others, team members or other collaborators; research participants, employees, supervisees, students, or trainees 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.)

- I.44 Clarify what measures will be taken to protect confidentiality, and what responsibilities group members (e.g., couples, families, organizations, communities, peoples) have for the protection of each other's confidentiality, when engaged in services to or research with groups.
- I.45 Share confidential information with others only to the extent reasonably needed for the purpose of sharing, and only with the informed consent of those involved, or in a manner that the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved cannot be identified, except as required or justified by law, or in circumstances of possible imminent serious bodily harm or death. (Also see Standards II.39, IV.17, and IV.18.)

Extended responsibility

- I.46 Encourage others, in a manner consistent with this *Code*, to respect the dignity of persons and peoples, and to expect respect for their own dignity.
- 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 and Peoples, all of whom, however, incur similar obligations.

Principle II: Responsible Caring

Values Statement

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 and best interests of the individuals and groups (e.g., couples, families, groups, communities, peoples) 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 and best interests of those in the most vulnerable position. Normally, individuals and groups directly involved in their activities (e.g., as research participants, primary clients, contract examinees, students) are in such a position. Psychologists' responsibility to those indirectly involved (e.g., employers, colleagues, interdisciplinary or intradisciplinary team members, other collaborators, organizational or community leaders, government, retaining parties, third party payers, the general public) normally is secondary.

As individuals and groups (e.g., couples, families, organizations, communities, peoples) usually consider their own welfare and best interests in their decision making, obtaining informed consent (see Principle I) is one of the best methods for ensuring that their welfare and best interests 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 and best interests of the person(s) involved.

Responsible caring leads psychologists to take care to discern and balance the potential harms and benefits involved, taking into account the degree and moral legitimacy of any conflicting interests. It also leads psychologists to predict the likelihood of the occurrence of harms and benefits, 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.

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 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, 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 and groups (e.g., couples, families, organizations, communities, peoples) with 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.

Responsible caring recognizes and respects (e.g., through obtaining informed consent) the ability of individuals and groups (e.g., couples, families, organizations, communities, peoples) 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 individual's or group's opinion about what is in the best interests of another for that other individual's or group's competent decision making. However, psychologists recognize that, as

vulnerabilities increase or as power to control one's own environment or life decreases, psychologists have an increasing responsibility to protect the well-being of the individuals and groups involved. For this reason, as in Principle I, psychologists consider it their responsibility to seek ethical advice and increase safeguards proportionate to the degree of dependency and the lack of voluntary initiation on the part of the individuals and groups involved. However, for Principle II, the safeguards are for the well-being rather than for the moral rights of the individuals and groups.

Psychologists' treatment and use of non-human animals in their research and teaching activities are also a component of responsible caring. Although non-human animals do not have the same type of moral rights as human beings (e.g., to personal privacy), they do have a right to be treated humanely and not to be exposed to unnecessary discomfort, pain, or disruption.

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.

Ethical Standards

In adhering to the Principle of Responsible Caring, psychologists would:

General caring

- II.1 Protect and promote the welfare and best interests of primary clients, contract examinees, research participants, employees, supervisees, students, trainees, colleagues, team members or other collaborators, and others.
- II.2 Avoid doing harm to primary clients, contract examinees, research participants, employees, supervisees, students, trainees, colleagues, team members or other collaborators, and others.
- II.3 Accept responsibility for the consequences of their actions.
- 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.
- II.5 Make every reasonable effort to ensure that psychological knowledge is not misused, intentionally or unintentionally, to harm others.

Competence and self- knowledge

- 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.
- II.7 Not delegate activities to persons not competent to carry them out to the benefit of others.
- II.8 Take immediate steps to obtain consultation or supervision, or to refer a primary client to a colleague or other appropriate professional, whichever is more likely to result in providing the primary client with competent service, if it becomes apparent that a primary client's issues or problems are beyond their competence.

