

CRACKING THE CODE: A CRITICAL DISCOURSE ANALYSIS OF THE CANADIAN
CODE OF ETHICS FOR PSYCHOLOGISTS

by

Ashley Ward

Master of Arts, Ryerson University, 2009

Bachelor of Science (Honours), Nipissing University, 2007

A dissertation

presented to Ryerson University

in partial fulfillment of the
requirements for the degree of

Doctor of Philosophy

in the Program of

Psychology

Toronto, Ontario, Canada, 2017

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Cracking the Code: A Critical Discourse Analysis of the Canadian Code of Ethics for
Psychologists

Doctor of Philosophy, 2017

Ashley Ward

Psychological Science

Ryerson University

Hailed as “possibly the best psychologists’ code of ethics anywhere in the world” (Hadjistavropoulos, 2009, p. 4), the *Canadian Code of Ethics for Psychologists* represents a powerful ethical and professional standard for practitioners of psychology. This ethical code boasts a strong theoretical and empirical basis, prediction and consistency, high educational value and relevance, and an empowering advantage for its users – psychologists. Yet, critical and feminist examinations of the CPA Code have identified problems with the Code, including its underlying structure and values, lack of regard for social justice, and ignorance of human subjectivity. These scholars’ critiques expose the problematic ideology of the CPA Code, throwing into question the ethical implications of this ethical code. Joining this broader project of critical psychology examining the undercurrents and effects of power in the discipline, this dissertation seeks to understand how the CPA Code produces ethical-professional practices and subjectivities. Framing this research within discourse, power, and governmentality or “the conduct of conduct,” I draw on the work of Michel Foucault and Foucauldian-informed psychologists to interrogate the ways in which the “ethical” practitioner is produced by the CPA Code. Further interested to explore the ethical-professional constructions of individuals and groups of people historically marginalized in Canadian society, I also analyze the CPA Code’s supplementary documents *Guidelines for Ethical Psychological Practice with Women* (CPA,

2007) and the *Guidelines for Non-discriminatory Practice* (CPA, 2001). This discourse analysis discovers the many dominant and appropriated discourses of the CPA Code, subject positions, as well as the discursive rules reinforcing the discourse practices and subjects. Dominant discourses constructing the CPA Code are science, objectivity, competence, expertise, legal, managerialism, and risk management discourses. Appropriated discourses are critical inquiry, betterment of society, and morality discourses. Sites where discursive rules are reproduced are education and training, licensure and regulation, ethical decision-making, consultation, and misconduct adjudication. Subjectivities of psychologists and clients are discussed. These findings are contextualized within Foucauldian theory and the broader critical psychology literature.

Acknowledgments

“Acknowledgements pages show the essence of the thesis author and their experience. If you look through a dozen or so at a time, you will hear the screams, the manic laughter, catching the sombre tragedy and the sense of awe and agony that underpins the doctoral life span.”

(Carter, 2013)

What a journey my graduate psychology program experience has been! I agree that my education and training was, depending on the circumstances, either characterized or punctuated by occasional screams, manic laughter, and awe and agony. None of these experiences were had in vain, either. In the wise words of my MA thesis and PhD dissertation supervisor, Dr. David Day (David): “Everything you have done until now has prepared you for this moment!” And this moment could not be sweeter or more exciting.

Dr. Jennifer Poole (Jennifer), member of the School of Social Work, my dissertation Supervisory Committee, and Mad mentor, warned me early on in writing this dissertation that nothing would prepare me for the loneliness I would encounter. It was true. Fortunately, I still had all the support, and mentorship from family, friends, supervisors, acquaintances, and strangers that magically came together to make this work possible and complete.

I owe these people much more than I can express here. But, my humble and meaningful attempt:

I wish to thank my supervisor, David, for his strong and consistent support of my intellectual and professional development. He truly showed me possibility and opportunity in graduate psychology, from the diverse perspectives of criminal, community, child and adolescent development, and social psychologies. David’s expertise and approach to teaching and research demonstrate the passion he has for his work, and witnessing this was deeply inspiring to me as a student. I learned the fundamental importance of what it meant to pursue the work of this dissertation. How deeply grateful I am to David! No doubt his many imparted pieces of wisdom will continue to echo throughout my coming years of work. One of my favourites is: “Every sentence should always relate back to your main point.” I hope I have done that here!

I am deeply appreciative of Jennifer, who was magically present and sought for review/input on every aspect of the process of this dissertation. Jennifer’s teaching, expertise, and supervision particularly guided the theoretical/conceptual and analytic approaches I take in this research; getting through the work of Michel Foucault without would have proved an impossible task without her! Jennifer also connected me to Madness, Mad Studies, and Mad Pride, a way to make sense of my own experience in/with “mental health” and ultimately illuminated a different way for me to embody “mental health.” I learned from this experience the necessity of uncompromisingly following this line of practice in psychology, no matter how radical, dismissed, or rejected. I look forward to our Mad collaborations in interdisciplinary pedagogy and research.

I give a sincere thank-you to Dr. Thomas Teo, professor of (critical) psychology from York University and member of my Supervisory Committee, for his interest in and evaluation of this

dissertation. Particularly vital to this work, Thomas's contributions to ethics in critical psychology, methodologism, and philosophical problems in psychology provide much of the flesh of this dissertation. His brilliant identifications offer me much hope in going forward with opening up pedagogical, professional, and public discussion of these issues as they relate to the argument for social justice in the discipline of psychology. I look forward to collaborating on issues of ethics in psychology!

This process also gifted me with a group of diverse and prolific scholars to independently evaluate this dissertation, giving me critical feedback that will only bring further depth and rigour to the next iteration of this work. I would like to thank my Examining Committee: Dr. Leslie Atkinson, Dr. Kieran O'Doherty, and Dr. Susan Preston for their insightful comments and encouragement, and also for the challenging, thought-provoking questions.

A special acknowledgment goes to the Department of Psychology at Ryerson University for enabling and supporting this research. As an aside, I certainly will never forget getting a call from Dr. Martin Antony at a Chicago airport while filming an APA video series! I also am grateful for the extension of connection/mentorship post-graduation by a few professors.

I would be remiss to exclude expressions of gratitude for the wonderful administration support I have received throughout my PhD. Tara Stallberg and Lisa Vuong, you continue to be missed and especially so during the final stages of this dissertation's completion. Alicia vanDeWeghe, you have done an incredible job of not just filling the big shoes left for you, but by making them your own! Bravo! And thank you to Sarah Carmichael for being supportive to my periodic requests, and for all the invitations for extra exam invigilation positions!

Sincere credit goes to Sherry LePage for her thorough copyediting and for bringing me to the defence stage!

Expressions of my gratitude also go to the folks in the Tri-Mentoring Program/Access Centre collaboration, and particularly to Mariam Hashemi-Wong, Nicole Meehan, and Amanda Lin. Likewise, folks in Academic Accommodation Support – Mandy Sandhu, Sarah Cloke, and Maria Taylor – deserve a deep acknowledgment. Their support and assistance with my accommodations at Ryerson helped to create vital time and space for this dissertation to live and grow.

I am indebted to Dr. Natalya Androsova, an incredible mentor for me in writing and thinking about this research. Her joy for writing is infectious and stimulating. At every step of the dissertation process, right through to defence, Natalya provided me with coaching support and strategies to conceptualize, organize, and process the writing. She also coordinated Dissertation Retreats, 3 of which I had the privilege to attend at Artscape Gibraltar point. Writing is now not only a practice I enjoy but a place I genuinely look forward to going.

An important influence in my choice to pursue this work was my research practicum placement experience with Dr. May Friedman (School of Social Work) and Dr. Emily van der Meulen (Criminology). Working on the *Criminalized Mothers Project* was my first hands-on experience with critical and feminist theory/ies and analysis. I am happy I never came back from this

transformative experience. Additionally, Dr. Kim Varma (Criminology) is a wonderful mentor and collaborator; she initially exposed me to the ideas of Foucault and supported the work of this dissertation.

My friends – Amy Brown-Bowers, Nicole Cormier, Sara Cowan, Jennifer Newman, Sandy Oziel, Megan Pearson, Sheryl Roy, Nicole Sugden: Thank you for work dates, process sessions, hot meals, chocolate, your couches on late nights, coffee, tears, and laughs. Fellow crazy people Alise, Stephanie, and Kristen: these people offered me another dimension of space and community in the (un)common experience of being Madwomen in scholarship and practice.

Last, but not least, I thank my family for their infinite presence, patience, and love throughout the writing and defence of this dissertation. My mother, Heather Ward, who taught me to take nothing for granted and to keep working with my eyes on the prize. Paddy Bowen: a woman of strength, gumption, and motion – the best mentor and “mother-in-law” one could have! My partner Elisabeth Leroux is a pillar of strength in every way possible. I admire her endlessly. All at the same time, she has been a sounding board, peer reviewer, coach, lifeline support, and...home for me and for this dissertation. And, of course, thank-you to Huron the cat, who has quite possibly tolerated more noise about this dissertation than anyone (including Elisabeth!).

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“As psychologists dealing with subjective experience, it is essential that we concern ourselves with power.”

(Austin & Prilleltensky, 2001, para. 6)

“A human endeavor that focuses on humans in all their infinite variety, psychology never runs short of ethical challenges that are complex, filled with gray areas and conflicting values, and lacking clear, easy, or definitive answers. Meeting these challenges is an inescapable responsibility that falls on each of us.”

(Pope, 2011, p. 89)

“Ethics makes safe. It throws a safety net under the judgments we are forced to make, the daily, hourly decisions that make up the texture of our lives. Ethics lays the foundation that forces people to be good; it clarifies concepts, secures judgments, provides firm guardrails along the slippery slopes of factual life. It provides principles and criteria and adjudicates hard cases. Ethics is altogether wholesome, constructive work, which is why it enjoys a good name.”

(Caputo, 1993, p. 4)

“We must question those divisions or groupings with which we have become so familiar... These divisions – whether our own, or those contemporary with the discourse under discussion – are always themselves reflexive categories, principles of classification, normative rules, institutionalized types; they, in turn, are facts of discourse that deserve to be analyzed beside others.”

(Foucault, 1972, p. 22)

Cracking the Code: A Critical Discourse Analysis of the Canadian Code of Ethics for Psychologists

The discipline of psychology and psychological practices represent “important part[s] of the social fabric of Canada” (CPA, 2016a, Psychology in Canada, para. 1). Indeed, psychology is interwoven into every aspect of dominant Western cultural institutions and practices. The discipline’s activities encompass a range of organized settings that include schools, community and social service agencies, health-related institutions such as hospitals and rehabilitation centres, criminal justice system, and corporate and private businesses. The scientific knowledges and technologies psychology produces for the regulation of mental health – or the diagnosis and treatment of mental disorders – are understood to be legitimate, trustworthy, respectable, effective, cost-reductive, safe, and helpful to members of society.

Psychology ethics represent the principles, values, and practices that appear to collectively unify the discipline. Our various identifications as ethical-professional practitioners are connected to the principles and values we appreciate most in our work, and directly inform how we believe our professional activities productively influence ourselves and those in our social world. As practitioners, the meanings we derive from our professional activities matter deeply to us, and are reflected within our discipline and within our society. Although psychology is a discipline comprised of diverse perspectives and practices, we agree that any harm to individuals and groups of people in society as a result psychology research and application is generally unacceptable.

Mainstream Psychology and the Problem of Social Justice Ethics

Harms to individuals and groups of people in society are not artifacts of the past for psychology. There are multiple lines of academic scholarship and organized activism within and

outside of mainstream psychology that demonstrate harms traceable to the institution of psychology and its practices. This broadly constituted body of literature is comprised of works by scholars and activists in the discipline, speaking from critical (Austin & Prilleltensky, 2001; Parker, 2014a; Prilleltensky, 1989, 1997, 2002, 2003; Sugarman, 2015; Teo, 1999; 2006, 2009, 2010, 2011, 2013, 2015a, 2015b, 2015c; Walsh, 2015a, 2015b; Walsh & Gokani, 2014), feminist (Marecek & Gavey, 2013; Marecek & Hare-Mustin, 2009; MacKay & Rutherford, 2012), indigenous (Paredes-Canilao, Barbaran-Diaz, Florendo, Salinas-Ramos, & Mendoza, 2015; Teo, 2013), postcolonialist (Frost, 2013; Painter, 2015), activist (Bassman, 1997, 2001; Diamond, 2012), and mad¹ (Adame, 2011, 2012; Bassman, 1997, 2001; Burstow, 2004, 2005; Deegan, 2000; Richards, Holttum, & Springham, 2016) positions. For example, feminist psychologists have long questioned and continue to challenge our ethics as monolithic in approach, exemplifying the ways in which gender is problematically represented in mainstream psychology ethics and practices. Feminist psychology researchers have questioned DSM categories (Marecek & Gavey, 2013; Marecek & Hare-Mustin, 2009), considered intersections of gender, race, and madness (MacKay & Rutherford, 2012; Ussher, 1991), advocated for plurality of understanding to experiences of mental health (MacKay & Rutherford, 2012), and brought awareness to power dynamics in intersubjective relationships with clients (Radtke, 2011).

Postcolonial and Indigenous scholars have similarly questioned the dominant approach as harmful for healing and holistic approaches (Painter, 2015). Psychology employs racist representations of groups of people (Teo, 2010, 2011, 2013) and of Black people specifically (Durrheim & Dixon, 2004; Durrheim, Hook, & Riggs, 2009; Hook, 2007). Moreover,

¹I use the terms “mad(ness)” rather than mental disorders, mental health problems, mental illnesses, and other biomedical/biopsychosocial terms of “mental health” to disrupt the illness/wellness dichotomy and include a broader range of experiences and phenomena related to “mental health,” distress, and healing. My use of “Mad” indicates a deliberately claimed sociocultural and political identity (Schrader, Jones, & Shattell, 2013).

psychology's lacking hermeneutic approach to the interpretation of research findings (Burman, 1991; Parker, 2015; Teo, 2009, 2010, 2011) creates harmful representations of groups of people while ignoring other relevant knowledges that fall outside of the scientific paradigm. Mad psychologists and allies of the Mad(ness) critique of psychology have identified the devaluing of mad people's knowledge within psychology (Adame, 2011; Bassman, 1997, 2001; Deegan, 2000; Diamond, 2012; Kottsieper, 2009; Parker, 2014a; Richards et al., 2016). Critical psychology scholars have questioned the relevance of a monolithic, monocultural approach to psychology's subject matter and mental health knowledge, since there exists a vast range of approaches and resources related to mental health and healing.

Interdisciplinary critiques of mental health, mental illness, and recovery as relevant to psychology discourses include contributions from Critical Disability Studies (Church, 1997, 2013; Price, 2011, Reaume, 2002, 2006, 2009; Voronka, 2008), Mad Studies (Beresford & Russo, 2016; Costa et al., 2012; Diamond, 2012; LeFrançois, Menzies, & Reaume, 2013; Russo & Beresford, 2015), Social Work (Daley & Mulé, 2014; Poole et al., 2012), Occupational Therapy (LeBlanc & Kinsella, 2016), and anti-psychiatry and consumers, survivors, and ex-patients (Burstow, 2005, 2015; Burstow, LeFrançois, & Diamond, 2014; Burstow & Weitz, 1988; Caplan, 1996; Capponi, 1997, 2003; Chamberlain, 1978). Reviewing these particular lines of critique is not a focal point of my dissertation, but it is important to note that all of these contributions connect the commission of harm in the everyday actions of dominant intuitions of mental health normativity to a lack of social justice ethic and practice. The arguments for psychology's greater commitment to social justice ethics and broader engagement in social justice and social action and are not new (Prilleltensky, 1989, 1997, 2003, 2008; Stam, 2015; Sugarman, 2015; Teo, 2015a; Walsh, 2015a, 2015b), but they are rarely addressed in mainstream

psychology. Scholars from other social science disciplines and helping professions too have made calls for social justice ethics and practices, particularly in the fields of mental health recovery (Morrow & Weisser, 2012; Poole, 2011), social work (Poole et al., 2012), occupational therapy (LeBlanc & Kinsella, 2016), and critical bioethics (Murray & Holmes, 2009; Petersen & Bunton, 1997).

Canadian psychology's ethics is largely influenced by the Canadian Psychological Association, and specifically the *Canadian Code of Ethics for Psychologists* (CPA, 2016b). Formally established in 1939, the CPA has claimed itself as “the national voice of the discipline and profession of psychology in Canada” (CPA, 2013, p. 2). The CPA has organized and defined a standard of practice and responsibility for its institution and its members, and for the disciplinary practice of psychology, with a mandate to protect the rights, freedoms, and well-being of those who come into contact with its activities. This institution has published myriad empirically-based, best practice documents on clinical practice standards, guidelines for the use of psychological tests, standards for animal care facilities, standards for health care facilities, and has instituted accreditation standards for graduate programs and continuing education programs. To assure ethical and professional practice by its institution and membership, the CPA has instituted its own code of ethics since 1986. This ethics document has influenced the ethical-professional standards of practice for clinical psychology, and corresponds to the *Tri-Council Policy Statement* guidelines for research with human subjects (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, & Social Sciences and Humanities Research Council of Canada, 2014). In Ontario, the CPA Code is mandated for use in clinical practice by the College of Psychologists of Ontario (College of Psychologists of Ontario, 2009). Additionally, the diverse membership of the CPA are obliged to follow the Code.

The Canadian Code of Ethics for Psychologists

Hailed as “possibly the best psychologists’ code of ethics anywhere in the world” (Hadjistavropoulos, 2009, p. 4), the *Canadian Code of Ethics for Psychologists* of the Canadian Psychological Association (CPA, 2016b) (herein referred to as the CPA Code) sets a bar of ethical and professional standards for psychologists in Canada. This “social contract” is said to be established in (CPA, 2016b, p. 1):

mutual respect and trust, with society granting support for the autonomy of a discipline in exchange for a commitment by the discipline to do everything it can to assure that its members act ethically in conducting the affairs of the discipline within society; in particular, a commitment to try to assure that each member will place the welfare of society and individual members of society above the welfare of the discipline and its own members.

Intended for members of the CPA, as well as certain provincial regulatory bodies of clinical psychology that have taken up the CPA Code as their standard code of ethics, the CPA Code is regarded as an important, influential document in Canadian psychology. Education and training in CPA Code use has become a mandatory component of CPA-accredited programs in Canada. A widely-recognized symbol of Canadian psychology internationally, and a source of pride of the CPA, the CPA Code has shaped the development of international psychology ethics codes such as those of the Mexican Psychological Society (Hernández-Guzmán, 2011; Sociedad Mexicana de Psicología, 2002), the European Federation of Psychologists’ Associations (Lindsay, 1998), the New Zealand Psychological Society (Seymour, 2007) and the Psychological Society of South Africa (Watts, 2011). Canadian psychology ethics also directly informed the creation of the *Universal Declaration of Ethical Principles for Psychologists*, developed by the General Assembly of the International Union of Psychological Science (IUPsyS) and the Board of Directors of the International Association of Applied Psychology (IAAP) in 2008 (Gauthier, Pettifor, & Ferrero, 2010). Moreover, the CPA played a consultative role in the development of

other significant ethical documents in scientific practice, including the *Tri-Council Policy Statement* and related policies (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, & Social Sciences and Humanities Research Council of Canada, 2014; Pyke, 1992).

Proponents of the CPA Code claim that this code of ethics has a strong theoretical and empirical foundation (Hadjistavropoulos, 2009). Empirical research finds good hierarchical rank agreement of the four principles among pre-professional students and professionals from within and outside the discipline (Seitz & O'Neill, 1996). Some scholars recognize the CPA Code as having substantial educational value and relevance, and, compared to other professional codes of ethics, as better empowering the ethical decision-making authority of psychologists (Malloy, Hadjistavropoulos, Douaud, and Smythe, 2002; Williams, Hadjistavropoulos, Malloy, Sharpe, & Fuchs-Lacelle, 2003). These evaluations suggest that this ethical framework is effective in its practice, and superior to other codes of ethics and ethical practices. Considering this work, and the high regard the CPA Code has achieved amongst professionals, it is clear why the Code has earned a remarkable national and international status.

In spite of the success of the CPA Code, psychologists have raised questions about the CPA Code's implications for disciplinary morality, its reproduction of status quo values, and the harms created by this reproduction in everyday practice of the discipline. Some have observed that a set of prescriptive principles or values based in codified standards of practice do not guarantee any particular form of morality (Austin et al., 2005; Walsh, 2015b). Standardizing psychology ethics may render other forms of ethics knowledge as inferior, privileging the exclusive use and enforcement of CPA Code ethics in the discipline. Rossiter, Walsh-Bowers, and Prilleltensky (2002) contend that, "[E]thical decision-making is fraught with complex

economic, political, institutional, organizational and interpersonal realities rather than a detached exercise of cognitive problem-solving” (p. 536). Others find that the CPA Code does not consider ways of understanding ethics through such mediums as emotion and embodiment. Austin, Rankel, Kagan, Bergum, and Lemermeyer (2005) argue that when operating in day-to-day encounters with clients, psychologists’ thinking and decision-making practices may be considered more a matter of personal conscience than of following codes or standards of practice. Austin et al. (2005) suggest that in spite of a collectively decided set of rules through which ethical decision-making is shaped and supported, individuals are “ultimately alone in their moral choices” (p. 203). Highlighting culture as constructive to disciplinary ethics, interviews of Cuban psychologists conducted by Rossiter et al. (2002) contrast with North American psychologists on their centrality of morality: “human beings are defined by ethics; there is no behavior, there is nothing in our thinking where morals are not involved” (p. 543). Moreover, the values that are associated with the CPA Code are not made explicit, which some see as privileging institutional and disciplinary power over those individuals the discipline seeks to serve. Professional codes of ethics “simultaneously create the field of professional ethics itself, while obscuring the process of production” (Rossiter, Prilleltensky, & Walsh-Bowers, 1999, p. 87).

The Current Study

The current study marks a departure from traditional research on the CPA Code. The goal of this project is not to claim the CPA Code as either explicitly “good” or “bad,” or to consider psychologists and the discipline of psychology as “ethical” or “unethical.” Likewise, this study is not an examination of the effectiveness of psychology ethics, the experiences of those individuals engaged with psychology ethics, or discovering the “essential,” “true,” or “real”

components of ethics in psychology. Nor is it to offer a brand new code of ethics. This dissertation is a discursive analysis of psychology ethics in Canada as based in the text of the fourth edition of the *Canadian Code of Ethics for Psychologists* (CPA, 2016b), the *Guidelines for Ethical Psychological Practice with Women* (CPA, 2007), and the *Guidelines for Non-discriminatory Practice* (CPA, 2001), documents that have been historically and socially positioned as taken-for-granted and beyond the reach of question and critique by contemporary psychology practice. A study such as this represents the “turn to language”; a turn that has been taken up by a number of critical and interdisciplinary psychologists (Hook, 2007; Potter & Wetherell, 1987) and draws on the work of Foucault (1970, 1972, 1979, 1980, 1981). Thus, in the words of Willmott (1998), a central contribution of this work lies “in *the subversion of closure* rather than providing an authoritative means of resolving ethical dilemmas” (p. 211, emphasis in original).

I write from the perspectives of a White queer ciswoman, as a student of mainstream and critical psychologies, as a social science researcher, and as a Mad person. I engage my experiences with this dissertation research reflexively and most prominently as a Mad person. Per a Mad Studies perspective, or “a project of inquiry, knowledge production, and political action devoted to the critique and transcendence of psy-centred ways of thinking, behaving, relating, and being” (LeFrançois et al., 2013, p. 13), mental health as it is commonly understood becomes an ontological question mark. Mad Studies scholarship includes examinations of the production of madness in institutional texts, spaces, and practices; madness and embodied identities and social locations; approaches to mental diversity, mental distress, and other expressions of madness; and forms of epistemic harms and violence against mad people that occur in dominant institutions of mental health. I became interested in the ethics of mental health

to understand my experiences of sanism as a student and as a client of psychology and psychiatry discourses. Perlin (2003) describes sanism as “an irrational prejudice of the same quality and character of other irrational prejudices that cause (and are reflected in) prevailing social attitudes of racism, sexism, homophobia, and ethnic bigotry (p. 536). Sanism has been discussed in relation to psychology (Diamond, 2012; Burstow et al., 2014; McWade & Costa, 2016) and in other helping professions such as social work (Poole, 2011; Poole et al., 2012) and psychiatry (Burstow, 2015). Examples of common sanist microaggressions mad people experience are expert-professional judgments of individuals with psychiatric diagnoses as lacking in sound decision making and competent behaviour, requiring extra supervision and oversight, an expectation of low professional performance, and an expectation of bizarre and violent behaviour (Diamond, 2012; LeBlanc & Kinsella, 2016; Poole et al., 2012).

Departing from the idea of a true status of ethics, like Rossiter et al. (1999) I have come to view codes of ethics such as the CPA Code as an “effect of power which also produces power” (p. 86). Considering the CPA Code as an effect of power opens up the possibility for it to be understood as a discourse, a discursive product of power relations operating within a particular social, cultural, and historical context. My interest lies in interrogating the discourses that constitute the CPA Code, how these discourses are reinforced, and how the discourses operate to produce ethical-professional subjects. In doing so, this dissertation will highlight the political utility and critical capacity of Foucault’s idea of discourse as a way to enact powerful forms of critique and resistance. As a product of power, the CPA Code discursively constitutes its objects and creates possibilities for being an “ethical” psychologist, delimiting what may be considered legitimate, true, or right in practice. As an explicitly political critique, this work disrupts notions and assumptions that have become commonsense in the ways we traditionally

learn about, understand, think about, and apply ethics. When this construction is understood, “rendered fragile,” it permits the possibility of reconstruction, (re)production, and different possibilities for ethical action. Foucault’s discourse theory and methodology has been applied to ethics in fields of business (Bauman, 1993), ethics of health care and medicine (Petersen & Bunton, 1997), and mental health recovery (Poole, 2011). My dissertation contributes to these lines of inquiry. The purpose of this work is connected to the greater project of critical psychology that aims, in the interest of social justice, to expose the operations and effects of power in the discipline.

Chapter Outline

There are five chapters that make up the work of this dissertation: literature review, theoretical orientation, methodology, findings and discussion chapters. The first chapter is a literature review of scholarship about the CPA Code. In this chapter, I discuss the ways in which the CPA Code has been framed by reviewing the theoretical-empirical positivist literature and the critical literature critiquing the CPA Code. The theoretical-empirical positivist literature situates CPA Code as applicable to a range of topics of psychology. This literature celebrates the Code’s ability to predict and anticipate ethical issues, its ethical decision-making infrastructure, its educational applicability, and its broad, universalistic appeal in assuming a standardized approach. In contrast, critical scholars have taken issue with the CPA Code’s overemphasis on a standardized approach, its lack of social justice orientation, its lack of relevance for nondominant cultures and multiperspectives, its problems perpetuated in research practices in the form of methodolatry and epistemological violence, and its disregard for human subjectivity. These contributions raise troubling questions about the CPA Code’s ethical positions within social,

historical, and cultural lenses, rendering the CPA Code's political subscriptions as ideology and the reproduction of status quo assumptions, values, and practices.

In the second chapter, I explain the theoretical orientation of this dissertation. I initially situate the work within critical psychology, and introduce the broad aims and goals of this project. I also discuss postcolonial theory for critical psychology, given my reference to it in conceptualizing the problematic findings yielded by my analysis. Within the scope of a brief discussion of ontology and epistemology of psychology, I review positivist and social constructionist approaches and locate the work of this dissertation in the latter. From there I move into a discussion of poststructuralist theory to introduce concepts of discourse and language, meaning, and subjectivity, and then progress into an overview of the Foucauldian theory I use to construct this research approach. I draw on his concepts of discourse, power/knowledge, and governmentality to conceptualize the findings of the CPA Code analysis.

The third chapter is a discussion of the methodology I construct to discursively analyze the CPA Code. I open this chapter by broadly introducing the ways in which discourse analysis has been undertaken in psychology, and specifically within micro-analytic and macro-analytic approaches to discourse analysis. I locate the work of this dissertation within macro-analytic approaches, and then draw on Foucault and two Foucauldian-informed psychologists to build the methodological framework I use to analyze the CPA Code. This analysis includes an examination of discourse objects and subjects, governmentality, a critical approach. Then I explain the data collection procedure, analytic procedure, and how I considered quality assurance of the analysis. I demonstrate the way I accounted for quality assurance by discussing how some scholars have identified methodological problems, and how reliability and validity in discourse

analysis may be approached. To end the chapter, I present a full discussion of my reflexive engagement with the topic and analysis.

My analytic findings are discussed in the fourth chapter. This chapter is organized into four main sections to address the research questions: dominant discourses of the CPA Code, appropriated discourses, sites of production of discursive rules, and the subject positions produced by these discourses. I find seven dominant discourses which I label: science, objectivity, competence, expertise, legal, managerialism, and risk management discourses. These discourses exert a powerful influence within the CPA Code, and are influential in the constitution of the appropriated discourses. Appropriated discourses are: critical inquiry, personal, self-reflection, betterment of society, morality, vulnerability, diversity, and women. Sites of production of these discourses, which I identify as education and training, licensure and regulation, ethical decision-making, consultation and misconduct adjudication, serve as powerful regulators of the power/knowledge nexus of the discourses, and of the subject positions created by the CPA's discursive formation. I identify and discuss five subject positions: the Canadian Psychological Association, the discipline of psychology, the public, psychologists, and clients.

In the final chapter of this work, I begin the discussion by exploring the findings in the context of Foucauldian discourse, power/knowledge, and governmentality. I examine the implications of these findings within broader critical psychology and relevant interdisciplinary literature. Arguing for a broader social justice ethic in the discipline of psychology, I provide discussion about four possibilities to incorporate social justice ethic and practice: enabling of plurality of knowledges and expertise as "legitimate," decolonizing our discipline, engaging in reflexivity across disciplinary activities, and producing action-oriented change. I end the

dissertation with reflexive thoughts about this research and possible directions for future work in social justice ethics and practice in mainstream psychology.

Literature Review

In this chapter, I present an overview of the published literature pertaining to CPA Code ethics. I consider the disciplinary topics the CPA Code has been applied to and the acclaimed features of the CPA Code within the theoretical-empirical literature. I then turn to a different body of literature comprising critiques of the CPA Code. I position these lines of scholarship within positivist and critical/feminist research practices of psychology.

Theoretical-Empirical Positivist Literature

The theoretical-empirical literature on the CPA Code describes a useful and promising code of ethics, flexible in its comprehension and scope, reliable in systematic usage, and possessing high educational and research utility. Discussions in mainstream psychology literature have regarded this code of ethics as useful for its ability to address problems in psychotherapy research (Imber, Glanz, Elkin, Sotsky, Boyer, & Leber, 1986), issues faced in the provision of psychological services in a rural context (Hargrove, 1986), the impact of therapist illness on clients (Guy & Souder, 1986), the ethics of psychologists who write self-help books (Rosen, 1987), conflicts in the intersection of law and ethics in counselling and therapy (Mappes, Robb, & Engels, 1985), the role of a code of ethics in counselling (Mabe & Rollin, 1986), ethics issues in school counselling (Huey, 1986), and the future of ethics and related problems in counselling psychology (Goodyear & Sinnott, 1984; Kitchener, 1984). Relatedly, there is a collection of papers that apply the CPA Code to a range of research and practice topics, including practices of mandatory self-disclosure for students enrolled in coursework (Stark, 2011), forensic practices (Haag, 2006), peer review processes of manuscript submission (Hadjistavropoulos & Bieling, 2000), prescription privileges (McCrea, Enman, & Pettifor, 1997), advertising of professional services (Shead & Dobson, 2004), ethics of teaching and student

performance measurement (O'Neill, 1998; Pettifor & Saklofske, 2012), practical utility (Pettifor, 1998), and validity (Seitz & O'Neill, 1996; Sinclair, Pozner, Gilmour-Barrett, & Randall, 1987).

CPA Code creators Carole Sinclair, Jean Pettifor, and their colleagues have published on several aspects of the CPA Code's development and iterations since the first edition. These articles feature the CPA Code's development (Sinclair et al., 1987) and its novel features (Sinclair, 1998); the *Companion Manual* to the third edition of the CPA Code (Sinclair & Pettifor, 2001); applications of the CPA Code to particular areas of practice (Pettifor, 1998), such as prescription privileges and creatively to the context of Shakespeare's Hamlet (Pettifor, 1989); the CPA Code's changes across the first three versions (Sinclair, 2011); adoption of the CPA Code in psychology codes of ethics in other countries (Pettifor et al., 2011); and comparison of the CPA Code to other professional codes of ethics (Sinclair, 1996). Additionally, these scholars have engaged ethics discourse more generally on several topics, including fair and ethical student practices (Pettifor & Saklofske, 2012); dialogue in ethical principles (Pettifor, Sinclair, & Strong, 2005); ethics education (Pettifor, Estay, & Paquet, 2002); ethics and humour (Pettifor, 1982); accountability and quality assurance (Sinclair, 1980; Sinclair & Frankel, 1982); decision-making (Pettifor, 1998); universal or global practices of ethics (Gauthier et al., 2010; Pettifor, 2004a, 2004b; Pettifor & Sawchuk, 2006; Pettifor, Sinclair, & Falender, 2014); historical to current reviews on standards of practice (Pettifor, 1996; Sinclair, 1993, 1996); and professional conduct and discipline (Pettifor & Sinclair, 1991).

Feminist clinical psychologists of the CPA have published supplementary guidelines for particular facets of psychological practice. These guidelines included *Guidelines for Therapy and Counselling with Women* (Pettifor, Cammaert, Larsen, & Ames, 1980) and *Guidelines for Non-Sexist Research* (Stark-Adamec & Kimball, 1984). Following in 1986 were the *Guidelines for*

the Elimination of Sexual Harassment developed by Byers and Price (1986). Radtke (2011) writes that the *Guidelines for Non-Sexist Research* placed Canada as a leader in the practice of gender equality since similar American guidelines for practice were not available until 1988 (Denmark, Russo, Frieze, & Sechzer, 1988). Further documents that were influenced by feminist psychologists include the *Guidelines for Non-discriminatory Practice* (CPA, 1996, 2001) and the *Guidelines for Ethical Psychological Practice with Women* (CPA, 2007). These guidelines represent the application of the CPA Code to issues of working with women in therapeutic contexts and being non-discriminatory in practice. Feminist psychologists have influenced other policy documents, including the *Ethical Guidelines for Supervision in Psychological Teaching, Research Practice, and Administration* (CPA, 2009).

In the next set of subsections, I discuss four lauded features of the CPA Code highly valued by scholars and users of the CPA Code: prediction and consistency, ethical decision-making, educational applicability, and universal appeal.

Prediction and consistency. In discussing the rationale for the CPA Code's development, Sinclair et al. (1987) note that practitioners were often dissatisfied with codes of ethics that provided little or no decision-making guidance for resolving ethical issues, which is seen as particularly unhelpful when needing to apply different ethical principles simultaneously. Another common critique of professional codes was the lack of standardization in the deliberation and application of principles as they intersect with the various roles psychologists engage in (Sinclair et al., 1987). For instance, how could the CPA Code be made relevant for a research scientist of cognitive aging, whose interests include ethical standards in experimental research, and for a practising feminist psychologist who incorporates anti-oppressive, social justice principles in work with clients? Eberlein (1988) argues that consistency in ethics code

application to both everyday situations and ethical dilemmas lends itself to empirical study, so that ethics could be tested and better understood for its philosophical values. Thus, an important part of the construction of the CPA Code is its “ethics futurology,” or, “the anticipation of what would be appropriate in a given circumstance in the absence of other guides” (Tymchuk, 1986, p. 39), with the goal of relevancy and efficacy for all practitioners and disciplinary practices.

The CPA Code is structured in content by principles, values, and standards, and includes a 10-step ethical decision-making process for the anticipation and resolution of ethical problems (CPA, 2016b). The ordering of the document situates the four principles in a weighted order to be applied in a hierarchical fashion, beginning with Respect for the Dignity of Persons and Peoples and followed by Responsible Caring, Integrity in Relationships, and Responsibility to Society. The standards and values are seen to anticipate and address various ethical issues; some are instructive of specific actions and reflect standards of the profession (e.g., “Monitor and evaluate the effect of their activities, record their findings, and communicate new knowledge to relevant others” [CPA, 2016b, p. 20]) while others are aspirational in content (e.g., “Encourage others, in a manner consistent with this *Code*, to relate with integrity” [CPA, 2016b, p. 29]). One research study claims that the CPA Code is more influential to psychologists than it is to a group of physicians, in informing ideas about ethical behaviour in a consistent manner, than the views of their families, their religious background, and the attitudes of their peers (Hadjistavropoulos, Malloy, Sharpe, & Fuchs-Lacelle, 2003). Relative to physicians, psychologists had less variation in their ethical decision-making, which the authors suggest increased their consistency in ethical decision-making. Prediction and consistency in the ways ethics is approached thus represents one of the ways many practitioners come to value ethics in practice.

Ethical decision-making. Another feature of the CPA Code often referenced in mainstream psychology literature is its ability to facilitate ethical decision-making. Although many psychologists recognize several issues as obviously right or wrong (e.g., the case of having sexual relations with clients), others have argued that ethical dilemmas require complex thought and deliberation towards resolution (Austin et al., 2005; Tymchuk, Drapkin, Major-Kingsley, Ackerman, Coffman, & Baum, 1982). A developmental consideration of the CPA Code's construction was its use to address both broad and basic decision-making processes, an approach that is seen as superior to a rule-based approach that classifies actions as right or wrong (Tymchuk et al., 1982). Credited for its tiered decision-making system and 10-step decision-making process, the CPA Code is used to make both simple and complex ethical judgments in professional practice (CPA, 2016b). Complex ethical issues the CPA Code has been used to address include advertising, bartering services, and dual relationships. Eberlein (1988) argues that the CPA Code enables its users to properly "think through" ethical dilemmas using the four principles, attempting to minimize conflict and resolve specific problems to the satisfaction of all involved in the situation or dilemma.

Seitz and O'Neill (1996) examine the utility of the CPA Code's decision-making steps and report that the decision-making process ranks the needs of psychology recipients higher than those of the psychologists and of society, and that CPA Code users agree that Respect of the Dignity of Persons and Peoples should be ranked over the other three principles. In a similar study of vignette application to physicians and undergraduates who had either had principles described to them or had been taught hierarchical ranking of CPA Code principles (Williams et al., 2003), individuals who received education about the principles gave responses consistent with the CPA Code's organization and needed significantly less time to resolve the vignette

issues than those participants only provided with principle description. The physicians' responses were generally consistent with undergraduate student responses. The hierarchical structure of ranking functioned to increase the confidence in decision-making for physicians but not for the students. These studies also report distinctive variation in students' ranking of principles based on the contextual factors presented in each vignette. For instance, the results of solving certain sets of ethical dilemmas yielded inconsistent responding in principle rank among the sample, while for others a majority of participants ranked the same principle as most important for consideration. In both studies, the authors observed some variability in the ranking of solutions provided by the participants, which they attributed to contextual factors. Seitz and O'Neill (1996) acknowledge the importance of context by explaining that "there are always exceptions and areas requiring judgment" (p. 29). Thus, the CPA Code is seen to be flexible to contextual needs while offering users confidence in its decision-making structure.

Educational applicability. Another feature of the CPA Code is its educational relevance (Eberlein, 1988; Malloy et al., 2002; Sinclair, 2011). In Canada, members of the CPA and regulatory licensing bodies in certain provinces mandate the use of ethics code and standards of conduct as an enforceable practice for registered psychologists and psychologists in training. Ethics is recognized by the CPA as central to professional conduct and thus integral to training programs, with increasing attention in formal training (beginning at the master's level). Students of psychology at the undergraduate and graduate level are taught ethics through coursework, research projects, clinical practica, and other degree requirements. For CPA-accredited graduate programs in clinical psychology, ethical training using the CPA Code is mandatory (CPA, 2011), and, for those who will register with a regulating body such as the College of Psychologists of Ontario, applicants must successfully complete jurisprudence and ethics examinations. For

students conducting research projects as part of post-secondary degree requirements, study construction and approval often necessitates knowledge of policies and practices required by research ethics boards, *Tri-Council Policy Statement* (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, & Social Sciences and Humanities Research Council of Canada, 2014), and other institutional governance and funding bodies. The CPA Code's system of logic allows for particular teaching opportunities, such as posing a case study and creating discussion in groups (Eberlein, 1988; Sinclair, 2011).

The educational application of the CPA Code is related to its standardized conceptual framework (Sinclair et al., 1987) in the structural arrangement around four “pillars” or principles (Eberlein, 1988), whereby consistent application of its principles and decision-making steps can facilitate a broad understanding of particular situations faced by psychologists. The format allows for a more straightforward style of teaching in lectures and workshops. To this end, Eberlein (1988) argues,

The new Code of Ethics for Canadian Psychologists is more useful for a practising psychologist and offers a better educational tool than is true with most other existing codes. It is better organized, more coherent and more directly related to the underlying principles which psychologists need to consider. The ordering of principles offers critical guidance to a psychologist as does the recommended decision-making process. Both reflect an awareness of the moral and value issues involved when trying to reach a personal, ethically-oriented decision. (p. 211)

In an analysis of the language of the third edition of the CPA Code, Malloy et al. (2002) find that the Code's language contains “a strong authoritarian tone” (p. 246), discerning opportunities for particular kinds of decision-making in the professional context and adding the benefit of empowering psychologists as ethical-professionals.

Universalism. The idea of a universally-applicable code of ethics suggests it is possible to have common principles across all geographical, cultural, social, and historical contexts. The

CPA Code has been regarded for its use of principles of ethics that are considered by some to be universal in their applicability, congruent with the notion of professional standards for the discipline to practise and abide by. A standards approach is privileged within mainstream psychology, dominating what is understood as “ethical practice” across institutions and training sites of psychology. Some frame the CPA Code of Ethics as necessary to instill adherence to a particular kind of conduct (Sinclair, 1993). Sinclair et al. (1987) write that disciplinary knowledge itself is not enough to constitute the status of professional; a unified and coherent understanding of conduct in how a discipline approaches its activities is essential to this identity. This kind of code of ethics would incorporate basic expectations of the professional conduct of psychologists as it intersects with regulated health professional and research requirements, such as legal and legislative protections to recipients under psychology as related to the Health Profession Procedural Code (HPPC), and policy of protections around research practices by particular funding bodies, such as the *Tri-Council Policy Statement* (Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, & Social Sciences and Humanities Research Council of Canada, 2014).

Critiques of the CPA Code

In the following subsections, I discuss five lines of critique from critical psychologists, feminist psychologists, and others who have questioned the CPA Code’s assumptions, values, and practices. These five stands are: the CPA Code’s overemphasis on a professional standards approach, lack of regard for social justice, problematic cultural relevance, methodolatry and epistemological violence in research and practice, and ignorance of human subjectivity.

Lack of regard for social justice. Hadjistavropoulos et al. (2002) finds that the CPA Code’s principles of social responsibility and social justice are agreed to be of lowest ethical

priority for psychology practitioners. The CPA Code has been critiqued as a model of ethics that is individualistic, reactive, focused on individuals' problems that require immediate solutions, and employs a cost-benefit style of analysis that resembles a cognitive problem-solving decision-tree that reproduces status quo values (Walsh 2015a, 2015b). It also has low value for achieving social justice and social change within the discipline and in the discipline's contributions to society. Critical stances on CPA Code ethics demonstrate how the ethical codes are not inherently free of value; that psychologists' power not only has the propensity to be misguided but can be actively problematic; and that to truly honour the principle of responsibility to society, disciplinary change must occur (Sugarman, 2015). Issues of social justice are hierarchically made a lower priority, have gone unaddressed and ignored, or have been co-opted into a universal rhetoric of psychology ethics.

Although values and practices of social justice, such as promoting inclusivity, addressing colonization and oppression, honouring diversity, and addressing issues of empowerment and equity are said to be issues for professionals of psychology generally, social justice practice and advocacy are seen as the responsibilities of social, community, critical, and feminist psychologists (Pettifor, 2001) rather than a goal for the discipline as a whole. Thus, a fracturing of disciplinary responsibility for certain ethical practices prevails, and there is disagreement among psychologists about moral importance of honouring social justice values in the discipline.

Overemphasis on a professional standards approach. Since the CPA Code is stated to contain both “minimal attitudinal and behavioural expectations” as well as “idealistic, but achievable” kinds of ethical practices (CPA, 2016b), it diverges from a purely rule-based code of ethics. What is “idealistic, but achievable” ethics? If I were to perform ethics in terms of “minimal attitudinal and behavioural expectations,” can I consider myself an ethical practitioner?

Eberlein (1987) argues that if one is able to answer with a resounding, “Yes!” to whether the proposed action respects the dignity of the clients and other persons involved, whether responsible caring is being performed, whether the psychologist is being accurate and honest, whether the proposed action promotes the welfare of others and meets the psychologist’s responsibility to society, then the answer is “probably ethical, even if it may not be the best solution” (p. 208).

Some argue that a professional standards approach is insufficient for dealing with particular aspects of ethics in psychology, and that standards alone should not qualify as ethical behaviour (Truscott & Crook, 2013). Truscott and Crook (2013) warn students and psychologists that law and standards of conduct do not replace critical thinking about ethics. They note that ethical reasoning about a problem should not end with the affirmation that no law was broken or that actions were legal. They also specifically discuss the importance of reflexively examining one’s positions within the ethical dilemma or situation. Walsh (2015a) argues that although by definition the activities of psychologists are to be helpful and to improve the lives of people, this does not guarantee that psychologists are actually helping and improving the lives of people. In fact, the actions of psychologists can be irrelevant, unhelpful, and even harmful. Walsh (2015a) contends that there exists no final confirmation that we as psychologists have acted morally simply because we closely and carefully adhered to a set of clear, memorisable standards. He suggests that we must attend to even the most benign, commonplace actions that we often do not think about, dismiss, or come to regard as safe and good.

Moreover, when ethics are framed as a contractual, rule-bound system, they may be taken up by practitioners with a “cover your ass” perspective (Nuttgens, 1998; Rossiter et al., 2002), or thought about in terms of the end results of a practice, such as avoidance of penalization,

whereas when sanctioned consequences are removed, so too is a notion of duty (Austin, Bergum, Nuttgens, & Peternelj-Taylor, 2006). Austin et al. (2005) suggest that when operating in day-to-day encounters with clients, psychologists' thinking and decision-making may be more of a matter of personal conscience than of following codes or standards of practice. They contend that in spite of a collectively decided set of rules through which ethical decision-making is shaped and supported, individuals are "ultimately alone in their moral choices" (p. 203). Similarly, Bauman (1993) opines that morality is more of a personal attribute that directly maps onto one's sense of responsibility, going beyond a codified in a set of guidelines or rules that direct the limitations of our duty.

Clark (2012) argues that since Canadian psychological practices are rooted within modern Western societal values and politics, and thus embody primarily liberalist morals and values, these positions are uncritically accepted in the CPA Code. Clark (2012) asserts that the superordinate construction of the Code's four principles and their liberally-oriented content may not hold value across cultures that embrace different values and rankings of moral and ethical principles. Moreover, he highlights the responsibility of psychology to recognize new research on professional and ethical standards of conduct as influenced by different political and cultural positions, and to update their systems of ethical practices accordingly. Clark (2012) asks: "But what about members of the general population in Canada which the Code of Ethics ultimately serves? Would they arrive at the same ethical principles, or rank them in the same order of importance?" (p. 200).

Problematic cultural relevance. Jean Pettifor (2001) makes the claim that, "The CPA code is more proactive than many other codes in that extra care must be taken not just to behave right, but to behave in ways that actually benefit the consumers of services" (p. 29). Yet several

critiques of a lack of cultural relevance or inclusivity to diverse approaches have been made since the CPA Code's first edition in 1986. The universalist approach of the CPA Code does not enable multiperspectival accounts, values, and practices of community organizing and local knowledges. One instance of this as identified by Indigenous psychologists or psychologists working with Indigenous peoples notes that the Code labels particular relationships with people as "dual," given concerns in how relationships labelled as dual are normative or circumstantial given particular practices of psychology in rural locations (Sinclair, 2011). Another criticism is the CPA Code's overemphasis on verbal and written consent; this approach is inappropriate for particular cultures whereby it is customary to communicate nonverbally (Sinclair, 2011).

Previous iterations of the CPA Code have come under fire for their exclusion of people indirectly affected by ethical decisions, such as family members of clients; Sinclair (2011) notes that these criticisms were put forth by users of the Code not only in Canada but in international locations as well. The editorial response in the third edition of the Code was to acknowledge that "*due to culture,*" individuals would be unlikely to verbally communicate a desire to decline services (Sinclair, 2011). Additionally, in situations acknowledging current services as ill-equipped to address inclusivity and accommodation, individuals are advised to consult or refer to meet the need of the "best possible service" (Sinclair, 2011), downloading the "problem of culture" onto those seeking services in the first place.

The work of Rossiter et al. (2002) demonstrates the dominant Western cultural influences in CPA Code ethics, and specifically how the uptake of cultural values influences the ways in which psychology practitioners think about ethics in day-to-day practice. These authors investigate the cultural, economic, and political differences in psychological practices by contrasting North American and Cuban psychological ethical standards. Rossiter et al. (2002)

found that compared to the experience of Canadian psychologists, Cuban practitioners were noted for exhibiting a more collectivist, reflexive, critical approach to ethics, and problems of inequality related to power, safety, control, dialogue and communication were encountered much less frequently for Cuban practitioners. North American ethical codes are found to place emphasis on individualist, cognitive problem-solving processes and were reactive and prescriptive in their responses to ethical situations rather than being process- and anticipatory-oriented. Further, relative to Cuban psychologists, North American psychologists are unlikely to practice social justice principles in their work. In explaining this difference, Rossiter et al. (2002) explain:

Ethics is constructed within the relations of power of the particular location. In Cuba, the effects of the American embargo and the collapse of the Soviet Union ground the particular social relations of ethics in terms of isolation and extreme deprivation. But behind these local and particular renditions of ethics, the history, economics and politics of both Cuba and Canada profoundly shape the meanings of professional ethics. Cuban professional ethics are tied to its history as a colonized nation that underwent a socialist revolution that daily opposes, while trying to survive, the crushing economic and ideological power of the United States. Canada, on the other hand, depends heavily on American conceptions of professional ethics, and such ethics have been constructed implicitly in relation to a national history of capitalist expansion within a persistent and shifting imperialist framework. (p. 534)

In discussing their experience with ethics, Canadian participants often excluded mention of a national, historical, or economic grounding within their practices, “severed from their social and political roots” (Rossiter et al., 2002, p. 542). Canadian psychologists also expressed frustration with the technical quality of the ethical system, preferring instead open discussion and reflection with their clients rather than applying a rule-based framework. In contrast, ethics signified “the foundation of psychology” to Cuban psychologists, who placed emphasis on the intertwined relationship of ethics to morals: “human beings are defined by ethics; there is no behavior, there is nothing in our thinking where morals are not involved” (Rossiter et al., 2002, p. 543).

