

Chapter 1

ETHICS IN SCHOOL PSYCHOLOGY : AN INTRODUCTION

In the late 1970s, the American Association for the Advancement of Science (AAAS) conducted a study of the ethical concerns of its affiliated societies (Chalk, Frankel, & Chafer, 1980). Haas, Malouf, and Mayerson (1986, p. 316) summarized the AAAS findings as follows:

Recent years have been marked by a rise in professional consciousness about ethical and legal responsibilities and by a concurrent rise in public consciousness about legal rights. The result, in part, is a level of concern (and confusion) about proper professional behavior that is unprecedented in all professions and is particularly evident in psychology .

Because the decisions made by school psychologists have an impact on human lives, and thereby on society , the practice of school psychology rests on the public's trust. School psychologists—both practitioners and trainers—have shared in the rising concerns about proper professional conduct.

QUALITY CONTROL IN SCHOOL PSYCHOLOGY

A number of sources of quality control are available in the provision of school psychological services. Ethical codes and professional standards for the delivery of psychological services are discussed in this chapter . Chapter 2 provides an introduction to law that protects the rights of students and their parents in the school setting. Educational law provides a second source of quality assurance. Chapter 2 also addresses the credentialing of school psychologists, a third mechanism of quality control. Credentialing helps to ensure that psychologists meet specified qualifications before they are granted a legal sanction to practice (Fagan & Wise, 2000). Training-program accreditation is an additional mechanism of quality control. Program accreditation helps to ensure the adequate preparation of school

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psychologists during their graduate coursework and field experiences. (For a discussion of training-program accreditation, see Fagan & Wise, 2000.)

This chapter focuses on the what and why of professional ethics, ethics training and competencies, and the ethical codes and professional standards of the National Association of School Psychologists (NASP) and the American Psychological Association (APA). Four broad ethical principles are introduced, along with an ethical-legal, decision-making model. We also describe ethics committees and sanctions for unethical conduct.

WHAT AND WHY OF PROFESSIONAL ETHICS

The term *ethics* generally refers to a system of principles of conduct that guide the behavior of an individual. Ethics derives from the Greek word *ethos*, meaning character or custom, and the phrase *ta ethika*, which Plato and Aristotle used to describe their studies of Greek values and ideals (Solomon, 1984). Accordingly, ethics is first

of all a concern for individual character, including what we blandly call “being a good person,” but it is also a concern for the overall character of an entire society, which is still appropriately called its “ethos.” Ethics is participation in, and an understanding of, an ethos, the effort to understand the social rules which govern and limit our behavior. (p. 5)

A system of ethics develops in the context of a particular society or culture and is connected closely to social customs. Ethics is composed of a range of acceptable (or unacceptable) social and personal behaviors, from rules of etiquette to more basic rules of society.

The terms *ethics* and *morality* are often used interchangeably. However, according to philosophers, the term *morality* refers to a subset of ethical rules of special importance. Solomon (1984) suggests that moral principles are “the most basic and inviolable rules of a society.” Moral rules are thought to differ from other aspects of ethics in that they are more important, fundamental, universal, rational, and objective (pp. 6–7). W. D. Ross (1930), a twentieth-century English philosopher, identified a number of moral duties of the ethical person: *nonmaleficence*, *fidelity*, *beneficence*, *justice*, and *autonomy*. These moral principles have provided a foundation for the ethical codes of psychologists and other professionals (Bersoff & Koepl, 1993).

Our focus here is on *applied professional ethics*, the application of broad ethical principles and specific rules to the problems that arise in professional practice (Beauchamp & Childress, 2001). Applied ethics in school psychology is, thus, a combination of ethical principles and rules, ranging

from more basic rules to rules of professional etiquette, that guide the conduct of the practitioner in his or her professional interactions with others.

Professionalism and Ethics

Professionalization has been described as

the process by which an occupation, usually on the basis of a claim to special competence and a concern for the quality of its work and benefits to society, obtains the exclusive right to perform a particular kind of work, to control training criteria and access to the profession, and to determine and evaluate the way the work is to be performed. (Chalk et al., 1980, p. 3)

Professional associations or societies function to promote the profession by publicizing the services offered, safeguarding the rights of professionals, attaining benefits for its members, facilitating the exchange of and development of knowledge, and promoting standards to enhance the quality of professional work by its members (Chalk et al., 1980).

Codes of ethics appear to develop out of the self-interests of the profession and a genuine commitment to protect the interests of persons served. Most professional associations have recognized the need to balance self-interests against concern for the welfare of the consumer. Ethical codes are one mechanism to help ensure that members of a profession will deal justly with the public (Bersoff & Koepl, 1993; Koocher & Keith-Spiegel, 1998).

However, the development of a code of ethics also serves to foster the profession's self-interests. A code of ethics is an indicator of the profession's willingness to accept responsibility for defining appropriate conduct and a commitment to self-regulation of members by the profession (Chalk et al., 1980). The adoption of a code of ethics often has been viewed as the hallmark of a profession's maturity. Ethical codes thus may serve to enhance the prestige of a profession and reduce the perceived need for external regulation and control.

The field of psychology has shown a long-standing commitment to activities that support and encourage appropriate professional conduct. As will be seen in this chapter, both NASP and APA have developed and adopted codes of ethics. These codes are drafted by committees within professional organizations and reflect the beliefs of association members about what constitutes appropriate professional conduct. They serve to protect the public by sensitizing professionals to the ethical aspects of service delivery, educating practitioners about the parameters of appropriate conduct, and helping professionals to monitor their own behavior. They also provide guidelines for adjudicating complaints (Koocher & Keith-Spiegel, 1998). By encouraging appropriate professional conduct, associations such as NASP and APA strive to ensure that each person served will receive the

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highest quality of professional service and, therefore, build and maintain public trust in psychologists and psychology.

Ethical Codes versus Ethical Conduct

Codes of ethics serve to protect the public. However, ethical conduct is not synonymous with simple conformity to a set of rules outlined in professional codes and standards (J. N. Hughes, 1986). As Kitchener (1986) and others (Bersoff, 1994; J. N. Hughes, 1986; Koocher & Keith-Spiegel, 1998) have noted, codes of ethics are imperfect guides to behavior for several reasons. First, ethical codes in psychology are composed of broad, abstract principles along with a number of more specific statements about appropriate professional conduct. They are at times vague and ambiguous (Bersoff, 1994; J. N. Hughes, 1986).

Second, competing ethical principles often apply in a particular situation (Bersoff & Koepl, 1993; Haas & Malouf, 1989), and specific ethical guidelines may conflict with federal or state law (Kitchener, 1986; Koocher & Keith-Spiegel, 1998). In some situations, a primary or overriding consideration can be identified in choosing a course of action (Haas & Malouf, 1989). In other situations, however, no one principle involved clearly outweighs the other (Haas & Malouf, 1989). For example, the decision to allow a minor child the freedom to choose (or refuse) to participate in psychological services often involves a consideration of law, ethical principles (client autonomy and self-determination versus the welfare of the client), and the likely practical consequences of affording choices (e.g., enhanced treatment outcomes versus refusal of treatment).

A third reason ethical codes are imperfect is because they tend to be reactive. They frequently fail to address new and emerging ethical issues (Bersoff & Koepl, 1993; Eberlein, 1987). Committees within professional associations often are formed to study the ways existing codes relate to emerging issues, and codes may be revised in response to new ethical concerns. Concern about the ethics of behavior modification techniques was a focus of the 1970s; in the 1980s, psychologists scrutinized the ethics of computerized psychodiagnostic assessment. In the 1990s, changes in ethical codes reflected concerns about sexual harassment and fair treatment of individuals, regardless of their sexual orientation. In recent years, codes have emphasized the need for practitioner competence in the delivery of services to individuals from diverse linguistic and cultural backgrounds. Codes also have been scrutinized to ensure relevance to the use of electronic media.

