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The American University in Cairo
School of Humanities and Social Sciences

Toward a Code of Ethics for Community Psychology and Community Practice in the
Arab World: Defining Ethical Values

A Thesis Submitted to
Department of Psychology
in partial fulfillment of the requirements for
the degree of Master of Arts in Community Psychology

by Fatema Abou El Ela

Under the Supervision of Dr. Mona M. Amer

January 2019

DEDICATION AND ACKNOWLEDGEMENTS

I first dedicate this study to God, my source of inspiration and strength. I hope to please Him and Prophet Mohammed (PBUH) with my efforts to bring values and principles into our communities. I also dedicate this thesis to my beloved parents, who have always been there for me and worked hard to grant me the best education. No words can express my gratitude and love towards them. I would like to thank them for always encouraging me to be the best version of myself that I can be. They have taught me integrity, perfection, kindness, and respect. I also dedicate this thesis to my dear, supportive husband, who encouraged me to complete this long journey and made all the hard work I put into it possible. I would have never been able to make this achievement without my parents and husbands' love, help, support, and motivation. I also dedicate my work to the most inspirational person and most beautiful soul I have ever known, Dalia—may Allah raise her soul to the highest heavens.

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ABSTRACT

In response to the need for ethical guidance in Arab community psychology and other forms of community practice, this thesis used mixed methods to explore the ethical values that are of relevance to community psychologists and other community practitioners in the Arab World. A total of 18 community practitioners in the Arab region were interviewed to share their views on the importance of Arab societal values, the values of community psychology, and the principles identified in globally dominant codes of ethics for psychologists in community practice in the Arab world. Using thematic analysis, 53 themes were identified in the collected qualitative data, portraying the most important and influential values in Arab community practice. Moreover, 211 community practitioners in the Arab world responded to a self-administered questionnaire on the extent to which certain values are beneficial or problematic for Arab community practice. Descriptive statistics were used to analyze the questionnaire, identifying the most beneficial values, controversial values and values that were sometimes viewed as irrelevant to Arab community practice. Based on the interview and questionnaire data, a list of recommended ethical values for Arab community practice is identified. Since codes of ethics are built on values, the results of this research are the first step towards building a comprehensive and culturally relevant code of ethics for community practitioners, including community psychologists, in the Arab region.

TABLE OF CONTENTS

LIST OF TABLES	v
LIST OF FIGURES	vi
Chapter 1 Introduction	1
Community Psychology and Community Practice	3
What are Codes of Ethics?	6
Well-Known National, Regional, and Universal Psychological Codes of Ethics	9
Psychological Ethics in the Arab World	23
Ethics in Community Psychology	32
Ethics in Community Practice	41
Ethical Considerations in Community Interventions	45
Aim of the Study	55
Chapter 2 Methods	58
Participants	58
Procedures	65
Materials	69
Data Analysis	71
Chapter 3 Results	73
Interview Results	73
Self-Administered Questionnaire Results	94
Chapter 4 Discussion	99
Strengths and Limitations	102
Conclusions and Recommendations	104
References	106
Appendix A English Interview Informed Consent Form and General Questions	116
Appendix B Arabic Interview Informed Consent Form and General Questions	120
Appendix C English Interview Guide	123
Appendix D Arabic Interview Guide	125
Appendix E English Self-Administered Questionnaire	126
Appendix F Arabic Self-Administered Questionnaire	134
Appendix G Descriptive Statistics for the Impact of Values on Arab Community Work	141
Appendix H Ethical Values for Community Practitioners in the Arab World	142

LIST OF TABLES

Table 1 <i>Development Process of the APA Ethics Code</i>	11
Table 2 <i>APA Ethical Principles of Psychologists and Code of Conduct (APA, 2017)</i>	12
Table 3 <i>Development Process of the CPA Ethics Code</i>	14
Table 4 <i>Structure of the Canadian Code of Ethics for Psychologists (CPA, 2017)</i>	16
Table 5 <i>Development of the Universal Declaration of Ethical Principles for Psychologists</i>	21
Table 6 <i>Principles of the Universal Declaration of Ethical Principles for Psychologists</i>	22
Table 7 <i>Comparison of Principles in Psychological Ethics Codes Around the World</i>	23
Table 8 <i>Countries of the Arab League in Alphabetical Order</i>	24
Table 9 <i>Psychological Associations and their Codes of Ethics in the Arab World</i>	28
Table 10 <i>Nelson and Prilleltensky's Principles and Values of Community Psychology</i>	36
Table 11 <i>Comparison of Community Psychology Values and Principles in Literature</i>	37
Table 12 <i>Locations where Questionnaire Participants Practiced Community Work (n=211)</i>	63
Table 13 <i>Questionnaire Sample Sizes per Arab country in Relation to Populations</i>	68
Table 14 <i>Values Most Rated as Beneficial in Arab Community Work (M > 1.00, n=211)</i>	95
Table 15 <i>Extent of Benefit / Inconvenience of Values on Arab Community Practice (n=211)</i>	96
Table 16 <i>Values Highly Rated as Uninfluential in Arab Community Practice (n=211)</i>	97
Table 17 <i>Additionally Suggested Beneficial Values</i>	98

LIST OF FIGURES

<i>Figure 1.</i> Synthesized Values of Community Psychology	38
<i>Figure 2.</i> Nationalities of Questionnaire Participants.....	60
<i>Figure 3.</i> Nationalities of Questionnaire Participants – by Region (n = 211).....	61
<i>Figure 4.</i> Types of Organizations Affiliated to Questionnaire Participants	62
<i>Figure 5.</i> Societal Issues Tackled by Questionnaire Participants.....	64
<i>Figure 6.</i> Nine Sections Organizing the Interview Themes	74

Chapter 1

Introduction

In recent years, community psychologists joined longstanding community development efforts in the Arab world, a region that includes the countries of the Arab League (“Arab League,” n.d.). Community psychologists are practitioners and/or applied researchers who have obtained at least an M.A. degree in community psychology (Kloos et al., 2012). Community psychology is one of the community practice fields that serve and develop the community, with unique values and principles that emphasize prevention, promotion, empowerment, and empiricism. Other community practice fields include monitoring and evaluation, social work, public health, community development, and human rights, among others. Many fields of community practice, including community psychology, are present in the Arab region, where community interventions are highly needed to enhance the living conditions of communities.

Nevertheless, ethical guidance for community psychologists and other practitioners in the Arab world is limited. Codes of ethics are essential for protecting the rights and well-being of those who are being served. According to Fisher (2013), ethics codes “provide psychologists with a set of values and practical techniques for identifying and resolving moral problems” (pp. 3). A code of ethics defines what is morally right or wrong within professional practice, using a set of values, principles, and/or standards of conduct, and is commonly used to regulate a profession and assess the behavior of its members (Gass, 2009; Lewis, Sandquist, Stark, & Grenyer, 2009). Therefore, the importance of ethical conduct in community psychology and other community practice fields does not only lie in the protection of clients and practitioners, but also in promoting the success of community interventions by avoiding mistakes that may cause failure.

Despite the need for clear ethical guidance, a code of ethics for community psychologists has not been developed to date. When the American Psychological Association (APA) first developed an ethics code for psychologists in the late 1940s (Hobbs, 1948), the field of community psychology had not come to light yet. Community psychology emerged during a conference held in Swampscott, Massachusetts in 1965, mainly to create social change and promote well-being through collaborative approaches, focusing on strengths, prevention, and the analysis of ecological systems (Campbell, 2016; Prilleltensky, 2001). Since then, community psychologists have been adhering to well-known psychological codes, such as the APA and the Canadian Psychological Association’s (CPA) codes of ethics, as

well as codes of ethics of other community practice disciplines, such as evaluation (Campbell, 2016; Morris, 2015a).

However, existing psychological codes are individualistic and do not adequately address the unique ethical challenges encountered by community psychologists (APA, 2017; Roos, Visser, Pistorius, & Nefale, 2007). For example, although psychological ethics codes address issues of initiating and terminating treatment with clients in psychotherapy, they do not guide community psychologists to appropriately enter and exit communities without causing any harm. Additionally, the codes of ethics of other community practice fields, such as public health and social work, are too specific and incomprehensive to address all areas of practice involving community psychologists, who work on a broad range research and action. Moreover, some of the codes of community practice professions have also been criticized for being insufficient for their own professional members (ACWA, 2017; AEA, 2004; Campbell, 2016; Hardina, 2004; Morris, 2015a, 2015b; NASW, 2017; PHLS, 2002).

In addition to the limitations of existing psychological and community practice codes of ethics for the work of community psychologists, such existing codes tend to be culturally unsuitable to community practice in the Arab region, or unfamiliar to Arab community psychologists and other community practitioners working in the region. Moreover, community psychologists and other practitioners in the Arab world tend to follow Western ethics codes, such as the APA (Carrillo & Forden, 2013). Several international and local community organizations in Arab countries also develop codes of conduct/ethics based on Western or international codes and declarations, without enough contextual adaptation. Hence, the Arab region is an interesting area of concern for ethical conduct of community psychologists and other community practitioners.

Therefore, this thesis aims to define ethical values needed for community psychology and community practice in the Arab world, as the first step towards the development of a comprehensive code of ethics. The focus is on the underlying values because values guide the community practitioner in making ethical choices. For example, examining the context of an organization and comparing it to the values of community psychology is useful in deciding whether to work for that organization. Values also help a community psychologist and other practitioners realize whether their actions follow the appropriate ethical conduct of community practice. Additionally, community practitioners must be aware of the context of the target community, including its values and culture, and should be culturally competent to intervene appropriately in that community. Values also illustrate a compelling purpose for the

community psychologist and other community practitioners, creating a passionate sense of commitment (Kloos et al., 2012).

This literature review begins by examining the fields of community psychology and community practice in the Arab world and the need for ethical guidance in these fields. Next, an overview of professional ethics codes is presented, including their purposes, common components, different types, and history, in order to have a better understanding of the importance and composition of codes of ethics. The subsequent section comprises an examination of ethics codes around the world, including well-known national, regional, and universal ethics codes for psychologists, followed by psychological ethics in the Arab world. Ethics in community psychology and other fields of community practice are next explored, showing the need for more adequate ethical guidance, particularly in the Arab region. Finally, ethical considerations for community practice and community psychology are reviewed.

Community Psychology and Community Practice

Community psychologists are community practitioners who aim to understand and enhance the quality of life of individuals and their surrounding communities on multiple ecological levels, with a focus on the relationships that connect the individual to his/her communities and societies. Hence, the community psychologist is not only concerned with the individual, like other forms of psychology, or just the community, but rather the connections within the whole ecological system (Kloos et al., 2012). *Research* in community psychology is not only used to develop theories, but it is rather very important to guide action within communities. Community psychologists use applied research to understand the target community and use empirical evidence to decide on appropriate interventions, in addition to evaluating programs and analyzing policies (Kloos et al., 2012; Levine et al., 2005). *Action* in community psychology involves interventions that are based on the participation and choices of the community members. The interventions are aimed at empowering communities and achieving social change and social justice. Moreover, community psychology is concerned with preventing problems before they arise and using strengths to resolve problems (Kloos et al., 2012).

Most community psychologists are also community practitioners, since the action component of community psychology is implemented through community practice. The term “community practitioners” in this study refers to individuals who work directly with communities to address societal problems by identifying community needs and then planning, implementing, and evaluating appropriate solutions or interventions for enhancing the quality

of life of community members. Community practitioners may have been trained or have gained experience in various community-based fields such as social work, evaluation, social and economic development, community organizing, policy analysis, public health, public administration, and nonprofit management.

Community Psychology and Community Practice in the Arab World

Diverse forms of community practice are found in the Arab world. Egypt, in particular, has been implementing prevention and intervention programs for decades, through both international and local organizations and funders (Amer, 2014; Carrillo & Forden, 2013). From among the prevalent community programs in Egypt are women empowerment and micro-credit programs (Drolet, 2011; Henry, 2011). Moreover, due to a long history of colonialism, community organizing and action has been prevalent in Palestine since the Israeli occupation in 1967, and even in a more resilient manner since the Intifada in 1987. Community organizing in Palestine includes programs of psychosocial support, literacy and skills-training, agricultural and food processing initiatives, and consciousness raising, among others (Makkawi, 2015). Rural development has prevailed in many Arab countries in the region, including Saudi Arabia, Iraq, Jordan, Syria, Bahrain, Oman, Palestine, Qatar, Kuwait, Egypt, Tunisia and Algeria. National and international programs in the region have worked to improve the social and economic conditions of rural areas, where many poor communities reside, through the development of agricultural production, poverty reduction, food security, and the enhancement of social services, among others (Mostafa & Changbin, 2015). Social work is also quite widespread among Arab countries in the region, as evident from the existence of several publications on this field in the Arab world (Al Gharaibeh, 2012; Albrithen & Briskman, 2015; Al-Krenawi & Graham, 2003). Other fields of community practice that are widespread in Egypt and Lebanon include community development, refugee services and human rights advocacy (Amer, El-Sayeh, Fayad, & Khoury, 2015).

As in other regions of the world, community practice among Arab countries has involved government agencies, international non-governmental organizations (INGOs) and local non-governmental organizations (NGOs). While governments across the Arab world have generally taken responsibility for the wellbeing of their peoples in the past, more recently community organizations have been on the rise, often in collaboration with or parallel to governments (Kuttab, 2016). In Jordan, for example, government institutions strive to improve the social, economic and cultural rights of the citizens, while local NGOs, or civil society organizations, mainly focus on advocacy by raising awareness about political and civil rights, criticizing the government, calling for transformative change, and more (Al

Gharaibeh, 2012). Funding sources for local organizations are mostly covered by INGOs and local philanthropists, in addition to donations from individuals in society (Amer, 2014; Kuttab, 2016).

Some of the work to improve communities in the Arab world is supported by individual donations and other philanthropic efforts. “In all the countries of the [Arab] region there is a longstanding tradition of social giving in a variety of forms and inclusive of all faiths” (Kuttab, 2016, pp. 24). Philanthropy in the Arab world has involved diverse funding sources, mediating practitioners, and beneficiaries, reflecting the diversity of social and economic conditions across Arab countries (Kuttab, 2016). Although philanthropy in the Arab world has mostly involved charitable activities, community practice that involves development and capacity building has become more and more prevalent, especially after the Arab Spring.

From a more recent perspective, the region has been experiencing socio-political instabilities since the “Arab Spring” which began in 2011, creating the need for extensive community supports. Many Arabs have become eager to contribute to the growth of their communities and quite a large number of civil society organizations have been established in the Arab region (Amer, 2014). Farouky (2016) used SWOT analysis to examine the situation of philanthropy in the Arab region post the Arab Spring in a holistic manner. The author found numerous strengths and opportunities, yet challenges were also prevalent hindering the growth of philanthropy in the region. One of the most significant assets found in the region is its vibrant and abundant youth, who the author believed could effectively act towards the growth of the region.

Amer (2013) discussed the need for the discipline of community psychology as a type of community practice in the Arab region, in response to the socio-political changes and the rise of the Arab Spring. Carrillo and Forden (2013) also asserted that the Egyptian January 25th, 2011 revolution created an opportunity for the growth of community psychology in the region. Despite the rise of some promising contributions of community psychology in the Arab world, the field is still new and continues to struggle with developing culturally relevant methods and programs. Master’s degrees in the discipline emerged in the Arab region at Birzeit University in Palestine in 2009, followed by The American University in Cairo (AUC), Egypt, in 2010. Yet, these programs have been imported from the West and are in need of localization (Amer, 2014; Carrillo & Forden, 2013; Makkawi, 2015).

Ethical Guidance for Community Practice in the Arab World

One of the aspects of community practice in the Arab world that is in need of greater cultural relevance is that of ethical guidelines for the work. This was articulated at the first community psychology conference in the Middle East and North Africa (MENA) that was held in March 2016, organized by the community psychology program at the AUC. The main aims of this regional meeting were to develop the field of community psychology in the region and to examine the cultural and contextual issues encountered more broadly in effective community practice (“AUC hosts,” 2016; Amer, Forden, & Emanuel, 2016). Ethical practice in community psychology and other forms of community practice in the MENA region was discussed at the conference, where attendees shared common challenges and expressed the need to develop an ethics code that can provide locally-relevant ethical guidance.

Unfortunately, ethical guidance for community psychology and other fields of community practice in the Arab world is inadequate and culturally questionable. While there are no codes of ethics developed specifically for community psychologists, Western psychological ethics are commonly adopted by community psychologists in the Arab world. For example, graduate students are introduced to the APA’s *Ethical Principles for Psychologists and Code of Conduct* as part of the M.A. community psychology program at AUC (Carrillo & Forden, 2013). In order to take the first step towards developing ethical guidelines that are more suitable to community practice in the Arab region, it is important to first understand the history, methods, and common contents of codes of ethics that were developed in other parts of the world. Moreover, it is important to identify the unique aspects of community practice that are insufficiently captured in existing psychological codes of ethics as well as codes of ethics for other community practice specializations. Therefore, the coming sections will explore the meaning and history of codes of ethics, followed by a review of influential codes of ethics for psychologists around the world, in order to examine the applicability and usefulness of existing codes for community psychology and other fields of community practice.

What are Codes of Ethics?

This section provides descriptive and historical background information on ethics codes that clarify the general concept of codes of ethics. The purposes, components and types of psychological ethics codes are explored, followed by a brief history of the emergence of the field of ethics and the early development of psychological ethics codes around the world.

Purpose and Structure of Codes of Ethics

A code of ethics is a document to guide and maintain the conduct of members of a profession in the most ethical manner. An ethics code educates members of the psychologist profession about their own expected behaviors. It guides psychologists to know how they should respond in ethical situations, avoid ethical violations, and evaluate their ethical behavior. Ethics codes also provide a document for academic institutions to use when educating students about the values of the profession. A code of ethics ensures public trust by ensuring that members of the profession are accountable for their actions and are responsible for abiding to high ethical standards. Moreover, ethics codes educate clients about what to expect from members of the psychologist profession (Fisher, 2013; Lindsay, 2012; Oakland et al., 2012). An ethics code also maintains the integrity of a profession, as it reflects the collective wisdom and consensus among its members on what is and what is not morally acceptable, creating a mutual purpose of the profession. A code of ethics ensures that individuals are trained to meet the profession's ethical standards, and hence, protects the profession's reputation, as well as the public welfare (Fisher, 2013). Moreover, ethics codes help enforce ethical conduct by providing guidance to clients, ethics committees, and regulatory bodies during cases of unethical conduct. Finally, an ethics code is an essential document that helps members of the profession defend themselves in situations, for example, in which psychologists are pressured by the court to violate the values of the profession (Fisher, 2013; Lindsay, 2012).

Codes of ethics in psychology commonly have various underlying components to serve its purpose. They are typically made of values, principles, and/or standards. *Values* are a set of beliefs of what is moral, right, or good (Morris, 2015a), which leads to the most ultimate desired situation (Prilleltensky, 2001). *Principles* are broad rules of ethical conduct that are based on values, used to guide members of the profession to independently decide on the highest ethical conduct. *Standards*, unlike principles, define specific behaviors and actions that are required by members of the profession. Standards are enforced by a regulatory body for the profession. If the code is not enforced, however, it would be a document of *guidelines*, which refer to desired, rather than enforced behaviors (Oakland et al., 2012). *Vignettes*, or short story-like narratives, are also sometimes used in ethics codes to narrate situations that may have occurred in practice. This allows the psychologist the opportunity to reflect on the standards set forth by the code of ethics and, hence, make better ethical decisions (Lindsay, 2012). Ethics codes may emphasize principles, standards, or both principles and standards together.

Principle-based codes, or *aspirational codes*, which are referred to as *codes of ethics*, are aspirational and encourage the use of reasoning. Principle-based codes outline principles along with their corresponding sets of values and standards. Examples of principle-based codes include the codes of ethics of the APA (2017) and the CPA (2017). The CPA code of ethics is one of the codes that are also accompanied by extensive vignettes, which are sometimes used to further explain the principles and standards, in order to assist psychologists during training and development.

On the other hand, *standard-based codes*, which are also referred to as *bottom-line* or *enforceable codes*, are commonly denoted as *codes of conduct*. They are more detailed and enforceable than principle-based codes, since they directly define specific behaviors to be followed in certain situations. Standard-based codes require frequent revisions, since expectations for professional behaviors usually change over time. An example of a standard-based code is the now obsolete British Psychological Society's (BPS) 1985 code of conduct (The British Psychological Society [BPS], 2009).

Additionally, a *declaration of ethical principles* comprises a mere outline of principles and values to be further addressed by associations that choose to follow the declaration in their own elaborated codes of ethics. An example of a declaration of ethical principles is the *Universal Declaration of Ethical Principles for Psychologists* (Fisher, 2013; Gauthier & Pettifor, 2012; Lindsay, 2012; Oakland et al., 2012).

Early History of Codes of Ethics

It has been quite common in history that professional groups would formulate ethics codes of various formats for their own professions (Hobbs, 1948). During the early years of codes development, ethical codes were commonly developed for physicians or as rules to guide communities. The first ethics code documented was the *Code of Hammurabi*, which was written in the 18th century BCE in Babylon, comprising a set of societal laws. In the 6th century BCE, the *Ayurvedic Instruction* for medicine students was formulated in India, followed by the *Hippocratic Oath* in the 4th century BCE, which was established for physicians in Greece, and has been translated and used in numerous countries as the foundation of medical ethics for about 2,500 years (Ritchie, 2008; Sinclair, 2012). During the Common Era, numerous codes were developed for the profession of medicine in India, the Middle East, Japan, and the United States, including *Haly Abbas' Advice to a Physician* in Persia in 950 CE, the *Seventeen Rules of Enjuin* in Japan in 1500 CE, a *Physician's Ethical Duties* during Persia's Islamic era in 1770 CE, and the *Medical Code of Ethics of the American Medical Association* in 1847 (Sinclair, 2012).

