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ABSTRACT

Empirical studies on the ethical decision-making practices of school psychologists are lacking. The purpose of this study was to investigate school psychologists' preferred resolutions to a number of ethical problems and their reasons for acting in a chosen manner. Members (N=76) of the National Association of School Psychologists were surveyed. A three-part questionnaire was used in this study. The first section consisted of seven vignettes describing ethical dilemmas. The second section asked respondents to rate each of the seven vignettes on perceived lack of seriousness of the problem and the frequency with which similar problems had been encountered in practice. The third section requested demographic information. A central finding of the study was that there was a general lack of agreement among respondents about preferred courses of action, and reasons to support these actions, when faced with the ethical dilemmas presented by the questionnaire. While these results may simply reflect the varied nature of the situations with which school psychologists are confronted, they may also support the hypothesis that many practitioners are struggling with a lack of clear guidelines in the face of quite serious ethical dilemmas. From these preliminary results it appears that many of the needs of practicing school psychologists in the area of ethical decision-making are not currently being met by preservice training. (ABL)

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# A Survey of Ethical Decision-Making Among Practicing School Psychologists

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A code of ethics is considered one of the hallmarks of any profession. As early as the historic Thayer Conference in 1954, school psychologists recognized the need for a code of ethics if the discipline was to acquire the status of a profession (Trachtman, 1974). But in spite of the widely held belief that a code of ethics is necessary to ensure the credibility of individuals practicing a profession and the welfare of consumers seeking its services, codes have been the topic of much controversy (see Beauchamp & Childress, 1983; Beck, 1971; Bersoff, 1975; Golann, 1969; Heyne, 1968; Hobbs, 1965; Huchins, 1968; Hughs, 1986; Mabe & Rollin, 1986; Reynolds, 1984; Zemlich, 1980). Criticisms have run the gamut from complaints about lack of specificity in most codes of ethics to charges that codes are too controlling and specific, denying individual professionals freedom of choice.

Despite the voluminous literature regarding this debate, there is a decided lack of empirical research available to either support or refute the use of ethics codes in professional decision-making. To date, no research has been conducted regarding the use of the code of ethics for professional decision-making in school psychology, specifically. Of the few studies conducted addressing the issue of ethical decision-making in professional psychology, researchers have tended to focus on the ability of practitioners to identify ethical dilemmas (Baldick, 1980) or the extent of agreement among respondents to particular choices already made (Thymchuck, 1985). Other studies have focused on somewhat limited samples of psychologists or ethical issues (Jagmin, Witman, & Noll, 1978). Generally, this research has indicated variability among professionals as to what constitutes an ethical dilemma and the appropriate action to take when faced with one.

Only two studies (Haas, Malouf, & Mayerson, 1986, 1988) have investigated practicing psychologists' preferred resolutions to a variety of ethical dilemmas. In both of these studies, psychologists from the Division of Psychotherapy of the American Psychological Association were surveyed about decisions they would make and the rationale for their choices when presented with 10 problem vignettes. Using a 75% agreement rate as a criterion for consistency of decision-making, Haas, Malouf, and Mayerson (1986) reported that consistency was found for only 3 of 10 problem situations. Consistency of decisions was achieved in the areas of conflict of interest, mandatory reporting of threatened violence, and a supervisor's order to refer a client to someone considered incompetent. In all other areas (eg. advertising for local business, treatment of problems beyond one's established expertise, sexual contact with clients), considerable variability was found among professionals in preferred resolutions to the problems presented. These results led the authors to conclude, "... psychology as a profession has few generally agreed-on choices of action in several important and difficult areas of professional decision-making" (p. 321).

