Ethical Transgressions of Psychology Graduate Students: Critical Incidents With Implications for Training

Barbara J. Fly, William P. van Bark, Laura Weinman, Karen Strohm Kitchener, and Patrick R. Lang
University of Denver

The critical incident technique (J. C. Flanagan, 1954) was used to investigate ethical transgressions made by psychology graduate students. Training directors of American Psychological Association-accredited programs in the United States and Canada provided descriptions of incidents involving ethical transgressions, how they learned of the situations, what action was taken, and why the situations involved ethical issues. The incidents were sorted into eight categories concerning confidentiality, professional boundaries, plagiarism or falsification of data, welfare, procedural breach, competency, integrity—dishonesty, and misrepresentation of credentials. Most often students were required to do remedial work or were dismissed from their program. Implications for ethics training are discussed.

Although the annual reports of the Ethics Committee of the American Psychological Association (APA, 1994, 1995) document the fact that some psychologists violate the ethics code (APA, 1992) of the profession, little is known about similar ethical transgressions among graduate students (Mearns & Allen, 1991). Results of one such study indicated that 95% of responding students had dealt with at least one issue of impairment or ethical impropriety with a peer during their graduate training. Of the faculty respondents, 93% reported being aware of a serious impairment in a student within the last 5 years (Mearns & Allen, 1991).

BARBARA J. FLY received her PhD in counseling psychology from the University of Denver in 1995. She is currently in independent practice specializing in the treatment of children and families. She is also an adjunct professor at Chapman University in ethics and the advanced treatment of children and adolescents.

WILLIAM P. VAN BARK is a PhD candidate in counseling psychology at the University of Denver. His research interests are in ethics and men's issues.

LAURA WEINMAN is a PhD candidate in counseling psychology at the University of Denver. Her research interests are in ethics and the therapeutic relationship.

KAREN STROHM KITCHENER received her PhD in counseling psychology from the University of Minnesota in 1978. She is a professor and chairperson of the Counseling Psychology Division of the College of Education at the University of Denver. She is a former chairperson of the American Psychological Association Ethics Committee.

PATRICK R. LANG is a PhD candidate in the Child and Family Studies program at the University of Denver. A licensed counselor in private practice and at Kent Denver School, he is also affiliated with the Program in Health Care Ethics, Humanities and Law at the University of Colorado School of Medicine.

BARBARA J. FLY and WILLIAM P. VAN BARK are the joint first authors of this article.

WE WISH TO THANK Chuck Dennison, Alma Margeson, Sharon Anderson, and Tom Willens for their assistance in developing the questionnaire. CORRESPONDENCE CONCERNING THIS ARTICLE should be addressed to Karen Strohm Kitchener, Counseling Psychology Program, College of Education, University of Denver, Denver, Colorado 80208.

The Exploratory Project

In our investigation, we used the critical incident technique (CIT) procedure, which was developed by Flanagan (1954) to study human behavior in a systematic manner. The CIT was used to generate the initial ethical problems for the first APA code of ethics (Pope & Vetter, 1992). The CIT is not a rigid set of rules for data collection but, rather, is a flexible set of principles that can be modified to fit a specific setting. The procedure involves gathering incidents of extreme behavior in defined situations (Flanagan, 1954). Extreme behaviors are used because they can be more accurately identified than routine behaviors, and situations are clearly defined in order to analyze the general aims of the activity. In addition, the CIT uses reports from qualified observers who are able to evaluate observations on the basis of defined objectives. In our investigation, the observers were the clinical and counseling psychology program training directors.

The CIT questionnaire first requested basic demographic information of the respondents and then requested respondents to recount up to three incidents of ethical transgressions made by students enrolled in their training programs. Respondents were told to define transgressions broadly as any error considered to be ethical in nature, not just ones that violated the APA ethics code. They were asked to describe the incident; state how they learned of the situation; describe what action, if any, was taken in response to the transgression; and provide enough detail (e.g., student year, gender, and so forth) that a reader could form a relatively clear picture of the situation. The training directors were also asked to explain why they believed the incident involved an ethical issue.