In the early 20th century CE, numerous occupational groups, including psychologists, came to designate themselves as professions, creating a time of the professionalization of society (Ritchie, 2008; Sinclair, 2012). Later in the early 1940s, World War II took place, when health professionals engaged in brutal and inhumane experiments that abused civilian populations. In reaction to these crimes, most national psychological organizations that existed around the world at that time believed that human beings could be pressured by social and political influences to conform to the surrounding norms, to the extent that they may submit to committing cruel actions. Consequently, associations and health professions around the world realized their responsibility towards the public and decided to develop codes to raise awareness and guide the ethical conduct of their members (Ritchie, 2008). At that time, the APA also decided to develop an ethics code for its member psychologists, in response to the increase in psychological services in the war, in order to avoid unethical conduct (Fisher, 2013).

Well-Known National, Regional, and Universal Psychological Codes of Ethics

Although several codes of ethics have been established for psychologists around the world, only a few have become globally influential. The most influential codes were developed by the APA and CPA. The APA's code was one of the first psychological codes to be established and was later an inspiration or reference when developing most codes of psychological ethics around the world. The codes of the British Psychological Society (BPS) and the Australian Psychological Society (APS) have also been well-known but not as globally influential as the APA and CPA codes. Moreover, the BPS code currently complies with a regional code called the *Meta-Code of Ethics of the European Federation of Psychologists' Associations* (Aanonsen & Althaus, 2012; Australian Psychological Society [APS], 2007; BPS, 2009; Garton & Allan, 2012). Examining the development processes and structures of such prominent codes is very useful when developing new codes of ethics for psychology, and is the first step towards developing an ethics code for community psychology in the Arab region. Thus, this section explores the codes of ethics that have been developed for psychologists around the world, beginning with a review of well-known national codes, followed by the development of regional and universal codes.

APA's Ethical Principles of Psychologists and Code of Conduct

Despite the fact that the U.S.-based Association of Consulting Psychologists was the first to establish a code of ethics for American psychologists in 1933 (Dunbar, 1992), the code of ethics of the APA is commonly claimed to be the first that was developed specifically

for the profession of psychology. This perception of leadership in the development of psychological ethics may be particularly due to the fact that the APA code of ethics continues to be one of the most influential codes around the world (Sinclair, 2012).

Code development. In 1947, the APA Committee on Ethical Standards of Psychology was created to formulate an ethics code of principles to guide psychologists in ethical situations (Smith, 2003). Nicholas Hobbs (1948), who was the chair of the Committee, mentioned that in order to formulate a set of ethical principles, numerous professional groups had used methodologies such as reviewing codes of ethics from other professions (e.g., medicine), studying the behavior of professionals in ethical situations, examining professional dilemmas, and writing a set of statements based on the best attributes of other codes. However, Hobbs believed that drawing from a code that is specific to another profession would not be comprehensive enough for the broad field of psychology.

Hobbs (1948) proposed a set of 16 criteria for the development of the APA ethics code, including involving a large representative sample of APA members in the development process, using empirical research, covering all situations encountered by psychologists, and ensuring applicability to various areas of psychology. Upon obtaining the approval of the APA for the proposed criteria, the APA Committee on Ethical Standards of Psychology appointed individuals to work on the development process and create a research design, budget, and operating plan (Fisher, 2013; Hobbs, 1948).

The research design followed the Critical Incident Technique (CIT), which is a method used to collect incidents of observed human behavior with the purpose of finding solutions to problems or developing ethical principles. The CIT is a procedure of five steps: (1) determine the purpose of the research study, (2) identify specific criteria, including the characteristics of the incident, the observers and the groups to be observed, (3) collect incidents by the observers, (4) analyze the data, and (5) interpret the collected data and reporting findings (Flanagan, 1954).

Accordingly, the CIT was used to collect descriptions of real situations involving ethical decision-making from more than 2,000 APA member psychologists from all psychological areas of practice. Participants were asked to share incidents, their actual decisions, and their opinions about the decisions they had made. The APA team analyzed the collected descriptions and drafted a code of general statements and proposed solutions for ethical decision-making. The draft was distributed among members of the APA for assessment and was amended according to the obtained feedback. A final draft was submitted to the APA for approval (Hobbs, 1948) and the code was finally adopted in 1952. This was

the first APA ethics code for psychologists, named the *Ethical Principles of Psychologists and Code of Conduct* (Smith, 2003; Stricker, 2010). The APA’s code of ethics has been revised twelve times since then, up to the most recent code, which was amended in 2017 (American Psychological Association [APA], 2017; Fisher, 2013; Koocher & Hadjistavropoulos, 2012). Table 1 illustrates the development process of the APA ethics code in more detail.

Table 1

Development Process of the APA Ethics Code

APA Code Development Steps
1. Established a committee to develop a code of ethics.
2. Outlined a set of criteria for the development process.
3. Created a research design, budget and operating plan.
4. Collected descriptions from psychologists of real situations involving ethical decision-making.
5. Classified and organized the descriptions obtained.
6. Critically examined the incidents and formulated a code of general statements with illustrations and proposed solutions.
7. Distributed the code among APA members to assess the ethical soundness of the proposed solutions.
8. Amended the code based on the results of the research.
9. Submitted the final draft to be approved by the APA.
10. Adopted the Ethical Principles of Psychologists and Code of Conduct in 1952.

Code structure and ethical principles. As the name of the ethics code suggests, the *Ethical Principles of Psychologists and Code of Conduct* is divided into two main sections that follow an introduction and a preamble. The first main section of the code describes five general ethical principles for psychologists to encourage highest ethical conduct, which are (1) beneficence and non-maleficence, (2) fidelity and responsibility, (3) integrity, (4) justice, and (5) respect for people’s rights and dignity. It is not explicitly clarified in the code what exact values underlie those principles. The second main section thoroughly describes ethical conduct in psychological practice, structured as specific ethical standards. As illustrated in Table 2, the principles and standards in the code are not clearly interconnected, which may sometimes be confusing to psychologists. Additionally, the APA code of ethics addresses

ethical issues in several areas of practice in psychology, including counseling, research, teaching, social interventions, and more (APA, 2017).

Significance of code. The APA ethics code is very popular around the world and has been widely used as a model by many associations to develop their own codes of ethics in their countries. More than 40 national psychological associations developed their ethics codes based on the structure of APA’s *Ethical Principles of Psychologists and Code of Conduct*. A few countries first used the actual APA code with minor changes, including South Africa, the Netherlands, and Canada (Louw, 1997; Sinclair, 2012). A study in 1997 compared 24 ethics codes to the APA 1992 code of ethics. It was found that the ethics codes of Australia, Canada, Israel, and South Africa had the same four principles of the APA code (Leach & Harbin, 1997). Moreover, the code of ethics of the Chinese Psychological Society (CPS) resembles the APA code, but remains consistent with the Chinese culture and the psychology specializations in the country, as it addresses clinical and counseling psychologists only (CPS, 2007; Oakland et al., 2012). Most psychological associations in the Southern African region are also influenced by the APA and CPA ethics codes (Cooper, 2012). Additionally, the Latin and South American region is highly affected by its proximity to the United States, and most of the ethics codes in the region have either been developed based on the APA code of ethics or through the APA’s CIT method, like the Mexican Society of Psychology (Consoli, Ardila, & Ferrero, 2012).

Table 2

APA Ethical Principles of Psychologists and Code of Conduct (APA, 2017)

General Principles	Ethical Standards
A. Beneficence and Non-maleficence	1. Resolving Ethical Issues
B. Fidelity and Responsibility	2. Competence
C. Integrity	3. Human Relations
D. Justice	4. Privacy and Confidentiality
E. Respect for People’s Rights and Dignity	5. Advertising and Other Public Statements
	6. Record Keeping and Fees
	7. Education and Training
	8. Research and Publications
	9. Assessment
	10. Therapy

Canadian Code of Ethics for Psychologists

Canadian psychologists adopted APA codes of ethics until they began to identify neglected ethical issues in the APA's 1977 code. Canadian psychologists were finding that the APA code of ethics failed to address ethical issues encountered within several essential areas of practice in Canada, including community psychology, women's issues, and family therapy. Accordingly, the CPA, the primary national association for psychologists in Canada established in 1939 (Koocher & Hadjistavropoulos, 2012), began to develop an ethics code in 1978 that was specifically designed for Canadian psychology. The code was later named the *Canadian Code of Ethics for Psychologists* and was approved and adopted in 1986 (Sinclair, 2012).

Code development. The CPA began the development of its ethics code by examining the APA code of ethics to develop the objectives and methodology of creating their own code. Consequently, the four final objectives were to (1) develop a conceptually cohesive code for having a better educational tool for training in ethical practice, (2) include recently developed areas of psychological practice, (3) provide clear and precise guidelines for action in response to conflicting principles, and (4) explicitly identify the most useful principles for ethical decision-making. Based on these objectives, the CPA created a list of 37 vignettes that involved ethical dilemmas in psychological practice, reflecting the APA's ethical principles, conflicts found amongst the APA's ethical principles, current and traditional issues of psychological practice, and dilemmas that occur during the use of innovative, yet unproven, approaches and techniques (Sinclair, Poizner, Gilmour-Barrett, & Randall, 1987).

Consequently, the CPA conducted research to obtain the "collective wisdom" of Canadian psychologists by surveying them about their ethical reasoning towards the 37 hypothetical dilemmas. Each dilemma was accompanied by six questions to probe the ethical judgments of the psychologists. The questions were detailed enough to explore the reasons behind the psychologists' thoughts and behaviors, as well as the thought process that they went through to make an ethical decision. Respondents were randomly selected from the directory of CPA members, and were sent invitations to participate in the study. Each of the psychologists who responded to the invitation, was sent a questionnaire of two or four of the hypothetical dilemmas related to their area of expertise (Sinclair et al., 1987).

Table 3

Development Process of the CPA Ethics Code

CPA Code Development Steps
1. Examined the APA ethics code.
2. Decided on objectives for the development of the CPA code of ethics.
3. Developed a list of 37 hypothetical ethical dilemmas.
4. Used random selection to select from CPA members to respond to the questionnaire.
5. Each respondent was sent a questionnaire consisting of a few hypothetical ethical dilemmas, each accompanied by 6 questions.
6. Performed a content analysis of the results to develop statements based on the underlying values and decisions reported.
7. Categorized the extracted statements using an iterative process, resulting in groups of superordinate ethical principles.
8. Prioritized the ethical principles and ordered them accordingly.
9. Reviewed psychological ethics codes and guidelines from other countries to develop standards based on the research results.
10. Compiled a document of the ethical principles, each defined by sets of values and standards.
11. Distributed the resulting document among professionals for consultation, who confirmed the order of the principles and suggested some enhancements.
12. Amended the code based on the feedback obtained.
13. Approved and adopted the <i>Canadian Code of Ethics for Psychologists</i> in 1986.

Upon receiving the responses, a content analysis of the results was performed, examining the underlying reasons for the decisions taken and the values held by the psychologists. Four superordinate principles were finally identified and ordered according to their priority when principles conflict. Accordingly, a document of the principles was compiled, each defined by a values statement and a set of ethical standards. The resulting document was then distributed amongst a variety of people both within and outside the field of psychology for consultation (Sinclair et al., 1987). The most recent revision of the code was published in the year 2017 (Canadian Psychological Association [CPA], 2017). The process used to develop the CPA ethics code is presented in Table 3 in more detail.

Code structure and ethical principles. The format of the CPA code of ethics is called the *Moral Framework*, which is a format that is generally structured as four to six ethical principles, each described by a set of values and a set of ethical standards. Table 4 illustrates the four ethical principles that were developed for the moral framework of the CPA

code of ethics, which are (1) respect for the dignity of persons, (2) responsible caring, (3) integrity in relationships, and (4) responsibility to society. The format of the moral framework is different from the APA structure which comprises a set of general ethical principles followed by a set of ethical standards that are not directly connected to the principles (Sinclair, 2012).

Unlike the structure of the APA code of ethics, which does not connect principles to standards, the CPA chose to organize its code around the moral framework in order to connect ethical principles to certain values and ethical standards. To the observer, the structure of the moral framework seems to be clearer and more aspirational than that of the APA code of ethics, since the entire code is organized around broad aspirational principles, stimulating thought beyond the identified standards within these principles. Rather than merely complying with a list of ethical conduct, psychologists may be able to better understand the values and principles behind the morality of a specific behavior, and hence, make better ethical decisions, pushing towards the highest ethical conduct.

Additionally, the CPA code of ethics included a section on ethical decision-making, with steps to be followed to make the most appropriate decision in a situation, in addition to a section on decision-making when principles conflict. Also, to provide enough guidance on the issues of conflicting principles, the ethical principles in the code were ordered by priority (CPA, 2017; Sinclair, 2012; Sinclair et al., 1987).

Significance of code. The CPA code of ethics was the first to be developed by exploring the reasons behind psychologists' ethical judgments, rather than only examining the decisions (Sinclair et al., 1987). Although other studies have collected data on ethical-decision making using vignettes of ethical dilemmas accompanied by discrete scales for the participants to select their decisions, the CPA's method used open-ended questions to collect more in-depth qualitative data (Dinc & Ulusoy, 1998; Donkor & Andrews, 2011; Sinclair et al., 1987). Moreover, following the CPA, the moral framework has been used in the development and revision of several ethics codes of national, regional, and international psychological associations, including the Psychological Society of Ireland, the New Zealand Psychological Society (Sinclair, 2012), the Australian Psychological Society (APS, 2007), and the Honk Kong Psychological Society (HKPS, 2012).

Table 4

Structure of the Canadian Code of Ethics for Psychologists (CPA, 2017)

Principles	Examples of Ethical Standards
I. Respect for the Dignity of Persons (<i>includes justice</i>)	Non-discrimination Informed consent Protections for vulnerable persons Privacy Confidentiality
II. Responsible Caring (<i>includes beneficence and non-maleficence, competence and responsibility</i>)	Competence and self-knowledge Risk/benefit analysis Maximize benefit & minimize harm Offset/correct harm Care of animals
III. Integrity in Relationships	Accuracy/honesty Objectivity/lack of bias Straightforwardness/openness Avoidance of incomplete disclosure (in research) Avoidance of conflict of interest
IV. Responsibility to Society	Development of knowledge Beneficial activities Respect for society Development of society

Note. Presented are a few examples of the ethical standards corresponding to the CPA's principles

The moral framework has also been used to formulate templates for guiding psychological associations to develop their own context-specific ethical codes. Regional and universal psychological associations developed moral frameworks of broad ethical guidelines or principles, which are followed by member national psychological associations when developing their own customized, culturally-relevant codes of ethics. Regional codes that followed the moral framework include the European *Meta-Code of Ethics* and the *Protocol of the Framework Agreement of Ethical Principles for the Professional Practice of Psychology*

in the Mercosur and Associated Countries, in addition to the *Universal Declaration of Ethical Principles for Psychologists* (Sinclair, 2012).

Ethical Principles for Nordic Psychologists

The Nordic countries were the first to develop a regional code of ethics for psychologists, approved by all five countries in the region—Denmark, Finland, Iceland, Norway, and Sweden. The Norwegian Psychological Association (NPA) began to develop the *Ethical Principles for Nordic Psychologists* (*Etiske Prinsipper for Nordiske Psykologer*) in 1988, later revising the code in 1998 to follow the ethical principles and values of the European *Meta-Code of Ethics* (Gauthier & Pettifor, 2012; Norwegian Psychological Association [NPA], 1998; Sinclair, 2012). The Nordic code was meant to provide answers to ethical questions of Nordic psychologists, protect clients against inappropriate or malicious interventions, define a professional and ethical relationship among professionals, maintain public trust in the professional practice of psychologists, and serve as a foundation for the development of ethical guidelines and advice in specialty areas of psychology (NPA, 1998). The five Nordic countries have their own psychological associations, which have powerful influence in their countries and have high membership rates (Aanonsen & Althaus, 2012). As a result, despite complying with the same ethics code, the psychological associations in the Nordic countries have been administering and interpreting the code differently due to some cultural differences (Leach & Harbin, 1997).

Meta-Code of Ethics of the European Federation of Psychologists' Associations

In 1990, the European Federation of Psychologists' Associations (EFPA) attempted to develop an actual ethics code for European psychologists, but soon realized that it was unrealistic to obtain consensus among psychologists from various cultures in Europe. Hence, instead of developing a common ethics code, the EFPA used the moral framework format to develop a template of ethical principles, the *Meta-Code of Ethics*, to be used by individual psychology organizations for the development of their own ethics codes (Sinclair, 2012).

In order to develop the *Meta-Code of Ethics*, the EFPA studied the situation of psychological ethics in European countries. A comparison was made among the ethics codes of six European countries (Scandinavia, Germany, Spain, Hungary, Austria, and UK), in addition to the APA code of ethics to examine the possibility of finding similarities (Lindsay, 1992). It was found that many European national psychological associations at that time did not have ethics codes yet, and those that had codes of ethics had significant differences in content and language, despite similarities. The associations themselves also had distinctions, including size and developmental stage. Such variations, as well as the different cultural,

historical, and political contexts of the European countries, were important to be considered when developing the meta-code (Lindsay, Koene, Øvreeide, & Lang, 2008).

Consequently, the EFPA established a Task Force on Ethics and requested that the member associations would each nominate one member to be part of the Task Force. The assembled Task Force reviewed a variety of ethics codes, both developed by European and non-European psychological associations, with a commitment to avoid imitating an existing code. Nevertheless, the Task Force agreed to follow the structure of the moral framework, due to its educative format and inclusion of vignettes. The EFPA finally adopted the first *Meta-Code of Ethics* in 1995 and a Standing Committee on Ethics revised the code in 2005 (Lindsay et al., 2008).

The most recent version of the *Meta-Code of Ethics* comprises four general ethical principles that are each supported by a set of specific values. The four principles are (1) respect for a person's rights and dignity, (2) competence, (3) responsibility, and (4) integrity. Member organizations are expected to comply with the principles and values outlined in the *Meta-Code of Ethics* when developing or revising their own codes of ethics, while avoiding any conflicting principles, values, and standards (European Federation of Psychologists' Associations [EFPA], 2005).

Since the *Meta-Code of Ethics* was developed and adopted, the Standing Committee on Ethics has been revising the ethics codes of the EFPA member associations to ensure compliance with the Meta-Code (Nederlandt, 2011, 2013). The EFPA only allows a single psychological association to join the EFPA from every country in Europe and recommends unifying psychological associations in cases when there are more than one in a country (Aanonsen & Althaus, 2012). Some of the codes of ethics that have been reviewed included codes of national psychological associations in the United Kingdom (the code of the BPS), Russia, Croatia, Ireland, the Netherlands, France, Switzerland, and Romania (Aanonsen & Althaus, 2012; BPS, 2009; Lindsay, Stevens, Leach, Ferrero, & Korkut, 2012; Nederlandt, 2011, 2013). As discussed earlier, the Norwegian Psychological Association also modified its *Ethical Principles for Nordic Psychologists* right after the establishment of the *Meta-Code of Ethics* to be consistent with its framework (Sinclair, 2012).

Protocol of the Framework Agreement of Ethical Principles for the Professional Practice of Psychology in the Mercosur and Associated Countries

After the development of the *Meta-Code of Ethics* by the EFPA in Europe, six South American countries—Argentina, Bolivia, Brazil, Chile, Paraguay, and Uruguay—also developed a declaration of ethical principles for Latin and South American psychological

practice in 1997, named the *Protocol of the Framework Agreement of Ethical Principles for the Professional Practice of Psychology in the Mercosur and Associated Countries* (subsequently abbreviated as *Mercosur Protocol* in this paper). Representatives of organizations from each country came together to present and describe the practice of psychology in their countries. The purpose of this protocol was to define the scope of practice of psychology in the region and to formulate a regional moral-framework template to be adopted by psychological associations (Sinclair, 2012). The framework outlines five general principles: (1) respect for people’s rights and dignity, (2) professional competence, (3) professional and scientific commitment, (4) integrity, and (5) social responsibility (Gauthier & Pettifor, 2011; Sinclair, 2012). Despite the availability of the *Mercosur Protocol*, almost all countries in South America currently have their own national psychological associations and ethics codes, and they mostly used the APA ethics code as a model rather than this Protocol (Consoli et al., 2012).

Universal Declaration of Ethical Principles for Psychologists

The *Universal Declaration of Ethical Principles for Psychologists* (subsequently abbreviated as *Universal Declaration* in this paper) is perhaps one of the most influential recent contributions to the area of psychological ethics to date. In 2002, during the 25th International Congress of Applied Psychology in Singapore, the International Union of Psychological Science (IUPsyS) and the International Association of Applied Psychology (IAAP) discussed the need for a code of ethics to support psychologists around the world (Gauthier, 2005), in response to the spread of globalization, which created a need to define what is “good” on a universal level, and a concern that technology could also be used for destruction and exploitation (Gauthier & Pettifor, 2012). Consequently, Janel Gauthier, who was a professor at the Laval University in Canada and a delegate to the IUPsyS General assembly at that time, presented a proposal at the Congress for developing a universal declaration of ethical principles for psychologists. Gauthier’s proposal grabbed the attention of the IUPsyS, which created the Ad Hoc Joint Committee of psychologists from around the world to develop the *Universal Declaration* and selected Gauthier to chair the group (Gauthier, 2005, 2008).

