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The Principled Conduct of Counseling Research With Ethnocultural Populations

The Influence of Moral Judgments on Scientific Reasoning

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Most social scientific research involves direct, intimate, and more or less disturbing encounters with the immediate details of contemporary life, encounters of a sort which can hardly but affect the sensibilities of the persons who practice it. An assessment of the moral implications of the scientific study of human life which is going to consist of more than elegant sneers or mindless celebrations must begin with an inspection of social scientific research as a variety of moral experience.

—Clifford Geertz (2001, pp. 22-23)

The words of the distinguished cultural anthropologist Clifford Geertz set the tone and context for the primary theme of this chapter. His poignant and well-expressed observation points to the need for field-based researchers to balance moral experiences with scientific inquiry and is in keeping with the fundamental ethical principle that one “should do no harm” when it comes to the conduct of research regardless of its level of analysis and method of investigation. Framing ethical principles and guidelines to include “moral considerations” is an indispensable condition for guiding research endeavors. Geertz’s clarion call to researchers comes none too soon as community voices are challenging the way research has been conducted and the way that respondents were treated during the research process.
In the past few decades, there has been a remarkable increase in mental health research conducted among ethnocultural communities and populations—in this chapter, ethnocultural refers to a group or groups in a larger society with distinctive cultural traits who share and identify with a common national, racial, linguistic, or religious heritage and whose shared beliefs and practices identify a particular place, class, or time to which they belong.

As the research ventures increased, so have the concerns of many ethnic and cultural communities about research in general and the presence of researchers in their communities. The mounting community concerns accompanied by the emergence of community-based research review committees present unplanned and unusual challenges for researchers—challenges that are only beginning to be fully and seriously acknowledged at methodological and conceptual levels. The most important challenges is the responsible conduct of researchers while they are in the field and the relationship they establish with their respondents; a relationship that should be included as part of the research method (Trimble & Mohatt, 2006). Equally important are researchers' virtuous and moral principles and the extent to which they are closely aligned with professional ethical standards.

The purpose of this chapter is to raise considerations and essentials to encourage ethical decision making for mental health research with ethnocultural populations that reflect the unique historical and sociocultural realities of ethnic and racial people and their communities. A secondary objective is to highlight the untoward consequences of irresponsible research and cultural incompetence and the effects they generate for the researchers and respondents. The end result of cultural and ethical insensitivities of field-based research has often been harmful to the participants, leaving many with indelible emotional scars and memories. As a result, many communities are now taking steps to protect themselves against future abuses of research practices and the insensitivities of the researchers.

The chapter follows three ethical dimensions of culturally meaningful research: applying a culturally resonant perspective to the evaluation of research risk and benefits, evaluating and implementing culturally respectful moral beliefs and value orientations, and engaging in community and participant consultation with a standard of principled cultural sensitivity.

**MORAL ORDER AND VALUE PERCEPTIONS**

Although professional normative ethical principles and standards serve as comprehensive guidelines for the conduct of research, the personal moral persuasion and value orientations of researchers should take precedence. Ethical principles and standards require researchers and practitioners to be vigilant and self-reflective about the consequences of their actions and the corresponding behavioral-cognitive-emotional influence on their respondents; ignorance of professional ethical principles and standards is not acceptable. Moreover, for one to be successful in a research field setting, there must be concurrence with professional normative standards and personal moral persuasions. As Geertz (2001) reminds us, “An assessment of the moral implications of the scientific study of human life... must begin with an inspection of social scientific research as a variety of moral experience” (p. 23).

“Moral assessment,” argues Smith (2005), “is not that we have voluntarily chosen it or that we have voluntary control over it, but that it reflects our own evaluative judgments and standards” (p. 237). The assessment of morality can be construed as a rational process, and thus the assessment of whether or not one’s research approach will do no harm should lead to a logical decision in favor of protecting the rights of study participants. Unfortunately and regretfully, some researchers take a more self-serving approach where their needs, aspirations, desire, and wants overshadow those of their host communities, and that approach—likely judged rational by the researcher—is the foremost reason for the problems ethnocultural communities have and continue to experience with outside researchers. Self-serving researchers may believe they can mask their selfish intentions, but they may be deceiving themselves to believe they will go unnoticed. The prominent cultural anthropologist Ward Goodenough (1980) reminds us,

The principle that underlies problems of ethics is respecting the humanity of others as one would have others respect one's own. If field [researchers] genuinely feel such respect for others, they are not likely to get into serious trouble. But if they do not feel such respect, then no matter how scrupulously they follow the letter of the written codes of professional ethics, or
The Principled Conduct of Counseling Research

follow the recommended procedures of field [research] manuals, they will betray themselves all along the line in the little things. (p. 52)

Virtues and Personal Ethics

What are the personal qualities of people, and how do they influence their conduct of research with ethnicultural communities? ask Trimble and Mohatt (2006). Does it mean that one must be a morally decent person who closely adheres to a precise set of values that will not be compromised? Does one consider ethical standards in the context of viewing community-based dilemmas from a principled perspective guided by the fixed rules of objectivity, reason, and impartiality? Is that approach likely to be acceptable to the community's research partners? Is it possible that one's character and thus moral and ethical standards are incompatible with those likely to exist in the host research community? (p. 327). In addition to the personal challenges, the questions prompt communities to learn more about the kind of person with whom they will be working in the course of the relationship.

