

# Ethical Guidelines for Social Justice in Psychology

Helen P. Hailes, Christopher J. Ceccolini, Ellen Gutowski, and Belle Liang  
Boston College

As the field of psychology increasingly recognizes the importance of engaging in work that advances social justice and as social justice-focused training and practice in the field grows, psychologists need ethical guidelines for this work. The American Psychological Association's ethical principles include "justice" as a core principle but do not expand extensively upon its implications. This article provides a proposed set of ethical guidelines for social justice work in psychology. Within the framework of 3 domains of justice—interactional (about relational dynamics), distributive (about provision for all), and procedural (about just processes) justice—this article outlines 7 guidelines for social justice ethics: (1) reflecting critically on relational power dynamics; (2) mitigating relational power dynamics; (3) focusing on empowerment and strengths-based approaches; (4) focusing energy and resources on the priorities of marginalized communities; (5) contributing time, funding, and effort to preventive work; (6) engaging with social systems; and (7) raising awareness about system impacts on individual and community well-being. Vignettes of relevant ethical dilemmas are presented and implications for practice are discussed.

## Public Significance Statement


This article explores the need for a set of ethical standards to guide psychologists' social justice-oriented work. It conceptualizes social justice as having three components, focused on relational dynamics, provision for all, and just processes. Additionally, it outlines and provides examples of seven proposed standards for social justice ethics in psychology.

**Keywords:** ethics, social justice, APA, guidelines

Psychologists have practiced under a code of ethics since the early 1950s that outlines core principles, such as beneficence and integrity, and provides ethical standards for domains of practice in psychology, such as therapy, assessment, education,

and record keeping (American Psychological Association [APA], 2017). Yet these guidelines are not comprehensive: Although the APA's ethical principles for psychological practice list "justice" as one of the field's five core ethical princi-

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 HELEN P. HAILES, MA, received her MSc in Psychiatry from the University of Oxford and her MA in Counseling Theory from Boston College. She is a doctoral student in Counseling Psychology at Boston College and Clinical Intern at the Brookline Center for Community Mental Health. Her research focuses on the intersection of gender, poverty, violence, and trauma. She is particularly interested in collaborative, community-based approaches to research and understanding the experiences of intimate partner violence survivors with multiple marginalized identities.

CHRISTOPHER J. CECCOLINI, MA, earned his master's degree in clinical psychology at Teachers College, Columbia University. He is currently a doctoral candidate in Counseling Psychology at Boston College and Clinical Fellow at Harvard Medical School. His research focuses on how experiences of identity-based marginalization exacerbate risk for serious mental illness in young people, especially sexual and gender minorities. He is particularly interested in elucidating practices by which families and communities promote positive development in LGBTQ youth and young adults. He also studies systems-level interventions for socially marginalized adolescents and young adults with schizophrenia and psychosis-spectrum disorders.

ELLEN GUTOWSKI, MA, has a master's degree in Mental Health Counseling from Boston College. She is a doctoral candidate in Coun-

seling Psychology at Boston College and Clinical Fellow at Harvard Medical School. As a scientist-practitioner in training, her research is devoted to the mental health and career development of people who have been socially and economically marginalized. Her work centers on women's experiences with violence, poverty, and work. She is particularly interested in understanding how the interplay of these forces affects women's mental health.

BELLE LIANG, PhD, is Professor in the Counseling, Developmental, and Educational Psychology Program of the Lynch School of Education and Human Development at Boston College. Her research focuses on positive youth development, especially the role of mentoring in cultivating purpose among youth from diverse backgrounds.

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CORRESPONDENCE CONCERNING THIS ARTICLE should be addressed to Helen P. Hailes, Department of Counseling, Developmental, and Educational Psychology, Lynch School of Education and Human Development, Campion Hall 309, Boston College, Chestnut Hill, MA 02467. E-mail: [hailesh@bc.edu](mailto:hailesh@bc.edu)

ples, the ethics code provides only the following brief explanation of what this principle entails:

Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices. (APA, 2017, General Principles, Principle D)

Despite the discussion of justice in its preamble, the ethics code is unclear on the extent and nature of psychologists' obligation to engage in activities that further social justice in our society (Campbell, 2016; Kenny & Hage, 2009; Liang et al., 2017). Given the increasing momentum of social justice training and practice in psychology (e.g., Collins, Arthur, Brown, & Kennedy, 2015; Nadal, 2017; Toporek & Vaughn, 2010), more expansive ethical guidelines to steer this work are overdue. If psychologists are to live up to the code's mandate to pursue justice in their professional efforts, a further amendment, providing clear guidelines for ethical social justice work, is critical.