There were several objectives for developing a universal declaration of ethical principles for psychologists. It is worth clarifying that the aim was not to develop a universal code of ethics or code of conduct, since such types of codes would be too specific and unrealistic to apply among all the cultures of the world. A declaration of principles, on the other hand, would present a reflection of moral principles and values to be considered during

the development of codes of ethics or conduct by individual psychological associations (Gauthier, 2005, 2008). Hence, a moral framework of generic principles was needed to guide psychological associations around the world when developing or revising their own codes of ethics. Moreover, the code was meant to encourage global thinking and discussion about ethics, while also encouraging action that is sensitive and responsive to local needs and values (Gauthier, 2005; “Universal Declaration,” 2013)

The Ad Hoc Joint Committee began to develop the *Universal Declaration* by examining and comparing existing ethics codes and historical documents from all over the world, in order to identify similarities among the ethical principles and values. Next, the committee examined the ethical principles and values adopted by other international disciplines and internationally accepted documents, such as the *Universal Declaration of Human Rights*, and compared them to those commonly used in the existing codes of ethics for psychologists. The committee also examined historical documents from China, Egypt, Greece, India, Japan, and Persia to explore the origins of the ethical principles being used in modern codes of ethics for psychologists. Consequently, the ethical principles and values with the greatest commonality and universality among existing codes were compiled into a framework.

In order to obtain feedback and suggestions from psychologists around the world, the committee organized several focus groups and symposia during international meetings in several regions of the world. The framework was, then, refined and presented for broad consultation from fellow psychologists around the world. The *Universal Declaration* was revised by the Ad Hoc Joint Committee and a draft was submitted to the IUPsyS, IAAP, and the International Association for Cross-Cultural Psychology (IACCP) for discussion and approval (Gauthier, 2005, 2008). The first finalized draft of the *Universal Declaration* was issued in 2005 and was revised in 2007 and 2008 through international consultations, which considered the cultural appropriateness of the declaration. Finally, in 2008, the third, and most recent, draft of the *Universal Declaration* was released (Gauthier, 2008; Ritchie, 2008; “Universal Declaration,” 2013) and adopted by the IUPsyS and the IAAP in July 2008 (“Universal Declaration,” 2013). Table 5 illustrates the development process of the *Universal Declaration*.

Table 5

Development of the Universal Declaration of Ethical Principles for Psychologists

Universal Declaration Code Development Steps

1. Created the Ad Hoc Joint Committee to develop the *Universal Declaration*.
 2. Examined existing ethics codes and historical documents.
 3. Compiled common ethical principles and values into a framework.
 4. Obtained feedback from psychologists around the world through focus groups and international symposia.
 5. Refined the framework based on the collected suggestions.
 6. Presented a draft for broad consultation from psychologists around the world.
 7. Revised and submitted a draft to the IUPsyS, IAAP and IACCP for discussion and approval.
 8. Approved and issued the first finalized draft of the *Universal Declaration of Ethical Principles for Psychologists* in 2005.
 9. Revised the *Universal Declaration* several times through international consultations.
 10. The IUPsyS and the IAAP adopted the final draft of the *Universal Declaration* in July 2008.
-

The *Universal Declaration* begins with a preamble, followed by four broad ethical principles (see Table 6) that are each described by a set of values. Member associations are expected to develop ethical codes that comprise at least the principles and values listed in the *Universal Declaration*, and add the appropriate ethical standards under each principle, according to the needs of their cultures, religions, political situations, and other contexts (Gauthier, 2008; “Universal Declaration,” 2013). Accordingly, the codes of ethics developed by the Mexican Psychological Society (SMP), the Colombian College of Psychologists, and the Psychological Society of South Africa (PsySSA) were found to follow the *Universal Declaration* (Consoli et al., 2012; Cooper, 2012).

Table 6

Principles of the Universal Declaration of Ethical Principles for Psychologists

Principles of the Universal Declaration

- I. Respect for the Dignity of Persons and Peoples
 - II. Competent Caring for the Well-Being of Persons and Peoples
 - III. Integrity
 - IV. Professional and Scientific Responsibilities to Society
-

A Synthesis of the Major Ethical Principles for Psychologists

Reviewing literature on national, regional, and universal psychological ethics around the world has shown that most codes of ethics for psychologists have been developed based on or inspired by the codes of the APA and CPA. As a result, they cover similar broad ethical principles: (1) respect for the rights and dignity of people, (2) integrity, (3) competence, and (4) responsibility. Table 7 shows a synthesis of the major ethical principles in well-known national, regional, and universal codes of ethics for psychologists. (Note that since the most current code for Nordic psychologists is consistent with the Meta-Code of Ethics, the *Ethical Principles for Nordic Psychologists* is not included in the synthesis.)

As seen in Table 7, well-known codes of ethics emphasize the same ethical principles but name them and organize them somewhat differently. All psychological ethics codes clearly state, “respect for the rights and dignity of people,” as well as “integrity” as ethical principles for psychologists. However, while the APA lists “beneficence and non-maleficence” as an ethical principle of its own and “competence” as an ethical standard, other codes of ethics integrate beneficence, non-maleficence, competence, and responsibility under other principles, such as “responsible caring” or “competence”. In fact, the APA code is the only one that discusses “competence” as an ethical standard, rather than a principle. Moreover, the APA emphasizes “justice” as a separate ethical principle, whereas the other codes discuss it under the principle of “respect for the rights and dignity of people”. Hence, it can be concluded from this synthesis that psychologists around the world value the same general ethical principles, despite differences in classification.

Table 7

Comparison of Principles in Psychological Ethics Codes Around the World

APA	CPA	EFPA Meta-Code	Mercosur Protocol	Universal Declaration
Beneficence and Non-maleficence	Responsible Caring <i>(includes beneficence, non-maleficence, competence and responsibility)</i>	Competence	Professional Competence	Competent Caring for the Well-Being of Persons and Peoples
Fidelity and Responsibility	Responsibility to Society	Responsibility	Social Responsibility Professional and Scientific Commitment	Professional and Scientific Responsibilities to Society
Integrity	Integrity in Relationships	Integrity	Integrity	Integrity
Respect for People's Rights and Dignity Justice	Respect for the Dignity of Persons <i>(includes justice)</i>	Respect for a Person's Rights and Dignity	Respect for People's Rights and Dignity	Respect for the Dignity of Persons and Peoples

Psychological Ethics in the Arab World

As the dominant and regional codes of ethics became known, many national psychological associations in the world decided to follow their path. One of the regions that has extensively used or referred to the APA and CPA codes of ethics is the Arab region. This section will review psychological ethics in the 22 countries of the Arab League, listed in Table 8 ("Arab League," n.d.). Learning about the field of psychology in the Arab world is beneficial in understanding how psychological codes of ethics have been developed in the region. Hence, throughout this section, the reader will be introduced to the emergence of psychology as a discipline in the Arab world, the development of Arab psychological associations, the development of psychological ethics codes, and the religious and cultural considerations that have been noted in psychological ethics codes for Arab psychologists.

Table 8

Countries of the Arab League in Alphabetical Order

Country	Country	Country
Algeria	Kuwait	Qatar
Bahrain	Lebanon	Saudi Arabia
Comoros	Libya	Somalia
Djibouti	Mauritania	Sudan
Egypt	Morocco	Syria
Iraq	Oman	Tunisia
Jordan	Palestine	United Arab Emirates
		Yemen

Psychology in the Arab World

Psychology emerged in the Arab world as an academic discipline during the twentieth century. The discipline was first introduced in Egyptian universities in 1908, followed by other Arab countries between the years 1940 and 1990. The discipline of psychology in the Arab world was dominated by Egypt, and many Arab psychologists were obtaining their degrees from Egyptian universities at that time. Psychology started as a minor discipline under the philosophy or sociology departments in Arab universities and was later established as a separate department. There are currently numerous universities in the Arab world that have independent psychology departments, including undergraduate and graduate programs (Ahmed, 1992; Ibrahim, 2013).

Curricula of psychology programs in Arab universities have usually been quite similar to Western psychology programs, as many Arabs had been pursuing psychology degrees from American and European countries and bringing back books and ideas into the Arab education (Ahmed, 1992; Ibrahim, 2013). As a result, Arabs have adopted theories, assumptions, methods, and instruments from the West that may be culturally irrelevant, insufficient to the needs of Arab people, or may sometimes cause conflicts amongst individuals in society (Abou-Hatab, 1997; Al-Darmaki & Yaaqeib, 2015; Ibrahim, 2013). Nevertheless, exposure to Western literature has led to the advancement of the field of psychology in the Arab world by introducing Arab psychologists to new research, testing, and practical methods (Ibrahim, 2014).

Arab psychology is gaining more and more recognition around the world, yet the image of the discipline in the Arab world is lagging behind. Arabs usually view other fields

such as medicine and engineering to be the most prestigious and lucrative, and hence, psychology programs have not been attractive to students (Ahmed, 1992; Ibrahim, 2013). Moreover, there is little recognition and appreciation of psychologists from the media and other scientific disciplines, which limits the involvement of Arab psychologists in social and medical reform (Ibrahim, 2013). Another challenge encountered by Arab psychologists is the perception that some psychological perspectives that have been adopted from the West are believed to conflict with some Islamic and cultural beliefs (Ibrahim, 2013). Such obstacles and more have created stigma towards the field of psychology, to the extent that people with mental health issues avoid or feel ashamed to seek psychological support, in order to protect the reputation and honor of their families, in addition to avoiding the social perception of mental health clients as “crazy” people (Al-Darmaki & Yaaqeb, 2015; Amer, 2013; Baidas, 2012). Nonetheless, the field of community psychology has recently emerged in Egypt and Palestine (Amer, 2014; Carrillo & Forden, 2013; Makkawi, 2015), increasing the involvement of psychologists in social reform.

Psychological research in the Arab world has been mostly conducted by students pursuing graduate degrees in psychology, faculty members and psychologists aiming to get promoted (Al-Darmaki & Yaaqeb, 2015; Ibrahim, 2013). The majority of educational programs are in Arabic, and hence, most psychological publications are written and published in Arabic. Consequently, Arab psychology has not been successful in reaching out to non-Arabic speakers, and yet, networking among Arab psychologists themselves has also been weak. This has kept the growth of psychology in the Arab world limited within the region (Ahmed, 1992; Al-Darmaki & Yaaqeb, 2015). The emergence of the Internet, however, has been making communication and exchange of information easier across the globe, somewhat increasing the publicity of Arab psychological research (Ibrahim, 2013).

Research on Arab psychology in more recent times has been inadequate, which resulted in finding little literature to describe psychology in the Arab world today. Nevertheless, several national psychological associations have been found in the region and will be explored in the next section.

Psychological Associations in the Arab World

Codes of ethics tend to be products of psychological associations, which work to develop the codes and enforce them. Hence, it is important to have an overview of the existing psychological associations around the Arab world. There are several psychological associations in the region that arose out of the need for collaboration, professional training, and expansion of the discipline (Abou-Hatab, 1997; Ibrahim, 2013). The IUPsyS is a leading

international organization for psychologists that was the main contributor in the development of the *Universal Declaration of Ethical Principles for Psychologists*, as discussed previously. Most Arab countries are not members of the IUPsyS, with the exception of Egypt, Jordan, Lebanon, Morocco, Sudan, and Yemen (“National Members,” 2013). However, one of the affiliates of the IUPsyS is the Arab Union of Psychological Science (AUPsyS), which is an active Arab organization representing psychologists in all Arab countries (“Members and Affiliates,” 2013). Despite being one of the union’s objectives, an ethical code has not been developed yet to unify the ethical standards for psychological science across Arab countries (A. M. Farah, personal communication, November 8, 2016; Farah, 2015).

The first psychological association in the Arab world, founded in 1948, was the Egyptian Association for Psychological Studies (EAPS), which contributed to the formation of the IUPsyS in 1951 (Abou-Hatab, 1997). Another psychological association in Egypt is the Egyptian Psychological Association (EPA), which is more concerned with applied psychology in the country, compared to the EAPS which is more focused on academics. Other Arab countries later established psychological associations. After reviewing literature and searching the Internet, several psychological associations were found for all Arab countries, demonstrated in Table 9 (Benjamin & Baker, 2012; “Country Information,” 2019; “National Members,” 2013), except Algeria, Bahrain, Comoros, Djibouti, Mauritania, Oman, Palestine, and Somalia.

Psychological Codes of Ethics in the Arab World

Six nations in the Arab world—Egypt, Jordan, Kuwait, Libya, Saudi Arabia, and the United Arab Emirates (UAE)—have developed ethics codes for psychologists of some sort. All of the existing ethics codes are adopted by a national psychological association, except for the Saudi Arabian code, which was recently developed as an academic research study (Alqahtani & Altamimi, 2016).

Egypt. In 1995, a code of ethics for psychologists was proposed and approved by both the EAPS and the EPA during a forum that was coordinated by the EPA (Ahmed, 2004). However, the code has not been enforced in any way and no body of authority exists to evaluate ethical violations. According to Taha (as cited in Ahmed, 2012), the code of ethics of the EPA was developed based on the APA's regulations and ethics code. The EPA established a committee to review the APA code and select relevant principles and standards. In order to develop a code of ethics that is contextually-relevant to psychology in Egypt, the committee formulated a code of rephrased principles and standards inspired by the APA code, as well as added other needed standards and expressions (M. M. Amer, personal

communication, September 18, 2018). In regard to the content of the EPA ethics code, the code begins with a list of general principles, which are actually a mixture of both principles and standards of conduct, followed by sets of standards that are categorized by areas of psychological practice. Using descriptive language, the EPA principles emphasize respect, good appearance, beneficence and non-maleficence, non-discrimination, integrity, competence, privacy, and confidentiality, among others (EPA, n.d.). The general principles also discuss some standards of ethical conduct, such as “Psychologists assess, diagnose or make interventions in a professional context only and their reports are supported by scales and interviews” (EPA, n.d., Statement 1-15).

Jordan. The Jordanian Psychological Association (JPA) also developed an ethics code that is almost the same as that of the EPA. It is unclear when it was developed or published (JPA, n.d.).

Kuwait. The Middle East Psychological Association (MEPA) was established in Kuwait in 2010, yet the association also targets psychologists from all around the Middle East. One of its efforts was the development of the first code of ethics for mental health practice in Kuwait. The MEPA code of ethics was developed based on the APA and the Turkish Psychological Association’s (TPA) codes of ethics (APA, 2017; TPA, 2004). It is structured as a moral framework, comprising five principles: (1) competency/adequacy, (2) human relations, (3) responsibility, (4) integrity, and (5) respect for people’s rights and non-discrimination. Each principle is further described using ethical standards, followed by other ethical standards for special areas, including education, psychotherapy, assessment, and research. Finally, the code ends with a section on resolving issues (MEPA, 2011).

In fact, the structure and content of the code are exactly the same as those of the TPA ethics code, with slight changes in terminology. For example, one of the principles is named differently but refers to the same thing, as understood from the description. While the TPA ethics code includes “beneficence and maleficence” as a principle, the MEPA ethics code names it “human relations”. The content of the TPA ethics code itself closely resembles the APA ethics code, but is structured differently, using a moral framework format.

Libya. The Mental Health Professionals’ Association of Libya (MHPAL) has a code of conduct that is based on the ethics code of the British Psychological Society (BPS). Despite naming it a code of conduct, it lists four broad ethical principles, which are (1) integrity, (2) respect, (3) competence, and (4) responsibility (Mental Health Professionals’ Association of Libya, n.d.). Moreover, the Libyan Psychological Association claims to have a code of ethics posted on its Facebook page (Libyan Psychological Association, personal

communication, December 7, 2016). However, only the introduction of the code was found on the website.

Table 9

Psychological Associations and their Codes of Ethics in the Arab World

Country	Association	Website	Code
Egypt	Egyptian Association for Psychological Studies	http://eapsegypt.tripod.com	--
	Egyptian Psychological Association	www.e paranm.org	✓
Iraq	Iraqi Educational and Psychological Association	Facebook Page: الجمعية العراقية للدراسات التربوية والنفسية	--
Jordan	Jordanian Psychological Association	www.jpajo.org	✓
Kuwait	Kuwaiti Psychology Association	http://kuwpsy.org/	--
	Middle East Psychological Association	www.mepa.me	✓
Lebanon	Lebanese Psychological Association	http://lpalebanon.org/	--
	Lebanese Association for Psychological Studies	http://www.filnafs.com/alep.html	--
Libya	Mental Health Professionals' Association of Libya	http://mhpal.weebly.com/	✓
	Libyan Psychological Association	http://alzmrd.montadarabi.com/	✓
	Libyan Association for Psychological Science	Facebook Page: الجمعية الليبية للعلوم النفسية	--
Morocco	Moroccan Psychological Association / Association Marocaine des Etudes Psychologiques		--
	Moroccan Society of Psychology / Société Marocaine de Psychologie	http://asbamaroc.net/smpsy/	--
Qatar	Psychologists' Association in Qatar	Facebook Page: رابطة الأخصائيين النفسيين الاجتماعيين في قطر	--
Saudi Arabia	Saudi Educational and Psychological Association (GESTEN)	http://gesten.ksu.edu.sa/en	--
Sudan	Sudanese Psychological Society	Facebook Page: الجمعية النفسية السودانية The Sudanese Psychological Society	--
Syria	Syrian Association for Mental Health (located in UK)	http://www.syriasamh.com/enIndex.htm	--
Tunisia	Tunisian Society of Psychology / Société Tunisienne de Psychologie	https://sites.google.com/site/sotupsy/	--
UAE	Emirates Psychological Association		✓
Yemen	Yemeni Psychological Association		--

Note. Some associations do not have websites, but have active Facebook pages instead

Palestine. No psychological associations have been found in Palestine, yet the World Health Organization, in collaboration with a large number of organizations, have developed a *Palestinian Code of Conduct for Psychosocial Interventions*. This code is dissimilar from other codes of ethics for psychologists, as it is focused on psychological and social practices in the community rather than on mainstream psychology.

Qatar. The Psychologists' Association in Qatar has been contacted through Facebook, through which it was learned that the association does not have a code of its own. However, members of the association are expected to follow "the code of ethics used by Egyptian universities," of which the name was not specified (Psychologists' Association in Qatar, personal communication, December 7, 2016).

Saudi Arabia. A recent study, conducted by two PhD students in Saudi Arabia, aimed to develop a set of guidelines on ethics and best practices for Saudi psychologists, combining the Islamic law, the Ministry of Health's policies, the Saudi Commission for Health Specialties (SCHS) policies, as well as international standards. The students succeeded in developing a culturally relevant ethics code for psychologists for the first time in Saudi Arabia. However, this code is not adopted by any psychological associations yet.

The purpose of the code is to guide Saudi psychologists to the highest ethical standards, as well as serve as an ethical reference for national and regional psychological practice. In order to develop the *Code of Ethics and Professionalism*, the students reviewed Islamic charts of health ethics, professional codes of ethics, international codes of ethics and literature on ethics and professionalism in light of Islamic values. A draft was developed accordingly, sent to experts in the field for feedback, revised and shared for external peer reviews through group discussions with academic professors. The group discussions were conducted using evaluative questions that were based on the feedback obtained earlier and the sociocultural context in Saudi Arabia (Alqahtani & Altamimi, 2016).

The code is based on a moral framework, comprising five general ethical principles (although named as *Standards* in the code) that are each described by a set of standards. The principles are (1) respect, (2) competence, (3) non-maleficence, (4) responsibility and confidentiality, and (5) integrity. The principles and standards are followed by two sections on *Ethical Issues about Assessment and Treatments*, and *Cultural Competency and Professionalism Issues*. Despite the fact that this code of ethics is still new and has not yet been adopted by a psychological association in Saudi Arabia, the authors have been quite conscious and analytical of the Saudi Arabian context, and hence, it is perhaps the most culturally relevant code of ethics found among Arab countries (Alqahtani & Altamimi, 2016).

United Arab Emirates. In 2008, the Dubai Health Authority (DHA) and the Emirates Psychological Association delegated a group of psychologists to draft an *Ethical Code and Professional Conduct of Psychologists* in the UAE. The development process of this code included examining various codes of ethics from around the world and studying the cultural diversity and unique social issues in the UAE. Consequently, the code was developed to fit the UAE context, while remaining consistent with the internationally accepted standards of psychological practice. The ethics code outlines four broad ethical principles, which are (1) respect, (2) competence, (3) responsibility, and (4) integrity, followed by a section on ethical decision-making (Al-Darmaki & Yaaqeb, 2015; Serkal, 2015).

Religious and Cultural Considerations for Arab Psychological Codes of Ethics

As evident, Arab psychological codes of ethics are influenced by Western ethics, and particularly the code of the APA. The major ethical principles in well-known national, regional and universal codes of ethics for psychologists are also emphasized by Arab codes, including competence, responsibility, integrity, and respect. Nevertheless, it is important to examine religious and cultural aspects that have been considered by Arab psychologists when developing ethics codes in the Arab world. This will provide a deeper understanding of how the ethical principles and standards in the ethics codes have been developed in a way that is relevant or irrelevant to the context.