- II.9 Keep themselves up to date with a broad range of relevant knowledge, research methods, techniques, and technologies, and their impact on individuals and groups (e.g., couples, families, organizations, communities, and peoples), through the reading of relevant literature, peer consultation, and continuing education activities, in order that their practice, teaching, and research activities will benefit and not harm others.
- II.10 Evaluate how their own experiences, attitudes, culture, beliefs, values, social context, individual differences, specific training, and stresses influence their interactions with and perceptions of others, and integrate this awareness into their efforts to benefit and not harm others.
- II.11 Seek appropriate help and/or discontinue scientific, teaching, or practice activity for an appropriate period of time, if a physical or psychological condition reduces their ability to benefit and not harm others.
- 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.

Risk/benefit analysis

- II.13 Assess the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved in their activities adequately enough to ensure that they will be able to discern what will benefit and not harm them , using assessment methods that are appropriate to the particular cultural and social contexts of the individuals and groups involved.
- II.14 Be sufficiently sensitive to and knowledgeable about individual and group characteristics, culture, and vulnerabilities to discern what will benefit and not harm the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved in their activities.
- II.15 Carry out pilot studies to determine the effects of all new procedures and techniques before considering their use on a broader scale.
- II.16 Seek independent and adequate ethical review(s), by persons with relevant expertise (e.g., other researchers in the area; research ethics boards or equivalent; relevant representatives of the population being studied) of the ethical protections and the balance of risks and benefits of all research and new interventions that involve procedures of unknown consequence, or where pain, discomfort, or harm are possible, before making a decision to proceed.
- II.17 Not carry out any scientific or professional activity unless the probable benefit is proportionately greater than the risk involved.

Maximize benefit

- II.21 Strive to provide and/or obtain the best reasonably-accessible service for those seeking psychological services. This may include, but is not limited to, selecting assessment tools, methods, interventions, modalities, and technologies that: (a) are relevant and tailored to the needs, characteristics, and contexts of the primary client or contract examinee; and (b) have reasonable empirical or theoretical supported for validity and efficacy in light of those needs, characteristics, and contexts. It also may include, but is not limited to: consulting or collaborating community resources, members of other disciplines, persons relevant to the

culture or belief systems of those receiving or being subject to services; or advocating on behalf of a primary client when appropriate and needed.

- II.20 Make themselves aware of the knowledge and skills of other disciplines (e.g., law, social work, medicine, business administration), and make referrals or advise the use of such knowledge and skills where relevant to the benefit of others.
- III.15 Provide suitable information, unless declined or contraindicated (e.g., some critical inquiry studies, possibility of harm, legally disallowed), about the results of assessments, evaluations, or research findings to the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved. This information would be communicated in ways that are developmentally, linguistically, and culturally appropriate, and that are meaningful and helpful.
- II.19 Create and maintain records relating to their activities that are sufficient to support continuity and coordination over time and to manage risks.
- II.22 Monitor and evaluate the effect of their activities, record their findings, and communicate new knowledge to relevant others.
- IV.24 Consult, unless declined or contraindicated (e.g., critical inquiry studies, possibility of harm, legally disallowed) with the individuals and groups (e.g., couples, families, organizations, communities, peoples) being studied, in order to increase the accuracy of interpretation of results, to enhance the benefit of the results to the individuals and groups, and to minimize risk of misinterpretation or misuse.
- 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.)
- II.24 Perform their teaching duties on the basis of careful preparation, so that their instruction is current and scholarly.
- 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, as well as the competencies needed for their areas of activity, and by providing or arranging for adequate working conditions, timely evaluations, and constructive supervision, consultation, and experience opportunities.
- II.26 Encourage and assist students in their engagement in developmentally appropriate professional and scientific activities, including the publication of worthy student papers.

Minimize harm

- II.27 Be acutely aware of the power relationship in therapy and, therefore, not 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 decision making. (Also see Standard III.31.)
- II.28 Not encourage or engage in sexual intimacy with students, trainees, or others with whom the psychologist has an evaluative or other relationship of direct authority. (Also see Standard III.31.)

