

*You are a partner in private community psychotherapy practice that has recently been established. To increase your referrals and case loads, you and your two colleagues decide to advertise your services in a local news magazine. Your colleagues have different training backgrounds than you and despite your adherence to evidence based psychotherapy practices, your colleagues are very interested in offering energy-based treatments. They have been collecting some anecdotal evidence to support their use of Reiki as a therapy for panic disorder, but have not yet conducted any controlled evaluations (e.g., single subject intervention research with their clients.) They want to state in the advertisement that they have a 100% success rate in curing panic when using this treatment.*

*Use a deontological approach (rights, justice or duty – and tell me which one) to arrive at a course of action. Use the handout provided in class as a guide, and your answer should describe each step in the process. Then, compare your course of action based on the deontological approach and the APA code. If there is a discrepancy, tell me what you would do.*

A duty-based analysis was chosen to examine this ethical dilemma because a duty-based approach focuses on respect for persons and role-related responsibilities, both of which appear to be core issues here. In this scenario, I need to decide whether the intended actions of my colleagues, with whom I share a practice, are unethical. (Per my own ethical code, I also need to know what to do if the actions are unethical; both of these themes will be discussed further below.)

A duty-based approach outlines several specific steps for determining if an action is immoral; the first step is to accurately state the action to be evaluated, being careful not to specify it too narrowly. The action which is being evaluated is the fact that my colleagues would like to state in an advertisement for our group practice that they have a 100% success rate in curing panic disorder when using an energy-based treatment called Reiki. The second step of this approach requires stating all of the pertinent facts related to this action. In this scenario, my partners and I would like to increase our case loads and referrals, and we plan to advertise our practice in a local newspaper. My colleagues and I were trained differently; the scenario does not state whether my colleagues are psychologists, but I am a psychologist. While I adhere to evidence-based treatments in my practice, my colleagues do not. My name and credentials appear in this advertisement as well, and my name will be associated with the contents of this group practice advertisement. My colleagues have anecdotal evidence which supports their use of Reiki for panic disorder, however my colleagues have not conducted any controlled evaluations of its effectiveness (or efficacy), nor is this therapeutic technique listed as an approved evidence-based treatment by my governing agency, the American Psychological Association (Empirically Supported Treatments, n.d.). Finally, my colleagues would like to state they have a 100% success rate in curing panic disorder with the use of Reiki.

The third step in this analysis is to determine whether the action can be subsumed under some generally acknowledged substantive duty, such as not to kill, lie or steal. In this case, I am not certain about whether the substantive duty of not to lie applies, since my colleagues likely would not view their action as lying and I am also not sure whether it truly is a lie; since there is doubt, the duty-based analysis

indicates the examination should continue to the next step, where the action is submitted to three tests. The first test is whether the action can be performed by everyone without any contradiction developing to prevent its continued performance. In this case, I am not convinced my colleagues could continue to claim in an advertisement that they have a 100% cure rate if, for instance, even one patient relapsed, was not cured or one patient did not respond at all to the Reiki treatment. If there were even just one exception, my colleagues could not continue to make this claim, because the exception would serve as a contradiction to the action; the action does not pass this test. The second test is whether the action respects people as ends and not as means only; the action proposed by my colleagues seems to respect people and the outcome (curing panic disorder), and does not focus on their clients merely as means; therefore the action “passes” this test. Finally, the third test for step four is whether the action is such that all rational people, whether on the giving or receiving end of the action, would perform the action. The proposed action by my colleagues does not pass this test; if I was a client looking for a therapist to “cure” my panic disorder, and after working with the therapist my panic disorder was not cured, I would be very angry and could accuse the therapist of falsely advertising their skills. As a psychologist, I would not make a claim which included the terms “cure” and “100% success rate” about anything related to psychotherapy, let alone a treatment which has no clear empirical evidence of efficacy, due to the many, many individual differences one cannot predict in the client population. It is very possible that Reiki is an extremely efficacious treatment for panic disorder, but it still would not work for every single client for a myriad of reasons which are impossible to predict. Because the action fails not just one but two of these three tests, the action is deemed immoral according to the duty-based analysis.

Based on the duty-oriented deontological approach, the action has been deemed immoral. As a psychologist, though, I have an obligation to abide by the ethical rules set forth by the American Psychological Association (APA) whether my colleagues are psychologists or not. Based on the APA Ethical Code (Ethical Principles, 2002) I have determined that the action proposed by my colleagues is unethical. A review of the code reveals that several of the principles apply here; beneficence and nonmaleficence, fidelity and responsibility, integrity and justice. While these principles are ethical ideals and not to be used as the basis for imposing sanctions, I thought it was prudent to review the applicable principles in order to keep in mind the ethical ideals the APA wishes to instill in all psychologists. Specifically, there are several ethical standards which, if this action were taken, would be violated, and others which are applicable to this specific situation. Standard 1.04, Informal Resolution to Ethical Violations, is applicable because the action which I deemed unethical has not yet taken place (my colleagues have not yet had the advertisement printed.) The violation also does not involve violating confidentiality rights, which this standard mentions would be an exception to resolving a violation in an informal manner. This standard also speaks to my responsibility to bring the violation to the attention of

the other party so they can resolve the matter themselves. Standard 1.05, Reporting Ethical Violations, is something I should keep in mind if my colleagues and I are unable to resolve this potential violation informally and they proceed with making these claims in the advertisement. Standard 2.01 sections (a) and (e), Boundaries of Competence, is also potentially applicable here; are my colleagues trained to provide energy-based therapy for panic disorder, because if they are not, they are practicing outside the boundaries of their competence as psychotherapists. Standard 2.04, Bases for Scientific and Professional Judgments, may be applicable in this situation if my colleagues are psychologists; it states that psychologists base their work on established scientific and professional knowledge. My colleagues have only anecdotal support for their use of Reiki to treat panic disorder and to my knowledge there have been no studies which support the use of Reiki to treat panic disorder with scientific data. Finally, Standard 5.01, Avoidance of False or Deceptive Statements, may also be applicable, as my colleagues would like to make statements about their services and outcomes which are misleading and deceptive.

After conducting this analysis using both a duty-based deontological approach as well as applying the APA Ethical Code, this action has been deemed both immoral and unethical; therefore, these two analyses yielded the same conclusion and my course of action is clear. In order to avoid a potential ethical violation, I will approach my colleagues with my concerns regarding their intended claims in the advertisement and offer to work together to form a new advertisement which meets all of our needs as well as meeting the ethical standards set forth by my profession.