

Ethical Dilemmas in Professional Psychology

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Introduction

The problem: Case Summary

A psychologist gets a telephone call from a notable internist in her general vicinity. The therapist is engaged with a bustling practice, has some expertise in treating dietary issues, and gets just infrequent referrals from this doctor. The doctor needs the therapist to treat his 17-year-old little girl, who endures with what he depicts to be a dietary issue and maybe some Borderline Personality Disorder qualities. The doctor clarified that he had been sedating her for around four months with Prozac and Klonopin once he ended up mindful of her eating scattered conduct. Due to his status as a notable internist, he wouldn't like to elude his girl to a therapist since he trusts that he can deal with the prescription bit of her treatment. He will likewise pay for all treatment in real money, as he needs as few individuals and associations to think about his little girl's issues. Feeling fairly awkward with the medicine administration issue, the clinician demonstrates that she should get back to him subsequent to taking a gander at her calendar. The psychologist, at that point, telephoned you for a casual discussion. The clinician communicates her worries about working with a patient whose father is recommending a solution.

Describe the ethical issues involved in the Dilemma.

Various ethical issues arise in this dilemma. In the first place, the father, who is a licensed medical practitioner, shows a willingness to treat his daughter as a professional and a father. Having worked with medical specialists and their relatives, I am not as suspicious about the father's inspiration to maintain privacy. From my experience, medical specialists favor however much protection as could be expected, acknowledging how effortlessly private data is accidentally disclosed. From my vantage point, the eating disorder a little daughter exhibits is a complex clinical circumstance. The issue that the psychologist needs to determine is whether she feels great with the parent-medical specialist being the endorsing proficient and what limits or suggestions she may have about the clinical circumstance. Contingent upon how the psychologist assesses the clinical factors, she may choose to assess, assess with conditions, or not acknowledge the referral.

Ethical Guidelines

Point 5. The activity of the psychologist is directed to the achievement of such humanitarian and social goals as well-being, health, high quality of life, and the full development of individuals and groups in various forms of individual and social life. Since the psychologist is not the only professional whose activities are aimed at achieving these goals, exchange and cooperation with representatives of other professions are desirable and, in some cases, necessary, without any prejudice to the competence and knowledge of any of them.

Point 6. Psychology as a profession is governed by the principles common to all professional ethics: respect for the individual, protection of human rights, sense of responsibility, honesty and sincerity towards the client, prudence in the application of tools and procedures, professional competence, firmness in achieving the goal of intervention and its scientific basis.

Point 7. Psychologists should not participate or contribute to the development of methods against the freedom of the individual and his physical or psychological integrity. Direct development or assistance in the implementation of torture or bullying, in addition to being a crime, constitutes the most serious violation of the professional ethics of psychologists. They should not in any capacity, either as researchers or as assistants or accomplices, take part in torture or any other cruel, inhuman, or degrading acts, no matter who their object, no matter what charges or suspicions against this person are made, and whatever information might be obtained from it in such a way in the context of a military conflict, civil war, revolution, terrorist actions or any other circumstances that could be interpreted as an excuse for such actions. (American Psychological Association, 2017)

Point 8. All psychologists should, at a minimum, inform their professional associations of violations of human rights, bullying, cruelty, inhuman or degrading conditions of imprisonment, whoever is their victim, and of any such case that has become known to them in their professional practice.

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Paragraph 9. Psychologists should respect the religious and moral beliefs of their clients and take them into account in the interview required by professional intervention.

Paragraph 10. When providing assistance, psychologists should not discriminate on the grounds of origin, age, race and social belonging, gender, religion, ideology, nationality or any other differences.

Paragraph 11. Psychologists should not use the power or superiority of the client that their profession provides to generate profit or obtain benefits for themselves or for third parties.

Point 12. Especially in written documents, psychologists should be extremely cautious, restrained, and critical in relation to their concepts and conclusions, taking into account the possibility of their perception as pejorative and discriminating, for example, normal – abnormal, adapted – unadapted, intelligent – mentally retarded.

Point 13. Psychologists should not use manipulative procedures in order to reach certain clients and also act in such a way as to become monopolists in their field. Psychologists working in public organizations should not use this advantage to increase their own private practice.