Ethical codes thus provide guidance for the professional in his or her decision making. Ethical conduct, however, involves careful choices based on knowledge of codes and standards, ethical reasoning, and personal values. In many situations, more than one course of action is acceptable. In some situations, no course of action is completely satisfactory. In all situa-

tions, the responsibility for ethical conduct rests with the individual practitioner (Eberlein, 1987; Haas et al., 1986; Koocher & Keith-Spiegel, 1998).

ETHICS TRAINING AND COMPETENCIES

Prior to the late 1970s, many applied psychology graduate programs (clinical, school) required little formal coursework in professional ethics. Ethics was often taught in the context of supervised practica and internship experiences, a practice Handelsman (1986b, p. 371) labeled, “ethics training by ‘osmosis.’” Handelsman (1986a, 1986b) and others have argued persuasively that a number of problems exist with this unsystematic approach to ethics training. Student learning is limited by the supervisor’s awareness and knowledge of ethical issues (Dalton, 1984) and the range of issues that arise by chance in the course of supervision (Handelsman, 1986a). Results of a survey of practicing psychotherapists found that respondents gave only moderate ratings to their internship experience as a source of ethics education (Haas et al., 1986).

It is now generally recognized that ethical thinking and problem solving are skills that need to be explicitly taught as a part of graduate coursework (Haas et al., 1986; Handelsman, 1986a, 1986b; Tryon, 2001; Tymchuk, 1985). Both NASP and APA currently require formal coursework in ethics as a component of graduate training.

In the 1980s, psychology trainers began to ask, “What should be the goals of ethics education in psychology?” (Haas et al., 1986; Kitchener, 1986); “What are the desired cognitive, affective, and behavioral ‘ethics competencies’ for school psychologists?”; and “How should ethics be taught?” More recently, Handelsman and Gottlieb (2005, p. 59) asked, “How do students develop a sense of themselves as ethical professionals?” A number of goals for ethics training have been suggested in the literature. An emerging picture of desired competencies includes the following:

- Competent practitioners are sensitive to “the ethical components of their work” and are aware that their actions “have real ethical consequences that can potentially harm as well as help others” (Kitchener, 1986, p. 307; also Rest, 1984; Welfel & Kitchener, 1992).
- Competent psychologists have a sound working knowledge of the content of ethical codes, professional standards, and law pertinent to the delivery of services (Fine & Ulrich, 1988; Welfel & Lipsitz, 1984).
- Competent practitioners are committed to a proactive rather than a reactive stance in ethical thinking and conduct (Tymchuk, 1986). They use their broad knowledge of ethical codes, professional standards, and law along with ethical reasoning skills to anticipate and prevent problems from arising.

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- Skilled practitioners are able to analyze the ethical dimensions of a situation and demonstrate a well-developed “ability to reason about ethical issues” (Kitchener, 1986, p. 307). They have mastered and make use of a problem-solving model (de las Fuentes & Willmuth, 2005; Tymchuk, 1981, 1986).
- Competent practitioners recognize that ethics develop in the context of a specific culture, and they are sensitive to the ways their own values and standards for behavior may be similar to or different from individuals from other cultural groups. They are aware of their personal values and feelings and the role of their feelings and values in ethical decision making (Corey, Callanan, & Corey, 2002; Kitchener, 1986).
- Competent practitioners appreciate the complexity of ethical decisions and are tolerant of ambiguity and uncertainty. They acknowledge and accept that there may be more than one appropriate course of action (de las Fuentes & Willmuth, 2005; Kitchener, 1986).
- Competent practitioners have the personal strength to act on decisions made and accept responsibility for their actions (de las Fuentes & Willmuth, 2005; Kitchener, 1986).

How should ethics be taught? There is a growing consensus that ethics education needs to be taught as part of a planned, multilevel approach that includes formal coursework along with supervised discussion of ethical issues in practica and internship settings (Conoley & Sullivan, 2002; Fine & Ulrich, 1988; Meara, Schmidt, & Day, 1996). Formal coursework provides opportunities to introduce the student to broad ethical principles, professional codes, and a decision-making model in a systematic manner (Eberlein, 1987; Fine & Ulrich, 1988; Handelsman, 1986a; Tryon, 2001; Tymchuk, 1986). Jacob-Timm (1998) and others (e.g., Tryon, 2000) recommend that students complete coursework in ethics early in their course of study so they will be prepared to engage in discussions of ethical issues throughout their training program. Tryon (2000, p. 278) recommends that all graduate faculty engage students in discussions of ethical issues related to their specialty area so that “students learn that ethical decision making is an active, ongoing activity that applies to almost everything psychologists do.” As Conoley and Sullivan (2002, p. 135) note, however, “The actual formation of ethical practice occurs . . . during intense practice. Internship is, therefore, a prime time to develop ethical frameworks that will be useful throughout a professional career.” Practica and internship supervisors consequently have a special obligation to model sound ethical decision making and to monitor, assist, and support supervisees as they first encounter real-world ethical challenges (Conoley & Sullivan, 2002; Handelsman & Gottlieb, 2005; Williams, Mennuti, & Burdsall, 2002).

Handelsman and Gottlieb (2005) describe ethics training of psychology graduate students as a dynamic, multiphase acculturation process. They suggest that psychology, as a discipline and profession, has its own culture that encompasses aspirational ethical principles, ethical rules, professional standards, and values. Students develop their own “professional ethical identity” based on a process that optimally results in an adaptive integration of personal moral values and the ethics culture of the profession. Trainees who do not yet have a well-developed personal sense of morality, and those who do not understand and accept critical aspects of the ethics culture of psychology, may have difficulty making good ethical choices as psychologists.

Methods of ethics training include instruction in ethical problem solving, analysis of case incidents, and role-playing difficult situations (Gawthrop & Uhlemann, 1992; Kitchener, 1986; Plante, 1995). These methods provide a means to enhance sensitivity to ethical issues and encourage development of ethical reasoning skills. Handelsman and Gottlieb (2005) suggest that students be asked to write an *ethics autobiography* or *ethnogram* in their ethics course and perhaps again later in the training program. The purpose of these activities is to encourage students to think about their own values and those of their family and culture of origin and reflect on what it means to be an ethical professional (p. 63). Such activities may help students appreciate the unique characteristics of professional versus personal relationships and assist them in an adaptive acculturation of the ethics of the profession.

Only a few empirical investigations of the effectiveness of formal ethics training have appeared in the literature (Tryon, 2001; Welfel, 1992). Tryon surveyed 233 school psychology doctoral students from 18 APA-accredited programs regarding their perceived level of preparation to deal with 12 ethical issues and their level of concern about handling those issues. Students who had taken an ethics course and those who had completed more years of graduate study felt better prepared to deal with the ethical issues presented than those who had not taken an ethics course and who had completed fewer years of graduate education. Student ratings of their preparedness to deal with the issues presented in the survey were positively associated with the number of hours of supervised practicum experience completed. Baldick (1980) found that clinical and counseling interns who received formal ethics training were better able to identify ethical issues than interns without prior coursework in ethics. Gawthrop and Uhlemann (1992) found that undergraduate students who received specific instruction in ethical problem solving demonstrated higher quality decision making in response to a case vignette than students who did not receive the training.