Another line of critique relates to the prominence of neoliberalist values in Canadian ethics. Prilleltensky, Rossiter, and Walsh-Bowers (1996) draw attention to the oft-overlooked forms of harm that ethical codes produce and fail to address in institutional clinical practice. Looking beyond commonly recognized issues such as client-therapist sexual relations and client financial exploitation, the authors identified more elusive problems such as “undermining the self-determination of clients, not respecting their cultural diversity, and minimizing consumer input during the helping process” (Prilleltensky et al., 1996, p. 288). One such example is the failure of a psychologist to incorporate cultural customs and values of a client that impact his or her therapeutic experience, while the client is unable to protest or decline services out of customary interpersonal respect for the professional. Another example is pressure for therapists to employ short-term therapy on a client when it is implied that the person would prefer access to longer-term therapy. Moreover, practitioners cited a lack of space to discuss these issues in regards to resources and time, and a fear of reprisal or judgment by colleagues.

This group of researchers conducted a qualitative research study that examined the process of ethics as experienced by mental health workers (Rossiter, Walsh-Bowers, & Prilleltensky, 1996). Interviews with mental health workers sought to collect information in the following three areas of practice: lived experience of ethical processes in community mental health agencies, conceptualizations of ethics, and workplace obstacles to ethical practices. Analysis of data suggested that practitioners viewed regular, open dialogue about ethics as essential to proper clinical practice, but perceived the space of their agencies and institutions as risky, judgmental, and unsafe places in which to do so. Participants also reported having a lack of time to properly devote to ethics processing and consultation. The authors tie these findings to

the influences of power related to historical and current practices of professionalism and note bureaucratic processes as interfering with proper ethical discourse in the workplace.

Methodolatry and epistemological violence. Concerns and complaints of the CPA Code cite that the lack of local customs and social context, affecting the interpretations of research findings, can translate to inaccurate and harmful representations of communities and groups of people (Teo, 2009, 2010, 2011, 2013). A number of critical psychologists have raised concerns with the ways in which psychological knowledge is interpreted and used, highlighting the complex issue of responsibility in research practices. Teo (2009, 2010, 2011) writes that the taken-for-granted natural scientific methodology applied by mainstream psychology assumes functional relationships between variables, ignoring the context and meaning of subject matter of study. He refers to this as methodolatry, whereby the primacy of a particular methodological approach always already precedes consideration of subject matter of study. This practice obscures certain facets of research and knowledge production, and discourages forms of questioning such as: What are the interests of those involved in the research? Who is benefitting, and what exactly are the benefits of particular results?

Ignorance of human subjectivity. Framing his discussion of mainstream psychology's problematic subject matter within a discussion of ontology, Teo (2009) identifies the mechanistic view of human matter as biological reductionism and neglect for subjectivity, human agency, and meaning. Machine models of mental life apply an individualistic focus to the study of its subject matter. They frame objects of mental life as quantifiable constructs or variables whose functions may be meaningfully verified and understood through statistical analysis. They also assume that the sum of these variables should represent a discernable, holistic model that is universally reflected in all human subjects. Teo additionally locates problems within mainstream

psychology's epistemology, drawing attention to positivist methodology which supports a mechanistic approach to studying concepts in a related ontology.

In their research of embodied-emotional experiences of ethical problems in psychologists, Austin et al. (2005) raise a central question: How do professional codes of ethics affect the experience of moral distress, particularly when such codes exclude experiences of emotion and embodiment? Using an interdisciplinary, hermeneutic phenomenological approach, Austin et al. (2005) explore the notion of moral distress in psychologists working in psychiatric and mental health care settings. They capture an embodied component of moral distress, consisting of physical responses such as sweating, crying, headaches, and nausea and diarrhea. Feelings also take a multilayered shape of complexity; participants in their study reported experiencing depression, frustration, shame, anger, embarrassment, grief, pain, misery, heart pain and sickness, sadness, and feeling ineffective at their work. Austin et al. (2005) find their participants' disclosure of experiencing isolation, silence, and fear at times when their institutional policies and codes of ethics conflicted with their sense of moral judgment.

The exclusion of embodied understandings of ethics – in this case moral sense through the body and emotion – leads to problems in good clinical practice. Participants in Austin et al.'s (2005) study related experiencing a range of reactions to compromises to their moral judgment, including silence, acting in isolation and secrecy, speaking up and seeking compromise, and leaving. These experiences were embodied with torment and desperation. One individual disclosed that he was propelled to acting in secret in order to properly meet the needs of his client, as he had been alienated by his team for his opinions about the client needing a transfer. The client, an individual who was experiencing psychosis and who did not speak English, was held in the institution against typical policy, as based in the judgment of the team responsible for

him. The only way for the psychologist to reconcile his moral distress without placing himself, members of his team, or the client at greater risk of consequences was to act on his own. The participant admitted that while his actions were successful in assisting the client with an advocacy group, his main priority was to preserve his role in the institution by not getting into trouble. In another instance (Austin et al., 2005), a participant's team was highly judgmental of ethical issues she brought forward arising from client interaction, attacking her knowledge and humiliating her in meetings. Another participant admitted that she did not believe she could rely on her team members for support in challenging their supervisor about questionable ethical decisions made about client care during a team meeting. As a result of their experiences with moral distress, many participants contemplated leaving their institutions.

As Austin et al. (2005) reflect, what does it mean when psychologists are so distressed they are prompted to act in secrecy, or experience rejection when their thoughts and attitudes are incongruent with supervisor, team, or institutional thought? Is this a healthy ethical environment? This study and that of Rossiter et al. (1996) indicate that the experience of moral distress, and/or other forms of distress related to ethics, morality, and well-being are common; the fear professionals experience is legitimate and these are important forces in disciplinary ethical values and practices.

Chapter Summary

The published literature adopting a positivist empiricist orientation tells us a story of the CPA Code as a relatively complete, useful, and effective product for various facets of disciplinary psychology practice. Mainstream psychology appears to be centrally concerned with framing ethics as universal, as problem-solving, composed largely of enforceable standards of conduct and intertwined with law and legislation, and which are able to be standardized across

disciplinary roles, disciplinary activities, and location. The literature additionally boasts the CPA Code as possessing a greater educational value and relevance compared to other professional codes of ethics. The adoption of the CPA Code into psychology organizations located internationally has been acknowledged as an accomplishment to be celebrated, and suggestive of the CPA Code as “the best.” Considering this work, it might be easy to see how the CPA Code earned national and international status.

Yet the CPA Code is not unanimously regarded as “the best” code of ethics for psychologists. Scholars bringing critical and feminist perspectives to the study and practice of psychology ethics have taken issue with this idea, looking more closely at how the CPA Code is constructed, how its practices are enacted in day-to-day professional life. The contrast of these diverse perspectives of ethics highlights what is not acknowledged in mainstream literature: how ethics itself is located in particular times, places, social environments, geographical locations, and so on; is reinforced by particular people and institutions; and is perpetuated by particular investments. They are positioned with a particular set of values, assumptions, and practices by which ethics operate. With this broadened scope, scholars contend that the CPA Code deals with a particular set of ethical matter while limiting, ignoring, rejecting, and silencing other kinds of ethical matter. This growing body of critique also finds that its practices do not achieve their intended aims of ethical practice across all social, historical, political, and cultural contexts. Critical and feminist scholars note some glaring omissions from the positivist body of work, such as those individuals who are recipients of psychology’s practices and its ethical dilemmas: research participants, students, clinical psychology clients, and institutions and organizations outside of psychology. There are many contradictions: the aims of ethics, whose purposes the ethics serve and, ultimately, how ethics *should* be taken up in disciplinary practice.

Theoretical Orientation

The theoretical approach I take to examine the CPA Code represents a departure from contemporary research approaches of mainstream psychology, that is, those occurring within the positivist empiricist tradition. For example, I did not attempt to test a given aspect of CPA Code practice by comparing quantified participant responses to various ethical dilemmas with those of another professional ethics code. Rather, I chose to decentre the assumptions of discovery and truth in ethical practice and situate the CPA Code itself as my object of study within a Foucauldian-informed poststructuralist framework. I locate this work within critical psychology, drawing on principles of social justice and postcolonialist literature to consider power and privilege in the CPA Code. In the following section, I discuss ontology and epistemology, contrasting positivism with social constructionism and adopting the latter as the underpinning research philosophy of my dissertation. In doing so, I demonstrate that different research traditions are “not simply theoretical musings, they have pragmatic and ethical relevance” (O’Connor, 2001, p. 155). I then provide an overview of poststructuralist theory and arrive at the Foucauldian concepts of discourse, power/knowledge, and governmentality.

Critical Psychology

Born out of the scholarly fields of critical theory, critical psychology of the German tradition, and postmodernism, critical psychology can be conceptualized as a metadisciplinary branch of knowledge production of psychology that challenges mainstream psychological approaches to further its praxis in emancipation, anti-oppression, and social justice (Austin & Prilleltensky, 2001; Teo, 1999). My use of the term “mainstream psychology” generally refers to Fox, Prilleltensky, and Austin’s (2009) description of dominant disciplinary practices of psychology:

[T]he psychology that universities most often teach and that clinicians, researchers, and consultants most often practise. It is the psychology you probably studied in your introductory course, presented as a science whose practitioners help individuals cope with distress. Building on their research findings, mainstream psychologists who recognize the societal sources of that distress sometimes propose institutional reforms to help people function more effectively...Critical psychologists, in contrast, see things very differently. We believe that mainstream psychology has institutionalized a narrow view of the field's ethical mandate to promote human welfare. (p.3)

As a dominant, institutionalized practice, serving of the quotidian and its ideology, mainstream psychology is powerful, pervasive, and highly skeptical of psychological practices that fall outside its mandate. In this dissertation, I use “ideology” to denote the widely promoted and reinforced messages by those people and institutions in positions of power to uphold the current status of society – as having unequal, unfair, and unjust impacts on disempowered groups of people (Prilleltensky, 1989, 2003, 2008). Within the current capitalist, neoliberalist conditions of Canadian society, this includes the regulation of everyday conduct, the translation of social issues to individual problems, and the downloading of responsibilities to every citizen to act within an individualized, competitive context. Socially constructed at a particular locale in time, ideology is socially, culturally, and historically contingent. It is always dominating and powerfully rejecting, silencing, and punishing of matter that deviates from its constitution. As an interdisciplinary practice, critical psychology draws on the rich critical resources of theories and practices of disciplines such as social work, (critical) disability studies, feminist studies, Mad Studies, antipsychiatry, criminology, critical race theory, queer studies, legal studies, and geography (Fox et al., 2009; Teo, 2015b, 2015c).

Critiquing taken-for-granted practices of the mainstream. Operating under the belief that its practices are value-free, objective, and logical, and therefore always already reductive of harm and promotive of societal benefit and human welfare, mainstream psychology research, education, and practice typically avoids engagement with the broader contextual-political

implications of its work, including considerations of the moral, social, and political ramifications of dominant disciplinary theories, research, and practices. Traditionally, the disciplinary frameworks and practices of psychology assume a narrowed, individualistic focus at the expense of consideration for greater group, communal, and societal impacts. This focus serves to reinforce institutional practices that perpetuate inequality and oppression of particular people. As aptly summed up by Fox et al. (2009), “psychologists fit too comfortably within a capitalist democratic system that gives lip service to both individual freedom and political equality but in practice prefers political apathy and the freedom of the market over participatory democracy and distributive justice” (p. 6). Likewise, Prilleltensky et al. (2002) point out that, in comparison to fields such as social work, sociology, anthropology, and law, mainstream psychology rarely acknowledges its values and interests, its position of power, and its historically problematic treatment of groups of people in research and practice. Critical psychology, as a collection of critiques and approaches varyingly divergent from the mainstream, remains on the margins of the mainstream discipline in Canada.

Critical psychology scholarship agrees that incorporating a broader scope of values that are emancipatory and that centre on marginalized individuals and groups of society is an important goal for the discipline of psychology (Rossiter et al., 1999; Teo, 2009, 2015a, 2015b, 2015c; Walsh, 2015a). The positions, values, and interests of critical psychologists are often made explicit, bringing scholarship and practice with a deliberately political discussion and simultaneously foregrounding those of the mainstream. Some of the broad themes and aims of critical psychology are: interrogating assumptions and effects of taken-for-granted, commonplace activities of mainstream psychology; critiquing and addressing status quo ideology within and outside of psychology; promoting and incorporating social justice into research and

practice; advocating for and including local and community knowledge and practice; and advocating for and including marginalized and oppressed groups of people.

Critical psychology takes a stance against psychological research and practice that maintains the oppression and injustice of the status quo. Thus, a main goal of critical psychology is to transform traditional psychological praxis to achieve “a balance between (a) academic and grounded input, (b) understanding and action, (c) processes and outcomes, and (d) differing and unequal voices” (Austin & Prilleltensky, 2001, para.1). Critical psychology seeks not to exist as an alternative to mainstream positivist approaches to psychology or to the particular science practices that have shaped and come to dominate mainstream psychology. This line of thinking subscribes to an underlying structure of binary oppositions from which critical psychology seeks liberation. It is an express aim of critical psychology to identify such assumptions in method and address them through disciplinary change – change in psychology’s research and practice (Prilleltensky, 1997).

The problem of human subjectivity. Critical psychologists have argued for the inclusion of human subjectivity in mainstream psychology practices (Teo, 2009, 2010, 2011) from feminist perspectives (Austin et al., 2006; Gavey, 1989; Rutherford, 2011), and from ethical-political perspectives (Teo, 2009, 2015a). For instance, Teo (2009, 2015b) problematizes mainstream psychology’s disregard for human subjectivity as ignoring the social, cultural, and historical contexts of human experience and human mental life. He posits that by constituting these experiences as factors or independent variables, the study of human mental life is removed entirely from the subjective context of the individual’s worldly experiences. The question of whether such reductionist data, alongside the assumption of stability in psychological constructs – that disregards social, cultural, and historical context and flux – is relevant to the study of

human behaviour and mental life makes mainstream psychology's practices an ethical-political issue. Rejection, ignorance, or lacking account of human subjectivity can lead to the denial of personhood or selfhood, or what Spivak (1988) has termed epistemic violence. Building on Spivak (1988), Teo (2010) discusses the problem of epistemological violence in psychological research, whereby research practices seeking to uncover differences between groups of people are removed entirely from the hermeneutical process of social, historical, and theoretical contextualization of the subject matter. Similarly, Teo (2009) recognizes the problem of method-driven work of mainstream psychology, or methodologism, whereby the study of mental life is confined within a narrow range of quantified methods rather than being driven by the particular research question(s), subject matter of study, and/or social-historical and institutional context.

Colonialism in psychology. Critical psychology also draws attention to the imperialist and colonizing practices of mainstream psychology. Historically, psychology in Canada (Prilleltensky, 1997, 2003) and in North America (Bhatia, 2002; Richards, 2012) has participated in racist and colonialist practices since the origins of disciplinary practice. Teo (2006, 2009, 2011) explains that early science conceptualizations of race and the discoveries of race-based differences enabled colonialist domination and slavery, as races deemed to possess biological differences were cast as inferior to White people. Yet race has since been demonstrated to be a value-laden construction of subjectivity produced within power relations that are historically, culturally, and socially contingent. Scholars of genetic research have found nonsignificant support for racial classification or racial differences (Lewontin, 1995), as a category of evolution, and that race as a biologically-based construct does not contribute any useful meaning to science (Cavalli-Sforza, 1995). Additionally, some psychologists and philosophers argue that, based on substantial ontological differences in the subject matter of human beings relative to natural

sciences, it is epistemologically problematic to apply natural science practices to the study of human beings (Teo, 2006, 2011). The use of methods and objective logic of natural science exclude a number of aspects of subjectivity – such as emotion, embodiment, culture, identity and intersectionality, history, locality, and so on – and thus remove human beings from contextual life.

Yet colonialist assumptions, representations, and omissions continue to drive much of Western psychology practices. For example, research related to experiences of intergenerational and systemic trauma of Aboriginal peoples within psychology have produced dominant models and constructs that are culturally inappropriate (Kirmayer, Brass, & Tait, 2001); are removed from the social, historical, and cultural context of Aboriginal peoples (Kirmayer, Simpson, & Cargo, 2003); and as such do not reflect community processes and practices of healing. These oppressive colonialist practices in psychology perpetuate actions that result in the silencing, denial, and propagation of epistemic violence against Aboriginal and Indigenous peoples (Painter, 2015).

Postcolonial theory. Challenging nationalism, transnationalism, and globalization with an identity politic, postcolonialist theory “attends to culture as both source of domination and site and strategy of resistance in the context of Western colonialism and its aftermath” (Painter, 2015, p. 369). Postcolonialist scholarship has largely interrogated Western forms of representation and knowledge production in accounts of science, philosophy, ethnography, photography, maps, and more. Painter (2015) argues that postcolonial theory

supports the ‘worldling’ of critical psychology, that is, the ongoing process of revealing and reimagining critical psychology’s established cultural, political, and epistemological horizons; of interrogating its terms of engagement with subjects and situations outside its places of origin; of demanding, in the face of psychology’s self-serving appeals to both the universal and the indigenous in its quest to be ‘international’, a constant demand for theoretical dis-location and ex-centricity... (p. 366).

Postcolonial theory draws attention to the Western-centric practices of critical psychology: in how social science research of mental life has been ontologically and epistemologically ordered, the systematics of their study, the problems identified and their theoretical conceptions, the locations of research, the institutions of power and propagating research, and the primary agents of their (re)production. The very language we use as critical scholars constitutes knowledge produced by critical psychology, is specialized within psychology, and represents psychological constructs. Similarly, critical psychologists employ psychologized language within psychologized frameworks and offer psychologized solutions. Postcoloniality work offers a rich source for the ways we may interrogate not only mainstream practices but the ways in which we repeat colonialism in critical work. Indeed, an important issue of the use of postcolonial perspective in critical psychology is the extent to which it reproduces the psychologized, colonizing discourse it seeks to expose and address in the first place (Painter, 2015). Postcolonial theory has in rare instances been applied as a critique of psychology. I draw on postcolonial theory as a “theoretical resource” (Hook, 2007, p. 475), as part of a lens through which to interpret the discourse of the CPA Code ethics and as springboard into the idea of resistance to such discourse. In the next section, I move into a deeper discussion of my theoretical approach by discussing the ontological and epistemological underpinnings of this dissertation.

Social Constructionism: Ontology and Epistemology

Approaches to social science research consist of different philosophical traditions that possess divergent ontological and epistemological qualities. Ontology is concerned with the “fundamental characteristics of reality” (Teo, 2009, p. 38) or the study of being, constitution of worldly phenomena, and the things that people can articulate and about which they can communicate. It may involve a set of associated terms and definitions to capture and describe

worldly matter. In the discipline of psychology, ontology often refers to the types and objects under study in relation to mental life, behaviour, and social relationships, and the conditions of how this matter may be defined and described (Teo, 2009). Epistemology refers to the ways in which worldly phenomena come to be known and organized; this sets parameters about the kinds of things that constitute knowledge (i.e., What is knowledge, and how do we come to regard it as such?), and the ways in which they may be understood (i.e., What can be known? What are the limits of such knowledge?). Brown and Strega (2005) define epistemology as “a strategy by which beliefs are justified” (p. 201). By necessity, it considers the forms of analysis that information must undergo in order to be granted status of knowledge by those who are granted the status of “knower.” Thus, ontology and epistemology are interrelated concepts; characteristics about matter of study inform the epistemological lens through which these phenomena may be known and researched, and vice-versa.

Positivism. Positivism is a realist philosophical paradigm chiefly founded on the notions of determinism and reason, whereby causal events or circumstances logically instigate or effect particular outcomes in a natural world (Creswell, 2009). A method born out of the natural sciences during the Enlightenment period that would be applied to the social sciences in the late nineteenth century, positivism represents the “gold standard” approach to research and practice in mainstream psychology (Willig & Stainton-Rogers, 2008). It considers essential sets of characteristics as located in a value-free, objective, material reality that are universally located and recognized as truth in theory and law. Positivism employs the use of (primarily) reductionist logic as manifested in observable matter that must be reliably and validly present in the world, so only propositions that employ empirical testing and the ability to be replicated by expert scientists are considered objective, truthful matter (Brown & Strega, 2005). Worldly objects

possess an inherent truth, and such truths are discovered and verified by the rigorous employment of methods such as unbiased observation, mathematical computation, laboratory experimentation, and replication. The dominant subject and arbiter of knowledge, the expert scientist, is positioned in research as separate and distanced from the matter of study, unbiased, and rational. This performance is produced through the embodiment of an objective ethical-professional identity.

Positivism is privileged to hold status as *the* legitimate approach to knowledge production in psychology. Sourced prominently in law and policy making, this research approach has been demonstrated by critical psychology scholars to support acts of population surveillance, prediction, and control (Brown & Strega, 2005; Sugarman, 2015; Rossiter et al., 1999; Willig & Stainton-Rogers, 2008). Such labels have come to symbolically represent modes of production of the most legitimate form of knowledge, which can serve to mask the values and interests built into its processes, practices, practitioners, and institutions. From a critical standpoint, positivism is unconcerned with the ethical-political implications of oppressive power relations, as its research promotes quotidian ideologies. In Canada, the discipline of psychology is immersed within, among other sociohistorical and cultural forces, a neoliberalist culture – concerned with cost, productivity, consumerism, self-improvement, and generating technologies to solve problems of “mental illness” (Sugarman, 2015) Moreover, the requirement of objectivity, taken up by a rational subject and removed from embodiment and broader sociohistorical and cultural context, has been critiqued as obfuscating the intersectional impacts of gender, race, class, ability, and other social locations. This has been demonstrated by historical critical feminist research to adopt disciplinary values and practices associated with White, upper-middle class masculine discourses (Brown & Strega, 2005; Burr, 2003). As Usher (1997) articulates,

A commitment to reason, perspectiveless truth, objective and neutral forms of knowledge, separation of the subject from the object of knowledge are all commitments to the production of [White] male theory in which reason surreptitiously defines itself by excluding categories associated with femininity [and other marginalized individuals] – subjectivity, the emotions, desire and specificity. (pp. 46-47)

Positivist epistemology thus privileges reason, objectivity, impartiality, and rationality while excluding, rejecting, or silencing constructs and approaches concerned with worldly matter falling outside of its domain. This includes theoretical matters of subjectivity, emotion, the body, partiality, and irrationality.

Social constructionism. Ontologically and epistemologically, social constructionism represents a departure from the positivist approach (Berger & Luckmann, 1966; Willig & Stainton-Rogers, 2008; Rutherford, 2011; Teo, 2015b, 2015c). It is characterized by: the tenets of anti-essentialism and the questioning of realism; the view of language as necessary for thought and action; the incorporation of historical, social, and cultural forces to hermeneutically contextualize worldly phenomena; and a theoretical focus that includes the social processes of interactions and relationships, or intersubjectivity. Social constructionism is centrally concerned with questions like: Who is entitled to or allowed to create knowledge about worldly matter? Whose and what criteria constitute valid truth, and for what purposes? How may identities such as one's gender, class, race, ability, and mental health be experienced intersubjectively, and in relation to social, institutional, and systemic experiences? How is one advantaged and disadvantaged by one's identity presentations and performances? Social constructionism, then, adopts a critical stance of quotidian assumptions, values, and practices produced through monolithic observations of a natural world (Burr, 2003; Weedon, 1997).

Critical practices in social constructionist research in psychology make apparent unequal relations of power within social relationships. With a contextual grounding in social, cultural,

and historical conditions of knowing and knowledge production, social constructionism takes a critical stance, viewing knowledge as bound up with power, and tasks researchers to consider whether and how their work challenges or upholds status quo power structures. Scholars who work within social constructionist approaches make explicit their intentions to challenge claims of value neutrality and objectivity, and to rectify sociocultural and historical inequities by and through research (Lather, 1986; Brown & Strega, 2005). To achieve its explicit political and emancipatory goals, critical research seeks to empower those participants on the margins of the social world and to enable positions of resistance to institutionalized, systemic, and/or commonplace practices that are unhelpful, irrelevant, or harmful. Common practice in this research is for the researcher to engage reflexively with research processes and subject matter. This engagement opens up reflection, questioning, and understanding for the researcher to examine her position, ethical-political intentions, and experience (see Reflexivity section of Chapter 3).

In social constructionism, the constituents of mainstream psychological research, such as objectivity, value-freedom, reliability, and assumptions about independent observation, reliability and validity are critically questioned and/or are assumed to possess a plurality of meaning. In critiquing these and other realist notions, the pursuit and prominence of objective facts and truths lying in wait of empirical discovery are rendered problematic because they can be traced to historical, social, and cultural influences, always multiple and shifting in time and space. Research practices must consider intersubjective relations (often including the relations of the researcher with people and subject matter). Thus, in this framework, reality is multi-informed and context-dependent (Burr, 2003; Weedon, 1997).

Additionally, rather than assuming a mainstream view of language as a purely truthful expression or vehicle for meaning, a social constructionist approach implies that language is *actively constructive of reality*, in how people conceptualize knowledge, their subjective experiences, and in how meaning can be cultivated. It acknowledges that research “facts” are not neutral in their status and the framing and interpretation of research must consider value and ideological influences. Therefore, reality and meaning are constructed *through language*, contingent upon an array of social, political, historical, and cultural forces.

As an example to illustrate the ontological and epistemological distinctions between positivist and social constructionist research designs, consider the topic of fat hatred. A study conceptualized within the positivist empiricist tradition may conceptualize the topic as “weight stigma,” and seek to test a hypothesis or model of weight stigma in an experiment quantitatively measuring self-esteem, locus of control, and other psychological variables in a sample of “overweight or obese” individuals. The “discovery” of whether the model exists or not – substantiating the *true* mechanism of weight stigma – may be used for the purpose of “changing” or “remediating” overweight or obese individuals towards body satisfaction or a “healthy” sense of self by targeting an intervention at self-esteem, feelings of control, and so on. The assumptions of this approach are loaded with truth statements: that overweight or obese individuals do exist, that individuals are responsible for “fixing” their feelings about themselves, that there is weight stigma and it is located within overweight or obese individuals, that the onus is on overweight or obese individuals to change, that they should have a certain relationship with themselves that they are responsible for creating, and so on. In contrast, taking a social constructionist approach, and drawing on fat scholarship and “fat hatred” from a discourse perspective may interrogate how fatness has been historically, socially, and culturally constituted

in a given locale. This type of study may look at how “fatness” as a concept has shifted and changed to one of pathology and in need of intervention, examining the medicalization of fatness, the exclusion of people from the built environment, and/or the influences of beauty ideology and fashion industry. Given that discourse operates through language and in social relations, fat hatred within this approach may be studied through the ways in which certain body sizes are excluded and positioned as abject, by examining medical documents and physical spaces where body size is implicated (e.g., turnstiles, chair sizes), and so on. Although this approach avoids an essentialist, “solution”-based approach, opportunities for resistance to uptake of fat hatred may be explored in art-based movements, Health at Every Size, and other social groups and activism opportunities (Brown-Bowers, Ward, & Cormier, 2017).

Following from social constructionism, I explain in the next section the theoretical lenses I draw on for this study. I begin by introducing poststructuralist theory, describing its elements of language, meaning, and subjectivity. I then move into a discussion of Foucauldian theory, and three concepts of Foucault’s scholarship I use to theoretically frame my study: discourse, power/knowledge, and governmentality.

Poststructuralism: An “Ungrounded” Ground for Theory

Poststructuralism, one of three broad “post theories” (Healy, 2000, 2014) including postmodernism and postcolonialism (which I discussed earlier in this chapter), understands psychological phenomena through the concepts of social construction, language, discourse, subjectivity, and power. A diverse collection of theoretical projects from the social sciences and humanities that emerged in the mid-20th century, poststructuralism originated as a deliberately separate approach from Enlightenment-founded logic and reason, eschewing assumptions of truth, objectivity, and essential fixity in identity and meaning (Weedon, 1997). This approach has

been traced to the works of French philosophers that include Ferdinand de Saussure and Émile Benveniste, Marxist theory and particularly Louis Althusser's ideological theory, psychoanalysis of Sigmund Freud and Jacques Lacan, Jacques Derrida's theory of *différance*, and Michel Foucault's theory of discourse and power/knowledge. Julia Kristeva, Luce Irigaray, and Hélène Cixous have explored poststructuralist lines of inquiry within feminist lenses of theory and research (Burr, 2003).

Historically, the poststructuralist body of critique signifies a response to the constraints of Enlightenment-based reason and empiricism as the only legitimate form of knowledge, and the limitations of binary opposition of structuralism. Similar to social constructionism, scholars employing this theoretical lens have demonstrated that the political effects of the practice of reason privilege particular quotidian institutions, values, and practices. For example, as I discuss in the literature review (see Chapter 1), a professional standards or code of conduct approach to ethics is held as the "best" approach by those individuals and institutions representing dominant disciplinary psychology, while other perspectives of ethics, such as embodied forms of interpreting bodily sensations, intuition, spirit and emotion are criticized for their irrationality, their lack of objectivity, and their challenge to normative practice. Although as a critical researcher I believe these forms of knowledge offer important value in terms of human subjectivity and insight into ethical-political and moral practice, they are frequently discouraged, delegitimized, rejected, and ignored by those invested in normative ethics and related objects of standards of practice, evidence-based practice, and professionalism.

Exploring the implications of poststructuralism and discourse analysis for psychology, Gavey (1989) described poststructuralism's theoretical foundations as "radically different from much of psychology" (p. 459). Emphasizing fluidity, fragmentation, and discontinuity in the

constitution of its framework, poststructuralism does not possess one static meaning or an essential set of characteristics. Intertextual with multiperspectival and social constructionist epistemologies, poststructuralism transcends the boundaries of scholarly disciplines, rendering this approach applicable to a variety of theoretical positions and “any apparent ‘containment’ ... within ‘psychology’ [as] artificial” (Gavey, 1989, p. 460). It does share similarities with other poststructuralist “enterprises” within psychology as well scholastic shifts toward a postmodern psychology (Fox et al., 2009; Teo et al., 2015c). With the view of power as productive of organization and activity, this critical approach defines psychology as an effect of power relations rather than, for example, a purely intellectual quest for truth about mental life, progress in human science, or a proclamation to help or make things better for one’s mental life.

Poststructuralism assumes a view of skepticism towards the neoliberalist-influenced ideas of “scientific practice” and “progress” that mainstream psychology’s institutional practices are founded upon. Contrary to the assumption, for example, that there are “true” normative conditions of mental life and well-being that certain forms of research seek to “discover,” and that particular research interventions claim to “treat,” any claim to mental health normativity in research and practice is saturated with principles, values, and practices that privilege the interests of dominant institutions. Within poststructuralism, notions of “helping,” “rehabilitating,” “mental health,” and “best practice” are associated with “will to power” or domination over the mental life of citizens of society. Rather than naturalizing a “normal” state of being all citizens should achieve, through means of using the “right” practices or tools provided by psychological knowledge, poststructuralism views these practices as infused with control, and surveillance, held and maintained by powerful institutions at a particular place in time.

Another axiom of poststructuralism is the third order function of language. This third order serves to mediate the relationships between abstract ideas and material reality. As a concept, language, as borrowed from de Saussure's work in structural linguistics, does not simply represent a concrete material reality or truth in itself; language actively constructs our reality (Burr, 2003). This is not to deny the materiality of the world and the physicality of actions, but is to acknowledge that all such materiality and actions are comprehended and enacted by people through language. Language is always already associated with a specific social context in culture, place, and time. Moreover, given poststructuralism's disavowal of truth status, reality does not contain natural, intrinsic meaning to be captured and described in the content of language. By demonstrating shifts, breaks, and new emergences and meanings of language as social context varies – language as discourse – language has a quality of social, cultural, and historical mutability. For example, the role of a Canadian psychologist in the early 20th century evokes a very different idea than that of a psychologist of the 21st century. In spite of a general focus on matters relevant to mental life, the priorities, activities, and roles of psychologists 100 years ago are very different from those of today (Teo, 2009). Thinking about ethics in Canadian psychology, the event of World War II had a substantial impact on the practice of research ethics in the discipline of psychology, and we can see in the decades that followed the emergence of and increasing emphasis on ethics codes and professional practice standards (Sinclair, 1993).

Given the contextually-dependent status of poststructuralism, the meaning of language becomes fluid and is shaped by the discourses of a locale. Thus, meaning is constituted by language *even if it is not assured by the subject speaking it* (Weedon, 1997). Discourses offer us competing ways of understanding objects of psychology as well as the ways in which they may

be taken up and experienced by agents of the discipline, in enabling possibilities for ethical-professional subjectivity. An example of this, as related to psychology ethics practices, is the idea of “social change.” In feminist discourses of psychology ethics, social change is considered an important part of ethical responsibility and practice on the part of scholars and practitioners, and can assume different forms of institutional education and advocacy, lobbying for change to harmful legislations, supporting and including individuals in disadvantaged positions of power, and other forms of activism (Feminist Therapy Institute, 1999). In mainstream psychology, however, social change toward values and practices of social justice is a marginalized practice that the discipline generally does not engage – unless perhaps a practitioner’s professional scope includes social, positive, and/or community aspects of psychology. Mainstream psychology, embedded within a Western neoliberal culture of mental wellness and productivity, benefits greatly from the reproduction of status quo values and the rejection and avoidance of social justice and social action (Prilleltensky, 1997, 2003, 2008).

Language also acts to construct subjectivity and the sense of “self.” In relation to the self, language does not ever represent uniqueness, nor does it guarantee continuity in structure and meaning. In a poststructuralist framework, the notion of self as a stable, coherent entity is rendered fictional, as one’s sense of “individuality” is marked with tensions, contradictions, and claims to knowledge that can shift from context to context (Weedon, 1997). This stands in contrast to the ideology of liberal humanism that permeates Western culture, the tenets of which are associated with commonsense notions of a subject that is characteristically conscious, rational, knowing, and unified (Prilleltensky, 2003; Rossiter et al., 1996). Poststructuralism frames the sense of self not as natural, innate, genetically determined or likewise, but as a product of social forces that constitute and are constituted by social, historical, cultural, and

economic forces. That is, subjectivity arises from local discursive practices and political realities; these discourses instigate competition and struggle for power, for a stake in shaping the possibilities for who “we” can become at any given moment in time. Poststructuralism regards subjectivity and embodiment as spaces of politic – identity politic – and a site where perpetuation and resistance of the status quo is simultaneously, multiply possible.

For instance, professional and citizen ideas about the rights and needs of people who seek therapeutic assistance through a clinical psychologist in private practice may drastically differ from those who are involuntarily subjected to carceral spaces in mental health or medical institutions. The discourses operating at each of these sites inform our understanding of the role of the psychologist, the role of the client, and the relationship between the psychologist, the client, and the institutions and spaces involved. The power of the client to exercise autonomy and authority greatly varies. Representations of the “rights” and “needs” of a client will shift and change depending on the social locations of the client and health care providers (e.g., Is the client White? A person of colour?), the professional alignments of the psychologist (e.g., A CBT-oriented psychologist? A critical narrative psychologist? A feminist psychologist?), and the institution (e.g., A feminist organization? A teaching hospital?). Healy (2014) writes that, “these experiences of fragmentation and contradiction in our identities and our exercise of institutional power are an inevitable outcome of the clashes between different discourses that make up our practice contexts” (p. 213). As such, different discourses and theories for practice with people provide varying and conflicting ways of interpreting the world and ethical-professional subjectivity.

Thus, poststructuralism positions language as the mode of analysis for social organization, social meanings, power, and individual consciousness (Weedon, 1997). Instead of

the idea of language as representative of a unified, trans-historical totality – an idea we often take for granted – it represents a plurality and dispersion of historically- and socially-contingent set of discourses. This conceptualization moves us beyond structuralist notions of language as universal and total, and an understanding of discourses characterized by multiplicity, domination, subjugation, and skirmishes for power. The third order of language marks language as a site of possible and actual forms of social organization, and their social and political consequences are both identifiable and contestable in different circumstances and contexts (Weedon, 1997).

Poststructuralist approaches contest organizing theories and actions around identity that are unvarying, cohesive, and constant, since assumptions about common, shared characteristics devalues the social, historical, cultural, and economic differences that people experience in the world. Poststructuralists argue that the understanding and practice of a unified identity in social movement can create an essentialized identity, directed by technologies laden with power and resulting in the privileging or domination of particular groups over others. The body, for example, represents a site of political tension and struggle. Identities are discursively constituted by social, historical, and cultural forces that are bound up with power and privilege (Healy, 2014; Bordo, 1998; Crenshaw, 1991; Weedon, 1997). Subjectivities of the body, including intersectionalities of gender, age, height, skin colour, size, ability, sexuality, and so on, add nuanced layers of complexity to one's experiences in the world, and one's ability to exercise power through action. Some critical scholars (Healy, 2014) are troubled by poststructuralism's conceptually open and fluid idea of subjectivity, as the loss of unified identity proves problematic for social movements seeking to address a shared understanding of equity issues associated with, for example, people of colour, Aboriginal people, transpeople, fat people, mad people, and other marginalized groups of people. Recognizing, supporting, and celebrating

embodied differences, poststructuralism is weary of movements such as social change projects that require a unified commitment and conformity from every single citizen, thus reproducing the same kinds of problems for which they were originally intended to address.

Having introduced poststructuralist theory, I now turn to Michel Foucault and his theories of discourse, power/knowledge, and governmentality to further locate the theoretical frame of this dissertation.

Foucault: Discourse, Power/knowledge, Governmentality

Michel Foucault was a French historian, philosopher, critical literary figure, and social activist associated with the development of structuralist and poststructuralist theories (Danaher, Schirato, & Webb, 2012). A number of critics and contemporaries of Foucault have commented that his work demonstrates contradiction and discontinuity across time and concept, and that he himself was a “complex, many-sided character...under one mask there [was] always another” (Eribon, 1991, p. xi). Drawing on elements of poststructuralist theory, he believed that apart from material physicality, nothing existed outside of discourse, as social reality is constituted by and constitutive of language. Foucault made substantial contributions to theories of discourse, power, and governance in institutional social control as generative of subjectivity to the topics of madness (1973, 1999), sexuality (1978), the prison-industrial complex (1979), and biomedical practice (1994a, 1994b; 2008). Openly rejecting of Hegelian and Marxist theories, as well as Sartre’s existentialism, Foucault’s scholarship has been particularly influenced by Louis Althusser, Ferdinand de Saussure, and Friedrich Nietzsche (Danaher et al., 2012). His corpus of work crosses disciplinary boundaries, influencing scholarly topics in disciplines such as criminology (Pfohl & Gordon, 1988), philosophy, sociology (Agger, 1991; Fox, 1998), theology (Moore, 1994), gender and sexuality studies (Butler, 1990; Hearn & Morgan, 1990; Sawicki,

1991; Weedon, 1997), education (Goodson & Dowbiggin, 1990; Grant, 1997), public health (Armstrong, 1983; Lupton, 1995; Petersen, 1997), architecture (Prior, 1987), thinness (Malson, 1998; Probyn, 1988) and fat studies (Brown-Bowers et al., 2017; Tischner, 2012), mental health recovery (Poole, 2011), and psychology (Rose, 1989, 1996, 1998). Akin to the work of this dissertation, Foucault's methods have been widely applied to the sociology of health and medicine and bioethics (Burchell, Gordon, & Miller, 1991; Murray & Holmes, 2009; Petersen & Bunton, 1997).

Foucault's scholarly work focuses on the everyday ways in which discourses affect how we live in the world – how we come to think about it and *not* think about it, where these discourses are located, and the effects they have on producing our identities and conduct. That is, understanding the ways in which the conduct of individuals becomes governed by institutional discourses, and how individuals in turn govern and create themselves with such discourses, was of particular interest to him. Foucault's extensive historical analysis of particular subjects like madness and sexuality saw shifts in how these topics were conceptualized, discussed, and effected across time and locale; he identified discontinuity, continuity, and tensions within a context of *power/knowledge* (Hook, 2007). He recognized the local historical specificity of these discourses, observing their discontinuity and fragmentation in time and place: discourses coming into and out of being, only to reemerge sometime later yet different in form; shifting and shaping in their construction; variable and unstable in their connections to power and deployment (Danaher et al., 2012). For the work of this dissertation, I draw on Foucault's notions of discourse, power/knowledge, and governmentality.

Discourse. For Foucault, discourses are “practices that systematically form the objects of which they speak” (Foucault, 1972, p. 49). We can consider discourse as a series of fragmented

segments that are never total or uniform in their influence. Thus, the identification of a discourse “is not to close it upon itself; it is to leave oneself free to describe the interplay of relations within and outside it” (Foucault, 1972, p. 29). This is a very different idea than the common notion of discourse as the content of a text. It refers to the ways in which information, ideas, communications, and actions are constructed by language, and the ways in which language is organized to sign and signify. A Foucauldian theorist may ask, for example: What are the ways in which the structure and presentation of statements in a text persuasive to us? How does the text accomplish this? As such, Foucault’s philosophy reflects the poststructuralist idea of the third order of language I discussed in the social constructionism section of this chapter.

Accordingly, per Foucault, a discourse is a grouping of statements that differs from other groups of statements in the ways it may be enacted. However, a discourse is never entirely apparent in any particular text or speech, it represents only a fragment, or “a node within a network” (Foucault, 1972, p. 23). Foucault considers a statement as a unit of language distinct from a sentence or other speech act; it is a series of signs existing in an associated field. Therefore, language represents the medium by which the construction of statements becomes possible, and is intertwined with power.

Foucault tells us that discourse itself is not overtly or inherently bad, dangerous, or evil. Power produces effects, a quality that results in a range of consequences that may be seen as beneficial, neutral, dangerous, and everything in between. This power is not sovereign, nor is it automatically repressive; it is widely dispersed and it provides us with possibilities for thought, feeling, and action in material reality, thus it is a *productive* force (Foucault, 1972). However, power within an ideological scope produces effects that are reasonable and rational, appearing friendly, nice, helpful to the production of self – and that is where the danger in discourse lies. A

discourse's precise unity is elusive since its borders are located in myriad systems of references to other texts. Yet, at the same time, a discourse "finds a way of limiting its domain, of defining what it is talking about, of giving it the status of an object – and therefore of making it manifest, nameable, and describable" (Foucault, 1972, p. 41). That is, elements surrounding the discourse – discursive practices – bring it into being, enabling and closing off possibilities to define itself. Foucault (1972) explains: "of course, discourses are composed of signs; but what they do is more than use these signs to designate things. It is this "more" that renders them irreducible to the language (langue) and to speech" (p. 49).

Foucault's primary focus in the analysis of discourse is on the procedures, rules, and systems which produce, and are produced by, our will to knowledge through discourse. Discourse places constraints and permissions in the kinds of thinking, speaking, and writing of knowledge (re)production, and so discursive resources function to not only hinder but to produce as a result of an interplay of conventions that assign both elimination and choice (Foucault, 1977). Discourses have regulating effects because their knowledges become instituted as truth, producing the ways in which these knowledges may be spoken about. An understanding of language as discourse significantly departs from our common understanding of language as a reflexive device; in this theory of discourse, language no longer communicates a pre-existing, fixed meaning. Opposed is the idea that objects exist naturally outside of discourse to be discovered, described, and understood for its true form (Foucault, 1979). Importantly, what has been associated with truth has appeared in different forms, historically informed by a certain place and under particular conditions of possibility (Walkerdine, 1986). Hook (2007) contends that "to realize that truth is a function of discourse is to realize that the conditions of truth are *precisely* rather than *relatively* contingent on current forms of discourse" (p. 105, emphasis

added). Similarly, material conditions are those historical, social, and political circumstances which are specific and contingent in themselves, giving rise to conditions of possibility through statements that come to be regarded as true and meaningful.

Since discourses rely on local cultural and historical organization and politics for their organization and formation, their productions and constraints, they cannot and do not operate in a universal manner. Because discourses are socially relative and historically located, they never operate in singularity (or in total dominance), nor are they controlled by one source or institution. Thus, language shifts from representing linear progress and underlying fixity to a contradictory nexus of practices through different discourses operating at a particular locale in time. The objects or constituents of a particular discourse are always already associated with a subject, and thus, “the question of subject position is a question about the place from which the objects are enunciated” (Andersen, 2003, p. 15). In the way they enable possibilities of acting and speaking, discourses provide identities, or subject positions, from which people can speak or be spoken to (Foucault, 1972, p. 51). Similar to objects and experiences, subject positions are not concrete entities that reside inside of people and are described by discourse; they are formed by text and speech. Subject positions are as multiple and conflicting as the discourses which constitute them. Given this, Foucault’s approach reconceptualizes our common understandings of identity and self – the self as knowable, cohesive, and stable as a site of tension, discontinuity, and fragmentation.

Power/knowledge. Power and knowledge are inseparably connected to one another, and to the production of dominant, institutional power in modern life. Power relations operate within language, through discourses and discursive formations; it is constitutive of and constituted by discourse. Knowledge cannot be produced in the absence of power, nor can power be exercised

without the presence of social, cultural, and historical relations that give rise to knowledge (Foucault, 1979). Thus, there is a circularity to the productivity of the power/knowledge relationship which works to enable intricate apparatuses with mechanisms and procedures serving institutional power. In order for individuals of a population to take up knowledge to inform their subjectivity, such mechanisms and procedures produce specialist technologies and techniques – or dominant discourses that instruct the ways in which one *should* govern oneself – that enable an apparatus of institutional or state power to continue.

To understand the ways in which power/knowledge operates, it is useful to understand Foucault's ideas on the role of discourse in producing identity, knowledge, and power. Sawicki (1991) suggests that Foucault considers three characteristics of power: that power is not inherently repressive, but productive; that power is not something held by anything or anyone, but is effected and exercised through social relations; and power is analyzed from the bottom up, in the everyday, mundane practices of life. I have discussed the first two points; on Sawicki's (1991) third point, it is especially important to understand how discourses function not only at a structural level but where power is *actively taken up and reproduced in everyday situations*. Technologies and other instrumentation are strategically promoted by institutions in our social world for wide uptake and practice by individuals of a society; this is the reach of power from institution to the "capillaries" of the seemingly minutest areas of life and reality. Examples of technologies of the self can be found in the myriad ways we *should* govern ourselves: our hygiene ("Brush your teeth twice per day, and floss!"), our nutrition ("Eat at least five servings of vegetables!"), our vehicle maintenance ("Take your van in for a tune-up every 10,000 kilometres!"), our education ("You'd better figure out a vocation by the first year of high school!"), our caregiving for children ("Be sure to provide your child with stimulating toys and

lots of opportunities for learning prosocial behaviour!”)...and so on. Technologies like these tell us how we *should* be thinking, acting, and speaking about particular facets of life. We become responsible to carry out these activities in a *self-directed* and *productive* way. And these technologies hinge upon knowledge – as found in dominant, ideological representations – within a given society, locale, culture, and place in time (Rossiter et al., 1999).

Although any discourse’s domination and power is not totalitarian since its location may be domain-specific, at times in flux, it is often *institutionalized* and *organized* through the conduct of everyday practices that most of us do not question. The most powerful discourses are those which attempt to found themselves on scientific, legal, and natural means, or “the various correlates of the ‘true’ and ‘reasonable’” (Hook, 2007, p. 104). These discourses form “regimes of truth” in science, law, and religion – that legitimize a set of knowledge, techniques, practices, and so on. They exist within a highly specific and intricate matrix of historical, social, and political circumstances which continuously reinforce them. This means that they are not simply produced and maintained by individuals, but by systems of government, law and legislation, police, and maintained by media, the academy, healthcare systems, “psy-disciplines” (Rose, 1998) that govern practices of mental health such as psychology and psychiatry, and other regulating institutions of Canadian society.

Well-documented within the discourses of the psy-disciplines, science discourse represents one of the most powerful discourses that shape our commonsense understandings of health and mental health practices (Foucault, 1973; Rose, 1998). Healy (2014) writes that science discourse is found where mental health research, assessment, and intervention practices take place. Psychology’s dominant status as a discipline centrally concerned with the scientific, empirical study of mental life means that science discourse exerts a powerful influence on how

“mental health” is taken up by mainstream practices of the discipline, generating ideas about how we should think and speak about it, what research and practice questions may be asked, how matter is studied, what is seen as normal and abnormal, the professional performances that come to be understood as “best practice” and “evidence-based,” and so on. The positivist-empiricist approach to research vis-à-vis the scientific method privileges quantified methods and analysis and frames research as the discovery of “true” conditions within a natural world. Staking a claim in “mental health” and the construction of “normal” in human mental life, science discourse has produced objects and practices of psychological assessment, diagnosis, intervention, and prevention in every facet of human life in Western societies, defining what is of the norm and what is normal, what is pathological, what must be intervened on, and what must be prevented. I am interested in this dissertation to explore what the discourses of our professional ethics do to shape psychological research and practice, the assumptions, values, and interests they promote, and the assumptions, values, and interests that they do not.

As I have mentioned earlier, regimes of truth – through ideologies in dominant discourses – function according to what a society comes to regard as true at a given place and time. Particular mechanisms enable regulatory statements that define truth from falsehood, and each truth is regulated with sanction. A particular set of techniques and practices is instituted in the production and regulation of the regime, according them a high and specialized value, and given status by those with particular characteristics and credentials, enabling an ability to determine what is true. Thus, we come to *accept* everyday discourses in things like routine, commonsense, practical wisdom; we do not question them and we may not be aware of their subtlety as we take them for granted. Truth itself is a “system of ordered procedures for the production, regulation, distribution, circulation and functioning of statements” (Foucault, 1977, p. 113). Said (1983)

articulates this on point: “the will to exercise...control in society and history has also discovered a way to clothe, disguise, rarefy and wrap itself systematically in the language of truth, discipline, rationality, utilitarian value, and knowledge. And this language in its naturalness, authority, professionalism, assertiveness and antitheoretical directness is...discourse” (p. 216).