### Defining a Social Justice Framework

The concept of social justice has been subject to numerous interpretations in psychology and allied fields, such as political theory, theology, pedagogy, and social work (e.g., Freire, 1970; Gutierrez, 1973; National Association of Social Workers, 2008; Rawls, 1971). Goodman and colleagues (2004) defined social justice practice in psychology as "scholarship and professional action designed to change societal values, structures, policies, and practices, such that disadvantaged or marginalized groups gain increased access to these tools of self-determination" (p. 795). Lewis (2010) built on this definition by emphasizing the importance of social justice in the interpersonal realm as well. This second definition underscores that fairness, dignity, and respect for individuals are critical components of justice and that a social justice orientation is relevant for psychologists even in traditional interpersonal roles, such as psychotherapy.

Building off of these perspectives, we propose that the ethics of social justice can be informed by three primary domains of justice that originated in social and organizational psychology and have been applied in clinical and counseling psychology (Colquitt & Greenberg, 2003; Lewis, 2010):

- **Interactional justice** emphasizes the perceived fairness of how people are treated in interpersonal exchange, with specific regard to power dynamics. In other words, this kind of justice is about relational dynamics.
- **Distributive justice** emphasizes the perceived fairness of the distribution of outcomes (pay, loans, criminal justice sentencing, promotion, etc.) This is ultimately about provision for all, particularly the underprivileged.
- **Procedural justice** emphasizes the perceived fairness of the process for making decisions that ultimately impact these outcomes. At its core, this kind of justice is about just processes.

Scholars have linked these three forms of social justice to particular contexts. For example, interactional justice is most as-

sociated with interpersonal work, such as psychotherapy or assessment. From an ecological approach, this kind of work occurs at the "microsystem" level (Bronfenbrenner, 1977). Meanwhile, distributive and procedural justice are often associated with work that targets community-level (i.e., macrosystem) or structural, societal (i.e., mesosystem) change (Fondacaro & Weinberg, 2002; Goodman et al., 2004; Prilleltensky, 1997). However, these three forms of social justice ultimately co-occur in most contexts, and psychologists as social justice agents are called to engage in ethically just work at both interpersonal and structural levels. Scholars have argued that, from a social justice perspective, it is insufficient for psychologists to engage only in microsystem work, such as psychotherapy, without also working to change oppressive policies and institutions that contribute to suffering and distress (Goodman et al., 2004; Humphreys, 1996; Vera & Speight, 2003). Indeed, psychologists do have a history of combatting meso- and macro-level injustices, for example, by shaping public discourse about race and racism, fighting for marriage equality, and offering feminist conceptualizations of gender and sexism, among others (Nadal, 2017).

However, we maintain that individual-level work is not antithetical to systemic change. Similar debates are evident in writings on youth mentoring, which argue that it is not possible to effect social change through mentoring (Liang, Spencer, West, & Rapaport, 2013). Walker (2007) summarized this critique, asserting that mentoring is fundamentally an act of charity and is, at best, a diversion from necessarily broader social change. Liang and colleagues (2013) argued that instead of differentiating individual needs and interests from the highly conceptual "greater good," mentoring individual youth in a way that considers their social conditions—and youths' potential for taking up the charge to improve them—can be an effective approach to redressing social ills. Just as social change is needed in order to improve the health and development of youth, the reverse is also true—purpose-seeking youth who seek to make a difference in the world can effect social change.

In a similar vein as Liang and colleagues' (2013) assertion, in this article, we conceptualize social justice work as occurring—sometimes simultaneously—at the micro, meso, and macro levels. For instance, a psychologist may engage in work on multiple levels by collaborating with a community group (meso) to consult on a national policy brief (macro). Under this conceptualization, professional ethical dilemmas may have broad implications at multiple levels. Indeed, a psychologist's work with an individual can have ripple effects in their family, community, and larger social networks, or work in large institutional settings, such as academic research and government consultation, may influence the lives of many individuals (Liang et al., 2017). Thus, in this article, we propose a set of guidelines to define and steer ethical social justice work in psychology that is relevant to all ecological levels and encompasses interactional, distributive, and procedural justice across multiple settings.

In this article, we propose a supplementary guide for psychologists seeking a more expansive discussion of the APA ethical principle of justice than the brief description included in the ethics code. We lay out a series of seven guidelines (see Table 1), based on theories of social justice in psychology and allied fields, and we discuss how each of these guidelines may be applied across diverse settings, including research, teaching, psychotherapy, community

Table 1  
*Ethical Guidelines for Social Justice Work in Psychology*

Domain	Principle
Interactional justice	1. Reflecting critically on relational power dynamics 2. Mitigating relational power dynamics 3. Focusing on empowerment and strengths-based approaches
Distributive justice	4. Focusing energy and resources on the priorities of marginalized communities 5. Contributing time, funding, and effort to preventive work
Procedural justice	6. Engaging with social systems 7. Raising awareness about system impacts on individual and community well-being

advocacy, and consultation. The development of these seven guidelines represents the culmination of a semester-long discussion among members of a doctoral professional ethics seminar and their professor, an expert in the field of ethics and social justice in psychology. The final set of guidelines reflects core ideas that emerged from these discussions as well as relevant literature. Their development was further informed by the authorship team's varied experiences as clinicians, researchers, and community consultants. As part of this process, the guidelines were organized into the categories of interactional, distributive, and procedural justice. Moreover, we provide relevant ethical dilemmas with concrete examples of social justice ethics in action. We conclude with a discussion of the inherent complexity of putting social justice guidelines into practice. The application of any set of aspirational values requires individual creativity and discernment, and these guidelines are intended to serve as a starting point for navigating ethical dilemmas within psychology.