Concerning the rationale chosen to support their decisions, Haas, Malouf, and Mayerson (1988) required respondents to classify their reasons as primarily resulting from (a) upholding the law, (b) upholding the code of ethics, (c) protecting society's interests, (d) protecting client's rights, (e) upholding personal standards, or (f) safeguarding the therapeutic process. Again, a high degree of variability was found among professionals in the reasons cited to support their decisions, even when the decisions made were highly similar. That is, decisions were often reported to have stemmed from a range of ethical reasons; and a particular reason often gave rise to more than one ethical action. These results were also found to cohere regardless of the sex, years of experience, and

amount of ethics training of the subjects, as well as respondents' perceived level of seriousness of the problem and frequency of encountering similar problems. Based on the results of both of these studies, Haas, Malouf, and Mayerson (1988) concluded, "Professional ethics, as it is currently understood by experienced practitioners, do not embody either a monolithic standard of behavior or a monolithic reason for choosing such (varying) actions" (p. 39). They further argued that a need exists for more extensive graduate training in ethics, particularly focused on "real world" ethical problems involving competence, confidentiality, and colleagues' behavior.

As noted earlier, empirical studies on the ethical decision-making practices of school psychologists are lacking. As the profession continues to develop, the viability of the processes developed to maintain ethical conduct of practitioners clearly require careful scrutiny. The purpose of this study was to investigate school psychologists' preferred resolutions to a number of ethical problems and their reasons for acting in a chosen manner.

## METHOD

### Subjects

Two hundred and fifty questionnaires were mailed to members of the National Association of School Psychologists (NASP) chosen at random from the Membership Directory. One hundred and eleven surveys were completed, for a return rate of 44%. Of these, 76 (31%) were used for data analysis. The majority of respondents were women, constituting nearly two-thirds (64.5%) of the sample. Additionally, the majority of respondents (61.8%) were between the ages of 36-50, with nearly half (47.7%) reporting more than 12 years of experience in the profession. In terms of ethics training, nearly two-thirds of the

respondents (64.5%) reported receiving less than 20 hours of formal training. For this sample of school psychologists, the vast majority of information on ethics was reportedly gleaned from discussions with colleagues, presentations in graduate classes, and independent reading of the ethics literature. Very few respondents reported having a class devoted exclusively to ethics in their school psychology training programs.

### **Instrumentation**

A three-part questionnaire was designed for use in this study. The first section consisted of seven vignettes, each describing an ethical dilemma. Each vignette was designed to represent one of the ethics standards in the NASP code (eg. professional competency, professional responsibility, professional relationships with students, professional relationships with the school, professional relationships with parents, relationships with other professionals, and relationships with the community). The vignettes were constructed in such a way as to require ethical choices rather than statements of legal guidelines.

For each vignette, alternative decisions were presented. Respondents were asked to choose among the potential decisions listed or provide a personal choice not listed on the questionnaire. Additionally, six possible reasons for choosing an alternative were presented. These included: (a) upholding the law, (b) upholding the ethics code, (c) protecting society's interests, (d) protecting client's rights, (e) upholding personal standards, and (f) other. Using these alternatives, each respondent was required to indicate the primary reason(s) for the decision he or she made.

In the second section of the questionnaire, respondents were asked to rate each of the seven vignettes on perceived level of seriousness of the problem and the frequency with which similar problems had been encountered in practice. They were also requested to provide a confidence rating for each decision made. All of these ratings were made on a 5-point Likert scale, with ratings of 5 indicating highest levels of seriousness, frequency, and confidence in decision-making.

The third section of the questionnaire requested demographic information about the respondents, including age, sex, and years of experience as a practicing school psychologist. Information about both the quantity and quality of ethics training was also requested, including the source(s) of training, the number of hours spent in training, and the perceived value of training.

### **Procedure**

The initial mailing of the 250 questionnaires was accomplished by selecting every 20th member from the 1990 NASP Membership Directory. The questionnaire included no identifying information to ensure confidentiality of responses; however, the return envelopes provided were numbered for purposes of follow-up mailings. One month after the first mailing, all individuals who had not returned a questionnaire were contacted with a follow-up letter. An additional month was allowed before the sample was compiled. No attempt was made to replace the sample with additional mailings.