Codes of ethics for Arab psychologists show little religious and cultural considerations, such as the use of spiritual healing methods and religious leaders. Amer (2013) discussed existing traditional mental healing methods in the Arab culture, including seeking help from sheikhs, church institutions and magic, and raised the concern that psychologists rarely collaborate with religious healers in the region. Nonetheless, the Egyptian, Jordanian, Kuwaiti and Saudi Arabian codes of ethics explicitly state that psychologists should generally respect the religious and cultural views of clients. Moreover, the fourth general principle of both the codes of ethics of the Egyptian and Jordanian psychological associations prohibits psychologists from religious biases (EPA, n.d., Statement 1-4; JPA, n.d., Statement 1/4).

The *Code of Ethics and Professionalism* for Saudi Arabian psychologists is the only code of ethics for psychologists found to discuss religious values or cultural considerations in adequate detail (Alqahtani & Altamimi, 2016). However, since Saudi Arabian laws follow the Islamic Shari'a, the code addresses Islamic laws only, rather than both Islamic and Christian contexts, which are both prevalent in the Arab world. This would limit the use of this code in countries that have larger Christian populations, although the authors intended to

target other countries in the region. Nevertheless, it could be a good starting point for the development of ethics codes for psychologists in the region, as several mentioned cultural and contextual factors are considered.

It would be useful to take a closer look at the *Code of Ethics and Professionalism* for Saudi Arabian psychologists to understand psychological ethics in some Arab contexts. This code explicitly states that whenever the code of ethics and legal instructions conflict, psychologists should follow the law, which is based on the Islamic Shari'a, as previously mentioned. The ethics code also warns against the use of instruments in psychological assessments that are not culturally appropriate or have not been proven valid and reliable for use in Saudi Arabia or with Arab people. Additionally, the section on *Cultural Competency and Professionalism Issues* discusses accepting gifts and social invitations, emphasizing minimal acceptance of these offers rather than completely prohibiting them. This is because such proposals are common in Arab cultures and are simply considered kind gestures, while rejecting them would be impolite. This section also discusses the prohibition of hand shaking between opposite genders in the Islamic Shari'a, as well as sitting close to an opposite gender, and consequently, prohibits these actions in practice. Moreover, the code clarifies that psychologists who are seeing Muslim female clients should respect that they are covering their faces and should clearly note in the session the limitations resulting from their inability to see facial expressions and keeping eye contact (Alqahtani & Altamimi, 2016).

Another interesting point in the code of ethics for Saudi Arabian psychologists is the addition of "khalwa" to the standard of privacy and confidentiality. Khalwa is the private meeting between a man and a woman who are not related to each other, which is a situation that is prohibited by Islamic Shari'a. People in Saudi Arabia do not accept khalwa under any circumstances other than a medical setting, which is also sometimes not preferable. Consequently, suggestions are outlined in the code to protect confidentiality when the client's sex is different from the psychologist's and therefore other people join the meeting to avoid khalwa, especially if the client of a male psychologist is a female who commonly brings along a male family member. The code also prohibits psychologists from scheduling sessions that conflict with Islamic prayer times, as well as leaving the session to perform a delayed prayer (Alqahtani & Altamimi, 2016).

In conclusion, it can be observed that Arab psychological associations were highly influenced by well-known Western codes of ethics when developing ethics codes for psychologists in the Arab world, but have not paid adequate attention to religious and cultural aspects in the region. Statements for respecting religious and cultural views are commonly

included in psychological ethics codes around the world, but this does not particularly imply that developers of these ethics codes have studied religious and cultural factors. Nevertheless, the research study in Saudi Arabia has highly considered the cultural and religious characteristics of its target society in order to develop a culturally-relevant ethics codes for psychologists in the country.

Ethics in Community Psychology

Existing national, regional and universal codes of ethics for psychologists are not sufficient for the practice of community psychologists. As a result, community psychologists have suggested numerous values and principles for the ethical practice of the profession. Moreover, Arab codes of ethics for psychologists are influenced by existing Western psychological codes of ethics and are not sufficiently relevant to the Arab culture. Hence, existing ethics codes for psychologists are quite limited for community psychologists in the Arab world. Therefore, this section examines the role of the community psychologist, limitations of existing psychological codes of ethics for community psychologists, literature on community psychology ethical values and principles, reasons behind the absence of a code of ethics for community psychologists, and current ethical guidance for community psychologists in the Arab world.

The Role of the Community Psychologist

First, it is important to understand the role of a community psychologist, how it is different from that of other psychologists, and why relevant ethical guidance is needed. Unlike many other psychology sub-fields in which the psychologist is often an expert or consultant, community psychologists do not act as the experts in their relationship with the client. Yet, they still greatly influence the relationship as the client and the community psychologist develop solutions *together*. A community psychologist enters a community to *learn* about it rather than assume knowing what is best for the client and merely impose solutions. He/she rather knows how to facilitate change towards the well-being of the community according to its needs, using appropriate intervention methods for empowering the community to create solutions for themselves. Hence, the community psychologist should neither act ignorant nor assume knowledge (Roos et al., 2007).

Cultural competence has become an increasingly important goal across applied psychology specializations. For community psychology, this goal is essential and integral to entering and intervening in a community. While psychologists in general need to understand and respect the culture of their clients, community psychologists need to also immerse

themselves into the culture of their target communities. They must know that every community has its unique characteristics and contexts, and hence, would be ready to co-create appropriate ethical processes according to the beliefs and values of the target community (Roos et al., 2007). This requires that the community psychologists would be respectful of diversity, such that they are able to mindfully regard the diverse opinions, beliefs, and contexts among communities (Kloos et al., 2012).

Additionally, although most psychology specializations concentrate at the individual level, the community psychologist is concerned with the context surrounding the individual. Hence, one of the important concepts in community psychology is the ecological framework, which views one's ecology into five subsystems: the individual, microsystem, mesosystem, exosystem, and macrosystem (Bronfenbrenner, 1997; Nelson & Prilleltensky, 2005). The subsystem of the individual is focused on the individual's strengths, weaknesses, health and personal well-being. The microsystem defines close and frequent relationships, including the individual's relationship with his/her family, friends, and colleagues, among others. The third subsystem is the mesosystem, which consists of the relationships between those in the microsystem. For example, if the child is at the core of the system, the relationship between the child's parents and his/her school teacher would be in the mesosystem. The exosystem comprises processes that indirectly affect the individual, such as the impact of the parent's extensive working hours, in the example of the child. The last subsystem is the macrosystem, which includes culture, belief systems, norms, and policies, among others (Bronfenbrenner, 1997). Accordingly, what really makes community psychology unique is its values and principles that guide the behavior of community psychologists. "Community psychology is not only a professional and scientific discipline. It is also a philosophical or value orientation that is applicable to virtually any field or profession" (Levine et al., 2005, p. 6).

Limitations of Psychological Codes of Ethics for Community Psychology

While community psychologists are concerned with whole communities and their surrounding context, well-known psychological ethics codes around the world, like those of the APA and CPA, are individualistic and do not adequately address ethical challenges encountered by community psychologists. The topic of ethics in psychology has been mainly focused on ethical conduct in psychotherapy and working with individual clients (Pope, 1989; Roos et al., 2007). Despite the popularity of the APA ethics code and Hobbs' (1948) eagerness to develop a code that is comprehensive enough for all types of psychologists, the APA ethics code does not cover all areas within the discipline of psychology, as evident from the *Introduction and Applicability* section of the APA ethics code (2017). Although it is

stated that the code covers some activities practiced by community psychologists, including ethics in social interventions, program design and evaluation, the code is designed more around the individual client and lacks guidance on the ethical dilemmas in family and community psychology settings (Sinclair et al., 1987), some of which are presented later in this literature review.

Moreover, the CPA ethics code is also insufficient for community-related practices, since it is focused on the client, rather than the community, and lists one of the foremost principles in community psychology, “responsibility to society,” as the final and least important principle in its prioritized moral framework (Nelson & Lavoie, 2010; O’Neill, 2005; Pettifor, 1998; Prilleltensky, 1990). Additionally, the *Universal Declaration* resembles individualistic psychological ethics codes and also lists the principle of responsibility to society last, but it was not clear whether the order of the principles is based on rank (“Universal Declaration,” 2013).

Hence, it is evident how globally influential psychological codes of ethics are inadequate to address the concerns of community psychologists and practitioners. As a result, most existing psychological codes of ethics around the world, which have been highly influenced by global codes, have also been individualistic and inappropriate for community-related practices. Consequently, community psychologists around the world have been struggling to find an adequate code of ethics for the unique context of their discipline (Campbell, 2016; Pope, 1989; Snow, Grady, & Goyette-Ewing, 2000; Trickett, 1998). For example, while mainstream psychological ethics codes encourage psychologists to treat clients with justice, community psychologists adopt a deeper meaning of justice that encourages advocating for social justice and equality within communities. Moreover, one of the ethical challenges that have been left unaddressed in psychological ethics codes is the existence of multiple relationships in community contexts, which complicates essential boundaries and puts confidentiality at risk. Other unique ethical challenges related to community interventions are further explored later. In the coming sub-sections, community psychology values and principles suggested in the literature will be examined, in addition to the reasons behind the absence of a code of ethics for community psychologists to date.

Values that Underlie Community Psychology Ethics

Due to the limitations of existing psychological codes of ethics, several community psychologists have developed sets of values and principles as a foundation for ethical practice (Morris, 2015a). The terms *values* and *principles* have been used interchangeably in the literature on community psychology, without a clear distinction between their meanings. For

example, some authors have referred to *empowerment* as a principle, while others called it a value. Despite previously defining these terms in this paper, classifying community psychology values and principles has been confusing. As a result, where there seems to be confusion, the term *value*, rather than *principle*, will be used.

Prilleltensky (2001) proposed a set of values for community psychology: holism, health, care, compassion, support for community structures, self-determination, participation, social justice, respect for diversity and accountability to oppressed groups. In another publication, Nelson and Prilleltensky (2005) discussed six key principles based on Prilleltensky's values of community psychology, namely ecology, prevention and promotion, community, power, inclusion, and commitment and depowerment of the psychologist. As previously defined, values are beliefs of what is good and would result in the best situation, while principles are rules that are based on values for guiding members of a profession. Hence, a principle is meant to guide community psychologists in achieving important values. Table 10 illustrates the connection between principles and values, as suggested by Nelson and Prilleltensky (2005).

Other community psychologists have made efforts in developing values and principles for the discipline. Inspired by the views of Nelson and Prilleltensky (2005), Kloos and co-authors (2012) described seven core values of community psychology. The values are individual and family wellness, sense of community, respect for diversity, social justice, empowerment and citizen participation, collaboration and community strengths, and empirical grounding. Note that although Nelson and Prilleltensky (2005) identified empowerment and sense of community as principles, Kloos and co-authors named them as values. It was emphasized by Kloos and colleagues that each of the seven core values cannot be applied on its own, for without combining values, research and interventions would fail to be comprehensive, and may at times be harmful rather beneficial.

In another well-known textbook on community psychology, Levine and colleagues (2005) also discussed values of community psychology, with many similar conclusions presented. To summarize, they emphasized the ecological perspective, participation, self-help (self-determination), empowerment, research (empirical grounding), cultural diversity, cultural competence, the focus on strengths and competency, commitment to social change, and prevention and promotion.

Table 10

Nelson and Prilleltensky's Principles and Values of Community Psychology

Principles	Corresponding Values
Ecology	Holism
Prevention and Promotion	Health
Community (Sense of Community)	Care Compassion Support for Community Structures
Power (Empowerment)	Self-Determination Participation Social Justice
Inclusion	Respect for Diversity
Commitment to Social Change & Depowerment	Accountability to Oppressed Groups

Tebes and co-authors (2014) also reviewed community psychology literature and examined their own experiences in practice in order to summarize a list of values and competencies for community psychology. In brief, the values include system change (as opposed to individual change), ecology, the focus on well-being, strength, and competence (as opposed to focusing on deficits and problems), prevention, resilience, promotion, empowerment, social justice, respect for diversity and cultural contexts, participation, collaboration, sense of community, empirical grounding, and theoretical and methodological pluralism. These values are consistent with the graduate student training competencies synthesized by the Society for Community Research and Action (SCRA) (Dalton & Wolfe, 2012). Among these competencies, SCRA defined the foundational principles of community psychology as follows: ecological perspective, empowerment, sociocultural and cross-cultural competence, community inclusion and partnership, and ethical, reflective practice. On SCRA's website, the guiding principles for community psychologists are stated differently yet incorporate the same values, emphasizing respect for diversity, the study of contexts (the ecological perspective), participation and collaboration, and change on multiple levels. Moreover, the goals and concepts used by SCRA include prevention and promotion,

theory development and research, exchange of knowledge between community psychologists, inclusion, and creating policies, among others (SCRA, n.d.).

Table 11

Comparison of Community Psychology Values and Principles in Literature

Values and Principles	(Nelson & Prilleltensky, 2005)	(Kloos et al., 2012)	(Tebeles, et al., 2014)	SCRA (Dalton & Wolfe, 2012; SCRA, n.d.)	(Levine et al., 2005)
Ecological Perspective	✓	✓	✓	✓	✓
Prevention and Promotion	✓	✓ <i>(individual and family wellness)</i>			✓
Sense of Community	✓	✓	✓		
Empowerment	✓	✓	✓	✓	✓
Self-Determination	✓			✓ <i>(empowerment)</i>	✓
Participation	✓	✓	✓	✓	✓
Social Justice	✓	✓	✓	✓ <i>(empowerment)</i>	
Inclusion	✓	✓	✓	✓	
Respect for Diversity	✓	✓	✓	✓	✓
Theoretical and Methodological Pluralism			✓		
Social Change	✓ <i>(commitment)</i>		✓	✓ <i>(change on multiple levels)</i>	✓
Depowerment of Psychologist	✓				
Collaboration / Partnership		✓	✓	✓	
Community Strengths		✓	✓		✓
Empirical Grounding		✓	✓		✓
Ethical, Reflective Practice				✓	
Cultural Competence		✓		✓	✓

Table 11 depicts the significance of each value or principle in community psychology, by comparing the various literature reviewed in this section and illustrating the rate of recurrence of each one. As demonstrated, the values and principles for community psychology that have been mentioned in almost all the examined literature include the ecological perspective, empowerment, participation, social justice, respect for diversity, inclusion, and social change. Subsequently, other values, which have been emphasized in three of the five examined sources, are prevention and promotion, sense of community, self-determination, collaboration, community strengths, empirical grounding, and cultural competence.

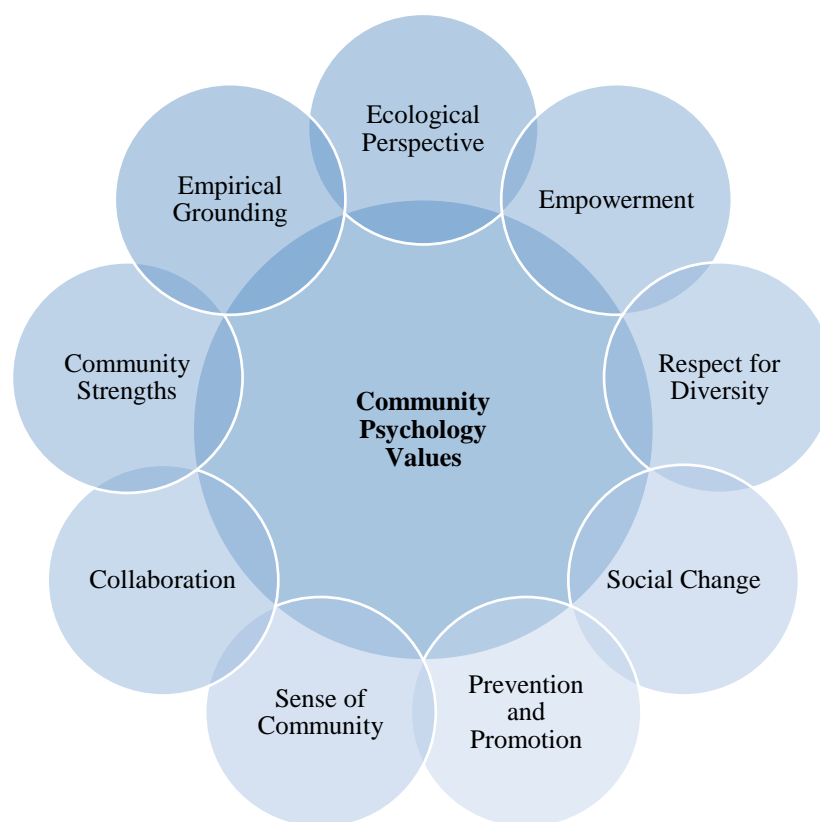


Figure 1. Synthesized Values of Community Psychology

It is important to find similarities among the values found in the literature, in order to reach a list of the most prominent values for community psychology. Self-determination, participation, and social justice are values that are embedded in the value of empowerment, as it is applied across the different ecological levels (Nelson & Prilleltensky, 2005). Moreover, the values of respect for diversity and inclusion are interrelated, yet inclusion is only one aspect of respecting diversity. Respect for diversity also incorporates respecting the

community's culture and diverse opinions and beliefs, as well as encouraging respect for diversity among community members through inclusion. Cultural competence is also a major component of respecting diversity, since the psychologist should be knowledgeable of the culture of the target community prior to the intervention in order to maximize benefit and avoid harm. Hence, to synthesize the examined literature, the major values for community psychology were found to be (1) ecological perspective, (2) empowerment, including self-determination, participation and social justice, (3) respect for diversity, including inclusion and cultural competence, (4) social change, (5) prevention and promotion, (6) sense of community, (7) collaboration, (8) community strengths, and (9) empirical grounding (see Figure 1).

Importance of Developing a Code of Ethics for Community Psychologists

Although values and principles for community psychology have been suggested in literature, a code of ethics for community psychologists has not been developed and adopted yet. The discipline of community psychology has been in practice now for more than fifty years without an established code of ethics (Campbell, 2016; Morris, 2015a). Morris (2015a) asserts the need for an ethics code that is focused on the field's commitment to the value of social justice and that is developed through systematic research, by collecting cases of ethical dilemmas in community practice. Moreover, Reamer (1999) describes community organization in general as a field that has its own unique situations of ethical dilemmas as community organizers struggle towards achieving social justice.

Ethics in mainstream psychology have been mainly concerned with the practice of psychotherapy and clinical psychology, which involves individuals rather than communities (O'Neill, 1989). Existing professional codes of ethics for psychologists, such as the APA's *Ethical Principles of Psychologists and Code of Conduct*, are relevant to community psychologists in a few areas, such as beneficence, confidentiality, competence, and informed consent. However, the ethics codes fail to address the dilemmas and situations that are unique to the practice of community psychologists (Snow et al., 2000). Nevertheless, existing codes remain relevant to the field of community psychology, and hence, are sometimes viewed as a good starting point for developing an ethics code for community psychologists (Morris, 2015a). For example, the APA's ethical principles (beneficence and non-maleficence, fidelity and responsibility, integrity, justice and respect for people's rights and dignity) are applicable to the field of community psychology, yet other additional values and/or principles that are more specific to the field need to be added. Many standards are also applicable if revised to address the unique challenges encountered by community psychologists, including multiple

relationships, cultural competence, confidentiality, and informed consent (challenges will be further discussed in a coming section). Other standards in the APA ethics code are less relevant to the discipline of community psychology, such as assessment and therapy.

Despite the need for a code of ethics for community psychologists to address important ethical challenges, several factors have hindered the development of such a code. Campbell (2016) implied that although community psychologists value ethical practice, some concerns prevented the development of a document outlining community psychology ethical principles and standards, including the adoption of the APA ethics code by community psychologists and the fact that the nature of the discipline of community psychology opposes inflexible systems. Moreover, some believe that the field of community psychology is too complicated and diverse to be able to define certain guidelines and boundaries, since the ecological perspective adopted by the field of community psychology requires interaction with a large diverse group of individuals, from children to families to a variety of sectors and organizations. Consequently, the wide variety of perspectives and values that are involved in community interventions and research highly complicates the establishment of a generic set of ethical guidelines (Campbell, 2016; Snow et al., 2000). In fact, Bennett and co-authors reported that psychologists at the Swampscott Conference, where the American field of community psychology is said to have been born, were unable to reach consensus on a definition for the field due to the complexity of its nature (as cited in Snow et al., 2000). Trickett (1998) also claimed that community practice involves activities that widely vary in range and scope, which would result in difficulties in obtaining consensus among the members of the profession for developing an ethics code. Nevertheless, Morris (2015a) argued that developing a code of ethics for community psychology is still possible, since other complex disciplines have managed to develop codes of ethics, despite the diversity and breadth of their practice. As an example, he discussed the discipline of evaluation, where practice involves a variety of settings, populations, and cultures.

Importance of Ethical Guidance for Arab Community Psychology

As previously discussed, community practice fields, including community psychology, are highly widespread in the Arab world, yet community psychologists have not developed a code of ethics for the discipline so far. The Master's program in community psychology at the American University in Cairo (AUC) addresses all the competencies that have been outlined by SCRA (Dalton & Wolfe, 2012), which will be explored later in this literature review. However, numerous challenges hinder the implementation of community-based interventions (Carrillo & Forden, 2013), especially due to the lack of cooperation

among Arab psychologists, the absence of regulatory bodies and socio-political instabilities (Amer, 2014). Sociocultural and cross-cultural competence are emphasized in the program, yet the environment in Egypt is highly diverse both culturally and religiously, creating a challenging situation for community psychologists. There are a wide variety of subcultures in the country, from being westernized and wealthy to living below the poverty line.