Knowledges produced by particular discourses are not granted equal currency. As truth is infused with power, a knowledge’s status varies according to its values, interests, and other subscriptions to ideological conditions – these, of course, carry the most power (Fairclough, 1995). However, relations of power are multiple, diverse, competing, and varied in their force and interest, making them unequal, interspersed with tension and vulnerable to practices of *resistance*. Discourses that achieve a status of unchallenged authority in society present as the most difficult to resist, as truth conditions are strong in their stability and continuity. Foucault argues that people acquiesce to certain (dominant) power relations because they stand to *gain* by their acquiescence – privileges of status, authority, money, and so on (Foucault, 1972). When the operations of power are exposed through discourse analysis, acquiescence to power demonstrates that practices effected in everyday situations results in the disadvantage of others. However, the notion of power as socially exercisable phenomena rather than a possessive quality of people means that power’s productive capacity can be shifted between groups of people. Being able to identify and understand local forms of power, in their network of effects, in how they manifest in discourse is what best enables challenges to structural determinism. A shift in power to groups of people who are marginalized by dominant practices, for example, means that there are opportunities for such groups of people to resist such discourses and instead enact others (Fairclough, 1995). For instance, a person who experiences mental difference may choose to resist labels of psychiatric diagnosis, mental illness, and psychopathology, in favour of

connecting with a mad community by finding value in this identity as strength-based, compassionate, empowering, positive, and contributing a different perspective to society.

The potential for oppressive and marginalizing effects of the practices of psychology is an ethical issue for the discipline of psychology. Since the powerful effects of mainstream disciplinary practices of psychology can effect harmful impacts on marginalized groups of people, whether intended or unintended, disciplinary practices must be interrogated for their impact. In the context of dominant psychology practices, those operating within disciplinary power can work to recognize and support capacities of those in contact with the discipline to exercise power, rather than focus on their powerlessness from a structural perspective. This could be effected by giving people greater choice in the kinds of services received from psychologists; validating and incorporating forms of knowledge traditionally subjugated by dominant practices, such as self-knowledge; utilizing research methods that are generated and practiced using bottom-up approaches, such as participatory and community-based approaches; and so on.

Governmentality. Governmentality refers to systematized and regulated modes of power or technologies that seek to control the “conduct of conduct” of individuals of a society using ideology, reason, and/or rationality to designate a kind of action and the appropriate means of achieving such actions. The governance of others requires dominant institutional power that harnesses, constitutes, and delimits freedom to *intentionally* produce conditions of possibility for conduct. Domination is constituted in asymmetrical relations of power such that the relations between the institutions and subjects are hierarchical, stable, and challenging to resist for those subjected to it. Domination renders every citizen’s “margin of liberty [as] extremely limited” (Foucault, 1978, p. 12). Foucault (1993) explains that “governing people is not a way to force

people to do what the governor wants; it is always a versatile equilibrium, with complementarity and conflicts between techniques which assure coercion and processes through which the self is constructed or modified by himself” (pp. 203-204).

Discourses that comprise ideology form our ideas about what “normal” should be, and regulating discourses seek to measure the ways in which we deviate from normal. From his analysis of the historical effects of power with disadvantaged groups of people, that is, people falling outside of the “norm” – people labelled as mentally ill, prisoners, homosexuals – Foucault observed that these individuals were once members of society until the 18th century, when education, medical, legal, psy-disciplines, and other normalizing discourses came to power, along with systems of surveillance of the norm and disciplining practices for those who were found to “deviate” (Foucault, 1970, 1972, 1978, 1989). Our modern institutions are concerned with evaluating deviance, and dispersing and reinforcing technologies that enable us citizens to manage ourselves within a “norm.” In this context, governmentality is centrally concerned with the internalization of self-surveilling technologies so that each and every one of us internalizes and becomes normative. Accomplished at the institutional level, these ideological practices are widespread and tremendously powerful. Thus, as we may believe we are *free, autonomous agents*, we are historically, culturally, and socially produced by the discursive resources that are available to us. Within an ideological sphere, the goal is for us to become self-surveilling subjects. Foucault saw from his work that historically, we have moved from practices of bodily violence to a more subtle, internalized form of discipline. With the installation of self-surveillance comes with it the notion that we never know when we are being watched, we cannot escape an awareness of our own deviance from the norm, and we experience a sense of needing to “fit in” – from ourselves and from others.

Foucault theorized that the “conduct of conduct” requires “docile bodies,” or the submission and obedience to the internalization of knowledges and truth practices (Rose, 1996). These technologies of government provide platforms for the institutionalization and regulation of such power relationships in society. Technologies of power are those “technologies imbued with aspirations for the shaping of conduct in the hope of producing certain desired effects and averting certain undesired ones” (Rose, 1998, p. 52). Technologies of the self, a particular kind of technology of power, concern the practices and strategies individuals adopt to effect their *own* transformations to achieve a state of ethics, happiness, quality of life, and so on.

In Canadian society, neoliberalism, a form of capitalism emphasizing individualism and competition, plays an important role in the rationality of modern governmentality. It describes a political and economic system that succeeded the Keynesian welfare state in the last few decades of the 20th century. Neoliberalism involves the consumption and sale of goods and services, which allow individuals to achieve the “self” they desire. More specifically, at a societal level of analysis, it entails a free market deregulating economics and privileging competition, the downregulation of state involvement and responsibility of social welfare, the corporatization of social services, and the privatization of public assets, all of which promote social and economic policies that favour conglomerates (Clarke, 2005; Sugarman, 2015).

Neoliberal regulation of social, economic, and political systems of society have instilled changes at the level of the self, subjectivity, and identity. Neoliberal rationality promotes the construction of self-regulating, self-correcting individuals whereby governance occurs on the “inside” of an individual. Foucault observes this form of control as particularly powerful in its efficiency to reproduce means of social control; knowledge as truth legitimizes one’s ability to regulate oneself *with* truth. This speaks to the widely dispersed, extensively located and intricate

“capillaries” of power commanding self-governing subjectivities as not only obviously located within institutions of authority, but *at the level of each person in the population of a society*.

Foucault recognized enterprise as a form of governmentality that was transformed beyond neoliberal institutions to influence and function in all facets of the human life. Enterprise applies not only to institutional economics but also to persons belonging to such a culture, defined by self-reliance, self-improvement and mastery, initiative, and prediction and risk taking. That is, the technologies of the free market constitute its subjects as free agents, autonomous individuals who are responsible for their own enterprise. This serves to remove the state’s direct control over its citizens and sustains its forms of control through self-responsibilizing technologies that become installed within each individual. The individual of a neoliberalist society is subjected to continuous surveillance and examination as they move about systemic and institutional spaces in places in time.

In neoliberalist society, individuals are expected to not only engage in economic activity but actively create and generate it; people must recognize themselves as sets of skills and attributes to be invested, managed, and developed. Thus, the individual is “his *own* capital, his *own* producer, and the source of his *own* earnings” (Hamann, 2009, p. 53). Foucault postulated that neoliberal governmentality uses individual freedom and choice as vehicles for power. The governing of individuals through consumerist mechanisms of choice by offering a plethora of choices in particular life domains – car insurance, fashion, diet and nutrition, mental health – with the expectation that individuals will make the “right,” informed choice, thus demonstrating accountability and responsibility as a “good” citizen. Importantly, this relationship functions not as overtly coercive, but insidiously through social practices that delimit conditions of possibility and from which individuals act through their ability to enterprise and invent. As a powerful

discipline reproductive of status quo ideologies in relation to “mental health,” psychology is a producer and regulator of discourses in society, and likewise technologies of the self, related to normalization, self-esteem, healthism, and responsabilization (Sugarman, 2015). Mental health is often framed in terms of gains and losses in cost and productivity, risk and benefit, and individuals are always already responsible to “be” mentally well; receptive to prevention, intervention, and ongoing management; be in or moving toward recovery; and *not* represent any form of “abnormal.”

Chapter Summary

Drawing on poststructuralism and Foucauldian discourse theory within a social constructionist framework, and located within critical psychology centrally concerned with social injustice, oppression, power and privilege, the work of this dissertation uses these lenses to theorize the CPA Code within these terms. In doing so, I politicize the CPA Code, drawing attention to it as a discursive production of power, constituted by discourses that seek to govern the behaviour of psychologists. Turning this lens onto the field of CPA ethics, I conceptualize a different picture of ethics – one that looks at the connections of power between those individuals and institutions that contributed to shaping ethics as a discursive field. In identifying the CPA Code as a discursive entity, poststructuralism debases its status as truth; universal, and foundational to ethical practice. Bringing it down from a status of both abstract and apparent elevation, beyond reach of critique, this analysis throws its essential ontology and epistemology into question. It thus recognizes ethics not as a truth to be discovered and polished but as a “politically engaged critique” (Butler, 1992, p. 6), or, “an effort to understand its own implication within power, and within governmentality” (Rossiter et al., 1999, p. 86). Ethics is not only the effect of power but also produces power, and part of this production functions as a form

of governmentality of disciplinary psychology and the Canadian Psychological Association, a “conduct of conduct” for psychologists as well as those receiving their services.

Foucault’s theory of discourse, power/knowledge, and governmentality provides a theoretical space to form an understanding of the governing power of the CPA Code, particularly as a discourse of truth, based in ideologies of mainstream psychology that governs the conduct of Canadian psychologists. As a discursive practice, we can consider the CPA Code as a collection of discourses that operate to construct possibilities for ethical-professional subjectivity for psychologists. In the governmentality function of the CPA Code, the Code further tells us about the sites at which these discourses are taken up, and the subjectivities they produce. In the next chapter, I present the methodological approach I take to discursively analyze the CPA Code.

Methodology

“The master’s tools will never dismantle the master’s house.”

Audre Lorde (1984, p.113)

In this chapter, I explain the methodological approach I use in this dissertation to analyze the CPA Code. I begin by reviewing my research questions, and from there chart a brief discussion of methodological approaches that can be used to examine scholarly questions of discursivity and the analysis of discourse, including micro-analytic and macro-analytic approaches to discourse analysis. I ultimately locate the analytic framework of this dissertation within a macro-analytic approach. Succeeding that discussion, I move into an overview of the specific Foucauldian-informed framework I harness to analyze the CPA Code discourse. Here, I look at the practices of analysis, such as noting objects and subjects, internal exclusions to textual analysis, governmentality, and intertextuality. I touch on the critical element of this analysis as well. After this, I review the data collection process, the analytic procedure I follow, and the ways in which I account for quality assurance throughout the analytic process. I finish the chapter with a section on self-reflexive engagement and observations that I had encountered with this research.

Research Questions

The four research questions I address in this dissertation are:

1. What are the dominant discourses that construct the CPA Code?
2. What are the subjugated (or appropriated) discourses in the CPA Code?
3. What are the practices that maintain the discursive structure of these discourses?
4. What are the subject positions made possible by these discourses?

A qualitative research project such as this one requires a clear, logically traceable “decision trail” (Cheek, 2004) by which the pathway to addressing the research questions is constructed. The decision trail constituting the methodology and analytic approach for this study begins with a general scan of prominent readings in discourse analysis (Andersen, 2003; Cheek, 2004; Fairclough, 1992, 1995; Foucault, 1970, 1972, 1980, 1981; Gee, 1999; Hook, 2001, 2007; Jørgensen & Phillips, 2002; Parker, 2002, 2014b; Phillip & Hardy, 2002; Potter & Wetherell, 1987; Rabinow & Rose, 2003; Said, 1983; van Dijk, 1993; Weiss & Wodak, 2004; Wetherell, 2001; Wodak & Meyer, 2001). Broadly stated, the study of discourse is a form of qualitative research focused on talk and writing, and the effects of such speech and writing to understand aspects of social life (Shaw & Bailey, 2009; Stainton-Rogers, 2011). Situated within no particular disciplinary “home,” it continues to be taken up and influenced by a range of fields, including literary theory, linguistics, philosophy, political theory, and sociology, and thus follows no kind of monolithic tradition.

The conceptual plurality underpinning discourse analysis as a methodological framework has resulted in a wonderful and at times entirely confusing plethora of discussions on commonalities and differences across approaches. In the overview I provide below, I discuss discourse analytic approaches generally within two broad yet arguably not mutually exclusive (Billig, 1997; Wetherell, 1998) “camps”: micro-analysis of discourse and macro-analysis of discourse.

Approaches to Discourse Analysis

Micro-analytic approaches to discourse. Micro-analysis of discourse is the examination of how discursive practices are used by people in social interactions to accomplish particular interpersonal intents, goals, or achievements (Potter & Wetherell, 1987; Stainton-Rogers, 2011).

This approach recognizes language as the system through which people build their realities and meanings, and qualifies the use of language as strategic such that its employer(s) seek(s) to achieve purposeful outcomes. In this approach, the analyst is concerned with features of language in dialogue, including the content of language and the kinds of words people draw on to communicate particular messages, and the ways in which people use language to intentionally communicate certain aims, such as utterances of rhetorical devices. These kinds of discursive practices may be captured between as few as two people, within and across groups of people, and as broadly inclusive as a society or worldview.

As a topic and practice area of psychology, discursive psychology represents a collection of micro-analytic approaches used to study psychological matter through the analysis of talk, text, and images. These approaches draw on the constellation of work in rhetorical analysis (Billig, 1987, 1997), ethnomethodology (Garfinkel, 1967), conversation analysis (Sacks, 1984, 1992; Sacks, Schegloff, & Jefferson, 1974), and the sociology of the scientific approach (Ashmore, 1989; Latour, 1987; Latour & Woolgar, 1986; Mulkay, 1991).

Macro-analytic approaches to discourse. Macro-analysis of discourse examines the discourses operating across different structural, organizational, and cultural settings; how they are produced and exert power over one another; and how such discursive constructions change with time and place (Stainton-Rogers, 2011). The kinds of research questions a macro-analytic approach seeks to answer are: What discourses are operating in a particular text or set of texts? What are the conditions under which they are produced? How are they constituted and brought into being? What are their material effects? While approaches to data collection vary, this kind of analysis has substantially developed out of the work of Foucault (1970, 1972). Research questions may be answered through historical inquiry or genealogy to map discursive shifts in

particular subject matter at different sociohistorical locations. Another kind of analysis focuses on power – how power produces things, the material consequences of its productions, and motivations and gains associated with its production. Per Foucault (1972), power may also be examined through the study of subjectification, or the ways that subjectivities are produced, reproduced, and regulated through discourse.

Given the set of research questions I have posed, a macro-analytic approach to the study's methodology was most appropriate for structuring the analysis of CPA Code discourse. This approach directly interrogates the validity of fixed meanings and opposes the reproduction of truth claims that are built into empirically-based objective and scientific methodologies and data analysis. Additionally, it allows me to get analytically “close” to the CPA Code, examining the text to understand the discourses being (re)produced, where and how they were being (re)produced, and the subjectivities they are making available within the CPA Code.

As I have mentioned, macro-analysis of discourse does not possess a set of prescribed methodologies, methods, or rules for discourse analysis; as Wetherell (2001) explains, “the process of analysis is always interpretive, always contingent, always a version or a reading from some theoretical, epistemological or ethical standpoint” (p. 384). Yet these methodological practices do not translate to unsystematic or speculative reading of textual materials; rather, they demand a thoughtful and rigorous approach to textual examination. Below I describe the analytic framework I construct and use.

A Foucauldian-informed Discourse Analysis

In analyzing the discourse of the CPA Code, I elected to borrow from Foucault's analytic strategy of archaeology. Archaeology is an analysis that discerns how particular systems of thought and knowledge come to be regulated by particular rules and principles within discourse,

formed by close, systematic, and iterative readings of texts. Foucault (1972) explains that “this [discursive] practice is not only manifested in a discipline possessing a scientific status and scientific pretensions; it is also found in the operation in legal texts, in literature, in philosophy, in political decisions, and in the statements made and the opinions expressed in daily life” (p. 179). The Foucauldian-informed archaeological framework I employed in this research includes noting discursal objects and subjects in the CPA Code, whereby I investigated the borders, limits, and rules of discourses using exclusionary methods internal to the text. I also sought to examine governmentality in the CPA Code by analyzing the “where” and the “how” of the CPA Code discourse (re)production.

Noting objects and subjects. Discourse, in spite of its unstable and dispersive status, still comes together to produce objects that are able to exist in relation to other objects. That is, elements surrounding the discourse – discursive resources – bring objects and subjects into being, enabling and limiting the discourse’s possibilities to define itself. Determining the processes of discourse production and exclusion are interrelated concepts; discourse is constructed by their mutual constitution (Foucault, 1981). For Parker (2002), the archaeological process of analysis involves systematically teasing apart the text to identify discourses, objects of the discourse, and subjects of the discourse; the networks of relationships between discourses, objects, subjects, and institutions; and the contradictions between different representations of the textual matter. In the CPA Code discourse, objects such as “consent,” “risk/benefit analysis,” and “moral rights” may be constructed to serve particular functions in discourse. They also are connected to certain subjects, shaping the ways in which those subjects are able to speak about or act in a certain way. In discourse, the performance of the role of a student of psychology might look quite different from that of an expert clinical psychologist, for example, in carrying out

practices of client consent. Likewise, the differentiation of a vulnerable person from a diverse person signals a different set of discourses constructing their possibilities for subjectivity, influencing their representation and practices with psychologists in “how” they are constituted as clients. Parker (2002) further noted that omissions of discourse in text are also crucial to observe, and are particularly relevant for later-stage readings in clarifying and defining the discourses that inform a text.

Writing out objects of a discourse facilitates the interpretive work that must go into the discourse analysis, allowing for connections and patterns to be identified while connecting these to certain statements that frame the discourse in a particular light. The analyst also is to note the subjects appearing in the text, objects that “write and read, speak and listen” (Parker, 2002, p. 210), observing how each subject performs as they are discursively produced by the nexus of discourses and determining how the network of relationships function in relation to statements made in text. Some examples of the subject positions within the CPA Code are psychologists, the institution of the CPA itself, clients, and students of education and training programs. It is important for the analyst to contrast the ways in which the discourses are discussed, examining the ways statements converge and diverge, and how they speak to different audiences. These discourses need to be further contextualized within their material effects – that is, how the discourses are enacted in the material world and are produced to understand “the ways in which the discourses weave their own story of origins and how, in the process they conceal their historical character” (Parker, 2002, p. 215). Connections to the historical emergence of discourse can be made, as well as the institutions which reinforce, and are reinforced by, the discourses emergent from analysis.

Hook (2007) recommends that analysts be vigilant of the productive “circuits” of knowledge to power and power to knowledge, observing how knowledge and its objects are constructed, that in every instance these constructions can vary as power always creates its own knowledge. This means understanding discourses that come to dominate, that are subjugated by dominant discourses, and that are appropriated based on dominant knowledge. As I discussed in the Theoretical Orientation chapter, the most powerful discourses, those that permeate mainstream psychology and the institution of the CPA are those most strongly related to truth in the CPA Code. These are discourses founded on *natural*, *rational*, and *scientific* concepts. Dominant discourses are powerfully able to co-opt subjugated discourses, influencing them to act in their own interest and reflect their own values, assumptions, and interests.

Moreover, from a Foucauldian point of view, it is the observation of truth statements that are central to discourse analysis, serving to eloquently validate themselves by virtue of their strong correlation to truthfulness. Since truth is an operation of discourse, conditions of truth directly hinge upon available forms of discourse, or discursive resources. The discourse analyst is to “replace these ‘true’ explanations with some other form of answer which is more conditional, which can demonstrate that what counts as ‘the truth’ is a product of discourse and power: a displacement of the will-to-truth by the will-to power” (Hook, 2001, p. 6). In doing so, this analytical tool will both make explicit certain covert conditions of possibility, such as the contingencies underlying truth, and acquaint the user with the extensiveness of the power/knowledge relations.

Looking for internal exclusions. For discourse analytic work, Hook (2001) contends that the analyst should note exclusions to discourse located internally to a text, and specifically those referring to the discipline, the author, and the commentary. Exclusions serve to illustrate

the limits of a discourse, which in turn provide the analyst with an understanding of the multiplicity of discursal principles located in a text. The scholarly discipline from which a text emerges, which consists of a given set “of objects, theories, methods, propositions, rules, definitions, techniques and instruments” (Hook, 2001, p. 11) exerts an important influence on the *kinds* of discursal objects a text can produce. For instance, objects of science in mainstream psychology are connected to additional organized, discipline-defined objects such as “evidence-based treatment for Major Depressive Disorder,” “actuarial risk assessment,” and, “double-blind experimental condition.” Within mainstream psychology, objects of “anti-oppression,” “liberation,” and “art-based inquiry” are relatively uncommon to encounter. This serves as a point of contrast to conceptualize the inclusions and exclusions of particular discourses and objects. Foucault (1981) states that disciplines carry both truths and errors within the complexity of their requirements, imposing specific conditions under which statements may be made in the name of truth. By having a scientific, evidence-based standard, for example, expert clinical psychologists could regard certain discourses as “quackery” or “lacking in evidence” and thus position such *subjugated* discourses – knowledges that come to be delegitimized and at times simultaneously co-opted by dominant knowledges – as problematic. Subjugated discourses represent knowledges that, while they compete for power with dominant discourses, are often rejected, silenced, and ignored. Examples of these kinds of discourses are those within critical, feminist, anti-racist, and/or Indigenous practices. Considering disciplinary boundary lines, mainstream psychology has traditionally resisted an interdisciplinary perspective. Mainstream psychology also has discursively positioned social work as a substandard, unscientific, or “soft-science” field. While simultaneously positioning fields such as social work as somehow less scientific or empirically-based, the dominant disciplinary practices of science, empirical

evidence, and expertise are reproduced, as the power afforded to dominant discourses relies on the subjugation of discourses by rendering them as inferior.

In relation to the author of a text, Foucault (1981) is referencing “a principle or grouping of discourse, a focus of coherence, a unity and origin of meaning” (Hook, 2001, p. 10). He argues that authors, rather than acting as an “originating capacity,” act as conduits for collections of discourses associated with them to validate their existence and status within a given social, historical, and cultural location (see Intertextuality section below). Thus, rather than focusing on what authors originate and “reveal” in their texts, discourse analysts attend to the ways objects are produced and bring about subjects, including authorship itself, in different subject positions, and how these subject positions are made possible within texts per their constitution in discourse. These discursive matters may then be connected to institutional, ideological, foundational discourses within the broader social, cultural, and historical context of the topic of analysis.

For instance, a researcher analyzing a best practice guideline for the treatment of schizophrenia such as the CPA’s *“Psychology Works” Fact Sheet: Schizophrenia* (Holshausen & Bowie, 2014) may be interested to note what discourses are used to frame schizophrenia (e.g., biopsychosocial model consisting of diagnosis and treatment), who is mentioned in the document (e.g., “people with schizophrenia”) including the author (e.g., “Canadian Psychological Association”). “People with schizophrenia” are subjectively positioned as individuals with “a serious disorder” that affects thinking and behaviour that require treatment. These individuals do not live a normal life but it is implied that with the treatments advocated in the document, they may return to one. One of the authors of this document, an associate professor at Queen’s University and an affiliate of the Centre for Addiction and Mental Health (Bowie), represents an “expert” who employs biopsychosocial discourse in his research, in line with the Canadian

Psychological Association's evidence-based and best practice approach to psychological disorders.

Commentary involves the discourses found within the primary foundational narratives of a society, such as scientific texts, juridical texts, and religious texts. Although the pervasiveness and magnitude of these major societal discourses reinforce a sense of permanency, given their wide dispersion and powerful ability to dominate, they should be revisited for their shifting forms and correspondent meaning, which may be plural and/or hidden. For instance, although discourses of ethics in psychology in the early 20th century incorporated objects of science and professionalism, in more recent times they include objects related to human rights, privacy and confidentiality, and social justice. Moreover, while commentary constricts discourse through reappearance and sameness, the author imposes further internal limitation (Hook, 2007).

Capturing governmentality. Rabinow and Rose (2003) write that the analytics of governmentality involve the observance of contingencies between the rules of a discourse and the ways subjectivities are produced, encouraged, and enforced in the material reality of everyday practices. Concepts, assumptions, and procedures embedded in a text, which are activated in particular settings, or the “implementational logic” of everyday practices, powerfully evoke certain subjectivities into being. Since governmentality is a guided acting of the self upon the self (Hook, 2007), it is important to consider two main components in governmentality analysis: *activities*, which provide direction and guidance to subjects of a discourse for enabling a given set of actions, and qualities of *self-reference*, which include attention to and monitoring of the self in a reflexive fashion. These concepts underscore the psychological intentions and operations of government, often in a context of risk prevention and productivity, the development of a “self-power” that employs instrumental technologies of subjectivity, and can

be thought of as the identity effects of such power. Fear of transgression, discipline, and punishment for a lack of uptake of self-regulating strategies are prominent at material sites of (re)production of governing or regulating discourses.

For example, a governmental analysis of health promotion materials about breast cancer might detail multiple activities women are to engage in to prevent breast cancer, such as a diet high in vegetables, three to four exercise sessions per week, breast cancer screens every 2 years after age 50, and so on. Interviews with women could demonstrate the ways in which they become *responsibilized* for carrying out these activities: for engaging and monitoring their health behaviours like healthy eating and exercise, for attending regular health care visits for breast screening, for avoiding risky behaviours such as smoking, and for being vigilant of signs, symptoms, and other expressions of early stages of cancer. Sites of reinforcement of this discourse could be doctor's office visits, nutrition programs, and places of fitness. If women do not engage these self-technologies regularly, it may effect a host of internal responses: feelings of guilt and shame, embarrassment, and deserving of reprimand. Engagement in risky behaviours may incite intersubjective responses of disapproval, anger, and disciplinary warnings and recommendations by medical authority.

Intertextuality. Although intertextuality as a literary concept is more extensively developed by Mikhail Bakhtin and Roland Barthes (1977), Julia Kristeva (1980, 1981) initially coins the term and provides an ontological account of the constitution of texts. Barthes (1977), who announces “the death of the author” and the “birth of the reader,” asserts that “it is language which speaks, not the author; to write is...to reach the point where only language acts, ‘performs,’ and not ‘me’” (p. 143). Similarly, Claude Lévi-Strauss (as cited in Wiseman & Groves, 2000) reflects: “I don’t have the feeling that I write my books, I have the feeling that my

books get written through me...I never had, and still do not have, the perception of feeling my personal identity. I appear to myself as the place where something is going on, but there is no 'I,' no 'me'" (p. 173). Thus, when any authors write, they are simultaneously writing discourses into their material, as their communications employ pre-existing concepts and conventions of discourse.

Foucault (1972) agrees with Barthes' intertextual concept that each text is produced in relation to other texts, leaving no text an "original" or "unique" work. He recognizes a text as "caught up in a system of references to other books, other texts, other sentences: it is a node within a network...The book is not simply the object that one holds in one's hands...Its unity is variable and relative" (Foucault, 1974, p. 23). To this effect, Kristeva (1980) writes that any text is constructed as a mosaic of questions; any text is the absorption and transformation of another. Explaining what intertextual analysis offers to users, Bazerman (2003) writes,

[It] will help you pick through the ways writers draw other characters into their story and how they position themselves within these worlds of multiple texts. It will help you see what sources researchers and theorists build on and which they oppose. It will help you identify the ideas, research, and political positions behind policy documents" (p. 84).

Thus, intertextuality is a tracing tool for discourses by examining linkage between texts, the systems and institutions connecting the discourses, any figures of authority and who is (able to) speak about them. Arguing to attend to not the text's structure but instead its "structuration," that is, how the text came into being and the materials influencing its development, Kristeva explains that "every text is from the outset under the jurisdiction of other discourses which impose a universe on it" (as cited in Culler, 1981, p. 105). Applying the concept of intertextuality to CPA Code discourse, one could argue that this discourse has been influenced by the discourses of science, law and legislation, codes of conduct and professional standards, and risk management.

Likewise, the ethics discourses of the Feminist Therapy Institute (1999) have been influenced by women's rights discourse, feminist moral theory, and anti-oppressive theory and practice.

In a given text, it is generally easier to mark and explore works that are cited in the text of analysis, creating a list of references and leaving open the ability to make further observations and interpretations of information yielded by the analysis. Details such as how the information is expressed – for example, a direct quotation, indirect quotation, or paraphrase and/or description – may be noted. Following could be one's interpretation of the intertextuality, relating how the text is being “transformed” in the new text. The analyst may comment on what the author's use of the text is, the connotation or attitude of the use of the text, how the text was used to construct the author's point of concern, and how the text is connected to other statements made in the document. Oftentimes, discursive relations embedded within a text are not quoted or paraphrased, and a deeper analysis of the more subtle or hidden connections between objects of language must be carried out. One way to do this is to refer to specific, distinctive words that can be connected to a broader regime of discourse(s) that the author drew from. Compiling a fluid list of words that evoke a discourse, characters or groups, or events existing outside of the text, as well as noting how they are used, the position they impress, and an interpretation of the context(s) in which the words are used, is useful for analysis.

Incorporating a Critical Lens into Discourse Analytics

A critical perspective may be brought into the analysis of discourse. Methodologies such as critical discourse analysis (CDA) incorporate a broad range of theories, from general social theories or “grand theories,”; middle-range theories on specific social phenomena such as conflict, cognition, and specific sub-systems of society including economy and politics; linguistic theories, including theories of argumentation, grammar, rhetoric to explore patterns of

language systems and verbal communication; micro-sociological theories to explain social interaction; social-psychological theories to conceptualize social conditions of emotion and cognition in a hermeneutic tradition; and discourse theories which attempt to capture social phenomena using discursive approach to its production and structure (Fairclough, 1995). CDA views power in a modern context as effected primarily through cognitive effects of persuasion and manipulation. Such influence is not always apparent; dominance is often reproduced by routine, in everyday taken-for-granted forms of text and talk that may be considered natural. The organizing of such language is never accidental, discovered, or new; it is a series of events which serve to make particular conditions possible for discourse (Fairclough, 1995).

Assuming a critical stance, CDA is set apart from other sociolinguistic approaches in its explicit aim of advocacy for those marginalized by particular structures and material practices. Its analytic approach is concerned with top-down relations of dominance, and specifically the conditions of legitimacy and acceptability. Accordingly, its project is interested in forwarding understandings of bottom-up relations of power by understanding the ways people comply, resist, and accept when operating from marginalized positions (Fairclough, 1995). The critical focus within this framework brings negative matters of power to the fore, particularly effects of social inequality as a result of dominance exerted by groups, elites, and institutions. For a discourse analysis to be critical, the researcher's political position must be explicated at the outset of study, which is connected to the data collection and interpretation process and the reflexive analysis associated throughout these processes (Finlay & Gough, 2003). In other applications, researchers demonstrate their political position in the ways that they frame problems with questions to be addressed. The work of this dissertation is made explicitly critical (see Theoretical Orientation chapter), and I engage in reflexive analysis later in this chapter.

Data Collection Procedure

For this project, I elected to follow Foucault in considering locality of discourses. To hone locality of Canadian psychology ethics, I delimited my discourse analysis to three primary texts:

- The second draft Fourth Edition of the Canadian Code of Ethics for Psychologists (CPA, 2016b)
- The Guidelines for Ethical Psychological Practice with Women (CPA, 2007); and,
- The Guidelines for Non-discriminatory Practice (CPA, 2001).

Since all documents of analysis in this dissertation are available to members of the public, this project is exempt from requiring approval by Ryerson University's Research Ethics Board (see 3.0 Research Exempt from REB Review, <http://www.ryerson.ca/content/dam/research/documents/SOP%20Requiring%20REB%20Review.docx>).

What this project does not include is an analysis of the talk of individuals practicing psychology – psychologists, students, members of the CPA, and other disciplinary practitioners. While certainly a fascinating and important next step of scholarly pursuit in this line of inquiry I hope to follow, for this research, I focus exclusively on the CPA Code itself. The two supplementary guidelines I include are important to the critical focus of this analytic work because their existence suggests exceptional situations of practice with marginalized groups of people – specifically “diverse” individuals and “women.” My express goal of analyzing these documents was to determine the discourses that make up CPA ethics for psychologists, the subject positions they generate, and their discursive sites and practices of uptake.

The framework I have constructed for this project utilized a critical positioning to discourse analysis, and I drew from concepts of critical discourse analysis by Fairclough (1992,

1995). In the method of discourse analysis I used to examine the three ethical texts of the CPA, the tools I used were informed by the scholarly works of Hook (2001, 2007) and Parker (2002), both of whom are Foucauldian-inspired and critical psychology-informed. I also drew from Foucault's work on discourse, power/knowledge, and governmentality (1970, 1972, 1980, 1981). I do not claim my work to be a purely replicable deployment of Foucault's or any other scholar's approach; Foucault himself would counter the possibility for such a replication, as he advised his contemporaries and readership to beware of "the trap of formalizing an approach that clearly eschews formalization" (Arribas-Ayllon & Walkerdine, 2008, p. 91). Moreover, a number of scholars observe Foucault's work to be discontinuous and contradictory itself (Danaher et al., 2012). Additionally, I incorporated the notion of intertextuality in my analysis.

Analytic Procedure

Using the methodological approach and concepts I describe above, I started my analysis with an initial reading of the texts to identify the objects and subjects of the text, making observational notes on connections between these identifications. Considering each individual object, I then systematically combed through the texts to find referential statements. I followed this by using the concepts of Hook's (2007) analytics to identify and examine the construction of authorship, discipline, and commentary using internal and external texts. I looked for instances of discontinuity, fragmentation, and tension. I noted intertextual moments, where I could trace particular words and phrases to other discourses in the three ethical texts. Throughout the analysis, I periodically reviewed my methodology and referred to relevant macro-approach literature to refresh my understanding of the methodology I had constructed. I also reflexively engaged in regular journaling about my experiences and reflections on the analytic process and outcomes. I sought to avoid exclusively focusing my analytic lens upon specific discourses, as

This would have interfered with the discovery of other discourses and subjects, diminishing the quality of data analysis. I drew on my education, training, and experiences in the mainstream critical branches of the discipline, as well as my familiarity with CPA Code authorship, objects, and subjects. This supported the categorization of various discourses that demonstrated modes of practice and material practices of the CPA Code. I reviewed material from different sources to facilitate my contextual understanding of the discourses I was unearthing: websites, official documents, and scholarly literature to develop a working understanding of the material reality of the textual effects of CPA Code discourses and subject performances.

As this project evolved, so too did I as an analyst and a scholar. I committed to reflexive journaling regularly during the analysis, and emergence and interpretation of the findings, to reflect on my positions, thoughts, opinions, emotions, curiosities, and other responses (see Reflexivity section below for further details). Aware that any “final” reading in a discursive study is considered tentative and amenable to change (as the meaning of a text could shift with new analytic lenses) (Parker, 2002), I chose to conclude my analysis at a point where no further discourses or subjects emerged, and I recognized a saturation point with the emergence and construction of the findings.

Quality Assurance in Discourse Analysis

Methodological mishaps in discourse analysis. Hook (2001) refers to four issues discourse analysts must avoid, and that I attempted to avoid in my analysis. The first is to overturn any assumptions located in the discourse that are aligned with originality and tradition. Hook (2001) notes that these sources “typically derail our analytic attempts, and separate, in an artificial way, individual voice, the drive to truth and the realm of technical expertise from the political field more widely” (p. 17). It is the removal of discourse from its “esoteric or hermetic

elements and to do this by making [it] assume its affiliations with institutions, agencies, classes, academies, corporations, groups, ideologically defined parties and professions...[which]...forcibly redefine and reidentify the particular interests that all [discourses] serve” (Said, 1983, p. 212). Thus, this problem presents as an issue of ontological and epistemological positioning. Foucault (1981) writes that the practice of overturning assumptions counters the “self-evidence” upon which taken-for-granted knowledge resides as commonplace and generally unquestioned, allowing the analyst to see underneath the universal and necessary to a “polymorphism of data sources” (Hook, 2001, p. 18). Some of these include: connections, inhibitions, an interplay of forces, strategies, and so on in discourse. The analyst is now able to connect discourse to the motives underlying power-interests and thus generate an analysis with clearly delineated discourses evidently connected to specific politics of epistemology and ontology. These connections are necessary from a discourse standpoint, as well as a critical standpoint.

The concept of discontinuity (Hook, 2001) in discourse analysis is a second important factor for the analyst to mind. Foucault (1970) asserts that the totalizing narratives of science such as progress, linear causality, evolution, and continuity can be methodologically problematic when unquestioningly incorporated into an analytic lens. This is because totalizing narratives constrain discourse analysis by imposing assumptions of unification, cohesion, and truth, as well as cause-effect relations among objects of discourse. They increase the likelihood that the material of analysis will be *projected backwards*, replicating discourses of study and obfuscating the author’s political, cultural, and historical attachments. To this end, Hook (2001) contends, “In equivalent terms then,...discourse analysis needs to decentre and destabilize such meanings, undermine their authority and uproot the coherence, unity or ‘ahistory’ upon which such

‘truthful’ meanings are reliant” (p. 22). To address discontinuity in the analytic strategy, the user is to view the elements of the analysis as potentially *different* in form rather than the same. So, instead of modeling discursive events, resources, and constructions in a linear, unified fashion, or as a *vertical* pattern, the user is to accommodate for laterality, plotting coextending regularities in a *horizontal* fashion. Lather (1993) refers to this as “rhizomatic” validity, which “work[s] against the constraints of authority, regularity, and commonsense, and open[s] thought up to creative constructions” (p. 680). This practice facilitates the ontological and political associations of the discourse, and exposes the operations and motives of power interests. It is important to note that discontinuity also accommodates contradictions among and within discourses, which reveals their vulnerabilities, gaps, ruptures, and limits. Hook (2001) writes, “these are the seams to be pulled, the joints and weaknesses to be relentlessly stressed” (p. 26) in the analysis.

A third methodological principle of Foucauldian discourse analysis, the principle of specificity, concerns the analyst’s articulation of discursive constructions in text as they relate to the interplay of material-discursive effects. Foucault (1972) observes that discursive effects occur in a multiplicity of forms at the discursive level (i.e., in texts and embodied performances) and also at the extra-discursive level (i.e., material practices in the physical world) while maintaining a *consistent* function of effect. In analysis of high specificity, the analyst runs the risk of searching for inherent meanings located in the world and missing the identification of specific discursive-textual effects. Generality of analysis, or low specificity, places an overemphasis on the textual reading rather than “the *physicality* of its effects, in the *materiality* of its practices” (Foucault, 1981, p. 66; emphasis in original). Interpreting the text to the neglect of its uptake in the physical world negates analysis of the material practices of discourse, suppressing its material force and curtailing the political impact of the analysis. Distinction

between the textual and the material can be a challenge for the analyst to separate, but Hook (2001) suggests that “[b]eing able to cautiously blur these lines will keep the analyst from underestimating the *discursive effects* of the material, and the *material effects* of the discursive” (p. 30, emphasis in original).

The fourth issue Hook (2001) discusses is “textual relativism, where any reasonably supported textual interpretation will hold, within relative confines, as well as any other” (p. 31), rendering analytic results with minimal significance beyond the text of analysis. Since discourse analysis does not seek to uncover the “truth” embedded within a text, the results of analysis must always be socially, historically, and culturally contextualized; contestable; and always open to other equally valid perspectives. Therefore, the discourse analyst must reference particular stable points external to the text while avoiding those of truth, falsity, and generalization (Hook, 2001). This issue is not unlike the problem experienced in quantitative research when findings of research within a given sample of participants are generalized to a broader group or groups of people. The issue of relativity in discourse theory and analysis has been acknowledged by other analysts in psychology (Burman, 1991; Burr, 2003; Parker, 2002), which challenges the justification of embracing one reading of a text over another or others, and the reproduction of totalizing narratives.

Reliability and validity in discourse analysis. The work of this dissertation reflects an understanding of knowledge production as a socially constructed, politically charged endeavour. Methodologically and analytically, a social constructionist framework enables a plurality of realities rather than a singular or monolithic reality. Consistent with the ontological and epistemological view of social constructionism, the concepts of reliability, validity, and value-free data essential to the positivist and empiricist traditions become irrelevant or are reframed in

this kind of qualitative research (Lincoln & Guba, 2000). In this work, I considered the validity and reliability of this project in the frame of a qualitative project generally, and as a discourse analytic project specifically.

According to Creswell (2009), reliability as measured generally in qualitative work refers to a researcher's assessment of accuracy in data analysis, ascertained by the use of certain procedures that promote a reliable logic internal to the material of study. That is, reliability is determined by a researcher's consistency in employing an approach or combination of approaches in a way that is compatible with other projects. Yin (2003) recommends that qualitative researchers carefully and consistently document the procedures used throughout their studies, and to record every step of the process. Creswell (2009) and Guba and Lincoln (1994) identifies the use of multiple "checks" to reliability, including the use of rich and thick description when conveying findings; self-reflexivity to locate one's position in relation to the research work and reflections on the analytic process; presenting negative or discrepant findings; spending prolonged time in the field of study; using peer debriefing; and using an external auditor. Of these methods, I used rich and thick description, reflexivity, and peer debriefing as internal checks for reliability in data analysis.

Gee (1999) argues that in the analysis of discourse, "validity is social, not individual" (p. 95), and that "no piece of work can, or should, ask all possible questions, seek all possible sources of agreement, cover all the data conceivably related to the data under analysis, or seek to deal with every possible relevant linguistic detail" (p. 96). He conceptualizes validity in discourse analysis as related to convergence, agreement, and coverage. Convergence is constituted by how the data come together to support the analysis, or the way the analysis offers compatible and convincing responses to the research questions. Agreement is indicated by the

degree to which other discourse analysts that share *basic* theoretical assumptions and tools, or other similar forms of research, support the analysis and conclusions made by the analyst. In terms of coverage, the analysis of discourse is seen as valid when it is applicable to similar data of similar projects. This includes what precedes and follows the context of analysis in comparable research topics, theoretical frameworks, and study designs. Yet, validity of discourse analysis is not established by confirming that the data represent “truth” or “reality” in any way, nor is it necessary or encouraged to generalize findings to other studies. As I have mentioned, there is never a “final call” on the assessment of validity; all discourse analyses exist as questionable and contestable at any time, and they may shift in their status of validity throughout the progression of the analyses (Parker, 2002).

Reflexivity

The practice of critical, qualitative research values the immersion and reflection of self in the research process (Guba & Lincoln, 1994). This structured engagement with “self” in relation to research endeavours is considered a dimension of rigour in qualitative methods, as the contribution of self is seen to enliven and influence the material of study. Reflexivity entails the examination of thoughts, feelings, experiences, and other embodied phenomena throughout the research process to understand how the interaction between self and subject matter shapes the research, and vice versa (Creswell, 2009).

My process of reflexive engagement involved weekly journaling sessions throughout the analysis. I also recorded thoughts and observations in my journal space. I attended supervisory sessions with Dr. Jennifer Poole on a semester by semester basis between Fall 2012 and Spring 2015, and monthly between May of 2015 and July of 2016. These sessions served as debrief “check points” for me, a place where I could review my analytic and writing processes and

receive feedback. Reviewing my process in supervision with Dr. Poole enabled a space for me to build awareness about the progression of the analysis and my positions, values, assumptions, and interests throughout iterations of the research.

Speaking from the position of a poststructuralist, I politicize the use of the term “self” in this work as my experience of “self” does not resemble a constant or singular entity but of a shifting, multiple, and fragmented set of identities and engagements. As it would be impossible to know all of my possible “selves” in the research, I have best attempted to capture my research processes from writing and reflecting regularly on my evolution within this research. From time to time I had encountered and “bumped up” against various selves in his work – experiencing a range of emotions; sometimes with surprise and delight, often with struggle and uncertainty.

The idea of reflexive practice in my dissertation has been an uncomfortable one to reconcile. In conventional scientific psychology practice – and which echoes my experiences in graduate training – the topic and performance of subjectivity is rarely acknowledged, and if it is, it is to be avoided. My reflexive engagement reflects one of “coming out” within an unfavourable power structure embedded within an academic milieu favouring objective methods. Birke (2000) describes the anxiety of this process as “mention[ing] the great unmentionable” (p. 29), while Probyn (1991) evocatively terms these experiences as the performance of a “discursive striptease” (p. 113). Since embodiment and subjectivity fall outside of the domain of objectivity in research and professionalism in practice, this research may come under scrutiny for not representing “real” science design, process, and outcome. I had to face the possibility that my ideas would not be well received by some audiences, that by “outing” myself reflexively I may be subjected to different forms of judgment, questioned about the rigour and legitimacy of my research process, and/or disciplined for not being purely objective. These kinds of instances have

happened to me throughout the PhD program; for example, I have been told by faculty members that this dissertation “belongs in social work.” I also was warned that I should not be openly Mad in the department, as I may encounter stigmatic professional repercussions. At the same time, I have had many positive experiences, too, in my own growth as a critical psychology researcher, and I have received wide interest and support for this work.

The below writing reflects my experiences and observations in coming to terms with myself in this research, some of the issues I grappled with, and examples of the ways I struggled with and resisted dominant practices from my own embodied, intersubjective perspective.

On me and this work. In the Introduction, I introduced myself as a White, queer, cisgendered woman. I have been a student of post-secondary psychology since 2002. As a Mad person, practices of “mental health” assumes prominence in my professional/personal life and day-to-day experience. Learning about this research, and carrying it out, has been a massive undertaking and has taught me the importance of identifying myself in research, considering my subjectivity as a researcher in relation to my experiences in the social world and this topic specifically. What was most striking to me was the closeness of this work – its life in my body, its intersubjective quality as I speak and engage in the world with other people about it, engaging with the text and pondering what the findings meant for me as a Mad person and a student, and for psychology as a discipline. Any separation of me from this work would be entirely artificial and remove the context from which it/I exist(s) as a social, cultural, and historical entity.

As a Mad-identified person, and as a person whose madness is directly influenced by mental health ideology – some of which is directly produced and regulated in the department I have been a part of – the topic of psychology ethics is of high interest to me. Sitting on both sides of the chair at different points in my training, I observed and experienced disparities in who

had the authoritative power to speak about mental health, how it could or could not be taken up subjectively, and who held the rights to knowledge about mental health/expertise. My interdisciplinary experiences in women's studies, social work, disability studies, and criminology exposed me to different ontological and epistemological accounts of mental health, as well as different bodies of literature describing the harms of psy-disciplines. I saw that the way psychology promotes mental health is not always helpful, safe, or effective, and we rarely if ever hear about these critiques in mainstream training and practice. Further exploring these issues in research and taking a critical stance in the discipline, I am explicitly taking an ethical-political position within psychology and the topic of mental health.

My analysis has given me ideas, and the hope that I can open up the space of what is "allowable" in knowledge production and practices of the discipline. In my own acts of resistance to dominant practices within the psychology department, I have left the clinical psychology stream, expanded my research experiences to pursue an interdisciplinary education, joined Mad student-led groups, and have openly identified as Mad and spoken from this perspective in pedagogical spaces such as the classroom, in training sites, and at academic conferences.

Ethics embodied: An intercorporeal engagement. My experience with this topic has phenomenologically led me to incorporate intercorporeality as part of a psychology ethic. Intercorporeality is a concept that incorporates an embodied perspective in social interactions, or body politic. It coalesces with the idea that "the experience of being embodied is never a private affair, but is always mediated by our continual interactions with other human and nonhuman bodies" (Weiss, 1999, p. 5). Intercorporeality acknowledges our physicality in relation to other people as tangible and embodied (Csordas, 2008). "See," "touch," "hear," and "feel" are not

commonly associated with our local understanding of ethics in psychology. Yet I believe that ethics is necessarily intersubjective because ethics concerns arise out of the inescapable, multiple ways psychologists interact with others – each other, students, clients, research participants. I believe intercorporeality is a relevant concept for ethics because ethics is produced within discursive relations at play in our social world; our ethical “selves” are produced in relationships with others, within our communities, and our broader society. Additionally, our social locations play a role in how we see and act toward other people and how other people see and act toward us, speaking to power relations, privileges, and oppressions that infuse our everyday experiences as ethical-professionals.

Engaging this work has expanded the language and conceptualizations around the sense of performativity I had when this happened. Below, Ian Parker reflects on his role in psychology as part of an identity performance. He states (Papadopoulos & Schraube, 2004, p. 32):

Really, I am not a psychologist at all, rather someone who performs this identity at various times, and not many of those, to bring about certain effects. To speak in and against the discipline of psychology it is useful, I think, to claim a right to participate in the discourse of psychology, and for those purposes I am willing to adopt the identity of a psychologist. How one adopts and performs an identity is, of course, a contextually-situated and precarious matter (even down to the level of one's bodily implication in the range of identity practices that are required by an audience and an institution), and the question as to how one does that is a question that disturbs some of the core assumptions of psychology.

What resonates with me is Parker's acknowledgment that there is no one true or real identity a psychologist must embody. I took the opportunity in a critical psychology course to explore embodiment and performativity of professionalism in psychology by identifying aspects of adornment, gender performance within a professional role (“always dress professionally,” “don't wear open-toed shoes,” “don't show your cleavage,” “make sure your skirts reach below the knee,” “don't wear piercings,” “don't show any tattoos”) which, for me, represent issues of

gender, sexuality, and class. I more consciously engage aspects of professional subjectivity, dressing differently per setting and purpose; exercising choice in the piercings I would wear and when to show my tattoo. No longer something I would simply “do”, the role of a professional of psychology is something I would explore for more nuanced choice and resistance. Sometimes it is safe to make different choices, sometimes it is not.

Methodological musings part I: Finding this project. This dissertation underwent many iterations as I settled within the theoretical and methodological scopes of its design. It has taken much time, energy, and learning for this document to evolve to its current production. Before settling into a full analysis of the CPA Code, I traversed a range of scholarly material pertinent to the topic of psychology ethics and discursive productions of ethics: critical bioethics literature, archival literature at the CPA Archives at the National Library of Canada, documents related to the American Psychological Association’s involvement in torture, feminist and relational ethics in mental health and caring professions. I engaged in a process of continuous reading and writing, reviewing primary and secondary documents, making notes, writing notes, incorporating notes into chapters, returning to the documents of study, occasionally turning down side roads and hitting bumps, stalling the analysis. This process was not linear but a kind of internal logic emerged in the linkages I made between the discourses and texts I analyzed and theoretically framed.

As I moved closer and closer to the analysis of the CPA Code, I experienced the growth of a very systematic methodological engagement. This evolved from readings of the CPA Code to identification of discursive objects to how they converged to form a discourse; from the recursive act of circling back to the materials of analysis to collect, group, compare/contrast discourses, adding and removing objects to understand the rules guiding the convergence of each

discourse; noting their intertextual overlap to understand how they come together, form, legitimize, and prop up other discourses; cultivating patience while returning to the texts until the review yielded no further analyses and I recognized a “saturation” point with the discourses; reviewing, revising, shifting the content of the discourses while grappling with their intertextual location until I reached a place of no further movement, a place of stability in the analysis – a place of discursive formation.