Several studies, however, have reported a gap between knowledge of the appropriate course of action and willingness to carry out that action

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(Bernard & Jara, 1986; Smith, McGuire, Abbott, & Blau, 1991; Tryon, 2000). Even when practitioners can identify what ought to be done, many would choose to do less than they believe they should (Bernard & Jara, 1986). Thus, at this time, additional research is needed to identify the types of ethics training that are most effective in developing ethical sensitivity and reasoning and in encouraging appropriate professional conduct (Handelsman & Gottlieb, 2005; Nagle, 1987; Tymchuk, 1985; Welfel, 1992).

ETHICAL CODES AND PROFESSIONAL STANDARDS

D. T. Brown (1979) suggests that school psychology emerged as an identifiable profession in the 1950s. Two professional associations, APA and NASP, have shaped the development of the profession. Within APA, Division 16 is the Division of School Psychology.¹ Each organization has formulated its own ethical code, professional standards for the delivery of services, and standards for training programs.

APA and NASP Codes of Ethics

In joining APA or NASP, members agree to abide by the association's ethical principles. Additionally, psychologists who are members of the National School Psychologist Certification System and those who are members of state associations affiliated with NASP are bound to abide by NASP's code of ethics. We believe school psychology practitioners should be thoroughly familiar with NASP's (2000a) "Principles for Professional Ethics" and "Guidelines for the Provision of School Psychological Services" and APA's (2002) "Ethical Principles of Psychologists and Code of Conduct," whether or not they are members of a professional association. A psychologist with a broad knowledge base of ethical principles may be better prepared to make sound choices when ethically challenging situations arise. Furthermore, regardless of association membership or level of training, trainees and practitioners may be expected to know and abide by both the APA and NASP ethics codes in their work setting (R. Flanagan, Miller, & Jacob, 2005).

Professional codes of ethics apply "only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. . . . These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics

¹For information about the history of APA's Division 16 and NASP and their policies and orientations, see Fagan and Wise (2000, chap. 2).

Code” (APA, 2002, Introduction and Applicability; NASP-PPE, III, D, #1). The boundaries between professional and personal behaviors are sometimes “fuzzy,” however (Pipes, Holstein, & Aguirre, 2005, p. 332). For example, when a psychologist engages in socially undesirable behavior in a public setting (e.g., a psychologist is verbally abusive of the referee at a high school football game), the behavior may negatively impact his or her credibility, diminish trust in school psychologists, and confuse students and others who hear about or witness the event. Pipes et al. consequently encourage psychologists to aspire to high standards of ethical conduct in their personal, as well as professional, lives. They also recommend that practitioners think critically about the boundaries between personal and professional relationships and take care to identify when they are speaking “as a matter of personal opinion as opposed to speaking as experts” (p. 329).

NASP’s “Principles for Professional Ethics”

“Principles for Professional Ethics” (NASP-PPE) was first adopted by the NASP in 1974 and revised in 1984, 1992, 1997, and 2000 (NASP, 2000a; see Appendix A). The NASP’s ethical principles were developed to provide guidelines specifically for school psychologists employed in the schools or in independent practice. The NASP’s code focuses on protecting the well-being of the student/client. It also prescribes conduct to protect the rights and welfare of parents, teachers, other consumers of school psychological services, trainees, and interns.

The NASP’s “Principles for Professional Ethics” provides guidelines in the following areas: professional competence; professional relationships with students, parents, the school, the community, other professionals, trainees, and interns; advocacy of the rights and welfare of the student/client; professional responsibilities in assessment and intervention; reporting data and sharing results; use of materials and technology; research, publication, and presentation; and professional responsibilities related to independent practice.

APA’s “Ethical Principles of Psychologists and Code of Conduct”

The “Ethical Standards of Psychologists” was first adopted by the APA in 1953. Eight revisions of APA’s code of ethics were published between 1959 and 1992. The current version, “Ethical Principles of Psychologists and Code of Conduct” (EP), was adopted in 2002. (See Appendix B.) The APA’s EP differs from NASP’s “Principles for Professional Ethics” in that it was developed for psychologists with training in diverse specialty areas (e.g., clinical, industrial-organizational, school) and who work in a number

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of different settings (private practice, industry, hospitals and clinics, public schools, university teaching, and research).

The “Ethical Principles of Psychologists and Code of Conduct” consists of the following sections: Introduction and Applicability, Preamble, General Principles, and Ethical Standards. The General Principles section includes five broadly worded *aspirational* goals to be considered by psychologists in ethical decision making, and the Ethical Standards section sets forth *enforceable rules for conduct*. General Principle A, Beneficence and Nonmaleficence, means that psychologists engage in professional actions that are likely to benefit others, or at least do no harm. In accordance with this principle, school psychologists have an obligation to consider the rights and welfare of those they interact with professionally. In their professional decision making, psychologists must strive to safeguard the well-being of multiple parties, including children, parents, and teachers (R. Flanagan et al., 2005).

Principle B is Fidelity and Responsibility. Consistent with this principle, school psychologists build and maintain trust by being aware of and honoring their professional responsibilities to clients and the community. Principle C, Integrity, obligates school psychologists to be open and honest in their professional interactions and faithful to the truth and to guard against unclear or unwise commitments. In accordance with Principle D, Justice, school psychologists seek to ensure that all persons have access to and can benefit from what school psychology has to offer and strive for fairness and nondiscrimination in the provision of services. Principle E, Respect for People’s Rights and Dignity, encourages school psychologists to respect the worth of all people and their rights to privacy, confidentiality, autonomy, and self-determination. Psychologists have an obligation to safeguard the rights of those who cannot make autonomous decisions (e.g., minor clients; R. Flanagan et al., 2005).

The APA’s Ethical Standards (enforceable rules for conduct) are organized into six general sections: Resolving Ethical Issues, Competence, Human Relations, Privacy and Confidentiality, Advertising and Other Public Statements, and Record Keeping and Fees. These are followed by four sections on Education and Training, Research and Publication, Assessment, and Therapy (APA, 2002). (For additional information on APA’s 2002 Ethics Code, see Fisher, 2003; R. Flanagan et al., 2005; Knapp & VandeCreek, 2006.)

Professional Guidelines for Service Delivery

Both organizations have developed a set of guidelines for the delivery of school psychological services. The NASP’s “Guidelines for the Provision of School Psychological Services” was developed in 1978 and revised in 1984, 1992, 1997, and 2000. (See Appendix C.) The APA’s “Specialty Guidelines for the Delivery of Services by School Psychologists” was adopted in 1981.

Professional guidelines for the delivery of school psychological services differ from ethical codes in both scope and intent. The guidelines represent a consensus among practitioners and trainers about the roles and duties of school psychologists, desirable conditions for the effective delivery of services, the components of a comprehensive psychological services delivery system, and the nature of competent practice. The guidelines can be used to inform practitioners, students, trainers, administrators, policy makers, and consumers about the nature and scope of appropriate and desirable services. The NASP and the APA seek to ensure that members abide by their respective ethical codes and investigate and adjudicate code violations. In contrast, professional guidelines provide a model of excellence in the delivery of quality comprehensive school psychological services, and it is recognized that not all school psychologists or all school psychological service units will be able to meet every identified standard.

School psychologists also should be familiar with the *Standards for Educational and Psychological Testing (Standards)* developed by a committee of members from the American Educational Research Association, American Psychological Association, and the National Council on Measurement in Education (1999). As will be seen in Chapter 4, the *Standards* provide criteria for psychologists and educators to use “for the evaluation of tests, testing practices, and the effects of test use” (p. 2).