Moreover, the AUC program trains its students to abide to the APA ethics code, and yet, there are no official ethical standards that are enforced on psychologists in the country. The concepts of social change, community organizing and empowerment, including participation and social justice, are also hindered by socio-political conditions that may cause harm to the psychologists, practitioners, or the clients. Additionally, teamwork and mindfulness towards opposing views are uncommon ideologies in Egypt, causing challenges when attempting to collaborate with communities and build capacities. In regard to consultations, Egyptian organizations are quite bureaucratic, and consultations are only facilitated through connections and networking. Building relationships takes a very long time due to the frequency of delays, personal emergency situations, religious and national holidays, and political instabilities (Carrillo & Forden, 2013). Although these challenges have been experienced by community psychologists and other practitioners in Egypt, other Arab countries in the region have a much similar social and political situation.

Ethics in Community Practice

In order to tackle unaddressed ethical challenges and differences, community psychologists have been seeking ethical guidance from ethics codes of similar disciplines that are relevant to community practice. Campbell (2016), Kloos and co-authors (2012), Levine and co-authors (2005) and Morris (2015a) discussed how community psychology is similar to several other community practice disciplines, whose codes of ethics may actually be more relevant to community psychology than the APA's *Ethical Principles of Psychologists and Code of Conduct*. These disciplines include public health, community development, evaluation, and social work, among others. As recommended by Campbell, it is thus useful to examine existing ethics codes of similar disciplines during the process of constructing ethical principles and standards for the discipline of community psychology and community practice. In this section, ethics in community practice and some of the existing ethics codes will be examined briefly.

Public Health

Community psychology and public health share some similarities, especially in the promotion of health and the emphasis on prevention. Community psychology has a more broad, holistic perspective towards the quality of life within a community, including the effect of the interactions between community members and the different ecological levels, while public health is mostly focused on the health of community members (Levine et al., 2005). Nevertheless, like community psychology, public health also encourages maintaining the rights of individuals and requires collaboration with community members to evaluate the effectiveness of its services.

One of the public health codes of ethics worth examining is the *Code of Ethics* drawn by the United States-based Public Health Leadership Society (PHLS), which incorporates physical, social, and mental health aspects (PHLS, 2002). The code comprises a set of ethical principles based on a list of key values, including health, social interdependence (i.e. sense of community), public trust, collaboration, dependence on the physical environment, participation, promotion, knowledge, and science. Consequently, several principles overlap with many of the values previously discussed for community psychology, including sense of community, prevention and promotion, collaboration, participation, empowerment, social justice, informed consent, respect for diversity and competence. Moreover, one of the principles is concerned with enhancing the physical and social environment of a community, which is similar to the ecological perspective adopted by community psychologists. Other principles emphasize confidentiality and informed consent, which are also highlighted in the APA ethics code for psychologists.

In addition to the PHLS ethics code, Racher (2007) described an ethical foundation for public health and community practice fields like community psychology. Inclusion, diversity, participation, empowerment, social justice, advocacy, and interdependence (sense of community) were discussed, which are also relevant to the practice of community psychology. However, empirical grounding and the ecological perspective are among the most important community psychology principles that were not considered by Racher.

Social Work

Community psychology also shares similarities with social work, yet community psychology involves both research and action, while social work is more focused on action (Levine et al., 2005). Hardina (2004) described ethical practice in community organizations, a type of social work, to be very similar to that approached by community psychologists, including an emphasis on social change, concern for the social and economic conditions,

promoting self-determination and collaboration, and the inclusion of community members in the organizing team.

The National Association of Social Workers (NASW) has developed a *Code of Ethics* in 1996, which has been last revised in 2017 (NASW, 2017). This widely used code in social work comprises ethical principles that are based on the values of service, social justice, dignity and worth of the person, importance of human relationships, integrity, and competence. The corresponding ethical principles for social workers are helping people in need and addressing social problems, challenging injustice, respecting the inherent dignity and worth of people, recognizing the importance of human relationships, behaving in a trustworthy manner, and practicing within areas of competence, respectively (NASW, 2017). These values are also emphasized by community psychologists and psychological codes of ethics, under the values and principles of prevention and promotion, social change, social justice, respect for people's rights and dignity, collaboration, ecology, integrity, and competence.

Hardina (2004) has criticized the NASW code for lacking to address some ethical challenges in practice, some of which are still missing in the most recent revision and would be relevant to community psychologists as well. For instance, social workers tend to involve members of the community in program planning and implementation in order to ensure cultural competence. In this situation, community members, who become social workers in the program, may encounter a conflict of interest if the program is implementing a solution that could cause harm to some community members. For example, the program may advocate for boycotting a local business that harms the environment, while the social worker's cousin is an employee in that business. Moreover, social workers need to develop an engaging relationship of trust and understanding with members of the community, which makes it difficult to keep boundaries in order to avoid exploitative or harmful relationships. Social workers may also encounter situations involving conflicting values, such as having a solution for social justice or self-determination that may cause harm. Unfortunately, such ethical dilemmas are not addressed in the NASW *Code of Ethics* (Hardina, 2004).

Community Development

In addition to the fields of public health and social work, the field of community development also presents guidance for ethical practice. The Australian Community Workers Association (ACWA) for community development has a *Code of Ethics* that emphasizes promoting the human potential and well-being of all individuals. The principles comprise broad statements, which highlight the principles of beneficence, respect for diversity, social

justice, inclusion, self-determination, and human dignity, which have also been suggested by community psychologists. Following the principles is a list of responsibilities towards clients, colleagues, employers, and the profession of community development. Some of the important responsibilities are concentrated around confidentiality, accountability, and respect, in addition to professional conduct, professional development, and promoting the profession (ACWA, 2017).

Evaluation

Community psychologists often evaluate programs as part of their practice, and hence, have been reaching out to codes of ethics of evaluators. Morris (2015a) discussed the relevance of evaluation ethics to the practice of community psychology, highlighting the ethical responsibility of public welfare as an example. The American Evaluation Association's (AEA) *Guiding Principles for Evaluators* emphasizes collaboration with clients, obtaining appropriate consent, practicing with competence, maintaining integrity and honesty, respecting people's security and dignity, ensuring beneficence and non-maleficence, fostering social equity when feasible, respecting diversity, and maintaining public welfare (AEA, 2004). Thus, the field of evaluation shares many main principles with those important to community psychologists; however, the most important principles and values are not discussed or emphasized enough, including social justice, empowerment, ecology, sense of community, and empirical grounding.

Nevertheless, the AEA's *Guiding Principles* presents a discussion of "justice" that is more relevant to community psychology and practice than that of the APA's ethics code, as it emphasizes the responsibility of promoting the public good (Campbell, 2016). In regard to the effectiveness of the AEA's guiding principles, numerous literatures discuss the ethical challenges encountered in the field of evaluation (Morris, 2015b; Morris & Clark, 2013; Morris & Cohn, 1993; Newman & Brown, 1992). Among some of the prevalent ethical dilemmas that evaluators face that are also relevant to community psychologists are realizing that a plan is flawed, finding complexity in identifying stakeholders, neglecting legitimate stakeholders in the planning process, finding challenges in obtaining appropriate consent, encountering conflicts of interest, dealing with conflicting values, having insufficient time and resources, discovering illegal or unethical behavior, intentionally misusing or not using evaluation results, and misinterpreting results (Morris, 2015b).

Ethical Guidance in Arab Community Practice

Literature on ethical guidance for community practice in the Arab world is quite limited. Two articles have been found on ethics in social work, which seems to be the

discipline with the largest body of literature in the region. Albrithen and Briskman (2015) examined the awareness of social workers in Saudi Arabia about ethics in practice and whether a code of ethics would be useful for the social work profession in the country. Saudi Arabia is not unfamiliar with professional ethics, as the field of medicine has had an ethics code enforced upon physicians. However, Saudi Arabia is not a member of any international association for social workers and has not developed a code of ethics for this discipline. Moreover, research on social work ethics in Saudi Arabia is quite scarce and hence, the authors pointed out the importance of further research to have more accurate conclusions. Nevertheless, it was found that most social workers had awareness of international ethical codes and ethics in social work, yet application of ethical standards was minimal.

Moreover, in a study by Al Gharaibeh (2012), social workers have reported their concerns about the formulation of a code of ethics for the discipline in Jordan. From among the obstacles reported were the lack of public awareness about the importance of the role of a social worker, the difficulty to maintain confidentiality and privacy due to the inability of being independent in the working environment, the enforcement of poor policies by institutions, the fact that decisions are controlled by leaders who are distant from the field of social work, the distinction between the learned values and concepts obtained by social workers in contrast with social constraints, customs and traditions, and the lack of research on ethics in social work. Accordingly, the author calls for more research on social work ethics, the development of a training guide on ethics for Arab social workers, the obligation of social workers to register in a professional association in order to acquire licensure, the inclusion of ethics in undergraduate and graduate curriculums, and the selection of students who already have ethical conduct for admission into social work programs (Al Gharaibeh, 2012).

Ethical Considerations in Community Interventions

Community psychologists believe that a lot of work is needed for developing ethical principles and standards for community psychology. Campbell (2016) discussed a number of useful recommendations, including revising and advocating for the applicability of the APA code of ethics to the field of community psychology, bringing together ideas from codes of ethics of similar disciplines, contributing more literature on ethical challenges in community psychology, conducting research on ethics in general, reviewing processes of developing ethics codes for other disciplines, and studying ethics in community psychology using empirical research. Therefore, this section examines unique ethical considerations in community interventions that need to be addressed in an appropriate ethics code for

community practice disciplines, including community psychology. These include considerations for competence, informed consent, confidentiality, power imbalances, conflict of interest, conflicting values and more.

Competence

In order to maximize benefit, avoid harmful outcomes, and practice according to the highest ethical standards possible, a community practitioner should acquire certain professional competencies. Through education, the general principles and conceptual tools are acquired, in addition to the practical experience obtained through training and experience. Additionally, community practitioners should be aware of the required competencies for every new intervention and be able to recognize the needed, specific competencies to acquire them before proceeding (Morris, 2015a).

In particular, community psychologists and other practitioners should be culturally competent, being highly aware of the context, beliefs and culture of the target community (Morris, 2015a). As highlighted by Trickett (1998), “Lack of understanding of the culture of the community where interventions occur is not only seen by citizens as a sign of disrespect, it is itself a risk factor for failure of the intervention program” (pp. 325). For example, in some communities, monetary compensations may place the beneficiaries at risk rather than result in a beneficial return on them. Participants who receive any amount of money in a violent community may be attacked during an act of robbery. Female participants may also be assaulted by their husbands to take the money (Nama & Swartz, 2002). Hence, being aware of the culture of a community promotes respect and avoids harm that may affect community members. Moreover, cultural relativism is important, by which the practitioner remains respectful of cultural actions, beliefs, or traits, and avoids judgment. Nonetheless, absolute cultural relativism may drive the practitioner into an ethical dilemma of conflicting values if he/she only abides to the cultural rules of the community, without also being attentive of all the values and principles of community psychology (Davidson, 1989).

In addition to learning about culture, it is important to be aware of the context of the intervention within that culture. An intervention with school teachers would have different circumstances and needs than that in a hospital, for example. Trickett (1998) referred to this dilemma as “decontextualized knowledge,” where interventionists generalize research findings and blindly implement programs that have succeeded in one community in another community that has a different set of values and context. Accordingly, the author recommends the use of collaboration and empirical research to present evidence for the relevance of concepts and programs in the target community.

Ambiguity and Conflict Regarding Who is the “Client”

Unlike other psychology specializations in which the client is usually one individual, the client in community interventions tends to consist of multiple groups such as the funder, organization leadership, organization staff, and beneficiaries of the organization’s services. As learned from existing ethics codes for psychologists, a psychologist should strive towards the best interest of the client, but when working with communities, which client’s interests should be served (Racher, 2007; Roos et al., 2007)? O’Neill (1989) presented a vignette that he refers to as “responsible to whom,” which reflects this question. In this situation, the practitioner is accountable to several groups of people, or clients, in an intervention and falls into the dilemma of choosing whom to support during an issue. For example, the vignette demonstrated a choice between protecting the confidentiality of the organization or keeping integrity before the funder. Several possible solutions are discussed by O’Neill, including doing what the client wants, serving the interests of the most vulnerable group, deciding on the most important value within the conflict and critically examining the context of the situation. However, each of these solutions has its own challenges, such as indicating who the *client* is in the first place, whether to include vulnerable groups that are indirectly affected by the intervention, and what factors to consider when prioritizing values and principles. O’Neill also suggested that the practitioner should act to reconcile between the different groups that had come to conflict with each other, by encouraging an open relationship between them. Davidson (1989), however, criticizes this mode of action, seeing it as removing the practitioner from the conflict, which in turn, would not solve the problem.

Use of Research and Empirical Grounding

Emphasizing the importance of research and scientific basis when planning and implementing community interventions is highly important to avoid harm. Despite using empirical grounding to plan an intervention, community psychologists sometimes focus on research to prove the existence of a need in a community and fail to use science as evidence for the effectiveness of an intervention itself. Moreover, lack of scientific evidence may also lead to dangerous outcomes due to the uncertainty of the implications of an action or suggestion. This ethical challenge exists more often among community practitioners, since community psychologists are educated and trained to constantly use research and evidence in every step of an intervention.

Entering Communities

Before entering a community, the community practitioner needs to identify the political context of a community and how it functions, particularly exploring who the

decision makers, stakeholders and gatekeepers are. This is a task that is unique to community work that may not be of consideration in individual psychology interventions. The community practitioner may find it effective to enter the community through its leaders, in order to avoid causing sensitive issues and being rejected as a result. Leaders have the ability to influence their communities, and hence, if the practitioner manages to gain the trust of the leader, this trust may be passed on to community members. The opposite may also occur if the practitioner bypasses the leader, which may be disrespectful from the perspective of both the leader and the community members. Nevertheless, community members must eventually be reached in order to allow their participation and empower them to develop their own solutions (Roos et al., 2007).

A possible way to facilitate entry into a community would be recruiting a community member on the intervention team. The community member would already be trusted and well-known in the community and would be able to educate the rest of the team about the culture and context to be served. It would be important, however, to avoid dilemmas resulting from the multiple role of that member, both as a community member and an interventionist. For example, in a community-based controlled trial in South Africa, a community member facilitated entry into the community by introducing the project to the community and becoming highly involved in the intervention plan. Later, for the sake of confidentiality, the member's role was changed to be an assessor in order to prevent her from knowing the intervention status of the beneficiaries, who are also members in her community (Nama & Swartz, 2002).

Another important issue is that community practitioners should be cautious about acting as the expert in the intervention. The intervention is a partnership between the practitioner and the community, in which both parties use their knowledge and own expertise in finding solutions for the needs of the community. The community practitioner uses his/her expertise with the use of tools to support a community, while the community uses its knowledge of its own context, culture, beliefs, strengths and needs, among others.

Community Expectations

Similar to other areas in psychology, community psychologists should be aware of the community members' expectations from the beginning of an intervention, in order to avoid disappointment or exploitation. In order to learn about the community and gain their trust as a stranger, the community psychologist or practitioner must develop a close, informal relationship with the community members, unlike some mainstream psychologists, who are encouraged to build rapport while maintaining a distant and professional relationship with the

client (Roos et al., 2007). This creates an ethical challenge, as community members build a relationship of trust with the community psychologist or practitioner and expect more than the practitioner's capabilities. Moreover, community members may feel exploited if they do not benefit during research or after a needs assessment that results in unfeasible solutions. This is also a result of community expectations, as community members feel hopeful when they find people trying to help, and then disappointed if they do not receive the support that they imagined. Another example is when community members expect the provision of a service from all the intervention staff, as a result of being unaware of the different roles in the project (Nama & Swartz, 2002). Orienting the beneficiaries about the intervention team and services would be useful, whenever possible.

Informed Consent

Unlike psychotherapy, which usually requires informed consent of a single or a clearly identified group of individuals at the beginning of the treatment process, community interventions and research processes involve large, complicated communities and the process commonly changes as new needs, new people and new information appear. Moreover, community members who are indirectly affected by the intervention have not given any consent to influence their lives, even if it were to be a positive influence. It also often occurs that interventions may be thought to be welcomed into a community due to the consent of the majority of people, yet that results in an intervention that impacts a minority who actually rejected the intervention (Pope, 1990). Hence, the community psychologist or practitioner needs to be aware of all the people involved in the intervention or research process, which is quite a challenge, including those affected indirectly, as well as vulnerable groups. Moreover, the practitioner should be careful to acquire informed consent from community members that may join in the middle, as well as renegotiate consent regularly as adjustments are made to the process (Roos et al., 2007). Nonetheless, Schwartz and Hage (2009) argue that the power imbalance between community members and the community practitioner could also affect the participant's decisions to give their autonomous consent.

Another interesting argument is whether it is ethical to propose interventions in a community in the first place, since merely offering an idea may change an individual's life and ideology. Pope (1990) argues that "some methods must be developed for ensuring that the individual's right 'to be left alone' is given due weight" (pp. 60). For example, it is sometimes observed that women who are believed to be oppressed were happier in their lives before they heard about the "rights" that are claimed to enhance their lives. In some patriarchal communities, girls are commonly raised to be housewives with no intention in

having paid jobs, for example. Many of them enjoy this kind of life, until they learn that they have the “right” to be independent and make their own choices. This may cause struggles in their marital relationships and may leave a woman in despair, simply due to the *knowledge* of her unattainable rights. Despite the belief that every woman has a right to make her own choices, prioritizing independence over marriage, for example, may not be the best choice for every woman within the context in which she is meant to reside.

Confidentiality

Confidentiality within community interventions is much more complicated than in mainstream psychology, mainly due to the multiple people and groups that are involved in community action. Community interventions involve a large number of people who know each other well, especially in collectivist cultures. Since many people are involved in community interventions, unlike individual psychotherapy, for example, shared information is under a greater risk of being exposed as more people could violate confidentiality. Hence, where sensitive information is collected about individuals in the community, whose members may be at risk of depression, abuse, or other factors, community practitioners struggle to keep all the information confidential within such a complex context (Racher, 2007). Pope (1990) recommended several procedures to avoid breaching confidentiality in prevention programs. He suggested identifying the type of information that should remain confidential early on in the program plan, as well as any possible existing laws that may govern confidentiality. Moreover, everyone involved in the program should be oriented to the concept of confidentiality and to which information is or is not confidential. It is also recommended to develop procedures for protecting confidential documents, as well as avoiding accidental disclosure of confidential information.

Power Imbalances in Community Interventions

In a discussion of power and ethics by Serrano-García (1994), the power acquired by the community psychologist in the relationship with the client is thoroughly examined. The author argued that the values of psychologists, including beneficence, respect, privacy, and justice, have contradictions and create a power imbalance in the professional-client relationship. For example, where community psychologists collaborate with both the community members and government agencies with the purpose of empowering the community, community members may benefit from being informed about obtained information from government agencies. The community psychologist here encounters a dilemma of conflicting values, where he/she must decide whether to breach the agreement of confidentiality with the government agencies for the sake of empowering the community

members. In addition to the ethical dilemma, the situation creates a power imbalance between the community members and the psychologist, who holds important information from the beneficiaries.

In a previous professional experience reported by a fellow community psychologist, an international organization collaborated with the Egyptian Ministry of Education to implement prevention programs for sexual and gender-based violence in schools. After a few incidents of sexual assaults in some of the targeted schools, the organization decided to sign contracts with the schools stating that at the occurrence of any future incident of sexual abuse in the school, the organization will terminate the project with them. This posed a threat to the schools because they have been ordered by authorities in the ministry to participate with the organization's programs. This situation showed ethical dilemmas related to an imbalance of power. First, the schools were forced to participate in a community intervention without their participation or autonomy in making this decision. Second, the organization used its power to threaten the school about the project termination, which would certainly place the school in a problematic situation with the Ministry. As a result of such encounters of ethical violations, Serrano-García (1994) suggests depowering psychologists by revising their professional morality, with the participation of the clients themselves in accordance to the value of empowerment in community psychology.

Participation, Collaboration and Power Distribution

According to the community psychology approach, interventions should be designed for the best interest of the community through a participatory approach that empowers its members to fulfill its own needs. One of the conflicts that often occurs is when a community psychologist or practitioner anticipates the needs of a community, while the community itself could have different problems or more critical needs than those expected. Hence, consulting the community about its needs and expected solutions is a must (Roos et al., 2007). Moreover, a community psychologist should always remain mindful during an intervention, being open to feedback and acknowledging when an intervention is no longer beneficial for the community or was not designed according to the best interest of the community. "An ethical attitude would always value the rights and freedom of a community and its members above the value of the intervention" (Roos et al., 2007, pp. 400).

Several tasks could assist the community practitioner or psychologist to accomplish this ethical attitude. There should be a constant feedback loop throughout the intervention, possibly using formative evaluation, especially since new needs and new information commonly emerge. However, evaluations would be ineffective without being able to

appreciate feedback and listen mindfully to the needs of the community, such that the voices of the community members rise above the assumptions and needs of the interventionist or the funder. Constantly questioning one's assumptions would also be helpful to accomplish a critical mind. Moreover, if the community psychologist or practitioner keeps focusing on the primary goal of the intervention, which should be community participation and empowerment, ethical conduct will be attained (Roos et al., 2007).

It can be argued that planning interventions based on community needs is a significant challenge for community organizations, because funds are obtained based on the initial needs' assessment and an agreed intervention plan that cannot be easily adjusted to meet arising needs. Consequently, community practitioners may become unaware of their ethical duty to remain mindful to the needs of the community and tend to consider newly arising needs to be outside the scope of the project. Moreover, some organizations receive intervention plans from funders that are not even based on assessing the needs of the community, yet organizations are expected to implement these plans as they are.