Point 14. The psychologist should not allow the use of his name or signature by persons who do not have the proper qualifications and training for the illegal use of psychological methods. Psychologists should report all cases of encroachment on other people's rights, which they have become known. Useless and deceptive actions should not be covered by the qualifications of a psychologist.

Paragraph 15. In the event that the client's personal interests conflict with the interests of the institution, the psychologist should try to perform his functions with the utmost impartiality. Seeking help in this institution involves the consideration of the client's interests, respect, and attention by a psychologist, who, in appropriate circumstances, can act as his advocate in relation to the administration of the institution.

About professional competence and relations with other professionals

Item 16. The rights and duties of a professional psychologist are based on the principle of professional independence and autonomy regardless of the official position in a particular organization and from professionals of higher rank and administration.

Point 17. The professional status of a psychologist is based on his abilities and qualifications, which are necessary for the performance of his duties. The psychologist should be professionally trained and have a specialization in the application of methods, tools, and procedures used in this field. Part of his work is the constant maintenance of the current level of his professional knowledge and skills.

Paragraph 18. The psychologist should not apply methods and procedures that have not been adequately tested in the framework of modern scientific knowledge without prejudice to the existing variety of theories and schools. In the case of testing psychological methods that have not yet been scientifically evaluated, clients should not be fully notified of this in advance.

Paragraph 19. All psychological data, both the results of the survey and the information on intervention and treatment, should be available only to professional psychologists whose duties include keeping them out of incompetent persons. Psychologists should take measures to properly store the documentation.

Paragraph 20. When the interests of psychological examination or intervention require close cooperation with professionals from other areas, psychologists should ensure appropriate interaction so that it is directed at the benefit of the psychologist and his client.

Paragraph 21. Psychological methods should not be confused, both in the application and in their

presentation to the public, with methods alien to the scientific foundations of psychology. (Spielman et al., 2020)

Point 22. Without abandoning scientific criticism where it is necessary, psychologists should not discredit colleagues or representatives of other professions using the same or other scientific methods and should show respect for those schools and areas that are scientifically and professionally competent.

Paragraph 23. The work of a psychologist is based on the right and duty to show respect (and to enjoy it) to other professionals, especially in areas closely related to psychology in their activities.

Six Fundamental Moral Principles

Autonomy

Autonomy refers to the advancement of self-assurance or flexibility of customers to pick their own course; in fact, it is a sort of expert demonstration in a way that regards the desires and activities of the customer and their decisions. The littlest of energy that you can give a patient, small steps, can give your patient a great deal of self-assurance. Enable the patient to settle on decisions for themselves while controlling them.

Nonmaleficence

This means abstaining from doing hurt, including ceasing from activities that hazard harming customers. Think about the social ramifications of this command. This is the promise that we as a whole take when we start to work—DO NO HARM—Deliberately or something else.

Beneficence

Alludes to doing useful for others and advancing the prosperity of customers. Helpfulness likewise incorporates doing useful for society. ACA rules The essential obligation of advocates is to regard pride and to advance the welfare of customers. Experts should behave so as to build self-improvement and pride for the customer to the extent of their abilities. Additionally here you will see your own esteems in the way you behave in clinical settings.

Justice

Intends to be reasonable by offering similarly to others, paying little respect to age, sex, race, ethnicity, handicap, financial status, social foundation, religion, or sexual introduction has the

privilege to level with access to emotional wellness administrations. We should regard customers and patients regardless!

Fidelity

Experts make and stay faithful to their obligations to their customers and are particular to creating and keeping up a level of trust in the helpful relationship. Implies that experts make reasonable responsibilities and keep these guarantees. Satisfying one's duties of trust in a relationship.

Veracity

Specialists must be honest, precise, and legit with their customers keeping in mind the end goal to build up putting stock in a relationship. You should tell people when you can't make a guaranteed result; however, you don't need to be blunt to the point that you hurt the relationship.