Methodological musings part II: Unlearning positivism. As I discussed earlier in this section, a remarkable struggle I experienced in learning to apply a Foucauldian-informed methodology was bringing myself into my research, accepting my subjective presence, claiming a voice in writing that is distinctly and deliberately mine in spite of the vehement protests of my positivist self. This dissertation has been a learning experience in my relationship with research, challenging my positivist training in scientific-objective distancing from research and bringing myself closer to the work. I visualized this as not only moving closer to the work but bringing myself down from above the material of study. It continues to be a fearful experience at times, given the uncertainty of the practice in a space that is made uncertain by the effects of reflexivity. This experience for me is captured by this snippet by Salladay (1986, (pp. 13-14; emphasis in original) on mental health ethics:

Little bursts of real person keep popping out from behind the professional role: personality, idiosyncrasies, likes and dislikes, and many other sorts of surprises...Ethically speaking, it is impossible to separate real person from professional role...*You* keep interrupting, *you* keep breaking in upon professional codes of ethics, patients' bill of rights, or hospital policy manuals. It is *you* who live ethical decisions.

In the CPA Code of Ethics, the practice of self-reflection requires oneself to identify facets of one's life that affect decision making – social location, ability, biases, values, and so on – yet this approach seeks to transform this information into “objective” material. Working to move beyond

an objective endpoint, I gave myself permission to write myself into my work, grappling with fear of discovery for stepping outside of my scientist and ethical-professional roles.

As time progressed and I revisited sections and chapters of writing, it was obvious: *I was not there*. I would catch myself actively writing myself out, as though I could be separated from the work I was writing about. In other places, I was there, *I* just was not. Learning to own the project as mine in the document was as iterative a process as the analysis itself: First I learned to speak about it. Then I learned to write myself in it. Those former two sentences summed a process of years of reading, note-taking, asking, speaking.

The writing itself proved to be a much more challenging endeavour. Writing myself into the work, “on the record,” was initially excruciating. Here *I* was, all over the pages, making a mess of what I was inclined to think of as a clean, tidy piece of work, one that I should be at a safe distance from. This was not a blog post, a letter to a friend, a journal – this was my dissertation for a PhD psychology program that taught me to write myself out. The anxiety, sitting like a rock in my stomach, in the sweat of my hands, in the palpitations of my heart as I made my presence known in observation, analysis, admission – the juncture of my body and knowledge production. Confronting my presence served to demonstrate the powerful set of discourses within which I was entangled, operating within, *and which I was operating*: thinking, acting, writing, speaking. Embodying. Permeating and producing, I am embedded within and perpetuating discourse, representing “node within a network” (Foucault, 1972). This is a material effect of disentanglement in dominant and subjugated discourses, or what Foucault would term resistance. My attempt to redirect a flow of power, disengaging it from taken-for-granted thought and practices and engaging it in a knowledge area that is heavily critiqued and dismissed. What

makes this work so risky is that it deliberately steps outside of what positivist or mainstream psychology considers valid science.

My writing style and process are other places where I noticed my positivist training and practices. Conceptualizing my research as linear and progressive is very easy to do but does not make sense within a poststructuralist or Foucauldian framework. The first draft of my literature review represented a contemporary positivist empiricist-style review that evaluated the findings of literature at face value and lacked a broader, contextual grounding, for example. In outlining a terrain of literature pertaining to the CPA Code, I fought to resist bringing the literature together to form cohesiveness and connectedness and instead worked to represent it with fragments and disruptions. Moreover, since nothing is ever considered “final” in this research approach, I was concerned that I rushed the analytic process. How could I be certain I had reached a saturation point in the analysis? Moreover, in no other major project in my post-secondary career had I required so many drafts of the work. I came to understand this as part of the process of qualitative work, and as someone very new to this orientation of inquiry. Having multiple drafts reviewed and discussed by Dr. Day and Dr. Poole was helpful to pause or disregard offshoots from the main topic and refocus on the analysis of the CPA Code itself.

Methodological musings part III: Packaging a methodology, unpacking my privilege. The deliberate regard for my self in the work, first explicitly acknowledged through writing and later in reflexively identifying my own emotion and embodiment, has led me to unpacking my privilege as a White graduate student in the academy. Considering the effects of this power and privilege, I subjectively lost privilege by leaving clinical psychology (a status once described by a peer as “the top of the totem pole of psychology”), there were social gains

(e.g., a private high-five from one faculty member in passing), and I was able to garner departmental support for carrying out this research.

Identifying myself as a White woman means identifying myself as part of an elite system within the academy and defining my colonized and colonizing practices in the work I do – including this dissertation. A painful and powerful act is thus beginning to unpack the ways I (re)produce colonizing practices. In this work, I am learning the ways that this work represents colonization: the “psychologization” in the specialized language used to conceptualize, analyze, and discuss the work; the ways in which it is a product of ordered social science, produced by scholars within the academy; the ways it conforms to bureaucratic guidelines and standards of the psychology department, the Yeates School of Graduate Studies, the American Psychological Association formatting practices, and, broadly, the standards of the discipline of psychology. Moreover, as a White woman – a woman within a mental health or caring profession – systems and institutions are in my favour to carry out this work. In spite of poststructuralist resistance to essentialist practices, the work is identifiable and has been “accepted” or in some form practiced by elite scholars before me through social constructionist theory, Foucauldian theory, and Foucauldian discourse analysis. Although within the psychology department it may be considered a transgressive piece of work, and although it was in part created with a Mad perspective, it remains a highly colonized product. So much of positivist practice is taking piece by piece the work of others in order to create the next step of discovery – or what your research will uncover through scientific research. These, in the most innocent and straightforward act, can be considered colonizing practices when one considers what materials are considered and included, who produces the knowledge, what is considered scientific, and how subject matter of study may be spoken about. As of the latest draft of this work, I locate this as a theoretical-

political piece of research that hopes to disrupt dominant ethical practices in psychology while maintaining more radical anti-oppressive, decolonizing practices that give me hope.

As a final reflexive note, the incorporation of postcolonialist theory into the critical psychology section of the Theoretical Orientation did not occur until the end of my analysis. I do not think I fully understood the extent of the CPA Code's colonizing quality until I was able to conceptualize the results more fully and deeply. After meeting with Dr. Poole and discussing my ideas about it, I went back to build the Theoretical Orientation to more clearly elaborate critical psychology generally, as well as where this work lands in considering a postcolonialist lens, to make sense of the effects of the CPA Code on race that I find from analysis.

Chapter Summary

In this chapter, I have addressed how I would go about answering the research questions through analysis. In doing so, I began my explanation by broadly reviewing approaches to discourse analysis in psychology, then by identifying the Foucauldian-informed elements by drawing on the work of Foucault himself and two Foucauldian-informed psychologists (Hook, 2001, 2007; Parker, 2002). I identified the work as critical in its political stance and therefore concerned with the privileging and marginalizing effects of discourses in the CPA Code. I discussed my data collection procedure and my analytic procedure, and followed with points of consideration for quality assurance in data analysis. Here, I incorporated how I considered reliability and validity in my analysis, as well as the things I attempted to avoid through the analysis. Last, I presented my reflexive engagement with the topic and analysis, locating myself in the work, the way the project shaped my understanding of ethics, and methodological musings I encountered throughout and after the analytic process.

Findings

The findings in this chapter represent a deconstruction of the CPA Code of Ethics for Psychologists using a critically-focused, Foucauldian-informed discourse analytic methodology. To answer the four research questions, I have organized the findings into the corresponding four sections: (1) dominant discourses, operating to construct the CPA Code and supplementary guidelines; (2) appropriated discourses, subjugated by the dominant discourses; (3) discursive sites of production, acting to (re)produce the CPA Code power/knowledge structure of governance; and, (4) subject positions that construct performative roles within the CPA Code.

Dominant Discourses

This section is an overview of the dominant discourses yielded by my analysis of the CPA Code. Dominant discourses are the discourses that hold prominence in terms of space and power in the CPA Code, intertextually permeate the supplemental guidelines, and intertextually permeate one another. As I discuss in the Methodology chapter, dominant discourses present themselves as self-evident, are contingent upon meta-narratives espousing truth and progress, and reflect the interests of ideology. Notions of rationality, objectivity, and science are featured in these discursive constructions. Serving to replicate ideology in mainstream psychology, they additionally exert a powerful appropriating influence to discursively produce the appropriated discourses that I discuss in the following section. The dominant discourses I identified from analysis are: “science,” “objectivity,” “competence,” “expertise,” “legal,” “managerialism,” and “risk management.” I identify the constituents of each of these discourses and illustrate these discursive features using snippets of text from the CPA Code (2016b).

Science. Science appears as a key dominant discourse of CPA Code ethics as it is the mode by which legitimate psychological knowledge is produced and evaluated. In the CPA

Code, science discourse is constructed as foundational to all of the disciplinary practices of psychology. A definition of the discipline of psychology in the CPA Code enables this scientific focus: “The **“discipline of psychology”** refers to the scientific and applied methods and knowledge of psychology, and to the structures and procedures used by its members for conducting their work in relationship to society, members of the public, students or trainees, and each other” (CPA, 2016b, p. 8, bold in original). “Applied” psychology such as clinical work, and education and training in psychology, must incorporate scientific knowledge and practice as well. This discourse informs the “applied” or “clinical psychology” discourse whereby scientific research is used to generate “evidence-based practice,” “best practice,” “evidence-informed practice,” “evidence-based therapies,” and similar products of scientific knowledge production. Whether or not they engage in their own research, psychologists are expected to consume psychological knowledge and apply it to their area of practice. This is what upholds the gold standard of evidence-based and best practice in mainstream psychological practices.

The practice of scientific knowledge production in psychology is bound up in power relations with Canadian society, that is, in societal regard for science as representative of truth and discovery, and for psychology as a scientific discipline that is able to produce true knowledge. In the CPA Code, psychology’s relationship with the public, and the public’s regard for science as truthful and therefore trustworthy, important, and legitimate – a discursive strategy for psychology’s status as a scientific discipline – are buttressed by their framing with the public’s trust in the discipline of psychology (CPA, 2016b, p. 24):

The relationships formed by psychologists in the course of their work, regardless of the communication modality used, and regardless of whether they are with identifiable individuals or groups or with the public at large, embody explicit and implicit mutual expectations of integrity that are vital to the advancement of scientific knowledge and to the maintenance of public confidence in the discipline of psychology.

Based in its narrative of truth and discovery, science discourse enables psychology to enjoy a trustworthy status within the public as it is seen as logical, objective, value-free, natural, and expert-based. The public is positioned as dependent on the truth of science produced by mainstream psychology. Simultaneously, the public is represented as a surveilling body of psychology's scientific status – “confidence” must be maintained by the public for psychology to hold status as a discipline of scientific knowledge. Per scientific practice, the research practices of psychologists should be transparent and open to critique.

Psychological research practices are governed by the avoidance of risk and the maximization of benefit, making science discourse intertextual with risk management discourse. This intertextual relationship is significant such that risk management discourse supports the perception of psychological research as trustworthy because standardized evaluations of risk and benefit in research imply safety and value added in research practices. Institutional practices that regulate risk in scientific research, including research ethics boards, peer review processes, pilot studies, and so on, are assumed to identify and mitigate risk in the name of best interests and welfare of individuals participating in research, as well as the society in which the research is being conducted. In its discursive relations to the Canadian neoliberalist agenda of productivity, psychological knowledge produced by science discourse is seen to improve the functioning of individuals and address extant mental health-related problems of society. It seeks to optimize human performance, reduce costs to government systems, and enable normative and productive practices (Clarke, 2005; Fox et al., 2009; Prilleltensky, 1989; Sugarman, 2015). If arguments can be made about the beneficence of science practices to address issues of mental health, to reduce risky conditions, to reduce costs and increase efficiency, then psychologists are obliged to enable and engage its practice – as is society. Likewise, psychological research that is argued to

scientifically advance human functioning – in terms of cost, productivity, and normativity – while operating to protect the best interests of individuals and of society is deemed good, ethically sound research.

Within the CPA Code, scientific research is a privileged and protected practice. As long as research subscribes to the practices of science, scientific-research practices are to be enabled freely: “Freedom of enquiry, innovation, and debate (including scientific and academic freedom) is a foundation of psychological education, science, and practice. In the context of society, the above expectations imply that psychologists will exercise this freedom through the use of activities and methods that are consistent with ethical requirements” (CPA, 2016b, p. 30). Psychologists are likewise encouraged to engage in scientific research: “Contribute to the discipline of psychology and to society’s understanding of itself and human beings generally, through free enquiry, innovation, and debate, and through the acquisition, transmission and expression of knowledge and ideas, unless such activities conflict with ethical requirements” (CPA, 2016b, p. 31), and to allow the scientific research of others: “Not interfere with, or condone interference with, free enquiry, innovation and debate, and the acquisition, transmission, and expression of knowledge and ideas, that do not conflict with ethical requirements” (CPA, 2016b, p. 31). Since “ethical requirements” in dominant science research practices often do not include social, cultural, and historical contextualization, nor are hermeneutical practices commonly followed, mainstream psychology does not have to concern itself ethically with the broader social impacts of research, specifically on marginalized groups of people and communities and other social locations where the reproduction of quotidian values and interests produces harm.

Psychological knowledge is another discursive feature of science discourse in the CPA Code. Psychological knowledge underlies all of the foundations of psychology practice; for the CPA, the three organizing practices of the discipline are research, clinical practice, and education. Psychological knowledge, always already produced within the conditions of science practices, is produced within a linear, progressive rhetoric: “Two of the legitimate expectations of psychology as a science and a profession are that it will increase knowledge and that it will conduct its affairs in such ways that it will promote the welfare of all human beings” (CPA, 2016b, p. 30). Similar to research practices, psychologists must enable and promote psychological knowledge: “Encourage and not interfere with the free and open exchange of psychological knowledge and theory between themselves, their students, colleagues, team members and other collaborators, and the public” (CPA, 2016b, p. 27).

Psychological research appeals to narratives of natural advancement and progress. As the discipline’s knowledge is continuously accruing through advancement and progress, scientific psychological knowledge must be taken up and reproduced in psychological practice. Disciplinary practitioners are responsible for staying up-to-date in their scientific knowledge, and to integrate new scientific knowledge into their work: “Keep informed of progress in their area(s) of psychological activity, take this progress into account in their work, and try to make their own contributions to this process” (CPA, 2016b, p. 31). Those engaged in research are ethically obliged to monitor their biases by considering a scope of different practices: “Acknowledge the limitations, and not suppress disconfirming evidence, of their own and their colleagues’ methods, findings, interventions, and views, and acknowledge alternative hypotheses and explanations” (CPA, 2016b, p. 26). Acknowledging limitations and disconfirming evidence are terms related to a positivist empiricist science orientation to research. In being intertextual with risk management,

science practices are constructed as a continuous engagement of the discovery of truth, and it is the responsibility of the psychologist to be an ethical practitioner by staying current with advancements of psychological knowledge in order to mitigate risks of outdated practices and unknown practices, and to maximize benefits gleaned from discoveries. This reinforces the consumption of particular knowledges aligned with science, while other forms of knowledge that fall outside of science are excluded from mainstream practice.

Risk management. Risk management discourse is concerned with the “ordering [of] reality, of rendering it into a calculable form” (Dean, 1999, p. 131). It utilizes forms of true knowledge that discursively produce risk as a thinkable, predictable, calculable form of statistical techniques, social technologies, and rationalities to produce citizenship governance through various technologies that fashion human conduct. Risk management incorporates the objects of beneficence and benefit, to address or offset risks, to rationalize certain actions, and to govern standards of practice and their effects on recipients of psychological practices. The CPA Code draws on risk management discourse in ethical decision-making, in managing disciplinary practices of research and clinical work, and in preventing future ethical issues through foresight and through learning from past problems of ethics. As an extension of risk management, the discursive object of beneficence discursively produces support for risk management discourse and to justify the use of scientific practices as safe, trustworthy, and essential to human functioning.

In the CPA Code, risk management discourses operate with discourses of science and managerialism to discursively capture, assess, and manage risk in everyday psychological practice. Weighing benefits and harms is a key practice of the ethical decision-making process outlined in the CPA Code. While psychologists should always be striving to achieve maximal

benefits in their work with others, they also must be minimizing harm. They also are responsible for addressing any harms that do occur, and for preventing their reoccurrence by proposing alternate actions or solutions. Risk management operates on principles of probability, and in the case of the CPA Code, it means that psychologists must “Not carry out any scientific or professional activity unless the probable benefit is proportionately greater than the risk involved” (CPA, 2016b, p. 19). Risk discourse in the CPA Code is constituted by the anticipation of harm, including physical and psychological dimensions of potential to harm or harm. The calculation and outcome-based emphasis of risk management discourse also implicates intertextuality with managerialism discourse. Discourses of risk are embedded in the everyday disciplinary practices of psychology, playing a key role in standardizing disciplinary practices and procedures (CPA, 2016b):

Psychologists define harm and benefit in terms of both physical and psychological dimensions. They are concerned about such factors as: social, family, and community relationships; personal and cultural identity; feelings of self-worth, fear, humiliation, interpersonal trust, and cynicism; self-knowledge and general knowledge; and such factors as physical safety, comfort, pain, and injury. They are concerned about immediate, short-term, and long-term effects. (p. 17)

[I]n all such situations, the psychologist is responsible for making an honest appraisal of the benefits and risks involved in the context of the specific situation, including but not limited to: determining the feasibility of alternatives in light of those risks and benefits; deciding whether to enter into or continue the relationship; establishing relationship boundaries appropriate to the work being done (e.g., availability, in-person or social-media personal disclosure, social contact), and managing the relationship (e.g., by seeking advice or establishing other safeguards) to ensure that the dignity, well-being and best interest of the member(s) of the public are protected. (p. 25)

The CPA Code itself, including the 10-step ethical decision-making process, can be considered a technology of risk management in its risk-focused structure, downloaded onto psychologists to manage their risky practices. The 10-step decision-making process that psychologists are

obligated to use when encountering a dilemma or an issue of challenging resolve, psychologists must integrate an assessment of risk and harm into their analysis (CPA, 2016b, p. 19):

Assess the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved in their activities adequately enough to ensure that they will be able to discern what will benefit and not harm them, using assessment methods that are appropriate to the particular cultural and social contexts of the individuals and groups involved.

Research practices in mainstream psychology rely on institutional ethics boards, peer review processes, supervision, and education and training as oversight for risky practices, and are discursively produced with power to evaluate research practices within such terms (CPA, 2016b, p. 19):

Seek independent and adequate ethical review(s), by individuals and groups with relevant expertise (e.g., other researchers in the area; research ethics boards or equivalent; relevant representatives of the population being studied) of the ethical protections and the balance of risks and benefits of all research and new interventions that involve procedures of unknown consequences, or where pain, discomfort, or harm are possible, before making a decision to proceed.

Thus, risk must be named and described and remedied by those with expertise or relevance in scientific practices.

Risk management discourse becomes intertextual with competence discourse as related to particular situations of risk with groups of people, such as vulnerable individuals: “Be sufficiently sensitive to and knowledgeable about individual and group characteristics, culture, and vulnerabilities to discern what will benefit and not harm the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved in their activities” (CPA, 2016b, p. 19). Risk management reinforces competence and science discourses because of fears of harm to those in contact with psychology. Not empty of “risk,” mechanisms of assessment, definition, measurement, and feedback are put in place to capture and thwart risk in science practices. These are done by institutional bureaucracies such as research ethics boards and other

research review practices by those with expertise or relevance. For example, competence, as a discourse of science and of managerialism, governs psychologists' education, training, and licensing through need for qualification and legitimacy in areas of practice.

Since risk management discourse is interdiscursively produced with science discourse, decisions about risk will always already occur within a science framework. Information about what constitutes risk in the first place will be discursively enabled in scientific terms. This means that arguments about what constitutes risk can be made in relation to scientific activity, as well as what constitutes benefit for any given individual or society at large. In the CPA Code, what is defined as being of benefit in practice is based in scientific reason and evidence, what is best practice or best supported by scientific research, and/or what is in line with expert consultation. It entails education and debrief to participants and clients of psychological practices. In terms of risk/benefit, these psychologists are to submit their research for peer review and approval to research ethics boards, peers, and so on. To prevent harm in areas of new research, the psychologist is encouraged to carry out pilot studies “of all new procedures and techniques before considering their use on a broader scale” (CPA, 2016b, p. 19), and is unable to “carry out any scientific or professional activity unless the probable benefit is proportionally greater than the risk involved” (CPA, 2016b, p. 20). Thus, benefit is connected to the practices of risk management as it props up the practices of science as a rationale to mitigate risk, maintain trustworthy and safe practice, and to propagate research and practice in empirical, evidence-based practices.

Objectivity. In the CPA Code, objectivity is discursively produced as the most ethical form of knowledge to be taken up and reproduced by the discipline of psychology and the ethical-professional psychologist. Objectivity represents a quality of information that is logical,

cognitive- and fact-based, and labelled value-neutral in application. It is discursively produced in the CPA Code as a condition of legitimacy for knowledge. In its most legitimate form, objective knowledge is produced by scientific psychological research. This form of knowledge is able to exist independent of other (subjugated) forms of knowledge garnered through, for example, personal experience, emotion, the body, the spirit, or instinct. Intertextual with science discourse, it thus stands as a form of information that psychologists must use as well as produce in their professional practices. In professional relations and communications with self and others, objectivity is intertextual with the appropriated discourse self-reflection and the material practice of ethical decision-making.

The presentation of information by psychologists must always be done in an objective fashion, ensuring that aspects of the self, other forms of knowledge, information outside of science, personal opinion, and so on are removed: “Take care to communicate as completely and objectively as possible, and to clearly differentiate facts, opinions, theories, hypotheses, and ideas, when communicating knowledge, findings, and views” (CPA, 2016b, p. 26), not only in research contexts but also other disciplinary activities such as teaching: “Present instructional information accurately, avoiding undue bias in the selection and presentation of information, and publicly acknowledge any personal values or bias that influence the selection and presentation of information” (CPA, 2016b, p. 26). Objectivity is upheld by its view of legitimacy in public perception; threats to objective information, such as information communicated incorrectly in public communications, must be corrected as soon as possible. For example, a researcher must present knowledge in whole rather than part, based on selection biases, and is to acknowledge any influential forces on the presentation of materials publicly, such as “personal values” and “biases” (CPA, 2016b, p. 26). This discursive production suggests that objective information

exists independent of other forms of information, can be isolated, and is the most important form of information in every professional practice context. It also assumes that other forms of knowledge are unimportant, stand as less legitimate or illegitimate, and should not be considered part of an ethical-professional role (unless the information can be made objective). This further indicates that ways of communicating outside of this discursive sphere may be seen as not legitimate, unprofessional, and thus unethical or unable to be acknowledged within ethics discourse.

Intertextual with risk management discourse, objective information is regarded as the most valid form of knowledge psychologists must seek, consume, and produce, as objective knowledge is the crucial informant to the assessment of risk and benefit in ethical issues. For instance, psychologists are instructed to: “Act or stop or offset the consequences of seriously harmful activities being carried out by another psychologist or member of another discipline, when there is objective information about the activities and the harm” (CPA, 2016b, p. 22). Objective information eschews personal dimensions of human subjectivities such as emotion, embodiment, identity, culture, values, and other forms of knowing. Subjective phenomenology thus represents a threat to objectivity that must be managed through technologies that transform subjective matter into objective information, a discursive finding I discuss later in this chapter. The loss of objectivity is associated with negative consequences, such as the possibility of exploitation or other harms.

Competence. Intertextual with science and risk management discourses, competence discourse is positioned as integral to the prevention of harm and the promotion of benefit in psychological research and practice. It is connected to Responsible Caring, the second principle of the CPA Code (2016b), and represents a particular form of standardized practitioner

knowledge that is scientific, empirically-based and best practice. It forms the basis of what practitioners must perform to achieve an area of specialty and/or expertise for psychologists to be considered scientifically and professionally legitimate, and to practice independently of expert/supervisory oversight. The discourse of competence is reinforced by various institutions of psychology such as formal training and education sites, licensure and registration bodies, professional associations, funding bodies, institutional ethics boards, and other institutions where psychology operates. The standardization of this form of knowledge has led to its status as *commonplace* in the discipline such that we collectively come to widely accept this knowledge as monolithically superior for ethical practice. Incompetence risks harm to others and may result in punitive consequences: remedial education and credentialing, suspension of practice, and removal of licensure.

Competence discursively produces a professional scope of practice or specialty, delimiting the bounds in which psychologists may be considered ethically and professionally able to practice, and as authorities in the subject matter. That is, competence is related to content knowledge and activities which one can claim as “knowing” through experiences of training and education (CPA, 2016b, p. 17):

[P]sychologists recognize the need for competence and self-knowledge. They consider incompetent action to be unethical in itself, as it is unlikely to be of benefit and likely to be harmful. They engage only in those activities in which they have competence or for which they are receiving supervision, and they perform their activities as competently as possible. They acquire, contribute to, and use the existing knowledge most relevant to the well-being and best interests of those concerned.

In defining an area as practice as early as possible, students entering the discipline for training are encouraged to focus their training on particular areas of practice to a point whereby regimented supervision is no longer needed (“Offer or carry out (without supervision) only those activities for which they have established their competence to carry them out to the benefit of

others” [CPA, 2016b, p. 17]). For example, this role might be considered that of a research scientist, principally investigating the effects of cognitive aging in older-aged adults compared to younger adults, performing computer-based response experiments in a laboratory on a university campus. For clinical psychologists, this might be specialization in the assessment and treatment of child and adolescent obsessive-compulsive disorder in an institution. The prominence of science discourses as well as particular statements suggests that the CPA Code associates competence with evidence-based practices, and areas whereby expertise may be developed and claimed.

The CPA Code regards the professional practice outside of one’s competence as unethical. These may be activities that have not been supervised, that have been informed by little or no training, or that fall outside of a scope of practice. Incompetence is regarded as a serious risk of harm to the public body, therefore the CPA Code strongly discourages psychologists from engaging in practices that they do not have formal training in, supervision for, and so on. Since competence is constructed around knowledge seen to benefit those in contact with psychology practices, operation outside of these discourses signifies risky, unpredictable practice effects that are assumed to be harmful. To be a proper ethical-professional, psychologists must “Not carry out any scientific or professional activity unless the probable benefit is proportionately greater than the risk involved” (CPA, 2016b, p. 19). If psychologists note that their colleagues are engaging in professional activities outside of their competence, they are to intervene (CPA, 2016b, p. 32):

Uphold the discipline’s responsibility to society by bringing incompetent or unethical behaviour, including misinterpretations or misuses of psychological knowledge and techniques, to the attention of appropriate authorities, committees, or regulatory bodies, in a manner consistent with the ethical principles of this *Code*, if informal resolution or correction of the situation is not appropriate or possible.

The CPA Code discursively produces particular situations that may lead to incompetent behaviour, in clinical or consulting activity. Here, activities that could take a practitioner outside the bounds of competence are seen as a serious problem, requiring the psychologist to seek oversight to mitigate any risks of malpractice: “Take immediate steps to obtain consultation or supervision, or to refer a primary client to a colleague or other appropriate professional, whichever is more likely to result in providing the primary client with competent services, if it becomes apparent that a primary client’s issues or problems are beyond their competence” (CPA, 2016b, p. 19).

Relative to mainstream psychology, critical, feminist, and interdisciplinary practices fall on the margins of psychology, are not a part of standard training curriculums, and take up marginalized space in education and training programs. Likewise, subjugated knowledges only become part of dominant competent practices when they are appropriated into evidence-based practice. A lack of familiarity with critical practices may act as a deterrent or reason to avoid, discredit, or refuse to adopt critical disciplinary practices. It is therefore possible that psychologists practicing within mainstream disciplinary bounds may opt not to participate in “critical inquiry studies” and other non-conventional practices, and particularly so when such practices are encouraged but not enforced or made obligatory. A lack of presence of and exposure to critical practices means that these practices are less reinforced, less common, outside of standardized education and training curricula, or are recognized as problematic or otherwise inferior to the dominant practices of science discourse.

Expertise. The discourse of expertise operates in all areas of mainstream psychology research and practice. Expertise represents the esteemed professional status of authority in knowledge production, consumption, and practice in psychology. Signalled by a psychologist’s

attainment of a level of knowledge and practice – research, teaching, administration, clinical work, and so on – from some amount of time within a field or through engagement with a specialized kind of knowledge, expertise represents a professional who no longer requires supervision and oversight for all activities. A powerful position of authority in knowledge production, those able to speak and act from a position of expertise are able to inform, validate, debate, and correct the work of others through the provision of supervision, consultation, and feedback.

Expertise informs the production of evidence-based, best practice guidelines; competency standards; commonplace research methods and practices, and other standards of practice. In the context of ethical-professional performance, expertise goes beyond “minimal behavioural expectations” to carrying out governing activities. The practices of engagement with expertise include submission of one’s research work and other professional practices for the review of those with “appropriate” or “relevant” knowledge, objectively distanced from the psychologists (CPA, 2016b, p. 19):

Seek independent and adequate ethical review(s), by individuals and groups with relevant expertise (e.g., other researchers in the area; research ethics boards or equivalent; relevant representatives of the population being studied) of the ethical protections and the balance of risks and benefits of all research and new interventions that involve procedures of unknown consequence, or where pain, discomfort, or harm are possible, before making a decision to proceed.

Given the primacy of objective scientific knowledge, those who approach expertise are viewed with greater relevance and appropriateness in the CPA Code. For instance, although psychologists are to decide whether or not they involve particular people affected by the situation in the deliberation and resolve process of ethical issues, the psychologist is accountable to include “colleagues or relevant others” (CPA, 2016b, p. 3). This is a particular kind of knowledge that serves to reinforce CPA Code discourses to recognize appropriate ethical

practices on the part of the psychologist. Expertise upholds a hierarchy of knowingness as discursively produced within the CPA Code. With CPA located at the top, as an entity able to identify, define, and distribute knowledge and govern appropriate conduct, individuals affiliated with psychology – whether the CPA or psychologists – are set apart from those not in the discipline. As ethical- professionals, for example, experts are able to appreciate and respect those views divergent from their own (CPA, 2016b, pp. 11-12).

Legal. Legal discourse in the CPA Code is constitutive of objects such as consent and participation, privacy and the limits of confidentiality, as well as the intersection of ethics and law. Legal discourse thus contributes to the parameters within which psychologists can present information to clients and participants of research, how clients and research participants consent to psychological practices. In some situations requiring ethical decision-making and resolution, legal discourse may conflict with other ethical practices, and the CPA Code encourages resolutions that coincide with the law. Legal discourse is intertextual with managerialism discourse in its processes of transparency and accountability, and also with risk management discourse in the processes of review of risk and benefit practices with people in contact with the discipline. Additionally, morality in the CPA Code is interdiscursive with human rights discourse.

Psychologists engaging in psychological research are obligated to provide research participants with informed consent, and to avoid coercive solicitation. This means that psychologists must “Obtain informed consent for all research activities that involve obtrusive operation or measures, invasion of privacy, risk of harm, or attempt to change the behaviour of research participants” (CPA, 2016b, p. 13). They are not able to proceed with research practices if consent is not provided by the prospective research participant. Consent for people to

participate in research or clinical practice is framed to occur within conditions of freedom and autonomy, and without pressure or consequence. That is, clients in contact with psychologists for assessment and/or therapeutic contact, preventative intervention, or other forms of clinical psychology activities, are entitled to understand the terms of the relationship, what they can reasonably expect to happen, the benefits and harms, and so on that they might encounter in their work with psychologists.

Consent is constituted by a standardized process of transparent accountability, thereby signifying its interdiscursivity with managerialism discourse. The ethical practice of providing consent for psychologists entails several steps, defined and explained by the psychologist in psychologized terms (CPA, 2016b, p. 13):

Provide, in obtaining informed consent, as much information as reasonable or prudent individual and groups (e.g., couples, families, organizations, communities, peoples) would want to know before making a decision or consenting to the activity. Typically, and as appropriate to the situation and context, this would include: purpose and nature of the activity; mutual responsibilities; whether a team or other collaborators are involved; privacy and confidentiality limitations, protections, and risks; likely risks and benefits of the activity, including any particular risks or benefits of the methods or communication modalities used; alternatives available; likely consequences of non-action; the option to refuse or withdraw at any time, without prejudice; over what period of time the consent applies; and how to rescind consent if desired.

Relay the information given in obtaining informed consent in language that the individuals and groups involved understand (including providing translation into another language, if necessary), and take whatever reasonable steps are needed to ensure that the information is, in fact, understood.

Following managerialism practices, an essentialized part of consent involves using consent forms: “If signed consent forms are required by law or desired by the psychologist, the individuals or groups giving consent, or the organization for whom the psychologist works, establish and use signed consent forms that specify the dimensions of informed consent or that

acknowledge that such dimensions have been explained and are understood” (CPA, 2016b, p.

13). Participation of those receiving services is encouraged (CPA, 2016b, p. 13):

Seek as full and active participation as possible from individuals and groups (e.g., couples, families, organizations, communities, peoples) in decisions that affect them, respecting and integrating as much as possible their opinions and wishes. This would include respect for written or clearly expressed unwritten advance directives. Also, when working in an organizational or community context, it would include seeking participation of relevant individuals and subgroups that may not be represented by or may not have a role in the formal leadership.

Likewise, psychologists must follow a similar process with research participants so they may understand the terms of their involvement in a research study. This discussion is to occur directly with the clinical or research participant, or with the individual who legally represents the participant (CPA, 2016b, pp. 14-15):

Carry out informed consent processes with those persons who are legally responsible or appointed to give informed consent on behalf of persons not competent to consent on their own behalf, seeking to ensure respect for any previously expressed preferences of individuals not competent to consent, and clarifying protections and limitations regarding the privacy and confidentiality of such individuals.

In terms of consent and participation, psychologists must “Take all reasonable steps to ensure that consent is not given under conditions of coercion, undue pressure, or undue reward” (CPA, 2016b, p. 14), and if for some reason service is delivered within a context of need or duress, “Take all reasonable steps to confirm or re-establish freedom of consent” (CPA, 2016b, p. 14).

Coercion becomes possible in dual or multiple relationships psychologists have with others, so they must (CPA, 2016b, p. 15):

Be particularly cautious in establishing the freedom of consent of any prospective research participant who is in a dependent relationship to the psychologist (e.g., student, trainee, employee). This may include, but is not limited to, offering that person an alternative activity to fulfill their educational or employment goals, or offering a range of research studies or experience opportunities from which the person can select, none of which is so onerous as to be coercive.

Psychologists must follow laws that respect the privacy and confidentiality of people they encounter in their professional activities. This includes client and research participant personal health information, data collected in research practices, practices of collecting and storing data, and so on. This also includes sharing confidential information only as necessary, controlling personal identification, and safeguarding around accidental disclosure of information (CPA, 2016b):

Take all reasonable steps to ensure that records over which they have control remain personally identifiable only as long as necessary in the best interests of those to whom they refer and/or to the research project for which they were collected, or as required or justified by law (e.g., the possible need to defend oneself against future allegations), and render anonymous or destroy any records under their control that no longer need to be personally identifiable. (p. 15)

Be careful not to relay incidental information about colleagues, team members, other collaborators, the primary clients or contract examinees of others, team members or other collaborators, research participants, employees, supervisees, students, or trainees gained in the process of their activities as psychologists, that the psychologist has reason to believe is considered confidential by those individuals or groups, except as required or justified by law. (p. 16)

Share confidential information with others only to the extent reasonably needed for the purpose of sharing, and only with the informed consent of those involved, or in a manner that the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved cannot be identified, except as required or justified by law, or in circumstances of possible imminent serious bodily harm or death. (p. 16)

Practices of privacy and confidentiality have become points of ethical issues by institutional research boards and others overseeing practices of research. These processes influence the ways in which data may be thought about, measured, and collected, and the ways that research can be performed. Similarly, in clinical practice, this discourse represents the ways in which clients are thought about, and the ways they may be recorded in their relevancy.

The limits of confidentiality legally require psychologists to disclose information in particular contexts, specifically in situations of serious harm to themselves or someone else. In

the event a psychologist learns that someone they are working with intends to harm themselves or someone else, it becomes the legal responsibility of the psychologist to inform others or an authoritative body to prevent or offset the harm (CPA, 2016b, p. 22):

Do everything reasonably possible to stop or offset the consequences of actions by others when these actions are likely to cause imminent serious bodily harm or death to themselves or others. This may include reporting to appropriate authorities (e.g., the police), an intended victim, or a family member or other support person who can intervene, and would be done even when a confidential relationship is involved.

These laws reflect the legal statues of duty to warn and duty to report – situations whereby “there is a clear and imminent danger of bodily harm to someone” (CPA, 2016b, p. 2).

Ethically, psychologists are obliged to follow the laws and regulations of the locale in which they work, “especially those that are related to their activities as psychologists (e.g., mandatory reporting, research regulations, jurisdictional licensing or certification requirements), and abide by them” (CPA, 2016b, p. 32). In situations where legal discourse is recognized to cause an ethical issue, psychologists are obliged to act when the laws or regulations of a social structure “seriously ignore or contradict any of the principles of th[e] *Code*” (CPA, 2016b, p. 33, italics in original).

It is possible for CPA Code ethics and laws conflict in practice situations. In such situations, psychologists are obligated to consult in such matters with appropriate colleagues: “Consult with colleagues or appropriate others, including advisory groups, if faced with an apparent conflict between abiding by a law or regulation and following an ethical principle, unless in an emergency, and seek consensus as to the most ethical course of action and the most responsible, knowledgeable, effective, and respectful way to carry it out” (CPA, 2016b, p. 32). Moreover, if faced with legal consequences for upholding the ethical principles, psychologists ultimately must act outside of the CPA Code and from their personal conscience: “If those laws

or regulations seriously conflict with the ethical principles contained herein, psychologists would do whatever they could to uphold the ethical principles. If upholding the ethical principles could result in serious personal consequences (e.g., jail, physical harm), decision for final action would be considered a matter of personal conscience” (CPA, 2016b, p. 32). Thus, ethical practices of psychology must resemble those of the CPA Code, or a similar reasonable process of scrutiny, as decisions made outside of a rational, logical, risk-based process may be taken up with skepticism, untrustworthiness, and (ultimately) acting unethically.

Managerialism. Managerialism discourse concerns “audit culture” or the rules of standardization, procedure, employee performance, output, and productivity in the workplace (Nuttgens, 1998; Prilleltensky et al., 2002; Rossiter et al., 1996; Sugarman, 2015). Traceable to practices of economics, it represents the objectively-articulated, outcome-based “checks and balances” of everyday professional performance practices. Constituents of this discourse include performance tracking and monitoring, key performance indicators, quality improvement initiatives, and documentation and record keeping standards. Characteristically favouring transparency and accountability, managerialism discourse in the CPA Code is discursively positioned to remediate and/or protect public trust in psychology practices. This contributes to a “cover-your-ass” culture of practice primarily concerned with audit, reasonable decision-making, and legal safeguarding (Nuttgens, 1998). Managerialism discourse in the CPA Code is represented by the development of and adherence to standardized procedures, documentation and record-keeping practices, and monitoring and evaluation of professional activities.

Managerialism discourse is presented as a fundamental component to ethical psychological practice in the CPA Code; members of the discipline are called by this discourse to “Help develop, promote, and participate in accountability processes and procedures related to

their work, including but not limited to: continuous improvement activities; program or sector accreditation activities; and registration with appropriate licensing or certification bodies” (CPA, 2016b, p. 31). A standard practice of evaluation in psychology, whether applied to research proposals, funding applications, or peer review of articles is to develop fair process that is ostensibly transparent and makes adjudication practices and bodies accountable: “Help to establish and abide by due process or other natural justice procedures for employment, evaluation, adjudication, editorial, and peer review activities” (CPA, 2016b, p. 12). Moreover, psychologists are encouraged to develop a reasonable, rational protocol for their professional activities, including emergency procedures and access to personal information on file. These procedures are seen to facilitate a transparent, replicable process and, in the case of records for clients of psychological services, adhere to law and legislation on personal health information (CPA, 2016b):

Establish suitable procedures for responding to emergencies, including procedures for situations in which they are unavailable due to illness, absence, death, or technology failure. (p. 20)

Establish procedures for reasonably ready access to confidential information about an individual or group in a psychological record to that individual or group when requested, limited only by what may be required or justified by law (e.g., protections of the privacy and confidentiality of third-parties; avoidance of potential serious harm to the physical, emotional, or mental health of the individual or group). (p. 26).

Develop easy-to-follow procedures for individuals and groups to request corrections to any confidential information about them in a psychological record (e.g., inaccuracies, incompleteness, outdated); be open to making such corrections where warranted; and be open to allowing individuals and groups to file a note of disagreement with the confidential information in the record if the correction is not deemed warranted. (p. 26)

The CPA Code itself is an example of a standardized mechanism for ensuring a commonly understood, instituted ethical practice in the discipline of psychology: “This *Code* has attempted to encompass and incorporate those ethical principles most prevalent in the discipline as a whole,

thereby minimizing the possibility of variance with provincial/territorial regulations and guidelines” (CPA, 2016b, p. 6). The CPA Code must be followed by members of the CPA and certain provincial regulatory bodies of clinical psychology that have adopted the CPA Code as their code of ethics. The CPA Code requires psychologists to “Enter into or continue with only those agreements or contracts that allow them to act in accordance with the ethical principles and standards of this *Code*” (CPA, 2016b, p. 32), thus emphasizing the use of the CPA Code in all professional practices. Standardized practices construct mainstream discipline as required to adhere to their own defined terms of practice, as informed by legal and science discourses.

As a part of ethical practice, psychologists are to “Create and maintain records relating to their activities that are sufficient to support continuity and coordination over time and to manage risks” (CPA, 2016b, p. 20). The CPA Code emphasizes security of records as well as clarity of communication of information in documents (CPA, 2016b, p. 15):

Collect, record, store, handle, and transfer all private information, whether written or unwritten (e.g., in paper or electronic records, e-mail or fax communications, computer files, recordings), in a way that attends to the needs for privacy, confidentiality, and security. This would include protection from loss or unauthorized access, appropriate education of staff or other agents, and having adequate plans in circumstances of one’s own serious illness, termination of employment, or death.

Psychologists are to only collect information germane to the purpose of their professional activities (CPA, 2016b, p. 14): “Collect and record only that private information necessary for the provision of continuous, coordinated or collaborative service, or for the goals of the particular research study being conducted, or that is required or justified by law” (CPA, 2016b, p. 15). To prevent risks in information management, psychologists are instructed to provide as much clarity as possible in their communications, to avoid miscommunications, misinterpretations, or information being taken up in an “unprofessional” manner (CPA, 2016b, p. 20):

Be acutely aware of the need for discretion in the recording and communication of information, in order that the information not be misinterpreted or misused to the detriment of others. This includes, but is not limited to: not recording or communicating information that could lead to misinterpretation or misuse by those having access to or receiving the information; avoiding conjecture; clearly labelling opinion; and communicating information in language that can be understood clearly by the recipient of the information.

The practices of documentation and record keeping are influenced by legal discourses of privacy, confidentiality, and informed consent. For instance, the practice of participant involvement in research or clinical services requires review and signing of a consent form. Although particularly used in research and clinical work, consent is framed as a process of information exchange between all parties involved, consent processes revolve around recognized points within documentation that must be covered. As an anticipatory practice to thwart unforeseen risk, good ethical practice requires practitioners to “Create and maintain records relating to their activities that are sufficient to support continuity and coordination over time and to manage risks” (CPA, 2016b, p. 20). A key risk in information management is the accidental or intended disclosure of personal information. This is a legislative requirement of psychologists and is framed as an important risk to privacy.

Appropriated Discourses

My analysis of the CPA Code and the two supplementary guidelines yielded discursive constructions that represent *appropriated* discourses. Appropriated discourses signify the co-optation of subjugated discourses, or knowledges that fall outside the ideological norm; they are considered socioculturally and historically inferior relative to those of dominant discourses (Teo, 2015c, 2015d). They are far less influential and powerful than dominant discourses, and are often regarded as suspect, problematic, or unimportant. Appropriated discourses highlight the

dominating power of ideological discourses by making political intentions and assumptions explicit.

The appropriated discourses I found in my analysis are “critical inquiry,” “betterment of society,” and “morality.” These discourses are constituted by objects that fall outside of the dominant discourses I discuss above, but have come to reflect the language and practices of dominant discourses. These appropriated discourses thus have been transformed to possess similar or identical assumptions, values, and political interests to carry out the practices of mainstream psychology (Prilleltensky, 1989, 1997, 2003, 2008).

Critical inquiry. “Critical inquiry” appears as a new term in the latest draft of the CPA Code (CPA, 2000, 2016b). As I discussed in the Literature Review and Theoretical Orientation chapters, critical approaches within psychology can be described as a broad, interdisciplinary set of practices in research and action that aim to understand and address problems of marginalization and oppression in society (Prilleltensky et al., 2009; Teo, 2015c). As a discourse within the CPA Code ethics, “critical inquiry” is discursively produced as a cognitive approach to considering the institutional, systemic, and social ramifications of psychological research, and seeks to improve the benefits of disciplinary practices to society (CPA, 2016b, p. 7, emphasis in original):

“Critical inquiry studies” refers to research that uses critical thinking approaches to analyze the structures, policies, activities, and/or social impact of an institution, *organization*, or other social entity. Such studies are carried out for the benefit of ethical societal improvement. They do not normally involve the institution, *organization*, or other social entity as *primary clients*, although some institutions, *organizations*, or other social entities might commission such a study for their own benefit in addition to potential societal benefit.

Sociocultural analysis of structure, policies, and activities are objects of this discourse, yet there is no mention of social justice values or goals, nor is there explicitly a concern for power

relations within the discipline and within society, marginalized groups in society, or anti-oppressive practice. Who is the “primary client” in this case?

Relevant to all members of the discipline, critical inquiry discourse requires psychologists to consider the social impacts of their research, as it is situated within a communal or social locale, with the intent of improving their practices towards societal improvement: “Participate in the discipline’s process of critical self-evaluation of and its place in society, and in the development and implementation of structures and procedures that help the discipline to contribute to beneficial societal functioning and changes” (CPA, 2016b, p. 31). The practice of critical assessment of one’s research extends to those new to the discipline, such as students and others in psychology training, and psychologists are to support and mentor students in developing critical inquiry awareness: “Assist in the development of those who enter the discipline of psychology by helping them to acquire a full understanding of their ethical responsibilities and the needed competences of their chosen area(s), including an understanding of critical analysis and of the variations, uses, and possible misinterpretations and misuses of the scientific paradigm” (CPA, 2016b, p. 31). This discourse is specifically linked to critique of the scientific paradigm. Interestingly, critique of the scientific paradigm is future-oriented; there is no acknowledgment of historical or current misuses of the scientific paradigm in which psychology has participated.

Although critical inquiry discursively produces consideration of social impacts as a part of ethical psychological practice, it does so within the risk management and science discourses. It is written within a discourse of minimizing risk and/or maximizing benefit in research practices in society. Practices of critical inquiry become part of the scientific method insofar as they are able to reduce risk of future problems by identifying potential social problems that could

result from particular misuses of the scientific paradigm. For example, psychologists must (CPA, 2016b, p. 20):

Consult, unless declined or contraindicated (e.g., critical inquiry studies, possibility of harm, legally disallowed) with the individuals and groups (e.g., couples, families, organizations, communities, peoples) being studied, in order to increase the accuracy of interpretation of results, to enhance the benefit of results to the individuals and groups, and to minimize risk of misinterpretation or misuse.

Participation of individuals or groups of people working with psychologists is made possible by a consultative role, limiting the ways in which research participants, groups of people, and communities can shape research processes. This discourse privileges experts, as these ethical-professionals are best able to inform risks and define benefits to research in a given area of study. Also, benefit involves the psychologist communicating their information to others for their own benefit (CPA, 2016b, p. 20):

Provide suitable information, unless declined or contraindicated (e.g., some critical inquiry studies, possibility of harm, legally disallowed), about the results of assessments, evaluations, or research findings to the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved. This information would be communicated in ways that are developmentally, linguistically, and culturally appropriate, and that are meaningful and helpful.

While the practice of critical inquiry in the CPA Code is discursively produced within a scientific paradigm of research practice, some of the practices of science are problematic for the social justice values such as decolonization, anti-oppression, and social inclusion. Moreover, a historical grounding – grounding that is well documented and investigated within critical interdisciplinary literature, is often missing from this research approach. Although psychologists must consider the impacts of their work, critical inquiry is set apart from science discourse itself.

Critical inquiry becomes appropriated for the purposes of science – rather than, for example, social justice – by becoming a rational-based approach focused on improving research outcomes. So, science appropriates critical practice for its own ends of benefit and risk reduction

rather than societal transformation towards social justice values. Critical psychology seeks to understand mental life within a range of ontologies, epistemologies, and methodologies, which enables a range of modes of understanding the world in knowledge production (Fox et al., 2009); it considers thought and behaviour but also social explanations, explanations incorporating the body, emotion, spirit, and other methods of inquiry. The construction of critical inquiry in the CPA Code is entirely silent regarding these practices. Moreover, unlike other CPA Code practices of ethics, psychologists may consider the social impacts but are under no ethical obligation to respond to the social impacts of their work.

Betterment of society. As an ethical-professional discipline situated within Canadian society, psychology must be centrally concerned with the welfare and best interests of the Canadian public. This relationship between the discipline of psychology and Canadian society appears to position the well-being and interests of society above those of psychology and of psychologists. Beneficial societal practices of psychology involve ideas of mental health normativity in order to govern the mental health of Canadian citizens. Society as a subject itself appears to play a marginal role in the interests of the discipline's practices. The discourse of betterment to society is informed by the discourses of science, risk management, and critical inquiry. Society itself constitutes a vague discursive concept, although it is associated in the CPA Code with geographical location.