## Interactional Justice

### Reflecting Critically on Relational Power Dynamics

***Ethical dilemma:** A Singaporean Chinese Mandarin-speaking researcher from a well-educated, affluent community is conducting research in Chinatown with Cantonese-speaking community members. She recognizes that she may have certain experiences and perspectives in common with her research participants because of their shared experience of being Asian in the United States. However, she also recognizes that she should be careful not to assume too many similarities or expect to be immediately accepted in the community because of the differences between herself and her participants and the plurality of Asian cultures and experiences.*

Interactional justice in psychology calls for fairness within interpersonal relationships, such as those with therapy clients, research participants, students, colleagues, and community collaborators. It is imperative that psychologists participate in ongoing critical reflection around issues of oppression, power, and privilege in their own lives (Goodman et al., 2004; Shaw, 2010). Psychologists who are aware of the ways that their social location has shaped their values and experiences are less likely to make faulty assumptions about collaborators or to inadvertently reinforce harmful power dynamics (Leary, 2000). Such critical self-reflection is a practice to be developed and continuously exercised

rather than a natural ability or a skill to be cultivated in a finite capacity (Caminha-Bacote, 2002).

Research on the insidious consequences of unchecked implicit biases highlights the importance of reflecting on dynamics of power and social position in interpersonal interactions (Sue et al., 2007). Implicit biases can influence decision making by, for example, impairing judgments in the judicial system or employers' hiring decisions, which work to perpetuate racist, sexist, classist or heterosexist discriminatory behavior (Jost et al., 2009; Levinson, Bennett, & Hioki, 2017; Segrest Purkiss, Perrewé, Gillespie, Mayes, & Ferris, 2006). Further, another form of unconscious bias, stereotype threat, can negatively influence the performance of test-takers from marginalized groups, such as women and African Americans, unconsciously confirming stereotypes about their group's academic achievement (Kiefer & Sekaquaptewa, 2007; Steele & Aronson, 1995).

Interpersonal power dynamics can become complex at the intersection of multiple co-occurring identities that confer differing levels of privilege (Cole, 2009). For instance, a psychologist may be from an ethnic group that has traditionally been oppressed while also belonging to a privileged socioeconomic class. The intersecting identities of psychologists and their clients or collaborators may interact in various ways, depending on circumstances. Certain identities may be more or less salient in specific situations, and it is important for psychologists to be aware of how intersectional identities and shifting power dynamics can impact their professional relationships (Watts-Jones, 2010). For example, when psychologists engage in a collaboration with an individual or community who shares aspects of their identity (e.g., ethnicity, gender, sexual orientation, or socioeconomic status), they should consider how their shared identity might obscure important differences between their own and their clients' life experiences (Minkler, 2004).

Beyond the power that may be conferred on them by their identities and social locations, psychologists should also be aware of the power inherent in their professional roles. Psychologists' interactions with clients, community organizations, and institutions are influenced by their education levels and positionality as "experts." Pope and Vasquez (2016) explained that, as professionals, psychologists must be able to understand and carefully handle the power and responsibility inherent in that role. Given the power afforded to psychologists, it is crucial that they maintain an ongoing awareness of how their exercise of power might mirror or recreate prior experiences of injustice that marginalized individuals have suffered at the hands of other powerful individuals and institutions (e.g., Sue, 2015). For example, psychologists working in a research capacity must understand researchers' historical complicity in systemic oppression, for instance, by engaging in "drive-by data collection" that relies upon the time, resources, and trust of oppressed communities but gives them nothing in return (Goodman et al., 2004, p. 804; see also Riger, 1999). Psychologists must consider how their positionality may instead be harnessed in service of interactional justice.

### Mitigating Relational Power Dynamics

***Ethical dilemma:** An integrative psychologist is working with a client in therapy. This psychologist does not agree with the client's immediate therapeutic goals, but understands that some schools of therapy*

*suggest that the client's stated interests and goals should be prioritized over the psychologist's own views, out of respect for the client's autonomous decision making.*