- II.29 Be careful not to engage in activities in a way that could place incidentally involved persons at risk.
- II.i. Ensure that any incidental findings of serious clinical significance (i.e., potentially requiring intervention to avoid serious harm) are communicated as soon as possible to research participants and contract examinees.
- 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 or communicating information that could lead to misinterpretation or misuse by those having access to or receiving the information; avoiding conjecture; clearly labelling opinion; and communicating information in language that can be understood clearly by the recipient of the information.
- II.31 Give reasonable assistance to secure needed psychological services or activities, if personally unable to meet requests for needed psychological services or activities.
- II.32 Provide a primary client, if appropriate and if desired by the primary client, with reasonable assistance to find a way to receive needed services in the event that third party payments are exhausted and the primary client cannot afford the fees involved.
- II.33 Maintain appropriate contact, support, and responsibility for caring until a colleague or other professional begins service, if referring a primary client to a colleague or other professional.
- II.34 Give reasonable notice and be reasonably assured that discontinuation will cause no harm to the primary client, before discontinuing services.
- II.ii. Establish suitable procedures for responding to emergencies, including procedures for situations in which they are unavailable due to illness, absence, death, or technology failure.
- II.35 Screen research participants and select those least likely to be harmed, if more than minimal risk of harm to some research participants is possible.
- II.36 Act to minimize the impact of their research activities on research participants' behavioural patterns, or on their physical or mental integrity.

Offset/correct harm

- 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.
- II.38 Refuse to help individuals and groups (e.g., couples, families, organizations, communities, peoples) to carry out or to submit to activities that, according to current knowledge, or legal or professional guidelines, would cause serious physical or psychological harm to themselves or others.
- II.39 Do everything reasonably possible to stop or offset the consequences of actions by others when these actions are likely to cause imminent serious bodily harm or death to themselves or others. 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.)

- 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. 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 or offset the harm, and would be consistent with the confidentiality rights and limitations of the persons involved. (See Standards I.45 and IV.17.)
- 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. 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). Any action taken would be consistent with the confidentiality rights and limitations of the persons involved. (See Standards I.45 and IV.17.)
- 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 punish or seek punishment for those who raise such concerns in good faith.
- II.43 Not place individuals or groups (e.g., couples, families, organizations, communities, peoples) 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.)

Care of non-human animals

- II.45 Not use non-human 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 in benefits to the health and welfare of humans or other animals.
- II.iii Keep themselves up to date with non-human animal care legislation, guidelines, and best practices, if using non-human animals in research or teaching.
- II.46 Use a procedure subjecting non-human 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.
- II.iv Submit any research that includes procedures that subject non-human animals to pain, stress, or privation to an appropriate review panel or committee for review.
- II.47 Make every effort to minimize the discomfort, illness, and pain of non-human animals. This would include using appropriate anaesthesia, analgesia, tranquilization and/or adjunctive relief measures sufficient to prevent or alleviate non-human animal discomfort, pain, or distress, when using a procedure or condition likely to cause more than short-term, low-intensity suffering. It also would include, if killing non-human animals at the termination of

a research study, doing so as humanely and painlessly as possible.

- II.48 Use non-human animals in classroom demonstrations only if the instructional objectives cannot be achieved through the use of electronic recordings, films, computer simulations or other methods, and if the type of demonstration is warranted by the anticipated instructional gain.

Extended responsibility

- II.49 Encourage others, in a manner consistent with this *Code*, to care responsibly.
- II.50 Assume overall responsibility for the 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.

Principle III: Integrity in Relationships

Values Statement

The relationships formed by psychologists in the course of their work, whether the relationships are in person or through various other modalities, and whether they are with identifiable individuals or groups or with the public at large, 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.

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.

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, culture, social context, and 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.

The values of openness and straightforwardness exist within the context of Respect for the Dignity of Persons and Peoples (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.

Of special concern to psychologists is the provision of incomplete disclosure when conducting research for which informed consent is required (i.e., not informing participants of something that would normally be disclosed as part of obtaining informed consent), or the use of deception (e.g., temporarily leading research participants to believe that a research project has a purpose other than its actual purpose; providing research participants with other false information). These actions sometimes occur in research where full and accurate disclosure would likely influence the responses of the research participants and thus invalidate the results. Although research that uses such techniques can lead to knowledge that is beneficial, such benefits need to be weighed against the research participant's moral right to self-determination and the importance of public and personal 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, when incomplete disclosure or deception is used.