As Goodenough reminds us, if researchers don't show respect for their hosts, then no matter what they do, they will betray themselves. Similarly, if researchers don't closely follow and live by a set of principled virtues such as prudence, integrity, respectfulness, benevolence, and reverence, then at some point, they will gradually alienate their hosts; if the distrust and perceived lack of respect increases, researchers may be asked to cease their study and leave the community (Trimble & Mohatt, 2006).

Ibrahim (1996) and Vasquez (1996) prompt us to consider the possibility that most, if not all, ethnicultural groups have their own set of well-framed ethical standards often grounded in legends, traditions, and customs. In effect, a community's culturally specific standards may not resonate with those of the researcher's cultural orientation. For example, there may be different lexicons for what constitutes trust, respect, reverence, and honesty. If there are differences in the meaning of these values, how does one earn trust and respect within the context of another culture? And most important, how does one know that he or she has earned and established trust and respect? The questions are not merely academic exercises but ones that require careful self-reflection. "To facilitate character and moral development in a multicultural system," maintains Ibrahim (1996), "we have to identify all the moral ideals that each cultural system subscribes to and find common ground" (p. 83). Learning the deep cultural meaning of what constitutes trust and respect therefore requires the researcher to spend time with the community. One will soon discover that community members will put researchers through a series of subtle and not-so-subtle tests and trials to assess their level of commitment to working closely with them as well as their commitment to learn about their cultural ways (Trickett & Espino, 2004).

Do No Harm and Doing Harm to Others

The maxim that one should do no harm has become the fundamental ethical principle underlying all research relationships. Using Haidt and Graham's (2007) five psychological foundations for morality and applying them to research arrangements, one can ask the following questions:

1. Whether or not someone was harmed; 2. Whether or not someone acted unfairly; 3. Whether or not someone betrayed his or her own group; 4. Whether or not the people involved were of the same rank; and 5. Whether or not someone did something disgusting. (pp. 104–106)

Viewed from Haidt and Graham's perspective, harm means much more than physical damage as it can include impairments, destruction, mischief, insult, disobedience, offensiveness, unfaithfulness, impertinence, and an assortment of like-minded words.

Doing harm to others indicates that one is engaging in unethical, derelict, and possibly unlawful behavior where a variety of perspectives serve to describe and characterize unethical and unprincipled actions. Using a variety of descriptors, Paul and Elder (2006) provide seven major categories to describe unethical behavior:

1. Using unethical skills to get others to act against their own best interest (e.g., defraud, betray, deceive, mislead, misrepresent, swindle, dupe); 2. Ignoring the rights and needs of others to get what you want
(e.g., covetous, egoistic, greedy, selfishness); 3) Rigidity of mind which keeps people from being ethical (e.g., prejudice, fanatic, intolerant, unfair); 4) Causing emotional discomfort (e.g., rude, disrespectful, uncivil, heartless, contentious, callous, dishonor, ill-mannered); 5) Causing pain and suffering (e.g., unkind, oppress, malicious, inconsiderate, cruel, domineer); 6) Refusing to tell the truth due to self-interest (e.g., dishonest, deceitful, disloyal, disingenuous, insincere); and 7) Unethical behavior that results from a perceived grievance (e.g., vengeful, spiteful, vindictive). (p. 22)

It doesn't take much speculation to come to the conclusion that the source for the growing concerns of numerous ethnocultural communities about outside researchers rests with the insensitive character and motives of those who abused their invitations and a community’s trust. Community members who at one time have had negative and troublesome experiences with research teams will be quick to use many of the descriptors provided by Paul and Elder (2006) to describe them. Words like insincere, dishonest, inconsiderate, ill-mannered, unfair, racist, and misleading appear to have occurred with great frequency by those embittered by the seeming lack of a researcher’s cultural sensitivity. Consider the startling words of a former research participant from a Northern Plains American Indian community:

I had this feeling of being violated and betrayed, then I went into shock, and then I got angry ... and then I went into denial. I thought, “oh well they don't know who I am. I was just a research subject.” After I participated in the study, I had no idea or didn’t even realize what all it was going to entail in the future. And then I come to find out that all the results have been "shared" through journal articles and publications. The realization for me was “Oh my god, I’ve been abused and violated because I had no idea that they would talk about us like that. Now we’ve been labeled like we're just a bunch of people walking around with diseases on reservations.” (Casillas, 2006, p. 73)

If one gets close enough to community members who have had negative experiences with outside researchers, one will eventually hear similar comments and thoughts. Additionally, one may learn that many community members are angry, intolerant, embittered, wary, and distrustful along with related emotional expressions, so much so that they no longer trust outside researchers and thus refuse to endorse or sanction any outside sponsored research endeavors. Unfortunately, the self-serving motives, needs, and pressures of some researchers overshadow the fundamental principles of ethical and responsible thoughts and actions embodied in professional codes of conduct; their selfish actions and attitudes set antithetical community precedents that get passed along from one generation to the next. Fortunately, within the past decade or so, scholars, academicians, and researchers have been devoting considerable attention to the principled conduct of research by drawing attention to the viewpoint emphasized by Geertz (2001), and that is that one begin an “inspection of social scientific research as a variety of moral experience” (p. 23).

