**ONLINE SUPPLEMENTAL MATERIAL**

**Coding Guidelines**

Initial general coding guidelines were developed a priori based on the authors’ experience in the practice of I-O psychology, and familiarity with the APA Ethics Code. They were modified after a practice round of coding a sample of narratives, as well as intermittently throughout the entire coding process, based on discussion among the four coders. In addition, as issues arose with the interpretation of specific standards, guidelines were articulated regarding their interpretation in the context of I-O psychology. The aim was to arrive at a consistent frame of reference for all coders.

**General Guidelines (Meta-Issues)**

***I. Parsimony AND Judgement***

The objective of our coding is to achieve consistent, reliable scoring. The more *inferential* the coder is in making judgments the less likely that is. So the number one rule is attend to, as much as possible, the explicit/literal content of the scenario being coded (i.e., what the respondent actually says, thinks, does, as reported), and the explicit statement of each of the APA ethical Principles and Standards, as written. For example,

**Ex. A.** We might encounter a scenario in which the respondent is concerned that a client organization is using assessment tools that have not been validated. You may believe that that could be very harmful. But if the respondent does not explicitly mention that a reason for his/her concern is possible harm to be done to individuals or the organization then we should *NOT* code **Principle A**: **Beneficence and Nonmaleficence**, or **Standard 3.04** **Avoiding Harm**. However, suppose the respondent mentions a concern for the company being vulnerable to Title VII litigation as a result. Then, we *should* code Principle A and Standard 3.04.

On the other hand, we can use reasonable judgement. For example,

**Ex. B.** Suppose an incident describes a situation in which the respondent is concerned that a colleague (another psychologist) is promoting the use of unvalidated tests. Even though the narrative never explicitly mentions the word “unethical,” it is reasonable to assume that the writer, indeed, believes that the colleague is behaving unethically. Therefore, we are justified in coding **Standard 1.04** concerning the **Informal Resolution of Ethical Violations** by another psychologist, which is something the Code tells us we should attempt to do. In other words, we can give the narrator some benefit of the doubt, but not too much doubt.

Suppose the respondent in Ex. B also says that s/he tried to discuss the matter with the other psychologist, but they just refused to respond or acknowledge what they were doing. It is likely, then, perhaps depending on other details of the situation, we might also code **Standard 1.05 Reporting Ethical Violations** further to higher institutional authorities, as also appropriate/relevant.

***Note.***—To some extent the guidelines illustrated in Ex. A and Ex. B are contradictory. I.e., “stick to the literal content” versus “it’s ok to use your judgement”! That’s why we emphasize *reasonable* judgement—which should be based on our knowledge of the field.

***II. Purpose of the Study***

**Our Interpretations are Expansive.** The aim is to assess the applicability or relevance of the APA ethical principles and standards to ethical situations encountered by IOPs, as represented in their narratives. Many situations are multifaceted and complex, with several participants each having their own objectives. We should focus on “what is/are the main theme(s) or issue(s)?” And the main issue(s) might revolve around the respondent, or it might be manifested by others in the situation. In that sense, our view of the code’s applicability is “expansive.”

For instance, in Ex. B, above, the main issue is the unprofessional use of tests that have not been validated, so we should code **Standard 9.02 Use of Assessments**, which states that “Psychologists use assessment instruments whose validity and reliability have been established”—even though it’s a colleague of the respondent who’s involved, not the respondent him/her self—or even if the person is not a psychologist. (What matters is the underlying intent of the standard.) For the same reason we should also code **Standard 3.09 Cooperation with Other Professionals**, because the other person refused to cooperate despite the ethical obligation to do so. Both of those are salient aspects of the situation described.

In like fashion, **Standard 1.01 Misuse of Psychologists’ Work** is relevant even if it’s someone else’s work being misused, or even if the person is not a psychologist. **Standard 3.02 Sexual Harassment** is relevant even if it is the narrator/psychologist who is the victim. **Standard 8.10 Reporting Research Results** is relevant even if it is another who has fabricated data.