## **RESULTS**

### **Consistency of Decisions**

A summary of the results for decisions made by this sample of school psychologists is presented in Table 1. As can be seen in the percentages

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*Insert Table 1 about here*

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beside each preferred decision, there is a general lack of agreement about the appropriate action to take when faced with the ethical dilemmas presented on the questionnaire. Using a 75% agreement rate as a criterion for consistency, there is consistency in preferred action for only 1 of 7 problem situations.

Interestingly, the 75% agreement criterion was reached on a vignette describing disclosure of information from an abused mother, a situation that has received much attention in both professional literature and the popular press. Coupled with legal mandates for reporting abuse of minors, it appears that the high visibility of this problem may have provided some assistance to school psychologists in agreeing on a relatively consistent course of action.

While not reaching the consistency criterion, 2 other vignettes yielded at least a majority of respondents agreeing on a course of action. These involved a colleague with a potentially biased perspective on divorce leading a divorce group for adolescents (67.1% choosing to discuss their concerns about the situation privately with their colleague); and a mother's request for information about her daughter revealed in a confidential counseling session (56.6% choosing not to disclose information, but encouraging the mother to talk with her daughter). These results suggest that in some situations involving colleagues' potentially unethical behavior and requests for information that breach confidentiality, a majority of school psychologists agree on an appropriate course of action. There may, however, be other instances involving colleagues' unethical and breaches of confidentiality where this is not the case.



The remaining vignettes on the questionnaire elicited more variability among respondents regarding preferred decisions. They point to some potential areas of concern as well. First, a concern emerges about the willingness of some school psychologists to provide services beyond their demonstrated areas of expertise. For example, 30.3% of respondents indicated they would take on a potential youth suicide case under the circumstances described, and 10.5% reported they would initiate a counseling relationship with an abused mother. While no information was gathered about respondents' levels of training or experience in these areas, such services are clearly outside the realm of traditional school psychological practice. Without doubt, where specific training and expertise are lacking in these potentially life-threatening situations, school psychologists would be ethically prohibited from providing primary services.

Second, a concern emerges about a small number of school psychologists reporting they would act in direct contradiction to both legal and ethical guidelines in some situations. For example, 3.9% of respondents indicated they would place a child in special education classes unofficially, without parent permission, although this clearly violates both the parents' due process rights and the code of ethics. Similarly, 3.9% reported they would supply the results of an evaluation to an administrator, despite a strong suspicion he or she would use them inappropriately. Admittedly, a small percentage of respondents chose these courses of action, but it remains a concern considering that the decisions made are in direct violation of legal and ethical guidelines.

Finally, a concern emerges in regard to a sizable percentage of respondents who would take no action in several of the situations described. In our view, each problem presented required a response of some kind by the school

psychologist. To do nothing is tantamount to engaging in unprofessional practices at best, and encouraging unethical behavior at worst. Furthermore, both legal cases and statutes, as well as codes of ethics, make clear that there may be culpability for professional psychologists for errors of omission as well as commission.

### **Reasons for Decisions**

The results for reasons chosen to support decisions made are presented in Table 2. As with preferred actions, there was considerable

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*Insert Table 2 about here*

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variability among respondents, both within and across vignettes. The most frequently chosen reason for adopting a course of action was protecting client's rights (average % = 41.5). Upholding personal standards (average % = 27.3) and the code of ethics (average % = 22.0) represent the next most frequently cited reasons, while upholding legal standards (average % = 9.4) and protecting society's interests (average % = 8.0) were least frequently cited. These results appear to suggest that when faced with ethical dilemmas, many school psychologists apply principles derived from personal and professional standards to help arrive at decisions, rather than more broadly generalized standards of behavior established in law or societal values.

With regard to individual vignettes, the highest rate of consistency for reasons cited occurred when a mother requested confidential information about her adolescent daughter. Nearly two-thirds (63.2%) of respondents indicated that their decision in this case was based upon a desire to protect client's rights. In fact, protecting client's rights was the most frequently cited reason for decisions

in all problem situations but one (a principal's request for evaluation results), where upholding the code of ethics was most frequently chosen (34.2%). These results are highly consistent with those of Haas, Malouf, and Mayerson (1988), suggesting that decisions are reported to stem from a range of ethical reasons; and a particular reason often gives rise to more than one ethical action.

