MODULE 1: RESEARCH OVERSIGHT AND ETHICAL CONSIDERATIONS

RESEARCH OVERSIGHT AND ETHICAL CONSIDERATIONS
The shared values underlying all research are: 1) honesty, 2) accuracy, 3) efficiency and 4) objectivity.

The four basic sources for the responsible conduct of research are:
• professional codes
• government regulations
• institutional policies and
• personal convictions

1a. Professional self-regulation
• Reports and policy statements issued by the National Academy of Sciences, the American Association for the Advancement of Science, the Association of American Medical Colleges and Sigma Xi
• Guidance on responsible publications practices published in journals
• Specific comprehensive professional codes

1b. Government regulations
• The 1966 Animal Welfare Act (PL 89-544)
• The 1974 National Research Act (PL 93-348)
• The 1985 Health Research Extension Act (PL 00-158)
• HHS established OSI and OSIR (1989); ORI (1992)

ACTIVITY: Discuss timeline of milestones in research ethics

1c. Institutional policies
• Copies of institutional research policies
• Links to state and Federal policies
• Required forms and instructions for completing them
• Responsible conduct of research training programs
• Lists of key personnel

1d. Personal responsibility
[judgment; personal integrity]

ACTIVITY: Review and compare codes of ethics in the social sciences. Consider: how do the documents differ in focus; how effective do you think they are in governing practice?

American Psychological Association (http://www.apa.org/ethics/code/index.aspx)
American Sociological Association (http://www.asanet.org/printpage.cfm?page_ID=104)
Gerontological Society of American (http://www.geron.org/Membership/code-of-ethics)

Questions for Discussion
1. What factors influence researchers’ attitudes toward the responsible conduct of research?
2. How is integrity in research monitored? Is self-regulation of integrity in research effective?

Research Ethics Timeline (1932-Present)
by David B. Resnik, J.D., Ph.D.

- **1932-1972**
  The Tuskegee Syphilis Study, sponsored by the U.S. Department of Health. Studied the effects of untreated syphilis in 400 African American men. Researchers withheld treatment even when penicillin became widely available. Researchers did not tell the subjects that they were in an experiment. Most subjects who attended the Tuskegee clinic thought they were getting treatment for "bad blood."

- **1939-45**
  German scientists conduct research on concentration camp prisoners.

- **1940 O.R.**
  Two Nazi refugee scientists, Frisch and R.E. Peierls, warn the U.S. about Germany's nuclear weapons program. Albert Einstein writes a letter to Pres. Truman warning him about the Nazi threat.

- **1942-1945**
  The U.S. begins the $2 billion Manhattan Project to develop an atomic bomb.

- **1944-1980s**
  The U.S. government sponsors secret research on the effects of radiation on human beings. Subjects were not told that they were participated in the experiments. Experiments were conducted on cancer patients, pregnant women, and military personnel.

- **1945**
  The US drops two atomic bombs on Japan.

- **1945**
  Led by Pres. Eisenhower and a-bomb scientist Robert Oppenheimer, the "atoms for peace" movement begins.

- **1945**
  Vannevar Bush writes the report Science: the Endless Frontier for Roosevelt. The report argues for a major increase in government spending on science and defends the ideal of a self-governing scientific community free from significant public oversight. It promotes investment in science and technology as a means of promoting national security and economic development.

- **1947**
  The Nuremberg Code for research on human subjects is adopted. The Allies use the document in the Nuremberg Trials to convict Nazi scientists of war crimes.

- **1948**
Alfred Kinsey publishes Sexual Behavior in the Human Male; Sexual Behavior in the Human Female followed in 1953. Both of these books were very controversial. Kinsey funded the research through the Kinsey Institute.

- **1949**
  The Soviet Union tests a hydrogen bomb; the Cold War begins.

- **1953**
  James Watson and Francis Crick discover the structure of DNA, for which they eventually would share the Nobel Prize in 1962. They secretly obtained key x-ray diffraction data from Rosalind Franklin without her permission. She was not awarded a Nobel Prize because she died in 1953 from ovarian cancer (at age 37), and the prize is not awarded posthumously.

- **1956-1980**
  Saul Krugman, Joan Giles and other researchers conduct hepatitis experiments on mentally disabled children at The Willowbrook State School. They intentionally infected subjects with the disease and observed its natural progression. The experiments were approved by the New York Department of Health.

- **1950s-1963**
  The CIA begins a mind control research program, which includes administering LSD to unwitting subjects.

- **1957**
  The Soviets launch Sputnik, the first satellite, which triggers the U.S. government to increase its investments in science and technology to avoid falling behind in the space race.

- **1961**
  John F. Kennedy commits the U.S. to the goal of putting a man on the moon by the end of the decade.

- **1961**
  Rachel Carson publishes Silent Spring, which alerts people to the harmful effects on the environment of various toxins and pollutants, including DDT. Her book launches the environmentalist movement.

- **1961-1962**
  Stanley Milgram conducts his "electric shock" experiments, which proved that many people are willing to do things that they consider to be morally wrong when following the orders of an authority. He publishes Obedience to Authority in 1974.

- **1964**

- **1964**
  The U.S. Surgeon General's office issues its first of several reports on health problems related to smoking.

- **1966**
  Henry Beecher publishes an article in N. Engl. J. Med. exposing 22 unethical studies in biomedicine, including the Tuskegee syphilis study and the Willowbrook hepatitis study.
• 1960s
The Department of Defense begins to work on a project to connect its computers scattered around the U.S. at various universities and research labs. This was followed by the development of the ARPANET (1972), BITNET and USENET (1981), NSFNET (1985), the Internet (1988), and the World Wide Web (1995).

• 1960s/1970s

• 1969
The US lands the first man on the moon.

• 1972
The national media and Congress focus on unethical research practices with human subjects, including the Tuskegee study.

• 1974
Congress passes the National Research Act, which authorizes federal agencies to develop human research regulations, e.g. 45 CFR 46, 21 CFR 50,54,56.

• 1974
William Summerlin admits to fabricating data by using a marker to make black spots on white mice at Sloan Kettering Cancer Institute. He was developing a technique for transplanting skin grafts.

• 1974
Monsanto and Harvard reach a deal for the first major corporate investment in a university.

• 1975
Scientists gather at Asilomar, CA to discuss the benefits and risks of recombinant DNA research; the NIH forms the Recombinant DNA Advisory Committee.

• 1975
Peter Singer publishes Animal Liberation.

• 1975
E.O. Wilson publishes Sociobiology, which re-ignites centuries-old "nature vs. nurture" debate. His book proposes biological and evolutionary explanations of human behavior and culture.

• 1978
Louise Brown, the world's first test-tube baby, is born.

• 1979
The National Commission releases The Belmont Report, principles of ethical research on human subjects. The Report becomes a key document in human research ethics regulations in the U.S.

• 1980
Congress passes the Bayh-Dole Act, which allows researchers to patent inventions developed with government funds; the Act is amended by the Technology Transfer Act in 1986.

- **1980**
  In Diamond v. Chakrabarty the U.S. S. Ct. rules that a genetically modified bacterium can be patented because it is the product of human ingenuity. This sets a precedent for patents on other life forms and helps to establish solid intellectual property protection for the new biotechnology industry.

- **1981**
  The Whitehead Institute is established at MIT, another major private investment in a university.

- **1981**
  The DHEW conducts major revisions of the federal human research regulations on human subjects research.

- **1981**
  John Darsee, a postdoctoral fellow at Harvard, is accused of fabricating data.

- **1982**
  William Broad and Nicholas Wade publish Betrayers of Truth, claiming that there is more misconduct in science than researchers want to admit. Their book helps to launch an era of “fraud busting” in science.

- **1984-1993**
  Luc Montagnier accuses Robert Gallo misappropriating an HIV strain. Gallo is found innocent of misconduct. Gallo and Montagnier also have a dispute about who should be credited with discovering HIV and who can patent a test for the virus. The U.S. and French governments reach an agreement to settle the controversy.

- **1986**
  Roger Boisjoly warns NASA about possible O-ring failure, due to cold weather, in the space shuttle Challenger. NASA decides to go ahead with the launch, and the Challenger explodes, killing the entire crew.

- **1987**
  A NIMH panel concludes that Steven Breuning fabricated and falsified data in 24 paper. Breuning is convicted of defrauding the federal government in 1988.

- **1987**
  Martin Luther King is accused of plagiarizing his Ph.D. dissertation.

- **1987-1996**
  Margot O'Toole, a post-doctoral student at the Whitehead Institute, has some questions about a data presented in a paper authored by six of her colleagues published in the journal Cell in 1986. She asks to examine Thereza-Imanishi-Kari’s lab notebooks, which seem to be inconsistent with published results. She accuses Imanishi-Kari of fabricating or falsifying data. The ensuing investigation leads to inquiries by M.I.T. and Tufts as well as the N.I.H. and a Congressional committee chaired by Rep. John Dingell. Nobel Prize winner David Baltimore is one of the co-authors on the disputed paper. Although he was not accused of misconduct, Baltimore resigned as President of Rockefeller University. He described the investigation,
which was covered by the New York Times, as a "witch hunt." An appeals board at the DHHS eventually exonerated Imanishi-Kari, who admitted only to poor record keeping.

- **1988**
  Harvard and Dow Chemical patent a genetically engineered mouse used to study cancer.

- **1989**
  The PHS forms two agencies, the Office of Scientific Integrity and the Office of Scientific Integrity Review to investigate scientific misconduct and provide information and support for universities. It also amends its definition of misconduct. The two agencies are reorganized in 1992 as the Office of Research Integrity (ORI).

- **1989**
  The NIH requires that all graduate students on training grants receive education in responsible conduct of research.

- **1989**
  Stanley Pons and Martin Fleischmann hold a press conference at the University of Utah to announce that they have discovered a way to produce nuclear fusion at room temperatures. Dozens of labs across the world fail to reproduce their results. They are accused of fraud, sloppiness, and self-deception.

- **1989**
  The NAS publishes On Being A Scientist (revised in 1994), which is a free, short book on research ethics for scientists in training.

- **1990**
  The US launches the Human Genome Project, a $20 billion effort to map and sequence the human genome.

- **1990**
  W. French Anderson begins the first human gene therapy clinical trial on patients with ADA deficiency, a genetic disease that affects the immune system.

- **1990**
  In Moore v. Regents of the University of California, the California S. Ct. rules that researchers have intellectual property rights in a cell-line derived from Moore's tissue but that Moore did not have any property rights in his own tissue. The Court also rules that the researchers violated Moore's right to informed consent by not disclosing their commercial interests in his tissue sample to him.

- **1990**
  Congress investigates conflicts of interest involving Pharmatec and the University of Florida.

- **1990s-present**
  Europeans oppose the introduction of genetically manipulated foods and crops. Consumers in the US are more receptive to GM plants and animals. Europeans finally allow GM foods but require them to be labeled as such.

- **1991**
  Revision/unification of human research regulations. All U.S. government agencies, except the EPA, now
accept one basic regulatory framework, known as "the common rule" (45 CFR 46).

- **1992**
  NAS publishes Responsible Science: Ensuring the Integrity of the Research Process. The book estimates the incidence of misconduct, discusses some of the causes of misconduct, proposes a definition of misconduct, and recommends some strategies for preventing misconduct.