Psychology's status as an autonomously-functioning scientific discipline is discursively enabled by a contract between the discipline and society, a contract that permits the discipline of psychology to practice so long as it upholds the welfare of society. The promise of ethical conduct – per the CPA Code – allows psychology as a discipline to function according to its own interests, priorities, and activities (CPA, 2016b, p. 1):

This social contract is based on attitudes of mutual respect and trust, with society granting support for the autonomy of a discipline in exchange for a commitment by the discipline to do everything it can to assure that its members act ethically in conducting the affairs of the discipline within society; in particular, a commitment to try to assure that each member will place the welfare of the society and individual members of that society above the welfare of the discipline and its own members. By virtue of this social contract, psychologists have a higher duty of care to members of society than the general duty of care that all members of society have to each other.

The above extract suggests that psychologists are to prioritize a duty of care to members of society, and this is accomplished by preserving and promoting societal welfare through all practices of the discipline. Thus, society is always already to benefit from the practices of psychology, per the practices of science and risk management, as these discourses produce practices that are in the best interest and welfare of society and its members. Also of note is that the CPA is speaking on behalf of the “discipline of psychology” (see Discipline of Psychology and Canadian Psychological Association subsections below).

As the social contract is stated in the CPA Code to enable the discipline of psychology to function as an autonomous body, the ethical practices of psychology are always already produced within the parameters of science and risk management discourses. Science and risk management discourses are assumed to be inherently beneficial and required to fulfill the discipline of psychology’s obligations to society, in the production of knowledge and practice: “Two of the legitimate expectations of psychology as a science and a profession are that it will increase knowledge and that it will conduct its affairs in such ways that it will promote the welfare of all human beings” (CPA, 2016b, p. 30). Invoking a narrative of progress towards the betterment of the well-being of society and its members through scientific advancement, the authors of the CPA simultaneously assert that freedom of enquiry must come with ethical responsibility to do no harm (CPA, 2016b, p. 17):

A basic ethical expectation of any discipline is that its activities will benefit members of society, or at least, do no harm. Therefore, psychologists demonstrate an active concern for the well-being and best interests of the individuals and groups (e.g., couples, families, groups, communities, peoples) with whom they relate in their role as psychologists. This concern includes both those directly involved and those indirectly involved in their activities.

There are several assumptions made here. Science, when carried out in an ethical manner, as delimited by the practices outlined in the CPA Code, is always of benefit to the society in which it occurs. If a psychologist follows the CPA Code in the practices scientific knowledge production, arguments can be made for the benefit of knowledges for the welfare of society and its members. But how are the welfare and best interests of society and its members constructed? What kinds of practices are enabled by scientific free enquiry under rule-based conditions of permission? Per my analysis of risk management discourse, benefit operates within science discourse and the mitigations of risk. So, provided that arguments are able to be made in science, progress, and discovery, while simultaneously managing risk in terms of legal and moral discourse, benefit can be justified in wide scope in scientific practice. Within the discourses of science and risk management, benefit is able to be removed from its social, cultural, and historical context.

The benefits that society is to receive from psychology's ethical practices are stated in the CPA Code to extend to the policy and institutional levels. The benefits are constituted within other discourses of the CPA Code, particularly those linked to legal, moral, competence (responsible caring), and managerialism discourses (CPA, 2016b, p. 30):

[P]sychologists will do whatever they can to ensure that psychological knowledge, when used in the development of social structures and policies, will be used for just and beneficial purposes, and that the discipline's own structures and policies will support those beneficial purposes. Within the context of this document, social structures and policies that have just and beneficial purposes are defined as those that more readily support and reflect respect for the dignity of persons and peoples, responsible caring, integrity in relationships, and responsibility to society.

Since social structures and policies are constituted within the discourses of legality, managerialism, competence, and morality – discourses that privilege individual legal protections, bureaucratic practices of psychology, and standardized professional training and practices of psychology, institutional and policy benefit are derived through the operations of these discourses. These discourses do not consider the broader social, cultural, or historical context in which the discipline operates, but they do subscribe to individualistic, status quo conditions of society’s current structure. Moreover, in any kind of ethical conflict, individual welfare supersedes those of society (CPA, 2016b, p. 2):

When the welfare of an individual or group appears to conflict with benefits to society, it is often possible to find ways of working for the benefit of society that do not violate respect for dignity, responsible caring or integrity. However, if this is not possible, the dignity, well-being, and best interests of persons and peoples, and integrity in relationships should not be sacrificed to a vision of the greater good of society.

The discourse of the CPA Code constructs society, institutions of society, social policies, and so on within individualistic practices in legal and managerialism discourse, and within the terms of scientific psychology expertise.

In their own contributions to societal betterment, psychologists practicing outside of society – further constructing society as an area of specialty rather than a concern for all psychologists – are instructed to “do whatever they can” (CPA, 2016b, p. 30) to engage psychological knowledge for beneficial purposes in changing social structure and policy. For other psychologists, this responsibility is constituted as optional (CPA, 2016b, pp. 30-31):

[S]ocial structures and policies that have just and beneficial purposes are defined as those that more readily support and reflect respect for the dignity of persons and peoples, responsible caring, integrity in relationships, and responsibility to society. If psychological knowledge or structures are used against these purposes, psychologists have an ethical responsibility to try to draw attention to and correct the misuse. Although this is a collective responsibility, those psychologists having direct involvement in the structures of the discipline, in social development, or in the theoretical or research data

base that is being used (e.g., through research, expert testimony, or policy advice) have the greatest responsibility to act. Other psychologists need to decide for themselves the most appropriate and beneficial use of their time and talents to help meet this collective responsibility.

The discipline needs to be willing to set high standards for its members, to do what it can to assure that such standards are met, and to support its members in their attempts to maintain the standards (e.g., through formative and continuing education, training, supervision, and consultation). Once again, individual psychologists need to decide for themselves the most appropriate and beneficial use of their time and talents in helping to meet these collective responsibilities.

Although psychologists aspire to create positive change in society through the use of their psychological knowledge, this aspiration could be taken up in a multitude of ways, or not at all. Should a psychologist not claim expertise in the area of social structures and policies, or practice in subjugated areas of psychology that fall on the margins of evidence-based empiricism, they may be inclined to avoid practices that challenge institutional and policy structures.

Moreover, social change is framed by the CPA Code authors using a natural progressive narrative, describing the change from a slow evolution occurring over time as human needs have changed (CPA, 2016b, p. 30). As a natural progression, psychologists are instructed to “convey respect for such social structures and avoid unwarranted or unnecessary disruption. Suggestions for and action toward changes or enhancement of such structures are carried out through processes that seek to achieve a consensus within those societies and/or through democratic means” (CPA, 2016b, p. 30). This discursive constitution creates a tension between freedom of inquiry of science discourse and social justice. Freedom of inquiry cannot be compromised by social justice, so societal betterment is structured around maintenance of status quo conditions. Therefore, while societal betterment is to occur through critical evaluation, it never comes at the expense of scientific practices of psychology.

Morality. Per the CPA Code, the discipline of psychology is constructed to engage as a “moral community” (CPA, 2016b, p. 4). Morality discourse incorporates the discursive objects of “best interests” and “just laws,” drawing on legal discourse including discourses of human rights and civil liberties. Best interests are discursively produced as the “interests that support the dignity and well-being of *individuals* and *groups*, and are morally justifiable” (CPA, 2016b, p. 7, italics in original). Just laws are stated in the CPA Code as “laws that are consistent with the *moral rights of persons* and *peoples*, and that are implemented in conformity with the principles of natural justice (e.g., fairness, impartiality, reasonableness, due process)” (CPA, 2016b, p. 8; italics in original). Morality is cast within a rights-based discourse that assumes natural, universal, logical qualities (CPA, 2016b, p. 8):

“Moral rights” means the fundamental and inalienable rights of persons and peoples. They apply to all human beings and are grounded in moral reasoning (e.g., reasoning that helps to identify and justify them). Some aspects of moral rights may be contained within and protected by international, regional, and national declarations, constitutions, laws, and statutes (e.g., human rights declarations; *just laws* defining the legal and civil rights of *persons* or *peoples* living in a country or region). However, other aspects may not be so contained or protected. Of particular significance to *psychologists* are moral rights to: developmentally appropriate privacy and confidentiality, self-determination, and liberty; cultural identity, cultural survival, and social participation; and distributive, social, and natural justice. Moral rights are not limited to those mentioned in this definition.

CPA Code constitutes morality as discursively linked to culture and communities of individuals (CPA, 2016b, p. 10):

Psychologists also acknowledge that all human beings, in addition to being individuals, are interdependent social beings who are born into, live in, and are a part of the history and evolution of social groupings (e.g., couples, families, organizations, communities, peoples). The different cultures, ethnicities, religions, histories, social structures, and other such characteristics of social groupings are often integral to the identity of the individuals who belong to them and give meaning to their lives. As such, respect for the dignity of human being includes respect and moral consideration for social groupings such as couples, families, organizations, communities, and peoples. In their work, psychologists acknowledge, respect, and take into account the uniqueness, diversity, and role structures involved.

Further constructing morality within human rights discourse, psychologists are instructed to consider not only individuals but groups they are in contact with (CPA, 2016b):

Respect for the dignity of persons and peoples also includes the concept of distributive and social justice. With respect to psychologists, this concept implies that all individuals and groups (e.g., couples, families, organizations, communities, peoples) are entitled to benefit equitably from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists, regardless of their characteristics, condition, or status. (p. 10)

Not promote, contribute to, nor engage in any activity that contravenes international humanitarian law (e.g., declarations, treaties, or conventions regarding: human rights; torture and other cruel, inhumane, or degrading treatment or punishment; economic, social and cultural rights; civil and political rights; rights of indigenous peoples; children's rights; weapons of mass destruction; destruction of the environment). (p. 35)

Interdiscursive with legal discourse, morality discourse is concerned with privacy and confidentiality, and consent and participation as moral rights. Morality discourse additionally constructs privacy and confidentiality as moral right. That is, psychologists must “Respect the moral right of research participants, employees, supervisees, students, and trainees to reasonable personal privacy, and take care not to infringe, in research, teaching, supervision, or service activities, on the personally, developmentally, or culturally defined private space of individuals or groups (e.g., couples, families, organizations, communities, peoples), unless clear permission is granted to do so” (CPA, 2016b, p. 15). The morality of those in contact with the discipline is constructed within their legal rights, and violations of ethics within a discriminatory realm take the form of legal discriminations, of which both systemic and structural marginalization falls outside of this discourse.

The way in which someone is able to participate within the discipline of psychology is situated within a legal-cultural discourse. Given the association of morality with moral rights and human rights discourse, morality also is associated with the discourse of diversity and competence, particularly so in relation to construction of culture: “Demonstrate appropriate

respect for the knowledge, insight, experience, areas of expertise, and cultural perspectives and values of others, including those that are different from their own, limited only by those that seriously contravene the ethical principles of this *Code*” (CPA, 2016b, pp. 11-12). Within this discourse, psychologists are called to attend to the cultural and community contexts of their work (CPA, 2016b):

Psychologists recognize that, although all persons and peoples possess moral rights, the manner in which such rights are promoted, protected, and exercised varies across communities and cultures. For instance, definitions of what is considered private vary, as does the role of families, other community members, and community leaders in personal decision making. In their work, psychologists acknowledge and respect such differences, while guarding against clear violations of moral rights. (p. 10)

Respect the moral right of individuals and groups (e.g., couples, families, organizations, communities, peoples) to discontinue participation or service at any time, and be responsive to non-verbal indications of a desire to discontinue if the individuals or groups involved have difficulty with verbally communicating such a desire (e.g., young children, individuals with language disabilities), or, due to culture, are unlikely to communicate such a desire orally. (p. 14)

The discourse of moral rights is associated with the objects of “equal inherent worth,” “non-discrimination,” and “distributive justice.” Inspired by the legal discourse of international human rights, it assumes that everyone shares universal characteristics that place everyone in equal status as a human being. Based on assumptions of biologism and reasoned logic, human beings are naturally of the same physical and cognitive likeness, and therefore deserve the same treatment and protections under the law and in the society in which they live. Recognizing these objects is associated with respecting dignity, which, in the CPA Code as Principle I, is afforded primacy when encountering an ethical dilemma or decision to make: “In respecting dignity, psychologists acknowledge that each human being should be treated primarily as a person or an end in him/herself, not as an object or a means to an end, and is worthy of equal moral

consideration” (CPA, 2016b, p. 10). Thus, per the CPA Code, each person in contact with psychologists is deserving of equal ethical treatment by the discipline (CPA, 2016b, p. 10):

[P]sychologists acknowledge that all human beings have a moral right to have their innate worth as human beings appreciated and that this inherent worth is not dependent on a human being’s culture, nationality, ethnicity, colour, race, religion, sex, gender, marital status, sexual orientation, physical or mental abilities, age, socio-economic status, or any other preference or personal characteristic, condition, or status. As such, psychologists do not engage in unjust discrimination based on such factors and promote non-discrimination in all of their activities.

Note that there are two discursive objects produced in relation to “discrimination”: unjust discrimination and non-discrimination (CPA, 2016b, p. 8):

“Unjust discrimination” or **“unjustly discriminatory”** means activities that are prejudicial to or promote prejudice against *persons* or *peoples* because of their culture, nationality, ethnicity, colour, race, religion, sex, gender, marital status, sexual orientation, physical or mental abilities, age, socioeconomic status, or any other preference or personal characteristic, condition, or status. The word “unjust” is used to differentiate such activities from the justifiable recognition and understanding of differences needed to determine, for instance, what might benefit or harm *persons* and *peoples*.

This definition, provided by the authors of the CPA Code, suggests that while discriminatory actions can produce prejudice towards people by infringing upon their (moral) rights, comparisons in scientific research that discriminate characteristic differences between groups of people are permissible. Of concern, however, is that scientific-objective research does not adequately practice hermeneutical interpretation of research results, potentially rendering problematic conclusions about groups of people. This occurs when there are additional knowledges or explanations about groups of people that are ignored or overlooked (Teo, 2009), and interpretations/conclusions about groups of people are misunderstood and misrepresented. The discursive object of unjust discrimination appears throughout Principle I. For example (CPA, 2016b, p. 11):

Although individual psychologists might specialize and direct their activities to particular populations, or might decline to engage in activities based on the limits of their

competence or acknowledgment of difficulties (e.g., in relationship with some types of primary clients), psychologists do not exclude persons or peoples on a capricious or unjustly discriminatory basis.

The statement "...psychologists do not engage in unjust discrimination based on such factors and promote non-discrimination in all of their activities" (CPA, 2016b, p. 10) further suggests that while certain *kinds* of discrimination are not tolerated, other kinds of discrimination are possible within scientific study, and complete non-discrimination is an aspiration rather than rule.

Therefore, when social identities become an object of science, discrimination by comparison and characterization becomes legitimate and reasonable. Particular arguments of societal benefit can be made possible so that such practices not only continue, but are labelled as positive, progressive, and able to be made in society's best interests. Moreover, since legitimized procedures of research review and practice, such as institutional review, research ethics board review, and peer review, reinforce such science and legal discourse, particular constructions of research designed to look for differences become expected, everyday forms of research. Thus, although psychologists must "Act to correct practices that are unjustly discriminatory," and "Not practice, condone, facilitate, or collaborate with any form of unjust discrimination" (CPA, 2016b, p. 12), structural and systemic forms of violence towards individuals marginalized and oppressed in psychological research is able to continue.

The legitimization of research structured to find individual differences also is enabled by risk management discourse. By co-opting morality discourse into risk management, research practices are positioned as safe provided they are balanced for their risk and benefit in the welfare and best interests of society (CPA, 2016b, p. 17):

Responsible caring leads psychologists to take care to discern and balance the potential harms and benefits to the individuals and groups involved, taking into account the degree and moral legitimacy of conflicting interests. It also leads psychologists to predict the likelihood of the occurrence of harms and benefits, to proceed only if the potential

benefits outweigh the potential harms, to develop and use methods that will minimize harms and maximize benefits, and to take responsibility for correcting clearly harmful effects that have occurred as a direct result of their research, teaching, supervision, practice, or business activities.

Likewise, psychologists must “Avoid or refuse to participate in practices disrespectful of the moral rights of persons or peoples, including their human, legal and civil rights,” and “Refuse to advise, train, or supply information to anyone who, in the psychologist’s judgment, will use the knowledge or skills to infringe on moral rights” (CPA, 2016b, p. 12). Thus, by framing moral discourse within legal and risk management discourses, individual differences in research and practices are enabled, made safe within the discourse of science, and are argued to be of benefit for individuals and society as a whole.

Sites of Discourse Production

The sites of production of CPA Code discourses are where psychology ethics modes and practices are prominently produced – these also are considered the sites of production of discursive “rules” that ensure the conditions of discourse operate. The reinforcement of these discursive rules serves to preserve the powerful discursive structure that maintains the formation of the CPA Code. These include the sites of education and training, licensure and regulation, ethical decision-making, consultation, and misconduct adjudication. At all of these sites, discourses powerfully compete for uptake by psychologists in enacting CPA Code ethics.

Education and training. One of the sites in which the CPA Code discourse is produced is through “promoting [the] principles, values, and standards through formative and continuing education, supervision, peer modeling, and consultation” (CPA, 2016b, p. 2). That is, education as a discursive site of production of CPA Code discourses occurs through sites of formative and continuing education. Education represents one of the three founding “pillars” of the CPA and thus represents a priority task of the CPA and of the discipline of psychology. For students,

trainees, and other individuals new to the discipline's practices, formative education plays a critical role in becoming properly trained as a legitimate psychologist, and one who is to passively accept top-down training requirements of programs and supervisors. While training sites such as graduate training programs, practicum placements in research and clinical work, administrative placements, policy work, and so on comprise a multiplicity of sites operating within myriad psychological discourses, education is an engagement practitioners pursue throughout their careers. This may be accomplished through online training and certification, workshops, continuing education courses, supervised work, and so on. In Ontario, licensure through the College of Psychologists of Ontario requires continuing education credits for registered psychological associates or psychologists (College of Psychologists of Ontario, 2009). Education enables legitimate, necessary credentials to enter a career in psychology, to build and maintain competence, and to reach the status of expertise in a field of practice.

Education and training sites represent important locales of uptake of psychological practice, and in shaping the ethical-professional role of psychologists. Clinical psychology programs in Canada are accredited by the CPA. Education is discursively linked to ethical discourse and practices of competence, consultation, and corrective action. Ethical psychologists are expected to participate in education for the entirety of their careers (CPA, 2016b, p. 19):

Keep themselves up to date with a broad range of relevant knowledge, research methods, techniques, and technologies, and their impact on individuals and groups (e.g., couples, families, organizations, communities, and peoples), through the reading of relevant literature, peer consultation, and continuing education activities, in order that their practice, teaching, and research activities will benefit and not harm others.

Similarly, ethical practices of the discipline require psychologists to engage a standardized, accountable process of learning in their careers: "Help develop, promote, and participate in accountability processes and procedures related to their work, including continuous improvement

activities, program or sector accreditation activities, and registration with appropriate licensing or certification bodies” (CPA, 2016b, p. 30). As I mention in discourse of betterment of society, it is expressly stated in the code that those psychologists whose work directly relates “to societal issues” must “keep well informed” through continuing education activities (CPA, 2016b, p. 33).

Psychologists who have reached a point of competence in their work are assigned the responsibility of supervising students and others performing activities in their place of work. In their careers, psychologists are obliged to “educate new members of the discipline” (CPA, 2016b, p. 4) by encouraging and supporting the psychological education, training, and professional development of those pursuing disciplinary studies and careers (CPA, 2016b, p. 4):

Facilitate the professional and scientific development of their employees, supervisees, students, and trainees by ensuring that these persons understand the values and ethical prescriptions of the discipline, as well as the competencies needed for their areas of activity, and by providing or arranging for adequate working conditions, timely evaluations, and constructive supervision, consultation, and experience opportunities.

There are discursively produced “appropriate” activities for psychologists to be fostering with their students. These are scientific-professional activities; in this example, student papers: “Encourage and assist students in their engagement in developmentally appropriate professional and scientific activities, including the publication of worthy student papers” (CPA, 2016b, p. 19). Moreover, the CPA Code states this in relation to each ethical principle: “Assume overall responsibility for the scientific and professional activities of their assistants, employees, supervisees, students, and trainees” (CPA, 2016b, pp. 15, 22, 28, 32).

Thus discursive production of the right kind of psychologist involves engagement with activities in line with this ethics code, the CPA, and the discipline of psychology. These are interests of consuming discourses of science and the products of this knowledge production that are deemed worthy. If the psychologist believes that their mentorship or education will be used

by another to cause harm or infringe on moral rights, they are to “Refuse to advise, train, or supply information” (CPA, 2016b, p. 12). “General educational activities” are a remediation device of the CPA in situations of complaints. The education of students new to the discipline includes education about critical inquiry discourse: “Assist in the development of those who enter the discipline of psychology by helping them to acquire a full understanding of their ethical responsibilities and the needed competences of their chosen area(s), including an understanding of critical analysis and of the variations, uses, and possible misuses of the scientific paradigm” (CPA, 2016b, p. 30). At this time, education based in critical perspectives in psychology is not mandatory in post-secondary training programs; it remains a marginalized knowledge in the discipline of psychology. Interestingly, although students are considered a vulnerable group for psychologists, given their status of lower power in the professional relationships they have with psychologists in supervisory or instructor roles, there is no mention in the CPA Code of the experiences of problems of power or ethics for students. Thus, a good psychology student always already requires full acceptance of top-down power dynamics of training sites and those who oversee and evaluate their work. Students and practitioners alike who do not engage in formal and continuing education become potentially subject to risk management discourse by the institutions, programs, and supervisors they are monitored by, may be labelled as a problem and/or as unethical, and may be disciplined for their problematic engagement.

Licensure and regulation. The CPA does not govern the regulation of psychologists, such as licensure to practice clinical psychology, but it has been adopted within some provinces as the ethical code for psychologists to follow. The use of the *Canadian Code of Ethics for Psychologists* (CPA, 2000) is recognized as the standard code of ethics required for registration as a clinical psychology practitioner in the following provinces and territories: Alberta,

Manitoba, New Brunswick, Newfoundland, Nova Scotia, Ontario (College of Psychologists of Ontario, 2009), Prince Edward Island, and Saskatchewan. Moreover, the CPA governs accreditation standards of psychology training programs located across Canada, enforcing the training and use of the CPA Code.

Intended to integrate with other dominant practices in ethics and standards of psychology, the CPA Code states its congruence with other regulatory mechanisms through licensing bodies and legislation (CPA, 2016b, pp. 5-6):

In exercising its responsibility to articulate ethical principles, values, and standards for those who wish to become and remain members in good standing, the Canadian Psychological Association recognizes the multiple memberships that some psychologists have (both regulatory and voluntary). The *Code* has attempted to encompass and incorporate those ethical principles most prevalent in the discipline as a whole, thereby minimizing the possibility of variance with provincial/territorial regulations and guidelines. Psychologists are expected to respect the requirements of their provincial/territorial regulatory bodies. Such requirements might define particular behaviours that constitute misconduct, are reportable to the regulatory body, and/or are subject to discipline.

Regulatory bodies of psychology are a powerful site of uptake of disciplinary ethics, given their intertextuality of legal discourse of regulated health professions. The governing power of licensing bodies produce psychologists concerned with “checks and balances” of managerialism and competence discourses.

Ethical decision-making. Ethical decision-making is a practice that seeks to explore an ethical dilemma, determine options of resolving the dilemma, identify the best approach to resolution, and implement the approach while monitoring for positive outcomes. Ethical decision-making is intertextual with risk management discourse, as it seeks to explore dimensions of risk and benefit in the process of resolving an ethical dilemma. The CPA Code contains a 10-step decision-making process that psychologists are to use in the event of an ethical dilemma (CPA, 2016b). The 10-step decision-making process incorporates risk

management, managerialism, and self-reflection discourses to work through issues with the individual(s) affected by the ethical dilemma. The practice of ethical resolve is a technology of self-management for psychologists to enact and monitor their ethical performance of dilemmas in everyday situations.

As a governing authority of ethical decision-making discourse, the CPA defines and describes the what, how, when, and why of this practice: “Ethical choices need to be made when ethical questions, issues, or dilemmas arise. Such choices involve ethical decision-making” (CPA, 2016b, p. 2). Advising about the ethical decision-making process, the CPA Code discursively produces the normative parameters of ethical decision-making should consist of (CPA, 2016b, p. 2):

The ethical decision-making process might occur very rapidly, leading to an easy resolution of an ethical question or issue. This is particularly true of questions or issues for which clear-cut guidelines or standards exist and for which there is no conflict between principles, values, or the interests of parties involved. On the other hand, some ethical issues (particularly those in which ethical principles, values, or interests conflict) are not easily resolved, might be emotionally distressful, and might require time-consuming deliberation.

The CPA Code discursively produces ethical decision-making as a skill akin to competence development, so psychologists must “Engage in ongoing development and maintenance of their ethical sensitivity and commitment, ethical knowledge, and ethical decision-making skills” (CPA, 2016b, p. 5).

Objects of personal discourse, positioned as threats to objectivity, are simultaneously made problematic for ethical decision-making. These objects include values, biases, experiences, emotions, stresses, and social, political, economic, and institutional backgrounds. Additionally, physical or psychological conditions are recognized as dangerous for their potential threat to professional judgment. Self-reflection discourse seeks to address these threats through

technologies of self-monitoring and transformation of subjective knowledge to objective knowledge. Knowledge of the self allows psychologists to make the best decision, informed about the path of least harm and the most good. Yet the information yielded by self-reflection ultimately must be objective. Thus, any information of the self – as detected by the psychologist – must be translated into objective, reasoned logic. This is premised on the assumption that the practice of making information objective will always already provide the self with clear, reliable information that better discerns harmful and beneficial choices, removed and thus maximizing the right ethical-professional role. This is especially the case when the psychologist is considered competent and/or an expert professional. Threats to the reasoning process are serious, as they compromise the mechanism of ethical practice for psychologists and must be avoided at all costs. The suggestion that legitimate information of the self for the purposes of professional practices is further suggested in the only mention of care of the self in the CPA Code: “Engage in self-care activities that help to avoid conditions (e.g., burnout, addictions) that could result in impaired judgment and interfere with the ability to benefit and not harm others” (CPA, 2016b, p. 19).

Moreover, as I discuss in the Personal subsection of the psychologist subject position below, the experience of emotion as a feeling of distress while facing an ethical dilemma signifies a problem to be dealt with through consultation or supervision. In the event of challenging decision-making, psychologists are reminded that the resolution of ethical decision-making must always already be able to bear public scrutiny, and (CPA, 2016b, p. 4):

In some cases, resolution might be a matter of personal conscience. However, decisions of personal conscience are also expected to be the result of a decision-making process that is based on a reasonably coherent set of ethical principles and that can bear public scrutiny. If the psychologist can demonstrate that every reasonable effort was made to apply the ethical principles of this *Code* and resolution of the conflict has had to depend on the personal conscience of the psychologist, such a psychologist would be deemed to have followed this *Code*.

In another instance, when legal or regulatory requirements clash with ethical requirements, personal conscience in decision-making practices must be made as objective as possible, and the threat of public scrutiny is used to enforce such a practice. Psychologists must (CPA, 2016b, p. 32):

Familiarize themselves with the laws and regulations of the societies in which they work, especially those that are related to their activities as psychologists (e.g., mandatory reporting, research regulations, jurisdictional licensing or certification requirements, and abide by them. If those laws or regulations seriously conflict with the ethical principles contained herein, psychologists would do whatever they could to uphold the ethical principles. If upholding the ethical principles could result in serious personal consequences (e.g., jail, physical harm), decision for final action would be considered a matter of personal conscience.

Thus, psychologists are always already to default to a stance of objectivity – as a legitimate means of ethical decision-making, and as a medium through which to understand and communicate information. The privileging of objectivity signifies the exclusion of emotion, personal conscience, values, and other objects falling outside of objectivity.

Moreover, relationships that psychologists form that fall outside of professional objective relations are constructed as to be avoided. These include sexual intimacy with clients (CPA, 2016b, p. 19), conflict-of-interest situations (p. 23), dual or multiple relationships (unless these are unavoidable in particular circumstances). For example (CPA, 2016b):

The risk level and acceptability of other conflicts of interest (e.g., dual or multiple relationships) might be partially dependent on cultural or geographic factors and the specific type of professional relationship (e.g., long-term psychotherapy vs. organizational consultation vs. community-oriented activities). In some situations, for instance, a dual or multiple relationship might be inevitable or culturally expected (e.g., in rural, indigenous, or immigrant communities), or could enhance the benefit of an activity. However, in all such situations, the psychologist is responsible for making an honest appraisal of the benefits and risks involved in the context of the specific situation, including but not limited to: determining the feasibility of alternatives in light of those risks and benefits; deciding whether to enter into or continue the relationship; establishing relationship boundaries appropriate to the work being done (e.g., availability, in-person or social-media personal disclosure, social contact); and managing the

relationship (e.g., by seeking advice or establishing other safeguards) to ensure that the dignity, well-being and best interests of the member(s) of the public are protected. (p. 28)

Manage dual or multiple relationships or any other conflict-of-interest situation entered into in such a way that bias, lack of objectivity, and risk of exploitation or harm are minimized. This might include involving the affected party(ies) in clarification of boundaries and expectations, limiting the duration of the relationship, obtaining ongoing supervision or consultation for the duration of the dual or multiple relationship, or involving a third party in obtaining consent (e.g., approaching a primary client or employee about becoming a research participant). (p. 25)

Threats to decision making risk loss of the public's trust, not only in the psychologist but in the legitimacy of the discipline itself. For example, it is further implicated in the object of conflict-of-interest (CPA, 2016b, pp. 24-25):

As public trust in the discipline of psychology includes trusting that psychologists will act in the best interest of members of the public, situations that present real or potential conflicts of interest are of concern to psychologists. Conflict-of-interest situations are those that can lead to distorted judgement and can motivate psychologists to act in ways that meet their own personal, social, political, financial, or business interests at the expense of best interests of members of the public.

Since psychologists must always act to the best benefit of the public, any act that threatens the discipline's relationship with the public is seriously discouraged, and can carry with it complaints, allegations of misconduct, and removal of membership, professional licensure, and so on. All situations constructed as problematic for ethical decision-making are to be avoided or addressed; otherwise the disturbing threat of discipline is possible. Psychologists hold the power to discern whether or not a concern brought to their attention warrants their own attention and action: to "[c]onsider seriously others' concerns about one's own possibly unethical actions or unrecognized biases and attempt to reach an agreement on the issue and, if needed, take appropriate action" (CPA, 2016b, p. 5).

In the practice of ethical decision-making, psychologists hold decisive power over the event. Psychologists are to involve others in decision-making practices that affect their care, and

are obliged to incorporate “as much as possible their opinions and wishes” (CPA, 2016b, p. 12).

The CPA Code weighting of principles is recommended to be followed in the majority of cases

(CPA, 2016b, p. 2):

All four principles are to be taken into account and balanced in ethical decision making. However, in circumstances in which the ethical principles themselves conflict, it might not be possible to give each principle equal weight. The complexity of many conflicts precludes a firm ordering of the principles. However, the four principles have been ordered according to the weight each generally should be given when they conflict...

Although it is necessary and important to consider responsibility to society in every ethical decision, adherence to this principle needs to be subject to and guided by Respect for the Dignity of Persons and Peoples, Responsible Caring, and Integrity in Relationships. When the welfare of an individual or group appears to conflict with benefits to society, it is often possible to find ways of working for the benefit of society that do not violate respect for dignity, responsible caring or integrity. However, if this is not possible, the dignity and well-being of persons and peoples, and integrity in relationships, should not be sacrificed to a vision of the greater good of society.

Psychologists therefore hold power in identifying the ethical problem, working out solutions within a logical, objective framework of risk management, selecting a resolution, and monitoring its ethical effectiveness. While the CPA Code language does state they are encouraged and expected to involve those they work with in resolution of the dilemma, they ultimately hold tremendous influence in resolving ethical issues.

Consultation. Another site of reproduction of ethics discourses is the act of consultation. Consultation is a practice for psychologists to seek opinion about an ethical issue, a practice issue, or something related to their professional activities, from another member of the discipline who is regarded as possessing the right knowledge. This knowledge is competence-relevant and possibly expert-based. Consultation becomes necessary when signaled by some lack of competence on part of the psychologist in practice: “Take immediate steps to obtain consultation or supervision, or to refer a primary client to a colleague or other appropriate professional, whichever is more likely to result in providing the primary client with competent services, if it

becomes apparent that a primary client's issues or problems are beyond their competence" (CPA, 2016b, p. 17).

Consultation has implications for those possessing privileged knowledge – that is, knowledges produced by psychologists, by the scientific discipline of psychology. For example, psychologists are to “Seek consultation from colleagues and/or appropriate others, including advisory groups, and give due regard for their advice in arriving at a responsible decision, if faced with difficult situations” (CPA, 2016b, p. 28). This is noted elsewhere in the resolution of ethical decision-making, whereby (CPA, 2016b, p. 3):

Psychologists engaged in time-consuming deliberation are encouraged to consult with the individuals and groups affected by the ethical problem if appropriate. In addition, they are encouraged and expected to consult with colleagues or relevant others, including advisory bodies, when such individuals or groups can add knowledge or objectivity to the decision-making process. Although the decision for action remains with the individual psychologist, the seeking and consideration of such assistance reflects an ethical approach to ethical decision making.

Consultation is specifically recommended when psychologists are in contact with vulnerable clients. The Code positions vulnerability as a risk to be managed, which affects how psychologists approach practices with vulnerable clients. This, in turn, limits the subjectivity of the client, in other words, the ways a vulnerable client may “be” in a professional relationship with psychologists (CPA, 2016, p. 10):

Psychologists recognize that as the vulnerabilities of individuals and groups (e.g., couples, families, organizations, communities, peoples) increase, or their power to control their environment or their lives decreases, psychologists have an increasing responsibility to seek ethical advice and to establish safeguards to protect the moral rights of the persons involved. For this reason, psychologists consider it their responsibility to increase safeguards to protect and promote the moral rights of the persons involved in their activities proportionate to the degree of vulnerability of these persons.

As vulnerabilities increase and dependency on others increases, this discursively produces a greater level of surveillance over the lives of vulnerable individuals by psychologists, by colleagues, by experts, and others deemed to possess legitimate knowledge.

The practice of consultation reinforces competence discourse as well as expertise discourses, as only certain kinds of relevant or qualified people are sought for consultation. This instruction to psychologists appears elsewhere; for example, psychologists also are encouraged to consult with colleagues and appropriate others in situations whereby a solution following ethics conflicts with law. The discursive constitution of appropriate and relevant others creates divides between those privileged, and not privileged, to have certain types of knowledge. Moreover, although psychologists are obliged to consult with colleagues, they are encouraged to speak to appropriate or relevant others. Consultation also enacts risk management as certain possible consultants may be produced as harmful or unlikely to help – thus increasing risk of harm to the situation. As additional people are brought into an ethical dilemma situation, more psychologists become accountable to adhere to a standardized, recognized practice of ethics, and these discourses become multiply reinforced.

Misconduct adjudication. Misconduct adjudication is arguably the strongest mechanism for instilling conformity in becoming an ethical-professional in the discipline of psychology. Misconduct signifies an allegation that a practice has resulted in harm. The ramifications of misconduct adjudication are significant; a psychologist who is seen to be transgressing accepted practices risks the loss of professional status and credibility, and may also be endangering the public representation of the professional image and practices of psychology. Rules, regulations, laws, and guidelines are represented throughout the code as obligations for psychologists to comply with. These practices are informed by discourses of managerialism, law, and risk

management. Psychologists are instructed to “Familiarize themselves with their discipline’s rules and regulations, and abide by them” (CPA, 2016b, pp. 28-29). The colonizing impact of this discourse extends to new areas of practice: “Apply conscientiously the ethical principles and values of the *Code* to new or emerging areas of activity” (CPA, 2016b, p. 5). The responsibility to follow rules and guidelines and ethical practices of the discipline reflects back on the psychologist as a discipline: “It also requires that psychologists, in as much as they present themselves as members and representatives of a specific discipline, have a responsibility to actively rely on and be guided by that discipline and its guidelines and requirements” (CPA, 2016b, p. 25). Thus, the ramifications for psychologists are serious and are made to reflect the discipline as a whole. Networked with public trust, the CPA positions the violation of public trust as a fundamental threat to the practice of psychology, and something that all psychologists must strive to mitigate as much as possible.

This is a powerful site of uptake, able to enforce technologies of self-management and management of others in order to avoid misconduct charges. The site of misconduct adjudication acts to gatekeep the practices of psychologists, serving to reinforce the CPA Code discourse and maintain ethical-professional practices of the psychologist. Members of the CPA and members of regulatory bodies that have adopted the CPA Code as their code of ethics are obligated to follow the Code. The CPA holds the power to adjudicate charges of misconduct made against their membership. The CPA has an adjudicating body to process complaints they receive about members’ practices, and they are able to effect corrective action if deemed situationally appropriate (CPA, 2016b, p. 1). The CPA Code is to be used as a technology of discipline for psychologists charged with unethical behaviour (CPA, 2016b, p. 4):

A third use of the *Code* is to assist in the adjudication of complaints against psychologists...In judging whether unacceptable conduct has occurred, many

jurisdictions refer to a code of conduct. Some complaints, however, are about conduct that is not addressed directly in a code of conduct. The *Code* provides an ethical framework for determining whether the complaint is of enough concern, either at the level of the individual psychologist or at the level of the profession as a whole, to warrant corrective action (e.g., discipline of the individual psychologist; general educational activities for members; incorporation into the code of conduct).

The *Code* also is intended to serve as an umbrella document for the development of codes of conduct or other more specific codes. For example, the *Code* could be used as an ethical framework for the identification of behaviours that would be considered enforceable in a jurisdiction, the violation of which would constitute misconduct; or jurisdictions could identify those standards in the *Code* that would be considered of a more serious nature and, therefore, reportable and subject to possible discipline.

Interestingly, there are no further statements about what would constitute a transgression “at the level of the profession as a whole” or how such a transgression would be addressed. The CPA is assigned to enable disciplinary power to direct the ethical practices of the discipline as a whole, and to intervene when seen as necessary.

As members, psychologists must “Cooperate with duly constituted committees of the Association that are concerned with ethics and ethical conduct” (CPA, 2016b, p. 5). Fear of repercussions of misconduct allegations and adjudication is a powerful motivator to take up CPA Code practice. For individual psychologists, an adjudicating body is to discern whether the psychologist “conscientiously engaged in an ethical decision-making process and acted in good faith, or whether there was a negligent or willful disregard for ethical principles” (CPA, 2016b, p. 4) and recommend the corrective action to be taken. Personal investment, such as conflict-of-interest situations, present as serious threats to decision-making and public trust, “are of concern to psychologists” and “considered never acceptable” as are relationships that are regarded as having “risk” to the protection of “the best interests of members of the public and to maintaining the trust of the public” (CPA, 2016b, pp. 24-25). Other elements of practitioners’ personal subjectivity may raise questions about their credibility, their ability to act ethically, and their

commitment to the discipline. Per the CPA Code, personal subjectivity presents additionally as a risk for future unethical behaviour. With the approval of the President or the majority of Board of Directors, the Committee on Ethics is charged with the authority to investigate allegations from members of the CPA or of the public in cases of unethical scientific or professional conduct by CPA members. The body follows a process to evaluation of how a psychologist made decisions leading to the event, their legitimacy, the psychologist's culpability, and what action will follow (CPA, 2016b, p. 4):

In determining corrective action for an individual psychologist, one of the judgments the adjudicating body needs to make is whether an individual psychologist conscientiously engaged in an ethical decision-making process and acted in good faith, or whether there was a negligent or willful disregard of ethical principles. The articulation of the ethical decision-making process contained in this *Code* provides guidance for making such judgments.

It is made clear that every decision a psychologist makes should follow managerial discourses of transparency, documentation, follow an objective and logical order involving others where possible – for consultation and legitimacy – and ensure the CPA Code was followed where possible. The use of public trust is a discursive strategy to encourage psychologists to comply with ethical practices.

Subject Positions

Subject positions are produced from the discourses and discursive rules present within a particular locale in time and place. Emerging from an interplay of power relations, subject positions represent who may speak, and they must speak to power/knowledge within the delimitation of discourses available within the locale – in this case, the CPA Code. Subject positions also reflect who may not speak and what may not be said by certain subjects. From a critical standpoint, since subject positions are produced from relations of power, certain subject positions are rendered with greater power and privilege than others. Below I discuss five subject

positions I observed in the CPA Code: the Canadian Psychological Association, the discipline of psychology, the public, psychologists, and clients.

The Canadian Psychological Association. The CPA is discursively produced in the CPA Code as a powerful authority of ethics and of the discipline of psychology. This is constructed by the CPA's assignment of responsibility for the relationship between the discipline of psychology and society, enabled by a contract with society (CPA, 2016b, p. 1). By creating a transparent standard that is guaranteed through a concrete and predictable set of practices, vis-à-vis the institution of the CPA, the CPA Code offers trust to society and the public for its ability to govern the discipline as an independent institution.² The CPA is positioned in CPA Code discourse as able to control and regulate it through its organized practices of ethical regulation of the discipline of psychology and psychologists specifically (CPA, 2016b, p. 1):

The Canadian Psychological Association recognizes its responsibility to help assure ethical behaviour and ethical attitudes on part of psychologists. Attempts to assure ethical behaviour and ethical attitudes include: (a) articulating ethical principles, values, and standards; (b) promoting those principles, values, and standards through formative and continuing education, supervision, peer modelling, and consultation; (c) developing and implementing methods to help psychologists monitor the ethics of their behaviour and attitudes; (d) adjudicating complaints of unethical behaviour; and (e) taking corrective action when warranted.

The CPA is therefore set apart from other subjects in the CPA Code – psychologists, clients, the discipline of psychology – through its role as an expert institution of ethical practices. The role of the CPA in the CPA Code represents the CPA as a body that is able to define ethics and ethical dilemmas, create technologies to instil ethical-professional self-management in psychologists, able to adjudicate unethical behaviour, able to produce additional ethical documents, additional training for psychologists, and so on (CPA, 2016b, p. 4):

² Psychology has been operating as a discipline in Canada since the 1920s. The CPA instituted its first Canadian Code of Ethics for Psychologists in 1986.

In addition, the principles and values could be used to help specialty areas develop standards that are specific to those areas. Some work in this direction has already occurred within CPA (e.g., *Guidelines for Non-discriminatory Practice; Guidelines for Ethical Psychological Practice with Women; Ethical Guidelines for Supervision in Psychology: Teaching, Research, Practice, and Administration*). The principles and values incorporated into this *Code*, insofar as they come to be reflected in other documents guiding the behaviour of psychologists, will reduce inconsistency and conflict between documents.

The CPA is positioned as able to speak on behalf of the discipline of psychology in terms of its representation as an autonomous ethical discipline, its ability to collectively identify and correct broad ethical problems of the discipline, and to protect the discipline from unethical practices on part of transgressing psychologists. The CPA is powerfully able to determine new ethics practices and guidelines for psychology; it is psychologists' responsibility to "Bring to the attention of the Association ethical issues that require clarification or the development of new guidelines or standards" (CPA, 2016b, p. 5).

The discipline of psychology. The discipline of psychology is a scientific-professional discipline that is positioned as separate from society and the public body by its autonomous status (CPA, 2016b): "The "**discipline of psychology**" refers to the scientific and applied methods and knowledge of psychology, and to the structures and procedures used by its members for conducting their work in relationship to *society*, to members of the public, to students or trainees, and to each other" (p. 7, italics in original). Per the CPA Code, the discipline of psychology is to serve society and the public, to be accountable, transparent, and honest in activities. It also is to do no harm. Yet simultaneously the discipline of psychology, in its division from society and the public, affords society and the public a marginalized role while it operates in a distanced, untouchable fashion. The discipline of psychology is spoken for on behalf of the CPA. The discipline of psychology is positioned as superior in its ability to produce scientific knowledge and practice, which society and the public rely on to function better in their

best interest and well-being: “A basic expectation of any discipline is that its activities will benefit members of society or, at least, do no harm. Therefore, psychologists demonstrate an active concern for the welfare and best interests of individuals and groups (e.g., couples, families, groups, communities, peoples with whom they relate in their role as psychologists” (CPA, 2016b, p. 16). As a discipline of science, the discipline of psychology stands firm and – while able to be questioned through critical inquiry – is ultimately safe and legitimate in its practice, able to maintain the trusted, reliable, helpful status with the public at large. As agents of this discipline, psychologists are ethically obliged to comply with the discipline of psychology’s rules, regulations, guidelines, and best practices lest they risk demonstrating to the public that these are risky, likely to produce harm, and will lead to jeopardizing the discipline’s autonomy within society and loss of public trust (CPA, 2016b, p. 24):

Integrity in relationships implies that psychologists, as a matter of honesty, have a responsibility to maintain competence in any specialty area for which they declare competence, whether or not they are currently practising in that area. It also requires that psychologists, in as much as they present themselves as members and representatives of a specific discipline, have a responsibility to actively rely on and be guided by that discipline and its guidelines and requirements.

Thus, like the public body, the discipline of psychology is a powerful regulator of psychologists’ uptake of the ethical-professional discourse of the CPA Code.

The public. In the CPA Code, the public body is spoken for on behalf of the CPA.

Although the public is invited to comment about the CPA Code, the public role in the development of the CPA Code is marginal. The subject position of the public body is one of trust and faith in the discipline of psychology – as enabled by the ethical practices of the CPA Code and the governing institution of the CPA (CPA, 2016b, p. 23):

The relationships formed by psychologists in the course of their work, whether the relationships are in person or through various other modalities, and whether they are identifiable individuals or groups or with the public at large, embody explicit and implicit

mutual expectations of integrity that are vital to the advancement of scientific knowledge and to the maintenance of public confidence in the discipline of psychology.

The public is represented as simultaneously distanced from the discipline of psychology in terms of involvement in shaping disciplinary practices, yet is constructed as a panopticon for monitoring the ethical-professional practices. The ever-present public could at any time revoke trust in a psychologist and worse, the discipline as a whole, in revoking “autonomous” privileges. Thus the public body is produced to be a powerful influence in enabling ethical-professional complicity of psychologists through the CPA Code. The public is produced as always already expectant of a scientific-professional performance of the discipline as this maintains the trust that empowers disciplinary practices to continue. The CPA Code likewise constructs the practices of psychologists to always be transparent in ethical-professional performance in the discipline’s activities, training and credentials, and ethical decision-making: “Make clear whether they are acting as private citizens, as members of specific organizations or groups, or as representatives of the discipline of psychology, when making statements or when involved in public activities” (CPA, 2016b, p. 26). The public body is positioned as being in need of psychology’s knowledge, requiring protection by psychologists and disciplinary activities, and reliant on the discipline for these things. Moreover, the public body as a subject upholds the division of personal and professional, as psychologists must always present themselves as professionals in public space. To avoid public scrutiny and preserve trust, psychologists are to enact professionalism by distinguishing opinions from facts, representing their credentials and qualifications, transforming subjective facets of experience into objective information, and so on. The public body is seen to recognize psychologists’ personal behaviour as a risk to trust and confidence in the discipline of psychology, a discipline that in the eyes of the public, is constructed as scientific-professional: “Personal behaviour becomes a concern of

the discipline only if it is of such a nature that it undermines public trust in the discipline as a whole or if it raises questions about the psychologist's ability to carry out appropriately his/her responsibilities as a psychologist" (CPA, 2016b, p. 5). Thus, the public body is a powerfully coercive subject created by the CPA Code to ensure ethical-professional management of the self in psychologists and the discipline of psychology.

Psychologists. Although the CPA Code constructs its ethics as relevant and applicable to all practices of disciplinary psychologists, psychologists are always already produced to be scientific-professionals. Psychologists are referred to as "scientists, practitioners, or scientist-practitioners" (CPA, 2016, p. 1) in the CPA Code, and the label "scientific" often corresponds with the professional identity. Psychologists must assume a scientific approach to knowledge production and practice. Science is thus an identity and a practice that symbolically represents psychology as a profession and its practitioners. Good ethical-professional psychologists incorporate practices of science in all of their activities. They also are to take a stance against practices that are not scientific. Given the CPA Code's construction of professional and personal in the roles of a psychologist, a psychologist is never able to be personal within the professional sphere. Personal behaviour of psychologists is simultaneously disavowed and, should anything personal enter into the psychologist's professional role, must be transformed into objective, risk management discourse. Psychologists must always already disregard their personal subjectivity – including emotion, their mental health, and so on – lest they risk their ethical judgment as compromised.

Objectivity. The ethical-professional psychologist is always already objective. Objectivity enables a form of distance from others and from subject matter of study; through self-reflection practices (see section below), psychologists must transform facets of their embodied subjectivity

to objective information. Objective information is prized as the most ethical form of knowledge available to psychologists, ideally produced under conditions of science. Psychologists must carefully gatekeep themselves, parsing out their opinions from facts, always clarifying their stance through the communication of objective information.

The primacy of objectivity in the ethical-professional identity creates more objective forms of knowledge as well as arbiters of knowledge. Since objectivity is discursively connected to science, value-freedom, and expert-professional practice, it produces certain subjects as more or less able to inform ethical issues, producing individuals that are more or less relevant to situations in practice as related to their ability to be objective. For instance, in the ethical decision-making process, the CPA Code emphasizes the incorporation of certain individuals over others in the consultation process of difficult ethical decisions (CPA, 2016b, p. 3):

Psychologists engaged in time-consuming deliberation are encouraged and expected to consult with the individuals and groups affected by the ethical problem if appropriate. In addition, they are encouraged and expected to consult with colleagues or relevant others, including advisory bodies, when such individuals or groups can add knowledge or objectivity to the decision-making process.

Psychologists are able to achieve a high status of objectivity, given their training as professionals and as scientist-practitioners. Psychologists also are instructed to stop or offset consequences of harmful activities of other professionals – psychologists or otherwise – when the harm is “not serious or the activities appear to be primarily a lack of sensitivity, knowledge, or experience” (CPA, 2016, p. 22) that could be informed by objective information. The absence or questionability of objective information signals a problem to be remedied through consultation with relevant individuals, such as those psychologists with greater professional experience or knowledge who are therefore able to be identified as objective; in other words, representing science and not opinion, emotion, embodiment, or other forms of knowledge that objectivity

disqualifies. Objectivity produces relevant and appropriate individuals in terms of the knowledge they possess, discursively able to participate or not participate – ultimately decided by the psychologists, who are always already more objective than people who are not psychologists – for example, those who seek services, participate in research, are students, and so on. The objective state of the ethical-professional, and the mode of communication as objective, must be embodied for the ethical-professional to be seen as legitimate, trustworthy, and ethical – in view of other professionals and also the public at large.