We believe school practitioners also should be familiar with APA’s (1993a) “Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and Culturally Diverse Populations.” In addition, APA’s Division 16 developed and published “Providing Psychological Services to Racially, Ethnically, Culturally, and Linguistically Diverse Individuals in the Schools” (Rogers et al., 1999), a list of recommendations for competent practice in the delivery of school psychological services to culturally diverse clientele. The APA’s Division 44 (Committee on Lesbian, Gay, and Bisexual Concerns, 2000) published “Guidelines for Psychotherapy with Lesbian, Gay, and Bisexual Clients,” which provides information and references that may be helpful for practitioners who work with sexual minority youth and sexual minority parents.

FOUR BROAD ETHICAL PRINCIPLES

This portion of the chapter provides an introduction to some of the ethical issues associated with the delivery of school psychological services. As noted earlier, codes of ethics are composed of broad principles along with more specific rule statements. A number of writers have identified general principles that provide the foundation for ethical choices in psychology (e.g., Bersoff & Koeppel, 1993; Fine & Ulrich, 1988; Kitchener, 1986; Prilleltensky, 1997). Our thinking about ethical principles was influenced by

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the content and organization of “A Canadian Code of Ethics for Psychologists” (Canadian Psychological Association [CPA], 2000; Eberlein, 1987; Sinclair, 1998). We have organized our introduction to ethical issues in terms of the following themes or broad principles: (a) Respect for the Dignity of Persons, (b) Responsible Caring (Professional Competence and Responsibility), (c) Integrity in Professional Relationships, and (d) Responsibility to Community and Society. An overriding principle underlying all ethical choices is a commitment to promoting the welfare of individuals and the welfare of society (CPA, 2000).

This book is primarily based on principle-based ethics. We encourage readers to think about the spirit and intent of broad ethical principles outlined in this section and to enhance their understanding of ethics by becoming familiar with other philosophical systems (see Knapp & Vande-Creek, 2006).

Respect for the Dignity of Persons

Psychologists “accept as fundamental the principle of respect for the dignity of persons” (CPA, 2000; also see EP Principle E). School psychologists “are committed to the application of their professional expertise for the purpose of promoting improvement in the quality of life for children, their families, and the school community. This objective is pursued in ways that protect the dignity and rights of those involved” (NASP-PPE, III, A, #1). Concern for protecting the rights and welfare of children is “the top priority in determining services” (NASP-PPE, IV, A, #3). However, practitioners also strive to protect the rights of parents, teachers, other recipients of services, and trainees and interns (NASP-PPE, IV, A, #1).

The general principle of respect for the dignity of persons encompasses respect for the client’s right to *self-determination and autonomy, privacy and confidentiality*, and *fairness and nondiscrimination*.

Self-Determination and Autonomy

In providing services, practitioners respect the client’s right to self-determination and autonomy. To the maximum extent feasible, school psychologists respect the client’s right of choice to enter, or to participate, in services voluntarily (NASP-PPE, III, B, #3). Except for emergency situations, client decisions to participate in services are based on informed consent about the nature of services offered (EP 3.10; NASP-PPE, III, A, #3, B, #2, C, #2, #3, #4).

Respect for the client’s right to self-determination and autonomy poses special problems when working with children. As will be seen in Chapter 3, school psychologists must seek the informed consent of parents to provide

services to children who are minors. But what of the child's right to self-determination and autonomy—that is, to make choices about whether to participate in the services offered? “A Canadian Code of Ethics for Psychologists” (CPA, 2000) specifically addresses the issue of developmentally appropriate rights to self-determination and autonomy. This code attempts to balance the rights of self-determination and autonomy against concerns for the welfare of the child and advises the psychologist to “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” (1.35; also see EP 3.10).

Sam Foster (Case 1.1) is ethically obligated to discontinue his data collection because participation in the research promises no direct benefit to the child. As will be seen in Chapter 10, he is further obligated to ensure that there are no harmful aftereffects to the child from her brief but upsetting experience as a study participant.

Case 1.1

Sam Foster obtained permission from the school board to gather the data for his PsyD research project in the school district where he is an intern school psychologist. His study explores young children's feelings toward family members (mother, father, siblings) in the 1st year following divorce. Sam has located just enough families willing to participate in his study to ensure an adequate sample size. On the last day of data collection, he asks a 7-year-old study participant to express her feelings toward family members by giving messages to dolls that represent members of her family. She begins the task, but soon becomes visibly upset and asks to return to her classroom. Sam is uncertain whether to coax her to continue the data collection.

Privacy and Confidentiality

Psychologists respect the privacy of pupil/clients and others; every effort is made to avoid undue invasion of privacy (EP Principle E; NASP-PPE, III, B, #1). School psychology practitioners do not seek or store personal information that is not needed in the provision of services to the client (EP 4.04).

Practitioners also use appropriate safeguards to protect the *confidentiality* of client disclosures. They inform clients about the limits of confidentiality at the onset of offering services. In situations in which confidentiality is promised or implied, school psychologists ensure that the release of information is based on consent of the client. Only in unusual circumstances,

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such as when disclosure is necessary to protect the client or others from harm, is confidential information released without client consent (EP 4.01, 4.02, 4.05; also NASP-PPE, III, A, #9, #10, #11). (See Chapter 3 for an in-depth discussion of these issues.)

Fairness and Nondiscrimination

Respect for the dignity of persons also encompasses the obligation of professionals to ensure fairness and nondiscrimination in the provision of services. School psychologists “are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups” (EP Principle E; also see NASP-PPE, III, A, #2). They “try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices” (EP Principle E; also see APA, 1993a; EP 3.01, 3.03; NASP-PPE, III, A, D, #3).

The practitioner’s obligation to students from diverse cultural and experiential backgrounds goes beyond striving to be impartial and unprejudiced in the delivery of services. Practitioners have an ethical responsibility to actively pursue awareness and knowledge of how cultural and experiential factors may influence a student’s development, behavior, and school learning and to pursue the skills needed to promote the mental health and education of diverse students. Ignoring or minimizing the importance of characteristics such as race, ethnicity, sexual orientation, or socioeconomic background may result in approaches that are ineffective and a disservice to children, parents, teachers, and other recipients of services (N. D. Hansen, Pepitone-Arreola-Rockwell, & Greene, 2000; Lopez & Rogers, 2001; Rogers et al., 1999).

In addition to striving for fairness and nondiscrimination in the provision of services, school psychologists seek to ensure that all persons have access to and can benefit from what school psychology has to offer (EP Principle D, Justice).

Responsible Caring (Professional Competence and Responsibility)

A shared theme in ethical codes of the helping professions is that of *beneficence*. Beneficence, or *responsible caring*, means that psychologists engage in actions that are likely to benefit others, or at least do no harm (CPA, 2000; Kitchener, 1986; Welfel & Kitchener, 1992; also EP Principle A; NASP-PPE, III, A, #1). To do this, psychologists must practice *within the boundaries of their competence, use the science of psychology to help student/clients and others make informed choices, and accept responsibility* for their actions.

Competence

School psychologists provide services “with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study or professional experience” (EP 2.01; also see NASP-PPE, II, A, #1). Practitioners must consider their competence to provide various types of services, to use techniques that are new to them, and to provide services in light of the client’s characteristics, such as age; disability; ethnic, racial, and language background; and sexual orientation.

School practitioners have a responsibility to self-determine the boundaries of their competence. They are aware of their limitations and “enlist the assistance of other specialists in a supervisory, consultative or referral roles as appropriate in providing services” (NASP-PPE, II, A, #1). Carrie Johnson (Case 1.2) needs to seek assistance in evaluating Melissa to ensure a fair and valid assessment. Psychologists who step beyond their competence in assessing children place the pupil at risk for misdiagnosis, misclassification, miseducation, and possible psychological harm (see Chapter 4).