- **1993**
  In Daubert v. Merrell Dow Pharmaceuticals the US S. Ct. rules that judges serve as the gatekeepers for admitting scientific testimony in court and that they can use a variety of criteria, including testability, reliability, peer review, and general acceptance.

- **1993**
  Fertility researchers successfully clone human embryos.

- **1994**
  Harvard psychologist Richard Herrnstein and Charles Murray publish The Bell Curve, a controversial book that re-ignites the centuries old debate about biology, race and intelligence.

- **1994**
  Roger Poisson admits to fabricating and falsifying patient data in breast cancer clinical trials in order to qualify his patients to participate in research and have access to experimental treatments.

- **1994**
  The NIH applied for patents on thousands of gene fragments in order to undercut private efforts to patent gene fragments. The Patent Office rejected the NIH's applications.

- **1994-1995**
  The Ryan Commission, convened by the NIH, holds meetings on scientific misconduct.

- **1994**
  The Clinton Administration declassifies information about secret human radiation experiments conducted from the 1940s-1980s and issues an apology.

- **1994**
  Two scientists who worked at Philip Morris, Victor DeNobel and Paul Mele, testify before Congress about secret research on the addictive properties of nicotine. If the research had been made public, the FDA or Congress might have taken additional steps to regulate tobacco as a drug. Many states and individuals brought litigation against tobacco companies, which led to a $206 billion settlement between tobacco companies and 46 states. The scientific community also publishes more data on the dangers of second-hand smoke.

- **1995**
  Boots Pharmaceuticals pressures Betty Dong to withdraw a paper from publication in JAMA showing that its drug, synthroid, is not more effective than generic equivalents at treating hypothyroidism.

- **1995-2003**
  Dozens of studies are published in biomedical journals which provide data on the relationship between the
source of research funding and the outcomes of research studies, the financial interests of researchers in the biomedical sciences, and the close relationship between academic researchers and the pharmaceutical and biotechnology industries.

- **1995**
  The NIH and NSF revise their conflict of interest policies.

- **1995**
  Scientists and defenses analysts become concerned about the use of chemical or biological weapons by a terrorist group after Aum Shinrikyo, a Japanese doomsday cult, releases sarin gas in a Tokyo subway, killing 12 people and sending 5,500 to hospitals. The group also attempted (unsuccessfully) to spray anthrax spores over Tokyo. In 1998, terrorism experts warn about the use of biological or chemical weapons by Osama bin Laden and Saddam Hussein.

- **1995**
  Over 200 religious leaders, led by biotechnology critic Jeremy Rifkin, protest the patenting of plants, animals, and human body parts in Washington, DC.

- **1996**
  Dolly, the world's first cloned sheep, is born; her birth is announced in 1997. Several European nations ban human cloning. Congress considers a bill to ban all human cloning but changes its mind after scientists argue that the bill would undermine biomedical research.

- **1997**
  the ICMJE, representing over 400 biomedical journals, revises its authorship guidelines.

- **1997**
  In an article published in N. Engl. J. Med., Peter Lurie and Sidney Wolfe accuse the NIH, WHO, UN and CDC of designing unethical studies on the prevention of mother-child transmission of HIV in developing countries. The dispute spurs a reexamination of international research ethics codes.

- **1998**
  Scientists perfect methods for growing human embryonic stem cells. Some countries ban the research; others promote it.

- **1998**
  Craig Venter forms Celera Genomics and begins a private effort to sequence the human genome, using dozens of automated sequencing machines.

- **1998-1999**
  Apotex forces Nancy Olivieri, a clinical researcher at the University of Toronto, to withdraw a paper that exposes safety concerns about its drug deferiprone, which is used to treat thalassemia. The company tries to discredit Olivieri and have her fired.

- **1999**
  Jessie Gelsinger dies in a human gene therapy experiment at the University of Pennsylvania. The event triggers heightened scrutiny of conflicts of interest in human subjects research, including institutional conflicts of interest. Penn settles with the Gelsinger family for an undisclosed amount of money.
• 1999-present
   Human research lawsuits increase dramatically. Alan Milstein, from the law firm Sherman, Silverstein, Kohl, Rose & Podolsky, P.A., instigates 13 lawsuits against researchers, universities, pharmaceutical companies, and Institutional Review Board members.

• 1999
   The NIH and the OHRP require all people conducting or overseeing human subjects research have some training in research ethics.

• 2000
   The Office of Science and Technology Policy finalizes a federal definition of misconduct as "fabrication, falsification or plagiarism" but not "error honest error or differences. The policy is still not effective.

• 2000
   ORI proposes mandatory training in responsible conduct of research for all researchers on PHS grants, including junior senior investigators, students, and technicians. Several scientific associations and universities oppose the policy as an unnecessary and un-funded mandate. The Bush Administration suspends the ORI proposal in 2001 on the grounds that the agency failed to follow proper procedures for proposing new government regulations. To ORI proposal is still in limbo.

• 2001
   Celera and the Human Genome Project both complete 99% complete drafts of the human genome and publish their results in Science and Nature.

• 2001-present
   Congress debates legislation on human cloning.

• 2001
   Several journals, including Nature and JAMA, experiment with requiring authors to describe their responsibilities when publishing research.

• 2001
   The Bush Administration announces that the NIH will fund research on approximately 64 embryonic stem cell lines created from leftover human embryos.

• 2001
   Terrorists hijack 3 airplanes on September 11 and kill over 5,000 people. Several weeks later, an unknown terrorist sends 4 letters containing anthrax, killing 5 people and infecting 23.

• 2002
   Bell Labs determines that Jan Hendrick Schon, a rising star working in condensed matter physics and nanotechnology who published dozens of articles in a short period of time in prestigious journals, had committed misconduct. So far, 28 papers authored by Schon have been withdrawn.

• 2002
   The President's Council on Bioethics recommends that the U.S. ban reproductive cloning and enact a moratorium on research cloning.
2002
Historian Stephen Ambrose is accused of plagiarism.

2002

2002
Bell Labs determines that Jan Hendrick Schon, a rising star working in condensed matter physics and nanotechnology who published dozens of articles in a short period of time in prestigious journals, had committed misconduct. So far, 28 papers authored by Schon have been withdrawn.

2002
The NAS publishes Integrity in Scientific Research, which recommends that universities develop programs for education in responsible conduct of research (RCR) as well as policies and procedures to deal with research ethics.

2002
North Korea admits that it has a secret nuclear weapons program and warns that it has other "more powerful" weapons.

2002
Scientists publish several papers in prominent journals with direct implications for bioterrorism. A paper published in the Journal of Virology described a method for genetically engineering a form of mousepox virus that is much deadlier than the naturally occurring strain. A paper published in Science show how to make poliovirus by obtaining supplies from a mail-order company. In 2003, the American Society for Microbiology (ASM), the National Academy of Sciences, and the Center for Strategic and International Studies held a meeting to discuss the censorship biological research that poses security risks. Journals agree to self-censor some research.

2003
The US invades Iraq with the stated purpose of eliminating its chemical, biological, and nuclear weapons programs. So far, the US has found evidence of weapons programs but no actual weapons.

2004
The EPA suspends the CHEERS study due to criticism from advocacy groups and members of Congress, who claimed that the study was intentionally exposing children to pesticides. The EPA revised its human subjects rules in response to a Congressional mandate to strengthen protections for children and pregnant or nursing women.

2004
The NIH and other agencies adopt the OSTP misconduct definition.

2004
Ronald Reagan, Jr. makes a presentation in support of federal funding for embryonic stem cell research to the Democratic Convention. Stem cell research (and therapeutic cloning) become hot issues in the 2004 Presidential election.
2005
In response to criticism from Congress, the NIH revises its conflict of interest rules for intramural research. NIH researchers cannot hold stock in pharmaceutical or biotech companies or consult with these companies (and other affected entities) for pay.

2005
Seoul University researcher Woo Suk Hwang admits to fabricating data in two papers published in the journal Science. In the papers, Hwang claimed that he had used nuclear transfer techniques to develop patient-specific human embryonic stem cells.

2005
University of Vermont researcher Eric Poehlman admits to fabricating or falsifying data in 15 federal grants and 17 publications.

2009
Someone hacked into the email server at the University of East Anglia's Climatic Research Unit (CRU) and posted on the internet thousands of emails exchanged between climate change researchers at the CRU and researchers around the world. The emails showed that the researchers refused to share data and computer codes with climate change skeptics, who called the incident "climategate."

2009
The Obama Administration announces it will significantly expand NIH funding of human embryonic stem cell research which had been restricted under the Bush Administration.

2010
The National Science Foundation (NSF) announces RCR training requirements for funded investigators, students, and trainees. The NIH expands and strengthens its RCR training requirements.

2010
While doing research on the Tuskegee Syphilis Study, Susan Reverby, Professor of Women's Studies at Wellesley College, uncovered documents concerning unethical research experiments on human subjects conducted by the US government in Guatemala from 1946 to 1948. The research involved intentionally infecting over 1300 subjects with venereal diseases to test the effectiveness of penicillin. Only 700 subjects were given penicillin and 83 died as a result of the study. The subjects were not informed that they were participating in an experiment.

2011
The NIH and NSF revise their conflict of interest rules for funded research.

2011
The Office of Human Research Protections announces proposed changes to the Common Rule to enhance human subject protections and reduce investigator burden. The Common Rule has not been changed significantly since 1981.

2012
Two papers embroiled in controversy were published in Science and Nature after several months of debate about their implications for bioterrorism. The papers reported results of NIH-sponsored research conducted
by a team working in the Netherlands, led by Ron Fouchier, and a team working at the University of Wisconsin, led by Yoshihiro Kawaoka. The researchers were able to genetically modify an H5N1 avian flu virus so that it can be transmitted between mammals, including humans. Currently, avian flu can only be contracted through contact with birds. The virus is highly lethal, with a mortality rate of 60%. Over 300 people have died from the virus since 1997. The National Science Advisory Board for Biosecurity (NSABB) initially recommend that the papers be published in redacted form, with key details removed and only made available to responsible scientists, so the terrorists or others could not use the information to make deadly bioweapons. However, the NSABB changed its mind and recommended full publication of both papers after learning more about the value of the research for monitoring bird populations for dangerous avian flu mutations and the difficulties with redacted publication.
The Gerontological Society of America Ethics Statement

Prepared by the members of the Research, Education, and Practice Committee

This statement is a guide to professional behavior for the members of The Gerontological Society of America. As members and/or fellows of this organization, we shall act in ways consistent with the responsibilities stated below irrespective of the specific circumstances of our employment and/or other professional activity. This ethics statement applies but is not limited to our relations with research subjects, colleagues, students, employees and society at large as we carry out our aging related work.

1. To those we study we owe disclosure of our research goals, methods, and sponsorship. The participation of people in our research activities shall only be on a voluntary basis and only on research projects approved by an appropriate institutional review board. We shall provide a means through our research activities and in subsequent publications and reports to maintain the confidentiality of those we study. The people we study and their proxies must be made aware of the likely limits of confidentiality and must not be promised a greater degree of confidentiality than can be realistically expected under current legal circumstances in our respective nations. We shall, within the limits of our knowledge, disclose any significant risks or limits of possible benefits to those we study.