In the fall of 1992, we sent questionnaires to all 243 training directors of APA-accredited clinical and counseling programs in the United States and Canada. A total of 75 questionnaires were returned, for a response rate of 31%. Eighty-nine incidents were reported by 47 respondents. Others reported no ethical transgressions (n = 18), discussed ethical issues rather than transgressions (n = 4), or chose not to respond (n = 6). Although the response rate was low, it was not atypical for this
type of exploratory research (Anderson & Kitchener, 1996; Goodyear, Crego, & Johnson, 1992). Furthermore, the purposes of the study were not to obtain a random sample in order to make generalizations. Rather, because this was as an exploratory study, our purposes were (a) to describe and classify the kinds of ethical transgressions faculty report students make while in graduate school and (b) to identify how faculty responded to the transgressions when they were identified. As a consequence, the figures reported herein represent the proportion of reported transgressions and do not necessarily reflect the percentage of students who have difficulty with these issues.

The critical incidents were typed on cards and then sorted by two teams of readers. The result of the incident sorting process identified eight major categories. The categories, definitions, percentages of ethical transgressions within the categories, and examples of responses are provided below. Identifying information in the examples has been changed to protect the anonymity of the respondents and the students.

Confidentiality (25%)  

This category was composed of incidents in which students failed to maintain confidentiality of clients, fellow students, colleagues, or faculty, either verbally or in the storage, transportation, or dissemination of material. Examples included the following:

1. A student in a practicum discussed a client (without using the client’s name) in a social setting. Another person present in the social setting was able to identify the client and told the client about the fact that he or she was discussed outside of therapy.

2. A student on internship took home a report (with identifying data) in his or her vehicle. The report dropped out of the vehicle near the internship site. A person who was not connected to the internship site found the report and returned it to the training director.

Professional Boundaries, Sexual and Nonsexual (20%)  

In this category were incidents in which the student initiated, accepted, or engaged in a conversation or behavior of an intimate, romantic, or harassing nature with clients, fellow students, supervisors, or faculty. Such actions exceeded appropriate professional boundaries. Examples of these types of incidents included the following:

1. A practicum student invited a client, who was ostensibly depressed and lonely, to the student’s apartment on the weekend if the client became depressed or lonely. (The client did not take the student up on the offer.)

2. A practicum student did an intake evaluation, including a sexual history, of a prospective client of the opposite gender. The student later called the client to say he or she would not be assigned as the client’s therapist but was available to see the client socially.

Plagiarism or Falsification of Data (15%)  

Incidents in this category involved a student using elements of another’s work or data without obtaining permission or citing the source appropriately. Examples of such incidents included the following:

1. A student plagiarized an article, almost in its entirety, and submitted it to an instructor with no reference to the source. The instructor was familiar with the article.

2. Two students had identical, unusual errors on their departmental comprehensive examinations.

Welfare (10%)  

This category was composed of incidents in which a student’s conduct had the potential to place a client at risk for harm because of incomplete documentation; questionable judgment; inadequate consultation, supervision, or referral; or personal problems. Examples of incidents in this category included the following:

1. A student at a practicum site used new equipment as a treatment for pain. This student misused the equipment, keeping the client in a painful position for almost an hour. The client reported the incident to the supervisor, but the student denied it had happened. Equipment printouts were consulted that indicated the client was right. The student admitted he or she had lied out of fear of being removed from the program.

2. A student at a practicum site gathered information on a child sufficient to warrant suspicion of sexual abuse by the child’s parent. However, the student failed to report the suspicion, even though his or her supervisor instructed the student to do so. The student revealed that the information obtained from the child was audiotaped without the parental consent and without the child’s knowledge.