### **Additional Analyses**

The results of both decisions made and reasons cited to support them were analyzed for differences by sex, years of experience as a school psychologist, hours of ethics training, frequency of encountering similar problems, perceived seriousness of the problem, and confidence of decision-making. In the case of decisions made, a series of chi-square analyses yielded no significant differences, suggesting that preferred courses of action were relatively unaffected by these variables. With regard to reasons cited, only one significant difference was found. On Vignette 4, which dealt with a family's use of prayer as an intervention, significantly more men than women reported that their decision was based on a desire to protect society's interests ( $\chi^2 = 11.61$ ;  $p < .05$ ).

Pearson product-moment correlations were also calculated among reported levels of confidence, frequency, and seriousness of the problems. While most of the correlations obtained were not significant, a mild negative correlation ( $r = -.36$ ;  $p < .01$ ) was found between confidence and perceived seriousness of the problem, again on Vignette 4. This suggests that, to some degree, the more serious respondents perceived this situation to be, the less confident they felt about their capacity to respond effectively.

Mean ratings of frequency, seriousness, and confidence are presented in Table 3. As can be seen, respondents reported that in general they

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*Insert Table 3 about here*

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had encountered similar problems in their practices somewhat infrequently, perceived the situations as moderately to very serious, and felt confident in the decisions they made for each situation. For the frequency and confidence ratings, in particular, there was less variability of responses than anticipated. That is, the preponderance of ratings for frequency clustered around 2 (with most ratings ranging between 1 and 3) and for confidence around 4 (with most ratings ranging from 3 to 5). The tight range of variability for these ratings may have masked some potential differences among the respondents and spuriously lowered the correlational results reported.

### **Discussion**

A central finding of this study was that there was a general lack of agreement among respondents about preferred courses of action, and reasons to support these actions, for a number of ethical dilemmas. These results are similar to those of Haas, Malouf, and Mayerson (1986, 1988) with a sample of clinical and counseling psychologists, suggesting that school psychologists also tend to respond to ethical problem situations in a variety of ways. While these results may simply reflect the varied nature of the situations with which school psychologists are confronted, they may also support that many practitioners are struggling with a lack of clear guidelines in the face of quite serious ethical dilemmas.

It is interesting in this regard, that the one situation in which respondents satisfied the consistency criterion, involved a disclosure of abuse by a mother. Three-fourths of the school psychologists in the sample reported that they would take direct action in such a case, and follow-up to ensure proper responses were made. As noted earlier, this situation is one with high visibility in terms of both professional literature and exposure in the popular press. Relatively clear legal and ethical guidelines also exist to help guide professional decisions in such cases.

But when available guides are less clear, as with the vast majority of situations encountered, consistency among professionals is less evident. This does not, however, suggest that professional codes of ethics should become more specific or that attempts should be made to address more issues in legal terms. Clearly, a code detailing specific guidelines for every potential problem situation would be too cumbersome to be of value. As Hughs (1986) points out, there is value in having codes of ethics remain general so they may be applicable to a wide range of issues and situations.

It may suggest, however, that in order to meet the changing needs of professionals in the field of school psychology, graduate training programs need to incorporate ethics training into their curriculum in a more systematic fashion. The majority of respondents in this study reported that such training was either not provided, or inconsistently provided, in their respective training programs. As Haas, Malouf, and Mayerson (1986, 1988) suggested, it appears that school psychologists in training could profit from education about "real world" ethical problems focusing on competence, confidentiality, and colleagues' behavior, as well as specific situations likely to be encountered in the educational setting.

Additionally, as Blasi (1980) has noted, there is nonequivalence between moral reasoning and moral behavior. The code of ethics of any profession is of necessity a guide, a means of anchoring decisions to a set of beliefs set down within the framework of the profession. It is a fairly ineffectual tool, however, if those using it are unaware of the steps required to recognize and resolve ethical problems within this framework. Hence, training programs would do well in educating aspiring professionals not only about ethical behavior, but also about ethical reasoning processes that may underlie behavior. This would, of course, require that school psychologists reevaluate their objectives for preservice ethics training as well as their intentions in developing professional standards of conduct like the ethics code.