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, social, political, financial, or business interests at the expense of the best interests of members of the public. Although avoidance of all conflicts of interest is not possible, some are of such a high risk to protecting the best 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 and acceptability of other conflicts of interest (e.g., dual or multiple relationships) might be partially dependent on cultural or geographic factors and the specific type of professional relationship (e.g., long-term psychotherapy vs. organizational consultation vs. community-oriented activities). In some situations, for instance, a dual or multiple relationship might be inevitable or culturally expected (e.g., in rural, indigenous, or immigrant communities), or could enhance the benefit of an activity. However, in all such situations, the psychologist is responsible for making an honest appraisal of the benefits and risks involved in the context of the specific situation, including determining the feasibility of alternatives in light of those risks and benefits, deciding whether to enter into or continue the relationship, establishing relationship boundaries appropriate to the work being done (e.g., availability, in-person or social-media personal disclosure, social contact), and managing the relationship (e.g., by seeking advice or establishing other safeguards) to ensure that the best interests of the member(s) of the public are protected.

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.

Ethical Standards

In adhering to the Principle of Integrity in Relationships, psychologists would:

Accuracy/honesty

- III.1 Not knowingly participate in, condone, or be associated with dishonesty, fraud, misappropriation, or misrepresentation.
- III.2 Accurately represent their own and their colleagues' qualifications (e.g., credentials, education, experience, competence, 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).
- III.3 Carefully protect their own and their colleagues' qualifications from being misrepresented by others, and act quickly to correct any such misrepresentation.
- III.4 Maintain competence in their declared area(s) of psychological competence, as well as in their current area(s) of activity. (Also see Standard II.9.)
- 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, electronic, or printed communication. This includes, but is not limited to: advertisements of services or products; public information and prevention materials; personal résumés or curricula vitae; course and workshop descriptions; academic grading requirements; and research reports.
- 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 or misappropriated by others, and act quickly to correct any such misrepresentation.

- 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.
- III.8 Acknowledge the limitations, and not suppress disconfirming evidence, of their own and their colleagues' methods, findings, interventions, and views, and acknowledge alternative hypotheses and explanations.

Objectivity/lack of bias

- III.10 Evaluate how their own experiences, attitudes, culture, beliefs, values, social context, individual differences, specific training, and stresses influence their activities and thinking, integrating this awareness into their attempts to be as objective and unbiased as possible in their research, service, teaching and other activities.
- 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 undue bias in the selection and presentation of information, and publicly acknowledge any personal values or bias that influence the selection and presentation of information.
- III.13 Act quickly to clarify any distortion by a sponsor, primary client, agency (e.g., news media), or other persons, of the findings of their research.

Straightforwardness/openness

- 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, including any limitations imposed by third-party payers; relevant business policies and practices; contact information of accountability bodies; mutual concerns; mutual responsibilities; ethical responsibilities of psychologists; likely experiences; possible conflicts; possible outcomes; and expectations for processing, using, and sharing any information generated).
- III.i Establish procedures for reasonably ready access to confidential information about an individual or group in a psychological record to that individual or group when requested, unless non-access is required or justified by law (e.g., potential serious harm to a third party; potential serious harm to the physical, emotional, or mental health of the individual or group).
- III.ii Develop easy-to-follow procedures for individuals and groups to request corrections to any confidential information about them in a psychological record (e.g., inaccuracies, incompleteness, outdated); be open to making such corrections where warranted; and be open to allowing individuals and groups to file a note of disagreement with the confidential information in the record if the correction is not deemed warranted.
- III.16 Fully explain reasons for their actions to the individuals and groups (e.g., couples, families, organizations, communities, peoples) that have been affected by their actions, if appropriate and if asked.
- 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.

- 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 psychology, when making statements or when involved in public activities.
- 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.
- III.20 Submit their research, in some accurate form and within the limits of confidentiality, to persons with expertise in the research area or topic, for their comments and evaluations, prior to publication or the preparation of any final report.
- III.21 Encourage and not interfere with the free and open exchange of psychological knowledge and theory between themselves, their students, colleagues, team members and other collaborators, and the public.
- III.22 Make no attempt to conceal the status of a trainee and, if a trainee is providing direct service, ensure that the client or contract examinee is informed of that fact.