The discursive construction of knowledge hierarchy implicates that a psychologist always needs to move towards those sources of knowledge with the best practices, those who approximate psychology's knowledge, those scientific practices. Psychologists should always ensure they ask the right people, and seek the right guidance. This has implications for how psychology views society and the public, as well as those with special knowledge (e.g., advocate groups, cultural centres). The imperative to consult about matters of psychology lies with those dominant discourses most reinforced around science, knowledge, best practice, and so on. Simultaneously, other forms of knowledge, other voices that do not fall within these categories of appropriate or relevant others are subjugated by their being rejected, silenced, and disqualified as “not relevant,” unscientific, not objective, and/or not legitimized by expertise.

Fashioning competence and expertise. Psychologists must always be fashioning themselves as competent practitioners and moving towards the status of the expert. Psychologists who are able to speak from the position of expertise hold an ultimate status of authority. These are ethical-professionals who know the scope of knowledge in the field, likely have made some kind of scientific contribution – perhaps in statistical approach, theoretical critique or new direction, and so on – and are sought for their knowledge in consultation with other

professionals, media, invited lectures, and so on. They engage in knowledge production and so have likely made substantial research contributions. These psychologists are always already objectively distanced, able to evaluate and correct or reject others, and are deserving of positions of authority. Simultaneous to the construction of ethical-professional expert, others are constructed as inferior, should follow those of experts, and should seek them out for best practice information.

Following the authority of science, objectivity, expertise, and competence discourses, psychologists hold authority to assess, intervene, advise, and make decisions that affect research, clinical practice, teaching, and business activities (CPA, 2016b, p. 19):

Assess the individuals and groups (e.g., couples, families, organizations, communities, peoples) involved in their activities adequately enough to ensure that they will be able to discern what will benefit and not harm them, using assessment methods that are appropriate to the particular cultural and social contexts of the individuals and groups involved.

Competence also is signified by the ability to supervise, train, advise, or provide information about a particular area of research, clinical work, or business activity, and taking responsibility for those in training and education. It is recognition of knowing the best approach toward one's area of practice, defined within an objective, evidence-based, best practice climate: "Familiarize themselves with and take into account their discipline's guidelines and best practices for their area(s) of activity, and demonstrate a commitment to maintaining the standards of their discipline" (CPA, 2016b, pp. 29). Psychologists are thus made responsible to reproduce clinical work with clients according to evidence-based, best practice principles. Competence requires the continued consumption of scientific knowledge through activities in continuing education (CPA, 2016b, p. 19):

Keep themselves up to date with a broad range of relevant knowledge, research methods, techniques, and technologies, and their impact on individuals and groups (e.g., couples,

families, organizations, communities, and peoples), through the reading of relevant literature, peer consultation, and continuing education activities, in order that their practice, teaching, supervision, and research activities will benefit and not harm others.

Evaluating one's activities by tracking processes and defining outcomes of practices, formally recording findings, and sharing knowledge to individuals in particular channels represent professional activities of competence. The notion of "relevant others" is similar to the term "appropriate others" and is signified by the objects of consulting, decision-making, and disseminating knowledge.

Particular subject positions such as "clinical psychologist" and "teaching psychologist" provide examples of the ways in which psychologists must specifically adopt practices of science. Clinical psychologists must incorporate and employ particular knowledge when performing their role (CPA, 2016b, p. 20):

Strive to provide and/or obtain the best reasonably-accessible service for those seeking psychological services. This may include, but is not limited to, selecting assessment tools, methods, interventions, and communication modalities, that: (a) are relevant and tailored to the needs, characteristics, and contexts of the primary client or contract examinee; and (b) have reasonable empirical or theoretical support for validity and efficacy in light of those needs, characteristics, and contexts.

Agents of clinical psychology also must provide reasonable services to recipients of their services, when it comes to contact, support, and referral: "Give reasonable assistance to secure needed psychological services or activities, if personally unable to meet requests for needed psychological services or activities" (CPA, 2016, p. 21), and, "Provide a primary client, if appropriate and if desired by the primary client, with reasonable assistance to find a way to receive needed services in the event that third party payments are exhausted and the primary client cannot afford the fees involved" (CPA, 2016b, p. 21). Preventing harm to these clients encompasses the provision of consistent contact until a referral has been made and the recipient is satisfied, or, if the psychologist believes that discontinuing services will not harm the client.

They must “Not delegate activities to individuals or groups not competent to carry them out to the benefit of others” (CPA, 2016b, p. 19).

For psychologists who teach, the information communicated in education activities must be “current and scholarly” (CPA, 2016b, p. 20). They also are to foster the scientific and professional development of students or those they supervise “by ensuring that they understand the values and ethical prescriptions of the discipline, as well as the competencies needed for their areas of activity, and by providing or arranging for adequate working conditions, timely evaluations, and constructive supervision, consultation, and experience opportunities” (CPA, 2016b, p. 20). Encouraging student engagement in scientific and professional activities, such as “the publication of worthy student papers” (CPA, 2016b, p. 20) is another important activity of those in teaching roles. But also important in facilitating ethical scientific and professional growth is students is for the psychologist to “Assist in the development of those who enter the discipline of psychology by helping them to acquire a full understanding of their ethical responsibilities and the needed competencies of their chosen area(s), including an understanding of critical analysis and of the variations, uses, and possible misinterpretations and misuses of the scientific paradigm” (CPA, 2016b, p. 31). As such, competence protects and promotes science-sanctioned activities of the discipline, playing an important influential role in the discursive production of practitioners and students in training.

The ethical panopticon is further produced through the discourse of competence – the recognized, evidence-based practices of psychologists variously required to carry out activities of the discipline. For clinical psychologists, this could be registration with a regulatory body. For others, it could be training in graduate education, certifications in specialized areas of practice, continuing education, and so on. Competent psychologists are able to operate in a particular

mode of practice independently, without oversight, although must consult with individuals on issues that arise that fall outside of their scope of practice. Because of this, competence enables the hierarchy of knowledge by dividing those who “know” and who “do not,” and in situations where the psychologists themselves requires further knowledge, they are responsible to draw on the knowledges recognized as objective and scientific – in other words, knowledges of consultants or supervisors seen as expert or relevant. Those who are regarded as not competent are able to be dismissed, rejected, seen as unscientific, and excluded from decisions and actions in practice. Incompetent practices are seen to be risky, harmful, and threaten trust of others and the discipline itself, and must be avoided at all costs.

Managing risk. Central to the subject of the psychologist is the avoidance of risky practices. As psychologists are accountable to themselves, the people they work with, the discipline, the CPA, and the public body, psychologists must adhere to ethical and practice standards in everyday practices. As these practices of anticipating, addressing, and preventing risk must be engaged in everything that psychologist do, codes of ethics and standards of practice such as the CPA Code come to be regarded as instrumental technologies of self-surveillance in shaping ethical-professional self. The establishment of standardized procedures for every facet of practice leaves psychologists bound to these practices. Presented as providing the benefits of transparency and accountability to all those involved with psychologists, standardized procedures also serve to script all psychologists’ activities with others. They further protect the discipline’s practices in terms of not only ensuring they happen, but that they happen in a particular way, within the terms of productivity, efficiency, and cost – within the neoliberalist structure of Canadian culture.

Legal discursivity shapes the ways in which psychologists may consider morality. Morality is cast within rights-based discourse, subscribing to individualistic, legalistic practices as well as consent and participation and privacy and confidentiality. Clients and research participants are the most common examples of people who would provide consent. As this process is very specifically generated by psychological discourse and the particular professional practices of the psychologist, the style, content, and process of consent favours the psychologist. It enables a self-protective approach to ethics as it intertwines with processes of documentation, transparency, and accountability for all parties involved. Individuals who are subject to psychologists may not be able to consent for themselves if they are deemed unfit or are legally under the care of someone else. The ethical actions of psychologists must align with laws affecting their practice as much as possible.

Risk management has implications for the kinds of participation individuals may have in psychology. Psychologists engaged in research also are to “Screen research participants and select those least likely to be harmed, if more than minimal risk of harm to some research participants is possible” (CPA, 2016b, p. 21). Risk management, as determined and exerted by psychologists, means that psychologists define what constitutes risky procedures, and ultimately have the choice of who is able to participate in research, decisions about care, and so on. In doing so, risk management discourse invokes the discourse of expertise, privileging certain relevant or appropriate others in decisions being made about psychology practices as well as in how decisions are being made in consideration of risk. With regard to research and interpretation of findings, psychologists are *encouraged* to consult with the groups of study. A consultative role constitutes a marginalized role in research practices for study participants (CPA, 2016b, p. 20):

Consult, unless declined or contraindicated (e.g., critical inquiry studies, possibility of harm, legally disallowed) with the individuals and groups (e.g., couples, families,

organizations, communities, peoples) being studied, in order to increase the accuracy of interpretation of results, to enhance the benefit of the results to individuals and groups, and to minimize risk of misinterpretation or misuse.

Psychologists in clinical practice are responsible for the assessment and monitoring of their clients' psychological status: "Ensure that any incidental findings suggesting that intervention may be needed to avoid serious harm are communicated as soon as possible to research participants and contract examinees" (CPA, 2016b, p. 21). They also must continue the provision of care until clients communicate that service is no longer needed or are in the care of another provider. Psychologists working in clinical practice also are to assist clients in finding alternative services, to adjust fees in the event of a client's financial hardship, maintain support until other recommended or referred services have begun and are useful. These practices centre around the notion of reasonable – giving reasonable notice, providing reasonable judgment and assistance, hinging on the practitioner's own perceptions and positions.

Personal behaviour. Discursively constituting the "personal" as a site of risk, personal discourse as an appropriated knowledge in the CPA Code that seeks to manage facets of the personal or self in relation to the ethical-professional role. This discourse operates as a technology to remove the objects of this personal discourse from ethical-professional performativity, and/or transform professional aspects of self into objective, legitimate, and less risky professional. The construction of "personal" in the CPA Code is that there is an ethical-professional self that is cohesive, stable, and dividable from a personal self. This discourse is therefore constituted by objectivity and risk management discourses, all of which interdiscursively cast personal discourse and knowledges as inferior.

Personal behaviour discourse is produced, in relation to ethical decision-making, as a threat to objectivity. Sound decision-making is a practice that is explicit, defensible, and

legitimate – or a rational, reasonable process. In the event of challenges to decision-making (CPA, 2016b, p. 4):

[P]sychologists may be faced with ethical dilemmas that are still difficult to resolve. In these circumstances, psychologists are encouraged and expected to engage in an ethical decision-making process that is explicit enough to bear public scrutiny. In some cases, resolution might be a matter of personal conscience. However, decisions of personal conscience are also expected to be the result of a decision-making process that is based on a reasonably coherent set of ethical principles and that can bear public scrutiny.

In adhering to the CPA Code, ethical-professional psychologists should choose every professional action knowing that any other person could take a topographic view of the action, reasonably make sense of choices and rationales, and be able to easily discern the action was right. Although here the realm of personal behaviour is suggested, so too is the assurance that a rightly-acting practitioner would utilize the Principles, values, and standards of the CPA Code, use the decision-making process, and rely on reasoned logic to enact their decision. Thus, personal behaviour is to be assimilated into the ethical professional role as much as possible through transformation into objectivity, managed through consultation, or altogether avoided lest the practitioner be under scrutiny for poor personal decision-making.

Emotion is a discursive object of personal discourse within the CPA Code. It is referenced in relation to ethical decision-making: “[S]ome ethical issues (particularly those in which ethical principles, values, or best interests conflict) are not easily resolved, might be emotionally distressful, and might require time-consuming deliberation” (CPA, 2016b, p. 2). Here, the presence of emotional difficulty in ethical decision-making signals the need for consultation and/or other means of management, and possibly has implications for productivity and expediency of ethical resolution. In relation to psychologists’ experience of social issues, there is a message for psychologists to maintain a particular kind of emotional approach: “They need to engage in even-tempered observation and interpretation of the effects of societal

structures and policies, and their process of change, developing the ability of psychologists to increase the just and beneficial use of psychological knowledge and structures, and avoid their misinterpretation or misuse” (CPA, 2016b, p. 30). “Even-tempered” suggests an objective, reasonable, and relatively unemotional approach to understanding and responding to problematic issues of social structures and policies. Solutions of consultation, defaulting to CPA Code reasoning, and, through self-reflection, transforming experiences of subjectivity into objectivity, suggest that objects of the personal – including emotion, conscience, and behaviour – must be subject to professional management or must be altogether removed from professional practice. Thus, it becomes untenable for a psychologist to be “emotional” in the context of an ethical-professional role.

For the preservation of societal and public trust, consistent and accurate representation of the ethical-professional is an important performance for psychologists occupying public spaces. I use the term “public space” to indicate embodied performances in speeches, interviews, and presentations, but also those written and viewed through mediums such as publications, reports, websites, social media, and others. The authors instruct psychologists on the enforceability of the CPA Code in professional situations but add that it is optional for personal behaviour (CPA, 2016b, p. 5):

This *Code* is intended to guide and regulate only those activities a psychologist engages in by virtue of being a psychologist. There is no intention to guide or regulate a psychologist’s activities outside of this context, although an individual psychologist might make a personal decision to be guided by the *Code*’s principles and values outside of this context. Personal behaviour becomes a concern of the discipline only if it is of such a nature that it undermines public trust in the discipline as a whole or if it raises questions about the psychologist’s ability to carry out appropriately his/her responsibilities as a psychologist.

Yet simultaneously, as personal issues are regarded within the experience of the professional role, psychologists are made responsible to manage themselves such that their psychologist

performativity remains uninfluenced by problems of the personal. For instance, psychologists must “Seek appropriate help and/or discontinue scientific, teaching, or practice activity for an appropriate period of time, if a physical or psychological condition reduces their ability to benefit and not harm others” (CPA, 2016b, p. 19). In the only mention of self-care, psychologists are to avoid stressful and burnout-inducing situations so that their competent decision-making activities are optimized: “Engage in self-care activities that help to avoid conditions (e.g., burnout, addictions) that could result in impaired judgment and interfere with their ability to benefit and not harm others” (CPA, 2016b, p. 19). Thus the creep of CPA Code ethics within the personal realm of the psychologist takes one form in the regulation of the addictions and stress – mental health – of the psychologist.

Psychologists must always present themselves as ethical-professionals when engaging in activities of the discipline. For example, psychologists must distinguish when they are acting in the professional role and when they are not: “Make clear whether they are acting as private citizens, as members of specific organizations or groups, or as representatives of the discipline of psychology, when making statements or when involved in public activities” (CPA, 2016b, p. 27). Psychologists must “Not engage publicly (e.g., in public statements, presentations, research reports, with primary clients or other contacts) in degrading comments about others, including demeaning jokes based on such characteristic as culture, nationality, ethnicity, colour, race, religion, sex, gender, or sexual orientation” (CPA, 2016b, p. 12). Demonstration of qualifications – of themselves and of others – is another instance of the importance of professional representation (CPA, 2016b, p. 25):

Accurately represent their own and their colleagues’ qualifications (e.g., credentials, education, experience, competence, affiliations) in all spoken, written, or printed communications, being careful not to use descriptions or information that could be

misinterpreted (e.g., citing membership in a voluntary association of psychologists as a testament of competence).

Similarly, psychologists embodying teaching positions must “Present instructional information accurately, avoiding undue bias in the selection and presentation of information, and publicly acknowledge any personal values or bias that influence the selection and presentation of information” (CPA, 2016b, p. 26). Therefore, within personal discourse, the personal is fundamentally divided from the professional role, while simultaneously the CPA Code comes to govern the mental health of psychologists such that the psychologist must always already be in a state that does not cause problems for others. Emotion and other aspects of subjectivity signal a problem to be developed, and personal decision making must always reflect the CPA Code discourse as much as possible.

Self-reflection. In the CPA Code, reflexive engagement within the ethical-professional role is discursively constructed as the juncture of the psychologist’s personal self with their professional activities. This self-reflection discourse is intertextual with critical inquiry discourse, and is discursively networked with ethical decision-making as well as locating oneself within everyday professional practices. As a discursive product of the CPA Code, self-reflection can be considered as a technology of the self, a tool of self-monitoring to transform facets of one’s subjectivity – that is, one’s biases, values, interests, and other discursive objects of the personal – into objective practice. Therefore, self-reflection is additionally influenced by objectivity discourse. Given that one must be aware of one’s areas of professional specialty or common areas of practice, and, as a corollary, areas of unfamiliarity or lack of expertise, “self-knowledge” and “self-reflection” are a part of competent practice (CPA, 2016b, p. 17).

In the CPA Code, the discourse of self-reflection is connected to critical inquiry discourse, as critical analysis requires the consideration of “self” in professional, competent practice and

how their practice has an impact on their professional activities. That is, psychologists must consider their work within the broader society, and the implications of their practice for the betterment of society: “In order to be responsible and accountable to society, and to contribute constructively to its ongoing development, psychologists need to be willing to work in partnership and collaboration with others, be self-reflective, and be open to external suggestions and criticisms about their work and the place of the discipline of psychology in society” (CPA, 2016b, p. 30). Self-reflection represents a knowing of facets of the personal self, and monitoring them for their risky or negative influence on professional practice (CPA, 2016b):

[Psychologists] engage in self-reflection regarding how their own values, attitudes, experiences, and social context (e.g., culture, ethnicity, colour, religion, sex, gender, sexual orientation, physical and mental abilities, age, socio-economic status) influence their actions, interpretations, choices, and recommendations. This is done with the intent of increasing the probability that their activities will benefit and not harm the individuals and groups (e.g., couples, families, organizations, communities, peoples) with whom they relate in their role as psychologists. (p. 17)

In addition to accuracy and honesty, and the obvious prohibitions of fraud or misrepresentation, meeting expectations of integrity is enhanced by self-knowledge and the use of critical analysis. Although it can be argued that science is value-free and impartial, scientists are not. Personal values and self-interest can affect the questions psychologists ask, how they ask those questions, what assumptions they can make, their selection of methods, what they observe and what they fail to observe, and how they interpret their data. (p. 24)

Objects of personal subjectivity play a role in the ways psychologists come to think about professional matters: “Consideration of how one’s own biases, stresses, self-interest, or cultural, social, economic, institutional, legal or political context and background, might influence the development of or choice between courses of action” (CPA, 2016b, p. 3). Psychologists also must demonstrate an openness to the observations of others within this discourse: “Consider seriously others’ concerns about one’s own possibly unethical actions or unrecognized biases and attempt to reach an agreement on the issue and, if needed, take appropriate action” (CPA, 2016b,

p. 5). As a technology of the self, competent activities act to forge the psychologist's accountability to think ethically and "be" ethical – or not personal – through objective self-reflection. Self-reflection is engaged to further produce benefit and reduce harm by the psychologist's cognitive process of locating oneself consciously within the practices that they identify as knowing.

Where the discourse of self-reflection becomes imbricated with risk discourse is in its requirement of transforming this self-knowledge into an objective response. This is accomplished in the CPA Code by the discursive constitution of ethical decision-making, incorporating objects of risk management such as probability, harm, and benefit. This is accomplished by the representation of ethical decision-making as complex – as one encounters "personal" within a "professional" role (CPA, 2016b, pp. 2-3):

Although the above ordering of principles can be helpful in resolving some ethical questions, issues, or dilemmas, the complexity of many situations requires consideration of other factors and engagement in a creative, self-reflective, and deliberative ethical decision-making process that includes consideration of many other factors.

The discourse of self-reflection signifies a need to manage "risky" parts of the self within the context of the ethical-professional role. As self-reflection is further defined in the context of knowing oneself, the risks associated with "personal" signals a need for the self to become objective (CPA, 2016b):

Psychologists are not expected to be value-free or totally without self-interest in conducting their activities. However, they are expected to understand how their experiences, attitudes, culture, beliefs, values, individual differences, specific training, external pressures, personal needs, and historical, economic, and political context interact with their activities, to be open and honest about the influence of such factors, and to be as objective and unbiased as possible under the circumstances. (p. 24)

Evaluate how their own experiences, attitudes, culture, beliefs, values, individual differences, specific training, external pressures, personal needs, and historical, economic, and political context might influence their activities and thinking, integrating this awareness into their attempts to be as objective and unbiased as possible in their

research, service, teaching, supervision, employment, evaluation, adjudication, editorial, and peer review activities. (p. 26)

Evaluate how their own experiences, attitudes, culture, beliefs, values, individual differences, specific training, external pressures, personal needs, and historical, economic, and political context might influence their interactions with and perceptions of others, and integrate this awareness into their efforts to benefit and not harm others. (p. 18).

Although reflexivity as a practice has been taken up in a multitude of ways in research and practice (see the Reflexivity section of the Methodology chapter as an example), it typically incorporates the notion of interpretation and/or study of self as one engages with worldly phenomena. In the CPA Code, there is no mention of this discourse – its possibility is made abject from the CPA Code’s disavowal of subjectivity in the construction of the ethical-professional self. In its act of transforming subjective phenomena of psychologists into objectivity, subjectivity becomes abject, becomes dangerous, and is erased from ethical discourse. For example, feminist ethics practices of attention to emotion, embodiment, and intuition fall outside of this CPA Code, could be seen as suspect or risky, and cast outside of disciplinary practice. Furthermore, it reinforces the construction of rational logic as harmless, as privileged and valued information, that “personal” *can* and *should* be transformed into a valued ethical-professional position. Simultaneously, science and objectivity discourses are buttressed, and the downloading of responsibility to be “objective” becomes a personal issue for psychologists. Thus subjectivity in terms of the personal life of psychologists is neither scientific nor professional and, in the CPA Code, is positioned as a risk to be managed.

Professional responsibility. Psychologists are made responsible for the practices of other people. Psychologists are to be alert for unethical practices of others – within and outside of their discipline – and act to address the issue. This should involve direct confrontation but be followed up by further reporting to authorities relevant to the context. The surveillance of others adds to

the “ethical panopticon” psychologists come to internalize and regulate within themselves to “be” ethical-professionals.

Likewise, psychologists are instructed to protect the discipline’s knowledge, technologies, and practices from being misinterpreted and misused. Such acts can occur as a result of incompetence, or exposure of technologies privileged for psychology experts – the CPA Code authors provide an example of the “loss of security of assessment techniques” (CPA, 2016b, p. 32). Moreover, psychologists are made responsible for the accurate portrayal of not only their own but their colleagues’ credentials: “Accurately represent their own and their colleagues’ qualifications (e.g., credentials, education, experience, competence, affiliations) in all spoken, written, or printed communications, being careful not to use descriptions or information that could be misinterpreted (e.g., citing membership in a voluntary association of psychologists as a testament of competence)” (CPA, 2016b, p. 25). Surveilling the competent practices of others is instilled through activities of teaching of colleagues, students, administrators, and others (CPA, 2016b):

Facilitate the professional and scientific development of their employees, supervisees, students, and trainees by ensuring that they understand the values and ethical prescriptions of the discipline, as well as the competencies needed for their areas of activity, and by providing or arranging for adequate working conditions, timely evaluations, and constructive supervision, consultation, and experience opportunities. (p. 20)

Integrity in relationships implies that psychologists, as a matter of honesty, have a responsibility to maintain competence in any specialty area for which they declare competence, whether or not they are currently practising in that area. It also requires that psychologists, in as much as they present themselves as members and representatives of a specific discipline, have a responsibility to actively rely on and be guided by that discipline and its guidelines and requirements. (p. 25)

To reproduce not only disciplinary boundaries but areas of competence, psychologists are still encouraged to hold a breadth of knowledge in psychology but also be aware of other disciplines

and practices: “Make themselves aware of the knowledge and skills of other disciplines (e.g., law, social work, medicine, business administration), and make referrals or advise the use of such knowledge and skills where relevant to the benefit of others” (CPA, 2016b, p. 20). Placing boundaries between psychology and other disciplines may enable practices to be regarded as not psychology, not scientific, and therefore not relevant to one’s practice.

Responsibility is placed upon every single individual to monitor the ethical behaviour of others, and is to intervene in situations of potential or actual unethical situations (CPA, 2016b, p. 32):

Uphold the discipline’s responsibility to society by bringing incompetent or unethical behaviour, including misinterpretations or misuses of psychological knowledge and techniques, to the attention of appropriate authorities, committees, or regulatory bodies, in a manner consistent with the ethical principles of this *Code*, if informal resolution or correction of the situation is not appropriate or possible.

As part of conflict-resolution practice, psychologists are responsible to “Bring concerns about possible unethical actions by a psychologist directly to the psychologist when the action appears to be primarily a lack of sensitivity, knowledge, or experience, and attempt to reach an agreement on the issue and, if needed on the appropriate action to be taken” (CPA, 2016b, p. 5).

In more serious cases, psychologists must notify appropriate regulatory bodies of misconduct they observe: “Bring concerns about possible unethical actions of a more serious nature (e.g., actions that have caused or could cause serious harm; actions that are considered misconduct in the jurisdiction) to the person(s) or body(ies) best suited to investigating the situation and to stopping or offsetting the harm” (CPA, 2016b, p. 5). Members are even responsible to intervene on harms are of a lesser degree (CPA, 2016b, p. 22):

Act also to stop or offset the consequences of harmful activities carried out by another psychologist or member of another discipline, when the harm is not serious or the activities appear to be primarily a lack of sensitivity, knowledge, or experience. This may include talking informally with the psychologist or member of the other discipline,

obtaining objective information and, if possible and relevant, the assurance that the harm will discontinue and be corrected.

Psychologists also are obligated to adhere to the CPA Code in the event of an ethical issue conflicting with other regulatory processes: “Speak out and/or act, in a manner consistent with the four principles of this *Code*, if the policies, practices, laws, or regulations of the social structures within which they work seriously ignore or contradict any of the principles of this *Code*” (CPA, 2016b, p. 33). The CPA suggests confronting an individual if one observes unethical behaviour and also for an individual psychologist to “seriously” consider something brought to one’s attention, and not be “vexatious or malicious” in these situations. Thus, psychologists are made to surveil themselves and also each other in terms of addressing and reporting unethical behaviour.

Psychologists also are accountable to intervene on the harmful practices they encounter with others (CPA, 2016b, p. 22):

Act to stop or offset the consequences of seriously harmful activities being carried out by another psychologist or member of another discipline, when there is objective information about the activities and the harm. This may include reporting to the appropriate regulatory body, authority, or committee for action, depending on the psychologist’s judgment about the person(s) or body(ies) best suited to stop or offset the harm, and would be consistent with the confidentiality rights and limitations of the persons involved.

Greater responsibility to improve social conditions is expected of those with expertise, or with psychologists whose practice incorporates social development in theory or scientific research. That is, psychologists are to express their professional knowledge of society insofar as their expertise with society as a psychologized topic within a scope of practice enables them to: “Speak out, in a manner consistent with the four principles of this *Code*, if they possess expert knowledge that bears on important societal issues being studied or discussed” (CPA, 2016b, p.

33). The notion of a gradient is introduced to qualify what warrants action against problematic structures or policies that “seriously ignore” CPA Code principles (CPA, 2016b, p. 30):

[I]f structures or policies seriously ignore or oppose the principles of respect for the dignity of persons and peoples, responsible caring, integrity in relationships, or responsibility to society, psychologists involved have a responsibility to speak out in a manner consistent with the principles of this *Code*, and advocate for appropriate change to occur as quickly as possible.

Certain ethical-professional psychologists must “Provide appropriate individuals and groups (e.g., couples, families, organizations, communities, peoples) with any psychological knowledge relevant to their informed participation in the shaping of social policies and structures, if the psychologist possesses expert knowledge that bears on the social policies and structures” (CPA, 2016b, p. 33). Thus, the precedence of competence for critical or social issues is positioned to be of greater concern for particular psychologists than for others: “If their work is related to societal issues, be especially careful to keep well informed of social, cultural, historical, economic, institutional, legal, and political context issues through relevant reading, peer consultation, and continuing education” (CPA, 2016b, p. 33). The ability to speak as someone who works in social issues must be hyper-representative of dominant discourses of psychology. This may act to exclude individuals from speaking out from a position of social awareness, or from speaking about knowledge through other means than expertise. Moreover, speaking from a position of expertise enables science discourses of objectivity, positivist empiricism, and risk management. It is interesting to note the particular emphasis on the level of expertise that the psychology subject of social issues must meet in order to be able to speak; the CPA Code does not instruct anywhere else that a psychologist working in a particular area must have such expertise.

Clients. In the CPA ethics documents, clients do not speak for themselves; rather they are spoken for by the CPA. Clients are afforded a marginal role in the course of their work with psychologists, as psychologists (as ethical-professional practitioners) must take up best practices, empirically-based practices, follow standardized and legal practices of consent and participation, and be accountable for their practices. In the CPA Code, the subjectivity of clients is one of dependence on the psychologist for the ways in which interactions take shape, their involvement in choices for work with psychologists, and their involvement in the resolution of ethical dilemmas. Although clients are afforded some role in the decisions that happen in their care with psychologists, and in ethical decision-making, they are evaluated for their “appropriateness” and “relevance” of knowledge and their participation is directed by psychologists as such. In the processes that make psychologists accountable for their ethical-professional decisions, they must take care of the “checks and balances” as informed by the dominant discourses of the CPA Code. The ableist construction of vulnerable clients in the CPA Code enables paternalistic responses by psychologists, by the discipline of psychology, and in so-called ethical psychological practice. I discuss below the subject positions of vulnerable clients, diverse clients, and women clients.

Vulnerable clients. The CPA Code positions vulnerability as requiring the “greatest responsibility” of the discipline of psychology in the context of the social contract with society (CPA, 2016b, p. 10, 17). Vulnerability in the CPA Code is discursively constructed by objects such as culture, legality, marginalization and oppression, as well as individuals and groups of people. Vulnerability as intertextual with risk management discourse signals a response of psychologists as more complex and thus possibly requiring greater oversight through consultation, supervision, or other ways that lead to greater surveillance of people assessed as being vulnerable.

While Principle I concerns “moral rights” and its discourse objects, Principle II discourse employs the language of “welfare” and “best interests” of vulnerable subjects. This translates to the intersection of vulnerability with discourse of “caring” – and therefore to practices related to risk/benefit, harm, and competence (CPA, 2016b, p. 17):

Responsible caring recognizes and respects the ability of individuals and groups (e.g., couples, families, organizations, communities, peoples) to make decisions for themselves and to care for themselves and each other. It does not replace or undermine such ability, nor does it substitute one individual’s or group’s opinion about what promotes the well-being and best interests of another for that other individual’s or group’s competent decision making.

Psychologists recognize that as the vulnerabilities of individuals and groups (e.g., couples, families, organizations, communities, peoples) increase, or their power to control their environment or their lives decreases, psychologists have an increasing responsibility to seek ethical advice and to establish safeguards to protect the well-being and best interests of the individuals or groups involved. For this reason, psychologists consider it their responsibility to increase safeguards to protect and promote the well-being and best interests of the individuals and groups involved in their activities proportionate to the degree of vulnerability of these individuals and groups.

Representing a challenge to the discursual objects of autonomy and choice in the provision of informed consent, “vulnerability” signals a set of practices that psychologists engage in their work in order to be ethical-professional subjects. The CPA Code first mentions “vulnerable” as a definition within the terms of reference section (CPA, 2016b, pp. 8-9):

“Vulnerable” refers to *individuals* or *groups* whose dignity, well-being and *best interests* are more easily violated due to such factors as: (a) characteristics of the *individual* or *group* (e.g., level of cognitive and emotional functioning; history of oppression); (b) level of voluntary consent/assent (e.g., serious consequences threatened if consent is not given); (c) interests of *individual* or *group* compete with interests of more powerful *individual(s)* or *group* (e.g., claimant and insurance company); and (d) high risk of harm (e.g., life-changing decision based on inadequate assessment).

“Vulnerability” represents an object of knowledge production by psychological science, something to be known, discovered, and sought out by science for greater understanding:

“Vulnerability can be permanent or temporary, and can be increased by such factors as limited

capacity to consent, reduced voluntariness to their consent or their involvement, difficulties in cognitive or emotional functioning, economic disadvantage, history of discrimination or oppression due to culture or other factors, or urgency of a situation” (CPA, 2016b, p. 11). The CPA Code constructs vulnerability with culture as objects, objects associated with responsibility as managed within competence and risk management discourse: “Be sufficiently sensitive to and knowledgeable about individual and group characteristics, culture, and vulnerabilities to discern what will benefit and not harm the individuals and groups (e.g., couples, families, organizations, communities, people) involved in their activities” (CPA, 2016b, p. 19). Vulnerability may be an *individual characteristic*, imply legal discourse related to “capacity,” or refer to those who are somehow in particular need of psychologists’ ethical decision-making. Vulnerability also may constitute a group of individuals from nondominant culture and who have experienced marginalization or oppression by dominant culture. Vulnerability also is acknowledged in the supplemental guidelines of *Non-discriminatory Practice* (CPA, 2001) and *Ethical Psychological Practice with Women* (CPA, 2007). Thus, people who are vulnerable within the ethical practice of psychology consist of a range of individuals *who are not White and male* (see next subsection, Diversity). Vulnerability also signals an evaluative relationship of psychologists with another, for example, students (CPA, 2016b, p. 11):

Normally, the individuals and groups directly receiving or involved in the psychologist’s activities (e.g., research participants, primary clients, contract examinees, students, trainees) are in a more vulnerable position than those indirectly involved (e.g., employers, colleagues, interdisciplinary or intradisciplinary team members, other collaborators, organizational or community leaders, government, retaining parties, third party payers, the general public).

In the discursive representation of responsibility in work with vulnerable individuals, the CPA Code naturalizes vulnerability with a reduction in the vulnerable subject’s “power to control their environment” (CPA, 2016b, p. 11) or the vulnerable subject’s reduced ability to decide what

happens to them in their encounters with day-to-day life. This naturalized reduced ability for vulnerable subjects to make decisive choices over their lives is a discursive strategy to enable psychologists to assume governing power over vulnerable subjects through “safeguards” and “promot[ion] of moral rights” (CPA, 2016b, p. 11):

Psychologists recognize that as the vulnerabilities of individuals and groups (e.g., couples, families, organizations, communities, peoples) increase, or their power to control their environment or lives decreases, psychologists have an increasing responsibility to seek ethical advice and to establish safeguards to protect the moral rights of the persons and peoples involved. For this reason, psychologists consider it their responsibility to increase safeguards to protect and promote the moral rights of the persons and peoples involved in their activities proportionate to their vulnerability.

In discursive constitutions of vulnerability and informed consent, vulnerability discourse is shaped by legal, competence, and risk management discourses. The low power status of vulnerable individuals positions them as risky subjects, in need of greater expert vigilance and psychological “safeguarding” or control. The “safeguarding” provided by psychologists upholds legal discourse of practices with vulnerable persons, framed within moral discourse (CPA, 2016b, p. 11):

As the moral rights any individual or group exist within the context of the moral rights of other individuals and groups, and of responsible caring (see Principle II), there might be circumstances in which the possibility of serious detrimental consequences to themselves or others, a diminished capacity to be autonomous, or a court order, would disallow aspects of some rights (e.g., privacy and confidentiality, self-determination, liberty). Indeed, such circumstances might be serious enough to create a duty to warn or protect others...However, psychologists still have a responsibility to respect the moral rights of the persons and peoples involved to the greatest extent possible under such circumstances, and to do what is necessary and reasonable to reduce the need for future disallowances.

Since vulnerable subjects are constructed to have lower autonomy and control of their lives, psychologists must conceptualize informed consent, specifically modified with greater expert oversight as part of safeguarding: “Seek an independent and adequate ethical review of moral rights issues and protections for any research involving vulnerable groups or individual members

of vulnerable groups, including individuals of diminished capacity to give informed consent, before making a decision to proceed” (CPA, 2016b, p. 14). Psychologists must ensure that the right scientific mechanisms are put in place. Moreover, psychologists must “Seek to use methods that maximize the understanding and ability to give consent of vulnerable groups or members of vulnerable groups, including persons of diminished capacity to give consent” (CPA, 2016b, p. 14).

Given the construction of the vulnerable subject as requiring greater safeguarding, and particularly so when there is *not* voluntary consent from a vulnerable person, the psychologist must build accountability practices into the approach to caring for these individuals. Further reproducing expert oversight over the lives of vulnerable people, psychologists are obligated to secure supervision and consultation: “[P]sychologists consider it their responsibility to increase safeguards to protect and promote the well-being and best interests of these individuals and groups involved in their activities proportionate to the degree of vulnerability of these individuals and groups” (CPA, 2016b, p. 18). Obtaining ethical advice, supervision, consultation, and similar practices legitimizes the actions of the psychologist *over and above* those expressed by the vulnerable person.

The CPA Code instructs psychologists to fairly consider the inclusion of vulnerable individuals in their work: “Seek to design research, teaching, supervision, practice, and business activities in such a way that they contribute to the fair distribution of benefits to individuals and groups (e.g., couples, families, organizations, communities, peoples), and that they do not unfairly exclude those who are vulnerable or might be disadvantaged” (CPA, 2016b, p. 12). Following the cautionary discourse around vulnerable subjects and representation, psychologists are warned about portrayal of vulnerable subjects in research (CPA, 2016b, p. 33):

Exercise particular care when reporting the results of any work regarding vulnerable groups, ensuring that results are not likely to be misrepresented or misused in the development of social policy, attitudes, and practices (e.g., encouraging manipulation of vulnerable individuals, couples, families, organizations, communities, or peoples; reinforcing unjust discrimination against any specific population).

Yet this caring is determined by those in positions of power, reflecting empirical science practices in psychology. Safeguarding practices of vulnerable subjects means that these individuals are less likely to be included in research practices: “Not use vulnerable groups or individual members of vulnerable groups, including persons of diminished capacity to give informed consent, in research studies, if the research involved may be carried out equally well with groups or individuals without such vulnerabilities” (CPA, 2016b, p. 14). Moreover, while psychologists are instructed to provide individuals with “diminished capacity” opportunity to participate in informed consent practices, ultimately, psychologists have the power to exercise actions without vulnerable subject consent: “Seek willing and adequately informed participation from any persons of diminished capacity to give informed consent, and proceed without this assent only if the service or research activity is to be considered of direct benefit to that person” (CPA, 2016b, p. 15).

As I discuss in the Diversity section, vulnerable subjects thus are afforded a subjugated position in the CPA Code, an exclusion based on normative, Eurocentric representations. Such exclusionary practices simultaneously reinforce discourses of “normal” representation in research practices, permitting a divide between those who are “normal” and those who are not based in representations of who is allowed to enter research. It further signifies the imperialist, colonialist practices within the CPA Code. At the same time, it reinforces “group differences” by inviting these subjects when such research cannot be carried out equally well “without such vulnerabilities” – that is looking for comparisons in differences between vulnerable groups of

people and other groups of people. At the same time, psychologists are now able to wield greater decisive power over individuals labelled vulnerable. This is because the vulnerable subject possesses a reduced ability to distinguish what is good and right for them relative to the expertise of the psychologist and/or the discipline of psychology. Moreover, “degree of vulnerability of these persons” (CPA, 2016b, p. 11) suggests once again the ability for subjectivity to be quantified – this time in relation to vulnerability – allowing greater decisive intervention by psychologists over those who possess an increasing number of vulnerable characteristics.

Diverse clients. The *Guidelines for Non-discriminatory Practice* (CPA, 2001) are produced from the discourse of the second and third CPA Codes (1991, 2000) and focus on the application of the CPA Code to “non-discrimination” and the object of “diversity.” The objectives of this guideline are stated as twofold: “The goal is to promote non-discriminatory care in therapeutic work with clients, as well as to provide guidelines for evaluating the extent to which one’s work falls within the parameters of non-discriminatory practice” (CPA, 2001, p. 1). The authors of the CPA Code assume authority over diversity as a naturalized and progressive subject of psychological science by instructing psychologists of the need to be aware of growing diversity in the societal context in which psychologists work (CPA, 2001, p. 1):

The goal is to promote non-discriminatory care in therapeutic work with clients, as well as to provide guidelines for evaluating the extent to which one’s work falls within the parameters of non-discriminatory practice. As our society and culture becomes more diverse, and as we become more aware of specific diversities, it is important that psychologists gain an awareness of the need for non-discriminatory practice. As the need arises, guidelines can be developed for the use of specific diversities.

In these guidelines, diversity is more explicitly linked to vulnerability discourse through the assignment of lower power as a result of an inability to “control their environment” (CPA, 2001, p. 2):

Psychologists also recognize that as individual, family, group, or community vulnerabilities increase, or as the power of persons to control their environment or their lives decreases, psychologists have an increasing responsibility to seek ethical advice and to establish safeguards to protect the rights of those less able to protect themselves. These responsibilities have special significance in a society which is becoming more diverse culturally and economically and which has not achieved gender equality.

The discourse of diversity is thus intertextual with the discourse of vulnerability. This is further written in instruction to psychologists about the “additional responsibility to take care that persons in vulnerable positions have equal access to the benefits of psychological knowledge and services” (CPA, 2001, p. 2).

The object “oppression” likewise appears in diversity discourse: “Recognize the reality, variety, and implications of all forms of oppression in society, and facilitate clients’ examination of options in dealing with such experiences” (CPA, 2001, p. 4), and “empowerment” also are brought in to this discourse (CPA, 2001, p. 4):

There is social injustice when segments of society are devalued or oppressed. In a society that is increasingly diverse, there is an increasing potential for injustice. To the extent that individuals and groups without power suffer oppression in our imperfect society, psychologists have an ethical responsibility to use their knowledge and power to contribute to social change.

Psychologists are advised to “use inclusive and respectful language” (CPA, 2001, p. 5) in their work with diverse subjects. Psychologists also are instructed to assume an approach of empowerment – self-empowerment: “Psychologists are interested in empowering vulnerable persons so that they have equal opportunities in mainstream society, recognizing that in addition to personal coping skills this requires political and social changes” (CPA, 2001, p. 2).

What is constructed in this discourse is diversity as an individual problem to be acknowledged by the psychologist over the diverse subject: “Psychologists are interested in empowering vulnerable persons so they have equal opportunities in mainstream society, recognizing that in addition to personal coping skills this requires political and social changes”

(CPA, 2001, p. 2). Here, the responsibility to change is placed on the diverse individual to not only recognize the helping of psychologists as beneficial, but to bolster their own personal coping skills. The objects of oppression further construct diversity as a problem for clinical work: “Recognize the reality, variety, and implications of all forms of oppression in society, and facilitate clients’ examination of options in dealing with such experiences” (CPA, 2001, p. 4), and, “Be especially careful to be open, honest, and straightforward, remembering that persons who are oppressed may be distrustful or overly trustful of those in authority” (CPA, 2001, p. 5). The oppressions of the diverse individual become an essentialized problem to be managed by the psychologist working with them – regardless of whether or not issues pertaining to the diverse subject’s life were brought forward in work with the psychologist. Relatedly, psychologists are to “Assess accurately the source of difficulties, apportioning causality appropriately between individual, situational, and cultural factors” (CPA, 2001, p. 5), placing the power of conceptualization of a diverse subject’s life within the control of the psychologist. While psychologists are to “Recognize the power differential between oneself and others in order to diminish the differences, and to use power for the advantage of others rather than unwittingly to abuse it” (CPA, 2001, p. 4), the discourses of risk management, legality, and competence that permeate the discourse of diversity construct relations as inevitable, entitled, and for the best interest of individuals. Interweaved with the approach to practice with “diverse” subjects is, as I discuss earlier, is the discursivity of competence: “Psychologists recognize that, in order to adequately care for the welfare of others, especially for the welfare of those who are vulnerable, dependent, or suffer oppression and discrimination in society, they need to be competent in their activities as psychologists” (CPA, 2001, p. 3). As “diversity” is an object to be known by consumption of psychological knowledge, some psychologists are able to possess “expertise”

over others: “Consult with others who may be more familiar with diversity in order to provide competent services” (CPA, 2001, p. 5). Since competent practice requires the practice of self-evaluation, psychologists must objectively understand and know themselves in relation to diversity: “Constantly reevaluate one’s competence, attitudes, and effectiveness in working with diverse populations” (CPA, 2001, p. 5).

Although social change is mentioned in this code, this discourse reproduces the discourse of societal betterment in enabling psychologists their own choice as to how they involve themselves in societal change (CPA, 2001, p. 4):

There is social injustice when segments of society are devalued or oppressed. In a society that is increasingly diverse, there is an increasing potential for injustice. To the extent that individuals and groups without power suffer oppression in our imperfect society, psychologists have an ethical responsibility to use their knowledge and power to contribute to social change.

Psychology is never owned as creating or contributing to this injustice; it is vaguely positioned as located within “an imperfect society.” Rather, psychologists are able to individually take up social justice practices as they would like: “[P]sychologists demonstrate a concern for the welfare of all human beings in society. They may choose for themselves the most appropriate and beneficial use of their time and talents to help meet this collective responsibility” (CPA, 2001, pp. 3-4), and, “Choose ways in which one can contribute to the making of a society that is respectful and caring of all its citizens” (CPA, 2001, p. 6). The “gradient approach” is once again produced here whereby only *significant* instances of discrimination warrant critical action: “If social policy and societal attitudes seriously ignore or violate the ethical principles of respect, caring and honesty to the harm of special populations, then psychologists have a responsibility to be critical and to advocate for change to occur as quickly as possible” (CPA, 2001, p. 4).

As such, the discourse of diversity requires psychologists to “monitor how they demonstrate respect when working with diverse populations” (CPA, 2001, p. 2). The discursive construction of psychologist responsibility as having “*special significance*” casts individuals of “diverse” subjectivity as “different.” Diversity discourse simultaneously produces diverse subjects as both *perceived* and *actually* different by the authors of the *Non-discriminatory Practice Guidelines*: “Psychologists recognize the impact of society in creating and maintaining the problems and issues faced by persons who are perceived as *different from the norm* of mainstream society” (CPA, 2001, p. 3); and, “Psychologists do not impose the dominant culture world view on *those who are different*” (CPA, 2001, p. 2), in spite of “how different they may be from oneself” (CPA, 2001, p. 4) and acknowledge the “inherent worth of all human beings” (CPA, 2001, p. 4). Moreover, in applying mainstream psychological knowledge to their practice, psychologists are to “Be aware that theories or precepts developed to describe people from dominant culture may apply differently to people from non-dominant cultures” (CPA, 2001, p. 4). Knowledge about diversity is produced through the study of individual differences; this knowledge informs the “best practice” of working with “diverse” individuals: “Study group or cultural norms in order to recognize individual differences within the larger context” (CPA, 2001, p. 4).

Women clients. The discourse of women within the *Guidelines for Ethical Psychological Practice with Women* (CPA, 2007) centres on the CPA Code’s application to clinical practice with women. The discursivity of “self-knowledge” and “self-reflection” is brought into this text in in several places, as well as a suggestion of intersectionality (CPA, 2007, p. 3):

Since 1980, there have been several positive developments in the practice of psychology. There is clearer recognition that psychologists are not value-free; rather, as with members of all disciplines, they are influenced by their beliefs, biases, socialization, life experiences, and degree of privilege and influence. There is greater acknowledgment of

the issue of power and how it may be used and abused in relationships. Many psychologists have become increasingly aware of how an individual's sex intersects with the individual's age, race, ethnicity, culture, religious beliefs, sexual orientation, gender identification, ability, and social and economic conditions. There is greater insight into how Canadian women's psychological problems and concerns are often a consequence of social, cultural, and economic conditions.

Mention of reduced environmental control over women's lives is found in this set of guidelines, along with a need to attend to power imbalances by protecting and promoting rights (CPA, 2007, p. 5). There also is further acknowledgment of "social justice and social responsibility" and psychology's dominant focus on "the individual": "Within psychology, principles of social justice and social responsibility are slowly being recognized in a profession whose members have often prided themselves in their emphasis on the individual" (CPA, 2007, p. 3).

Interestingly, the object "oppression" appears in this guideline (CPA, 2007):

[P]sychologists ensure that they do not, wittingly or unwittingly, engage in or support any previous or existing gender-based discrimination and/or oppressions (e.g., fewer choices, greater negative consequences, restrictions on personal liberty), whether these factors are based in the individual, the family, the community, or the socio-political context. (p. 5)

[P]sychologists accept the responsibility to do what they can to change societal laws and structures that discriminate or lead to oppressions of women. They recognize that there are multiple avenues to improve the lives of women, and choose the most appropriate and beneficial use of their time and talents to help meet this collective responsibility. (p. 7)

As well, psychologists are reminded to validate women: "Where appropriate, confirm the validity of the reality, variety, and implications of discrimination and/or oppressions experienced by women clients" (CPA, 2007, p. 9).

Of interest is that this set of guidelines brings into discourse particular issues experienced by women, specifically in relation to relationships, boundaries, and gender-based discrimination, and the ways in which psychologists need to be aware of and address such issues in their everyday work. Issues of poverty, violence, undue pressure to make specific choices, socialization to be passive and/or submissive – issues identified as power – are mentioned as the

ways women may present with in their contact with the discipline. Trust is a discursive object that could affect the client-therapist relationship: “[P]sychologists are aware that some women clients’ experiences may have led them to have issues related to trust, including being distrustful or overly trustful of those in authority” (CPA, 2007, p. 6). The suggestion is made to “help” women to “become aware” of their difficulties: “Help women clients to become aware of the various factors that contribute to their difficulties and, where appropriate, facilitate women clients’ examination of their experiences of discrimination and oppressions, and support them in making new choices and developing new strategies” (CPA, 2007, p. 9). Emphasis in this discourse is placed on reflecting on one’s own position and self-knowledge, in order to better understand and acknowledge the standpoint of women (CPA, 2007, p. 6):

Psychologists also recognize that their women clients live in multiple contexts and that, while many of these contexts give meaning and satisfaction to their lives, some experiences (e.g., poverty, violence, undue pressure to make specific choices, socialization to a primary passive and/or submissive role, other abuses of power) are harmful to their well-being. In attempting to be of benefit to women clients, psychologists understand that it is important not to pathologize such harmful effects, but rather to view and treat them as understandable responses and results. In developing and monitoring their self-knowledge with respect to their psychological practice with women, psychologists are particularly sensitive to understanding how the context of their own lives might influence or interfere with their attempts to help and not harm women clients.