Case 1.2

Carrie Johnson, a school psychologist in a rural district, received a referral to evaluate Melissa Gardner, a 4-year-old. Melissa receives special education and related services because she is hearing-impaired; now her parents and teachers have begun to suspect she has learning and emotional problems as well. Carrie has no formal training or supervised experience working with hearing-impaired preschoolers, and she is uncertain how to proceed with the referral.

In the years ahead, the public school population will become increasingly diverse in terms of race, color, ethnicity, religion, and national origin (Aponte & Crouch, 2000). In addition, gay, lesbian, and bisexual youth are disclosing their sexual orientation at earlier ages than previous generations; some now “come out” during their high school years (D’Augelli, 1998). Consequently, it has become increasingly important for all practitioners to assess their competence to provide services to a diverse clientele and to seek the knowledge necessary to provide culturally sensitive services in the schools where they work. Where understanding of age, gender, gender identity, race, ethnicity, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of services, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except for emergency situations in which there is no more qualified professional available (EP 2.01).

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Because awareness of and respect for cultural, individual, and role differences is critical to ethical practice across the school psychologist's many roles, a list of suggested competencies for providing services to today's diverse school population and resources to enhance competence appears in Appendix D.

School psychologists are obligated to renew and update their skills to maintain an acceptable level of professional competence. They recognize the need for continued learning and pursue opportunities to engage in continuing professional development. They "remain current regarding developments in research, training, and professional practices that benefit children, families, and schools" (NASP-PPE, II, A, #4; also see EP 2.03).

Responsibility

In all areas of service delivery, school psychologists strive to maximize benefit and avoid doing harm. Consistent with the principle of responsible caring, psychologists use the science of psychology to assist student/clients, parents, teachers, and others in making informed choices (EP, Preamble; also NASP-PPE, IV, C, #1-b, #4). In addition, practitioners accept responsibility for their actions and the consequences of their actions and work to offset any harmful consequences of decisions made (EP Principle B; NASP-PPE, IV, C, #6).

Integrity in Professional Relationships

A psychologist-client relationship is a *fiduciary* relationship, that is, one based on trust. To build and maintain trust, practitioners must demonstrate integrity in professional relationships. The broad principle of integrity encompasses the moral obligations of fidelity, nonmaleficence, and beneficence. *Fidelity* refers to a continuing faithfulness to the truth and to one's professional duties (Bersoff & Koeppel, 1993). Practitioners are obligated to be open and honest in their interactions with others and to adhere to their professional promises (CPA, 2000; EP Principle B).

Consistent with the broad principle of integrity in professional relationships, school psychologists should inform students/clients of all relevant aspects of the potential professional relationship prior to beginning psychological services of any type (NASP-PPE, III, A, #5, B, #2, C, #1, E, #3). They strive to be accurate and straightforward about the nature and scope of their services. Case 1.3 illustrates the importance of openly defining the parameters of the services to be offered in the school setting. Madeleine has become Hannah's consultee in this consultant-consultee relationship. Hannah is bound by the obligation and expectation that what is shared and learned in their professional interaction is confidential; she may not share information about her consultee with the principal without Madeleine's explicit consent to do so.

Case 1.3

Madeleine Fine, a new first-grade teacher, asks Hannah Cook, the school psychologist, for some ideas in handling Kevin, a child who has become a behavior problem in the classroom. After observing in the classroom, it is evident to Hannah that Madeleine needs some help working with Kevin and developing effective classroom management strategies. Hannah offers to meet with Madeleine once a week over a 6-week period to work on classroom management skills, and Madeleine agrees. Shortly after their third consultation session, the building principal asks Hannah for her assessment of Madeleine's teaching competence. The principal indicates she plans to terminate Madeleine during her probationary period if there are problems with her teaching effectiveness. Hannah is not sure how to respond to the principal's request.

In defining their job roles to the school community, school psychologists are obligated to identify the services they provide and those that are outside the scope of their job roles (NASP-PPE, III, E, IV, B, #3; EP Principle C). It is the job role of the building principal, not the school psychologist, to gather information on teacher effectiveness. If Hannah violates the confidentiality of the consultative relationship and shares information about Madeleine's teaching with the school administration, her actions would most likely undermine teacher trust in school psychologists and diminish her ability to work with other teachers in need of consultative services. The ethical issues associated with the consultation role are discussed further in Chapters 8 and 9.

The general principle of integrity in professional relationships also suggests that psychologists must be honest and straightforward about the boundaries of their competencies. Competence levels, education, training, and experience are accurately represented to clients and others in a professional manner (NASP-PPE, II, A, #2, IV, F, #3; EP Principle C). School psychology interns and practicum students identify themselves as such prior to the initiation of services. Practitioners inform clients when the service they are offering is new to them so that the client can make an informed choice about whether to accept the service. Carrie Johnson (Case 1.2) is obligated to inform her supervisor and Melissa's parents that she has little expertise in the assessment of hearing-impaired preschoolers so that a course of action can be pursued that is in the best interests of the child.

Practitioners also respect and understand the areas of competence of other professionals in their work setting and community, and they work in full cooperation with other professional disciplines to meet the needs of students (NASP-PPE, III, E, #1, #2, #4; EP Principle B). They "encourage

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and support the use of all resources to best serve the interests of students and clients” (NASP-PPE, III, E, #2).

In addition, the principle of integrity in professional relationships suggests that school psychologists must avoid multiple relationships and conflicts of interest that may interfere with professional effectiveness. Multiple relationships occur when a psychologist is in a professional role with a client and at the same time is in another role with that person, or in a relationship with a person closely associated with or related to the client. Standard 3.05a of the APA Ethics Code states that a psychologist should refrain from entering into a multiple relationship if it can “reasonably be expected to impair the psychologist’s objectivity, competence, or effectiveness” in providing services. For example, it would not be appropriate to provide services to a friend’s child. However, APA’s Code recognizes that multiple relationships are not always unethical. School psychologists must think carefully about whether the existence of multiple roles (professional, social, business) in relation to a student/client or his or her family will impair professional objectivity or effectiveness (R. Flanagan et al., 2005).

Practitioners also avoid conflicts of interests. When the practitioner’s own interests (personal, legal, financial) might impair his or her professional effectiveness, the school psychologist informs all concerned persons of relevant issues in advance (NASP-PPE, III, A, #5; EP Principle C, 3.06). When applicable, psychologists notify their direct supervisor about multiple relationships or conflicts of interest that may influence professional relationships so that reassignment of responsibilities can be considered (NASP-PPE, III, A, #5). If unanticipated conflicts nevertheless arise, they attempt to resolve such situations “in a manner which is mutually beneficial and protects the rights of all parties involved” (NASP-PPE, III, A, #4, #7; also EP Principle B).

Furthermore, school psychologists “do not exploit clients through professional relationships nor condone these actions in their colleagues” (NASP-PPE, III, A, #6). They do not expose any individuals, including students, clients, employees, colleagues, and research participants, to deliberate comments, gestures, or physical contacts of a sexual nature. School psychologists “do not engage in sexual relationships with their students, supervisees, trainees, or past or present clients” (NASP-PPE, III, A, #6; also EP 3.02, 3.08).

Psychologists also do not take credit for work that is not their own (NASP-PPE, IV, F, #7; EP Principle C). When publishing or making professional presentations, school psychologists acknowledge the sources of their ideas (NASP-PPE, IV, F, #7; also see EP 8.11). They acknowledge both published and unpublished material that influenced the development of the manuscript or presentation materials. Furthermore, psychologists take credit “only for work they have actually performed or to which they have contributed” (EP 8.12).