2. To the individuals, families and communities ultimately affected by our activities we owe our respect for their dignity, integrity, and worth. We will avoid taking or recommending action on behalf of a sponsor which is harmful to individuals and groups we study and/or serve.

3. To our colleagues we have the responsibility to avoid engaging in actions that impede their reasonable professional activities. Among other things, this means that while respecting the needs, responsibilities, and legitimate proprietary interests of our sponsors we should not impede the flow of information about research outcomes and professional practice techniques. We shall accurately attribute the contributions of colleagues in our work. We shall not condone falsification or distortion by others. We shall not prejudice communities or agencies against a colleague for reasons of personal gain.

4. To our students, interns, and trainees, we owe nondiscriminatory access to education and training. We shall provide education and training that is informed, accurate, and relevant to the needs of our students and relevant to the needs of the larger society. We recognize the need to responsibly advise and mentor our students and to conscientiously supervise their academic and professional development. We have an obligation to inform students of their ethical responsibilities. We recognize the need for continuing education in order to improve and expand our skills and knowledge in substantive and pedagogical areas. Student contributions to our professional activities, including research and publication will be appropriately recognized.

5. To our employers and other sponsors we owe accurate reporting of our qualifications and competent, efficient, and timely performance of the work we undertake for them. We shall establish a clear understanding with each employer or other sponsor regarding the scope of our expertise and the nature of our professional responsibilities. We shall report our research, teaching and service activities accurately. We will prevent distortion or suppression of research results or policy recommendations by concerned agencies.

6. To society as a whole we owe the benefit of our knowledge and understanding of Biological, Cultural, Social, and Psychological Aspects of Aging. We should communicate our understanding of human aging to the society at large.
Gerontological research, teaching and practice pose choices for which we individually and collectively bear ethical responsibility. Since gerontologists are members of a variety of professional groups and subject to a variety of ethical codes, choices must sometimes be made not only among the varied obligations outlined in this statement but also between those of this statement and those incurred in other statuses or roles. This statement does not dictate choice or propose sanctions. Rather, it is designed to promote discussion and provide general guidelines for ethically responsible decisions.

*Adopted by Society's Council July 13, 2002*
Ethical Principles of Psychologists and Code of Conduct
(Including 2010 Amendments)

Introduction and Applicability

The American Psychological Association's (APA) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by an Ethical Standard does not mean that it is necessarily either ethical or unethical.

This Ethics Code applies only to psychologists' activities that are part of their scientific, educational or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.

Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. Lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct.

The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the standards of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the standards of the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association or suspension or loss of licensure. When the sanction to be imposed by APA is less than expulsion, the 2001 Rules and Procedures do not guarantee an opportunity for an in-person hearing, but generally provide that complaints will be resolved only on the basis of a submitted record.

The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. 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.

The modifiers used in some of the standards of this Ethics Code (e.g., reasonably, appropriate, potentially) are included in the standards when they would (1) allow professional judgment on the part of psychologists, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated. As used
in this Ethics Code, the term 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.

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists’ ethical responsibilities conflict with law, regulations or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner in keeping with basic principles of human rights.
Preamble

Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work.

This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students and the public regarding ethical standards of the discipline. The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees and colleagues; and to consult with others concerning ethical problems.

General Principles

This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

Principle A: Beneficence and Nonmaleficence
Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

Principle B: Fidelity and Responsibility
Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.

Principle C: Integrity
Psychologists seek to promote accuracy, honesty and truthfulness in the science, teaching and practice of psychology. In these activities psychologists do not steal, cheat or engage in fraud, subterfuge or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

Principle D: Justice
Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures and services being conducted by psychologists.
Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence and the limitations of their expertise do not lead to or condone unjust practices.

**Principle E: Respect for People's Rights and Dignity**
Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making. Psychologists are aware of and respect cultural, individual and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language and socioeconomic status and consider these factors when working with members of such groups. Psychologists 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.
Standard 1: Resolving Ethical Issues

1.01 Misuse of Psychologists’ Work
If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority
If psychologists’ ethical responsibilities conflict with law, regulations or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

1.03 Conflicts Between Ethics and Organizational Demands
If the demands of an organization with which psychologists are affiliated or for whom they are working are in conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. Under no circumstances may this standard be used to justify or defend violating human rights.

1.04 Informal Resolution of Ethical Violations
When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.)

1.05 Reporting Ethical Violations
If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution under Standard 1.04, Informal Resolution of Ethical Violations, or is not resolved properly in that fashion, psychologists take further action appropriate to the situation. Such action might include referral to state or national committees on professional ethics, to state licensing boards or to the appropriate institutional authorities. This standard does not apply when an intervention would violate confidentiality rights or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.)

1.06 Cooperating with Ethics Committees
Psychologists cooperate in ethics investigations, proceedings and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute noncooperation.

1.07 Improper Complaints
Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

1.08 Unfair Discrimination Against Complainants and Respondents
Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information.
Standard 2: Competence

2.01 Boundaries of Competence

(a) Psychologists provide services, teach and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study or professional experience.

(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Emergencies.

(c) Psychologists planning to provide services, teach or conduct research involving populations, areas, techniques or technologies new to them undertake relevant education, training, supervised experience, consultation or study.

(d) When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if they make a reasonable effort to obtain the competence required by using relevant research, training, consultation or study.

(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients and others from harm.

(f) When assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles.

2.02 Providing Services in Emergencies

In emergencies, when psychologists provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available.

2.03 Maintaining Competence

Psychologists undertake ongoing efforts to develop and maintain their competence.

2.04 Bases for Scientific and Professional Judgments

Psychologists' work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.01b, Informed Consent to Therapy.)

2.05 Delegation of Work to Others

Psychologists who delegate work to employees, supervisees or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training or experience, either independently or with the level of supervision being provided; and (3) see that such persons perform these services competently. (See also
Standards 2.02, Providing Services in Emergencies; 3.05, Multiple Relationships; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)

2.06 Personal Problems and Conflicts

(a) Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

(b) When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance and determine whether they should limit, suspend or terminate their work-related duties. (See also Standard 10.10, Terminating Therapy.)
Standard 3: Human Relations

3.01 Unfair Discrimination
In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status or any basis proscribed by law.

3.02 Sexual Harassment
Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist and that either (1) is unwelcome, is offensive or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)

3.03 Other Harassment
Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language or socioeconomic status.

3.04 Avoiding Harm
Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

3.05 Multiple Relationships
(a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person. A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists. Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.

(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.)

3.06 Conflict of Interest
Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial or other interests or relationships could reasonably be expected to (1) impair their objectivity, competence or effectiveness in performing their functions as psychologists or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.

3.07 Third-Party Requests for Services
When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations
involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standards 3.05, Multiple relationships, and 4.02, Discussing the Limits of Confidentiality.)

3.08 Exploitative Relationships
Psychologists do not exploit persons over whom they have supervisory, evaluative or other authority such as clients/patients, students, supervisees, research participants and employees. (See also Standards 3.05, Multiple Relationships; 6.04, Fees and Financial Arrangements; 6.05, Barter with Clients/Patients; 7.07, Sexual Relationships with Students and Supervisees; 10.05, Sexual Intimacies with Current Therapy Clients/Patients; 10.06, Sexual Intimacies with Relatives or Significant Others of Current Therapy Clients/Patients; 10.07, Therapy with Former Sexual Partners; and 10.08, Sexual Intimacies with Former Therapy Clients/Patients.)

3.09 Cooperation with Other Professionals
When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.)

3.10 Informed Consent

(a) When psychologists conduct research or provide assessment, therapy, counseling or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.

(c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding.

(d) Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

3.11 Psychological Services Delivered to or Through Organizations

(a) Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits of confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.

(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.

3.12 Interruption of Psychological Services
Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation or retirement or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)
Standard 4: Privacy and Confidentiality

4.01 Maintaining Confidentiality
Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others.)

4.02 Discussing the Limits of Confidentiality
(a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.)

(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.

(c) Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality.

4.03 Recording
Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing with Informed Consent for Research; and 8.07, Deception in Research.)

4.04 Minimizing Intrusions on Privacy
(a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made.

(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

4.05 Disclosures
(a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient or another legally authorized person on behalf of the client/patient unless prohibited by law.

(b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.)

4.06 Consultations
When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)

4.07 Use of Confidential Information for Didactic or Other Purposes
Psychologists do not disclose in their writings, lectures or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so.
Standard 5: Advertising and Other Public Statements

5.01 Avoidance of False or Deceptive Statements
(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations and published materials. Psychologists do not knowingly make public statements that are false, deceptive or fraudulent concerning their research, practice or other work activities or those of persons or organizations with which they are affiliated.

(b) Psychologists do not make false, deceptive or fraudulent statements concerning (1) their training, experience or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.

(c) Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.

5.02 Statements by Others
(a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.

(b) Psychologists do not compensate employees of press, radio, television or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists' Work.)

(c) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.

5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs
To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures or advertisements describing workshops, seminars or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters and the fees involved.

5.04 Media Presentations
When psychologists provide public advice or comment via print, Internet or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with this Ethics Code; and (3) do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

5.05 Testimonials
Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence.

5.06 In-Person Solicitation
Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services.
Standard 6: Record Keeping and Fees

6.01 Documentation of Professional and Scientific Work and Maintenance of Records
Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.)

6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work
(a) Psychologists maintain confidentiality in creating, storing, accessing, transferring and disposing of records under their control, whether these are written, automated or in any other medium. (See also Standards 4.01, Maintaining Confidentiality, and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)

(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.

(c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice. (See also Standards 3.12, Interruption of Psychological Services, and 10.09, Interruption of Therapy.)

6.03 Withholding Records for Nonpayment
Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received.

6.04 Fees and Financial Arrangements
(a) As early as is feasible in a professional or scientific relationship, psychologists and recipients of psychological services reach an agreement specifying compensation and billing arrangements.

(b) Psychologists' fee practices are consistent with law.

(c) Psychologists do not misrepresent their fees.

(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.)

(e) If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)

6.05 Barter with Clients/Patients
Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. Psychologists may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.)

6.06 Accuracy in Reports to Payors and Funding Sources
In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges or payments, and where applicable, the identity of the provider, the findings and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)
6.07 Referrals and Fees
When psychologists pay, receive payment from or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation with Other Professionals.)
Standard 7: Education and Training

7.01 Design of Education and Training Programs
Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.)

7.02 Descriptions of Education and Training Programs
Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects or community service), training goals and objectives, stipends and benefits and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

7.03 Accuracy in Teaching
(a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)

(b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Competence.)

7.04 Student Disclosure of Personal Information
Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment and relationships with parents, peers and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

7.05 Mandatory Individual or Group Therapy
(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.)

(b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.)

7.06 Assessing Student and Supervisee Performance
(a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.

(b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

7.07 Sexual Relationships with Students and Supervisees
Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority. (See also Standard 3.05, Multiple Relationships.)
Standard 8: Research and Publication

8.01 Institutional Approval
When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

8.02 Informed Consent to Research
(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. They provide opportunity for the prospective participants to ask questions and receive answers. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing with Informed Consent for Research; and 8.07, Deception in Research.)

(b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.)

8.03 Informed Consent for Recording Voices and Images in Research
Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07, Deception in Research.)