Procedural Breach With Ethical Implications (10%)  

This category included incidents in which the student failed to comply with department, placement, clinic, or other institutional policies, rules, or standards of conduct. Examples included the following:

1. A practicum student at an inpatient facility permitted a patient to leave the facility on a pass without the required authorization from a supervising psychiatrist.

2. A student took a client’s chart home to work on progress notes. It was against facility policy to remove charts from the site.

Competency (9%)  

Incidents involving competency were characterized by a student providing or terminating services without proper training or with inadequate knowledge of laws, testing procedures, therapeutic techniques, or other elements of appropriate practice. Examples of these types of incidents included the following:

1. A student used a therapeutic technique with a client without having had training or supervision and without having researched the procedure.

2. A practicum student administered the Minnesota Multiphasic Personality Inventory to a foreign-born client for whom English was a weak second language. The student then interpreted test items for the client that the client had not understood.
The test was scored and interpreted to the client as a valid profile.

**Integrity—Dishonesty (8%)**

This category included those incidents in which a student lied to protect himself or herself, to avoid work, or to advance himself or herself. One example of such an incident involved a student who led a supervisor to believe he or she was counseling a client when, in fact, the student was not appearing for appointments.

**Misrepresentation of Credentials (3%)**

This final category was composed of incidents in which the student made public statements about credentials that were false, fraudulent, or misleading. One example of such an incident is the following: A student who was enrolled in a training program was seeing clients privately for hypnotherapy. The student saw a client for several months before it came to the training director’s attention. This student had a business card calling himself or herself a psychologist (which was illegal in the state where the incident occurred) and was clearly conducting psychotherapy in addition to hypnosis.

**Students Who Made Ethical Transgressions**

Training directors reported that 54% of the students who made these ethical transgressions had already had an ethics course. In addition, they reported that they most frequently learned of the incidents from a third party (36%), such as a friend or relative of the client, coworkers, practicum site staff, or peers. The second most prevalent way transgressions came to the training directors’ attention was when faculty members or the training director witnessed the incident (25%). Other categories used to describe how training directors learned of transgressions included intentional and unintentional self-reports (15%), faculty recognized plagiarism (10%), reports made by clients or victims (7%), and unknown (7%).

The two most common actions taken in response to ethical transgressions were confrontation with a stipulation for some kind of remedial action, such as restitution, probation, reimbursement, and so forth (44%), and dismissal from the program (22%). Other categories of responses included no consequence (6%), referral for additional review (5%), counseling the student to drop out of the program (3%), dismissal of the student from the practicum (3%), course of action unknown (3%), and voluntary withdrawal from the program (2%).

**Implications for Training and Practice**

Dual-role relationships and confidentiality were described more frequently because they were considered most important or most potentially harmful. Other transgressions may in fact occur more frequently.

The incidents training directors described in the areas of dual-role relationships and confidentiality were serious. They, along with the transgressions in the competency category, could have had harmful effects on clients and seemed to reflect a failure to understand or abide by the core ethical values of the profession. In a similar manner, the categories of plagiarism or falsification of data, integrity—dishonesty, and misrepresentation of credentials all reflect some kind of dishonesty. These transgressions seemed to suggest that the students involved either did not value or did not understand the importance of honesty and integrity in maintaining trusting human relationships, a central value in psychology training.

The fact that most of the incidents occurred even after the student had training in ethics suggests the importance of focusing more attention in ethics education on these areas. It is possible that some of these problems, like those involving boundary issues and confidentiality, are more difficult for students to identify and confront because they potentially occur under so many conditions. Other incidents, such as plagiarism, were more blatant and may indicate the importance of attending to character issues in student selection.

**Teaching Moral Behavior**

The fact that most of these incidents occurred after ethics coursework may suggest that as a profession, we are not thinking broadly enough about how to help students develop ethical behavior. Although there is no formula for teaching new professionals how to avoid ethical transgressions, the psychological literature on moral behavior (Rest, 1983, 1986) provides some direction. On the basis of a review of the literature on morality, Rest identified four components that are involved in producing moral behavior. Ethics curricula that address all of these components may be more successful in preparing new professionals to appropriately negotiate ethical situations than those that do not.