Psychologists must be mindful of power dynamics at play in relationships with clients and collaborators, as oppression can be perpetuated by the unchallenged abuse of power (Prilleltensky, Docecki, Frieden, & Ota Wang, 2007). Therefore, building off of Guideline 1, which articulates the importance of awareness, Guideline 2 asserts that psychologists must avoid abusing the power they receive from their personal and professional identities. They should be especially sensitive to exercising power over individuals or groups who have historically been marginalized, which may result in negative mental health consequences and diminished trust in the psychological community (Sue, 2015). Engaging in ethical stewardship of power and privilege is exemplified by a collaborative, client, or community-centered approach. Across domains of professional practice, psychologists have laid the groundwork for collaboration with clients and communities that subverts traditional power structures. Some scholars have argued that the clients or communities involved in a psychologist's work should be equitable participants and beneficiaries of that work (Minkler & Wallerstein, 2008). For example, in clinical relationships, psychologists can avoid unilaterally defining the ground rules and trajectory of therapy, while clients simply serve as recipients of professional services for payment (Guilfoyle, 2003). Indeed, some clinical orientations, such as feminist therapy and relational-cultural therapy, seek to counter harmful power dynamics by emphasizing the importance of nonhierarchical relationships between therapists and clients, empowering clients to dictate the goals and course of treatment in mutual partnership with the therapist (Frey, 2013; Stocker, 2005). Moreover, the National Association of Social Workers code of ethics explicitly emphasizes the importance of client self-determination and the prioritization of client goals (National Association of Social Workers, 2008). Therapists should take precautions against reinforcing their clients' experiences of disenfranchisement, particularly when working with clients from marginalized backgrounds whose agency has been disregarded in other circumstances.

Similarly, in research settings, psychologists should seek to mitigate oppressive power dynamics by prioritizing nonhierarchical relationships with individuals and communities. Precedence for power sharing in research contexts comes from community-based participatory research, which explores questions of importance to a given community, with the participation and guidance of members of that community, ensuring that their interests are respected throughout the process and they benefit directly from the research (Goodman et al., 2004, 2018; Hoffman et al., 2006; Wallerstein & Duran, 2010). Qualitative research is another approach that may subvert power dynamics by centering and amplifying the voices of individuals who have historically been silenced or oppressed (Kidder & Fine, 1997).

Toporek, Lewis, and Crethar (2009) provide an example of a client-led, nonhierarchical partnership, in which a school counselor advocates for a student in a wheelchair, mediating interactions with the school to improve campus accessibility. The authors note that it is essential that the student, rather than the counselor, identify the relevant problems to be addressed and that the counselor provide advocacy support in the manner specified by the

student. This way, the counselor can productively advocate for the student while respecting the student's autonomy and understanding of the student's own needs and priorities. Rather than speaking on behalf of the student, the counselor is able to amplify the student's voice. Regardless of a psychologist's theoretical orientation or desire to engage in advocacy practices, they should be open to dialogue with clients and collaborators about identities and finding mutual ways to identify and engage with the values, assumptions, and biases of all parties throughout the course of the research or therapeutic relationship (Aron, 2000; Lazard & McAvoy, 2017; Watt-Jones, 2010).

Along with their work in clinical and research capacities, psychologists engaged in consultation, advocacy, and community interventions can also uphold interactional justice through community-level relationships. In this kind of work, psychologists should view community partners as equitable collaborators, respecting the unique expertise of all involved. Each member of a collaboration brings valuable experiences and perspectives, and equitable partnerships foster the empowerment of community collaborators to achieve self-determination (Prilleltensky, 1997). Beneficiaries of an intervention must also be co-interventionists, driving the change within their own communities (e.g., L. Smith, Davis, & Bhowmik, 2010; L. Smith & Romero, 2010). Finally, psychologists should not only emphasize democratic, nonhierarchical partnerships in their community collaborations (Hoffman et al., 2006)—they should also be prepared to use their skills and expertise to support the goals of partner communities rather than solely serving their own personal interests and agendas.

Finally, psychologists must be mindful of their own self-interest and how it may play out in professional interactions (Liang et al., 2017). For instance, they should reflect upon whether work practices and decisions motivated by interest in publications, payment, professional or personal esteem, or other benefits harm or disadvantage those they work with. No professional work is entirely devoid of self-interest, nor does it need to be. It is reasonable for psychologists to strive for professional success and to seek remuneration for their work; yet they must also be aware of these motivations and ensure that they do not overshadow the interests of—or, worse, cause harm to—their clients (Liang et al., 2017).

## Focusing on Empowerment and Strengths-Based Approaches

***Ethical dilemma:** A psychologist directs a youth mentoring program that targets low-income youth of color and aims to decrease rates of school drop-out, teen pregnancy, and drug and alcohol abuse among the youth participants. She is wary of focusing only on participants' problematic behaviors because she knows that young people of color are often defined by environmental challenges as opposed to personal strengths (Nicolas et al., 2008).*

Strengths-based approaches in psychology empower clients to develop their self-advocacy skills, strategies, and resources to be agents of change in their own lives (Toporek et al., 2009). Interactional justice requires altering oppressive power dynamics (Prilleltensky, 1997), and empowerment-based approaches can accomplish this by increasing the power of clients or communities that have experienced oppression or powerlessness. Empowerment and strengths-based work in psychology developed in opposition to traditional models of treatment or intervention, which have fo-



cused on weaknesses or deficits and the role of the psychologist as healer or fixer of problems. Furthermore, strengths-based approaches support culturally competent interventions, recognizing and honoring the different strengths that exist in all cultures (National Association of Social Workers, 2008).