Responsibility to Community and Society

“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 neighborhood or city, and to the welfare of all human beings in those societies” (CPA, 2000, Principle IV; also see EP Principle B; NASP-PPE, III, A, #1). As Prilleltensky (1991, p. 200) has suggested, “School psychologists have a moral responsibility to promote not only the well-being of their clients but also of the environments where their clients function and develop.”

Charlie’s conduct (Case 1.4) is consistent with our ethical responsibility to speak up for the needs and rights of students even when it is difficult to do so (NASP-PPE, I). School psychologists are obligated ethically to help ensure that gay, lesbian, and bisexual youth can attend school, learn, and develop their personal identity in an environment free from discrimination, harassment, violence, and abuse (NASP, 1999). Through advocacy and education of staff and students, Charlie will work to foster a school climate that promotes not only understanding and acceptance of, but also a respect for the valuing of individual differences.

Case 1.4

After several incidents of harassment of gay students, Charlie Maxwell, school psychologist, became increasingly convinced that the schools in his district were not a safe or supportive place for sexual minority youth. He began to read about the developmental needs and challenges of gay, lesbian, and questioning youth; he spent time talking with gay teens about their experiences at school and then formed alliances with school and community leaders who shared his concerns. Although he will face much criticism, Charlie will advocate for districtwide changes to reduce harassment and improve the school climate for sexual minority youth.

In keeping with our responsibilities to the societies in which we live and work, school psychologists know and respect federal and state law and school policies (NASP-PPE, III, D, #5; see “Relationship between Ethics and Law,” this chapter). Also consistent with the principle of responsibility to community and society, school psychologists monitor their own conduct to ensure that it conforms to high ethical standards, and they monitor the conduct of their professional colleagues. Self and peer monitoring for ethical compliance safeguards the welfare of others and fosters public trust in psychology. If concerns about unethical conduct by another psychologist cannot be resolved informally, practitioners take further action appropriate

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to the situation, such as notifying the practitioner's work site supervisor of their concerns or filing a complaint with a professional ethics committee (NASP-PPE, III, A, #8; also EP 1.04, 1.05). (See "Unethical Conduct," later in this chapter.)

Finally, psychologists accept the obligation to contribute to the knowledge base of psychology and education to further improve services to children, families, and others and, in a more general sense, promote human welfare (CPA, 2000, Principle IV; EP Principle B).

Summary

In this section, four broad ethical principles were introduced. The first was respect for the dignity of persons. Consistent with this principle, we value client autonomy and safeguard the client's right to self-determination, respect client privacy and the confidentiality of disclosures, and are committed to fairness and nondiscrimination in interactions with the client and others. The second broad principle was responsible caring. We engage in actions that are likely to benefit others. To do so, we work within the boundaries of our professional competence and accept responsibility for our actions. The third principle was integrity in professional relationships. We are candid and honest about the nature and scope of the services we offer and work in cooperation with other professionals to meet the needs of children in the schools. The fourth principle was responsibility to community and society. We recognize that our profession exists within the context of society and work to ensure that the science of psychology is used to promote human welfare.

ETHICAL AND LEGAL DECISION MAKING

In this portion of the chapter, we address the following questions: What makes a situation ethically challenging? When the needs and rights of multiple clients conflict, is our primary responsibility to the pupil, parent, teacher, or school system? How do we evaluate whether a course of action is ethical? How can we make good choices when ethical-legal dilemmas arise?

What Makes a Situation Ethically Challenging?

Jacob-Timm (1999) surveyed school psychology practitioners and asked them to describe ethically challenging situations they had encountered in their work. Most of the incidents described by practitioners concerned difficult situations rather than clear-cut violations of the specific rules for professional conduct outlined in professional codes of ethics. Ethical tugs were created by situations involving competing ethical principles, conflicts

between ethics and law, dilemmas inherent in the dual roles of employee and pupil advocate, conflicting interests of multiple clients (e.g., pupil, parents, classmates), and poor educational practices resulting in potential harm to students (also see Humphreys, 2000). These findings support the view that, in addition to knowledge of the content of ethical codes, skill in using a systematic decision-making procedure is needed.

Relationship between Ethics and Law

As noted previously, *professional ethics* is a combination of broad ethical principles and rules that guide the conduct of a practitioner in his or her professional interactions with others. *Law* is a body of rules of conduct prescribed by the state that has binding legal force. Both APA and NASP codes of ethics require practitioners to know and respect the law (NASP-PPE, III, D, #5; EP Introduction and Applicability). Professional codes of ethics are generally viewed as requiring decisions that are “more correct or more stringent” than required by law (Ballantine, 1979, p. 636). APA’s Ethics Code states that if the Code “establishes a higher standard of conduct than is required by law, psychologists must meet that higher ethical standard” (EP Introduction and Applicability; also NASP Introduction).

In the delivery of school psychological services, practitioners may face decisions involving conflicts between ethics codes and law. If the ethical responsibilities of psychologists conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to their code of ethics and take steps to resolve the conflict in a responsible manner (NASP-PPE, III, D, #5; EP 1.02). The APA Ethics Code states, “If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority *in keeping with basic principles of human rights*” (EP 1.02, emphasis added). In unusual circumstances, a practitioner may decide that obeying the law will result in a violation of basic principles of human rights. If he or she believes it is necessary to disobey the law to safeguard fundamental human rights, the practitioner should seek legal advice (APA Committee on Professional Practice and Standards, 2003).

The Ethical Challenge of Multiple Clients

School psychologists frequently face the challenge of considering the needs and rights of multiple clients, including children, parents, teachers, and systems (Humphreys, 2000; Jacob-Timm, 1999; NASP-PPE, IV, A, #1). The Canadian Code of Ethics states, “Although psychologists have a responsibility to respect the dignity of all persons with whom they come in contact in their role as psychologists, the nature of their contract with society demands that their greatest responsibility be to those persons in the

most vulnerable position” (Principle I). Consistent with this view that ethical priority should be given to the most vulnerable persons, NASP’s code of ethics states, “School psychologists consider children and other clients to be their primary responsibility, acting as advocates of their rights and welfare. If conflicts of interest between clients are present, the school psychologist supports conclusions that are in the best interest of the child” (NASP-PPE, IV, A, #2; also see EP Principle E).

How Do We Evaluate Whether a Course of Action Is Ethical or Unethical?

Ethics involves “making decisions of a moral nature about people and their interactions in society” (Kitchener, 1986, p. 306). Individuals may make choices of a moral nature primarily on an intuitive level or a critical-evaluative level (Hare, 1981; Kitchener, 1986). Choices made on the intuitive level are based on “people’s immediate feeling responses to situations,” along with personal beliefs about what they should or should not do (Kitchener, 1986, p. 309).

Psychologists, however, have special obligations when making ethical choices in the context of a professional relationship (Haas & Malouf, 1989). In the provision of psychological services, decision making on a critical-evaluative level is consistent with sound professional practice. The critical-evaluative level of ethical decision making involves following a systematic procedure. This procedure may involve the exploration of feelings and beliefs, but also includes consideration of general ethical principles and codes of ethics and possibly consultation with colleagues. Psychologists need to be aware of their own feelings and values and how they may influence their decisions (N. D. Hansen & Goldberg, 1999; Newman, 1993). However, reliance on feelings and intuition alone in professional decision making may result in poor decisions or confusion (Corey et al., 2002; Kitchener, 1986).