Moreover, community psychologists collaborate with community members to co-create a solution for the best interest of the community. Despite seeking support from community leaders to facilitate entry into the community, interventionists should eventually encourage collaboration with and the participation of all participants equally. This could be a challenge in communities where certain groups or individuals dominate the situation, which is commonly the case. The community psychologist or practitioner should be well-trained to intelligently give space to the less-dominant and vulnerable members in the community to express themselves and become empowered, while maintaining a respectful behavior towards those who are dominating. After all, one of the major values advocated for by community psychologists is social justice.

Conflict of Interest

Situations sometimes occur when the community practitioner's personal interests interfere with the purpose of the intervention. Hence, it is very important to be aware of the possible conflicts of interest that may occur when serving a community (Racher, 2007). An example of this conflict is when a psychologist is expected to evaluate the performance of a close friend in the community for an intervention program. In this case, the psychologist needs to avoid any bias or refuse to be part of the evaluation process in order to remain ethical (Morris, 2015a). Research processes also sometimes serve the interests of the researcher rather than the community. For example, a community psychologist may be merely interested in studying the context of a community, leaving the community without any

returns. Another example may be assessing the needs of a community, but then, realizing that the needed solutions cannot be provided (Roos et al., 2007). In both situations, the community psychologist instills hope among community members, who later feel exploited. Such situations also negatively impact the integrity of the profession. Hence, it is important to be clear from the beginning about the purpose of the research process, or that solutions are not guaranteed, in the case of assessing needs.

Conflicting Values or Principles

Another ethical challenge is in situations where values and/or principles conflict with each other (Racher, 2007). One example of this dilemma is a situation when community members choose to advocate for a cause and must confront oppressive authorities. In this case, there is a conflict between the ethical principles of empowerment and beneficence and non-maleficence (APA, 2017). The practitioner needs to decide whether to proceed with empowering the community members to make their own choices or discuss the risks in order to protect the community from any harm. Another conflicting situation is when the values of the psychologist or practitioner and the community members conflict with each other during an intervention. For example, participants in an intervention may reject community members who have different beliefs. In this situation, there is tension between the opinion of the community members (respect for diversity) and the community psychologist's commitment to inclusion (Morris, 2015a).

Moreover, the values of community practitioners may conflict with the values in the community, where the practitioner must sometimes choose between respect for cultural diversity and other values, such as prevention and non-maleficence. For example, in a community intervention that was conducted in South Africa to support underprivileged mothers and infants in a community who had strong beliefs in witchcraft, a pregnant female participant refused to believe that she was pregnant and believed that she had evil spirits in her stomach. This was a dilemma because the practitioners had to choose whether to respect the woman's cultural beliefs or diagnose her with mental psychosis and refer her to a mental practitioner to prevent harm, since the woman needed to be prepared to give birth and become a mother. Another scenario that occurred during the intervention was when a woman reported that her little girl's paternal grandmother engages the child in witchcraft and has convinced her granddaughter to fly naked at night, resulting in the disappearance of the child for three days. The girl turned out to be under her grandmother's bed, where a snake laid next to her. In such situations, the community practitioners must either take action to protect the child or remain respectful of the community's belief in witchcraft (Nama & Swartz, 2002). It

may be obvious to the reader that safety would be at a higher priority than respect for cultural diversity, yet it could be a complex dilemma for the practitioner.

As suggested by Morris (2015a), when community psychologists encounter conflicts between values and/or principles, they must decide which values are higher in priority in the situation. In order to facilitate decision-making during ethical dilemmas that involve conflicting values, the Canadian Psychological Association (CPA) ordered the ethical principles in its code of ethics by importance. Hence, when a psychologist is encountered with a situation involving conflicting principles, the principle that is ranked first would be given priority (CPA, 2017). This is a useful technique that could be used when developing a code of ethics for community psychologists and other practitioners, such that values and principles are rank-ordered.

Scarcity of Resources

Any intervention has a limited set of resources, as provided by the funder. Logic models are designed based on the resources available, and hence, are capable of serving a limited number of beneficiaries. As a result, a number of community members, which are sometimes abundant, are deprived from the services of the intervention or are forced to wait for available space. Apparently, waiting time puts community members at risk, especially if the need is related to health issues. In order to resolve this dilemma during an intervention in South Africa, the team decided to join an existing community health project and cover a larger number of members in the community (Nama & Swartz, 2002). However, such a solution may not always be an option.

Exiting Communities

Like mainstream psychology, termination in community psychology must ensure that the clients are ready for the psychologist to exit the community and that they will not be disappointed or negatively affected. Community members may not be fully empowered yet or new needs may emerge and remain unaddressed (Roos et al., 2007). This is a challenge because the community psychologist or practitioner may not have the capacity to address all the needs of a community. Moreover, community organizations tend to receive funds according to an initial needs assessment that is planned over a limited time period. The funds are sometimes consumed, or the time period may end before fulfilling the purpose of the intervention and addressing all the needs of the community. Therefore, community practitioners should make accurate plans, prioritize activities that fulfill empowerment and build capacities, and prepare the community for the termination of the project ahead of time.

Aim of the Study

Despite the existence of globally influential ethics codes for psychologists around the world, such as those of the APA and CPA, the discipline of community psychology does not have a code of ethics to guide conduct in situations that are unique to the profession. As evident from the literature, there are numerous unaddressed ethical dilemmas encountered in the field. Moreover, psychological ethics codes have been developed with a focus on the individual, rather than on community contexts. As a result, community psychologists have depended on the codes of ethics of other similar disciplines, such as the disciplines of evaluation, social work, and community development. Nevertheless, the codes of these disciplines have been criticized themselves for neglecting specific problematic situations in practice, as previously discussed.

Moreover, although sharing some similarities with the field of community psychology, not one of the codes of these fields on its own comprehensively covers all the characteristics and principles of the discipline of community psychology. Some community organizations have also been developing codes of conduct for their organizations based on Western or international codes and declarations, without enough contextual adaptation. International community organizations in Arab countries, most of which are Western, also tend to use their original codes of conduct, as developed for Western cultures. As evident, Western ideologies and concepts have been influencing ethical conduct in the region.

As discussed earlier, several community psychologists have argued that developing a code of ethics for the discipline is challenging due to its complicated nature. However, other complicated fields, such as the fields of evaluation and social work, have managed to develop codes of ethics of their own. Despite the complexity of acquiring the possible ethical dilemmas encountered in a field of practice, some ethical guidance, even if minimal, would be a starting point to the gradual development of a comprehensive code of ethics, as more and more ethical dilemmas are explored. Additionally, Campbell (2016) claimed that one of the reasons that community psychologists do not have a code of ethics yet is that the nature of the field of community psychology defies inflexible systems. Nevertheless, ethical values and principles are broad and aspirational, and therefore, having at least ethical values and principles would not impede the flexibility of the discipline.

Therefore, there is a need for culturally relevant ethical guidance that is relevant to both community psychologists and other community practitioners in the Arab world. Codes of ethics are essential for educating members of a profession, ensuring public trust in professionals, establishing integrity of the profession, and enforcing ethical conduct. There

are no existing associations that could help enforce a code of ethics in the region upon community psychologists or community practitioners. However, the existence of an ethics code would support community practitioners, including community psychologists, in knowing how to maintain their own ethical conduct, avoid unethical situations, and resolve ethical dilemmas. Moreover, once a code of ethics is established in the future, it can reassure community members of the ethical conduct of those working with them on solutions for their problems. For example, as community practitioners publicize their adherence to a code of ethics, community members will have more and more trust in community practitioners. The professions of community psychology and community practice would, hence, become more respectful and prominent amongst Arab societies.

This thesis aims to place the first building block towards the development of a comprehensive code of ethics for community practice in the Arab world, by exploring the ethical values relevant to the region. Since the development of an ethics code is the work of large working groups and associations, requiring adequate time and collective thought from professionals, this research study does not aim to develop a full code of ethics for community psychology or community practice. However, the identification of the core values of a profession is the foundation for developing its code of ethics. Therefore, in response to the need for a culturally-relevant code of ethics for community psychology and community practice in the Arab world, this thesis aims to develop a list of the values that are important to consider when working with Arab communities in the Arab world.

The objectives of this thesis are to:

- Identify key cultural and professional values adopted by community psychologists and other community practitioners when working with communities in the Arab world.
- Assess the extent to which each value is problematic, beneficial, or irrelevant when working with communities in the Arab world.

As clarified previously, community practice comprises numerous fields, including the discipline of community psychology. Therefore, it was important to include both community psychologists who are community practitioners, and community practitioners who are *not* community psychologists, such as public health specialists and NGO staff. As community psychology emerges in the Arab world, it is starting to impact the ideologies of community organizations in the area. Community psychologists are introducing new ideas into community organizations in the region and may influence the community practice landscape

by occupying leading positions or sharing their approaches and methods. Therefore, the perspectives of both community psychologists and other practitioners practicing in the Arab world were essential for this study, in order to take account of all involved points of view in the field.

In this study, community psychologists and practitioners in the Arab region shared their observations regarding the relevance and impact of values on their work. This includes values that are prevalent in Arab society, values that are the core of community psychology practice, and values that are common to well-known professional codes of psychological ethics. Consequently, the collected results will be shared with other professionals to inform further studies through which ethical principles, standards, and vignettes could be developed from the resulting values to create a comprehensive code of ethics.

Chapter 2

Methods

With the aim of identifying the essential values for a future code of ethics for community psychologists and other community practitioners in the Arab world, this research study used mixed methods to collect both qualitative and quantitative data. An interview was conducted with community psychologists and other practitioners in the Arab world, in order to collect in-depth information on the values needed for Arab community work. In parallel, a questionnaire was distributed to another sample of community psychologists and other practitioners, for quantitatively assessing the importance and impact of a list of specified values on Arab community work. This questionnaire provided discrete quantitative data that confirmed, refuted, and further clarified the significance of the explored values in Arab community practice.

Participants

Participants in this study comprised community psychologists and other community practitioners who have been directly working with communities in the Arab world. Participants were 18 community psychologists and community practitioners in an interview sample, and 211 community psychologists and community practitioners in a self-administered questionnaire sample. The criteria of inclusion for both samples required experience in community settings in the Arab world for at least one year during the previous three years. Participants represented a mix of genders, areas of practice and geographical locations in the Arab region. The following sub-sections will further describe the participants in the two samples.

Interview Participants

A total of 18 community psychologists and other community practitioners from the Arab world participated in the interview process. Community psychology participants had to be final-year graduate students or alumni of the two community psychology M.A. programs in the Arab world, which are in Egypt and Palestine. Final-year graduate students were included because they are expected to have been doing an internship in community work during the last year of the program. Community practice participants included professionals in a variety of fields such as social work, social and economic development, community organizing, policy analysis, community health, public administration, and nonprofit

management. Community practitioners did not necessarily need to have obtained a degree in a discipline that is related to community practice.

The interviewees were five community psychologists and 13 community practitioners, 12 were females and six were males. The participants' ages ranged from 25 to 72 years old ($M = 39.19$, $SD = 13.06$). The sample comprised one Bahraini, seven Egyptians, two Jordanians, one Lebanese, one Moroccan, one Palestinian, one Sudanese, one Syrian, two Tunisian and one French-American who had been living in Egypt for nine years. The highest degrees of education obtained by the interviewees were mostly bachelor's and master's degrees, with doctoral degrees earned by two participants. The interviewees had a wide range of years of community work experience ($M = 11.36$, $SD = 5.57$, range = 2-22), and have practiced in numerous Arab countries, including Algeria, Bahrain, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Morocco, Palestine, Qatar, Saudi Arabia, Sudan, Syria, Tunisia, UAE, and Yemen. Several participants have practiced in more than one country in the region and many participants often practiced in the same pattern of countries. Unfortunately, practitioners who practiced in Comoros, Djibouti, Oman, Mauritania, and Somalia could not be reached to participate in the interviews.

The community practitioners had been working in their own local nonprofit organizations, while community psychologists worked at local nonprofit organizations in Egypt and university-based departments that house programs aimed to develop Arab communities. The participants' areas of practice included micro-financing, capacity building, empowerment, cultural diversity, education, civic engagement, inclusion, prevention, monitoring and evaluation, information dissemination, environmental preservation, protection of heritage, health, unemployment, and blood donation. The communities targeted by the interviewees included children, orphans, youth, adolescents, elderly, women, refugees, migrants, victims of violence, people with disabilities and medical patients.

Self-Administered Questionnaire Participants

The second sample in this study is the questionnaire sample, which comprised 211 community psychologists and other practitioners. The respondents included 90 female (42.7%) and 121 male (57.3%) participants, whose ages ranged from 20 to 69 years old ($M = 32.98$, $SD = 8.18$). The distribution of the participants' years of experience doing community work ranged from one to 32 years and is positively skewed, with most participants having more than 8.68 years of experience ($M = 8.68$, $SD = 6.16$).

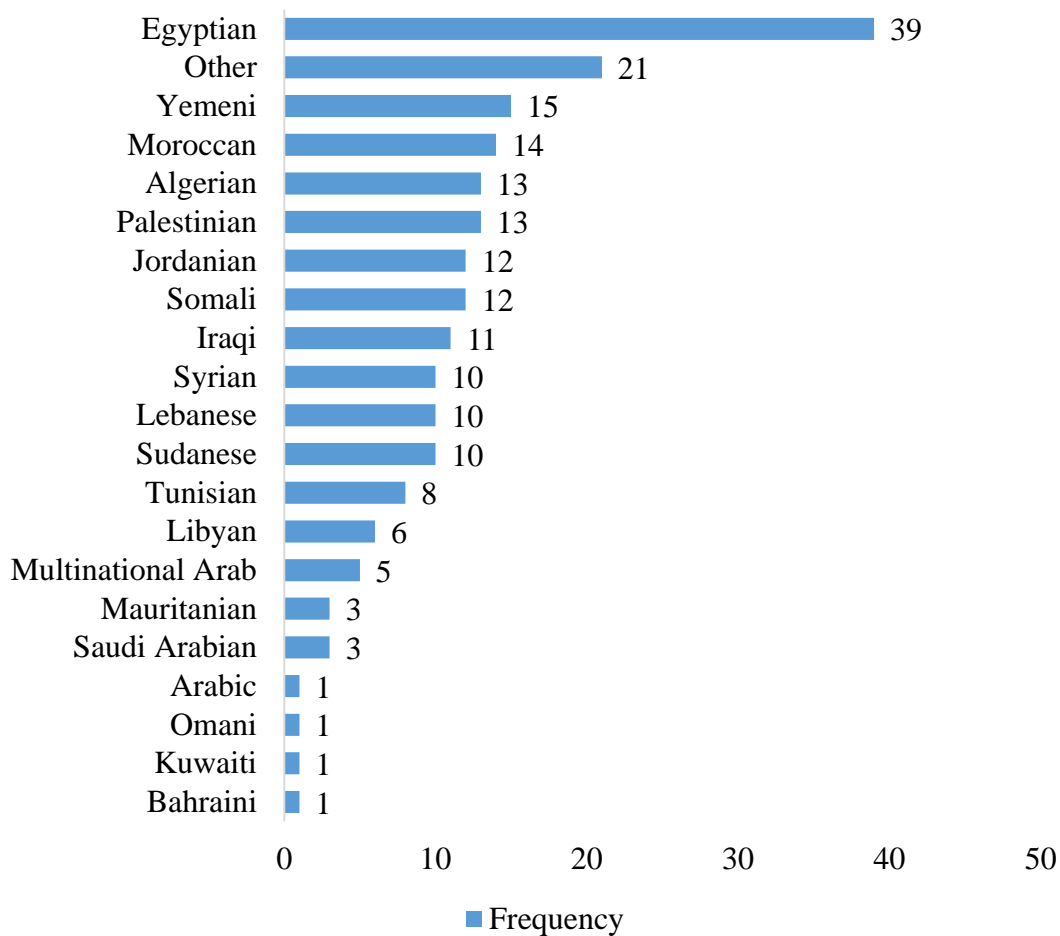


Figure 2. Nationalities of Questionnaire Participants

The nationalities of the respondents were spread all over the Arab world, as shown in Figure 2. For the sake of convenience and ability to compare Arab cultural views, the Arab countries need to be classified into groups. Regions within the Arab world have been discussed in literature based on economic and cultural commonalities. Scholars commonly classified the countries of Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, and the United Arab Emirates (UAE) together as the Gulf Cooperation Council countries or the Gulf States. Algeria, Libya, Morocco, and Tunisia are typically referred to as the Maghreb countries. Additionally, Iraq, Jordan, Lebanon, Palestine, and Syria tend to be classified as the Levant countries, or the Fertile Crescent, while sometimes also including Egypt in this group. Yemen, Djibouti, Comoros, Somalia, Sudan, and Mauritania have been grouped together in literature as the Southern Arab Region (Harb, 2016; Kuncic, 2016).

Therefore, in this study the four Arab regions were defined as the Gulf (Bahrain, Kuwait, Oman, Qatar, Saudi Arabia, UAE), the Maghreb (Algeria, Libya, Morocco, Tunisia),

the Fertile Crescent (Iraq, Jordan, Lebanon, Palestine, Syria, Egypt), and the Southern Arab Region (Yemen, Djibouti, Comoros, Somalia, Sudan, Mauritania). Accordingly, the proportion of nationalities of the questionnaire participants have been classified and demonstrated in Figure 3.

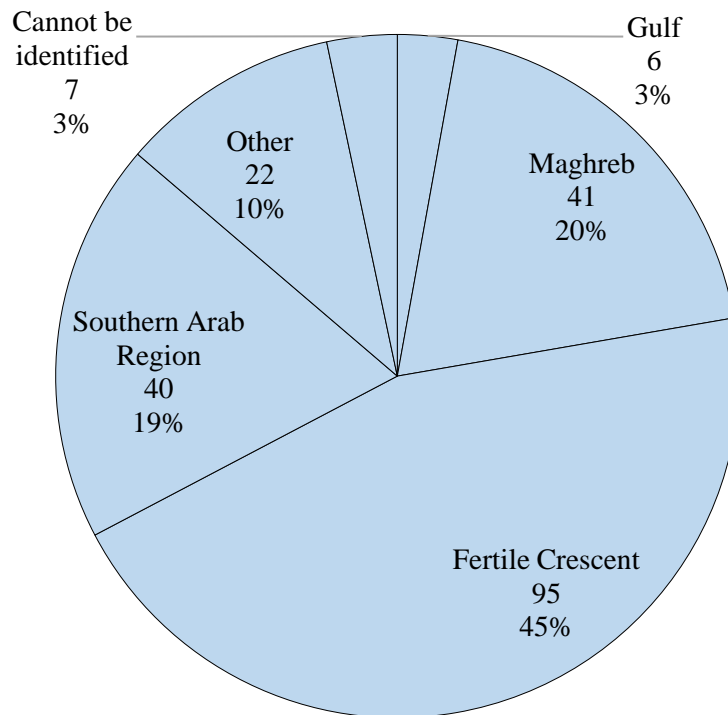


Figure 3. Nationalities of Questionnaire Participants – by Region (n = 211)

Despite including a question about pursuing or obtaining a community psychology degree, the response rate of community psychologists could not be reliably identified from the demographic data, since several responses to this question seemed inconsistent with the highest degree of education and geographical location identified. For example, a Yemeni participant who is currently working in an organization in Yemen and has a bachelor’s degree in Journalism claimed to be pursuing a community psychology degree, yet the questionnaire was sent to community psychologists from the programs in Egypt and Palestine only. As a result, the number of participants who identified themselves as pursuing or have obtained a degree in community psychology is questionable. Nevertheless, 48 participants (22.7%) had a doctorate, master’s, or bachelor’s degree in a community practice discipline, including public health, social work, human rights, community development, community organizing and leadership, gender issues, health policy and management, international development,

international relations, human development, and non-governmental organization management, among others. The remaining 163 respondents were specialized in business ($n = 56, 26.5\%$), applied and natural sciences ($n = 43, 20.4\%$), social sciences ($n = 41, 19.4\%$), humanities ($n = 15, 7.1\%$), journalism ($n = 3, 1.4\%$) and other disciplines ($n = 5, 2.5\%$).