Various schools of thought within psychology articulate the importance of honoring strengths. Modalities of psychotherapy, such as feminist and multicultural therapies, emphasize the importance of client empowerment through strengths-based approaches (Goodman et al., 2004). For instance, RCT focuses on the need for therapists to validate clients' experiences of oppression and to empower them to reduce their experiences of disconnection with others (Jordan, 2001). Relevant to the ethical dilemma described at the beginning of this section, Liang et al. (2013) propose a model for affecting social change that involves fostering collaborative partnerships between youth and adults in which both learn from one another, contribute to decision making, and act together to promote change in programs and communities. The model suggests a shift in the mentoring field from a "therapeutic" approach in which youth are targets of intervention to a more socially transformative approach wherein adults and youth work together to promote positive youth development at individual and societal levels.

Psychologists can also prioritize strengths-based approaches in community-level intervention and research. Community psychologists have a long legacy of focusing on issues of empowerment at the personal, organizational, and community levels, with an understanding of empowerment as a crucial element of social change (Perkins & Zimmerman, 1995). Although community psychology has been criticized for its dismissiveness of intrapsychic theories and interventions (Liang, Tummala-Narra, & West, 2011), the field's contribution to the practice of strengths-based work in psychology remains important. Meanwhile, from the fields of indigenous and education studies, scholar Eve Tuck penned an open letter to the academic community in 2009, calling upon her peers to suspend their focus on damage-centered research in marginalized communities, which, "document[s] pain or loss of an individual, community or tribe... The danger of damage-centered research is that it is a pathologizing approach in which the oppression singularly defines a community" (Tuck, 2009, p. 409). Tuck argued that this pathological view of marginalized groups ultimately harms them, limiting how they see themselves and how others see them. Indeed, Ludema, Cooperrider, and Barrett (2000) posited that "human systems grow and construct their future realities in the direction of what they most persistently, actively and collectively ask questions about" (p. 1). In other words, the questions we, as a field, ask about a population can shape the way that population is seen and understood.

## Distributive Justice

### Focusing Energy and Resources on the Priorities of Marginalized Communities

*Ethical dilemma: A psychologist conducting a study on mental illness may find it easiest to recruit and study college student participants for their research. However, she is aware that college student samples are generally not representative of the whole population. The psychologist feels compelled to choose the most affordable and easily*

*accessible sample for her study, but she also worries that she is failing to address the paucity of research on the needs of marginalized communities.*

Just as hyperfocusing on challenges in marginalized populations can ultimately harm them, so, too, can failing to attend to them at all. Psychologists in research, clinical, and other roles are incentivized to dedicate their time and resources to the needs and problems of relatively privileged groups, such as White, highly educated, middle-class communities. Membership in elite institutions, grant funding, reimbursement for clinical services, and job security, among other goods, may be jeopardized for psychologists who choose to center the needs and priorities of marginalized communities. For instance, as researchers, psychologists often find that the most affordable and readily accessible research participants are college students, who are disproportionately White, middle class, and highly educated (Hanel & Vione, 2016; Henrich, Heine, & Norenzayan, 2010). As clinicians, they find that insurance dictates who receives what services: Clients with insurance can receive mental health treatment that uninsured individuals may not be able to afford, and wealthy clients who can pay out of pocket have access to a wider range of services and longer term care than those who depend upon insurance to cover their costs. Doctoral students beginning their clinical training are sometimes shocked to discover that clients receive care immediately if they have insurance, whereas those who are uninsured or have lower reimbursing insurances, such as government-funded plans, are placed at the end of a long waiting list, reflecting the values of a system that prioritizes the needs of the wealthy, employed, and insured over those who are poor or rely upon social services (Lewis, 2010). Finally, as advocates, consultants, and in other nontraditional roles, psychologists may find that there is no clearly established funding mechanism to pay for their services, forcing them to take on pro bono work or creatively carve out new funding streams. In all of these examples, psychologists who wish to focus on work that benefits marginalized communities face additional obstacles compared with psychologists working with privileged groups.

Although the majority of incentives align against pursuing research, clinical practice, and other kinds of work with marginalized communities, social justice ethics requires that psychologists place the needs and priorities of these groups at the forefront of their work (Vera & Speight, 2003). At its core, the notion of distributive justice is about provision for all, particularly oppressed groups, and upholding distributive justice may require psychologists to engage in precarious or challenging work. For researchers, this may entail a commitment to spending extra time and money recruiting underrepresented study participants and ensuring that research gives voice to groups whose experiences and perspectives have often been overlooked or silenced by traditional approaches (Hage & Kenny, 2009). In clinical practice, psychologists may look for opportunities to offer sliding scale fees for services or provide pro bono therapy to clients who cannot otherwise afford care. Whenever possible, uninsured and underinsured clients should not be waitlisted behind insured clients or treated as "second class" in any way. Psychologists may also incorporate nontraditional roles into their work, for instance, taking on community advocacy and consultation roles even when designated funding streams for this work are not evident.

