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.

COMMENTARY Standard 5: Advertising and Other Public Statements

5.01 Avoidance of False or Deceptive Statements (a):

Story

I obtained my Ph.D. in the Counseling and Educational Psychology program at a State University. When I started in 2004, I was told that the program was multicultural and competent to train me to work with Native populations. As a member of the Diné, I was immediately confused about their approach within practicum training and their style of supervision. They had no knowledge of Native Americans. In fact I was their first Native doctoral student.

I had no idea what I had gotten myself into or how to make sense of what I was going through. Each semester I packed my bags, ready to return home. The non-doctoral level counselors on the reservation and I knew more about working with clients then the faculty did. Now with a little more knowledge I feel cheated. Even though the department now has one Native professor, it is still an uphill journey for Native graduate students.

5.01 Avoidance of False or Deceptive Statements (b):

Story

With reference to false or deceptive statements, one of the things I don't think is covered are those psychologists who culturally misappropriate Native customs by offering ceremony or pseudo ceremony to the public for a fee because they simultaneously claim to be providing psychological services. I saw a brochure for a psychologist who was claiming to offer some kind of vision quest and sweat lodge experience for a fee and claimed it was related to transformation and trauma healing. I was sickened on multiple levels. There is potential for harm and even death when traditional ceremonies are misused.

Story

I am a doctoral student in clinical psychology. My community is very proud of me. At traditional events, sometimes announcers or other people may present me in a different light than what I would want them to according to this Ethics Standard. I do not always have a chance to correct what they are saying; and sometimes it would be considered culturally disrespectful for me to do so.

5.01 Avoidance of False or Deceptive Statements (c):

Story

A doctoral student wrote me and told me that she'd had DNA testing done. She found that she was not Indian although her grandmother had told her that she was. She told me that she did not grow up with any tribal influence. I have since seen her describe herself as being from a tribe. There really isn't a Center or some sort of place where you can get legitimately authenticated in a way for being what you say you are. This is a problem.

5.04 Media presentations: Community consent should be provided before any media statements are released that would impact the community. This would be to protect against abuses like what happened in the Barrow Alcohol study when press releases were used to shame the community into action.

(Editor's Note: For more information on the Barrow Alcohol Study and some of the ethical impacts, see the special issue of <u>American Indian and Alaska Native Mental Health Research</u> (vol.2, no.3, 1989), which can be located at http://www.ucdenver.edu/academics/colleges/PublicHealth/research/centers/CAIANH/journal/Documents/Volume%202/2(3).pdf)

5.06 In-Person Solicitation:

Story

In working with tribal communities, it is important, and often times necessary, to get word-of-mouth recommendations as a means of spreading trustworthiness. Technically this process looks a lot like in-person solicitation, political rallying, or mingling socially with potential future clients or the families of potential clients. This is not specifically to "drum up" business for yourself. But it is certainly to promote trust, social connection, and credibility so that people can preview your functioning in the community before they actually come to you for services. It is not sufficient to just show up at your job and sit in your office hoping that people will eventually know that you are there and come see you.

In working in rural places and in tribal communities, you absolutely have to show up in person to "solicit" for referrals. You are often expected to participate in community activities. You may not necessarily be invited individually. The community will wait to see if you are willing to be part of the community by showing up to community events. You have to meet and greet people outside of the context of your office.

Offering to help at community events, making comments about what you think and who you are will be welcomed at community meetings because it makes you a real person in addition to a psychologist. You may even be questioned publically about your role as a psychologist in the community. This is more similar to working at a disaster scene than working in a Western-style clinic. In disaster interventions, outside psychologists have to gain community trust by mingling with the community.