**Our Interpretations are Generous.** Most of the ethical standards have been written from the perspective of clinical psychological practice with individuals or groups. Consequently, there are numerous instances in which the specific literal content of the standards does not seem applicable to I-O psychology or I-O practice.

However, the *intent* of some of those standards may be applied readily to issues that have corresponding analogues in I-O psychology, and we code them accordingly. In other words, we will adopt a “generous” mind-set regarding the applicability or relevance of the code. For example, we will consider as applicable to **Principle A** Beneficence and Nonmaleficence, and to **Standard 3.04** Avoiding Harm, a situation in which the narrator attempted to dissuade a corporate client from using unvalidated hiring procedures; or refuses to comply with an executive’s request for employee data that were obtained with a promise of confidentiality. (These are very different sorts of “harms” than contemplated originally in the Code.)

Similarly, we will consider the **Standards 10.01 –10.10** regarding *Therapy*, to pertain to the practice of *Executive Coaching*. See also, the interpretation of **Standards 1.04**, **1.05**, and **1.06**, below, regarding “stretching” their interpretation as applicable to I-O psychology.

**Interpreting/Coding the Ethical Principles**

The five ethical principles are meant to be widely applicable and generalizable. Because of that they are often criticized as being rather ambiguous and overlapping, hence difficult to interpret and differentiate from one another. But that seems true primarily for just two of the five principles. The definitions of the three principles of A. *Beneficence and Nonmaleficence*,[[1]](#footnote-1) D. *Justice*, and E. *Respect for People’s Rights and Dignity* seem rather clear.

On the other hand, Principle B. *Fidelity and Responsibility*, and C. *Integrity*, appear to be more problematic. In complex social situations it is sometimes difficult to differentiate between them, and they often manifest together. E.g., they both may relate to the failure to uphold professional standards. It will be helpful to have this orientation:

**Fidelity and Responsibility** is primarily about *working relationships with others*—including professional standards of behavior. The emphasis is on the interpersonal.

**Integrity** is primarily about indicators of *moral character (honesty, truthfulness, accuracy).* The emphasis is on the person’s character.

***Note.***--Obviously, both may be involved in a particular situation (bad people often are untrustworthy), and we can code both. But if the content of a scenario clearly focuses on only one aspect only that principle should be coded.

**Interpreting Particular Standards That Need Clarification**

**1.04. Informal Resolution of Violations.** There are two issues to keep in mind: (a) the Code specifically indicates that this pertains [only] when there may have been a violation by another psychologist. However, because of the nature of I-O practice in organizations we will “stretch” the interpretation as applicable to managers and other organizational members; (b) we are coding whether Standard 1.04 seems appropriate/relevant in the situation, not whether it was actually done. (See “Clarification of the ‘Actor’ and Actions Taken [or not],” below.)

**1.05. Reporting Violations**…..to higher institutional authorities. The “authority” might be in a university, senior Mgt. in an organization, the principals of a consulting firm, et al., not just in psychology or a licensing authority.

**1.06. Cooperating With Ethics Committees.** Accordingly, we will consider as pertinent an investigation or proceeding conducted by an academic or organizational group, not just the APA or a State Psychological Association.

**3.04 Avoiding Harm.** As written, the standard pertains to harm caused (or facilitated, or not minimized) by a psychologist. So, hypothetically, a respondent might report an instance in which a colleague/psychologist was involved in harming or bullying others. But as explained in II above, the narrator might describe having failed to intervene in a manager's bullying. Perhaps the narrative is even an admission of concern, regret or guilt by the respondent for not intervening when s/he could have.

**3.05 Multiple Relationships**. The point to bear in mind is “multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.” This may be very much a matter of subjective judgement. E.g., is it exploitation if a faculty member asks a research assistant to drive him/her to the airport? Does it make a difference if the flight is at 11:00 in the morning or at 11:00 at night?