8.04 Client/Patient, Student, and Subordinate Research Participants
(a) When psychologists conduct research with clients/patients, students or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.

(b) When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

8.05 Dispensing with Informed Consent for Research
Psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations.

8.06 Offering Inducements for Research Participation
(a) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation.

(b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations and limitations. (See also Standard 6.05, Barter with Clients/Patients.)
8.07 Deception in Research
(a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational or applied value and that effective nondeceptive alternative procedures are not feasible.

(b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.

(c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)

8.08 Debriefing
(a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.

(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.

(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

8.09 Humane Care and Use of Animals in Research
(a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state and local laws and regulations, and with professional standards.

(b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health and humane treatment.

(c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others.)

(d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness and pain of animal subjects.

(e) Psychologists use a procedure subjecting animals to pain, stress or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational or applied value.

(f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.

(g) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.

8.10 Reporting Research Results
(a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.)

(b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum or other appropriate publication means.

8.11 Plagiarism
Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally.
8.12 Publication Credit
(a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.)

(b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.

(c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.)

8.13 Duplicate Publication of Data
Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

8.14 Sharing Research Data for Verification
(a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data.

8.15 Reviewers
Psychologists who review material submitted for presentation, publication, grant or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.
**Standard 9: Assessment**

### 9.01 Bases for Assessments

(a) Psychologists base the opinions contained in their recommendations, reports and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)

(c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations.

### 9.02 Use of Assessments

(a) Psychologists administer, adapt, score, interpret or use assessment techniques, interviews, tests or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.

(b) Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation.

(c) Psychologists use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues.

### 9.03 Informed Consent in Assessments

(a) Psychologists obtain informed consent for assessments, evaluations or diagnostic services, as described in Standard 3.10, Informed Consent, except when (1) testing is mandated by law or governmental regulations; (2) informed consent is implied because testing is conducted as a routine educational, institutional or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity. Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.

(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed assessment services, using language that is reasonably understandable to the person being assessed.

(c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.)

### 9.04 Release of Test Data

(a) The term test data refers to raw and scaled scores, client/patient responses to test questions or stimuli and psychologists' notes and recordings concerning client/patient statements and behavior during an examination. Those
portions of test materials that include client/patient responses are included in the definition of test data. Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release. Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.)

(b) In the absence of a client/patient release, psychologists provide test data only as required by law or court order.

9.05 Test Construction
Psychologists who develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias and recommendations for use.

9.06 Interpreting Assessment Results
When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test-taking abilities and other characteristics of the person being assessed, such as situational, personal, linguistic and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.)

9.07 Assessment by Unqualified Persons
Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.)

9.08 Obsolete Tests and Outdated Test Results
(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.

(b) Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

9.09 Test Scoring and Interpretation Services
(a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability and applications of the procedures and any special qualifications applicable to their use.

(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c, Boundaries of Competence.)

(c) Psychologists retain responsibility for the appropriate application, interpretation and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

9.10 Explaining Assessment Results
Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.

9.11 Maintaining Test Security
The term test materials refers to manuals, instruments, protocols and test questions or stimuli and does not include test data as defined in Standard 9.04, Release of Test Data. Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code.
Standard 10: Therapy

10.01 Informed Consent to Therapy

(a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)

(b) When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.)

(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.

10.02 Therapy Involving Couples or Families

(a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)

(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)

10.03 Group Therapy

When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality.

10.04 Providing Therapy to Those Served by Others

In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. Psychologists discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues.

10.05 Sexual Intimacies with Current Therapy Clients/Patients

Psychologists do not engage in sexual intimacies with current therapy clients/patients.

10.06 Sexual Intimacies with Relatives or Significant Others of Current Therapy Clients/Patients

Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.

10.07 Therapy with Former Sexual Partners

Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.

10.08 Sexual Intimacies with Former Therapy Clients/Patients

(a) Psychologists do not engage in sexual intimacies with former clients/patients for at least two years after cessation or termination of therapy.
(b) Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated; (2) the nature, duration, and intensity of the therapy; (3) the circumstances of termination; (4) the client's/patient's personal history; (5) the client's/patient's current mental status; (6) the likelihood of adverse impact on the client/patient; and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a posttermination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.)

10.09 Interruption of Therapy
When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.)

10.10 Terminating Therapy

(a) Psychologists terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.

(b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.

(c) Except where precluded by the actions of clients/patients or third-party payors, prior to termination psychologists provide pretermination counseling and suggest alternative service providers as appropriate.
History and Effective Date

The American Psychological Association’s **Council of Representatives** adopted this version of the APA Ethics Code during its meeting on August 21, 2002. The Code became effective on June 1, 2003. The Council of Representatives amended this version of the Ethics Code on February 20, 2010. The amendments became effective on June 1, 2010. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First St. NE, Washington, DC 20002-4242. The standards in this Ethics Code will be used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints will be adjudicated on the basis of the version of the Ethics Code that was in effect at the time the conduct occurred.

The APA has previously published its Ethics Code as follows:


Request copies of the APA's Ethical Principles of Psychologists and Code of Conduct from the APA Order Department, 750 First St. NE, Washington, DC 20002-4242, or phone (202) 336-5510.

Language of the 2002 Ethics Code with Changes Marked

**Introduction and Applicability**

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner—**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.**

**1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority**

If psychologists’ ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code and take reasonable steps to resolve the conflict consistent with the General Principles and Ethical Standards of the Ethics Code. **If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority. Under no circumstances may this standard be used to justify or defend violating human rights.**

**1.03 Conflicts Between Ethics and Organizational Demands**

If the demands of an organization with which psychologists are affiliated or for whom they are working are in conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code. **Under no circumstances may this standard be used to justify or defend violating human rights.**
American Sociological Association

Code of Ethics

and

Policies and Procedures
of the
ASA Committee on Professional Ethics
Code of Ethics
American Sociological Association
(Approved by the ASA Membership in June 1997)

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INTRODUCTION

The American Sociological Association’s (ASA’s) Code of Ethics sets forth the principles and ethical standards that underlie sociologists’ professional responsibilities and conduct. These principles and standards should be used as guidelines when examining everyday professional activities. They constitute normative statements for sociologists and provide guidance on issues that sociologists may encounter in their professional work.

ASA’s Code of Ethics consists of an Introduction, a Preamble, five General Principles, and specific Ethical Standards. This Code is also accompanied by the Rules and Procedures of the ASA Committee on Professional Ethics which describe the procedures for filing, investigating, and resolving complaints of unethical conduct.

The Preamble and General Principles of the Code are aspirational goals to guide sociologists toward the highest ideals of sociology. Although the Preamble and General Principles are not enforceable rules, they should be considered by sociologists in arriving at an ethical course of action and may be considered by ethics bodies in interpreting the Ethical Standards.

The Ethical Standards set forth enforceable rules for conduct by sociologists. Most of the Ethical Standards are written broadly in order to apply to sociologists in varied roles, and the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. Any conduct that is not specifically addressed by this Code of Ethics is not necessarily ethical or unethical.

Membership in the ASA commits members to adhere to the ASA Code of Ethics and to the Policies and Procedures of the ASA Committee on Professional Ethics. Members are advised of this obligation upon joining the Association and that violations of the Code may lead to the imposition of sanctions, including termination of membership. ASA members subject to the Code of Ethics may be reviewed under these Ethical Standards only if the activity is part of or affects their work-related functions, or if the activity is sociological in nature. Personal activities having no connection to or effect on sociologists’ performance of their professional roles are not subject to the Code of Ethics.

PREAMBLE

This Code of Ethics articulates a common set of values upon which sociologists build their professional and scientific work. The Code is intended to provide both the general principles and the rules to cover professional situations encountered by sociologists. It has as its primary goal the welfare and protection of the individuals and groups with whom sociologists work. It is the individual responsibility of each sociologist to aspire to the highest possible standards of conduct in research, teaching, practice, and service.

The development of a dynamic set of ethical standards for a sociologist’s work-related conduct requires a personal commitment to a lifelong effort to act ethically; to encourage ethical behavior by students, supervisors, supervisees, employers, employees, and colleagues; and to consult with others as needed concerning ethical problems. Each sociologist supplements, but does not violate, the values and rules specified in the Code of Ethics based on guidance drawn from personal values, culture, and experience.
GENERAL PRINCIPLES

The following General Principles are aspirational and serve as a guide for sociologists in determining ethical courses of action in various contexts. They exemplify the highest ideals of professional conduct.

Principle A: Professional Competence
Sociologists strive to maintain the highest levels of competence in their work; they recognize the limitations of their expertise; and they undertake only those tasks for which they are qualified by education, training, or experience. They recognize the need for ongoing education in order to remain professionally competent; and they utilize the appropriate scientific, professional, technical, and administrative resources needed to ensure competence in their professional activities. They consult with other professionals when necessary for the benefit of their students, research participants, and clients.

Principle B: Integrity
Sociologists are honest, fair, and respectful of others in their professional activities—in research, teaching, practice, and service. Sociologists do not knowingly act in ways that jeopardize either their own or others’ professional welfare. Sociologists conduct their affairs in ways that inspire trust and confidence; they do not knowingly make statements that are false, misleading, or deceptive.

Principle C: Professional and Scientific Responsibility
Sociologists adhere to the highest scientific and professional standards and accept responsibility for their work. Sociologists understand that they form a community and show respect for other sociologists even when they disagree on theoretical, methodological, or personal approaches to professional activities. Sociologists value the public trust in sociology and are concerned about their ethical behavior and that of other sociologists that might compromise that trust. While endeavoring always to be collegial, sociologists must never let the desire to be collegial outweigh their shared responsibility for ethical behavior. When appropriate, they consult with colleagues in order to prevent or avoid unethical conduct.

Principle D: Respect for People’s Rights, Dignity, and Diversity
Sociologists respect the rights, dignity, and worth of all people. They strive to eliminate bias in their professional activities, and they do not tolerate any forms of discrimination based on age; gender; race; ethnicity; national origin; religion; sexual orientation; disability; health conditions; or marital, domestic, or parental status. They are sensitive to cultural, individual, and role differences in serving, teaching, and studying groups of people with distinctive characteristics. In all of their work-related activities, sociologists acknowledge the rights of others to hold values, attitudes, and opinions that differ from their own.

Principle E: Social Responsibility
Sociologists are aware of their professional and scientific responsibility to the communities and societies in which they live and work. They apply and
make public their knowledge in order to contribute to the public good. When undertaking research, they strive to advance the science of sociology and to serve the public good.

**ETHICAL STANDARDS**

1. **Professional and Scientific Standards**
   Sociologists adhere to the highest possible technical standards that are reasonable and responsible in their research, teaching, practice, and service activities. They rely on scientifically and professionally derived knowledge; act with honesty and integrity; and avoid untrue, deceptive, or undocumented statements in undertaking work-related functions or activities.

2. **Competence**
   (a) Sociologists conduct research, teach, practice, and provide service only within the boundaries of their competence, based on their education, training, supervised experience, or appropriate professional experience.
   (b) Sociologists conduct research, teach, practice, and provide service in new areas or involving new techniques only after they have taken reasonable steps to ensure the competence of their work in these areas.
   (c) Sociologists who engage in research, teaching, practice, or service maintain awareness of current scientific and professional information in their fields of activity and undertake continuing efforts to maintain competence in the skills they use.
   (d) Sociologists refrain from undertaking an activity when their personal circumstances may interfere with their professional work or lead to harm for a student, supervisee, human subject, client, colleague, or other person to whom they have a scientific, teaching, consulting, or other professional obligation.

