

Preface

Ethics is essential to effective and moral practice in mental health. All major mental health organizations have ethics codes that help practitioners practice, undertake research and teaching, and engage in other professional functions. The leading psychological organization in this regard is the American Psychological Association (APA). It has a professional ethical code dated 2002 with minor modifications in 2010 (as certified in 2016). For the psychiatric field, the American Medical Association (AMA) published an ethics code in 2017 that applies to psychiatry. Other psychological ethics codes include that of the Canadian Psychological Association (CPA) code of 2017. At the international or universal code level, there is the Universal Declaration of Ethical Principles for Psychologists (International Union of Psychological Science, 2008). The present book attempts an integration of these various sources of mental health ethical codes in order to improve the one of the APA, in particular, and toward developing a universal mental health ethics code applicable to psychology, psychiatry, and other mental health professions.

Typically, mental health ethics codes include principles and standards. Normally, the principles are aspirational and the standards are obligatory. In reading the various sources just mentioned, I found that there was no coherent structure or theory that integrates any one list of principles in any one ethics code, which makes the task of their comparison difficult. Also, the standards in any one of the ethics codes were not necessarily inclusive such that all ethical situations were covered. Moreover, some were written in ambiguous ways that made them difficult to use in cases of presumed ethical violations. I realized that both for the principles and standards in the APA ethics code and in the other ethics codes under review, a broad critical analysis was required in order to avoid a piecemeal and partial approach to the revision process.

At the level of theory and structure for the mental health ethical principles, although this was not the original intention, I found that my own theoretical work in Young (2011, 2016a), especially its Neo-Maslovian component, with its five levels, could help in creating a viable way of rewriting the five ethical principles in the APA ethics code. As for the standards in the APA ethics code, my approach was to group them into five domains that helped reorganize them and show how they could be modified. Finally, for both the principles and the standards recommended for inclusion

in a revised APA ethics code, I suggested sub-categories, such as sub-principles and sub-domains of standards. Other contributions in this regard included presenting supplementary principles, meta-principles, and meta-domains. Also, I suggested the use of more examples to clarify the principles and the standards.

The most controversial recommendations for some readers that I have made toward revising the APA ethics code probably relate to placing science and law in their proper perspective in the code. These recommendations are found in the supplementary principles mentioned above. Other readers hopefully will agree with me that a proper mental health ethics code must consider these aspects as central to its contents. Another controversial aspect for some readers might relate to the recommendation to write each standard both at a basic level and one that is more legally informed and capture all nuances and possibilities in order to ensure better adjudication of alleged ethical violations.

To be more specific, the five proposed revised core ethical principles for the APA ethics code include (1) Life Preservation, (2) Caring Beneficence/Nonmaleficence, (3) Relational Integrity, (4) Respect for the Dignity and Rights of Persons and People, and (5) Promoting and Acting from Justice in Society. As indicated, they were partly informed by and are consistent with the Neo-Maslovian model presented in Young (2016a). The principle of Life Preservation allows for placing the torture/enhanced interrogation technique controversy at the forefront of the revised principles for the APA ethics code.

The five proposed supplementary ethical principles for the APA ethics code (Young, 2016b) include (1) Adopting a Systems Perspective (Ethics as System), (2) Adopting a Scientific Perspective (Ethics as Science/Science as Ethics), (3) Adopting a Legal and Governing Authority Perspective (Ethics and Law), (4) Abiding by Ethical Standards in Mental Health Testing and Evaluation (Ethics and Assessment Procedures), and (5) Screening and Detecting Symptom Under- and Overreporting (Ethics in Symptom/Performance Validity). The supplementary principles related to Assessment might be controversial for some readers, too. However, their emphasis is consistent with my approach that mental health ethics needs to be scientifically informed.

The five domains that serve to group the ten categories of standards in the APA ethics code include (1) Preclinical/Pre-professional Contact, (2) Clinical Contact, (3) General and Nonclinical Contact, (4) Research and Training-Teaching Contact, and (5) Professional Governing Contact. By organizing the standards this way, in terms of types of work task and client/contactee, it is more likely that the standards in any revision of the APA or other mental health ethics codes will cover all possible ethical situations that might arise.

Aside from dealing how to best conceptualize and write the principles and standards in a revised APA ethics code, the present book considers other matters related to psychological ethics. On the one hand, for example, it elaborates a new model of ethical decision making that consists of multiple phases and steps. Also, on the other hand, it elucidates concepts such as participatory ethics and relational engagement. The book concludes with vignettes that point to ethical quandaries and even issues in internal organization that the APA ethics committee should consider.



<http://www.springer.com/978-3-319-60001-7>

Revising the APA Ethics Code

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2017, XV, 307 p. 67 illus., 50 illus. in color., Hardcover

ISBN: 978-3-319-60001-7