**3.11 Psychological Services Delivered to or Through Organizations** seems to be all-encompassing, mentioning seven different issues. All of those issues relate primarily to “provid[ing] information beforehand to clients and when appropriate those directly affected by the services.” That is, they emphasize providing appropriate information about a project before starting it. (A useful way of thinking about that is “managing expectations.”) However, note the last sentence in the 1st paragraph which indicates that it *also* pertains to “provid[ing] information about the results and conclusions of such services to appropriate persons,” thus broadening the applicability of the standard.

**6.05 Barter with Clients/Patients.** Salary negotiations or negotiating over a budget, etc. would not qualify as "bartering" as defined—which involves accepting non-monetary remuneration. However, a consultant doing some work for a new start-up company who accepts stock or an ownership share in the startup in lieu of consulting fees probably does qualify. But note: according to the exceptions in the standard it would likely be acceptable/ethical.

**7.06 Assessing Student and Supervisee Performance**, and **7.07 Sexual Relationships with Students and Supervisees**. Because these occur in the section on “Education *and Training*,” and refer to “students *and* supervisees,” it is reasonable to interpret “supervisee” as [also] pertaining to organizational supervisory relationships outside the academic setting. This is an example of our “generous” interpretation of the code to I-O psychology.

**8.10 Reporting Research Results; 8.12 Publication Credit; and 8.13 Duplicate Publication of Data.** These standards focus on “research,” and on “publication.” However, because of the nature of I-O Psychology and the work we do, it is reasonable to interpret these as also relevant to organizational projects involving data collection even if not formally called “research,” and to technical or client reports even if not aimed at publication. Yet another example of a “generous” interpretation in the interest of adhering to the intent of the Code.

**9.01 Bases for Assessments**, and **9.02 Use of Assessments**. In some instances both of these standards will pertain. But **9.01** relates primarily to the appropriateness of the assessment instruments themselves (tests, interview procedures, Assessment Center Exercises, etc.) while **9.02** pertains primarily to the appropriateness of the use or purposes to which the techniques are put. As written, they do overlap.

**10.01 – 10.10 Therapy.** Common sense seems called for here. **10.01** Informed Consent is clearly applicable (e.g., **Standard 3.10** includes informed consent in assessment, counseling and consulting), as is **10.05**, **.06**, **.07**, and **.08**, regarding sexual relations. Some of the others might also be reasonably appropriate.

**Clarification of the “Actor” and Actions Taken [or not]**

In order to more fully and accurately understand each narrative description it is important to know:

(a) whether the ethical transgressor or potential transgressor (colloquially, “the alleged ‘perp’”) is a psychologist;[[2]](#footnote-2)

(b) whether that person was approached directly in an attempt to resolve the situation (as required by **Standard 1.04**); and

(c) whether further action was taken such as reporting the transgression to higher institutional authorities (**Standard 1.05**).

We will code each of those three items as follows: 0 = no; 1 = yes; 9 = uncertain; not clear; or not applicable (e.g., when there is no “higher authority” to appeal to).

**Specific Guidelines:**

(a) If the narrator is the Alleged Perp, assume s/he is a psychologist (as a member of SIOP) (score “1”); if it’s a manager and/or client, assume they are not a psychologist (score “0”); if it’s an academic (department unspecified) it’s uncertain because many IOPs work in Business Schools and Management Departments as well as in Psychology Departments (score “9”); if it’s an HR person, it’s also uncertain because many are not IOPs (score “9”).

(b) (c) The most difficult coding decision probably is differentiating between “0” and “9” for (b) and (c) above. If there is no mention of having taken or even contemplated those actions, it is likely that they were not taken (or else the person would have mentioned it). But that is an inference that we can’t justify, so we will score “9” for “not clear.”

1. Benefitting oneself or avoiding potential harm to oneself does not count as upholding this principle. [↑](#footnote-ref-1)
2. The APA Ethics Code officially binds only psychologists (and members of other organizations that have adopted the Code). [↑](#footnote-ref-2)