3. **Representation and Misuse of Expertise**
   (a) In research, teaching, practice, service, or other situations where sociologists render professional judgments or present their expertise, they accurately and fairly represent their areas and degrees of expertise.
   (b) Sociologists do not accept grants, contracts, consultation, or work assignments from individual or organizational clients or sponsors that appear likely to require violation of the standards in this Code of Ethics. Sociologists dissociate themselves from such activities when they discover a violation and are unable to achieve its correction.
   (c) Because sociologists’ scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their knowledge, expertise, or influence.
   (d) If sociologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.
4. Delegation and Supervision
   (a) Sociologists provide proper training and supervision to their students, supervisees, or employees and take reasonable steps to see that such persons perform services responsibly, competently, and ethically.
   (b) Sociologists delegate to their students, supervisees, or employees only those responsibilities that such persons, based on their education, training, or experience, can reasonably be expected to perform either independently or with the level of supervision provided.

5. Nondiscrimination
   Sociologists do not engage in discrimination in their work based on age; gender; race; ethnicity; national origin; religion; sexual orientation; disability; health conditions; marital, domestic, or parental status; or any other applicable basis proscribed by law.

6. Non-exploitation
   (a) Whether for personal, economic, or professional advantage, sociologists do not exploit persons over whom they have direct or indirect supervisory, evaluative, or other authority such as students, supervisees, employees, or research participants.
   (b) Sociologists do not directly supervise or exercise evaluative authority over any person with whom they have a sexual relationship, including students, supervisees, employees, or research participants.

7. Harassment
   Sociologists do not engage in harassment of any person, including students, supervisees, employees, or research participants. Harassment consists of a single intense and severe act or of multiple persistent or pervasive acts which are demeaning, abusive, offensive, or create a hostile professional or workplace environment. Sexual harassment may include sexual solicitation, physical advance, or verbal or non-verbal conduct that is sexual in nature. Racial harassment may include unnecessary, exaggerated, or unwarranted attention or attack, whether verbal or non-verbal, because of a person’s race or ethnicity.

8. Employment Decisions
   Sociologists have an obligation to adhere to the highest ethical standards when participating in employment related decisions, when seeking employment, or when planning to resign from a position.

8.01 Fair Employment Practices
   (a) When participating in employment-related decisions, sociologists make every effort to ensure equal opportunity and fair treatment to all full- and part-time employees. They do not discriminate in hiring, promotion, salary, treatment, or any other conditions of employment or career development on the basis of age; gender; race; ethnicity; national origin; religion; sexual orientation; disability; health conditions; marital, domestic, or parental status; or any other applicable basis proscribed by law.
(b) When participating in employment-related decisions, sociologists specify the requirements for hiring, promotion, tenure, and termination and communicate these requirements thoroughly to full- and part-time employees and prospective employees.

(c) When participating in employment-related decisions, sociologists have the responsibility to be informed of fair employment codes, to communicate this information to employees, and to help create an atmosphere upholding fair employment practices for full- and part-time employees.

(d) When participating in employment-related decisions, sociologists inform prospective full- and part-time employees of any constraints on research and publication and negotiate clear understandings about any conditions that may limit research and scholarly activity.

8.02 Responsibilities of Employees
(a) When seeking employment, sociologists provide prospective employers with accurate and complete information on their professional qualifications and experiences.
(b) When leaving a position, permanently or temporarily, sociologists provide their employers with adequate notice and take reasonable steps to reduce negative effects of leaving.

9. Conflicts of Interest
Sociologists maintain the highest degree of integrity in their professional work and avoid conflicts of interest and the appearance of conflict. Conflicts of interest arise when sociologists’ personal or financial interests prevent them from performing their professional work in an unbiased manner. In research, teaching, practice, and service, sociologists are alert to situations that might cause a conflict of interest and take appropriate action to prevent conflict or disclose it to appropriate parties.

9.01 Adherence to Professional Standards
Irrespective of their personal or financial interests or those of their employers or clients, sociologists adhere to professional and scientific standards in (1) the collection, analysis, or interpretation of data; (2) the reporting of research; (3) the teaching, professional presentation, or public dissemination of sociological knowledge; and (4) the identification or implementation of appropriate contractual, consulting, or service activities.

9.02 Disclosure
Sociologists disclose relevant sources of financial support and relevant personal or professional relationships that may have the appearance of or potential for a conflict of interest to an employer or client, to the sponsors of their professional work, or in public speeches and writing.

9.03 Avoidance of Personal Gain
(a) Under all circumstances, sociologists do not use or otherwise seek to gain from information or material received in a confidential context (e.g., knowledge obtained from reviewing a manuscript or serving on a proposal
review panel), unless they have authorization to do so or until that information is otherwise made publicly available.

(b) Under all circumstances, sociologists do not seek to gain from information or material in an employment or client relationship without permission of the employer or client.

9.04 Decisionmaking in the Workplace

In their workplace, sociologists take appropriate steps to avoid conflicts of interest or the appearance of conflicts and carefully scrutinize potentially biasing affiliations or relationships. In research, teaching, practice, or service, such potentially biasing affiliations or relationships include, but are not limited to, situations involving family, business, or close personal friendships or those with whom sociologists have had strong conflict or disagreement.

9.05 Decisionmaking Outside of the Workplace

In professional activities outside of their workplace, sociologists in all circumstances abstain from engaging in deliberations and decisions that allocate or withhold benefits or rewards from individuals or institutions if they have biasing affiliations or relationships. These biasing affiliations or relationships are: 1) current employment or being considered for employment at an organization or institution that could be construed as benefiting from the decision; 2) current officer or board member of an organization or institution that could be construed as benefiting from the decision; 3) current employment or being considered for employment at the same organization or institution where an individual could benefit from the decision; 4) a spouse, domestic partner, or known relative who as an individual could benefit from the decision; or 5) a current business or professional partner, research collaborator, employee, supervisee, or student who as an individual could benefit from the decision.

10. Public Communications

Sociologists adhere to the highest professional standards in public communications about their professional services, credentials and expertise, work products, or publications, whether these communications are from themselves or from others.

10.01 Public Communications

(a) Sociologists take steps to ensure the accuracy of all public communications. Such public communications include, but are not limited to, directory listings; personal resumes or curriculum vitae; advertising; brochures or printed matter; interviews or comments to the media; statements in legal proceedings; lectures and public oral presentations; or other published materials.

(b) Sociologists do not make public statements that are false, deceptive, misleading, or fraudulent, either because of what they state, convey, or suggest or because of what they omit, concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated. Such activities include, but are not limited to, false or deceptive statements concerning sociologists’ (1) training, experience, or
competence; (2) academic degrees; (3) credentials; (4) institutional or association affiliations; (5) services; (6) fees; or (7) publications or research findings. Sociologists do not make false or deceptive statements concerning the scientific basis for, results of, or degree of success from their professional services.

(c) When sociologists provide professional advice or comment by means of public lectures, demonstrations, radio or television programs, prerecorded tapes, printed articles, mailed material, or other media, they take reasonable precautions to ensure that (1) the statements are based on appropriate research, literature, and practice; and (2) the statements are otherwise consistent with this Code of Ethics.

10.02 Statements by Others
(a) Sociologists who engage or employ others to create or place public statements that promote their work products, professional services, or other activities retain responsibility for such statements.
(b) Sociologists make reasonable efforts to prevent others whom they do not directly engage, employ, or supervise (such as employers, publishers, sponsors, organizational clients, members of the media) from making deceptive statements concerning their professional research, teaching, or practice activities.
(c) In working with the press, radio, television, or other communications media or in advertising in the media, sociologists are cognizant of potential conflicts of interest or appearances of such conflicts (e.g., they do not provide compensation to employees of the media), and they adhere to the highest standards of professional honesty (e.g., they acknowledge paid advertising).

11. Confidentiality
Sociologists have an obligation to ensure that confidential information is protected. They do so to ensure the integrity of research and the open communication with research participants and to protect sensitive information obtained in research, teaching, practice, and service. When gathering confidential information, sociologists should take into account the long-term uses of the information, including its potential placement in public archives or the examination of the information by other researchers or practitioners.

11.01 Maintaining Confidentiality
(a) Sociologists take reasonable precautions to protect the confidentiality rights of research participants, students, employees, clients, or others.
(b) Confidential information provided by research participants, students, employees, clients, or others is treated as such by sociologists even if there is no legal protection or privilege to do so. Sociologists have an obligation to protect confidential information and not allow information gained in confidence from being used in ways that would unfairly compromise research participants, students, employees, clients, or others.
(c) Information provided under an understanding of confidentiality is treated as such even after the death of those providing that information.
(d) Sociologists maintain the integrity of confidential deliberations, activities, or roles, including, where applicable, that of professional committees, review panels, or advisory groups (e.g., the ASA Committee on Professional Ethics).

(e) Sociologists, to the extent possible, protect the confidentiality of student records, performance data, and personal information, whether verbal or written, given in the context of academic consultation, supervision, or advising.

(f) The obligation to maintain confidentiality extends to members of research or training teams and collaborating organizations who have access to the information. To ensure that access to confidential information is restricted, it is the responsibility of researchers, administrators, and principal investigators to instruct staff to take the steps necessary to protect confidentiality.

(g) When using private information about individuals collected by other persons or institutions, sociologists protect the confidentiality of individually identifiable information. Information is private when an individual can reasonably expect that the information will not be made public with personal identifiers (e.g., medical or employment records).

11.02 Limits of Confidentiality

(a) Sociologists inform themselves fully about all laws and rules which may limit or alter guarantees of confidentiality. They determine their ability to guarantee absolute confidentiality and, as appropriate, inform research participants, students, employees, clients, or others of any limitations to this guarantee at the outset, consistent with ethical standards set forth in 11.02(b).

(b) Sociologists may confront unanticipated circumstances where they become aware of information that is clearly health- or life-threatening to research participants, students, employees, clients, or others. In these cases, sociologists balance the importance of guarantees of confidentiality with other principles in this Code of Ethics, standards of conduct, and applicable law.

(c) Confidentiality is not required with respect to observations in public places, activities conducted in public, or other settings where no rules of privacy are provided by law or custom. Similarly, confidentiality is not required in the case of information available from public records.

11.03 Discussing Confidentiality and Its Limits

(a) When sociologists establish a scientific or professional relationship with persons, they discuss (1) the relevant limitations on confidentiality, and (2) the foreseeable uses of the information generated through their professional work.

(b) Unless it is not feasible or is counter-productive, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.
11.04 Anticipation of Possible Uses of Information
(a) When research requires maintaining personal identifiers in databases or systems of records, sociologists delete such identifiers before the information is made publicly available.
(b) When confidential information concerning research participants, clients, or other recipients of service is entered into databases or systems of records available to persons without the prior consent of the relevant parties, sociologists protect anonymity by not including personal identifiers or by employing other techniques that mask or control disclosure of individual identities.
(c) When deletion of personal identifiers is not feasible, sociologists take reasonable steps to determine that appropriate consent of personally-identifiable individuals has been obtained before they transfer such data to others or review such data collected by others.