## Contributing Time, Funding, and Effort to Preventive Work

***Ethical dilemma:** A group of psychologists in a clinic for addiction recognize that recovery can be a long, painful process and can sometimes come too late, after significant damage has already been done to the lives and loved ones of individuals struggling with addiction. These psychologists discuss the research on effective means of preventing addiction, but their clinic does not provide any preventive services. Knowing how many cases of addiction could be circumvented before they occur, the psychologists wonder whether their practice has any ethical obligation to engage in preventive work.*

Traditionally, psychologists across clinical and research roles have focused on remedial work, providing services and care for those who are already suffering, rather than proactively addressing factors that contribute to mental well-being before illness or harm occur. Since the 1980s, counseling psychologists have called for a shift toward more preventive services (e.g., Albee, 1982; Kenny & Hage, 2009). Preventive work has increased in areas such as resilience and positive youth development (e.g., Fondacaro & Weinberg, 2002; Lerner, Almerigi, Theokas, & Lerner, 2005; Poteat et al., 2015). However, these efforts alone are not enough to address the complex mental health needs of most communities. For instance, scholars have called for more prevention-based strategies for addressing the United States' current opioid epidemic and college mental health crisis (Bettis et al., 2017; Koh, 2017).

Extant research has found that no province or state in the United States or Canada devotes more than 2% of its health, mental health, and community service funding to preventive programs (Nelson, Prilleltensky, Laurendeau, & Powell, 1996; Prilleltensky et al., 2007). Although remedial work remains a critical component of psychological practice, social justice ethics requires more preventive services. Psychologists as social justice agents must prioritize the needs of marginalized communities, and proactive primary services can significantly diminish the suffering inflicted upon oppressed groups who experience a disproportionate burden of psychosocial stressors that contribute to high rates of mental illness (Kenny & Hage, 2009). It has been argued that, just as treating victims of child abuse or patients with HIV is not enough to end the larger epidemics, focusing exclusively on treating rather than preventing mental illness is insufficient, even if it is the professional status quo (Prilleltensky et al., 2007).

Thus, psychologists working in various contexts must engage in preventive strategies. For instance, Prilleltensky and colleagues (2007) provide the example of a counselor working with a young woman with an eating disorder. They suggest that she may feel empowered by joining groups that raise awareness about the harmful effects of advertising and that boycott exploitative advertising campaigns. Although, for this client, prevention efforts would be too late, she can contribute to preventive actions for others, which would not only increase her own sense of empowerment but would also benefit other members of the community who might be at risk of developing eating disorders. Moreover, psychologists have called for prevention-focused course materials, research, and practical experience to be incorporated into graduate training programs in counseling psychology, to reinforce the importance of this work (Romano & Hage, 2000), efforts that might be made across the broad spectrum of professional psychology programs. Preventive work in psychology may focus on

individual- or environmental-level work. Individual-level prevention draws upon fields such as positive psychology and positive youth development (Catalano, Berglund, Ryan, Lonczak, & Hawkins, 2002; Kenny & Hage, 2009; Seligman, 2002) and may involve working with marginalized individuals to develop resilience (e.g., Smokowski, 1998), provide essential material and social supports (Walsh et al., 2014), or develop specific strengths, such as racial identities or critical consciousness (Diemer, Rapa, Voight, & McWhirter, 2016; Kenny & Hage, 2009; Parham & Helms, 1985).

Prevention at the meso and macro levels targets community and societal changes that ultimately prevent harm to individuals and groups. Prevention in these realms may require psychologists to move beyond traditional clinical and research roles into the realms of advocacy, social action, and policy (Kenny & Hage, 2009). Lobbying for better mental health policies at the state level, advocating for mental-health-friendly workplace practices, and engaging in public awareness campaigns are just a few examples of this kind of work.

## Procedural Justice

### Engaging With Social Systems

***Ethical dilemma:** A neuropsychologist completes a diagnostic evaluation for a 13-year-old girl currently in eighth grade in a Massachusetts public school. Results indicate that she is reading at a third grade level and meets diagnostic criteria for dyslexia. During a client-feedback session, her mother expresses concern that, due to the school system's recent budget cuts, the neuropsychologist's recommendations for accommodations may face opposition from the school administration, which is focusing on allocating funds for students with more academic potential. Although she knows of this challenge, the mother is unsure how to advocate for her child's needs.*

Vera and Speight (2003) critiqued the tendency within the field of psychology to engage in social justice work exclusively at the micro level. Helms (2003) responded to this argument by noting the pragmatic and financial necessity for psychologists to continue to operate at the micro level, as long as professional incentives continue to align with that work. Although Helms's point is well-taken, and we, along with Helms, maintain that valuable social justice work can be conducted at the micro level, Vera and Speight's central point remains: that some form of engagement in broader social systems is essential to social justice work in psychology. Psychologists interact with external systems in various professional roles. To support clients, psychologists may collaborate with public school systems, legal services, and other clinicians in different professional settings. Furthermore, they often are employed within larger organizations in which psychology is only one component of a broader system of services. For instance, the top employers of psychologists in the United States include the federal government (primarily the Department of Veterans Affairs), medical centers, and university counseling centers (Bureau of Labor Statistics, U.S. Department of Labor, 2019). Large institutions such as these can also contribute to the ongoing oppression of marginalized groups, for instance, by maintaining regressive social policies and protecting the interests of the powerful. Therefore, to enact procedural justice, psychologists must understand how to engage with those larger systems as allies and advocates for

their clients with an understanding of the potential power imbalances between their clients and larger social structures.