Avoidance of incomplete disclosure and deception

- III.23 Not engage in incomplete disclosure or deception in research that requires informed consent (see Standard I.20), if there are alternative procedures available, the negative effects cannot be predicted or offset, or the incomplete disclosure or deception would interfere with the 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).
- III.25 Use the minimum necessary incomplete disclosure or deception when they are used in such research.
- III.26 Debrief research participants as soon as possible after the participants' involvement when incomplete disclosure or deception is used in such research, providing clarification of the nature of the study, seeking to remove any misconceptions that might have arisen, seeking to re-establish any trust that might have been lost, and 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.)
- III.29 Give a research participant the option of removing his or her data, if the data are identifiable and the research participant expresses concern during the debriefing about the incomplete disclosure or deception, 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.
- III.30 Seek an independent and adequate ethical review of the risks to public or personal trust and of safeguards to protect such trust if planning to use incomplete disclosure or deception in any research that requires informed consent, before making a decision to proceed.

Avoidance of conflict of interest

- 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 primary clients, contract examinees, research participants, students, employers, or others. This includes, but is not limited to: soliciting primary clients, contract examinees; research participants, or students of one's employing agency for one's own activities (e.g., private practice, own research study); taking advantage of trust or dependency to encourage or engage in sexual intimacies (e.g., with primary clients or other persons or peoples not included in Standard II.27, with primary clients' or contract examinees' partners or relatives, with students or trainees not included in Standard II.28, with research participants); taking advantage of trust or dependency to frighten persons or peoples into receiving services; establishing an ongoing treatment relationship with members of one's own family, close friends, or others in a significant current or previous personal relationship with the psychologist; misappropriating others' intellectual property, including 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; entering into fee arrangements (e.g., bartering) that are clinically or culturally contraindicated; allowing the financial advantages of method or modality choices to outweigh the best interests of primary clients or contract examinees; seeking or accepting loans or investments from primary clients or contract examinees; and prejudicing others against a colleague for reasons of personal gain.
- III.32 Not offer rewards sufficient to motivate individuals or groups (e.g., couples, families, organizations, communities, peoples) 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.)
- III.33 Avoid dual or multiple relationships (e.g., with primary clients, client examinees, research participants, employees, supervisees, students, trainees) that are not justified by the nature of the activity, by cultural or geographic factors, or where there is a lack of reasonably accessible alternatives.
- III.34 Manage dual or multiple relationships or any other conflict-of-interest situation entered into in such a way that bias, lack of objectivity, and risk of exploitation or harm are minimized. This might include involving the affected party(ies) in clarification of boundaries and expectations, limiting the duration of the relationship, 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 primary client or employee about becoming a research participant).
- 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 and Peoples (Principle I) and Responsible Caring (Principle II), and take all reasonable steps to resolve the issue in such a manner.

Reliance on the discipline

- 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 moral rights or welfare of others as demonstrated in the Principles of Respect for the Dignity of Persons and Peoples, or Responsible Caring. (See Standards IV.17 and IV.18 for guidelines regarding the resolution of such conflicts.)
- III.37 Familiarize themselves with and take into account their discipline's guidelines and best

practices for their area(s) of activity, and demonstrate a commitment to maintaining the standards of their discipline.

- III.38 Seek consultation from colleagues and/or appropriate others, including advisory groups, and give due regard to their advice in arriving at a responsible decision, if faced with difficult situations.

Extended responsibility

- III.39 Encourage others, in a manner consistent with this *Code*, to relate with integrity.
- 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 of whom, however, incur similar obligations.

Principle IV: Responsibility to Society

Values Statement

Psychology functions as a discipline within the context of human society. 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.

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.

Freedom of enquiry, innovation, 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 freedom through the use of activities and methods that are consistent with ethical requirements.

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 and peoples, 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 need to decide for themselves the most appropriate and beneficial use of their time and talents to help meet this collective responsibility.