11.05 Electronic Transmission of Confidential Information
Sociologists use extreme care in delivering or transferring any confidential data, information, or communication over public computer networks. Sociologists are attentive to the problems of maintaining confidentiality and control over sensitive material and data when use of technological innovations, such as public computer networks, may open their professional and scientific communication to unauthorized persons.

11.06 Anonymity of Sources
(a) Sociologists do not disclose in their writings, lectures, or other public media confidential, personally identifiable information concerning their research participants, students, individual or organizational clients, or other recipients of their service which is obtained during the course of their work, unless consent from individuals or their legal representatives has been obtained.
(b) When confidential information is used in scientific and professional presentations, sociologists disguise the identity of research participants, students, individual or organizational clients, or other recipients of their service.

11.07 Minimizing Intrusions on Privacy
(a) To minimize intrusions on privacy, sociologists include in written and oral reports, consultations, and public communications only information germane to the purpose for which the communication is made.
(b) Sociologists discuss confidential information or evaluative data concerning research participants, students, supervisees, employees, and individual or organizational clients only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

11.08 Preservation of Confidential Information
(a) Sociologists take reasonable steps to ensure that records, data, or information are preserved in a confidential manner consistent with the
requirements of this Code of Ethics, recognizing that ownership of records, data, or information may also be governed by law or institutional principles.

(b) Sociologists plan so that confidentiality of records, data, or information is protected in the event of the sociologist’s death, incapacity, or withdrawal from the position or practice.

(c) When sociologists transfer confidential records, data, or information to other persons or organizations, they obtain assurances that the recipients of the records, data, or information will employ measures to protect confidentiality at least equal to those originally pledged.

12. Informed Consent

Informed consent is a basic ethical tenet of scientific research on human populations. Sociologists do not involve a human being as a subject in research without the informed consent of the subject or the subject’s legally authorized representative, except as otherwise specified in this Code. Sociologists recognize the possibility of undue influence or subtle pressures on subjects that may derive from researchers’ expertise or authority, and they take this into account in designing informed consent procedures.

12.01 Scope of Informed Consent

(a) Sociologists conducting research obtain consent from research participants or their legally authorized representatives (1) when data are collected from research participants through any form of communication, interaction, or intervention; or (2) when behavior of research participants occurs in a private context where an individual can reasonably expect that no observation or reporting is taking place.

(b) Despite the paramount importance of consent, sociologists may seek waivers of this standard when (1) the research involves no more than minimal risk for research participants, and (2) the research could not practicably be carried out were informed consent to be required. Sociologists recognize that waivers of consent require approval from institutional review boards or, in the absence of such boards, from another authoritative body with expertise on the ethics of research. Under such circumstances, the confidentiality of any personally identifiable information must be maintained unless otherwise set forth in 11.02(b).

(c) Sociologists may conduct research in public places or use publicly-available information about individuals (e.g., naturalistic observations in public places, analysis of public records, or archival research) without obtaining consent. If, under such circumstances, sociologists have any doubt whatsoever about the need for informed consent, they consult with institutional review boards or, in the absence of such boards, with another authoritative body with expertise on the ethics of research before proceeding with such research.

(d) In undertaking research with vulnerable populations (e.g., youth, recent immigrant populations, the mentally ill), sociologists take special care to ensure that the voluntary nature of the research is understood and that consent is not coerced. In all other respects, sociologists adhere to the principles set forth in 12.01(a)-(c).
(e) Sociologists are familiar with and conform to applicable state and federal regulations and, where applicable, institutional review board requirements for obtaining informed consent for research.

12.02 Informed Consent Process

(a) When informed consent is required, sociologists enter into an agreement with research participants or their legal representatives that clarifies the nature of the research and the responsibilities of the investigator prior to conducting the research.

(b) When informed consent is required, sociologists use language that is understandable to and respectful of research participants or their legal representatives.

(c) When informed consent is required, sociologists provide research participants or their legal representatives with the opportunity to ask questions about any aspect of the research, at any time during or after their participation in the research.

(d) When informed consent is required, sociologists inform research participants or their legal representatives of the nature of the research; they indicate to participants that their participation or continued participation is voluntary; they inform participants of significant factors that may be expected to influence their willingness to participate (e.g., possible risks and benefits of their participation); and they explain other aspects of the research and respond to questions from prospective participants. Also, if relevant, sociologists explain that refusal to participate or withdrawal from participation in the research involves no penalty, and they explain any foreseeable consequences of declining or withdrawing. Sociologists explicitly discuss confidentiality and, if applicable, the extent to which confidentiality may be limited as set forth in 11.02(b).

(e) When informed consent is required, sociologists keep records regarding said consent. They recognize that consent is a process that involves oral and/or written consent.

(f) Sociologists honor all commitments they have made to research participants as part of the informed consent process except where unanticipated circumstances demand otherwise as set forth in 11.02(b).

12.03 Informed Consent of Students and Subordinates

When undertaking research at their own institutions or organizations with research participants who are students or subordinates, sociologists take special care to protect the prospective subjects from adverse consequences of declining or withdrawing from participation.

12.04 Informed Consent with Children

(a) In undertaking research with children, sociologists obtain the consent of children to participate, to the extent that they are capable of providing such consent, except under circumstances where consent may not be required as set forth in 12.01(b).

(b) In undertaking research with children, sociologists obtain the consent of a parent or a legally authorized guardian. Sociologists may seek waivers of
parental or guardian consent when (1) the research involves no more than minimal risk for the research participants, and (2) the research could not practicably be carried out were consent to be required, or (3) the consent of a parent or guardian is not a reasonable requirement to protect the child (e.g., neglected or abused children).

(c) Sociologists recognize that waivers of consent from a child and a parent or guardian require approval from institutional review boards or, in the absence of such boards, from another authoritative body with expertise on the ethics of research. Under such circumstances, the confidentiality of any personally identifiable information must be maintained unless otherwise set forth in 11.02(b).

12.05 Use of Deception in Research
(a) Sociologists do not use deceptive techniques (1) unless they have determined that their use will not be harmful to research participants; is justified by the study’s prospective scientific, educational, or applied value; and that equally effective alternative procedures that do not use deception are not feasible; and (2) unless they have obtained the approval of institutional review boards or, in the absence of such boards, with another authoritative body with expertise on the ethics of research.

(b) Sociologists never deceive research participants about significant aspects of the research that would affect their willingness to participate, such as physical risks, discomfort, or unpleasant emotional experiences.

(c) When deception is an integral feature of the design and conduct of research, sociologists attempt to correct any misconception that research participants may have no later than at the conclusion of the research.

(d) On rare occasions, sociologists may need to conceal their identities in order to undertake research that could not practicably be carried out were they to be known as researchers. Under such circumstances, sociologists undertake the research if it involves no more than minimal risk for the research participants and if they have obtained approval to proceed in this manner from an institutional review board or, in the absence of such boards, from another authoritative body with expertise on the ethics of research. Under such circumstances, confidentiality must be maintained unless otherwise set forth in 11.02(b).

12.06 Use of Recording Technology
Sociologists obtain informed consent from research participants, students, employees, clients, or others prior to videotaping, filming, or recording them in any form, unless these activities involve simply naturalistic observations in public places and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm.

13. Research Planning, Implementation, and Dissemination
Sociologists have an obligation to promote the integrity of research and to ensure that they comply with the ethical tenets of science in the planning, implementation, and dissemination of research. They do so in order to advance knowledge, to
minimize the possibility that results will be misleading, and to protect the rights of research participants.

13.01 Planning and Implementation
(a) In planning and implementing research, sociologists minimize the possibility that results will be misleading.
(b) Sociologists take steps to implement protections for the rights and welfare of research participants and other persons affected by the research.
(c) In their research, sociologists do not encourage activities or themselves behave in ways that are health- or life-threatening to research participants or others.
(d) In planning and implementing research, sociologists consult those with expertise concerning any special population under investigation or likely to be affected.
(e) In planning and implementing research, sociologists consider its ethical acceptability as set forth in the Code of Ethics. If the best ethical practice is unclear, sociologists consult with institutional review boards or, in the absence of such review processes, with another authoritative body with expertise on the ethics of research.
(f) Sociologists are responsible for the ethical conduct of research conducted by them or by others under their supervision or authority.

13.02 Unanticipated Research Opportunities
If during the course of teaching, practice, service, or non-professional activities, sociologists determine that they wish to undertake research that was not previously anticipated, they make known their intentions and take steps to ensure that the research can be undertaken consonant with ethical principles, especially those relating to confidentiality and informed consent. Under such circumstances, sociologists seek the approval of institutional review boards or, in the absence of such review processes, another authoritative body with expertise on the ethics of research.

13.03 Offering Inducements for Research Participants
Sociologists do not offer excessive or inappropriate financial or other inducements to obtain the participation of research participants, particularly when it might coerce participation. Sociologists may provide incentives to the extent that resources are available and appropriate.

13.04 Reporting on Research
(a) Sociologists disseminate their research findings except where unanticipated circumstances (e.g., the health of the researcher) or proprietary agreements with employers, contractors, or clients preclude such dissemination.
(b) Sociologists do not fabricate data or falsify results in their publications or presentations.
(c) In presenting their work, sociologists report their findings fully and do not omit relevant data. They report results whether they support or contradict the expected outcomes.
(d) Sociologists take particular care to state all relevant qualifications on the findings and interpretation of their research. Sociologists also disclose
underlying assumptions, theories, methods, measures, and research designs that might bear upon findings and interpretations of their work.

e) Consistent with the spirit of full disclosure of methods and analyses, once findings are publicly disseminated, sociologists permit their open assessment and verification by other responsible researchers with appropriate safeguards, where applicable, to protect the anonymity of research participants.

f) If sociologists discover significant errors in their publication or presentation of data, they take reasonable steps to correct such errors in a correction, a retraction, published errata, or other public fora as appropriate.

g) Sociologists report sources of financial support in their written papers and note any special relations to any sponsor. In special circumstances, sociologists may withhold the names of specific sponsors if they provide an adequate and full description of the nature and interest of the sponsor.

h) Sociologists take special care to report accurately the results of others’ scholarship by using correct information and citations when presenting the work of others in publications, teaching, practice, and service settings.

13.05 Data Sharing

(a) Sociologists share data and pertinent documentation as a regular practice. Sociologists make their data available after completion of the project or its major publications, except where proprietary agreements with employers, contractors, or clients preclude such accessibility or when it is impossible to share data and protect the confidentiality of the data or the anonymity of research participants (e.g., raw field notes or detailed information from ethnographic interviews).

(b) Sociologists anticipate data sharing as an integral part of a research plan whenever data sharing is feasible.

(c) Sociologists share data in a form that is consonant with research participants’ interests and protect the confidentiality of the information they have been given. They maintain the confidentiality of data, whether legally required or not; remove personal identifiers before data are shared; and, if necessary, use other disclosure avoidance techniques.

(d) Sociologists who do not otherwise place data in public archives keep data available and retain documentation relating to the research for a reasonable period of time after publication or dissemination of results.

(e) Sociologists may ask persons who request their data for further analysis to bear the associated incremental costs, if necessary.