COMPLAINTS FROM ETHNOCULTURAL COMMUNITIES ABOUT INCONSIDERATE RESEARCHERS

The growing concerns and complaints from ethnocultural communities about the presence and conduct of research are justified not only because of the cultural insensitivities and personal abuse of certain rogue researchers but also because more and more community-based research is occurring that involves or plans to involve members of various ethnocultural groups. Evidence for the rapid growth and interest can be found in a brief inspection of the scholarly literature. For example, the citations in PsycINFO for all of the principal ethnocultural groups in the United States suggest that the numbers are increasing rapidly. Examinations of the database citations for the major ethnocultural groups from 2003 to the present indicate that African Americans have 10,657 citations, Latina/o populations have 7,848 citations, Asian Americans have 3,863 listings, and American Indians and Alaska Natives have 3,209 citations. The number of citations from 2003 to the present represents an average of close to a 60% increase over all of the citations for the four groups for all years available in the PsycINFO database. The increase in citations referencing research related to the groups is a reflection of a maturing of psychology as a science discipline for all members of society. But the rapid growth of interest and levels of
research activity must be tempered by an awareness of the ethical implications of research efforts and relationships involving groups with whom most investigators have little familiarity.

Continuing changes in North American demographic distributions and patterns call into question the relevance of a psychology field that historically has not been inclusive of underrepresented and diverse populations. During the past 40 years, the study of racial and ethnic minority issues in psychology has evolved into what can now be considered a significant and rapidly growing field or subfield of study.

Culture and ethnicity matter, but they did not seem to matter enough in the history of the development of psychology. Culture and ethnicity are so pervasive and significant in the enculturation process that they beg for more attention and recognition. It is this very attention that the field of racial and ethnic minority is giving to the cultural and ethnic constructs. Culture and ethnicity matter so much that it behooves the investigator to spend considerable time with an ethn-cultural group of one's own to learn about the deep cultural elements of one's lifeways and thoughtways and how they contribute to social and psychological character. Once that is understood, then the investigator may be in a position to explore and apply conventional and traditional psychological principles to understanding; the collection of the information will undoubtedly influence the nature of the research and data collection procedures and measures, and that introduces a whole new set of methodological and ethical considerations (Fisher, Hoagwood et al., 2002; Harris, Gorelick, Samuels, & Ilempong, 1996; Israel & Hay, 2006; Trimble & Fisher, 2006). But it's the presence of the investigator and the nature of the research questions and methodological approaches that have been problematic for many communities.

Examples of Research Misconduct

Numerous scholars from many academic disciplines are keenly aware of the iniquitous Tuskegee Syphilis Experiment conducted in Macon County, Alabama, from 1932 to 1972. Originally titled the “Tuskegee Study of Untreated Syphilis in the Negro Male,” by every ethical standard and principle, it was a shocking and scandalous example of medical research gone awry. The U.S. Public Health Service, in attempting to learn more about syphilis and justify treatment programs for Blacks, withheld treatment from a sample of 399 Southern Black males; the experiment cost the federal government millions of dollars in research funds when it was eventually terminated. Researchers told the men they were being treated for “bad blood,” a local term used to describe several ailments, including syphilis, anemia, and fatigue (Caplan, Edgar, & King, 1992; Jones, 1993). In fact, they did not receive the proper treatment needed to cure the disease. In exchange for taking part in the study, the men received free medical exams, free meals, and burial insurance. Although originally projected to last 6 months, the study actually went on for 40 years.

Public knowledge of the study appeared in a news story written by Jean Heller on July 25, 1972, and ran in the Washington Evening Star and the New York Times; the next day, the story was carried in numerous newspapers worldwide and aired in radio and television newscasts (Jones, 1993). The shocking story gripped the attention of millions of readers and listeners and subsequently led to an immediate call for action and explanation from the U.S. Public Health Service. In response to the allegations, the U.S. government convened an ad hoc review committee to carefully investigate the charges and allegations. At the end of the investigation, the committee unanimously concluded that the study was unethical and that it must be terminated.

In a February 2004 Arizona newspaper article titled “Havasupai File $25M Suit vs. ASU,” the journalist summarizes the research circumstances that prompted Havasupai tribal members and the tribe to file a combined lawsuit and status report on the suit's developments (Hendricks, 2004). Between 1990 and 1994, researchers from Arizona State University (ASU) collected blood samples from tribal members that were to be used to study diabetes. Tribal members eventually learned that the blood samples had been used for purposes other than those to which they agreed when the respondents signed the human subject consent forms. The ASU researchers apparently used the samples to study schizophrenia, inbreeding, and factors that could explain human migration patterns. In May 2007, a Maricopa Arizona County Superior Court judge dismissed the tribe's case because of a legal technicality;
tribal officials said they plan to resubmit the suit and take the case to the Arizona Court of Appeals.