There are several limitations to the present study which affect the generalizability of the results. First, the sample was small and limited to members of NASP. Though the results for sex, years of experience, and geographic region of the country appear similar to those of the NASP membership, there is no assurance that the sample is representative of practicing school psychologists in the United States. Similarly, though care was taken in the construction of the vignettes to simulate plausible problem situations, it is possible that some respondents could not relate to the problems presented, thereby lowering their relevancy or saliency.

Clearly then, more research is needed about the types of decisions school psychologists make when confronted with a variety of ethical problem situations. Additionally, more information is needed to determine whether or not school psychologists are receiving adequate training in the identification of ethical

dilemmas, the processes of ethical reasoning, and the helpfulness of professional guidelines, such as the ethics code, in decision-making. From these preliminary results it appears that many of the needs of practicing school psychologists in the area of ethical decision-making are not currently being met by preservice training.

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Table 1

## Vignettes, Decisions Made, and Percentage of Respondents Making Each Decision.

Vignette	Decisions	%
1. A fellow psychologist has come to you throughout the school year to discuss his extremely bitter divorce proceedings. While he rarely discusses his situation with other staff members he has been quite open with you about his negative feelings regarding marriage and women in general. Later in the year he informs you that he will be conducting a counseling group for adolescents experiencing divorce in their families. The group has been approved by the school administrators who see him as an excellent resource having just experienced a divorce himself.	Privately discuss your concerns with your fellow psychologist	67.1%
	Co-facilitate the group	9.2%
	Say nothing	9.2%
	Report your concerns to the building administrator.	2.6%
	Other	11.9%
2. You have been working closely with the mother of an elementary school girl who has been exhibiting serious disruptive behavior in the classroom. You have established a good working relationship with the mother over the years and at a meeting set up to discuss the child's progress, the mother confides in you that her husband has been physically abusing her. (The child has not been the target of the abuse.) The mother reports that she has told no one else and that she could not confide in anyone else.	Make a specific referral to the mother, and follow up to ensure action is taken	75.0%
	Counsel the mother yourself	10.5%
	Suggest that the mother seek services, but take no further action	10.5%
	Report the abuse to a local women's shelter	4.0%
3. A family new to the United States has recently moved into your district. After a short time it becomes clear that their second grade son is having serious difficulty in school. A referral is made and the parents agree to an assessment. As a result of the assessment it becomes clear that the boy qualifies for special services in several areas. At the meeting called to discuss the results it becomes apparent that despite the family's reasonable understanding of English they may not understand the implications of the decision to be made. Even after several meetings the parents deny placement and insist that their son remain in the regular classroom where he is falling further and further behind.	Arrange for extra assistance in the regular classroom	28.9%
	Initiate a due process hearing	21.1%
	Take no action	18.4%
	Place the child unofficially in a special education classroom	3.9%
	Other	27.7%