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 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.

On the other hand, if structures or policies seriously ignore or oppose the principles of respect for the dignity of persons and peoples, 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 *Code*, and advocate for appropriate change to occur as quickly as possible.

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 and collaboration with others, be self-reflective, and be open to external suggestions and criticisms about their work and 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 (e.g., through formative and continuing education, training, supervision, and consultation). Once again,

individual psychologists need to decide for themselves the most appropriate and beneficial use of their time and talents in helping to meet these collective responsibilities.

Ethical Standards

In adhering to the Principle of Responsibility to Society, psychologists would:

Development of knowledge

- IV.1 Contribute to the discipline of psychology and to society's understanding of itself and human beings generally, through free enquiry, innovation, and debate, and through the acquisition, transmission and expression of knowledge and ideas, unless such activities conflict with other basic ethical requirements.
- IV.2 Not interfere with, or condone interference with, free enquiry, innovation and debate, and the acquisition, transmission and expression of knowledge and ideas, that do not conflict with other basic ethical requirements.
- 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.

Beneficial activities

- IV.4 Participate in and contribute to formative and continuing education and to the professional and scientific growth of self, colleagues, collaborators, and the members of other disciplines as appropriate.
- 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.
- IV.6 Participate in the discipline's process of critical self-evaluation of its 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.
- IV.7 Provide and/or contribute to a work or team environment that supports the respectful expression of ethical concern or dissent, and the constructive resolution of such concern or dissent.
- IV.8 Engage in regular monitoring, assessment, and reporting (e.g., through peer review; in program reviews, case management reviews, and reports of one's own research) of their ethical practices and safeguards.
- IV.9 Help develop, promote, and participate in accountability processes and procedures related to their work, including continuous improvement activities, program or sector accreditation activities, and registration with appropriate licensing or certification bodies.
- IV.10 Uphold the discipline's responsibility to society by promoting and maintaining the highest standards of the discipline.

- 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.
- 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.
- 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.
- IV.14 Enter into or continue with only those agreements or contracts that allow them to act in accordance with the ethical principles and standards of this *Code*.

Respect for society

- IV.15 Acquire an adequate knowledge of the culture, social structure, customs, and laws or policies of organizations, communities, and peoples before beginning any major work there, obtaining guidance from appropriate members of the organization, community, or people as needed.
- IV.16 In their scientific and professional activities, convey respect for and abide by prevailing mores, social customs, and cultural expectations of organizations, communities, and peoples, provided that this does not contravene any of the ethical principles of this *Code*.
- 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 (e.g., mandatory reporting, research regulations, jurisdictional licensing or certification requirements), 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, physical harm), decision for final action would be considered a matter of personal conscience.
- IV.18 Consult with colleagues or appropriate others, including advisory groups, 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 it out.

Development of society

- 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 and cultural issues through relevant

reading, peer consultation, and continuing education, if their work is related to societal issues.

- IV.22 Speak out, in a manner consistent with the four principles of this *Code*, if they possess expert knowledge that bears on important societal issues being studied or discussed.
- 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.
- 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.
- 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., encouraging manipulation of vulnerable individuals, couples, families, organizations, communities, or peoples; reinforcing unjust discrimination against any specific population).
- IV.27 Not promote, contribute to, nor engage in any activity that contravenes international human rights or humanitarian law (e.g., declarations, treaties, or conventions regarding: human rights; torture and other cruel, inhumane, or degrading treatment or punishment; economic, social and cultural rights; civil and political rights; rights of indigenous peoples; children's rights; weapons of mass destruction; destruction of the environment).
- IV.28 Provide appropriate individuals and groups (e.g., couples, families, organizations, communities, peoples) with any psychological knowledge relevant to their informed participation in the shaping of social policies and structures, if the psychologist possesses expert knowledge that bears on the social policies and structures.
- IV.29 Speak out and/or act, in a manner consistent with the four principles of this *Code*, 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 *Code*.

Extended responsibility

- IV.30 Encourage others, in a manner consistent with this Code, to exercise responsibility to society.
- 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.