In 1979, a team of researchers led by Edward R. Foulks from the University of Pennsylvania’s Center for Research on the Acts of Man conducted a survey of alcohol use patterns among 88 Inupiat Eskimo villagers from Barrow, Alaska. The survey results indicated that 41% of the population considered themselves to be excessive drinkers and 60% felt badly about the consequences of their drinking. More than 50% reported that drinking ultimately created severe problems with family and spouse. Sixty-two percent regularly got into fights when they drank, and 67% experienced frequent blackouts and amnesia from the episodes. (Foulks, 1989, p. 8)

Considerable discussion occurred with members from the Inupiat community, the non-Native residents of Barrow, representatives from Alaska’s Department of Health, and regional consultants; much of the discussion was heated, especially about identifying the indigenous population in the reports and publications.


Community members, countless Alaska Natives, some knowledgeable researchers, and concerned citizens were shocked by the press headlines. Foulks (1989) stated that, “the press confirmed the stereotype of the drunken Alaska Native, whose traditional culture had been plundered. The public exposure brought shame on the community, and the people were now angry and defensive” (p. 13).

The fallout from the press coverage, the ire of the Barrow community and a few incensed research ethicists, and the alarm and concern of some research sponsors and sensitive researchers fueled considerable controversy and contentiousness. In 1989, the editor-in-chief of the Journal of the National Center for American Indian and Native Alaska Mental Health Research, Spero Manson, dedicated a special issue to the 1979 Barrow, Alaska, alcohol study in which Foulks contributed the lead article, titled “Misalliance in the Barrow Alcohol Study”; the other contributors in the edition provided various perspectives and recommendations with the principal emphasis on ethical and principled research conduct. In closing out his lead article, Foulks (1989) emphasizes that we hope that our experience will provide a valuable lesson demonstrating the degree to which the questions and methods of science are rooted in ethical, social, and ethnical political issues of the times, and of how scientists must self-consciously include these sometimes value-laden factors into their research design and planning. (p. 17)

Writing about the publication of field-based research findings, Goodenough (1980) cautions us that, “One must always ask oneself whether publication of such information is necessary or really serves any useful purpose” (p. 49). Indeed, if such self-reflection occurred before, in the course of, and after the Barrow, Alaska research activities, perhaps the outcomes would have been much more productive and beneficial, and less contentious.

The Tuskegee syphilis study, along with the studies described in this section, are examples of instances where scientists have exploited historically oppressed groups presumably to advance an understanding of the human condition (Ibrahim & Cameron, 2005). The outcomes of the three studies and many others should serve as a warning to those who would abuse participants and deny them their rights; that does not appear to be the case.

Increasing Complaints About Scientific Misconduct

The three examples of research improprieties are part of a growing and alarming list of instances and examples of scientific misconduct. According to Langlais (2006), the U.S. Office of Scientific Integrity reported that the “allegations of misconduct by scientific researchers hit an all-time high in 2004” (p. B11) and that there is reason to believe that instances of misconduct are likely higher because researchers are unwilling
to report or own up to ethical and moral transgressions. In a survey of 3,247 mid-career scientists, Martinson, Anderson, and de Vries (2005) report that “US scientists engage in a range of behaviours extending far beyond falsification, fabrication, and plagiarism” (p. 737). The range of the top 10 reported forms of misconduct extended from “falsifying or ‘cooking’ research data” to “changing the design, methodology or results of a study in response to pressure from a funding source” (p. 737); 15.5% of all the respondents reported that they had engaged in the latter form of behavior. In closing out their report, Martinson et al. (2005) strongly uphold that

It is now time for the scientific community to consider what aspects of this environment are most salient to research integrity, which aspects are most amenable to change, and what changes are likely to be the most fruitful in ensuring integrity in science. (p. 738)

What has not been factored in the allegations of research dishonesty and misconduct are the personal and psychological costs to the research participants as they strive to deal with anger, frustration, disbelief, trauma, and related hardships created by outside researchers who seemingly were more concerned about their professional welfare than they were about their participants. Although many community leaders have been forthcoming in their complaints about the conduct of certain researchers, there has been little attention to the aftereffects of the researcher’s course of action. Darou, Hum, and Kurtness (1993), for example, point out that prior to 1993, there had been eight psychological studies conducted among Cree bands in northern Quebec, and all but one of the researchers had been ejected from the communities; the authors claim that the principal reason for the dismissal had to do with the researchers’ lack of respect for the decisions made by local tribal leaders. Do the troublesome experiences continue to affect community members in harmful and depressing ways? What are the personal costs for those who continue to cope and deal with their objectionable memories and experiences, and the influences they have on their daily lives? What effect will the negative and objectionable experiences have on future generations as the stories are passed on from one generation to another? What is the likelihood that future outside researchers will gain entry to those communities that have been negatively affected by previous research endeavors? No doubt there are other questions that flow from the sentiments and experiences of participants to whom harm was done. Some attention must be given to the fallout from negative and untoward research experiences and the likely enduring effect they have had on participants.