Component 1, which Rest called interpreting the situation, involves being sensitized to the moral aspect of the event, considering the consequences of different choices made by the people involved, and trying to sort out one’s feelings about the issue. Faculty can address this component by providing students with multiple examples of ethical situations that involve issues like confidentiality or multiple-role relationships, having students identify their feelings about the situations, and then suggesting what they would do or say. The ensuing discussions could provide opportunities for students to consider alternatives other than their own, to talk about the potential consequences for the different people involved, and to stimulate their moral empathy (Kitchener, 1986). Role-playing cases involving potential or actual transgressions and the use of vignettes, such as those developed by Steres (1992), to help students deal with sexual feelings in therapy also can achieve the same goals.

Rest called Component 2 formulating the morally ideal course of action. Using Component 2 processes, the individual chooses between possible courses of action and decides one is more
ethical than another. Rest pointed to the moral development literature suggesting conceptions of justice and social cooperation develop over time with changes in cognitive ability. Although age and education play major roles in promoting complex thinking about moral problems, one's level of moral judgement reflects more basic moral growth (Rest, 1983). Thus, ethics education that ignores students' ability to conceptualize ethical issues will likely have little impact on students' core thinking about moral issues. If students with an inadequate ability to conceptualize moral issues are selected into graduate programs, ethics education may be doomed to fail. On the other hand, even those who have the capacity to make complex moral judgements may still not have the tools to do so. Introducing students to general ethical decision-making models, like those suggested by Haas and Malouf (1989) or Kitchener (1984), or specific models regarding multiple-role relationships, such as suggested by Gottlieb (1993), may help.

The processes involved in Component 3, deciding what one actually intends to do, focus on deciding between moral values and other competing values. Values like self-interest, financial reward, or friendship may interfere with what one knows to be the right moral course of action. In this case, educators can help students recognize the human dimensions and weaknesses involved in making ethical mistakes. To do so, Borys and Pope (1989) suggested that ethics classes and training programs in general need to provide a safe atmosphere where students can examine those impulses that might lead them to unwittingly break client confidence, stumble into harmful dual-role relationships, and so on.

Furthermore, faculty have to model the importance of being ethical (Kitchener, 1986) as well as the values of honesty that they expect their students to exhibit. As psychologists, we know that modeling is a powerful tool for learning. If faculty model disrespectful, dishonest, or exploitative relationships, the implicit message is that these attitudes are acceptable. If students received this implicit message, it would not be surprising if they did not place a high value on the ethical models and rules they learned in their ethics class about avoiding multiple-role relationships or being honest and competent.

The last component Rest identified sometimes comes under the rubric of ego strength or character. He referred to it as executing or implementing a course of action. It is basically the willingness (a) to do the right thing, sometimes even by sacrificing one's self-interest, or (b) to risk being different. Here, it might be helpful to suggest to students that they develop a moral community to provide them with consultation and support when they are faced with tough moral decisions. At the same time, faculty can address the real professional consequences of acting unethically for the student (e.g., loss of insurance, loss of status, cost of career) as well as the consequences for the consumer (Borys & Pope, 1989).

Issues of character are related to a question raised by one respondent regarding the possible relationship between underlying characterological features or disorders among some graduate students and the prevalence of ethical transgressions. The question seemed important because so many of the reported ethical transgressions were quite blatant. It may also be the case that the profession needs to distinguish between problematic behavior and underlying impairment (Lamb, Cochran, & Jackson, 1991). The question of whether this distinction enlightens psychology's understanding of ethical transgressions may also be an important topic for future investigation. Considering ethical transgressions often harm those whom psychologists have promised to help, it is important for the profession to further investigate the frequency and causes of ethical transgressions in addition to helping students avoid them.

References


Received October 10, 1995
Revision received February 10, 1997
Accepted April 18, 1997