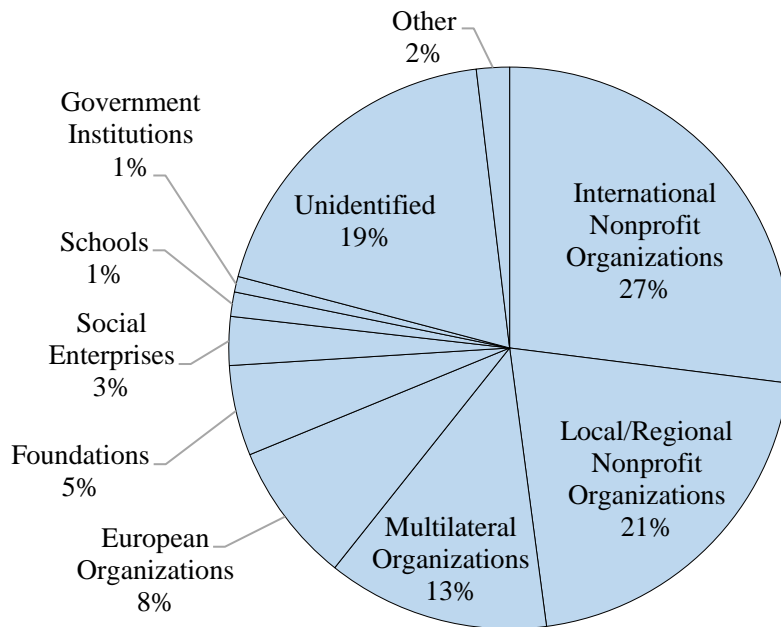


Figure 4. Types of Organizations Affiliated to Questionnaire Participants

Moreover, the questionnaire participants reported working in a variety of organizations around the Arab world, most of which are relevant to community practice. Types of organizations included international nonprofit organizations ($n = 57, 27.0\%$), local and regional nonprofit organizations ($n = 44, 20.9\%$), multilateral organizations such as United Nations divisions ($n = 27, 12.8\%$), European government organizations such as the Norwegian Refugee Council ($n = 17, 8.1\%$), foundations ($n = 11, 5.2\%$), social enterprises ($n = 6, 2.8\%$), schools ($n = 3, 1.4\%$) and government institutions ($n = 2, 0.9\%$). A total of four participants work in institutions that appear to be irrelevant to community practice, and the remaining 19% of the sample did not identify their current organization (See Figure 4). Additionally, the participants reported working on numerous societal issues, as demonstrated in Figure 5, where each participant usually indicated that they work on multiple issues.

All 22 countries of the Arab world were represented by participants as locations for their community work, keeping in mind that participants sometimes reported that they had

practiced in more than one Arab country. Nevertheless, the number of participants who had practiced in each of the Arab countries, and hence, regions, highly varied from one another, most likely reflecting the different population sizes in those countries and the varying prevalence of community practice around the Arab world. Table 12 demonstrates the frequencies of respondents who had practiced in each Arab country and region.

Table 12

Locations where Questionnaire Participants Practiced Community Work (n=211)

Region	Arab Country	Frequency	Percent
<u>Fertile Crescent</u> 123 participants 58.3%	Egypt	51	24.2%
	Jordan	30	14.2%
	Lebanon	30	14.2%
	Iraq	25	11.8%
	Palestine	21	10.0%
	Syria	17	8.1%
<u>Southern Arab</u> 55 participants 26.1%	Yemen	22	10.4%
	Sudan	21	10.0%
	Somalia	13	6.2%
	Mauritania	3	1.4%
	Djibouti	3	1.4%
	Comoros	1	0.5%
<u>Maghreb</u> 52 participants 24.6%	Morocco	20	9.5%
	Algeria	17	8.1%
	Tunisia	17	8.1%
	Libya	14	6.6%
<u>Gulf</u> 32 participants 15.2%	Saudi Arabia	11	5.2%
	UAE	11	5.2%
	Kuwait	9	4.3%
	Qatar	7	3.3%
	Bahrain	5	2.4%
	Oman	3	1.4%

Note. Participants may have practiced in more than one country.

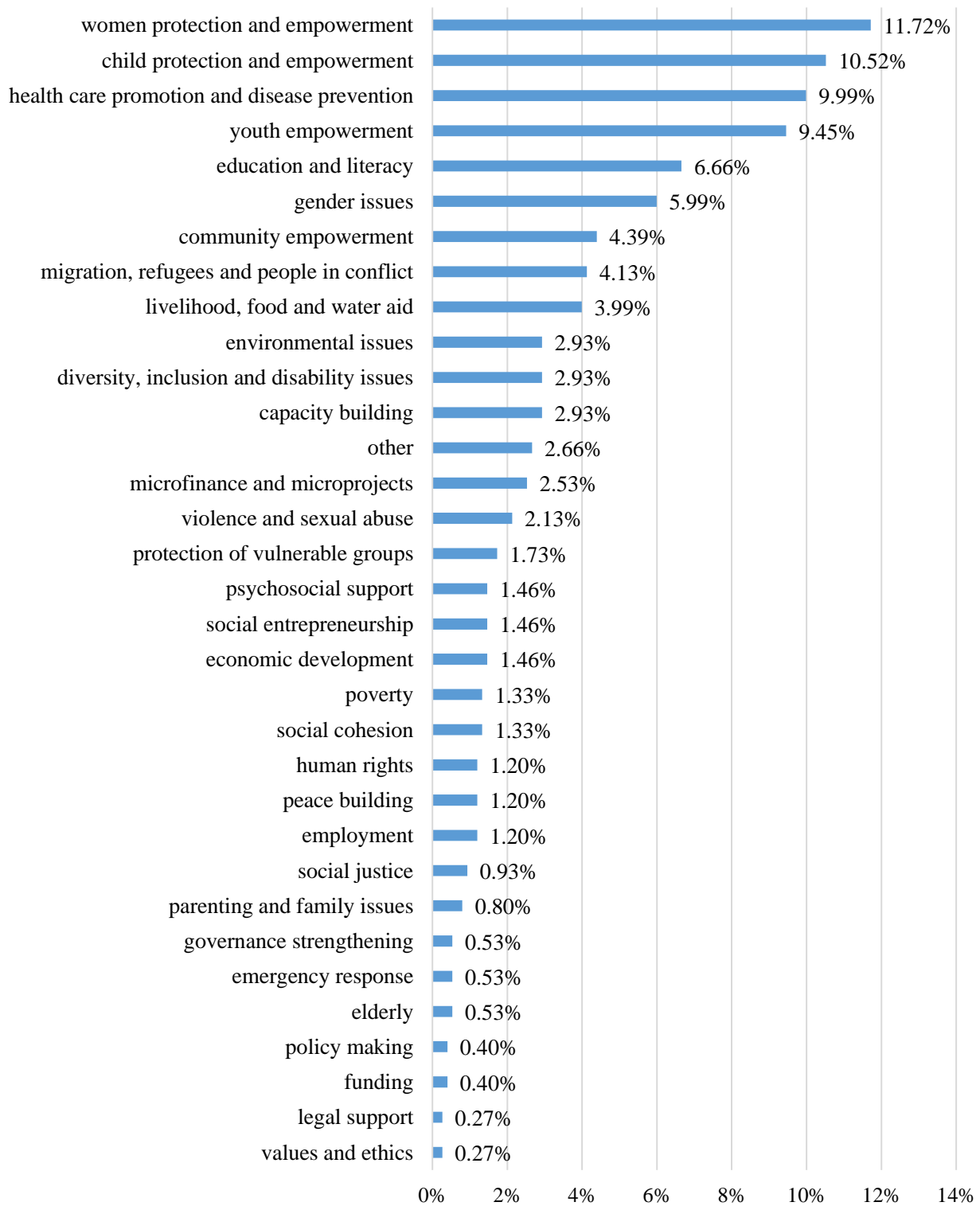


Figure 5. Societal Issues Tackled by Questionnaire Participants

Procedures

Interview Procedures

First, sampling frames of community psychologists and community practitioners in the Arab world were identified. Since there are only two community psychology Master programs in the Arab world—one at the American University in Cairo (AUC), Egypt and the other in Birzeit University, Palestine—the two schools were kindly requested to forward email invitations to their final-year graduate students and alumni to participate in this study. Five community psychologists from AUC responded with consent to be interviewed, while only one accepted to be interviewed from Birzeit University. Unfortunately, however, the community psychologist from Birzeit University was not eligible to participate, due to lack of community work experience during the past three years. Hence, the interview sample included five final-year graduate students and alumni of the community psychology M.A. program in AUC, Egypt.

Regarding the sampling frame of community practitioners in the Arab world, a comprehensive and accurate database of all community practitioners in the Arab world could not be found. However, the website of Ashoka (www.ashoka.org) had a publicly accessible and searchable database of its fellows and their projects, called the “changemaker network map.” Ashoka is a nonprofit organization aimed to support social entrepreneurs around the world to create positive change. Although Ashoka’s database may not be providing a representative sample of community practitioners in the Arab world, it is the most relevant, comprehensive, and diverse sampling frame that could be obtained, after reviewing other online databases that lacked diversity, breadth, or accessibility. Moreover, the fellows of Ashoka are community practitioners who have had relevant experience working on social issues with the community, in order to be able to develop appropriate solutions. According to Ashoka, social entrepreneurs are people who have creative ideas for resolving social, cultural, and environmental issues in a community (“Social Entrepreneurship,” 2018).

Ashoka’s database comprised 104 fellows from 11 countries in the Arab world at the time, which were Bahrain, Egypt, Jordan, Kuwait, Lebanon, Libya, Morocco, Palestine, Saudi Arabia, Tunisia, and UAE. A total of 93 fellows were found to be eligible and available to participate in the study, being community practitioners who have been working directly with the community. Therefore, contact information for all 93 fellows in the Arab countries were searched online using the participants’ names or the names of their organizations. Consequently, contact information was found for 61 Ashoka fellows, from which 13 practitioners accepted to be interviewed.

Upon obtaining the approval of the Institutional Review Board, the sample of interview participants were sent an email invitation to participate in the interview. The invitation included a link to the online informed consent forms and demographic questions, all in both English and Arabic for the convenience of the participants. Demographic questions were filled online in order to reduce the interview time. The participants also received a link to an online scheduling tool called You Can Book Me (<https://youcanbook.me/>), through which they were able to book their preferred interview time slot. Eligible interview participants who responded by filling the consent form and general questions, were interviewed through recorded online audio calls using Zoom (<https://zoom.us>) or recorded cellphone calls, depending on the stability of the Internet connection and the participant's convenience. Moreover, Free Screen Recorder was sometimes used to record the interviews.

The interview began by greeting the participant and allowing them to choose the preferred language for the interview—English or Arabic. Next, the researcher introduced the participant to the purpose of the research and reminded the participant that the interview will be recorded, as specified in the informed consent form. The participant, then, provided some input and reflection on the needed values in Arab community practice, as well as the importance and impact of Arab and Western values on community practice in the Arab world. The participant was also asked about their views on the importance of the community psychology value of empowerment when working with Arab communities, given that this value is core to the community psychology tradition but may be controversial in the Arab world. Finally, participants were asked about conflicting values that may have been encountered when working with Arab communities. The researcher constantly probed the participants to further explore their understanding and intentions for the values they suggest, by asking for clarification, examples, and their opinion on previous findings. Moreover, the participants sometimes needed time to think and reflect on their experiences before answering the interview questions, which was when moments of silent probing were useful.

After completing the interviews, transcribers were hired to simultaneously translate (from Arabic to English) and transcribe the audio-recordings of the interviews to prepare for data analysis. The transcribers were required to complete the National Institutes of Health's online research ethics training before receiving the audio-recordings of the interviews, which were edited to conceal identifying information of the interviewees and ensure confidentiality. Consequently, the whole transcripts were carefully revised and compared to the audio-recordings by the researcher to ensure accuracy.

Self-Administered Questionnaire Procedures

The questionnaire was sent to community psychologists and other community practitioners. As explained previously, the community psychology M.A. programs in AUC and Birzeit University were kindly asked to email all their final-year graduate students and alumni, inviting them to participate in this study through an interview or a 10-minute self-administered questionnaire. A total of 25 community psychologists—five from AUC and 20 from Birzeit University—agreed to receive the questionnaire. Nevertheless, the number of responses from community psychologists could not be confirmed due to the inconsistency of data, as explained previously.

Moreover, community practitioners were selected from LinkedIn, which was found to be a reasonably comprehensive database that is used by professionals in the Arab world. LinkedIn is a professional network that connects people for career-related purposes and it allows searching for people by country and industry. Hence, community practitioners for the questionnaire sample were searched for in each of the 22 Arab countries in the non-profit organization management industry, resulting in a sampling frame of community practitioners for each Arab country. Although the search algorithm in LinkedIn depends on connections between profiles, only a few participants were personally known by the researcher.

Systematic sampling was applied to every country's sampling frame, from which every third participant was individually selected and sent a LinkedIn invitation with a message to participate in the self-administered questionnaire. If the selected participant was not eligible, the next person on the list was selected, until the sample size for every Arab country was proportional to the country's population (United Nations, 2017). For every 20 million people or less in a country, 50 participants were targeted for its sample, as demonstrated in Table 13. Nevertheless, some Arab countries did not have enough community practitioners on LinkedIn, such as Comoros, resulting in smaller sample sizes for these countries. Hence, the total sample size for community practitioners who received an invitation to participate in the self-administered questionnaire was 1,479. Consequently, 650 community practitioners accepted the invitation and received a link to the online consent form and questionnaire, followed by a reminder two weeks later.

Table 13

Questionnaire Sample Sizes per Arab country in Relation to Populations

Arab Country	Population	Targeted Sample Size (50 per 20M)	Actual Sample Size	Received Questionnaires
Comoros	777,000	50	9	0
Djibouti	927,000	50	45	8
Bahrain	1,372,000	50	41	14
Qatar	2,482,000	50	50	18
Kuwait	3,936,000	50	50	16
Mauritania	4,182,000	50	50	16
Oman	4,200,000	50	28	7
Palestine	4,663,000	50	50	27
Lebanon	5,851,000	50	50	29
Libya	6,235,000	50	50	27
UAE	9,154,000	50	46	21
Jordan	9,159,000	50	50	30
Tunisia	11,274,000	50	50	26
Somalia	13,908,000	50	50	30
Syria	18,735,000	50	51	30
Yemen	26,916,000	100	100	52
Saudi Arabia	31,557,000	100	60	21
Morocco	34,803,000	100	100	44
Iraq	36,116,000	100	100	55
Sudan	38,648,000	100	99	44
Algeria	39,872,000	100	100	42
Egypt	93,778,000	250	250	93
Total		1,600	1,479	650

Note. Country population sizes were retrieved from the United Nations' 2017 World Population Prospects (United Nations, 2017).

Finally, 240 actual responses were received in total from both community psychologists and practitioners, from which 211 met the study's eligibility requirements. A total of 29 ineligible responses were excluded due to lack of community experience during the past three years, not directly working with the community, or for receiving the questionnaire through a friend rather than the researcher so they were not from the target

sample. A total of 154 participants (73.0%) responded to the English version of the questionnaire, while 57 participants (27.0%) filled the Arabic version. The questionnaire was completed online using the SmartSurvey.co.uk secure (SSL) form building website. Data was, then, downloaded, Arabic responses were translated to English and all data was recoded into numeric data. Details of the analysis will be further described in a coming section.

Materials

The qualitative interviews aimed to obtain rich data for building an informative body of research and allowed the researcher to probe the participants to generate new ideas for important values that may not be captured in existing ethics codes. The interviews also informed the development of the questionnaire tool. The questionnaire yielded quantitative data to confirm or refute the interview findings, as well as enabled expanding the sample size to determine the consensus among community practitioners regarding the importance of the different values.

Interview Guide

The core of the interview is meant to engage the participants in reflecting upon the impact of the key values that they suggest. Prior to the interview, interviewees were asked to complete an online form, in English or Arabic, comprising the informed consent form and a set of questions to provide general information (Attached in Appendices A and B). General questions include a list of demographic questions, followed by questions on professional background, including the participants' current organization, years of work experience, Arab countries where they practiced and areas of practice. This information was useful in checking the eligibility of the interviewees and contextualizing the participants' reported experiences and views on ethical values.

Consequently, the interview guide (see Appendices C and D) was used to probe the participants and stimulate their thinking about values in Arab community practice. First, the researcher explained the purpose of this research study and checked for the participants' understanding of the term "values." The participants were then asked to share their points of view on the importance of Arab and Western values in community practice, as well as how their mentioned values may be problematic or beneficial while performing duties and making ethical-decisions in community work. Moreover, the interviewer asked for the participant's opinion on the importance of the value of empowerment on Arab community work, since it is considered an important value in the field of community psychology, yet it was anticipated to be controversial among Arab communities. Next, the participants were asked to recall any

encounters of conflicting values, where they found that their professional values conflicted with values in the target community. Finally, the participants had the opportunity to share any other thoughts about ethical values in Arab community practice.

The guide was available in both English and Arabic to accommodate the participants' choice of language during the interview (See Appendices C and D). The Arabic version was translated from the English and then submitted for back translation to ensure accuracy and clarity. While the expected duration of the interview was 30 minutes, the actual average time duration was 41 minutes.

Self-Administered Questionnaire

A 10-minute self-administered online questionnaire (see Appendices E and F) was developed, aimed to assess the importance and applicability of a list of values on community practice in the Arab world. The questionnaire assessed the values and principles of community psychology and the principles stated in globally dominant codes of ethics in mainstream psychology, as discussed in the literature review.

Arab cultural values were also assessed in the self-administered questionnaire. In order to add a list of the most common cultural values in the Arab region to the questionnaire, literature on the Arab culture was examined. One must be aware that the Arab region is diverse in terms of geographical, climatic, ethnic, and social characteristics. For example, Arab people may see themselves as religious, yet one may practice religion differently (Harb, 2016). Nevertheless, Arabs commonly perceive themselves as a defined group, referring to themselves as the "Arab Nation" and valuing a collective sense of patriotism. Despite the diversity, there are basic values that are shared across Arab communities, including social and religious practices (Nydell, 2012). The Arab cultural values found in literature that were assessed in the questionnaire are religiosity, morality, honor, shame, hospitality, generosity, conservatism, collectivism, respect for elders and authority, social class and loyalty (Harb, 2016; Nassar-McMillan, Nour, & Al-Qimlass, 2016; Nydell, 2012).

Additionally, after completing a few interviews, the qualitative data was briefly analyzed to yield additional identified values that were added to the questionnaire. The values are mixed up in the questionnaire, rather than being listed by their categories to avoid bias. The values are evaluated on a five-point, bipolar scale to identify how certain values impact Arab community work, whether by being problematic, beneficial, or irrelevant in decision-making. In the scale, 1 indicates that the value is extremely problematic, 2 indicates that the value is somewhat problematic, 3 indicates that the value does not impact decision-making, 4

indicates that the value is somewhat beneficial, and 5 indicates that the value is extremely beneficial when working with Arab communities. Two open-ended questions were also added at the end of the questionnaire to allow respondents to suggest other problematic or beneficial values for Arab community practice.

The participants were emailed a link to the online questionnaire in both English and Arabic. Efforts were made to ensure that the Arabic terms most closely represented the meaning and spirit of the English terms. The online form included the informed consent, demographic questions and the list of 37 values to be assessed.

Data Analysis

Interview Data Analysis

Thematic analysis (Braun & Clarke, 2006) was used to code and analyze the qualitative data obtained from 18 interviews in total. This is a method of data analysis that aims to identify themes or patterns in qualitative data. It was chosen for its usefulness and efficiency in working with large, descriptive data. Moreover, this method is useful for exploring hidden insights and psychological interpretations (Braun & Clarke, 2006). NVivo 12, a qualitative data analysis software, was used to conduct the thematic analysis process on the collected interview data.

The theoretical approach was used to accurately code the data with a focus on the research questions, rather than coding information that was not relevant to the study aims. Each sentence in the transcript was coded to capture the participants words in a manner that could be grouped and analyzed. The codes were then merged, categorized, and recategorized numerous times to find the most prominent themes discussed by the interviewees. The themes extracted were the values recommended by the participants for community practice in the Arab world, in addition to other aspects related to Arab community practice. For the purpose of presenting the results in a structured fashion, the themes were organized into sections. Moreover, a constant comparative approach was used to analyze the interview data; for example, for each extracted theme, the participants were compared in order to relate their views to their demographic background.

Questionnaire Data Analysis

Regarding the analysis of the questionnaire, SPSS, a statistical analysis software, was used to calculate descriptive statistics for measuring the frequencies, mean and standard deviation for the demographic data and the 37 values assessed in the questionnaire. The points of the rating scale representing the extent to which the values were perceived to be

problematic versus beneficial were re-coded as -2, -1, 0, 1, and 2, in order to better align with the conceptual framework of a bipolar scale.

Bivariate statistics were used to examine the relationship of socio-demographic variables with perceived benefit of the values. An independent-samples t-test was conducted to compare gender with the ethical values, in order to detect any differences in attitudes between males and females. Age and attitudes towards ethical values were also correlated to identify whether age is related to any of the ethical values. Participants' nationalities were grouped by region (Gulf, Maghreb, Fertile Crescent and Southern Arab) and a one-way analysis of variance (ANOVA) was performed for each value listed to examine regional differences in perceived benefit of the values.

Finally, qualitative content analysis was used to examine the open-ended questions. This included participants' areas of specialization, targeted societal issues that they were working on, and additionally suggested problematic and beneficial values.

Chapter 3

Results

Interview Results

The thematic analysis of the interviews that have been conducted with five community psychologists and 13 community practitioners from the Ashoka fellowship, identified a total of 53 themes. The below sections present the themes that portray the participants' views shared in the interviews, organized conceptually into nine sections: the cultural specificity of values, cultural influences on values, challenges in Arab community practice, controversial cultural values in Arab community practice, recommended values related to social responsibility and commitment, recommended values related to professionalism and effectiveness, recommended values related to relationship-building with the community, recommended values related to valuing diversity, and recommended values related to self-determination and social justice. The 53 themes are organized conceptually, rather than by frequency of discussion, while the frequencies are indicated under each theme. Figure 6 demonstrates the nine sections under which the themes emphasized by the interviewees are organized.

Cultural Specificity of Values

This group of themes summarizes the participants' views on whether ethical values are commonly prevalent or variant from one place to another around the world. While some believed that core values exist everywhere in the world, others argued that values highly differ from one community to another. Seven participants suggested both perspectives at the same time, suggesting that some core values are universal while other, more specific values may be variant among communities.