Consider the impact that the Tuskegee syphilis experiment had on the 400 or so participants and their descendants. No one has extensively documented the opinions and experiences of the original participants in large part because many of them passed away before the study was terminated in 1972. Indeed, considerable scholarly research and commentary have been written about the experiment representing numerous academic disciplines; a scan of the literature on the experiment in the PsycINFO electronic database, for example, generates more than 140 citations; also, a search through the Google Scholar Internet electronic database yielded 3,510 article citations.

There is evidence that the troublesome effects of the experiment linger on in thoughts and memories of the descendants. Writing in the New York Times, Yoon (1997) claims that

The pain of Tuskegee is still very real even among grandchildren of the study participants, some of whom had not even been born when the study was officially ended after its existence was widely reported in the press in 1972. (p. 1)

Yoon interviewed several descendants of some of the participants in the Tuskegee syphilis experiment, and this is what they told her:

“I’m angry about it, very, very angry about it,” said Carmen Head, whose grandfather, Freddie Lee Tyson, participated in the study. “It’s a painful issue in my family.”

“It was something to be ashamed of, so it wasn’t talked about,” said Mrs. Lillie Head, whose father was one of the participants. She said that, “We were very disturbed after we found out my father was a part of it.”

“You get treated like lepers,” said Albert Julkes, whose father was a participant. “People think it’s the
scourge of the earth to have it in your family.” He goes on to say, “It was one of the worse atrocities ever reaped on people by the Government. You don’t treat dogs that way” (Toon, 1997, p. 1).

To begin the conversation, attention should be given to assisting communities and those harmed by the research endeavors and outcomes; the conversation could examine ways to facilitate community healing from a principled cultural sensitivity approach where an emphasis is placed on respect for those whom research and interventions are intended and that would prohibit interventions that violate cultural norms (Trickett, Kelly, & Vincent, 1985; Trimble & Fisher, 2006). Moreover, the culturally resonant approach emphasizes the importance of culture as a historical and contemporary aspect of the framework within which individuals appraise their situation and their options.

According to Casillas (2006), community healing involves three basic goals. First, identify whether the community has been harmed by a research project or has unanswered questions at the conclusion of a research project (i.e., Where is all the information going? Who is really benefiting? Where are the solutions? Why are there so many research projects in tribal communities?). The approach may be difficult for some researchers to take on, especially those who are conducting or who have conducted research studies in ethnocultural communities. Some may find it difficult to accept that their work has caused harm, because often there is a detachment between the researcher and the research participants. Specifically, principal investigators who conduct their research from afar often do not take the extra time needed in developing strong relationships with the community members. In many instances, outside researchers rely on local project staff to establish and sustain the relationships and partnerships. If the relationship between the researcher and community members sours, then local research assistants often bear the brunt of the community criticisms.

The second goal is helping people to acknowledge the pain versus denying that any harm has occurred. As the awareness grows about the deeper levels of harm that have been done or are still currently being done and experienced, acknowledging the people’s anger at an individual level as well as at a societal level is crucial.

ETHICS IN MULTICULTURAL COUNSELING

The third goal is providing a process to learn from what has happened and to set aside the pain and bitterness to improve the circumstances. Once the recognition and acknowledgment of what has happened and what is happening to people before, during, and after a research project has been conducted in their community, there may be more anger and frustration.

CULTURALLY RESONANT PERSPECTIVES AND THE AVOIDANCE OF RESEARCH RISKS

About 40 years ago, several federal government agencies within the National Institutes of Health initiated a vigorous research agenda that focused on the health and well-being of specific ethnocultural groups. Research projects that emerged from the agenda aimed to describe, understand, and remedy the disproportionate impact of health and well-being on the groups. Along with the scientific, social, and personal benefits that can be obtained from these laudable initiatives come risks of group stigmatization and exploitation rooted in the centuries-old legacy of political oppression and scientific exploitation of racial and ethnic minority groups in North America (Caplan et al., 1992; Darou et al., 1993; Foulks, 1989; Harris et al., 1996; Jones, 1993; Laosa, 1984; Norton & Manson, 1996; Trimble, 1989). The stakes are especially high for children and youth from underserved populations who require culturally authorized health services, but who are also most vulnerable to harm that can arise when ethical procedures do not adequately protect their rights and welfare (Fisher, Hoagwood et al., 2002).

To engage in any form of research, investigators are obligated to follow the ethical principles and codes of their respective profession; ignorance of the codes of conduct are inexcusable, although as incredible as it may seem, a few researchers have claimed they were uninformed and not aware of the guidelines, particularly those that pertain to ethnocultural groups. In the past, professional ethical codes of conduct did not specify principles that apply to research with ethnocultural groups. Anthropologists were the first professional organization to set standards for ethical conduct that provided a strict set of principles. In the prologue to their 1967 ethics statement, the American Anthropological Association states,
The Principled Conduct of Counseling Research

The situations which jeopardize research differ from year to year, from country to country, and from discipline to discipline. We are concerned here with problems that affect all the fields of anthropology and which, in varying ways, are shared by the social and behavioral sciences. (American Anthropological Association, 1948)

Unfortunately, the carefully worded prologue, together with a set of well-framed principles, were overlooked, ignored, or considered inconsequential by many field-based researchers. If they had been acknowledged, internalized, and adhered to, perhaps the critical and heated contentions of ethnicultural communities might not be at the intensity they are today.