Psychologists may provide valuable support to clients navigating larger systems in multiple ways. For instance, in the judicial system, a psychologist may provide a psychological evaluation for a client who is seeking asylum status or may provide testimony on the harmful ramifications of domestic violence as an expert witness. Within the educational system, a psychologist may advocate for a client with a learning disability to receive adequate accommodations or for a transgender client to obtain university residence that is appropriate for their gender and where they feel safe. In accompanying and advocating for clients in these kinds of contexts, psychologists must continually grapple with their own roles of power and privilege, reflecting on how to harness their own professional capital to most effectively serve clients' needs.

Psychologists can further engage in meso- and macro-level work as community consultants. In community consultation, psychologists lend their expertise to improve organizations and systems that affect marginalized communities. In their discussion of multicultural, feminist consultation, Hoffman and colleagues (2006) asserted that consultation should be nonhierarchical, open to incorporating external factors, empowering, and culturally responsive. They argue that psychologist consultants should act as agents of change, advocating for both clients and systems. These values of social justice consultation cut across the various standards outlined in this article, a reminder that these standards are co-occurring and mutually reinforcing.

### Raising Awareness About System Impacts on Individual and Community Well-Being

***Ethical dilemma:** In the landmark *Brown v. Board of Education* legal case, the U.S. Supreme Court voted to overturn racial segregation in schools across the country. Psychologists Mamie and Kenneth Clark provided evidence for the case. In a study in which they showed both Black and White dolls to Black children and asked them which were "nice," which were "bad," and which "which doll is most like you?" the majority of Black children preferred the White dolls over the Black ones (Clark & Clark, 1950). The Clarks interpreted these findings to show that segregation instilled in Black children a lifelong sense of inferiority. Their research ended up playing a crucial role in the Supreme Court's ruling. The Clarks lived in New York City, but for the trial, they were asked to replicate their study in South Carolina. At first, Kenneth Clark was hesitant to go because of the greater threat of violence in the south, particularly for him as a Black man, but he ended up deciding it had to be done (Clark, 1985).*

This example demonstrates the critical role that psychologists can play in shaping litigation, policy, and public discourse about pressing current affairs and justice issues. Mamie and Kenneth Clark's research contributed not only to changing individual lives but whole institutions. Although this work can be dangerous, and may involve great personal costs, when psychologists turn their gaze outward to scrutinize unjust systems, they can contribute to powerful social change.

Along with raising public awareness about injustices at the institutional level, psychologists may also engage in consciousness-raising with specific marginalized communities and individuals to foster the development of critical consciousness (e.g., Diemer & Blustein, 2006). As initially theorized by philosopher, Paolo Freire (1970), *critical consciousness* refers to one's awareness of how political,

social, and economic forces shape one's current experiences of oppression and social inequity. An emerging body of psychological research has investigated consciousness-raising as a catalyst for sociopolitical action (Chronister & McWhirter, 2006; Diemer et al., 2016; Godfrey & Grayman, 2014). This research indicates both the personal and social benefits of consciousness-raising in marginalized communities, and we encourage psychologists to engage their clients in discussions on issues that perpetuate their experiences of social marginalization and to facilitate sociopolitical action.

Psychologists can also raise awareness of systemic oppression by engaging students and fellow scholars through academic articles, courses, and public presentations that center the experiences of marginalized groups within social systems. For example, research on institutional responses to sexual violence has indicated that systems that are tasked with addressing and putting an end to violence can fall short and, in turn, cause psychological harm to survivors above and beyond the original violence (Campbell & Raja, 2005; Gutowski & Goodman, 2019; C. P. Smith & Freyd, 2013). Identifying how sometimes idealized (C. P. Smith, Gomez, & Freyd, 2014) professionals and institutions have the potential to do damage in this way can facilitate accountability to the communities they serve. C. P. Smith and Freyd (2014) drew attention to the potential of institutional harm through their theory of "institutional betrayal"—the concept that survivors of violence can be revictimized by the very institutions that they trust and depend on for safety. Epstein and Goodman (2019) pointed out the ways in which domestic violence survivors and other women receive "credibility discounts" when telling their stories of abuse at the hands of men for a number of reasons. For instance, judges may be unaware of how trauma or traumatic brain injury impacts storytelling and judicial testimony, survivors' narratives may fall outside of judges' personal realms of experience and empathy, or judges may perceive a storyteller as less credible simply because she is a woman. Illuminating such systemic biases through theory and research is imperative to the development of best practices for professionals tasked with addressing the needs of marginalized populations. Raising awareness among academics through this kind of scholarship may even lead to interventions that aid individuals who are vulnerable to systemic injustice (e.g., Hailes, 2018).