In being aware of the power imbalance in the relationship, psychologists are to “be aware” of women’s passivity or submissiveness in the working dynamic: “Recognize that women clients might feel in a power-down situation when working with a male psychologist, or with any expert be they male or female, and that the power imbalance may make it difficult for some women clients to challenge the psychologist” (CPA, 2007, p. 8). Discourse of women in the *Guidelines for Ethical Psychological Practice with Women* (CPA, 2007) centres around providing women with greater choice, reassurance that their choices can be made and will be respected, and that their consent for services is important to obtain. “When needed, take special precautions with

women clients (e.g., more time, more reassurance about right to choose) to ensure that any consent for psychological services is informed and voluntary” (CPA, 2007, p. 8). Emphasis is placed on fostering trust in relationships with women: “Establish an appropriate level of trust through honest, open, and transparent communication that is considered culturally appropriate by the women client, careful not to subtly invalidate her questions or opinions (e.g., by not fully listening)” (CPA, 2007, p. 9).

Interesting in this guideline is mention of how women may conflict in beliefs about psychological practice that psychologists may experience with women. This is mentioned in two instances: “Understand that, with repeated exposure to traumatic events, some women cope through making what may appear to be poor lifestyle “choices” (alcohol abuse, etc.), and that it is important to avoid diagnostic labelling that may stigmatize” (CPA, 2007, p. 8), and in reference to conflicting aims of practice: “When psychologists and women clients have different beliefs relative to psychological practice, the psychologist should acknowledge this and work collaboratively with the client to resolve the issue in the best interest of the client. In some instances, this may mean referring to the woman client to another psychologist” (CPA, 2007, p. 6). This set of guidelines specifically warns psychologists not to engage in sexual relations with women clients: “Do not engage in any sexual behaviour with women clients. Psychologists establish clear boundaries in professional relationships and if needed, seek supervision or consult with colleagues in order to maintain these boundaries” (CPA, 2007, p. 9). In discursively producing characteristics of women as potentially lacking trust, requiring validation, needing to be cautious around sexual boundaries, and emotionally regulating the relationship, the CPA Code reproduces the very misogynistic and discriminatory practice it seeks to address.

Chapter Summary

My analysis of the CPA Code renders its discursive formation, comprising dominant discourses, appropriated discourses, sites of discursive rule production, and subject positions. Dominant discourses are discourses that reflect mainstream psychology and institutional ideology, and are science, objectivity, competence, expertise, legal, managerialism, and risk management discourses. These discourses are intertextual and exert a powerful influence in forming ethical-professional subjectivity. Dominant discourses further influence the constitution of appropriated discourses in the CPA Code. Appropriated discourses are critical inquiry, betterment of society, and morality. From a critical perspective, these discourses generate subjectivities that privilege psychologists, the discipline of psychology, and the Canadian Psychological Association, and render these subjects powerfully governed by the CPA. The rules of this discursive formation serve to maintain this discursive structure and comprise education and training, licensure and regulation, ethical decision-making, consultation, and misconduct education. Subject positions produced by the CPA Code are the CPA, the discipline of psychology, society, the public, psychologists, and clients.

Discussion

A central purpose of this dissertation was to frame the Canadian Psychological Association's *Canadian Code of Ethics for Psychologists* (CPA, 2016b), the *Non-discriminatory Practice* guidelines (CPA, 2001), and the *Guidelines for Psychological Practice with Women* (CPA, 2007) within an analysis of discourse, power/knowledge, and governmentality (Foucault, 1970, 1972, 1979, 1980; Hook, 2007; Parker, 2002, 2015; Parker et al., 2014b). This analysis would make visible the language of the CPA Code, foregrounding its discursive constitution and thereby rendering visible its discourses and subjects of operation, its ability to simultaneously produce and limit the production of ethics, and its connection to ideological values and interests (Clarke, 2005; Hamann, 2009; Prilleltensky, 1997, 2002, 2008). As a student of critical psychology, and as a Mad person who has been subject to the discourses of mainstream psychology and psychiatry, I was particularly interested to understand the ways in which the CPA Code privileges certain discourses and subjectivities over others.

Below I discuss my findings within a Foucauldian-informed theoretical framework, framing my discussion around key findings, including the influences of dominant and appropriated discourses, sites of discourse production, and subjectivities generated by the CPA Code discourses. I relate these findings in a discussion of the governmentality project of psychology, serving the neoliberalist ideals in regulating mental health normativity. I then connect this work to the need for a decolonized social justice ethic in Canadian psychology. Drawing on critical psychology and interdisciplinary literatures, I discuss ideas for adopting social justice ethics and social action in the discipline of psychology by demonstrating four broad ethical-practical examples: 1) accepting plurality of knowledges and expertise; 2) decolonizing our discipline; 3) building reflexive engagement into all disciplinary activities; and 4) producing

action-oriented change. I conclude with reflexive ideas about further work in social justice ethics for psychology.

The CPA Code: A Foucauldian Discursive Formation

Using a Foucauldian-informed theoretical and analytic framework (Foucault, 1970, 1972, 1979, 1980; Hook, 2007; Parker, 2002), my analysis confirms the dominant and appropriated discourses of the CPA Code (CPA, 2016b), identifying the Code as a powerful discursive formation that regulates ethical-professional practices in psychology. The CPA, a national organization representing the discipline of psychology and psychologists in Canada, is founded on psychological research, education, and practice (CPA, 2016b). A powerful expert-professional organization of psychological science, the CPA is productive of discourses that institute and regulate norms of practice, and their values and practices are rarely questioned or criticized for its oppressive and/or problematic potential (Prilleltensky, 1989, 1997, 2003; Teo, 2015b, 2015c; Walsh, 2015a, 2015b). Since CPA Code ethics prescribe the ways in which we practice psychology in Canada, these discourses permeate all of mainstream research, teaching, and clinical activities. Thus, this discursive formation represents a highly influential force for psychology ethics, the practices of mainstream psychology in Canada, and the conduct of psychologists.

In the CPA Code, dominant discourses act to disqualify other (subjugated) discourses, or will co-opt these discourses such that they come to resemble their own ideological interests and ends as appropriated discourses. I examined the discursive rules of how dominant discourses in the CPA Code come to authorize themselves as “professional ethics” while rendering problematic other ethics discourses. From my analysis, these are the discourses of science, risk management, objectivity, expertise, competence, law and legislation, and managerialism.

Intertextual with one another, these discourses have colonized every facet of psychology ethics and practice, to the exclusion of other methods based on everything they are not: unscientific, outside of law; outside of expertise and objectivity; risky, outside of best practice; and defined areas of competence. Appropriated discourses that I observed through analysis are critical inquiry, morality, and betterment of society. These discourses are reinforced at key institutional sites of psychology: education and training sites, regulatory bodies of clinical psychology, and the CPA (misconduct adjudication). Additionally, they are produced during particular times of psychological practice: ethical decision-making and consultation.

Last, I sought to determine how these discourses produced subjectivities within the CPA Code: ethical-professional psychologists, clients, the discipline of psychology, the CPA, and society. These subjectivities come to support scientific knowledge production, and they promote the reduction of risk and the betterment of human functioning as it relates to mental health and morality. They distinguish psychologists from clients based on discourses of expertise, objectivity, and self-reflection. Below I explore all these findings and more by contextualizing my discussion within the broader critical psychology and relevant interdisciplinary literature.

Science, risk, and subjugation. In Canadian society, science and law operate as totalizing narratives that citizens of society come to regard as legitimate, trustworthy, and central to human betterment and progress. Science discourse represents what qualifies as legitimate knowledge, legitimate practices of knowledge production, and legitimate producers of such knowledge in psychology. As a scientific organization, the CPA represents a leading institution of Canadian psychology, and is a prime discursive producer of mainstream psychology discourses. Science is integral to the ethical-professional role of psychologists, regarded as scientists or scientist practitioners. Privileging positivist-empiricist scientific knowledge,

psychologists are to encourage and support free enquiry, innovation, and debate. Additionally, as represented by Western neoliberalist culture, the public is an obligated consumer of psychological science, for individual and societal betterment in mental health and well-being. Psychology has a duty to society not only to advance societal betterment but also, at minimum, to do no harm to members of society.

Science discourse in the CPA Code roots ethics within the practice of research that is positivist-empiricist, logical, quantitative, and objective. It is designed, engaged, and interpreted by scientific-professional individuals trained in particular programs and carrying particular credentials towards competence or expertise. Good ethical practice means that science must underlie all disciplinary activities and originate with this particular way of knowing. Ethical psychological knowledge is produced by science, is objective and open to critique – within the positivist empiricist tradition – and is to be engaged in an open, free, and noninterfering manner by psychologists. Risk management discourse is co-constructed with science practices, as risk comes to be captured and managed by the consumption and reproduction of science as best practice, empirically supported practice, as these practices are regarded as safe, trustworthy, and beyond questioning in mainstream psychology.

Further supporting the domination of science discourse, the CPA Code advocates for the natural progress of society and promotes status quo values and practices. Psychology's production of research and practice for societal betterment are removed from social, cultural, historical, and economic realities. These discourses thus serve the interests of science and risk management discourses. Freedom of inquiry privileges practices of science such that psychologists are not to interfere with scientific research and knowledge production (unless of course, reasonably identified harms can be argued within CPA Code risk rhetoric). The Code

additionally positions social justice as a competence/expertise such that only experts can speak out about social problems and impacts associated with psychological research, producing social justice as separate from other areas of psychology rather than a value and practice of all disciplinary psychology. This discourse assumes that science is always already the right mode of inquiry to understand human subject matter and that scientific research within a risk and benefit frame is always good for citizens and for society more broadly. Moreover, it may be assumed that only certain psychologists can and should speak to issues of social justice, and that social justice only matters for particular disciplinary practitioners and not others.

Legal discursivity in the CPA Code produces the ways in which psychologists must follow federal laws on conduct for registered health professionals, national and international human rights codes and legislation, and the ways in which regulations about participation, consent, and privacy must be followed. The rationality of managerialism discourse facilitates the standardized processes that comply with laws and legislation relevant to psychologists, particularly those about participation and consent, privacy and confidentiality, and sexual harassment and assault. Legal discourse also contributes to the general rationality and reasonableness of legal procedures by requiring ethics to follow the law wherever possible. Additionally, morality is presented in the CPA Code as natural, universal, and logical rights.

Critical inquiry discourse, a future-oriented thinking approach to be applied in psychological research, seeks to reconcile possible and actual misuses of the scientific paradigm towards ethical societal improvement by analyzing and identifying the socially problematic consequences of our research. Although critical psychology approaches represent a diverse set of ontological, epistemological, and methodological frameworks through which to understand mental life and human subject matter (Fox et al., 2009; Parker, 2015; Rutherford, 2007, 2011;

Teo, 2015b, 2015c), critical inquiry discourse in the CPA Code comes to reflect the discourse of science. Unless the language and practice of social justice can be co-opted to resemble those of science and risk, it is excluded from psychological ethics and practice. In the privileging of scientific practice, critical inquiry practices are not ultimately intended to challenge the status quo towards social justice (Prilleltensky, 1989, 1997). Thus, science discourse acts to enable mainstream psychology knowledge production and consumption while limiting other forms of knowledge that do not resemble science and other mainstream practices.

Scholars of critical psychology have discussed the limited representation of human subject matter and human mental life as a consequence of the domination of science in the discipline of psychology (Breen & Darlaston-Jones, 2010; Goodley & Lawthorne, 2006; Hickinbottom, 2007; Parker, 2015; Teo, 2015b, 2015c). Science itself can be viewed as a pluralistically constructed set of discourses; Habermas (1972) for example describes three scientific discursive formations: empirical-analytic science, historical-hermeneutic sciences, and critical sciences. All these scientific approaches contain similarities and differences in their assumptions, values, and interests (Prilleltensky, 1997, 2002, 2008). Additionally, Teo (2009) identifies the privileging of scientific method over relevant ontological and epistemological subject matter in psychology. While the CPA Code qualifies the discrimination of groups of people through scientific research as just, the removal of data interpretation from social, critical, and/or historical contexts presents a hermeneutical problem for psychological research. Ignorance of the social, cultural, and historical conditions of the subject matter and meanings of mental life can result in hermeneutical violence, a form of epistemic violence (LeBlanc & Kinsella, 2016), and, as a data interpretation problem for research psychologists, epistemological violence (Teo, 2009, 2010). Moreover, in spite of the ethical requirement that education should

include “possible misuses of the scientific paradigm,” presumably from a critical perspective, critical psychology education is still not a mandatory part of psychology undergraduate and graduate training curricula. In rare instances are psychology students – graduate and undergraduate – exposed to critical psychology subject matter (Hickinbottom, 2007).

Competence and expertise. Competence in the CPA Code represents the standardization of an approach to (scientific) research and/or practice. Competence is carried out by psychologists who come to be qualified by a set of training and education credentials typically reflecting evidence-based, best practice discourses or similar discourses of standardized scientific knowledge. Per the CPA Code, psychologists must always already be competent within a given field or fields of practice, and working towards expertise through continuing education, staying current with scientific research advances, and conducting performance measurement or psychological research to evaluate their practices. Competence enables longitudinal consumption of science-based discourses as narratives of progress and advancement require psychologists to be practicing with up-to-date knowledge.

Additionally, competence plays a role in a knowledge hierarchy of those who possess legitimate or valued knowledge, and enable consultation and oversight by expert practice in situations that fall outside one’s area of competence. Legitimate subjectivities of experts require the privileging of dominant knowledge; we thus come to regard those trained with dominant mainstream discourses with more respect, trust, and acceptance. Education and training sites of psychology act to gatekeep between those who become legitimate ethical-professional practitioners and those who do not. Sites of licensure and regulation reflect these requirements in designating areas of competence or expertise, and CPA Accredited graduate psychology

programs of professional psychology set standard curricula for ethics and practice training (CPA, 2011).

Standardization of research and practice knowledge can operate to support a monolithic approach that can exclude other perspectives, knowledges, and leaders of mental health. A focus on the individualization of mental health problems with ignorance to his sociocultural and historical context has resulted in a lack of relevant and culturally appropriate representations and approaches to mental health (Adame, 2011; Adame & Knudson, 2008; Bassman, 1997, 2001; Deegan, 2000; LeFrançois et al., 2013; Richards et al., 2016; Russo & Beresford, 2015) while perpetuating colonialist practices (Painter, 2015). That is, standardizing competence requirements does not accommodate a fluid, pluralistic approach to including different knowledges and practices of ethical matter. Perspectives about “mental health” falling outside of an illness/pathology paradigm, although culturally relevant, are marginalized, silenced, and ignored by mainstream psychology practices.

Although critical psychology and relevant interdisciplinary fields comprise a significant body of literature detailing the concerns, harms, and unethical practices of exclusion in psychology and the helping professions more broadly, these have not been directly taken up in the CPA Code or in mainstream psychology. A number of critical and feminist psychologists have identified the harms related to mainstream psychology’s narrow representation of mental health knowledge and expertise in education, research, and clinical practice (Adame, 2011; Adame & Knudson, 2008; Austin & Prilleltensky, 2001; Austin, Rutherford, & Pyke, 2006; Ball, Bazar, MacKay, Rodkey, Rutherford, & Young, 2013; Bassman, 1997, 2001; Bhatia, 2002; Billington & Williams, 2015; Breen & Darlaston-Jones, 2010; Fine & Burns, 2003; Mays, 1988; Painter, 2015; Riggs, 2004; Rose, 1998; Rutherford, 2011; Rutherford, Vaughn-Blount, & Ball,

2010; Smith, Chambers, & Bratini, 2009; Teo, 2009, 2015a, 2015b). Moreover, scholars have additionally articulated the various institutionally-located racist practices of mental health institutions (Bhatia, 2002; Bhavnani & Phoenix, 1994; Painter, 2015) as well as the institutional production of race and mental health normativity (Ahmed, 2007, 2012; Painter, 2015). For example, anti-Black sanism identifies the discriminations and oppressions against Black people experiencing mental health issues; to understand the experiences of individuals and groups of people who experience anti-Black sanism (Meerai, Abdillahi, & Poole, 2016), it is key to first understand anti-blackness in society and in the discipline of psychology (Richards, 2012; Teo, 2013).

Objectivity and its dualism with subjectivity. Objectivity is discursively produced in the CPA Code as a form of knowledge that is logical, rational, scientific, and value-free. Objective knowledge is to be produced, consumed, and sought in all disciplinary practices of psychology. This kind of information is privileged as the most ethical, and should always be used to inform ethical decision-making. Ethical decision making relies on rational, reasonable, structured process, including the balancing of all perspectives and consultation in any contextual ambiguity. Ultimately, the psychologist's decision-making must be held to public scrutiny, and that powerful threat serves to enforce the most recognized, relied-upon mainstream psychology practices.

Objectivity discourse in the CPA Code also produces legitimacy in the subjectivities of psychologists, clients, and others in contact with the discipline. That is, these discursive effects produce privilege in who is able to be viewed as legitimate, how participation in the discipline happens, and who comes to define and address ethical issues in practice. This enables psychologists to effect ethical decisions in isolation from the people they work with, creating

powerful hierarchies of those are most objective (e.g., experts, psychologists) and those who are less objective (e.g., relevant or appropriate others). Psychologists are encouraged to include individuals they work with, such as clients, in decision making, but ultimately it is psychologists who determine “relevancy” and how someone who is not a psychologist may (or may not) participate in the discipline.

The CPA Code discursively produces ethical-professional subjectivity as divorced from personal behaviour. Personal behaviour discourse represents a threat to meaningfully sound, trustworthy decision-making for ethical-professional psychologists. Marking the subjective body and mind as a site of risk of mental health and addictions problems, emotions, personal values, and other facets of a personal “self” falling outside of objectivity are untenable within the psychologist’s ethical-professional role. Psychologists are never able to simultaneously experience “mental health problems” and addictions while practicing – or must manage these conditions to the satisfaction of the CPA Code – thus suggesting psychologists cannot at the same time be clients. Moreover, the only mention of emotion is in relation to challenges with ethical decision-making and, marking greater surveillance over the psychologists’ practices, signals a problem to be remedied by consultation or oversight by other practitioners.

The abjection of personal subjectivity in the CPA Code can be connected to other discussions about psychology’s rejection of subjectivity (Teo, 2010, 2015b, 2015c, 2015d). Objectivity itself is a subjective tool or experience for practitioners. In disrupting the objectivity/subjectivity binary, Teo (2015d) describes the shifting meaning in the subjective construction of objectivity, demonstrating its existence as a product of multiple sociocultural and historical forces. He considers multiple interpretations of objectivity over time in the discipline of psychology, finding them as a set of approaches rather than the monolithic tradition of

mainstream psychology that dominating forces have produced today. Likewise, a social constructionist viewpoint is useful for approaching objectivity – and other technologies of psychological practice – as an embodied, intersubjective performance that can change, be(come) fragmented, and withstand through productive discourses at a particular place in time (Hugman, 2005).

Regarding social justice and social responsibility in the discipline of psychology, many psychologists are reluctant to subjectively challenge the status quo and advocate for social change because of the potential to lose professional credibility. Some fear the consequences, for example, of being perceived by colleagues as somehow lacking in competent, professional behaviour (Austin et al., 2005; Prilleltensky, 1989, 2008). Perceiving actions towards social justice as risky limits our ability to incorporate values that fall outside of ethics practice – particularly so if there is no collective organizing and action to promote their uptake. Walsh (2015b) states: “The traditional position is that if we engage in social action as individuals, our stances of social-advocacy risk being perceived as expressions of bias, which weakens our individual credibility and stains the discipline’s reputation (Haeny, 2014; Kendler, 2008; Truscott & Crook, 2013)” (p. 96). Additionally, professionally viewing individuals and groups of society – individuals and groups *of* study in mainstream psychology – as research subjects limits the ways in which individuals and groups can be represented and participate meaningfully in research and knowledge production (Faulkner, 2004). In the CPA Code, psychologists retain full ownership, design and execution of research; carry out research for their own interests and ends, and enable or disable collaborative or full control of research with mad people (Faulkner, 2004) while mad people at best are able to fill a consultative role in knowledge production.

Client subjectivity: A critical problem. My analysis finds that clients labelled as vulnerable, diverse, and/or as women are subject to the scientific knowledges and practices of mainstream psychology. Although the public is able to provide feedback to the CPA about the CPA Code, clients of psychology were not expressly included in the construction and practice of CPA Code ethics. Thus it is the CPA who is able to speak on behalf of clients. Likewise, clients are variously made subject to the authoritative power of psychologists. Per the CPA Code, psychologists are expected and encouraged to include clients in the decisions that affect them; however, the agency or autonomy clients affects their legitimacy in decision-making and participation. Clients may be living in contexts with lower agency or autonomy (defined as less control over their environment); the CPA Code qualifies these individuals as vulnerable. Subjectivities of vulnerable clients, diverse clients, and women clients are constructed in the CPA Code as well as the supplemental guidelines for working with diverse and women clients (CPA, 2001, 2007).

Vulnerability as part of the defining status of a client – including individuals who are marginalized and oppressed – signals greater ethical-professional vigilance around moral rights and caring through decision-making and consultation about the care of vulnerable people. Increased oversight in practices with vulnerable clients provides greater decision-making power of psychologists over clients; vulnerable people also potentially face barriers to exclusion in research as a result of their non-normative status (e.g., diminished capacity to give consent). This potentially minimizes agency of vulnerable clients already experiencing challenges within their lived context while upholding values of mental health normativity and expert-practitioner domination in psychological research and practice.

Clients labelled as diverse also are defined in the CPA Code as having reduced power to control their environment, rendering diverse individuals as simultaneously vulnerable and possibly subject to the ethical-professional discourses of vulnerability by psychologists. The CPA Code refers to these individuals as “special” and potentially “different” from practitioners working with them. There are assumptions in the CPA Code supplementary guidelines about diverse and women clients being distrustful, requiring help of psychologists, facilitating their understanding of oppression and how to accept and cope with oppressions, as well as other contextual challenges. Diverse and/or women clients also are expected to allow psychologists to empower them with knowledge and to accept the help that psychologists want to give clients to bolster their own coping abilities in relation to social injustice. These clients also are expected to individually accept and combat their own oppression – using clinical tools of psychology – while the discipline of psychology continues to contribute to practices that maintain social structures and thus the status quo. Responsibility is placed on clients to adapt to their oppressive conditions using knowledges of psychology, and psychology remains exempt from accountability to contribute to political social change. While psychologists are to advocate for social change – if indeed “serious” discrimination occurs – psychologists may be limited as to how they can advocate for change if it is not within their area of expertise.

Given the CPA Code’s positioning of vulnerability, diversity, and women clients, my analysis suggests that psychology ethics is embedded with Eurocentric, paternalistic discourses that discourage social justice and action towards social change (Prilleltensky, 1989, 1997, 2003, 2008; Walsh, 2015a). Several scholars and activists speaking from fields of Critical Disability Studies, Mad Studies, and patient advocacy groups have advocated for better inclusion of marginalized and oppressed groups of people in research and mental health recovery. The

disciplines of Mad Studies and Critical Disability Studies have been particularly prolific for Mad individuals, activists, and scholars to share and exchange critical, Mad, and alternative mental health approaches (Goodley & Lawthom, 2006; LeFrançois et al., 2013; Price, 2011; Reaume, 2006). Goodley and Lawthom (2006) discuss disabled people's experiences with psychology as privileging of White middle-class people, apolitical in its individual responsabilizing, professional-led expertise over lay knowledge, dichotomizing between scientific and unscientific practice, a pathology/illness model that instills ableist notions of normativity, impairment, and the need to rehabilitate or "fix" disability, and oppressed subjectivities. Critical disabled and Mad-identified people challenge mainstream interpretations of mental health as individualistic responsibility to be "fixed;" a number of approaches depart from this interpretation to advocate for mad-identified knowledge acceptance and exchange, and many find great benefit from the helpfulness and healing capacity of Mad and disabled knowledges (LeFrançois et al., 2013; Price, 2011). Goodley and Lawthom (2006) call for emancipatory change in psychology to address its ableist assumptions and practices from a variety of approaches.

Additionally, the feminist critique of psychology and mainstream mental health has long identified gender inequity and other intersectional oppressions in society and in the discipline of psychology. Feminist psychologists have critiqued the DSM and diagnostic practice as problematic for gender, race, and class (MacKay & Rutherford, 2012; Marecek & Gavey, 2013; Marecek & Hare-Mustin, 2009; Ussher, 1991). Ostrove and Cole (2003) argue that mainstream psychology especially ignores the impact of class in mental life and in the discipline itself. Scholars such as Smith et al. (2010) have attempted to draw attention to experiences of poverty by mad people, as well as the ways in which class shapes mad people's experiences with psychotherapy.

Regarding psychology's racist discourse, Durrheim et al. (2009) discuss the limited frame within which race and racism may be discussed in the discipline of psychology, framing it as a strictly prejudicial or cognitive beliefs and not additionally as a complex and shifting intersubjective, embodied, sociocultural experience. Additionally, since psychology relies on categorization of people in searching for differences between individuals and groups of people, racist practices can be perpetuated by the discipline (Teo, 2010, 2011, 2013). Discursive analyses demonstrate that those who perceive themselves as anti-racist perpetuate racist discourses in everyday talk (Durrheim & Dixon, 2004; Richards, 2012; Potter & Wetherell, 1987).

Neoliberalism in/of psychology. Canadian psychology is significantly entrenched in reproducing neoliberal values, interests, and practices (Clarke, 2005; Hamann, 2009; Prilleltensky, 1989, 1997, 2008; Rossiter et al., 2002; Sugarman, 2015). These interests are shared with corporate and government institutions and are increasingly blurring lines between public and private. Psychology has traditionally been concerned with fashioning mental health as a particular technology of human behaviour, surveillance, and control. My analysis demonstrates the neoliberalist elements of responsibility for psychologists to fashion themselves as ethical-professionals according to institutional practices of education and continuing education, competence and expertise, and technologies for the ethical-professional self to manage decision-making and personal forces. Dominant discourses act to produce ethical-professional discourses, and govern the principles, values, and standards of the discipline. They also act to render alternative perspectives as inadequate and simultaneously co-opt their language and actions for their own interests and ends. Psychologists must be continuously improving their ethical-professional self, anticipating and managing ethical dilemmas, remaining objective and scientific, and are made responsible to surveil and rectify the ethical-professional conduct of

others to mitigate risk of harm and actual harm. Self-reflection is intended for psychologists to examine personal matters and transform them into objective information; these objects include biases, positions, stresses, and self-interests, as well as economic, institutional, legal, or political contexts and background which may influence a course of action.

Sugarman (2015) argues that psychology needs to examine its practices for their effects in society and how economics and politics influence these effects. Sugarman (2015) writes that neoliberalism conflates economics with morality, adopting the moral discourse of profitability, costs, risks, and consequences. Individuals are to attend to a particular set – or regime – of mental health discourses that each individual is to take responsibility for, and work toward wellness, recovery, improvement, symptom reduction, medication adherence, exercise routines, healthy eating, and so on. From this regime, mental health becomes an individual's own responsibility to self-regulate, and, if diagnosed as mentally ill, to be working toward recovery, well-being, or rehabilitation. In addition, social and economic politics of mental health become obfuscated, depoliticized, and enjoy a status of commonsense, objective, “best” knowledge. Sugarman (2015) exemplifies psychology's neoliberalist practices through three scenarios: psychological research in media and advertising; social anxiety; and positive psychology's focus on individualized and responsabilized happiness. These examples demonstrate psychology's co-opted interests as those of corporate and institutional values and emphasize human productivity through normality, well-being, and self-interest; cost reduction; and self-surveilling governance.

Walsh and Gokani (2014) argue that in serving a neoliberalist agenda and maintenance of status quo values, the discipline of psychology succeeds in privileging our own interests over societal welfare. Responsibility to society is relatively limited in mainstream psychological practice (Walsh, 2015b) and the CPA Code reinforces dominant perspectives and privileges

(Prilleltensky, 1997) over and above those of social justice, social inclusion, and social action (Rossiter et al., 2002; Walsh, 2015a, 2015b). Additionally, Rossiter et al. (1996) draw attention to the importance of connecting language with institutional practices in thinking about mainstream psychology ethics. In their research, these authors found that psychologists from Canada talk less about national, historical, or economic forces within their professional practice compared to Cuban psychologists (Rossiter et al., 2002). Relative to Cuban psychologists, Canadian psychologists view ethics as a technical procedure of standardized rules and principles related to codes of conduct. Canadian psychologists also described experiencing frustration from the dominance of the technical procedures of managerialism, wishing instead for support for open dialogue and physical space within which ethical dialogue could occur.

Toward a Social Justice Ethic in Psychology

Psychology is a discipline foremost obliged to do no harm to the society in which it operates. As a result of many social, historical, and cultural forces, this discipline has been shaped in deference to a scientific legitimacy that is standardized and legally sound. Its mainstream practices in mental health are highly regarded in society: reputable, trustworthy, and helpful. My analysis demonstrates the powerful ability of a highly influential document of Canadian psychology ethics to enable and disable practices of psychology. The CPA Code makes available a repertoire of ethical-professional discourses upon which ethical conduct becomes possible. Although we are about to see the official fourth edition of the CPA Code in Canadian psychology practice (CPA, 2016b), this discourse also has maintained stability in its structure throughout the previous editions (Sinclair, 2011), and as my literature review demonstrates, core practices of scientific values, ethical decision-making, and legal considerations are present.

Social justice ethics are crucially important for psychology ethics and mainstream psychology practice. Although psychology ethics in Canada serve important and beneficial purposes, and are an important symbol of the discipline, a number of lines of inquiry demonstrate the need for psychology to better attend to issues of social justice, to examine its own practices of harm, and to achieve a social justice ethic. As part of a discipline in service to society, I believe we are obliged to interrogate our values, interests, ends, and practices, and to challenge these when they are potentially and/or actually harmful to the people we serve. I also believe that, as a project of neoliberalism, psychology also must be critical of its culturally-relevant problems created by its institutions, systems, and practices.

Psychology's limited representation of its subject matter of "mental health" is a serious ethical issue for the discipline to address. Psychologists arguing from critical (Parker, 2014a; Teo, 2015b), feminist (Ball et al., 2011; Rutherford, 2011; Rutherford, Capdevila, Undurti, & Palmary, 2011), Indigenous (Guzzo, 2015; Kirmayer et al., 2003), postcolonial (Painter, 2015) and activist (Diamond, 2012) positions have urged the discipline to adopt a pluralistic approach to mental health and to embrace a range of perspectives. Conventional psychology education and training fails to address these issues as a number of people report that psychological interventions are irrelevant, unhelpful, or even harmful (Bassman, 1997, 2001; Fox et al., 2009; Newnes, 2004; Rimke, 2016; Rose, 1998; Smith et al., 2010).

Possibilities for Resistance and Disciplinary Change

Since ultimately the discipline broadly represents the study of human mental life and human subject matter, it must be a priority for the discipline of psychology to include a range of people, perspectives, and knowledges in ongoing discussions about "ethics." What are the discursive resources, people, sites, and so on that may be drawn on to enable a more equitable

and inclusive set of ethical practices? Fortunately, there are a range of critical and feminist psychology applications, and interdisciplinary literature and approaches I have discussed in this dissertation. Although I avoid suggesting an essentialized code of ethics, list of recommendations, or best approach to social justice ethics and practice, I do provide four broad examples below for mainstream psychology to consider.

Enable pluralism of mental health knowledge and expertise. Approaches falling outside of “evidence-based practice” are often seen by mainstream psychology as irrelevant or less legitimate; these responses resemble those of epistemic violence (LeBlanc & Kinsella, 2016), and sanism (Perlin, 2003; Poole et al., 2012). Psychologists are obliged to consider a range of perspectives on our extant principles because we may not be aware of how our practices lead to epistemic violence and sanism, as well as epistemological violence (Diamond, 2012; LeBlanc & Kinsella, 2016; Poole et al., 2012; Teo, 2009, 2010, 2011, 2013, 2015b, 2015c; Walsh, 2015a, 2015b). To better honour diversity of mental health experiences in Canadian society, within our own discipline as practitioners of various subfields and approaches, accepting plurality and fluidity as legitimate qualifiers of psychological knowledge is an important goal for Canadian psychology ethics and practice. This also implicates the welcoming of approaches and experts that fall outside of dominant paradigms of mainstream psychology research, acknowledging human subjectivity and language as a constitutive force of human behaviour, social action, and social change. Critical psychology offers mainstream psychology a plurality of perspectives, approaches, theories and philosophies to draw on, asking us to deliberately consider the ontological and epistemological identifications of our research and practices so that we can make more conscious the political attachments of our everyday professional decisions.

Decolonizing our disciplinary practices. My analysis lends support for the continued privileging of dominant White cultural forces underpinning constructions of ethical discourse and ethical-professional subjectivities. Psychology has long been identified as a profoundly Eurocentric discipline that serves the values and interests of dominant culture, and has a history of racist practices against Indigenous people (Painter, 2015; Paredes-Canilano et al., 2015) and people of colour (Bhatia, 2002; Mays, 1988; Richards, 2012; Riggs, 2004; Stevens, 2015; Teo, 2009, 2010). Dominant ideas of mental health as involving illness and recovery is of limited relevance to many groups of people, simultaneously ignoring and rendering problematic a plurality of cultural-ethical perspectives. One example of the colonizing effect of science discourse in mental health and psychology has promoted a monocultural view of Indigenous people (Lavallee & Poole, 2010; Painter, 2015; Poole, 2011; Riggs, 2004). Lavallee and Poole (2010) discuss White privilege in mental health recovery, noting that racialized people avoid contact with the mental health system as a result of the various racist, colonizing practices of mainstream mental health and recovery discourses and institutions.

From a postcolonial perspective, the provision of opportunities for individuals, groups, and communities of people enable not just meaningful participation but a reclamation of power that colonial/imperialist practices have removed from communities (Painter, 2015). Likewise, decolonizing our ethical approach to disciplinary practices will contribute to decolonizing practices within the discipline of psychology. Models of decolonization in broadening relevant subject matter of psychology have been discussed by Prilleltensky (1989, 2003, 2008), and per Smith et al. (2009), we require the participation of marginalized and disadvantaged individuals as equal collaborators in all our disciplinary practices. Similarly, other scholars have advocated for pluralistic and empowering/inclusive approaches to ethics and culturally relevant practices in

helping professions (Hugman, 2005), psychiatry (Morgan, Felton, Fulford, Kalathil, & Stacey, 2015) and psychology (Neill, 2016; Truscott & Crook, 2013; Walsh, 2015b). Additionally, for those practitioners conducting collaborative research with mad people, Faulkner (2004) has published a guide to survivor ethic that includes principles of working equitably and inclusively with mad people in social science research.

Enabling critical, reflexive engagement in practice. If social justice values and practices are to be integrated into psychology practices, then we must bring them into our everyday psychological language and actions (Rossiter et al., 1996). This means making space to self-reflect – or reflexively process – our taken-for-granted biases that reflect assumptions of our positions in research, education, and practice. Broader engagement in psychology ethics discourse and practices opens up practice conversations to understanding various perspectives, and intersubjective and intercorporeal elements as forces that contribute to ethics discourse and ethical-professional subjectivity. Building this awareness enables a deeper, more nuanced articulation of the complexities experienced by ethical-professionals, clients, and others in disciplinary practices. Reflexivity enables learning to identify and address problematic cultural practices in research, teaching, and clinical practice while including people in contact with the discipline of psychology – mad people, students, groups of people – in these conversations to guide important values, assumptions, and practices. Reflexive conversations facilitate an open dialogue about how our discipline comes to harm or potentially harm members of society.

Although standardized approaches aim to simplify the complexities of ethical practices in everyday situations, which include confidentiality, informed consent, competence, culturally-informed practice, social justice, malpractice, role boundaries, and so on, they often limit the ways in which we can engage about them (Austin et al., 2005; Rossiter et al., 1996; Prilleltensky

et al., 2002; Truscott & Crook, 2013). Exploring the barriers to ethical practice in Canadian neoliberalist culture, Rossiter et al. (2002) reported that invisibility and absence of management/leadership, lacking policies and practices, and lacking space and engagement about ethics all lead to marginalization of ethics in practice. Psychologists also require safety and privacy to enable open, nonjudgmental exploration of ethical matters.

Producing action-oriented change. How can we work against the structures of conventional approaches to expand subjective possibilities? Opening up collaborative and participatory opportunities for broad engagement in the discipline of psychology is one way of challenging disciplinary practices. Drawing critical parallels in the approaches and aims of feminist psychology, liberation psychology, and community psychology, Moane (2003) observes that all disciplinary subfields encompass theories that incorporate elements of social models to address unequal power relations, taking a stance against oppressive social conditions of the quotidian that are seen to manifest in so-called psychological problems, and all assume approaches of empowerment and social transformation to address social/psychological issues. Liberation psychology is a field that particularly privileges an approach grounded within the lived experiences of the groups and communities affected by oppression. It assumes no monolithic theory or approach as the work of liberation psychologists takes shape within the groups and communities of work and change (Burton & Gómez Ordóñez, 2015). As action-focused within equitable and inclusive power relations, every aspect of research is carried out with marginalized individuals. Knowledge production is seen to be only ethically appropriate, useful, and fair when fully involving the participation of those affected by the research. This approach is centred fully on the perspectives and processes of marginalized people, and is referred to as participatory action research (Martín-Baró, 1994).

The foundation of liberation psychology (Burton & Gómez Ordóñez, 2015) is largely influenced by the work of educator Paulo Freire (Freire, 1970, 1974; Freire & Macedo, 1998) and social psychologist Ignacio Martín-Baró (1994) in Latin America, as well as Ireland (Moane, 2014). Departing from Western models of individualized pathology and responsibility, liberation psychology considers injustice, oppression, and violence of marginalized and disadvantaged people and communities within a social, economic, and political framework. Harnessing the praxis work of methodologies of social change, such as participatory action research and community-based research approaches aligning research with social justice and social action, attending to power dynamics by giving power to oppressed and marginalized groups.

Although Freire eschews formalization in methodology, three guiding elements of his work are important for those assuming a liberatory approach (Freire, 1974; Torres & Fischman, 1994). First, the lived experience of each person, and the collective experiences of a group or community of people, must take primacy in developing a framework or approach. Second, a general approach must be undertaken to build an understanding of a social issue through the lived context of people experiencing the issue, collectively analyze for causal roots of the issue, and develop an action-oriented plan to address the issue. Third, to understand the perspectives of those with whom one is working, one must continuously work to challenge their own taken-for-granted perceptions leading to truth of a “false consciousness” about groups of people and their social realities. Writes Freire in *Pedagogy of Freedom* (1998, p. 69):

I have a right to be angry, to show it and to use it as a motivational foundation for my struggle, just as I have a right to love and to express my love to the world and to use it as a motivational foundation for my struggle because I live in history at a time of possibility and not of determinism. If reality were pure determinism because it was thus decided or planned, there would be no reason at all to be angry. My right to be angry presupposes that the historical experience in which I participate tomorrow is not a given but a challenge and a problem. My just anger is grounded in any indignation in the face of the denial of the rights inherent in the very essence of the human condition.

Advocacy is a key component of this approach, advocating for the people who psychologists work with at the individual and societal level, for example, supporting a client to speak against a discriminatory practice at work, or obtain support from a community group. At the level of social politics, it could involve participation or support for a change movement (Belkin Martinez & Fleck-Henderson, 2014). Liberation psychology thus connects the experience of individual problems to ideologies of institutions and structures of society – including taken-for-granted ideas around race, class, gender, consumerism, individualism, competition, and sexuality (Belkin Martinez & Fleck-Henderson, 2014; Martín-Baró, 1994).

Investing in enabling individuals, groups, and communities to produce research that aligns with agreed-upon research problem and questions, design and execution of research, and knowledge translation and other products of research is an empowering decolonizing practice. As well, participatory action and community-based research approaches have been found to add relevance and enhance outcomes of study for groups of people partaking in the research (Brydon-Miller, 1997; Brydon-Miller, Greenwood, & Maguire, 2003). These research approaches open up the possibility of more diverse representations of mental health in scholarship and practice, collaborative and participatory approaches can challenge sanist representations of mental health, offer greater complexity and nuance to the theorization of mad people's lives, and serve to empower disadvantaged individuals and groups of people.

Strengths and Limitations of the Study

This dissertation offers several strengths as a scholarly work of the discipline of psychology. To date, there have been no other interdisciplinary critical poststructuralist discourse analyses of CPA Code ethics. This theoretical and analytical approach to ethics subject matter is beneficial for discipline of psychology as it looks beyond commonsense and postpositivist

understandings and conceptualizations of ethics research and practice to employ an analysis of language. A Foucauldian-informed discourse perspective of ethics offers psychology a nuanced understanding of how ethical-professional behaviour is produced by language, and also how it may be transformed by its resistance and possibilities for alternate language and action.

Additionally, the reflexive approach I take introduces an intersubjective, embodied experience of ethics and knowledge production as I the researcher engaged with the research subject matter.

Moreover, the work of this dissertation draws attention to mainstream psychology's continued lack of regard for social justice ethic and practice in the discipline, and provides a strong rationale for the inclusion of social justice ethic in the discipline of psychology. Given the social context of Canada, a time whereby issues of oppression, access, and inclusion of marginalized individuals and groups of people are moving to the fore, psychology is increasingly required to shift its stance if the discipline is to engage meaningfully and with responsibility to these issues.

It also is important for me to discuss the limits of this study. On the textual material I used for my analyses, I chose to deconstruct a dominant text of ethics in Canadian psychology – the Canadian Code of Ethics for Psychologists (2016b). However, it is likely that psychologists use other texts of ethics to inform their practices that I did not collect and analyze in this study. Some of these texts are the *Tri-Council Policy Statement 2*, psychology standards of practice, and standardized graduate curriculum material on ethics such as vignettes of ethical dilemmas (e.g., CPA, 2001). As the discourses that make up these documents are possibly influenced by texts other than the CPA Code, a revised study incorporating these texts could have yielded other discourses and a different discursive formation of psychology ethics. The current work I have produced here does, however, contribute a theoretical framework for future discourse analyses of ethics in psychology. In terms of the second limitation of the study, I did not include a sample of

talk and action about psychology ethics by those in the discipline, such as students, clients, research participants, and psychologists. This study is then unable to inform how ethical-professional subjectivities are taken up by those impacted by psychology discourse.

Additionally, although this study makes an important contribution as a theoretically informed, discourse-based analysis of ethics, and makes an argument for incorporating social justice into the discipline, it was not introduced or grounded within the current local/Canadian social climate and the issues of marginalized social groups that connect with and rely on psychology. For example, how has psychology formally responded to calls for Indigenous rights and the *Truth and Reconciliation Commission of Canada: Call to Action* report (2015)? Or, as Black Lives Matter (2017) and other groups have made explicitly public, the overrepresentation and treatment of Black bodies in mental health carceral spaces; police carding, shooting, and acts of criminalization and violence (such as the death of Andrew Loku); and other acts of anti-Black sanism against Black bodies (Meerai, Abdillahi, & Poole, 2016)? Psychology is by contrast highly responsive to traumas experienced by other groups of people, in times of natural disaster, warfare, and infectious disease (e.g., CPA, 2016d). Psychology's discrepancies in response to particular human distresses and violence is disturbing, lacking in advocacy for and accountability to groups of people in society. Grounding psychology and its disciplinary ethics within the social issues experienced by marginalized groups strengthens and makes explicit that issues of social justice are not separate from discipline of psychology, and that psychology is accountable to respond.

Reflexive Conclusions

Embarking on this research has made me aware of the impressive range of madness and social justice scholarship and activism occurring in Canada. I believe psychology, as a prolific

and socially constructed discipline, will continue to broaden its scope of social justice ethic and practices. I am particularly interested in the range of discussions about psychologists who also identify as having experience with madness. Discovering critical psychology through Mad Studies and Mad events – making sense of my Mad and professional identities in alternative/mad-centric spaces – changed the ways I viewed psychology and what I wanted to continue to contribute to the discipline. My own experience in psychology has taught me that social justice change is not only possible, but can become a part of regular practice. I am excited about potential opportunities to transform disciplinary change through psychology education and training. Deeply inspired by my own transformations in/from my psychology education and this research, I hope to continue lines of this work by advocating for mad knowledges in psychology, by exploring activism and education in the discipline, by bridging relevant interdisciplinary studies with similar work in critical/psychology, and in carrying out participatory research in psychology programs with mad people in the classroom.

References

- Adame, A. (2012). The disappointed evangelist: Or, how I learned to stop worrying and love ambiguity. *Reflective Practice, 13*(4), 597-607. doi:10.1080/14623943.2012.657794
- Adame, A. L. (2011). Negotiating discourses: The dialectical identities of survivor-therapists. *The Humanistic Psychologist, 39*(4), 324-337. doi:10.1080/08873267.2011.618038
- Adame, A. L., & Knudson, R. M. (2008). Recovery and the good life: How psychiatric survivors are revisioning the healing process. *Journal of Humanistic Psychology, 48*(2), 142-164. doi:10.1177/0022167807305544
- Agger, B. (1991). Critical theory, poststructuralism, postmodernism: Their sociological relevance. *Annual Review of Sociology, 17*, 105-131. doi:10.1146/annurev.so.17.080191.000541
- Ahmed, S. (2007). A phenomenology of whiteness. *Feminist Theory, 8*(2), 149-168. doi:10.1177/1464700107078139
- Ahmed, S. (2012). *On being included: Racism and diversity in institutional life*. London, UK: Duke University Press.
- Andersen, N. Å. (2003). *Discursive analytical strategies: Understanding Foucault, Koselleck, Laclau, Luhmann*. Bristol, UK: The Policy Press.
- Armstrong, D. (1983). *The political anatomy of the body*. Cambridge, UK: Cambridge University Press.
- Arribas-Ayllon, M., & Walkerdine, V. (2008). *Foucauldian discourse analysis*. In C. Willig & W. Stainton-Rogers (Eds.), *The SAGE handbook of qualitative research in psychology* (pp. 91-108). Thousand Oaks, CA: SAGE Publications, Inc.

- Ashmore, M. (1989). *The reflexive thesis: Writing sociology of scientific knowledge*. Chicago, IL: University of Chicago Press.
- Austin, S., & Prilleltensky, P. (2001). Diverse origins, common aims: The challenge of critical psychology. *Radical Psychology*, 2(2). Retrieved from <http://www.radpsynet.org/journal/vol2-2/austin-prilleltensky.html>
- Austin, S., Rutherford, A., & Pyke, S. (2006). In our own voice: The impact of feminism in Canadian psychology. *Feminism & Psychology*, 16(3), 243-257.
doi:10.1177/0959353506067844
- Austin, W., Bergum, V., Nuttgens, S., & Peternelj-Taylor, C. (2006). A re-visioning of boundaries in professional helping relationships: Exploring other metaphors. *Ethics & Behavior*, 16(2), 77-94. doi:10.1207/s15327019eb1602_1
- Austin, W., Rankel, M., Kagan, L., Bergum, V., & Lemermeyer, G. (2005). To stay or to go, to speak or stay silent, to act or not to act: Moral distress as experienced by psychologists. *Ethics & Behavior*, 15(3), 197-212. doi:10.1207/s15327019eb1503_1
- Ball, L. C., Bazar, J. L., MacKay, J., Rodkey, E. N., Rutherford, A., & Young, J. L. (2013). Using psychology's feminist voices in the classroom. *Psychology of Women Quarterly*, 37(2), 261-266. doi:10.1177/0361684313480484
- Barthes, R. (1977). *Image-music-text*. London, UK: Fontana.
- Bassman, R. (1997). The mental health system: Experiences from both sides of the locked doors. *Professional Psychology: Research & Practice*, 28(3), 238-242. doi:10.1037/0735-7028.28.3.238

- Bassman, R. (2001). Whose reality is it anyway? Consumers/survivors/ex-patients can speak for themselves. *Journal of Humanistic Psychology, 41*(4), 11-35.
doi:10.1177/0022167801414002
- Bauman, Z. (1993). *Postmodern ethics*. Oxford, UK: Blackwell.
- Bazerman, C. (2003). Intertextuality: How texts rely on other texts. In C. Bazerman & P. Prior (Eds.), *What writing does and how it does it* (pp. 83-96). New York, NY: Routledge.
- Belkin Martinez, D., & Fleck-Henderson, A. (2014). *Social justice in clinical practice: A liberation health framework for social work*. New York, NY: Routledge.
- Beresford, P., & Russo, J. (2016). Supporting the sustainability of Mad Studies and preventing its co-optation. *Disability & Society, 31*(2), 270-274.
doi:10.1080/09687599.2016.1145380
- Berger, P., & Luckmann, T. (1966). *The social construction of knowledge: A treatise in the sociology of knowledge*. New York, NY: Doubleday.
- Bhatia, S. (2002). Orientalism in Euro-American and Indian psychology: Historical representations of “Natives” in colonial and postcolonial contexts. *History of Psychology, 5*(4), 376-398. doi:10.1037//1093-4510.5.4.376
- Bhavnani, K.-K., & Phoenix, A. (1994). Special issue: Shifting identities shifting racisms. *Feminism & Psychology, 4*(1), 5-18. doi:10.1177/0959353594041001
- Billig, M. (1987). *Arguing and thinking: A rhetorical approach to social psychology*. Cambridge, UK: Cambridge University Press.
- Billig, M. (1997). *From codes to utterances: Cultural studies, discourse and psychology*. London, UK: Sage Publications, Inc.

- Billington, T., & Williams, T. (2015). Education and psychology: Change at last? In I. Parker (Ed.), *Handbook of critical psychology* (pp. 231-239). London, UK: Routledge.
- Birke, L. (2000). *Feminism and the biological body*. New Brunswick, NJ: Rutgers University Press.
- Black Lives Matter. (2017). *Demands*. Retrieved from <https://blacklivesmatter.ca/demands/>
- Bordo, S. (1998). Bringing body into theory. In D. Welton (Ed.), *Body and flesh: A philosophical reader* (pp. 84-97). Oxford, UK: Blackwell Publishers Ltd.
- Breen, L. J., & Darlaston-Jones, D. (2010). Moving beyond the enduring dominance of positivism in psychological research: Implications for psychology in Australia. *American Psychologist, 45*(1), 67-76. doi:10.1080/00050060903127481
- Brown-Bowers, A., Ward, A., & Cormier, N. (2017). Treating the binge or the (fat) body? Representations of fatness in a gold standard psychological treatment manual for binge eating disorder. *Health: An Interdisciplinary Journal for the Study of Health, Illness and Medicine, 21*(1), 21-37. doi:10.1177/1363459316674788
- Brown, L., & Strega, S. (2005). *Research as resistance: Critical, Indigenous, and anti-oppressive approaches*. Toronto: Canadian Scholars' Press/Women's Press.
- Brydon-Miller, M. (1997). Participatory action research: Psychology and social change. *Journal of Social Issues, 53*(4), 657-666. doi:10.1111/j.1540-4560.1997.tb02454.x
- Brydon-Miller, M., Greenwood, D., & Maguire, P. (2003). Why action research? *Action Research, 1*(1), 9-28. doi:10.1177/14767503030011002
- Burchell, G., Gordon, C., & Miller, P. (1991). *The Foucault effect: Studies in governmentality*. Chicago, IL: University of Chicago Press.