Other professional organizations also took on the responsibility of crafting ethnicultural specific guidelines and principles. Guidelines published by the American Psychological Association (APA), such as Ethical Principles of Psychologists and Code of Conduct (APA, 2002a) and the APA Guidelines for Providers of Psychological Services to Ethnic, Linguistic, and Culturally Diverse Populations (APA, 1990), mandate psychologists to conduct research ethically and competently. APA has also published the Guidelines for Research in Ethnic Minority Communities (Council of National Psychological Associations for the Advancement of Ethnic Minority Interests, 2000), which emphasizes the importance of involving community members in the design, conduct, analysis, and interpretation of all research. According to the APA’s Guidelines on Multicultural Education, Training, Research, Practice, and Organizational Change for Psychologists, Guideline #4 states that “Culturally sensitive psychological researchers are encouraged to recognize the importance of conducting culture-centered and ethical psychological research among persons from ethnic, linguistic, and racial minority backgrounds” (American Psychological Association, 2002b, p. 40).

In 2002, the International Union of Psychological Science (IUPsyS) convened an ad hoc committee to identify, develop, and submit a universal declaration of ethical principles. The Ad Hoc Joint Committee representing five continents was directed to articulate principles and values that would provide a common moral framework for psychologists worldwide that could be used as a moral justification and guide for developing different standards appropriate for different cultural groups and their settings. In 2005, in collaboration with the IUPsyS, the International Association of Applied Psychology and the International Association for Cross-Cultural Psychology developed a draft version in which the Ad Hoc Committee acknowledges an extremely important principle:

Respect for the dignity of persons and peoples is expressed in different ways in different communities and cultures. It is important to acknowledge and respect such differences. On the other hand, it also is important that all communities and cultures adhere to moral values that respect and protect their members both as individual persons and as collective peoples. (Gauthier, 2008, p. 6)

In Principle 1, the authors maintain that

The continuity of peoples and cultures over time connects the peoples of today with the peoples of past generations and the need to nurture future generations. As such, respect for the dignity of persons includes moral consideration of and respect for the dignity of peoples. (Gauthier, 2008, p. 6)

The international professional psychological associations’ emphasis on morality is in keeping with the fundamental ethical principle that one “should do no harm” when it comes to the conduct of research. As indicated earlier in this chapter, framing ethical principles and guidelines to include “moral considerations” is an indispensable condition for guiding research ventures. Successful ventures must follow a set of procedures that is aligned with moral principles and ethical guidelines.

Principled Cultural Sensitivity

The ethical conduct of research begins with the principle that one’s investigations and explorations are guided by an authentic respect for the unique cultural lifeways and thoughtways of ethnicultural communities. Part of the respect means that researchers must embrace the value that ventures are collaborations and partnerships. Trickett and Espino (2004) summarized
the emerging literature on community-based partnerships and commented that

It is time to place the collaboration concept in the center of inquiry and work out its importance for community research and intervention. Although some would see it as merely a tool or strategy to getting the "real" work of behavioral science done, our strong preference is to view the research relationship in community research and intervention as a critical part of the "real" work itself. (p. 62)

Without establishing and working through community partnerships, research ventures are doomed to failure at every stage of the process. The perspective and orientation also add new research challenges. Some of those challenges are best captured in the advice offered by Goodenough (1980) when he affirmed that

Field workers have to honor the ethical principles of the host community in which they work as well as those of their home communities. They have to be honest about their research objectives and their sponsorship. They must not deceive the local people regarding the intent or intended uses of their research. They must consider the impact of the conduct of the research on the people under study and do all they can to insure against what the people will regard as significant negative effects. (p. 49)

The concept of principled cultural sensitivity was introduced to the field of community psychology as a core component of the Ecology of Lives approach to field-based research collaboration by Trickett et al. (1985) and Trickett and Birman (1989). As indicated earlier in this chapter, it is based on respect for whom research and interventions are intended and which would prohibit interventions that violate cultural norms. The principal goal of Ecology of Lives research and intervention is community development in which the project is constructed in such a way that it becomes a resource to the community. Unless one cares and is knowledgeable about how lives are led at the community level, such a goal would be difficult, if not impossible, to achieve. Furthermore, the approach emphasizes the importance of culture as a historical and contemporary aspect of the framework within which individuals appraise their situation and their options. The research perspective emphasizes the community context as the stage within which individual behavior occurs.