How do we evaluate whether a course of action is ethical or unethical? Haas and Malouf (1989, pp. 2–3) suggest that an act or decision is likely to be viewed as ethical if it has the following characteristics: (a) The decision is *principled*, based on generally accepted ethical principles; (b) the action is a *reasoned* outcome of a consideration of the principles; and (c) the decision is *universalizable*, that is, the psychologist would recommend the same course of action to others in a similar situation. The consequences of the course of action chosen must also be considered—namely, will the action chosen result in more good than harm? Evaluation of whether a course of action is ethical thus involves consideration of characteristics of the decision itself (i.e., based on accepted principles, universality), the process of decision making (i.e., reasoned), and the consequences of the decision.

Knapp and VandeCreek (2006) have called for a greater emphasis on *positive ethics* in choosing a course of action. A positive approach to ethics

encourages psychologists to focus on moral excellence rather than meeting minimal obligations outlined in codes of ethics. Psychologists are encouraged to become familiar with philosophical systems of ethics, to create their own schemas for moral excellence, and to integrate personal schemas of moral excellence into their professional decision making.

Eight-Step Problem-Solving Model

Sinclair (1998, p. 171) observed that “some ethical decision making is virtually automatic and the individual may not be aware of having made an ethical decision. In other situations, ethical decision making is not automatic but leads rapidly to an easy resolution,” particularly if a clear-cut standard exists. However, “some ethical issues . . . require a time-consuming process of deliberation” (p. 171).

Beauchamp and Childress (2001, p. 10) define a moral dilemma as “circumstances in which moral obligations demand or appear to demand that a person adopt each of two (or more) alternative actions, yet the person cannot perform all the required alternatives.” Eberlein (1987) and others (Kitchener, 1986; Knapp & VandeCreek, 2006; Tymchuk, 1986) suggest that mastery of an explicit decision-making model or procedure may help the practitioner make informed, well-reasoned choices when dilemmas arise in professional practice. Tymchuk has also noted that, in difficult situations, the course of action chosen may be challenged. Use of a systematic problem-solving strategy will allow the practitioner to describe *how* a decision was made. This may afford some protection when difficult decisions come under the scrutiny of others. Furthermore, practitioners may find a systematic decision-making model helpful in anticipating and preventing problems from occurring (Sinclair, 1998).

The following eight-step problem-solving model is adapted from Koocher and Keith-Spiegel (1998, pp. 12–15):

1. Describe the parameters of the situation.
2. Define the potential ethical-legal issues involved.
3. Consult ethical and legal guidelines and district policies that might apply to the resolution of each issue (N. D. Hansen & Goldberg, 1999). Consider the broad ethical principles as well as specific mandates involved (N. D. Hansen & Goldberg, 1999; Kitchener, 1986).
4. Evaluate the rights, responsibilities, and welfare of all affected parties (e.g., pupil, teachers, classmates, other school staff, parents, siblings). N. D. Hansen and Goldberg (1999) encourage consideration of the cultural characteristics of affected parties that may be salient to the decision.
5. Generate a list of alternative decisions possible for each issue.

6. Enumerate the consequences of making each decision. Evaluate the short-term, ongoing, and long-term consequences of each possible decision (Tymchuk, 1986). Consider the possible psychological, social, and economic costs to affected parties. Eberlein (1987, p. 353) advises consideration of how each possible course of action would “affect the dignity of and the responsible caring for all of the people involved.” Consultation with colleagues may be helpful.
7. Present any evidence that the various consequences or benefits resulting from each decision will actually occur (i.e., a risk-benefit analysis).
8. Make the decision. Consistent with codes of ethics (APA, NASP), school psychologists accept responsibility for the decision made and monitor the consequences of the course of action chosen.

In recent years, a number of ethical decision-making models have appeared in the literature. Although many appear useful, it is important to recognize that, to date, it has not been established that the use of a decision-making model necessarily improves the quality of practitioner choices. Furthermore, researchers have yet to explore the relative effectiveness of various models (Cottone & Claus, 2000).

UNETHICAL CONDUCT

As noted previously, one of the functions of professional associations is to develop and promote standards to enhance the quality of work by its members (Chalk et al., 1980). By encouraging appropriate professional conduct, associations such as APA and NASP strive to ensure that each person served will receive the highest quality of service and, thus, build and maintain public trust in psychology and psychologists. Failure to do so is likely to result in increased external regulation of the profession.

Appropriate professional conduct is defined through the development and frequent revision of codes of ethics and professional standards.

But the presence of a set of ethical principles or rules of conduct is only part, albeit an important one, of the machinery needed to effect self-regulation. The impact of a profession's ethical principles or rules on its members' behavior may be negligible . . . without appropriate support activities to encourage proper professional conduct, or the means to detect and investigate possible violations, and to impose sanctions on violators. (Chalk et al., 1980, p. 2)

The APA and NASP support a range of activities designed to educate and sensitize practitioners to the parameters of appropriate professional conduct. Both include ethics coursework as a required component in their

standards for graduate training, and each organization disseminates information on professional conduct through publications and the support of symposia.

The APA and NASP also each support a standing ethics committee. Ethics committees are made up of volunteer members of the professional association. Ethics committees respond to informal inquiries about ethical issues, investigate complaints about possible code of ethics violations by association members, and impose sanctions on violators.

Ethics Committees and Sanctions

APA (2001) has developed an extensive set of “Rules and Procedures” for investigation and adjudication of ethical complaints against Association members. According to the “Rules and Procedures,” the primary objectives of the Ethics Committee are to “maintain ethical conduct by psychologists at the highest professional level, to educate psychologists concerning ethical standards, [and] to endeavor to protect the public against harmful conduct by psychologists” (Part I, #1). The Ethics Committee investigates complaints alleging violation of the Ethics Code by APA members. Possible sanctions for ethics violations include issue of an educative letter, reprimand or censure, expulsion, and stipulated resignation (APA, 2001).

The purpose of NASP’s Ethical and Professional Practices Committee is: “(1) to promote and maintain ethical conduct by school psychologists, (2) to educate school psychologists regarding NASP ethical standards, and (3) to protect the general well-being of consumers of school psychological services” (NASP, 2005a, I, A). The NASP’s Ethics Committee responds to questions regarding appropriate professional practices and is committed to resolving concerns informally, if possible. The Committee investigates alleged ethical misconduct of NASP members or any psychologist who holds a National Certificate in School Psychology (I, C). If, after investigation, the Committee determines a violation of NASP “Principles for Professional Ethics” has occurred, the Committee may require the respondent to engage in remedial activities such as education or training and to provide restitution or apology. The Committee also may recommend probation, suspension, or termination of NASP membership, and/or revocation of the NCSP.

The legality of ethical complaint adjudication was tested in court in the case of *Marshall v. American Psychological Association* (1987). The plaintiff in this case claimed that APA had no legal right to expel him or to publicize his expulsion from the association following an investigation of ethical misconduct. The court upheld the authority of APA to expel the plaintiff, noting that he agreed to be bound by APA’s ethical principles when he joined the association, that the principles were repeatedly published, and that he had detailed hearing rights to respond to any and all charges.

In recent years, there has been a tendency for respondents in ethical complaints to file lawsuits against members of the Ethics Committee. For this reason, many state associations no longer have adjudication procedures and take an exclusively educative approach, leaving adjudication up to the national association.

Complaints to Ethics Committees

APA's Ethics Committee periodically publishes an analysis of its actions in the *American Psychologist*. In 2004, there were approximately 246 inquiries regarding members, 69 complaints against members, and 19 new preliminary cases opened, the lowest level of activity since 1983. Complaints were filed against fewer than 1 member per 1,000. Based on categorization of the underlying behaviors (rather than the basis for processing the case), problem areas were sexual misconduct, insurance and fees, nonsexual dual relationships, and practicing outside of competence (APA, 2005).