Obtain Consultation

Acknowledging the referral without additional discourse or not acknowledging the referral does not create any ambiguity for the psychologist. The unverifiable psychologist might need to address a few issues with the medical specialist's father preceding accepting the referral and planning an arrangement. A standout amongst the most striking concerns is the different connections required with the referral. Is it within the psychologist's customary range of familiarity to have a father as a prescriber and part of a potential family treatment circumstance? Does the father-medical specialist have the understanding that he may turn out to be a piece of his little daughter's treatment? What desires does the father have about his part in the treatment? Moreover, having little information about the circumstances from a telephone call, it is indistinct the relationship that the father has with the girl. As cases, do they have an enmeshed-clashed relationship? Do they have a far-off relationship? The idea of their relationship stays hazy. Third, the issue of educated assent is critical. Some portion of the educated assent may incorporate the various parts associated with the circumstance, the potential for the girl to allude to as an alternate endorsing proficiency, and the therapist's worry about the numerous connections.

There are a few recommendations that I would have for the therapist before making an arrangement. My first proposal is that the psychologist needs to instruct the father about the parts and limits of treatment. Since the medical specialist's father evidently regards and trusts the psychologist, helping the father welcome the issues identified with limits and various connections is critical. Second, it is vital that the psychologist convey that she will work for the best advantage of the little daughter. While the family framework and the father are essential, the psychologist's concentration is to move in the direction of the girl's objectives in treatment, which may not line up with the father's assumptions about the remedial course, process, or objectives. Third, if the psychologist

acknowledges the referral, she needs to clarify that she will see the girl and the family for an assessment (that may take a few sessions) to decide on the clinical unpredictability of the little daughter and the family framework.

Possible and Probable courses of action

I would propose that the psychologist make a composed note of the advantages and disadvantages of accepting the customer. I would suggest that there be an elucidation of parts and limits. Surely understood or not, the father's obligation is to see that his little daughter gets the ideal treatment, not to ensure his expert notoriety. Given the protection rights the girl would have with the therapist or any expert she sees for treatment, it appears that the father's anxiety for mystery is identified with his narcissism and dread of revelation. Be that as it may, disclosure of what? In getting back to the father, I would clarify that it is a piece of the psychologist's obligation to give the predominant standard of care and to take part in best practices.

The consequences of the probable courses of action

I believe that the moral contemplations include the issues of the level of hazard to the daughter (i.e., does she require hospitalization as opposed to outpatient treatment) and the irreconcilable circumstance of the father's wishing to sedate the little daughter himself instead of alluding to her to a specialist. The treatment design he wishes to execute is forcing his choices on the psychologist. In any case, the psychologist has a definitive obligation regarding figuring out what the ideal treatment intercessions would be subsequent to assessing the girl herself. There are obviously partition and control issues engaged with the father's contact. Likewise, there are inquiries about his inspiration for looking after mystery. The subject of manhandling or potential disregard must be considered. Obviously, there is narcissism since he esteems his expert notoriety and open acknowledgment of the prosperity of his little daughter. The traps identified are numerous, and the issues are prickly. The potential favorable circumstances incorporate figuring out how to enable the little daughter to mend.

What appears to be the best course of action?

At that point, I would clarify what those things involve: First, setting up limits in an aware yet clear way. I would show that analysts are required to make an autonomous assessment and assurance of symptomatic contemplations and mediations, similar to what the father must do when he alludes to a patient. I may likewise bring up the issue with him of what he would think if a man accompanied him and exhibited a treatment design, for example, his. I additionally would show that accepted procedures require that the therapist alludes to a specialist, particularly since the issues display potential risk to the girl's well-being, if not general prosperity. I would inquire as to whether he needed time to settle on a choice or on the off chance that he was prepared to submit on the telephone. I don't trust that the father's hesitance about sending the little daughter to a specialist and

paying in real money are clear pointers of disregard as well as manhandling. Nonetheless, I would positively screen the girl and her father both to check whether a call should have been made to the youngster's defensive administration. Additionally, I would approach the father for medicinal freedom from the family medical specialist if the little daughter is accepted to have a dietary issue. She may require hospitalization for therapeutic issues preceding being qualified for outpatient treatment.

Conclusion

The therapist will likewise be surveying in the event that she is the best individual to work with the girl as well as the family framework. Contingent upon the factors, the psychologist may suggest an alternate therapist or that the girl work with an alternate prescriber. To me, it is vital for the father to comprehend and concur that the psychologist will assess the circumstance to start with and, at that point, choose how to promote treatment. Those are my proposals to enable the psychologist to work with the difficulties of this vignette. I am interested in reference to what others think. (Pecorino et al., 2022)

References

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