Tribal Participatory Research Model

In the past few decades, there has been considerable interest in the role and value of community-based participatory research (CBPR) for use with ethnocultural populations. The approach and perspective has in common the principle that research equitably involves community members, organization representatives, and researchers in all phases of the research (Burhansstipanov, Christopher, & Schumacher, 2005; Fisher & Ball, 2003; Mohatt & Thomas, 2006). The Tribal Participatory Research (TPR) model developed and encouraged by Fisher and Ball (2003) is a model that endorses and makes use of fundamental CBPR principles. (Brydon-Miller, 1997; Fisher & Ball, 2003; McTaggart, 1991; Whyte, Greenwood, & Lazes, 1991).

TPR emphasizes participatory action research, or collaborative community research, as an ongoing process of interaction between the researcher and research participants. The research team and participants exchange ideas and thoughts about the research process and then modify them as they conduct the research (Brydon-Miller, 1997; McTaggart, 1991; Whyte et al., 1991). Scientific principles are the basis of the research approach; however, great care and attention are given to the values and beliefs of the community members in formulating and conducting the inquiry (Fisher & Ball, 2002, 2003; Greenwood & Levin, 1998; Greenwood, Whyte, & Harkavy, 1993; Park, 1999).

The TPR model is sensitive to tribal community needs and agendas where community representatives set the research agenda and select and prioritize the research topics (Fisher & Ball, 2002, 2003, 2005). Fisher and Ball (2002, 2003, 2005) recommend four mechanisms for TPR for use in the American Indian and Alaska Native communities, but elements of their mechanisms can be generalized for use with other ethnocultural populations. The mechanisms are as follows: (a) community oversight that consists of tribal council resolutions, tribal oversight committees, and the development and implementation of a tribal research code; (b) use of local community members as
facilitators involving research staff and oversight committees; (c) training and employment of community members as project staff; and (d) the development of culturally specific intervention strategies and assessment methods. TPR emphasizes the use of culturally grounded intervention strategies that may be in contrast to evidence-based approaches. To accommodate balance for the use of evidence approaches, community focus groups can be convened to provide a reaction about the cultural appropriateness of an intervention (Fisher & Ball, 2003).

Use of a TPR protocol is not without its complications and shortcomings. Letiecq and Bailey (2004) identified five basic challenges to the evaluation research approach as “majority-culture researchers”: (a) constant evaluation of power differentials and evaluation research approaches, (b) training of local project staff in the meaning and purpose of the research and evaluation procedures, (c) provision of resources that cover the basic research needs of the local project staff and avoid logistical constraints, (d) review of research measures and assessment tools with community members to assure their cultural fit and resonance with local lifeways and thoughtways, and (e) use of researchers and assistants from ethnic backgrounds similar to the host community that can introduce problems associated with confidentiality and unfamiliarity with local traditions and customs.

Doing Good Well

An emphasis on researchers’ virtues and moral principles is closely aligned with the Goodness-of-Fit model developed and encouraged by Fisher and Ragsdale (2006). Along with several important considerations, the model and its prescriptions can create a circumstance where one can do good well. Doing good well means that the researcher and the team are virtuous and moral people and embody values and beliefs that community members and research participants find acceptable.

Based in part on Immanuel Kant’s categorical imperative that one’s highest moral obligation is to do the right thing—to act in a good way that benefits the community in ways that promote the greatest good for citizens—Fisher and Ragsdale’s approach emphasizes that harm can be minimized by aligning ethical principles to participant characteristics, the research context, and factors that can contribute to susceptibilities to personal and physical damage. Attention therefore should be given to the circumstances that potentially place participants at risk for harm in the components and features of the research method, implementation, and dissemination (Fisher, 2002; Fisher & Ragsdale, 2006). The Goodness-of-Fit model views scientists and participants as moral agents joined in a partnership where the researcher and the team are virtuous people who embody values and beliefs that the community finds acceptable. To establish and sustain a collaborative partnership, researchers should ask themselves the following three questions: What are the special life circumstances that render participants more susceptible to research risk? Which aspects of the design, implementation, or dissemination may create or exacerbate research risk? How can research and ethical procedures be aligned to participant characteristics to reduce vulnerability? By reflecting on these questions, Fisher and Ragsdale emphasize that the model can advance multicultural ethics further by posing the following value-based questions: Do the values embodied in current codes and regulations reflect the moral visions of different ethnic-cultural groups selected for a study? Do scientists and participants have different conceptions of research risks and benefits? In essence, Fisher and Ragsdale (2006) maintain that the purpose of the Goodness-of-Fit model and approach “is to provide models of ethical procedures reflective of specific participant group perspectives that can challenge current ways of thinking about ethics-in-science issues and point to new directions of moral awareness and scientific inquiry for multicultural research” (p. 21). Their position is closely tied to the observation offered by Meara and Day (2003) that in order “to be a virtuous researcher one must be self-regulatory and self-reflective and at the same time abide by ‘normative’ professional ethics” (p. 459).