## Discussion

### Complexities of Socially Just Practice

The guidelines outlined in this article are intended to demonstrate the actionable steps that psychologists can take to ensure that their work upholds the APA's stated mission to pursue justice through ethically sound work in a diverse range of professional roles. However, as is the case for all ethical guidelines, the aspirational values outlined above are subject to the complications and conflicts that arise from real-life challenges. In order to fairly account for the complexities of the day-to-day practice of ethical social justice work, we provide a few examples below of ways that these guidelines may need to be interpreted flexibly and creatively in various situations.

We argued above that psychologists should focus time and resources on marginalized communities, despite incentives to the contrary. However, time and funding constraints are of genuine



concern and may require psychologists to weigh their commitment to socially just work against their capacity to meet their own financial and personal needs. Although we acknowledge the challenges these efforts pose, pro bono work is already encouraged by the current APA ethical principles, which suggest psychologists devote a portion of their professional time “for little or no compensation or personal advantage” (APA, 2003, General Principles, Principle B). We see our social justice guidelines as both an extension of, and outright naming of, ethical values already at the heart of the current ethics code, particularly the principle of justice. Therefore, we encourage psychologists to consider the wide array of professional actions they may pursue to promote social justice within their needs and means, both inside and out of the systems in which they practice.

We also argued that psychologists should strive to work collaboratively to support the priorities of marginalized communities, but in some situations, a psychologist may feel torn between two equally deserving groups of stakeholders with mutually exclusive needs or desires. We encouraged psychologists to step outside of traditional, individual-focused roles to leverage their psychological expertise for community and social change. However, in this work with community collaborators, psychologists may feel torn between maintaining traditional therapeutic boundaries and establishing mutual, nonhierarchical community partnerships (Liang, Glenn, & Goodman, 2005). Finally, we argued that psychologists should raise awareness about systems, empowering clients with marginalized identities through consciousness-raising. However, a client may not always be ready or open to critical consciousness. In these cases, a psychologist who pushes too hard could do more harm than good, especially if they are not cautious about imposing their own cultural values. Therefore, consciousness-raising should be a slow and deliberative process (Goodman et al., 2004).

These examples highlight just a few of the many ways that social justice work may challenge psychologists to work creatively and flexibly, question preconceptions and norms, and grapple with conflicting values and ideals. Because of these challenges, it is imperative that psychologists work within a network of colleagues, mentors, and friends who support their commitment to social justice. When ethical dilemmas do arise, psychologists should not be left to struggle with these issues in isolation. In highlighting some of the ethical dilemmas that complicate the praxis of social justice ethics, we hope not to discourage or detract from their application but rather to draw attention to their profound complexity. As a field, psychology must be receptive to honest conversations about the challenges of applied social justice ethics and working toward possible resolutions. A codified set of guidelines of social justice ethics provides an opening for these difficult conversations and a framework in which they can take place, not the final word.

## Conclusion

As psychologists, we dedicate our professional lives to individual and community mental health and well-being, so as a profession, we must also be invested in social justice because the two are inextricably linked. Prilleltensky and colleagues (2007) define “wellness” as a condition that is produced by the fulfillment of personal, relational, and collective needs, and propose that wellness cannot exist without justice because individuals and commu-

nities cannot be well in the absence of resources and opportunities for growth, connection, and safety. Other scholars have argued that systemic marginalization and, consequently, internalized oppression are some of the most detrimental factors to a community’s well-being (Toporek et al., 2009).

Now, perhaps more than ever, a set of ethical guidelines is needed to steer the social justice efforts of psychologists: We increasingly understand the implications of macro-level injustices, such as poverty, racism, and other forms of systemic oppression, on micro-level mental health and well-being (Murali & Oyeboode, 2004; Williams & Williams-Morris, 2000). Furthermore, because of our professional expertise and prestige, our commitment to human flourishing, and our flexibility to work as researchers, clinicians, consultants, educators, and policy experts, psychologists are uniquely positioned to advocate for justice on behalf of and alongside individuals and communities. We must not take this position lightly.

This article is, by no means, the first in our field to call upon psychologists to act as agents of social justice in their communities and professional capacities (e.g., APA, 2011; Nadal, 2017; Prilleltensky et al., 2007), but we hope that the introduction of ethical guidelines for social justice work in psychology serves as a valuable contribution to this developing field. We believe that psychologists require a set of ethical guidelines to support and guide their social justice work. As it stands, the APA’s ethics code calls upon psychologists to pursue justice in their work but does not provide robust guidelines for the practice of social justice. The set of guidelines outlined in this article is intended to fill this gap and serve as a useful tool for this work.

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