- Burman, E. (1991). What discourse is not. *Philosophical Psychology*, 4(3), 325-342.
doi:10.1080/09515089108573034
- Burr, V. (2003). *An introduction to social constructionism* (2nd ed.). New York, NY: Routledge.
- Burstow, B. (2004). Progressive psychotherapists and the psychiatric survivor movement. *Journal of Humanistic Psychology*, 44(2), 141-154. doi:10.1177/0022167804263067
- Burstow, B. (2005). Feminist antipsychiatry praxis: Women and the movement(s). In W. Chan, D. Chunn, & R. Menzies (Eds.), *Women, madness, and the law: A feminist reader* (pp. 245-258). London, UK: Glasshouse.
- Burstow, B. (2015). *Psychiatry and the business of madness: An ethical and epistemological accounting*. New York, NY: Palgrave Macmillan.
- Burstow, B., Le François, B. A., & Diamond, S. (2014). *Psychiatry disrupted: Theorizing resistance and crafting the (r)evolution*. Montreal, QC, & Kingston, ON: McGill-Queen's Press.
- Burstow, B., & Weitz, D. (1988). *Shrink resistant: The struggle against psychiatry in Canada*. Vancouver, BC: New Star Books.
- Burton, M., & Gómez Ordóñez, L. H. (2015). Liberation psychology: Another kind of critical psychology. In I. Parker (Ed.), *Handbook of critical psychology* (pp. 348-355). London, UK: Routledge.
- Butler, J. (1990). *Gender trouble*. London, UK: Routledge.
- Butler, J. (1992). Contingent foundations: Feminism and the question of postmodernism. In J. Butler & J. Scott (Eds.), *Feminist theorise the political*. New York, NY: Routledge.
- Byers, S. E., & Price, D. (1986). Guidelines for the elimination of sexual harassment. *Canadian Psychology*, 27(4), 371. doi:10.1037/h0079972

- Canadian Institutes of Health Research, Natural Sciences and Engineering Research Council of Canada, & Social Sciences and Humanities Research Council of Canada. (2014). *Tri-Council Policy Statement 2: Ethical Conduct for Research Involving Humans*. Ottawa, ON: Author.
- Canadian Psychological Association. (1986). *Canadian Code of Ethics for Psychologists*. Ottawa, ON: Author.
- Canadian Psychological Association. (1991). *Canadian Code of Ethics for Psychologists* (2nd ed.). Ottawa, ON: Author.
- Canadian Psychological Association. (1996). *Guidelines for non-discriminatory practice*. Ottawa, ON: Author.
- Canadian Psychological Association. (2000). *Canadian Code of Ethics for Psychologists* (3rd ed.). Ottawa, ON: Author.
- Canadian Psychological Association. (2001). *Guidelines for non-discriminatory practice (update)*. Ottawa, ON: Author.
- Canadian Psychological Association. (2007). *Guidelines for ethical psychological practice with women*. Ottawa, ON: Author.
- Canadian Psychological Association. (2009). *Ethical guidelines for supervision in psychological teaching, research practice, and administration*. Ottawa, ON: Author.
- Canadian Psychological Association. (2011). *Accreditation standards and procedures for doctoral programmes and internships in professional psychology*. Fifth revision. Ottawa, ON: Author.
- Canadian Psychological Association. (2013). *Strategic plan: 2013-2018*. Ottawa, ON: Author.

- Canadian Psychological Association. (2016a). *Psychology in Canada*. Retrieved from <http://www.cpa.ca/public/psychologyincanada/>
- Canadian Psychological Association. (2016b). *Canadian Code of Ethics for Psychologists* (4th second draft ed.). Ottawa, ON: Author.
- Canadian Psychological Association. (2016c). *Advocacy for practice*. Retrieved from <http://www.cpa.ca/practitioners/advocacyforpractice/>
- Caplan, P. (1996). *They say you're crazy: How the world's most powerful psychiatrists decide who's normal*. New York, NY: Perseus.
- Capponi, P. (1997). *Dispatches from the poverty line*. Toronto, ON: Penguin.
- Capponi, P. (2003). *Beyond the crazy house: Changing the future of madness*. Toronto, ON: Penguin.
- Caputo. (1993). *Against ethics: Contributions to a poetics of obligation with constant reference to deconstruction*. Bloomington, IN, & Indianapolis, IN: Indiana University Press.
- Cavalli-Sforza, L. L. (1995). *The great human diasporas: The history of diversity and evolution*. Reading, MA: Perseus Books.
- Chamberlain, J. (1978). *On our own: Patient-controlled alternatives to the mental health system*. New York, NY: McGraw-Hill.
- Cheek, J. (2004). At the margins? Discourse analysis and qualitative research. *Qualitative Health Research, 14*(8), 1140-1150.
- Church, K. (1997). Madness in her method: Creating a 'survivor frame' for mental health research. *Journal of Psychiatric and Mental Health Nursing, 4*, 307-308.
doi:10.1046/j.1365-2850.1997.00076.x

- Church, K. (2013). Making madness matter in academic practice. In B. A. LeFrançois, R. Menzies, & G. Reaume (Eds.), *Mad matters: A critical reader in Canadian Mad Studies* (pp. 181-190). Toronto, ON: Canadian Scholars' Press.
- Clark, C. M. (2012). Individual moralities and institutional ethics: Implications for the Canadian Code of Ethics for Psychologists. *Psychotherapy and Politics International*, 10(3), 187-204. doi:10.1002/ppi.1272
- Clarke, S. (2005). The neoliberal theory of society. In A. Saad-Filho & D. Johnston, *Neoliberalism – A critical reader*. London, UK: Pluto Press.
- College of Psychologists of Ontario. (2009). *Standards of professional conduct*. Toronto, ON: Author.
- Cosgrove, L., & Wheeler, E. E. (2013). Industry's colonization of psychiatry: Ethical and practical implications of financial conflicts of interest in the DSM-5. *Feminism & Psychology*, 23(1), 93-106. doi:10.1177/0959353512467972
- Costa, L., Voronka, J., Landry, D., Reid, J., Mcfarlane, B., Reville, D., & Church, K. (2012). "Recovering our stories": A small act of resistance. *Studies in Social Justice*, 6(1), 85-101.
- Crenshaw, K. (1991). Mapping the margins: Intersectionality, identity politics, and violence against women of color. *Stanford Law Review*, 43(6), 1241-1299.
- Creswell, J. W. (2009). *Research design: Qualitative, quantitative, and mixed methods approaches*. Thousand Oaks, CA: SAGE Publications, Inc.
- Csordas, T. J. (2008). Intersubjectivity and intercorporeality. *Subjectivity*, 22(1), 110-121.
- Culler, J. (1981). *The pursuit of signs: Semiotics, literature, deconstruction*. London, UK: Routledge & Kegan Paul.

- Daley, A., & Mulé, N. (2014). LGBTQs and the DSM-5: A critical queer response. *Journal of Homosexuality*, 61(1), 1288-1312. doi:10.1080/00918369.2014.926766
- Danaher, G., Schirato, T., & Webb, J. (2012). *Understanding Foucault: A critical introduction* (2nd ed.). Thousand Oaks, CA: Sage Publications, Inc.
- Dean, M. (1999). *Governmentality: Power and rule in modern society*. London, UK: Sage.
- Deegan, P. E. (2000). Spirit breaking: When the helping professions hurt. *The Humanistic Psychologist*, 28, 194-209. doi:10.1080/08873267.1990.9976897
- Denmark, F., Russo, N. F., Frieze, I. H., & Sechzer, J. A. (2011). Guidelines for avoiding sexism in psychological research: A report of the Ad Hoc Committee on Nonsexist Research. *American Psychologist*, 43(7), 582-585. doi:10.1037/0003-066X.43.7.582
- Diamond, S. (2012). *Against the medicalization of humanity: A critical ethnography of a community trying to build a world free of sanism and psychiatric oppression*. (Unpublished doctoral dissertation). University of Toronto, Toronto, ON.
- Durrheim, K., Hook, D., & Riggs, D. (2004). Dislocating identity: Desegregation and the transformation of place. *Journal of Environmental Psychology*, 24(4), 455-473. doi:10.1016/j.jenvp.2004.09.004
- Durrheim, K., Hook, D., & Riggs, D. (2009). Race and racism. In D. Fox, I. Prilleltensky, & S. Austin (Eds.), *Critical Psychology: An Introduction* (2nd ed.). Thousand Oaks, CA: Sage.
- Eberlein, L. (1987). Introducing ethics to beginning psychologists: A problem-solving approach. *Professional Psychology: Research & Practice*, 18, 353-359.
- Eberlein, L. (1988). The new CPA Code of Ethics for Canadian Psychologists: An education and training perspective. *Canadian Psychology*, 29(2), 206-212. doi:10.1037/h0079768
- Eribon, D. (1991). *Michel Foucault*. Cambridge, MA: Harvard University Press.

- Fairclough, N. (1992). *Discourse and social change*. Cambridge, UK: The Polity Press.
- Fairclough, N. (1995). *Critical discourse analysis*. London, UK: Longman.
- Faulkner, A. (2004). *The ethics of survivor research: Guidelines for the ethical conduct of research carried out by mental health service users and survivors*. Bristol, UK: The Polity Press. Retrieved from <https://www.jrf.org.uk/file/36008/download?token=fy32S63X>
- Feminist Therapy Institute. (1996). The Feminist Therapy Institute Code of Ethics. *Women & Therapy, 19*, 79-91.
- Fine, M., & Burns, A. (2003). Class notes: Towards a critical psychology of class and schooling. *Journal of Social Issues, 59*(4), 841-860. doi:10.1046/j.0022-4537.2003.00093.x
- Finlay, L., & Gough, B. (2003). *Reflexivity: A practical guide for researchers in health and social sciences*. Oxford, UK: Blackwell Science Ltd.
- Foucault, M. (1970). *The order of things: An archaeology of the human sciences*. London, UK: Tavistock.
- Foucault, M. (1972). *The archaeology of knowledge and the discourse on language*. (A.M. Sheridan-Smith, Trans.). New York, NY: Pantheon Books.
- Foucault, M. (1973). *Madness and civilization*. New York, NY: Vintage Books.
- Foucault, M. (1977). La fonction politique de l'intellectuel. In D. Defert & F. Ewald (Eds.), *Dits et écrits II, 1976-1988* (pp. 109-114). Paris: Gallimard.
- Foucault, M. (1978). *The history of sexuality: An introduction*. New York, NY: Vintage Books.
- Foucault, M. (1979). *Discipline and punish: The birth of the prison*. London, UK: Penguin.

- Foucault, M. (1980). Two lectures. In C. Gordon (Ed.), *Power/knowledge: Selected interviews and other writings by Michel Foucault, 1972-1977* (pp. 78-108). New York, NY: Pantheon Books.
- Foucault, M. (1981). *The order of discourse*. In R. Young (Ed.), *Untying the text: A poststructural anthology* (pp. 48-78). Boston, MA: Routledge & Kegan Paul.
- Foucault, M. (1993). About the beginning of hermeneutics of the self. *Political Theory*, 21(2), 198-227.
- Foucault, M. (1994a). *The birth of the clinic: An archaeology of the Medical Perception*. New York, NY: Vintage Books.
- Foucault, M. (1994b). *The order of things: An archaeology of the human sciences*. New York, NY: Vintage Press.
- Foucault, M. (1998). *The history of sexuality: The will to knowledge*. London, UK: Penguin.
- Foucault, M. (1999). *Les anormaux: Cours au Collège de France (1974-1975)*. Paris: Seuil/Gallimard.
- Foucault, M. (2008). *The birth of biopolitics: Lectures at the Collège de France, 1978-1979*. London, UK: Palgrave Macmillan.
- Fox, D., Prilleltensky, I., & Austin, S. (2009). Introduction to critical psychology. In D. Fox & I. Prilleltensky (Eds.), *Critical psychology: An introduction* (2nd ed., pp. 51-67). Thousand Oaks, CA: SAGE Publications, Inc.
- Fox, N. J. (1998). Foucault, Foucauldians and sociology. *The British Journal of Sociology*, 49(3), 415-433.
- Freire, P. (1970). *Pedagogy of the oppressed*. New York, NY: Seabury Press.
- Freire, P. (1974). *Education for critical consciousness*. New York, NY: Continuum.

- Freire, P. (1998). *Pedagogy of freedom: Ethics, democracy, and civic courage*. New York, NY: Rowman & Littlefield Publishers, Inc.
- Freire, P., & Macedo, D. (1998). *The Paulo Freire reader*. New York, NY: Cassell & Continuum.
- Frost, S. (2013). Psychoanalysis, colonialism, racism. *Journal of Theoretical & Philosophical Psychology*, 33(3), 141-154. doi:10.1037/a0033398
- Garfinkel, H. (1967). *Studies in ethnomethodology*. Englewood Cliffs, NJ: Prentice Hall.
- Gauthier, J., Pettifor, J., & Ferrero, A. (2010). The Universal Declaration of Ethical Principles for Psychologists: A culture-sensitive model for creating and reviewing a code of ethics. *Ethics & Behavior*, 20(3-4), 179-196. doi:10.1080/10508421003798885
- Gavey, N. (1989). Feminist poststructuralism and discourse analysis: Contributions to feminist psychology. *Psychology of Women Quarterly*, 13(4), 459-475. doi:10.1111/j.1471-6402.1989.tb01014.x
- Gee, J. P. (1999). *An introduction to discourse analysis: Theory and method*. New York, NY: Routledge.
- Goodley, D., & Lawthorn, R. (2006). *Disability & psychology: Critical introductions & reflections*. New York, NY: Palgrave Macmillan.
- Goodson, I., & Dowbiggin, I. (1990). Docile bodies: Commonalities in the history of psychiatry and schooling. In J. Ball (Ed.), *Foucault and education*. London, UK: Routledge.
- Goodyear, R. K., & Sinnett, E. R. (1984). Current and emerging issues for counseling psychology. *The Counseling Psychologist*, 12(3-4), 87-98. doi:10.1177/0011000084123009

- Grant, B. (1997). Disciplining students: The construction of student subjectivities. *British Journal of Sociology of Education*, 18(1), 101-114.
- Guba, E. G., & Lincoln, Y. S. (1994). Competing paradigms in qualitative research. In N. K. Denzin & Y. S. Lincoln (Eds.), *Handbook of qualitative research* (pp. 105-117). Thousand Oaks, CA: SAGE Publications, Inc.
- Guy, J. D., & Souder, J. K. (1986). Impact of therapists' illness or accident on psychotherapeutic practice: Review and discussion. *Professional Psychology: Research & Practice*, 17(6), 509-513. doi:10.1037/0735-7028.17.6.509
- Guzzo, R. S. L. (2015). Critical psychology and the American content: From colonization and domination to liberation and emancipation. In I. Parker (Ed.), *Handbook of critical psychology* (pp. 406-414). London, UK: Routledge.
- Haag, A. M. (2006). Ethical dilemmas faced by correctional psychologists in Canada. *Criminal Justice & Behavior*, 33(1), 93-109. doi:10.1177/0093854805282319
- Habermas, J. (1972). *Knowledge and human interest* (J.J. Shapiro, trans.). Boston, MA: Beacon Press.
- Hadjistavropoulos, T. (2009). Canadian psychology in a global context. *Canadian Psychology*, 50(1), 1-7. doi:10.1037/a0013398
- Hadjistavropoulos, T., & Bieling, P. J. (2000). When reviews attack: Ethics, free speech, and the peer review process. *Canadian Psychology*, 41(3), 152-159. doi:10.1037/h0086865
- Hadjistavropoulos, T., Malloy, D. C., Sharpe, D., & Fuchs-Lacelle, S. (2003). The ethical ideologies of psychologists and physicians: A preliminary comparison. *Ethics & Behavior*, 13(1), 97-104. doi:10.1207/S15327019EB1301_11

- Hadjistavropoulos, T., Malloy, D. C., Sharpe, D., Green, S., & Fuchs-Lacelle, S. (2002). The relative importance of the ethical principles adopted by the American Psychological Association. *Canadian Psychology, 43*(4), 254-259. doi:10.1037/h0086921
- Hamann, T. H. (2009). Neoliberalism, governmentality, and ethics. *Foucault Studies, 6*, 37-59.
- Hargrove, D. S. (1986). Ethical issues in rural mental health practice. *Professional Psychology: Research & Practice, 17*(1), 20-23. doi:10.1037/0735-7028.17.1.20
- Healy, K. (2000). *Social work practices: Contemporary perspectives on change*. Thousand Oaks, CA: Sage Publications, Inc.
- Healy, K. (2014). *Social work theories in context: Creating frameworks for practice* (2nd ed.). New York, NY: Palgrave Macmillan.
- Hearn, J., & Morgan, D. (1990). *Men, masculinities and social theory*. London, UK: Unwin Hyman.
- Hernández-Guzmán, L. (2011). Ethics: The Mexican-Canadian connection. *Canadian Psychology, 52*(3), 232. doi:10.1037/a0024390
- Hickinbottom, S. (2007). The (mis)education of the psychology student. *International Journal of Critical Psychology, 19*, 77-92.
- Holshauen, K., & Bowie, C. R. (2014). *"Psychology Works" fact sheet: Schizophrenia*. Ottawa, ON: Canadian Psychological Association.
- Hook, D. (2001). Discourse, knowledge, materiality, history: Foucault and discourse analysis. *Theory and Psychology, 11*(4), 521-547.
- Hook, D. (2007). Disciplinarily and the production of psychological individuality. In D. Hook, *Foucault, psychology and the analytics of power* (pp. 8-61). Hampshire: Palgrave Macmillan.

- Huey, W. C. (1986). Ethical concerns in school counseling. *Journal of Counseling & Development, 64*(5), 321-322. doi:10.1002/j.1556-6676.1986.tb01121.x
- Hugman, R. (2005). *New approaches in ethics for the caring professions*. New York, NY: Palgrave Macmillan.
- Imber, S. D., Glanz, L. M., Elkin, I., Sotsky, S. M., Boyer, J. L., & Leber, W. R. (1986). Ethical issues in psychotherapy research: Problems in a collaborative clinical trials study. *American Psychologist, 41*(2), 137-146. doi:10.1037/0003-066X.41.2.137
- Jørgensen, M. W., & Phillips, L. J. (2002). *Discourse analysis as theory and method*. Thousand Oaks, CA: Sage Publications, Inc.
- Kirmayer, L., Brass, G. M., & Tait, C. L. (2001). The mental health of Aboriginal peoples: Transformations of identity and culture. *Canadian Journal of Psychiatry, 45*(7), 607-612. doi:10.1177/070674370004500702
- Kirmayer, L., Simpson, C., & Cargo, M. (2003). Healing traditions: Culture, community and mental health promotion with Canadian Aboriginal peoples. *Australasian Psychiatry, 11*, S15-S23. doi:10.1046/j.1038-5282.2003.02010.x
- Kitchener, K. S. (1984). Guest editor's introduction: Ethics and counseling psychology: Distinctions and directions. *The Counseling Psychologist, 12*(3-4), 15-18. doi:10.1177/0011000084123002
- Kottsieper, P. (2009). Experiential knowledge of serious mental health problems: One clinician and academic's perspective. *Journal of Humanistic Psychology, 49*(2), 174-192. doi:10.1177/0022167808327749
- Kristeva, J. (1980). *Desire in language: A semiotic approach to literature and art*. New York, NY: Columbia University Press.

- Lather, P. (1986). Research as praxis. *Harvard Educational Review*, 56(3), 257-278.
doi:10.17763/haer.56.3.bj2h231877069482
- Lather, P. (1993). Fertile obsession: Validity after poststructuralism. *The Sociological Quarterly*, 34(4), 673-693.
- Latour, B. (1987). *Science in action*. Milton Keynes: Open University Press.
- Latour, B., & Woolgar, S. (1986). *Laboratory life: The construction of scientific facts* (2nd ed.). Princeton, NJ: Princeton University Press.
- Lavallee, L. F., & Poole, J. (2010). Beyond recovery: Colonization, health and healing for Indigenous people in Canada. *International Journal of Mental Health & Addiction*, 8, 271-281. doi:10.1007/s11469-009-9239-8
- LeBlanc, S., & Kinsella, E. A. (2016). Toward epistemic justice: A critically reflexive examination of ‘sanism’ and implications for knowledge generation. *Studies in Social Justice*, 10(1), 59-78.
- LeFrançois, B., Menzies, R., & Reaume, G. (2013). *Mad matters: A critical reader in Canadian mad studies*. Toronto, ON: Canadian Scholars’ Press.
- Lewontin, R. (1995). *Human diversity*. New York, NY: Scientific American Library.
- Lincoln, Y. S., & Guba, E. G. (2000). Paradigmatic controversies, contradictions, and emerging confluences. In N. K. Denzin & Y. S. Lincoln (Eds.), *The handbook of qualitative research* (2nd ed., pp. 163–188). Beverly Hills, CA: SAGE Publications, Inc.
- Lindsay, G. (1998). The first decade of the Canadian Code of Ethics for Psychologists. In J. Pettifor (Ed.), *Voices from beyond: Comment from other countries*. *Canadian Psychology*, 39, 242-243.
- Lorde, A. (1984). *Sister outsider: Essays and speeches*. Berkeley, CA: Crossing Press.

- Lupton, D. (1995). *The imperative of health: Public health and the regulated body*. London, UK: Sage.
- Mabe, A. R., & Rollin, S. A. (1986). The role of a code of ethical standards in counseling. *Journal of Counseling & Development, 64*(5), 294-297. doi:10.1002/j.1556-6676.1986.tb01113.x
- MacKay, J., & Rutherford, A. (2012). Feminist women's accounts of depression. *Affilia: Journal of Women and Social Work, 27*(20), 180-189. doi:10.1177/0886109912443959
- Magnet, S., & Diamond, S. (2011). Feminist pedagogy meets feminist therapy: Teaching feminist therapy in women's studies. *Feminist Teacher, 21*(1), 21-35.
- Malloy, D. C., Hadjistavropoulos, T., Douaud, P., & Smythe, W. E. (2002). The codes of ethics of the Canadian Psychological Association and the Canadian Medical Association: Ethical orientation and functional grammar analysis. *Canadian Psychology, 43*(4), 244-253.
- Malson, H. (1998). *The thin woman: Feminism, post-structuralism and the social psychology of anorexia nervosa*. New York, NY: Routledge.
- Mappes, D. C., Robb, G. P., & Engels, D. W. (1985). Conflicts between ethics and law in counseling and psychotherapy. *Journal of Counseling & Development, 64*(4), 246-252. doi:10.1002/j.1556-6676.1985.tb01094.x
- Marecek, J., & Gavey, N. (2013). DSM-5 and beyond: A critical feminist engagement with psychodiagnosis. *Feminism & Psychology, 23*(1), 3-9. doi:10.1177/0959353512467962
- Marecek, J., & Hare-Mustin, R. T. (2009). Clinical psychology: The politics of madness. In D. Fox, I. Prilleltensky, & S. Austin (Eds.), *Critical psychology: An introduction* (2nd ed., pp. 75-92). Los Angeles, CA: SAGE Publications, Inc.

- Martín-Baró, I. (1994). Toward a liberation psychology. In A. Aron & S. Corne (Eds.), *Writings for a liberation psychology* (pp. 17-32). Cambridge, MA: Harvard University Press.
- Mays, V. M. (1988). Even the rat was white and male: Teaching the psychology of black women. In P. A. Bronstein & K. Quina (Eds.), *Teaching a psychology of people: Resources for gender and sociocultural awareness* (pp. 142-146). Washington, DC: American Psychological Association. doi:10.1037/10066-017
- McCrea, S., Enman, M., & Pettifor, J. (1997). The Canadian Code of Ethics and the prescription privilege debate. *Canadian Psychology*, 38(1), 49-51. doi:10.1037/0708-5591.38.1.49
- McWade, B., & Costa, L. (2016). *The good, the bad, & the ugly: Working in alliance with psychiatrists, psychologists and other 'heroes.'* Presentation event for Mad Pride Week 2016, Toronto, ON.
- Meerai, S., Abdillahi, I., & Poole, J. (2016). An introduction to anti-Black sanism. *Intersectionalities: A Global Journal of Social Work Analysis, Research, Polity, and Practice*, 5(3), 88-35.
- Moane, G. (2003). Bridging the personal and the political: Practices for a liberation psychology. *American Journal of Community Psychology*, 31, 91-101.
- Moane, G. (2014). Liberation psychology, feminism, and social justice psychology. In C. V. Johnson & H. L. Friedman (Eds.), *The Praeger Handbook of Social Justice and Psychology* (pp. 115-132). Denver, CO: Praeger.
- Moore, S. D. (1994). *Poststructuralism and the New Testament: Foucault and Derrida at the foot of the cross*. Minneapolis, MN: Fortress Press.
- Morgan, A., Felton, A., Fulford, B. K. W. M., Kalathil, J., & Stacey, G. (2015). *Values and ethics in mental health: An exploration for practice*. London, UK: Palgrave.

- Morrow, M., & Weisser, J. (2012). Towards a social justice framework in mental health recovery. *Studies in Social Justice*, 6(1), 27-43.
- Mulkay, M. (1991). *Sociology of science: A sociological pilgrimage*. Milton Keynes: Open University Press.
- Murray, S. J., & Holmes, D. (2009) *Critical interventions in the ethics of healthcare: Challenging the principle of autonomy in bioethics*. Burlington, VT: Ashgate Publishing.
- Neill, C. (2016). *Ethics and psychology: Beyond codes of practice*. New York, NY: Routledge.
- Newnes, C. (2004). Psychology and psychotherapy's potential for countering the medicalization of everything. *Journal of Humanistic Psychology*, 44(3), 358-376.
doi:10.1177/0022167804266180
- Nuttgens, S. (1998, October). Ethical self-protection within psychology. *In Touch*, 1(8).
Retrieved from <http://www.phen.ab.ca/materials/intouch/vol1/intouch1-08.html>
- O'Connor, D. (2001). Journeying the quagmire: Exploring the discourses that shape the qualitative research process. *Affilia*, 16(2), 138-158. doi:10.1177/08861090122094190
- O'Neill, P. (1998). Teaching ethics: The utility of the CPA code. *Canadian Psychology*, 39(3), 194-201. doi:10.1037/h0086808
- Ostrove, J. M., & Cole, E. R. (2003). Privileging class: Toward a critical psychology of social class in the context of education. *Journal of Social Issues*, 59(4), 677-692.
doi:10.1046/j.0022-4537.2003.00084.x
- Painter, D. (2015). Postcolonial theory: Towards a wording of critical psychology. In I. Parker (Ed.), *Handbook of critical psychology* (pp. 366-375). London, UK: Routledge.

- Papadopoulos, D., & Schraube, E. (2004). Ian Parker: This world demands our attention. *Forum: Qualitative Social Research*, 5(3). Retrieved from <http://www.qualitative-research.net/index.php/fqs/article/view/558/1210>
- Parker, I. (2002). Tracing therapeutic discourse in material culture. In *Critical discursive psychology* (pp. 205-219). London, UK: Palgrave.
- Parker, I. (2014a). Madness and justice. *Journal of Theoretical & Philosophical Psychology*, 34(1), 28-40. doi:10.1037/a0032841
- Parker, I. (2014b). *Psychology after discourse analysis: Concepts, methods, critique*. New York, NY: Routledge.
- Parker, I. (2015). *Handbook of critical psychology*. London, UK: Routledge.
- Paredes-Canilao, N., Barbaran-Diaz, A., Florendo, N. B., Salinas-Ramos, T., & Mendoza, S. L. (2015). Indigenous psychologies and critical-emancipatory psychology. In I. Parker (Ed.), *Handbook of critical psychology* (pp. 356-365). London, UK: Routledge.
- Perlin, M. (2003). You have discussed lepers and crooks: Sanism in clinical teaching. *Clinical Law Review*, 9, 683-729.
- Petersen, A. (1997). Risk, governance and the new public health. In A. Peterson & R. Bunton (Eds.), *Foucault, health, and medicine*. New York, NY: Routledge.
- Petersen, A. R., & Bunton, R. (1997). *Foucault, health, and medicine*. New York, NY: Routledge.
- Pettifor, J. (1989). Did Hamlet need a Canadian Code of Ethics for Psychologists?. *Canadian Psychology*, 30(4), 708-711. doi:10.1037/h0079847

- Pettifor, J. (1998). The Canadian Code of Ethics for Psychologists: A moral context for ethical decision-making in emerging areas of practice. *Canadian Psychology, 39*(3), 231-238.
doi:10.1037/h0086812
- Pettifor, J., Cammaert, L., Larsen, C., & Ames, E. (1980). Guidelines for therapy and counselling with women. *Canadian Psychology, 21*(4), 185-186. doi:10.1037/h0081092
- Pettifor, J., & Saklofske, D. H. (2012). Fair and ethical student assessment practices. In C. F. Webber & J. L. Lupart (Eds.), *Leading student assessment* (pp. 87-106). Netherlands: Springer.
- Pettifor, J., Sinclair, C., & Falender, C. A. (2014). Ethical supervision: Harmonizing rules and ideals in a globalizing world. *Training and Education in Professional Psychology, 8*(4), 201-210. doi:10.1037/tep0000046
- Pettifor, J. L. (1982). A touch of ethics and humor. *Canadian Psychology, 23*(4), 261-263.
doi:10.1037/h0081273
- Pettifor, J. L. (1996). Ethics: Virtue and politics in the science and practice of psychology. *Canadian Psychology, 37*(1), 1-12. doi:10.1037/0708-5591.37.1.1
- Pettifor, J. L. (2001). Are professional codes of ethics relevant for multicultural counselling?. *Canadian Journal of Counselling, 35*(1), 26-35.
- Pettifor, J. L. (2004a). Personal reflections on 60 years of psychology: Many roads to truth. *Canadian Psychology, 45*(1), 11-15. doi:10.1037/h0086967
- Pettifor, J. L. (2004b). School psychology: How universal are ethical principles approved by international associations?. *Canadian Journal of School Psychology, 19*(1-2), 137-148.
doi:10.1177/082957350401900107

- Pettifor, J. L., Estay, I., & Paquet, S. (2002). Preferred strategies for learning ethics in the practice of a discipline. *Canadian Psychology, 43*(4), 260-269. doi:10.1037/h0086922
- Pettifor, J. L., Ferrero, A., Allan, A., Hernández-Guzmán, L., Seymour, F., Aanonson, A.-M., Torleiv...Pope, K. (2011). International contributions of the Canadian Code of Ethics for Psychologists: Voices from abroad. *Canadian Psychology, 52*(3), 230-235. doi:10.1037/a0024390
- Pettifor, J. L., & Sawchuk, T. R. (2006). Psychologists' perceptions of ethically troubling incidents across international borders. *International Journal of Psychology, 41*(3), 216-225. doi:10.1080/00207590500343505
- Pettifor, J. L., & Sinclair, C. (1991). Enhancing fairness and justice in the ethical complaint process. *Canadian Psychology, 32*(1), 63-73. doi:10.1037/h0078966
- Pettifor, J. L., Sinclair, C., & Strong, T. (2005). The role of dialogue in defining ethical principles: The Canadian Code of Ethics for Psychologists. *Journal of Constructivist Psychology, 18*(2), 183-197. doi:10.1080/10720530590914833
- Pfohl, F., & Gordon, A. (1988). Criminological displacements. In A. Kroger & M. Kroger (Eds.), *Body invaders*. Basingstoke: Macmillan.
- Phillip, N., & C. Hardy. (2002). *Discourse analysis: Investigating processes of social construction*. Thousand Oaks, CA: Sage Publications, Inc.
- Poole, J. (2011). *Behind the rhetoric: Mental health recovery in Ontario*. Halifax, NS: Fernwood Publishing.
- Poole, J., Jivraj, T., Arslanian, A., Bellows, K., Chiasson, S., Hakimy, H., Pasini, J.,....Reid, J. (2012). Sanism, 'mental health' and social work/education: A review and call to action.

Intersectionalities: A Global Journal of Social Work Analysis, Research, Polity and Practice, 1(1), 20-36.

Pope, K. S. (2011). Are the American Psychological Association's detainee interrogation policies ethical and effective? *Journal of Psychology*, 219(3), 150-158.

doi:10.1027/2151-2604/a000062

Potter, J., & Wetherell, M. (1987). *Discourse and social psychology: Beyond attitudes and behaviour*. Sage Publications, Inc.

Price, M. (2011). *Mad at school: Rhetorics of mental disability and academic life*. Ann Arbor, MI: University of Michigan Press.

Prilleltensky, I. (1989). Psychology and the status quo. *American Psychologist*, 44(5), 795-802.

doi:10.1037/0003-066X.44.5.795

Prilleltensky, I. (1997). Values, assumptions, and practices: Assessing the moral implications of psychological discourse and action. *American Psychologist*, 52(5), 517-535.

doi:10.1037/0003-066X.52.5.517

Prilleltensky, I. (2003). Understanding, resisting, and overcoming oppression: Towards psychopolitical validity. *American Journal of Community Psychology*, 31(1-2), 195-201.

doi:10.1023/A:1023043108210

Prilleltensky, I. (2008). The role of power in wellness, oppression, and liberation: The promise of psychopolitical validity. *Journal of Community Psychology*, 36(2), 116-136.

doi:10.1002/jcop.20225

Prilleltensky, I., Rossiter, A., & Walsh-Bowers, R. (1996). Preventing harm and promoting ethical discourse in the helping professions: Conceptual, research, analytical, and action frameworks. *Ethics & Behavior*, 6(4), 287-306. doi:10.1207/s15327019eb0604_1

- Prior, L. (1987). Policing the dead: A sociology of the mortuary. *Sociology*, 21, 355-376.
- Probyn, E. (1988). The anorexic body. In A. Kroker & M. Kroker (Eds.), *Body invaders*. Basingstoke: Macmillan.
- Probyn, E. (1991). This body which is not one: Speaking an embodied self. *Hypatia: A Journal of Feminist Philosophy*, 6(3), 111-124. doi:10.1111/j.1527-2001.1991.tb00258.x
- Pyke, S. W. (1992). Feminist psychology in Canada: Early days. *Canadian Psychology*, 42(4), 268-275. doi:10.1037/h0086895
- Rabinow, P., & Rose, N. (2003). *The essential Foucault: Selections from the essential works of Foucault, 1954-1984*. New York, NY: New Press.
- Radtke, L. (2011). Canadian perspectives on feminism and psychology. In A. Rutherford, R. Capdevila, V. Undurti, & I. Palmary (Eds.), *Handbook of International Feminisms* (pp. 293-313). New York, NY: Springer.
- Reaume, G. (2002). Lunatic to patient to person: Nomenclature in psychiatric history and the influence of patients' activism in North America. *International Journal of Law & Psychiatry*, 25, 405-426.
- Reaume, G. (2006). Teaching radical history: Mad People's History. *Radical History Review*, 94, 170-182.
- Reaume, G. (2009). *Remembrance of patients past: Patient life at the Toronto Hospital for the Insane, 1870-1940*. Toronto, ON: University of Toronto Press.
- Richards, G. (2012). *Race, racism and psychology* (2nd ed.). Florence: Taylor & Francis.
- Richards, J., Holttum, S., & Springham, N. (2016). How do "mental health professionals" who are also or have been "mental health service users" construct their identities? *Sage Open*, January-March, 1-14. doi:10.1177/2158244015621348

- Riggs, D. W. (2004). Challenging the monoculturalism of psychology: Towards a more socially accountable pedagogy and practice. *Australian psychologist*, 39(2), 118-126.
doi:10.1080/00050060410001701834
- Rimke, H. (2016). Introduction – mental and emotional distress as a social justice issue: Beyond psychocentrism. *Studies in Social Justice*, 10(1), 4-17.
- Rose, N. (1989). *Governing the soul*. London, UK: Routledge.
- Rose, N. (1996). Governing ‘advanced’ liberal democracies. In A. Barry, T. Osborne, & N. Rose (Eds.), *Foucault and political reason. Liberalism, neo-liberalism and rationalities of government* (pp. 37-64). London, UK: UCL Press.
- Rose, N. (1998). *Inventing our selves: Psychology, power, and personhood*. New York, NY: Cambridge University Press.
- Rosen, G. M. (1987). Self-help treatment books and the commercialization of psychotherapy. *American Psychologist*, 42(1), 46-51. doi:10.1037/0003-066X.42.1.46
- Rossiter, A., Prilleltensky, I., & Walsh-Bowers, R. (1999). A postmodern perspective on professional ethics. In B. Fawcett, B. Featherstone, J. Fook, & A. Rossiter (Eds.), *Practice and research in social work: Postmodern feminist perspectives* (pp. 84-104). New York, NY: Routledge.
- Rossiter, A., Walsh-Bowers, R., & Prilleltensky, I. (1996). Learning from broken rules: Individualism, bureaucracy, and ethics. *Ethics & Behavior*, 6(4), 307-320.
doi:10.1207/s15327019eb0604_2
- Rossiter, A., Walsh-Bowers, R., & Prilleltensky, I. (2002). Ethics as a located story: A comparison of North American and Cuban clinical ethics. *Theory & Psychology*, 12(4), 533-556. doi:10.1177/0959354302012004298

- Russo, J., & Beresford, P. (2015). Between exclusion and colonisation: Seeking a place for mad people's knowledge in academia. *Disability & Society*, 30(1), 153-157.
doi:10.1080/09687599.2014.957925
- Rutherford, A. (2007). V. Feminist questions, feminist answers: Towards a redefinition. *Feminism & Psychology*, 17(4), 459-464. doi:10.1177/0959353507084327
- Rutherford, A. (2011). From the ground up: Feminist approaches, methods, and critiques. *Psychology of Women Quarterly*, 35(1), 175-179. doi:10.1177/0361684310395912
- Rutherford, A., Capdevila, R., Undurti, V., & Palmary, I. (2011). *Handbook of International Feminisms* (pp. 293-313). New York, NY: Springer.
- Rutherford, A., Vaughn-Blount, K., & Ball, L. C. (2010). Responsible opposition, disruptive voices: Science, activism, and the history of feminist psychology. *Psychology of Women Quarterly*, 34, 460-473. doi:10.1111/j.1471-6402.2010.01596.x
- Sacks, H. (1984). Notes on methodology. In J. M. Atkinson & J. Heritage (Eds.), *Structures of social action* (pp. 21-27). Cambridge, UK: Cambridge University Press.
- Sacks, H. (1992). *Lectures on conversation*. Oxford, UK: Blackwell.
- Sacks, H., Schegloff, E. A., & Jefferson, G. (1974). A simplest systematics for the organization of turn-taking for conversation. *Language*, 50, 696-735.
- Said, E. (1983). *The world, the text, and the critic*. Cambridge, UK: Harvard University Press.
- Salladay, S. A. (1986). Ethical responsibility in mental health practice. In D. K. Kent-Smith, S. A. Salladay, & P. A. Miya (Eds.), *Ethics and Mental Health Practice* (pp. 13-29). Orlando, FL: Grune & Stratton.
- Sawicki, J. (1991). *Disciplining Foucault: Feminism, power, and the body*. New York, NY: Routledge.

- Schrader, S., Jones, N., & Shattell, M. (2013). Mad pride: Reflections on a sociopolitical identity and mental diversity in the context of culturally competent psychiatric care. *Issues in Mental Health Nursing, 34*, 62-64. doi:10.3109/01612840.2012.740769
- Seitz, Z., & O'Neill, P. (1996). Ethical decision-making and the Code of Ethics of the Canadian Psychological Association. *Canadian Psychology, 37*(1), 23-30.
- Seymour, F. (2007). Ethics: The foundation for practice. In I. M. Evans, J. J. Rucklidge, & M. O'Driscoll (Eds.), *Professional practice of psychology in Aotearoa/New Zealand* (pp. 5-15). Wellington, NZ: New Zealand Psychological Society.
- Shaw, S. E., & Bailey, J. (2009). Discourse analysis: What is it and why is it relevant to family practice? *Family Practice – An International Journal, 26*, 413-419.
- Shead, N. W., & Dobson, K. S. (2004). Psychology for sale: The ethics of advertising professional services. *Canadian Psychology, 45*(2), 125-136. doi:10.1037/h0086979
- Sinclair, C. (1980). Standards as a vehicle of accountability. *Canadian Psychology, 21*(1), 1-6. doi:10.1037/h0081145
- Sinclair, C. (1993). Codes of ethics and standards of practice. In K. S. Dobson & D. J. G. Dobson (Eds.), *Professional psychology in Canada* (pp. 167-199). Ashland, OH: Hogrefe & Huber Publishers.
- Sinclair, C. (1996). A comparison of codes of professional conduct and ethics. In Association of State and Provincial Psychology Boards, *Professional conduct and discipline in psychology*. Washington, DC: American Psychological Association.
- Sinclair, C. (1998). Nine unique features of the Canadian Code of Ethics for Psychologists. *Canadian Psychology, 39*(3), 167-176. doi:10.1037/h0086805

- Sinclair, C. (2011). The evolution of the Canadian Code of Ethics over the years (1986-2011). *Canadian Psychology, 52*(3), 152-161. doi:10.1037/a0024471
- Sinclair, C., & Frankel, M. (1982). The effect of quality assurance activities on the quality of mental health services. *Quality Review Bulletin, 8*(7), 7-15.
- Sinclair, C., & Pettifor, J. (2001). *Companion manual to the Canadian Code of Ethics for Psychologists*. Ottawa, ON: Canadian Psychological Association.
- Sinclair, C., Poizner, S., Gilmour-Barrett, K., & Randall, D. (1987). The development of a code of ethics for psychologists. *Canadian Psychology, 28*, 1-8. doi:10.1037/h0079883
- Smith, L., Chambers, D.-A., & Bratini, L. (2009). When oppression is the pathogen: The participatory development of socially just mental health practice. *American Journal of Orthopsychiatry, 79*(2), 159-168. doi:10.1037/a0015353
- Sociedad Mexicana de Psicología. (2002). Código Ético del Psicólogo [Psychologist code of ethics]. Mexico, DF: Editorial Trillas.
- Spivak, G. C. (1988). Can the subaltern speak?. In C. Nelson & L. Grossberg (Eds.), *Marxism and the Interpretation of Culture*. London, UK: Macmillan.
- Stainton-Rogers, W. (2011). *Social psychology* (2nd ed.). Philadelphia, PA: Open University Press.
- Stam, H. J. (2015). The historical boundedness of psychological knowledge and the ethics of shared understandings. *Journal of Theoretical & Philosophical Psychology, 35*(2), 117-127. doi:10.1037/teo0000018
- Stark-Adamec, C. I., & Kimball, M. (1984). Science free of sexism: A psychologist's guide to the conduct of non-sexist research. *Canadian Psychology, 25*(1), 23-24.

- Stark, C. (2011). The application of the Canadian Code of Ethics for Psychologists to teaching: Mandatory self-disclosure and alternatives in psychology courses. *Canadian Psychology*, 52(3), 192-197. doi:10.1037/a0024546
- Stevens, G. (2015). Black psychology: Resistance, reclamation, and redefinition. In I. Parker (Ed.), *Handbook of critical psychology* (pp. 182-190). London, UK: Routledge.
- Sugarman, J. (2015). Neoliberalism and psychological ethics. *Journal of Theoretical & Philosophical Psychology*, 35(2), 103-116. doi:10.1037/a0038960
- Teo, T. (1999). Methodologies of critical psychology: Illustrations from the field of racism. *Annual Review of Critical Psychology*, 1, 119-134.
- Teo, T. (2006). *The critique of psychology: From Kant to postcolonial theory*. New York, NY: Springer.
- Teo, T. (2009). Philosophical concerns in critical psychology. In D. Fox, I. Prilleltensky, & S. Austin (Eds.), *Critical psychology: An introduction* (2nd ed., pp. 36-53). Thousand Oaks, CA: SAGE Publications, Inc.
- Teo, T. (2010). What is epistemological violence in the empirical social sciences? *Social & Personality Psychology Compass*, 4(5), 295-303. doi:10.1111/j.1751-9004.2010.00265.x
- Teo, T. (2011). Empirical race psychology and the hermeneutics of epistemological violence. *Human Studies*, 34(3), 237-255. doi:10.1007/s10746-011-9179-8
- Teo, T. (2013). Backlash against American psychology: An indigenous reconstruction of the history of German critical psychology. *History of Psychology*, 16(1), 1-18.
doi:10.1037/a0030286
- Teo, T. (2015a). Are psychological “ethics codes” morally oblique?. *Journal of Theoretical & Philosophical Psychology*, 35(2), 78-89. doi:10.1037/a0038944

- Teo, T. (2015b). Critical psychology: A geography of intellectual engagement and resistance. *American Psychologist*, 70(3), 243-254. doi:10.1037/a0038727
- Teo, T. (2015c). Theoretical psychology: A critical-philosophical outline of core issues. In I. Parker (Ed.), *Handbook of critical psychology* (pp. 117-126). London, UK: Routledge.
- Teo, T. (2015d). Historical thinking as a tool for theoretical psychology: On objectivity. In J. Martin, J. Sugarman, & K. L. Slaney (Eds.), *The Wiley handbook of theoretical and philosophical psychology: Methods, approaches, and new directions for social sciences*. New York, NY: John Wiley & Sons, Ltd.
- Tischner, I. (2012). *Fat lives: A feminist psychological exploration*. New York, NY: Routledge.
- Torres, C. A., & Fischman, G. (1994). Popular education: Building from experience. *New Directions for Adult & Continuing Education*, 63, 81-92.
- Truscott, D., & Crook, K. H. (2013). *Ethics for the practice of psychology in Canada, revised and expanded edition*. Edmonton, AB: University of Alberta Press.
- Truth and Reconciliation Commission of Canada. (2015). *Truth and Reconciliation Commission of Canada: Calls to Action*. Winnipeg, MB: Author.
- Tymchuk, A. J. (1986). Guidelines for ethical decision making. *Canadian Psychology*, 27(1), 36-43. doi:10.1037/h0079866
- Tymchuk, A. J., Drapkin, R., Major-Kingsley, S., Ackerman, A. B., Coffman, E. W., & Baum, M. S. (1982). Ethical decision making and psychologists' attitudes toward training in ethics. *Professional Psychology: Research & Practice*, 13(3), 412-421. doi:10.1037/0735-7028.13.3.412
- Ussher, J. M. (1991). *Women's madness: Misogyny or mental illness?*. Amherst, MA: University of Massachusetts Press.

- Usher, P. (1997). In G. McKenzie, J. Powell, & R. Usher (Eds.), *Understanding social research: Perspectives on methodology and practice* (pp. 39-51). Bristol, PA: Taylor & Francis, Inc.
- van Dijk, T. (1993). Principles of critical discourse analysis. *Discourse & Society*, 42(2), 249-283.
- Voronka, J. (2008). Re/moving forward?: Spacing mad degeneracy at the Queen Street site. *Resources for Feminist Research*, 33(1/2), 45-61.
- Walkerdine, V. (1986). Poststructuralist theory and everyday social practices: The family and the school. In S. Wilkinson (Ed.), *Feminist social psychology: Developing theory and practice* (pp. 57-76). Philadelphia, PA: Open University Press.
- Walsh, R. T. G. (2015a). Introduction to ethics in psychology: Historical and philosophical grounding. *Journal of Theoretical & Philosophical Psychology*, 35(2), 69-77.
doi:10.1037/teo0000015
- Walsh, R. T. G. (2015b). Bending the arc of north American psychologists' moral universe toward communicative ethics and social justice. *Journal of Theoretical & Philosophical Psychology*, 35(2), 90-102. doi:10.1037/teo0000011
- Walsh, R. T. G., & Gokani, R. (2014). The personal and political economy of psychologists' desires for social justice. *Journal of Theoretical & Philosophical Psychology*, 34(1),
doi:10.1037/a0033081
- Watts, A. D. (2011). A South African viewpoint. *Canadian Psychology*, 52(3), 233.
doi:10.1037/a0024390
- Weedon, C. (1997). *Feminist practice and poststructuralist theory* (2nd ed.). Oxford, UK: Blackwell Publishing.

- Weiss, G. (1999). *Body images: Embodiment as intercorporeality*. London, UK: Routledge.
- Weiss, G., & Wodak, R. (2004). *Critical discourse analysis: Theory and interdisciplinarity*. New York, NY: Palgrave Macmillan.
- Wetherell, M. (1998). Positioning and interpretative repertoires: Conversation analysis and post-structuralism in dialogue. *Discourse and Society*, 9(3), 387-412.
doi:10.1177/0957926598009003005
- Wetherell, M. (2001). Debates in discourse research. In M. Wetherall, S. Taylor, & S. J. Yates (Eds.), *Discourse theory and practice: A reader* (p. 380-399). London, UK: Sage Publications, Inc.
- Whitaker, R. (2010). *Mad in America: Bad science, bad medicine, and the enduring mistreatment of the mentally ill*. Cambridge, MA: Perseus.
- Williams, J., Hadjistavropoulos, T., Malloy, D., Sharpe, D., & Fuchs Lacelle, S. (2003). *The effect of professional training and ranking ethical principles on the resolution of ethical dilemmas*. Presentation at the Annual Convention of the Canadian Psychological Association, Hamilton, ON.
- Willig, C., & Stainton-Rogers, W. (2008). Introduction. In C. Willig & W. Stainton-Rogers, *The SAGE handbook of qualitative research in psychology* (pp. 1-12). Thousand Oaks, CA: SAGE Publications, Inc.
- Willmott, H. (1998). Towards a new ethics? The contributions of poststructuralism and posthumanism. In Parker, M. (Ed.), *Ethics & organizations* (pp. 76-121). Thousand Oaks, CA: SAGE Publications, Inc.
- Wiseman, B., & Groves, J. (2000). *Introducing Lévi-Strauss and structural anthropology*. Cambridge, UK: Icon.

Wodak & Meyer. (2001). *Methods of critical discourse analysis*. London, UK: Sage Publications, Inc.

Yin, R. K. (2003). *Case study research: Design and methods* (2nd ed.). Thousand Oaks, CA: Sage Publications, Inc.