(f) Sociologists who use data from others for further analyses explicitly acknowledge the contribution of the initial researchers.

14. Plagiarism

(a) In publications, presentations, teaching, practice, and service, sociologists explicitly identify, credit, and reference the author when they take data or material verbatim from another person’s written work, whether it is published, unpublished, or electronically available.

(b) In their publications, presentations, teaching, practice, and service, sociologists provide acknowledgment of and reference to the use of others’ work, even if the work is not quoted verbatim or paraphrased, and they do not present
others’ work as their own whether it is published, unpublished, or
electronically available.

15. Authorship Credit
(a) Sociologists take responsibility and credit, including authorship credit, only
for work they have actually performed or to which they have contributed.
(b) Sociologists ensure that principal authorship and other publication credits
are based on the relative scientific or professional contributions of the
individuals involved, regardless of their status. In claiming or determining
the ordering of authorship, sociologists seek to reflect accurately the
contributions of main participants in the research and writing process.
(c) A student is usually listed as principal author on any multiple-authored
publication that substantially derives from the student’s dissertation or thesis.

16. Publication Process
Sociologists adhere to the highest ethical standards when participating in
publication and review processes when they are authors or editors.

16.01 Submission of Manuscripts for Publication
(a) In cases of multiple authorship, sociologists confer with all other authors
prior to submitting work for publication and establish mutually acceptable
agreements regarding submission.
(b) In submitting a manuscript to a professional journal, book series, or edited
book, sociologists grant that publication first claim to publication except
where explicit policies allow multiple submissions. Sociologists do not
submit a manuscript to a second publication until after an official decision
has been received from the first publication or until the manuscript is
withdrawn. Sociologists submitting a manuscript for publication in a
journal, book series, or edited book can withdraw a manuscript from
consideration up until an official acceptance is made.
(c) Sociologists may submit a book manuscript to multiple publishers.
However, once sociologists have signed a contract, they cannot withdraw a
manuscript from publication unless there is reasonable cause to do so.

16.02 Duplicate Publication of Data
When sociologists publish data or findings that they have previously published
elsewhere, they accompany these publications by proper acknowledgment.

16.03 Responsibilities of Editors
(a) When serving as editors of journals or book series, sociologists are fair in
the application of standards and operate without personal or ideological
favoritism or malice. As editors, sociologists are cognizant of any potential
conflicts of interest.
(b) When serving as editors of journals or book series, sociologists ensure the
confidential nature of the review process and supervise editorial office staff,
including students, in accordance with practices that maintain confidentiality.
(c) When serving as editors of journals or book series, sociologists are bound to
publish all manuscripts accepted for publication unless major errors or ethical
violations are discovered after acceptance (e.g., plagiarism or scientific misconduct).
(d) When serving as editors of journals or book series, sociologists ensure the anonymity of reviewers unless they otherwise receive permission from reviewers to reveal their identity. Editors ensure that their staff conform to this practice.
(e) When serving as journal editors, sociologists ensure the anonymity of authors unless and until a manuscript is accepted for publication or unless the established practices of the journal are known to be otherwise.
(f) When serving as journal editors, sociologists take steps to provide for the timely review of all manuscripts and respond promptly to inquiries about the status of the review.

17. Responsibilities of Reviewers
(a) In reviewing material submitted for publication, grant support, or other evaluation purposes, sociologists respect the confidentiality of the process and the proprietary rights in such information of those who submitted it.
(b) Sociologists disclose conflicts of interest or decline requests for reviews of the work of others where conflicts of interest are involved.
(c) Sociologists decline requests for reviews of the work of others when they believe that the review process may be biased or when they have questions about the integrity of the process.
(d) If asked to review a manuscript, book, or proposal they have previously reviewed, sociologists make it known to the person making the request (e.g., editor, program officer) unless it is clear that they are being asked to provide a reappraisal.

18. Education, Teaching, and Training
As teachers, supervisors, and trainers, sociologists follow the highest ethical standards in order to ensure the quality of sociological education and the integrity of the teacher-student relationship.

18.01 Administration of Education Programs
(a) Sociologists who are responsible for education and training programs seek to ensure that the programs are competently designed, provide the proper experiences, and meet all goals for which claims are made by the program.
(b) Sociologists responsible for education and training programs seek to ensure that there is an accurate description of the program content, training goals and objectives, and requirements that must be met for satisfactory completion of the program.
(c) Sociologists responsible for education and training programs take steps to ensure that graduate assistants and temporary instructors have the substantive knowledge required to teach courses and the teaching skills needed to facilitate student learning.
(d) Sociologists responsible for education and training programs have an obligation to ensure that ethics are taught to their graduate students as part of their professional preparation.
18.02 Teaching and Training
(a) Sociologists conscientiously perform their teaching responsibilities. They have appropriate skills and knowledge or are receiving appropriate training.
(b) Sociologists provide accurate information at the outset about their courses, particularly regarding the subject matter to be covered, bases for evaluation, and the nature of course experiences.
(c) Sociologists make decisions concerning textbooks, course content, course requirements, and grading solely on the basis of educational criteria without regard for financial or other incentives.
(d) Sociologists provide proper training and supervision to their teaching assistants and other teaching trainees and take reasonable steps to ensure that such persons perform these teaching responsibilities responsibly, competently, and ethically.
(e) Sociologists do not permit personal animosities or intellectual differences with colleagues to foreclose students’ or supervisees’ access to these colleagues or to interfere with student or supervisee learning, academic progress, or professional development.

19. Contractual and Consulting Services
(a) Sociologists undertake grants, contracts, or consultation only when they are knowledgeable about the substance, methods, and techniques they plan to use or have a plan for incorporating appropriate expertise.
(b) In undertaking grants, contracts, or consultation, sociologists base the results of their professional work on appropriate information and techniques.
(c) When financial support for a project has been accepted under a grant, contract, or consultation, sociologists make reasonable efforts to complete the proposed work on schedule.
(d) In undertaking grants, contracts, or consultation, sociologists accurately document and appropriately retain their professional and scientific work.
(e) In establishing a contractual arrangement for research, consultation, or other services, sociologists clarify, to the extent feasible at the outset, the nature of the relationship with the individual, organizational, or institutional client. This clarification includes, as appropriate, the nature of the services to be performed, the probable uses of the services provided, possibilities for the sociologist’s future use of the work for scholarly or publication purposes, the timetable for delivery of those services, and compensation and billing arrangements.

20. Adherence to the Code of Ethics
Sociologists have an obligation to confront, address, and attempt to resolve ethical issues according to this Code of Ethics.

20.01 Familiarity with the Code of Ethics
Sociologists have an obligation to be familiar with this Code of Ethics, other applicable ethics codes, and their application to sociologists’ work. Lack of awareness or misunderstanding of an ethical standard is not, in itself, a defense to a charge of unethical conduct.
20.02 Confronting Ethical Issues
(a) When sociologists are uncertain whether a particular situation or course of action would violate the Code of Ethics, they consult with other sociologists knowledgeable about ethical issues, with the ASA’s Committee on Professional Ethics, or with other organizational entities such as institutional review boards.
(b) When sociologists take actions or are confronted with choices where there is a conflict between ethical standards enunciated in the Code of Ethics and laws or legal requirements, they make known their commitment to the Code and take steps to resolve the conflict in a responsible manner by consulting with colleagues, professional organizations, or the ASA’s Committee on Professional Ethics.

20.03 Fair Treatment of Parties in Ethical Disputes
(a) Sociologists do not discriminate against a person on the basis of his or her having made an ethical complaint.
(b) Sociologists do not discriminate against a person based on his or her having been the subject of an ethical complaint. This does not preclude taking action based upon the outcome of an ethical complaint.

20.04 Reporting Ethical Violations of Others
When sociologists have substantial reason to believe that there may have been an ethical violation by another sociologist, they attempt to resolve the issue by bringing it to the attention of that individual if an informal resolution appears appropriate or possible, or they seek advice about whether or how to proceed based on this belief, assuming that such activity does not violate any confidentiality rights. Such action might include referral to the ASA’s Committee on Professional Ethics.

20.05 Cooperating with Ethics Committees
Sociologists cooperate in ethics investigations, proceedings, and resulting requirements of the American Sociological Association. In doing so, they make reasonable efforts to resolve any issues of confidentiality. Failure to cooperate may be an ethics violation.

20.06 Improper Complaints
Sociologists do not file or encourage the filing of ethics complaints that are frivolous and are intended to harm the alleged violator rather than to protect the integrity of the discipline and the public.

Policies and Procedures
Committee on Professional Ethics
American Sociological Association

(Approved by the ASA Membership in June 1997)

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INTRODUCTION

These Policies and Procedures describe the responsibilities of the Committee on Professional Ethics (COPE) of the American Sociological Association (ASA), the general operating rules of COPE, and the policies and procedures related to the submission and resolution of complaints of violations of the ASA Code of Ethics.

PART I. RESPONSIBILITIES AND AUTHORITY OF COPE

1. Responsibilities

COPE has been established by the Council of the ASA in order to promote ethical conduct by sociologists at the highest professional level through development and sponsorship of educational activities for ASA members and other sociologists, investigation of complaints concerning the ethical conduct of members of the ASA, and imposition of sanctions when a violation of the Code has occurred.

2. Authority of COPE

COPE is authorized to:

(a) Publicize the Code of Ethics to the members of the ASA and other interested persons.

(b) Educate the members of the ASA and other interested persons concerning the ethical obligations of sociologists under the Code of Ethics through articles, seminars, lectures, casebooks, or other materials.

(c) Recommend to the ASA Council changes in the Code of Ethics and these Policies and Procedures.

(d) Provide to individual members of the ASA on an informal and confidential basis advice regarding their ethical obligations under the Code of Ethics.

(e) Seek to resolve allegations of unethical conduct of members of the ASA informally through mediation or other means.

(f) Investigate allegations of unethical conduct of members of the ASA, determine violations of the Code of Ethics, and, where appropriate, impose sanctions.

(g) Adopt such rules and procedures governing the conduct of all matters within its jurisdiction as are consistent with the Constitution and By-Laws of the Association, the Code of Ethics, and these Policies and Procedures.

3. Responsibilities of the Executive Office

(a) Works with COPE in the administration of 2(a)-(g).

(b) Reports to COPE on an annual basis the number and types of complaints received, the number recommended for informal resolution, and any other pertinent information regarding the involvement of the Executive Office in ethics inquiries.
PART II. OPERATING RULES OF COPE

1. Membership
   The members of COPE shall be appointed in accordance with the By-Laws of the Association. After the end of his/her term of office, a member of COPE may continue to participate in the investigation of a matter to which he/she was previously assigned, and such member may participate in reaching the findings and recommendation of the Investigation Panel with respect to that matter.

2. Officers
   The Chair and Co-Chair of COPE shall be appointed at the Council meeting held during the Annual Meeting of the Association and shall serve a term of one (1) year beginning on January 1 of the next calendar year. Prior to the Annual Meeting, COPE shall deliver to the Council its recommendations for the Chair and Co-Chair for the succeeding year. The Chair shall have primary responsibility for carrying out the mandate of COPE. The Co-Chair shall have the authority to perform all of the duties of the Chair when the latter is unavailable or unable to perform them and shall perform other tasks as delegated by the Chair.