During June 2004 to 2005, NASP's Ethical and Professional Practices Committee received more than 30 inquiries, investigated two complaints, and initiated one investigation of unethical conduct after criminal charges were filed against an Association member because of alleged sexual misconduct with a minor. Inquiries over the past several years have concerned confidentiality and privileged communication, providing psychological services to a family member, destruction of student psychological records and test protocols, modification of psychological reports by supervisors without the permission of the report creator, testing without parent permission, working with students in a crisis situation without parent permission, sexual relationships between psychology professors and their students, conflicts of interest, slander, testifying in court, plagiarism, and failure to provide informed consent for research, among others (C. DiMartino, personal communication, June 6, 2005; M. Forcade, personal communication, September 10, 2001).

Reasons for Unethical Conduct

According to Koocher and Keith-Spiegel (1998), no one profile describes psychologists who become ethics violators. Ethics violations may occur because the psychologist is unaware of the parameters of appropriate conduct or not competent to provide the services being offered. This may occur because the psychologist is poorly trained, is inexperienced, or fails to maintain up-to-date knowledge. Violations also may occur when a psychologist who usually works within the parameters of appropriate practice fails to think through a situation carefully. Some psychologists suffer from emotional problems or situational stressors that impair professional judgment and performance. Some practitioners lack sensitivity to the

needs and rights of others; others may engage in unethical conduct because they are irresponsible or vengeful. Finally, a few psychologists (fortunately only a few) are self-serving and knowingly put their needs before those of their clients.

Peer Monitoring

Both APA and NASP require members to monitor the ethical conduct of their professional colleagues (EP Principle B; NASP-PPE, III, A, #8). Both associations support attempts to resolve concerns informally before filing a complaint. The NASP's code states that practitioners should "attempt to resolve suspected detrimental or unethical practices on an informal level" (NASP-PPE, III, A, #8; also see EP 1.04). They "make every effort to discuss the ethical principles with other professionals who may be in violation" (NASP-PPE, III, A, #8). Psychologists document specific instances of suspected violations as well as attempts to resolve such violations (NASP-PPE, III, A, #8).

If, however, an apparent ethical violation cannot be resolved informally, psychologists take further action appropriate to the situation, such as referral to a professional ethics committee, state licensing board, or appropriate institutional authorities (EP 1.05). If a decision is made to file an ethics complaint, "the appropriate professional organization is contacted for assistance, and procedures established for questioning ethical practice are followed" (NASP-PPE, III, A, #8). Practitioners "enter this process thoughtfully and with the concern for the well-being of all parties involved" (NASP-PPE, III, A, #8; also see EP 1.07).

Although most practitioners are aware of their obligation to report unethical practices if the situation cannot be resolved informally, many are reluctant to do so (Pope, Tabachnick, & Keith-Spiegel, 1987). In her study of students' beliefs about their preparation to deal with ethical issues, Tryon (2001) found that fewer than half of the advanced students in school psychology doctoral programs (5th year and beyond) believed they were prepared to deal with ethical violations by colleagues. Koocher and Keith-Spiegel (1998) provide a helpful list of hints for engaging in informal peer monitoring.

CONCLUDING COMMENTS

Students and practitioners often complain that codes of ethics are bothersome to read, a confusing and boring list of "shoulds" and "should-nots." Wonderly (1989) suggests, however, that codes of ethics in psychology are not so overwhelming if we remember their primary purpose, namely, to protect the public. Professionals do not have *rights* under a code of ethics,

only *obligations*. We will be exploring those obligations in more detail in the chapters ahead.

STUDY AND DISCUSSION

Questions for Chapter 1

1. What are the sources of “quality control” in the provision of school psychological services?
2. What does the term *ethics* mean?
3. What does the term *applied professional ethics* mean?
4. Why do professional groups, such as school psychologists, develop a code of ethics?
5. Summarize the desired ethics competencies of school psychology practitioners.
6. Why are codes of ethics imperfect guides to behavior?
7. Summarize the broad ethical principles discussed in Chapter 1.
8. How do you evaluate whether a course of action is ethical?
9. What are some of the reasons for unethical conduct?
10. What are your responsibilities with regard to peer monitoring?

Discussion

You and a fellow student (a friend) are placed at the same school for your first practicum experience. You are aware that she is a problem drinker, but thus far, she has been able to conceal her problem from the program faculty. You discover that your fellow student drinks before coming to practicum, and you have observed some erratic behavior and poor judgment at the practicum site. What should you do? What will you do? Why? (Adapted from Bernard & Jara, 1986; see also Betan & Stanton, 1999.)

VIGNETTES

Eberlein (1987) and others have suggested that mastery of an explicit decision-making model or procedure may help the practitioner make well-reasoned ethical choices when difficult situations arise in professional practice. In this chapter, we introduced an eight-step problem-solving model adapted from Koocher and Keith-Spiegel (1998). The incidents that follow are included to provide an opportunity to practice the problem-solving model. At first, use of a decision-making model may seem quite cumbersome. However, it is important for practitioners to re-

member that ethical decision making “applies to almost everything psychologists do,” and, over time, if practiced regularly, it is likely to become almost automatic (Tryon, 2000, p. 278).

In the situations described, assume the role of the school psychologist and then follow a decision-making model to determine the course of action most appropriate. Compare your decisions with those of colleagues or fellow students.

1. A few months after Carrie Johnson was hired as the school psychologist in a rural school district, the district superintendent of schools asked to meet with her. During this meeting, he said, “You’ll be working closely with the principal at Pine Lake. Rumor has it he drinks a lot on the job. He’s been caught twice and fined for driving while intoxicated. I think he’s nuts, and we’ve got to get rid of him. Keep notes on what he says and does. I want a report later.” How should Carrie handle this situation? (Vignette source unknown.)

2. After a series of devastating floods destroyed homes and schools in a nearby community, many Native American families moved into Carrie Johnson’s school district. Carrie began receiving referrals from a number of teachers because the Native American children were having difficulty coping with the loss of their homes and adjusting to their new school and community. Carrie had no experience working with Native American children and their families, or with those who had suffered such losses. How should Carrie handle the referrals for assessment and counseling of the Native American pupils now attending her school?

3. As part of her effort to build a strong working relationship with school staff and community members, Hannah Cook joined the Parent-Teacher Association (PTA) and regularly attends their meetings. During a public meeting of the PTA, a parent openly complains about the treatment her daughter is receiving in a world history class at a school where Hannah is the psychologist. The parent contends that the history teacher lacks mental stability and consequently is causing her child much anguish. How should Hannah handle this situation? (Adapted from Bailey, 1980.)

4. Michelle Phillips was born with Sanfilippo syndrome, a genetic disorder that results in progressive neurological deterioration and limited life expectancy. No effective treatment for the disorder exists. Wanda Rose, a school psychologist, has worked with the Phillips family since Michelle was diagnosed 6 years ago, and she has formed a warm working relationship with them. Michelle is now in the third and final phase of the disorder. She is severely mentally impaired, unable to communicate, and

unable to sit or walk without support. She has difficulty swallowing and chokes frequently.

Mr. and Mrs. Phillips have made an appointment with Wanda. They believe Michelle is experiencing much pain and suffering. Although they want all comfort care to continue for their daughter, they do not want medical interventions that would prolong her life. They have brought along DNR orders (do not resuscitate, do not institute basic choking rescue) from Michelle's physician, and they would like Wanda's help in ensuring that the orders will be honored at school. How should Wanda respond to this situation? (See Rushton, Will, & Murray, 1994.)

ACTIVITIES

To learn more about APA and NASP, visit their web sites: <http://www.apa.org> and <http://www.nasponline.org>.