

# APA's New Ethics Code: An Update for Psychologists

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Taking effect June 1, 2003, the ninth revision of the APA Ethics Code (APA 2002) since 1953 reflects evolving societal standards, advances in our understanding of mental health issues and their treatment, expansion of professional roles, and changes in how we provide services, “to guide and inspire psychologists toward the very highest ethical ideals of the profession.” The Ethics Code is applicable to all professional settings and roles, including but not limited to, “clinical, counseling, and the school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of program design and evaluation; and administration. . . researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness.” The Principles apply “across a variety of contexts, such as in person, postal, telephone, Internet, and other electronic transmissions.” Psychologists are further instructed to consider relevant laws and psychology board regulations, consult with colleagues and follow the dictates of their own consciences.

## Protecting Psychologists

Six years in development, this most recent statement of professional standards drafted by APA's Ethics Code Task Force (ECTF) is also designed to ensure that the Ethics Code is not misused or misapplied and to decrease the risk that psychologists will be punished or penalized unnecessarily. The new *Standards* advance psychologists' awareness and understanding of the competence required for providing services to diverse groups, clarify wording and introduce modifiers – *reasonable*, *appropriate*, *potential* - in an attempt to decrease the chance of misinterpretation by courts and licensing boards (Knapp & VandeCreek, 2002).

For example, the *Introduction and Applicability* section states very clearly that in contrast to the Ethical Standards, the Preamble and General

Principles are “aspirational, ““not enforceable rules,” and do not represent obligations, but should be “considered” when engaging in ethical decision making. Clearly stated is that “the Ethics Code is not intended to be a basis of civil liability. Whether a psychologist has violated the Ethics Code standards does not by itself determine whether the psychologist is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur.”

Modifiers used in the Ethics Code allow for professional judgment, eliminate injustice or inequality that would occur without the modifiers, ensure applicability across the broad range of activities conducted by psychologists, and guard against a set of rigid rules that might be quickly outdated. For example, “*Reasonable* means the prevailing professional judgment of psychologists engaged in similar activities in similar circumstances, given the knowledge the psychologist had or should have had at the time” and is designed to

- ❖ Protect psychologists who make a good faith effort to function ethically and
- ❖ Reduce efforts to misapply the Ethics Code against psychologists

## Revisions to the General Principles and Standards

The General Principles have been modified to reflect the underlying virtues on which they have been built; Beneficence, Non-maleficence, Fidelity, Autonomy, Justice, and Self-Interest (Beauchamp & Childress, 2001; Thompson, 1990). For example, Self-Interest (Self-Care) clearly advises psychologists “to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.” Added were the virtues of Responsibility, Integrity, and Respect for People's Rights and Dignity.

The *Ethical Standards* themselves have been reorganized into ten sections, each dealing with a different aspect of practice

- ❖ Resolving Ethical Issues
- ❖ Competence
- ❖ Human Relations
- ❖ Privacy and Confidentiality
- ❖ Advertising and Other Public Statements
- ❖ Record Keeping and Fees
- ❖ Education and Training
- ❖ Research and Publication
- ❖ Assessment, and Therapy

There have been numerous wording changes and many standards are now cross-referenced with other relevant standards, particularly helpful when consulting the Code to resolve an ethical dilemma. A number of new standards has been developed as well.

#### New Standards

- Sexual intimacies with current clients/patients, **and** their relatives or significant others is prohibited (Standard 10.06).
- The standards on limits of confidentiality have been updated to include all services and communications provided via all forms of electronic media (Standard 4.02 c).
- Psychologists may now be able to provide services in areas outside our competence when needed services are not otherwise available, as long as we make ongoing efforts to obtain the competence needed (Standard 2.01 d), or during emergency situations, either until the emergency is resolved or until appropriate services become available (Standard 2.02).
- For court ordered or otherwise mandated services, psychologists must clarify the

nature of the services to be provided, any limits to confidentiality that exist, and the fact that the services are mandated (Standard 3.10 c).

- The informed consent process when providing services to and/or through organizations has been specified (Standard 3.11). Informed consent may not be required when the purpose of an evaluation is to determine decisional capacity (Standard 9.04).
- A separate standard on informed consent to therapy is included that addresses the provision of services in new areas where existing standards may not yet exist (Standard 10.01 b). Another is included for explaining roles, responsibilities, and confidentiality expectations in group therapy (Standard 10.03).
- Psychologists are now required to make advance arrangements for the protection and maintenance of records should they withdraw from a position or practice (Standard 6.02).
- Guidelines are provided for requiring the disclosure of personal information by students to faculty (Standard 7.04) and for mandatory psychotherapy as part of graduate training (Standard 7.05).
- Research that utilizes experimental treatments requires appropriate debriefing procedures to address any harm to participants (Standard 8.08 c). Sharing data for verification and replication of findings is also required (Standard 8.14).
- Standards for record reviews and supervision when not personally evaluating the individual (Standard 9.01 c), using tests

with diverse populations and using alternative languages in testing (Standard 9.02), and the appropriate use of interpreters when conducting assessments (Standard 9.03) have been developed.

- Procedures for releasing test data as well as the ability to withhold data at times when attempting to prevent harm or misrepresentation of the data to preserve patient rights (Standard 9.04) are delineated.
- It is now unethical to discriminate against complainants and respondents who have filed or are the subject of an ethics complaint (Standard 1.08).
- When a psychologist is “threatened or otherwise endangered” by a client/patient or other person associated with her or him, immediate termination is permitted (Standard 10.10 b).

Must reading for all psychologists, the new code will be published in the January 2003 *American Psychologist* and is also available on the APA website at [www.apa.org](http://www.apa.org). Another excellent resource is Knapp and VandeCreek’s *A Guide to the 2002 Revision of the American Psychological Association’s Ethics Code*, available from Professional Resource Press at [orders@prpress.com](mailto:orders@prpress.com) or 1-800-442-3364.

## References

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