3. Meetings
   A regular meeting of COPE shall be held annually in connection with the Annual Meeting of the Association. Additional meetings may be held, upon the call of the Chair, from time to time in person or by telephone conference call.

4. Quorum and Voting
   A quorum for the transaction of business at any meeting of COPE shall consist of a majority of the members then in office. All decisions shall be by majority vote of the members present at a meeting.

5. Voting by Mail
   Any action of COPE which could be taken at a meeting may be taken upon the affirmative vote, in writing or by electronic communication, of a majority of members then in office.

6. Conflicts of Interest
   No member of COPE shall participate in the deliberations or decision of any matter with respect to which the member has a conflict of interest as outlined in the Code of Ethics.
PART III. ENFORCEMENT OF THE CODE OF ETHICS

1. Jurisdiction
   (a) COPE shall have jurisdiction to receive and determine any timely complaint of the violation of the ASA Code of Ethics by a current member of the ASA in any category of membership whatsoever. In the event that a complainee resigns from the ASA subsequent to the filing of a complaint against him or her, COPE shall have discretion to resolve the complaint as if the complainee were still a member.
   (b) In the event that a complaint alleges conduct which is, or may be, the subject of other legal or institutional proceedings, COPE may, in its discretion, defer further proceedings with respect to the complaint until the conclusion of the other legal or institutional proceedings.

2. Filing of Complaint
   (a) Any member or non-member of the ASA who perceives that an ASA member has violated an ethical standard may file a complaint with COPE.
   (b) A complaint may be initiated by COPE on its own behalf.
   (c) Initial telephone contact with the Executive Officer or his/her designee is encouraged to clarify whether concerns about a possible ethical violation are covered by the Code. If it appears that a potential complaint may be covered by the Code, a copy of the Code and a complaint form shall be sent to the potential complainant. Informal dispute resolution and use of other venues of investigation will be encouraged.
   (d) A complaint may not be accepted or initiated if it is received more than 18 months after the alleged conduct either occurred or was discovered. A complaint received after the 18-month time limit set forth in this paragraph shall not be accepted unless the Chair of COPE determines that there is good cause for the complaint not to have been filed within the 18-month time limit. No complaint will be considered if it is received more than five years after the alleged conduct occurred or was discovered.
   (e) A complaint shall include the name and address of the complainant; the name and address of the complainee; the provisions of the Code of Ethics alleged to have been violated; a statement that other legal or institutional proceedings involving the alleged conduct have not been initiated or, if initiated, the status of such proceedings; a full statement of conduct alleged to have violated the Code of Ethics, including the sources of all information on which the allegations are based; copies of any documents supporting the allegations; and, if necessary, a request that the 18-month time limit be waived. Anonymous complaints shall not be accepted. If material in the public domain is provided anonymously, COPE may choose to use such material in support of its own complaint.

3. Preliminary Screening of Complaint
   (a) The Executive Officer or his/her designee shall screen each complaint to determine whether the complainee is a member of the ASA and whether the alleged conduct is covered by the Code. If the complaint does not include the information required by 2(e), the Executive Officer or his/her
designee shall so inform the complainant, who will be given the opportunity to provide additional information. If no response is received from the complainant within thirty (30) days, the matter will be closed and the complainant so notified.

(b) If the complaint is complete as set forth in 2(e), the Executive Officer or his/her designee shall notify the Chair of COPE and provide relevant materials regarding the complaint. The Chair of COPE and the Executive Officer or his/her designee shall evaluate whether there is cause for action by COPE. Cause for action shall exist when the complainee’s alleged actions and/or omissions, if proved, would in the judgment of the Chair of COPE and the Executive Officer or his/her designee constitute a breach of ethics. For purposes of determining whether cause for action exists, incredible, speculative, and/or internally inconsistent allegations may be disregarded. If cause for action exists, a formal case is initiated, as set forth in 4(a). If cause for action does not exist, the complaint will be dismissed at this stage and the complainant so notified.

4. Notice of Complaint and Informal Resolution
   (a) If cause for action is found, the Executive Officer or his/her designee shall provide a copy of the complaint and all supporting materials, and a copy of the Code of Ethics and these Policies and Procedures, to the complainee and encourage a settlement through informal means. If a method of informal dispute settlement is not otherwise available to the complainant and complainee, a mediator who is not a member of COPE may be recommended by the Executive Officer or his/her designee. Mediation services will in most cases be by written correspondence or telephone. If informal dispute resolution is declined, the members of COPE shall not be informed which party declined.
   (b) Any person appointed to serve as a mediator shall agree to maintain the confidentiality of the proceedings as set forth in the Code of Ethics and these Policies and Procedures. The mediator shall report to the Executive Officer or his/her designee only whether or not a matter has been resolved to the satisfaction of the parties.

5. Response to Complaint
   If either or both the complainant and complainee decline informal dispute settlement or if informal dispute settlement fails to resolve the complaint, the Executive Officer or his/her designee shall notify the complainee that the case will go forward in accordance with these Policies and Procedures. Complainee shall have thirty (30) days after receipt of this notice to respond in writing to the complaint. An extension may be granted by the Executive Officer if good cause is shown, but the extension shall not exceed ninety (90) days.

6. Initial Determination of the Chair
   The complaint and response shall be submitted to the Chair of COPE for an initial determination whether there is sufficient evidence to proceed with the case. The Chair may, in his/her discretion, request additional information from the complainant and/or any other appropriate source before making the initial
determination, provided, however, that the Chair shall not rely on such additional information unless it has been shared with the complainee and the complainee has been afforded an opportunity to respond. If the Chair shall decide that there is insufficient evidence to proceed, the matter shall be closed and the complainant and complainee notified in writing.

7. Investigation and Recommendation

If the Chair determines that there is sufficient evidence to proceed with the complaint, he/she shall appoint an Investigation Panel composed of the Chair or Co-Chair and two members of COPE to investigate the complaint. The Panel may communicate with the complainant, complainee, witnesses, or other sources of information necessary to carry out its functions. The Panel shall conduct as much of its business as is practical through written correspondence or verbal communication. Although complainants and complainees have the right to consult with attorneys concerning all phases of the ethics process, the complainant must file and the complainee must respond to charges of unethical conduct personally and not through legal counsel or another third party, unless the complainant or complainee provides good cause as to why he or she cannot respond personally. The Panel shall submit a written report of its findings and any recommendation for sanction to the full Committee within ninety (90) days, unless a longer period is necessary in the opinion of the Chair or Co-Chair. A copy of the Panel's findings and recommendation shall be provided to the complainant and complainee, who may submit a response in writing within a time frame of not more than thirty (30) days.

8. Determination of Violation

COPE shall determine whether a violation of the Code of Ethics has occurred on the basis of the complaint, the response, any other information provided to the Investigation Panel, the recommendation and findings of the Panel, and the responses of the parties thereto, provided, however, that COPE may hear the testimony of witnesses where in its view it is essential to the fairness of the proceeding. COPE may return any matter to the Investigation Panel for further investigation. Upon completion of its review, COPE shall issue a determination of whether one or more violations of the Code of Ethics have occurred, including a summary of the factual basis for this determination, and of the appropriate sanction.

9. Sanctions

In any case in which it has determined that a violation of the Code of Ethics has occurred, COPE may impose no sanction or one or more of the following, as appropriate:

(a) **Private Reprimand.** In cases where there has been an ethics violation but the violation did not cause serious personal and/or professional harm, an educative letter concerning the violation, including any stipulated conditions of redress, may be sent to the complainee. Failure to comply with stipulated conditions of redress in a reprimand may result in the imposition of a more severe sanction.
(b) **Public Reprimand.** Where COPE determines that the seriousness of the violation warrants more than a private reprimand, it may direct that a copy of the letter of reprimand be made public in an appropriate manner.

(c) **Denial of Privileges.** In appropriate cases, COPE may determine that a complainee shall be denied one or more of the privileges of ASA membership and/or the opportunity to participate in ASA-sponsored activities including but not limited to appointment to the editorial boards of any ASA publications, election or appointment to any ASA offices and committees, receipt of any ASA awards, publishing in or serving as an editor of one or more ASA-sponsored journals, presenting a paper or otherwise participating at one or more meetings sponsored by the ASA, or receiving research or scholarship assistance from any program sponsored by the ASA.

(d) **Termination of Membership.** In cases where there has been an ethics violation and the violation caused serious personal and/or professional harm, the ASA membership of the complainee may be terminated for a period to be determined by COPE. Eligibility to renew membership at the expiration of this period may be automatic or may be conditioned on a future determination by COPE that eligibility is appropriate.

10. **Notice of Determination**

The Chair of COPE shall notify the complainant and complainee of the decision of COPE. If a sanction is imposed under 9(c) or 9(d), COPE shall instruct the Executive Officer to take the appropriate actions called for under COPE's determination, except that such notice shall be postponed if an appeal is filed as set forth in paragraph 11.

11. **Appeal of Termination**

A complainee who is found by COPE to have violated the Code of Ethics and who receives a sanction under 9(b) through 9(d) may appeal this determination by filing a Notice of Appeal and Statement of Reasons no later than thirty (30) days after receipt of the Notice of Determination. If an appeal is filed, the President of the ASA shall appoint a three-member Appeal Panel of past members of COPE to review all information considered by COPE and, within ninety (90) days, make a decision to uphold or reverse the determination. The Appeal Panel may set aside COPE's determination that a violation has occurred or it may determine that the sanction imposed by COPE is not appropriate and impose a less severe sanction. The decision of the Appeal Panel shall constitute the final decision of the ASA with respect to all matters subject to this paragraph.

12. **Confidentiality**

(a) The filing of a complaint against an ASA member and all proceedings held under this Part III shall be kept confidential by COPE, the Investigation Panel, the Appeal Panel, and the President of the ASA prior to a final determination of the matter, except that information regarding complaints may be shared with the Executive Officer, any staff designated by the Executive Officer to assist COPE, and ASA legal counsel. Determinations of
violations of the Code of Ethics by COPE or by an Appeal Panel shall be kept confidential, except in the case of termination of membership, or unless disclosure of the determination to the public is imposed as part of another sanction. The name of each individual whose membership is terminated and a brief statement of the reason for termination shall be reported annually to the ASA Council and in the official newsletter of the ASA.

(b) The Committee may disclose such information when compelled by a valid subpoena or by a final court order.

(c) Notwithstanding the foregoing, COPE may publish reports of its determinations in order to educate the membership about the requirements of the Code of Ethics but will not make the identity of the parties public unless otherwise provided for in Part III, section 12(b).

(d) Initiation of legal action against the ASA or its officers or employees shall constitute a waiver of confidentiality by the person initiating such action.

(e) Records relating to the investigation of complaints of violations of the Code, whether or not COPE determined that a violation occurred, shall be maintained in a secure place indefinitely. These records should always remain confidential, unless otherwise provided for in 12(b) and 12(d). Permission to use these materials for research and educational purposes may be granted by the Executive Officer within the first fifty (50) years of the closing of the complaint, as long as the materials do not identify the individuals involved. After fifty (50) years, these materials are available for research or educational purposes without special approval as long as the commitment to confidentiality is honored and the materials do not identify the individuals involved.