4. A referral has been made to you for an adolescent boy who has been acting out in school. It is suspected that he has stolen money from his teacher and has set fires in the school bathroom, although neither can be proved. In order to better understand the boy you make a home visit and find a chaotic environment in which the father is gone most of the time and the mother is unable to control her five children. When you meet with the parents to discuss the problem they seem genuinely interested and listen attentively to your advice to seek outside intervention. Several months later the boy is still exhibiting difficulty, so you call the family once again. The mother explains that they have sought outside intervention through prayer and that this is the way in which such matters are handled in their household. She also states that the boy may not become involved with the school counselor.
- Increase observation and documentation of the child's behavior 36.8%  
 Begin a behavior management program in the classroom 35.5%  
 Take no action 7.9%  
 Initiate an ED referral 2.6%  
 Other 17.2%
5. The principal at your school comes to you requesting the results of the assessment of a particularly difficult school board member's child who has been referred for possible gifted programming. You realize that the principal intends to approach the school board with a request for additional funding for special education programming (including gifted programming), and that this school board member has consistently denied such requests. The principal feels that if the child is placed the school board member will be more likely to approve the funds. While the child is performing in the well above average range in some areas, her overall scores do not indicate a clear need for gifted programming. You are concerned that the results will be reported to the parent before you have met with her to explain and interpret them.
- Deny access to the results 38.2%  
 Share the results in a conference with both the principal and the parents, explaining your position 30.0%  
 Hold a conference with the principal, explaining your position 14.0%  
 Supply a written report to the principal, articulating your position 8.0%  
 Supply the results as requested 3.9%  
 Other 5.9%
6. There have been three childhood suicides in your school within the past four months. You know that the only local resource available to deal with these problems is now unable to manage the volume of referrals. A child you have been seeing has begun to neglect her personal hygiene and has spoken of giving away her personal possessions.
- Refer to the local agency, despite their heavy case load 48.7%  
 Counsel the student yourself 30.3%  
 Suggest the parents take the child to another agency, where services are available 9.2%  
 Other 11.8%
7. A thirteen-year old girl confides in you that she is considering having sex with her fourteen-year-old boyfriend. A few days later the girl's mother asks you if she should know about her daughter's adjustment and her recent mood swings.
- Say nothing about the sexual activity, but encourage the mother to talk with her daughter 56.6%  
 Encourage the daughter to talk with her mother about her sexual activity 32.9%  
 Provide the information as requested 1.3%  
 Decline to answer the mother's questions 1.3%  
 Other 7.9%

Table 2

## Percentages of Primary and Secondary Reasons Given for Decisions Made

Reasons	Vignette							Avg. %
	1	2	3	4	5	6	7	
<b><u>Upholding Legal Standards</u></b>								
Primary Reason	0	3.9	23.7	13.2	14.5	6.6	3.9	9.4
Secondary Reason	2.6	3.9	10.5	13.2	10.5	7.9	9.2	8.3
<b><u>Upholding Code of Ethics</u></b>								
Primary Reason	31.6	21.2	7.9	18.4	34.2	22.4	18.4	22.0
Secondary Reason	26.3	26.3	36.8	25.0	21.1	22.4	34.2	27.4
<b><u>Protecting Society's Interests</u></b>								
Primary Reason	9.2	1.3	3.9	17.1	2.6	15.2	6.6	8.0
Secondary Reason	7.9	10.5	5.3	17.1	9.2	24.2	7.9	11.7
<b><u>Protecting Client's Rights</u></b>								
Primary Reason	34.2	43.4	48.7	30.3	21.1	50.0	63.2	41.5
Secondary Reason	25.0	27.6	18.4	17.1	30.3	34.4	11.8	23.5
<b><u>Upholding Personal Standards</u></b>								
Primary Reason	18.4	23.7	11.8	14.5	19.7	25.0	7.9	27.3
Secondary Reason	23.7	18.4	14.5	17.1	21.1	21.1	26.3	20.3
<b><u>Other</u></b>								
Primary Reason	2.6	2.6	1.3	1.3	0	2.6	0	1.5
Secondary Reason	2.6	0	1.3	1.3	1.3	0	0	.9

Table 3

Mean Ratings of Frequency of Encountering Similar Problems, Perceived Seriousness of the Problem, and Confidence in Decisions Made

Vignette	Frequency <sup>a</sup>	Seriousness <sup>b</sup>	Confidence <sup>c</sup>
1. Divorce Group	1.6	3.2	4.0
2. Abused Mother	2.4	4.0	4.0
3. Foreign Family	2.5	3.2	4.0
4. Religious Intervention	2.1	3.6	4.0
5. School Board	1.5	2.8	4.1
6. Potential Suicide	2.5	4.9	3.8
7. Mother's Questioning	2.4	3.4	3.9

<sup>a</sup> scale ranges from 1 (very infrequent) to 5 (very frequent)

<sup>b</sup> scale ranges from 1 (not serious) to 5 (very serious)

<sup>c</sup> scale ranges from 1 (not at all confident) to 5 (very confident)