ETHICAL PRINCIPLES AND COUNSELING PSYCHOLOGY RESEARCH THEMES

The conduct of psychological counseling and clinical studies with any population is riddled with potentially serious complications. The complications derive largely from the conduct of studies on people who may be
experiencing complicated emotional and behavioral problems such as depression, historical trauma, abuse of psychoactive substances, physical abuse and molestation, as well as the effects of life-threatening diseases and economic hardships. Research on these and related topics present situation-specific hurdles and challenges for the counselor and clinician when the studies occur in natural group or field settings; in essence, the researcher gives up control of a rigid research design and thus runs the risk of external sources influencing the validity of the study. Moreover, in the course of selecting respondents, the researcher runs the risk of publicly identifying people at risk for emotional and behavioral problems that in turn can lead to public shame, humiliation, embarrassment, and ridicule.

The conduct of clinical and counseling research with ethnocultural populations adds to the problems and challenges researchers may encounter. Mila and Iwamasa (1993), for example, focus their findings and observations on the influence and impact of “white researchers” who investigate and study ethnic minority populations; they raise troubling questions about the “community outsider problem” and the likelihood that white researchers may not be successful. In effect, the cultural identities of the researcher and interviewees, claim Song and Parker (1995), should be closely evaluated and explored in research settings. Moreover, because most field-based, community-centered research draws on the use of qualitative procedures, the techniques and approaches may be viewed as intrusive, threatening, and invasive; they can, and often do, lead to unique ethical challenges and problems (Baaernhielm & Ekblad, 2002). Indeed, as described earlier in this chapter, the mistreatment of ethnocultural groups by researchers has led to skepticism, mistrust, anger, wariness, frustration, and a multitude of similar concerns and expression. Ethical standards of conduct and principled moral perspectives can lead to unique ethical challenges that may require philosophical changes to render principles more responsive to the lifeways and thoughtways of ethnocultural communities (Alvidrez & Areán, 2002; Casas & Thompson, 1991). In turn, counseling and clinical psychology graduate programs must provide opportunities for students to critically examine research-related ethical principles in general and those specific for the needs of ethnocultural populations and how they influence service delivery and intervention and prevention research approaches (Fisher, Hoagwood et al., 2002; Harris, 2002; Ibrahim & Arredondo, 1986).

Considerable attention is being devoted to the ethnocultural ethical principles associated with specific mental health topics such as family violence, suicidal individuals, depression, psychoactive substance abuse, and immigrant health care (Fisher, Pearson, Kim, & Reynolds, 2002; Fontes, 1998; Marshall, Koenig, Griffhorst, & van Ewijk, 1998; Mohatt & Thomas, 2006; Trimble, Scharrón-del Río, & Bernal, in press). Fisher, Pearson et al. (2002) argue that clinical intervention and prevention research with suicidal individuals and their kin and friendship networks face complex ethical challenges that go beyond those for basic clinical research. They add that researchers should expect to deal with a respondent's capacity to comprehend confidentiality and informed consent, respondent safety, the validity and reliability of assessment, and community collaboration. Researchers must be aware of the fact that most ethnocultural communities are closely intact enclaves consisting of people who are related to one another through an elaborate and often complex extended family or clan network. In these settings, everyone knows everyone else and what they are all about on a daily basis—there are no secrets. Research with individuals who are different from community norms cannot occur without others knowing about it; protection of respondents' anonymity may be extremely difficult, if not impossible, in these settings, yet the research can occur as long as it conforms with the way the community deals with and acknowledges “people differences.”

SUMMARY AND CONCLUSIONS

Part of the principles and codes carefully and thoughtfully described in the 1946 ethical standard-setting Nuremberg Code emphasizes the fundamental principle that research in every sense of the word should meaningfully benefit society (Nuremberg Code, 1949); the Code also overwhelmingly emphasizes the value of respect for all research participants. The core theme of this chapter extends the Nuremberg Code's emphasis on respect to include personal moral and value orientations
that influence the nature of the relationship that researchers should establish and maintain with their host communities. As pointed out earlier in the chapter, moral assessment begins with self-reflection and the possibility that we do have control over our judgments and standards. Researchers must appraise community lexicons for morals and values to be certain they understand the similarities and differences that align or separate them for local customs and traditions.

A few rogue researchers took self-serving approaches to their research inquiries that eventually created strained and contentious relationships with their host communities. Ethnocultural communities no longer tolerate the “interloper” whose values and research goals are not resonant with local values, customs, beliefs, traditions, and needs. For research to resonate effectively with local lifeways and thoughtways, investigators are encouraged to embrace a principled cultural sensitivity approach that emphasizes prudence, integrity, respectfulness, benevolence, reverence, and community participation and involvement in the research venture. Additionally, research ventures can be proactive if they adopt the perspective of Doing Good Well that embraces the Goodness-Of-Fit model and approach that provide models of ethical procedures reflective of specific participant group perspectives. Community-based participatory research, like all research, is conducted with the firm conviction that one should do no harm under any circumstances. The conviction is fundamental to proactive and conscientious value and moral persuasions. And, as Ward Goodenough (1980) insists, they

follow from the basic principle that investigators owe all of the people with whom they deal, both as scientists and as human beings, the kind of respect for them and their humanity that they would like others to show them. (p. 48)

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