Core values are universal. This theme encapsulates the opinion of eight participants, who suggested that basic values are the same around the world. During the interviews, the participants discussed values such as respect, honesty, transparency, integrity, hospitality, humanity, and justice as universal values that are agreed upon by the majority. As stated by one of the Egyptian community practitioners who had more than 15 years of experience,

Each one has his own characteristics, values, nature, and culture, but you talk values, I don't think you can differentiate between one nationality to the other. I mean, respecting somebody, being honest and transparent, and all those things, it doesn't have boundaries when it comes to nationalities.

These participants refused to associate values to a certain culture or region, for the reason that people value the same things around the world, but possibly in different ways. Moreover, a female Egyptian community psychologist suggested that since the same ethical dilemmas are common everywhere, then the same values are needed everywhere, giving the example of children’s rights to confidentiality.

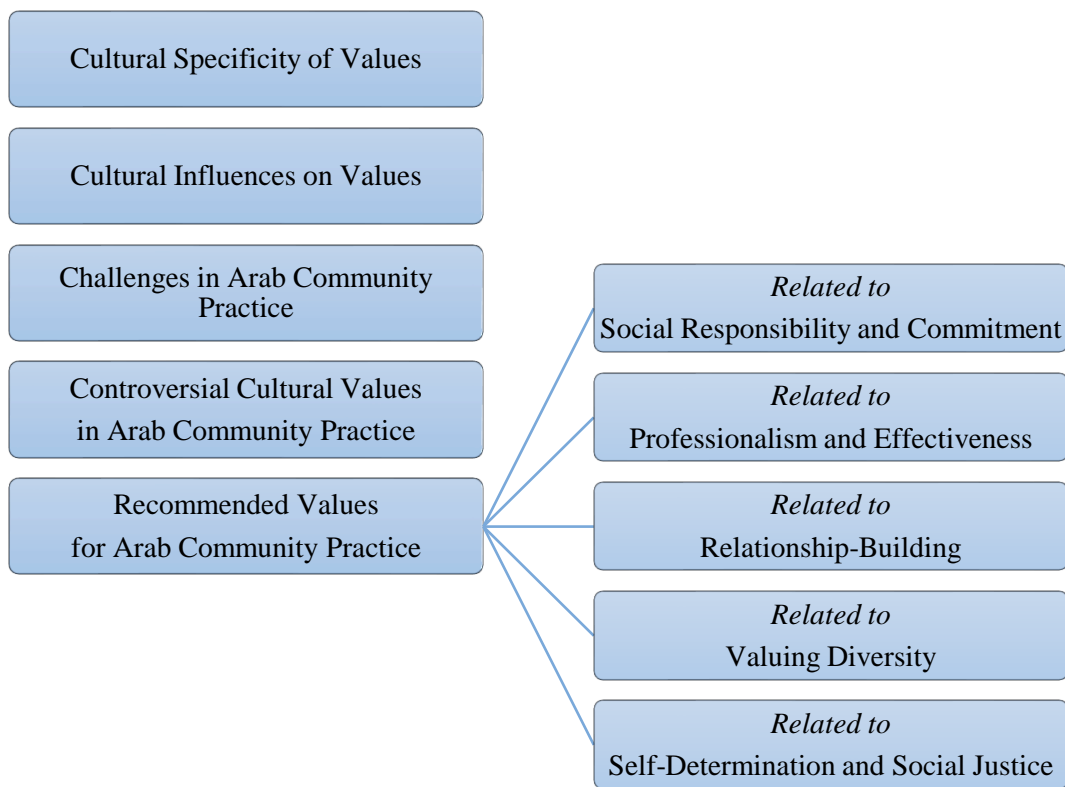


Figure 6. Nine Sections Organizing the Interview Themes

Values vary based on cultural context. Eleven community practitioners, two of whom were community psychologists, shared that values in general differ from one community to another, and not just from one country or region to another. From among the community practitioners, several found difficulty defining values that are important for community practice in the Arab world, arguing that the Arab world is highly diverse and that Arab values are vague. The participants claimed that every community and country in the Arab world has its own culture and mentality that shape its values. A participant also pointed out that values should be broad enough to prevent restrictions that may be particular to a specific culture or religion. Moreover, the interviewees discussed how a value such as honor or shame, could be applied and perceived differently in different contexts or communities. In fact, two male Ashoka fellows, who both practiced in Egypt, Jordan, Lebanon, Sudan, and the UAE, in

addition to other Arab countries, insisted that it might be impossible to find values that are common among Arab countries. They suggested that it is very difficult to have “one size fit all” and that every community needs to be addressed differently, as expressed by one the fellows:

The definition of a value is different from person to person in the Arab world, it is literally different . . . Our values are different, the definition of generosity is different, the definition of anything you would think about is totally different. We have an identity crisis, a crisis to define anything. Our identities are different, our cultures are different.

Moreover, it was implied that cultures change over time, and hence, values also change over time. Four Ashoka fellows explained how Arab values have become vague and confusing due to the variety of changes that have been occurring around the Arab world, including the effects of globalization and Western influences that have led to a loss of the Arab identity and language. As a result, several participants, none of whom were community psychologists, found it difficult to define values that they could claim to be shared among Arabs. The two community psychologists, however, were enthusiastic about defining uniform values, despite the prevalence of cultural diversity in the Arab world.

Cultural Influences on Values

The themes in this category demonstrate the participants’ opinions on the origins of values in the Arab region and the Western cultural influences on Arab community practice. Some participants argued that Arabs had strong values in the past, yet these values have deteriorated due to lack of documentation. The interviewees also discussed their point of views on the benefit and harm of Western influences on values in the Arab world, and the cultural insensitivity of Western community practice in the Arab world.

Values were originally created long ago by the Arabs. Five male Ashoka fellows from a variety of Arab countries, argued that the Arab ancestors already embraced important values long before people started documenting and preaching about ethical conduct. Arab societies in the old ages believed in humanity, patriotism, forgiveness, morals, and respect long before other societies learned about such values from the Arabs. The participants claimed that the problem is that values change over time, and that the Arabs failed to preserve their values by not documenting them. As a result, values in the Arab world deteriorated and Arab communities started learning about values through Western influences instead.

Western influences on values may be more harmful than beneficial. During the interviews, 13 participants in total discussed the impact of the West on values in the Arab

world. On the one hand, three Ashoka fellows, all of whom practiced in Jordan and the UAE, believed that exposure to Western culture and values is beneficial, mentioning the usefulness of the circulation of power, not having double standards, and the clarity and strictness of Western principles. Nevertheless, they also pointed out the importance of cultural sensitivity and avoiding harm when applying Western values in Arab countries. On the other hand, ten of the participants, four of whom are community psychologists, shared about the negative impact of Western influences on Arab values, suggesting that some Western values are too extreme for Arab communities and may harm the Arab culture and religions. Values such as empowerment, freedom, and family, were claimed to be perceived and applied differently in the West, and hence, cannot be applied among Arab communities without cultural adaptation. Moreover, the participants mentioned individualism, emotional coldness, working too much and acceptance of homosexuality as unacceptable Western values and behaviors in the Arab world.

Western community practice is culturally insensitive to Arab communities. Seven interviewees criticized Western community practice agencies in the Arab world for being culturally insensitive towards the Arab culture. The participants claimed that Western agencies are not properly aware of the Arab culture, including religion and unpunctuality, and impose solutions to Arab social problems from a Western perspective. Four of these seven participants were concerned about the issue of Western superiority, as Western practitioners assume knowing better when working with Arab communities, often imposing their culture and ideas. Moreover, one of the Ashoka fellows, who was a non-Arab living in an Arab country for nine years, raised the issue of labeling countries as nations that are developing towards the Western countries, which also portrays Western superiority. An Egyptian female pointed out that Arab people have enabled this Western superiority by adopting the foreigner complex and remaining underdeveloped. Hence, the practitioners believed that Western community practice is not culturally competent and sensitive towards Arab communities.

Challenges in Arab Community Practice

The interviewees shared several challenges encountered when conducting community work with Arab communities. The concerns that were raised included the lack of application of values, prevalence of suspicion towards community practitioners, slowness and hindrance of change, the need for government support, and the importance of occasional self-care by community practitioners.

There's a value in values. Eight participants expressed their concern regarding the application and enforcement of values in the Arab world. Participants argued that many

Arabs claim to have values but fail to implement the values they preach, due to their incapability to execute procedures and unwillingness to have values. A Jordanian male participant explained that “the problem is not in the values itself, the problem is applying these values.” The interviewees also discussed ways to enforce and encourage the implementation of values, including using community pressure to create social conformity towards ethical conduct, applying accountability policies in response to violations, keeping organizational codes of conduct up to date, officially documenting values through legislative authorities, and raising awareness about the importance and meaning of values.

Suspicion is a challenge in Arab community practice. Five interviewees who worked in various Arab countries with children, youth, and refugees, discussed the high prevalence of suspicion towards community practitioners in the Arab world. They explained that many Arabs strongly believe in the conspiracy theory, and hence, suspect that community practitioners have harmful intentions. A participant claimed that Arab people tend to be deceived easily, which gives them the right to feel suspicious towards community practitioners. Moreover, community members tend to feel skeptical towards the sources of funding of community projects, and especially if they are funded by Western agencies. A participant from Tunisia thought that the Arabs “are becoming extremely suspicious of anyone who does anything for [the] community, they always think there’s something behind—he wants to be a politician, she wants to gain something.” The participants suggested that remaining honest and consistent, allowing participation and ownership of community members in project planning, and working through trusted community partners often helps reduce suspicion issues.

Change is slow and has impediments. During the interviews, a total of 10 participants discussed how achieving change takes a long time and is often quite challenging. Participants shared that it is difficult to change people’s nature, in general, and Arab communities in particular, as they tend to resist change and feel pessimistic towards community solutions. Moreover, the participants argued that Arab communities are quite slow in responding to developmental ideas of change, which hinders the advancement of Arab countries. A participant who works on interculturalism, explained that it is important for community practitioners to be aware of such impediments and be accepting of the slowness of change.

Government support is needed for effective community practice. Five participants who practiced in Egypt, Jordan, and Lebanon, in addition to other Arab countries, suggested that the support of governments in the Arab world is needed. They argued that involvement

of Arab governments is needed for implementing long-term community solutions, as well as supporting the field of community practice by reducing the restrictive bureaucracy and enhancing the image of the community practice field in society, possibly through education. Moreover, participants suggested that governments enforce and preserve values by enforcing laws and appointing legislative authorities to document the values.

Self-care of community practitioners is important. One male and two female interviewees who currently practice in Egypt, shared their perspective about the importance of caring for oneself as a community practitioner. These participants believed that working with the community without taking a break for self-care could lead to burn-out, due to the high rates of pessimism and negativity encountered when working on social problems among Arab communities. “I go home feeling like I’ve been hit . . . unfortunately, of course, the daily lives of some communities are very depressing,” said an Egyptian community psychologist. Moreover, the interviewees pointed out that a lot of energy is required to push for change and remain committed to the cause, and hence, community practitioners tend to feel exhausted and in need of self-care.

Controversial Cultural Values in Arab Community Practice

The themes in the section portray how some values could be both beneficial and problematic at the same time. The interview participants were found to have varying opinions regarding five Arab values and their impact on Arab community practice. The five values to be examined are honor, traditionalism, religiosity, respect for the elderly and collectivism.

A value could be both beneficial and problematic. Six participants shared their point of views about the impact of values, demonstrating that a value could be both beneficial and problematic at the same time. The participants suggested that being balanced is important, since a beneficial value could be harmful sometimes. An example that was shared involved a nurse who, due to valuing chivalry and generosity, prescribed more medication than required to help a patient, causing the patient to become addicted. Moreover, participants pointed out that each value may be a two-sided weapon, depending on the perspective of an individual or community. The coming themes in this section demonstrate such controversial values in Arab community practice.

Honor. Eight interviewees discussed the impact of the values of honor and shame on Arab community practice, keeping in mind that valuing honor leads to the prevalence of shame. A female community psychologist believed that honor is a very beneficial value, explaining that when community members honor community work, they will respect the practitioner. However, the other seven participants believed that honor has its drawbacks. A

participant stated that people should not be detrimental in the name of honor, while the value of shame should be the one to avoid. An Egyptian community psychologist suggested using honor as a strength, by urging people towards solutions of social change that would protect and promote their honor. The participants described problems that result from the value of honor, including problematic decision-making that is emotionally-driven, harm resulting from concealing sensitive issues like rape and HIV/AIDS, and intolerance towards mistakes and failure. As a result, appropriate interventions are not conducted to address sensitive problems, due to concealing these issues out of fear of shame or being condemned for making mistakes. Hence, while honor could be beneficial sometimes, behaviors of shame resulting from this value are viewed to be highly problematic.

Traditionalism. During the interviews, eight participants discussed traditionalism and conservatism in the Arab world and the effects of these values on Arab community practice. A Lebanese community practitioner suggested that traditionalism could be beneficial in conserving practices and beliefs that have a positive impact on society, including the Arabic language and identity. The other seven participants raised concerns around traditionalism and conservatism in the Arab world, claiming that they cause people to avoid sensitive issues like abuse, remain in their comfort zones, avoid thinking out of the box, continue to segregate males and females, and prevent personal freedom. A participant said, “I think . . . our values are keeping us in a bubble that prevents us from seeing other people, seeing the other side of the globe.” Additionally, two Egyptian Ashoka fellows believed that companionship between men and women are needed for more efficient community practice, where collaboration may be useful, and each gender would be able to effectively reach its respective community. Nevertheless, the participants believed that conservatism in the Arab world is decreasing, due to awareness programs and the impact of the social media.

Religiosity. During the interviews, 13 participants examined the value of religiosity and its implications towards community practice in the Arab world. Several participants argued that the term “religiosity” is broad in the Arab world, as it may be defined differently from one person to another. Four interviewees, who practiced in Egypt, UAE, Lebanon, and Palestine, believed that religiosity is beneficial when working with Arab communities. Moreover, two female participants believed that religiosity only creates limitations, and six participants thought religiosity could be both beneficial and problematic in Arab community practice, depending on the situation. According to the interviewees, religiosity benefits community practice by encouraging ethical values, since ethical values are already integrated in religion. Moreover, participants suggested that it is beneficial to use religiosity in order to

encourage people to provide charity, especially on religious occasions, in addition to reaching out to community members through religious institutions, such as mosques and churches. Nevertheless, other participants suggested that religiosity should be detached from Arab community practice, since many people are misguided, are not truly righteous, use religion as an excuse, and only help or cooperate with people from the same religious group.

Respect for the elderly and authority. A total of four female participants, from Egypt and Jordan, criticized the Arab value of respect for the elderly and authority, yet only one of them also believed that respecting the elderly may sometimes be a good value in terms of behaving with respect. Arab communities were claimed to be disrespectful and disregarding of younger and weaker individuals, as well as those in more junior positions. According to the interviewees, respect for the elderly causes society to underestimate the capabilities of younger people, deprive the youth from authority opportunities and pay low salaries to capable youth. Based on the experience of the participants, younger community practitioners are also sometimes more knowledgeable and ethical than older staff members yet are not appreciated for that. Additionally, the interviewees discussed the challenges of giving too much respect for authority, while many people in power tend to become less passionate and committed to ethical values. A female Egyptian community psychologist also explained that while those in higher positions may not necessarily be as knowledgeable as others in the hierarchy, people still strongly follow their point of views and resist the opinions of less powerful individuals. Hence, the four participants who mentioned the value of respect for the elderly and authority mostly viewed it as a problematic value.

Collectivism. A total of 11 interviewees shared their point of views on the importance and challenges of collectivism in Arab community practice. Although one participant, who is an Egyptian female, claimed that Arab communities have become more individualistic, most participants viewed the Arab culture as collectivist. Eight female participants shared several benefits of collectivism, while five male and female participants believed that collectivism sometimes causes challenges in Arab community practice. Participants suggested that collectivism is beneficial in having social support networks, mobilizing a community towards positive behavior, having a sense of community, valuing family and friendship, motivating community members to speak more openly, and encouraging participation to create solutions. As stated by one of the community psychologists, “collectivism, even though it might seem that sometimes it hinders more . . . we can use it as a strength in encouraging participation . . . so people can open up more easily.” On the other hand, participants who mainly worked with adolescents and women, shared that collectivism conflicts with autonomy and privacy, since

community members tend to know everything about each other. Moreover, two participants were concerned about the fact that Arabs like to personalize all relationships, such that relatives and acquaintances are always favored in any situation. Finally, two participants, who practiced in the education field, suggested that a balance between collectivism and individualism would be best, in order to avoid the problems of collectivism, and to increase the focus on the individual and benefit from the usefulness of collective work.

Recommended Values Related to Social Responsibility and Commitment

This group of themes portrays the participants' opinions on the needed values for encouraging the mentality of social responsibility and commitment to social change among Arab practitioners and communities. Recommended values include genuine motives, passion, social responsibility, and proactivity.

Genuine motives. Nine interviewees discuss the importance of genuinely and selflessly conducting community work for the benefit of the community, and not for one's own or other parties' benefit. "To be selfless . . . to really think of the beneficiary as the only beneficiary, not to do it for your own personal gain," said an Ashoka fellow. Nevertheless, a community psychologist suggested that earning income from community practice is still acceptable. The participants shared several situations of conflict of interest that often challenge practitioners to remain committed towards the community's benefit. Some mentioned conflicts include publicizing and marketing for organizations, receiving support from a party that does not comply with the practitioner's values of practice, finding that the priorities of the workplace oppose the benefit of the community, and encountering cultural values in the target community that oppose the practitioner's personal values. Moreover, the interviewees asserted that solutions to social problems must be entirely based on the needs of the community. One Egyptian Ashoka fellow also shared his opinion about the importance of adapting community projects in response to any distractions that may change the needs of the community at a moment in time.

Passion. Six participants mentioned the importance of passion when working with Arab communities. A Syrian community practitioner who practices in numerous Arab countries explained that Arab people are generally passionate about helping others. The interviewees suggested that working with love and devotion is important, in order to work more efficiently with the community and have more effective outcomes. Participants have found that lack of passion may result in lack of sincerity when working with the community, while being passionate about community work would lead to having more ethical values.

Social responsibility. Six interviewees emphasized the importance of social responsibility for Arab community practice. An Ashoka fellow explained that many Arabs in the region do not appreciate volunteering and tend to expect financial returns. The participants believed that community work should be introduced starting with childhood through schools, government agencies, and parenting, and that there should be awareness about the social problems in one's community. The Ashoka fellow suggested that schools in the Arab world should require hours of social responsibility, similar to the policies in Western countries. This is to make Arab people feel accountable towards their own communities and responsible for helping them improve. The participants also emphasized the importance of encouraging and creating social change in one's community, since many Arabs have too much acceptance towards their circumstances. Accordingly, community practitioners are encouraged to start with an idea of social change in mind, such that their outcomes would be more effective.

Proactivity. Four female participants, who practiced in Egypt and Tunisia, raised the concern that many Arab people are passive, and how that impacts the development of the community. The interviewees explained how Arab people tend to be grateful and accepting of their circumstances, to the extent that it becomes a passive attitude. The participants believed that many Arabs have a general lack of proactivity, portraying attitudes of passivity, dependency, complaining, laziness, and pessimism. An Egyptian Ashoka fellow also emphasized that although empathy may be an important value, it is not enough if it is not accompanied with proactivity and willingness to create change. Moreover, two participants shared that Arab communities are passive to the extent that they respond and unite to solve a problem only when it is highly drastic. As a result, the interviewees recommended the value of proactivity to encourage social responsibility, creating change, problem-solving, independence, and community development.

Recommended Values Related to Professionalism and Effectiveness

This section comprises a group of themes that define needed values for professionalism and effective planning and management in Arab community practice. Participants highlighted the importance of the values of competence, intellectual development, empiricism, creativity, ecological holism, strengths focus, sustainability, professionalism, punctuality, flexibility, and objectivity, which are all relevant to professionalism and effective approaches in community projects.

Competence. Eight interviewees emphasized the importance of being competent when working with Arab communities. They explained how competence is essential to

prevent harm, such as the risk of offering psychological help without having the expertise, instead of referring the beneficiary to a professional therapist, for example. It was recommended that practitioners would only provide support within their own framework of work. Moreover, the participants emphasized that practitioners should continuously update their knowledge about recent research and develop their skills through mentorship, trainings, conferences, and workshops. Practitioners may also seek professional training in needed areas of practice, such as counseling, as recommended by a community psychologist.

Intellectual development. The values of critical thinking, learning and education were mentioned by nine interviewees, who were concerned about the prevalence of ignorance, poor ability to think and analyze, low rates of reading, and the influence of negative entertainment and media among Arab communities . The participants believed that these problems cause challenges for Arab community practitioners when they aim to develop such Arab communities, and hence, must be taken in consideration. They claimed that education is valued in the Arab world, and recommended that pursuing knowledge, enhancing education, and reading should be encouraged by practitioners. Moreover, two interviewees, who practiced in Egypt, Tunisia, and Libya, recommended that Arab communities would be more tolerant towards making mistakes. They believed that the attitude of learning from mistakes is highly needed, in addition to respecting and encouraging those who have failed to learn from their mistakes and move forward. Therefore, it is recommended by the interviewees that community practitioners should value intellectual development, with an aim to emphasize learning, education, and critical thinking.

Empiricism. A total of nine interviewees, most of whom practiced in Egypt, discussed the need for research and analysis in Arab community practice. The participants suggested using research to identify ethical dilemmas in Arab community practice, study existing values in the target community, measure the impact of community projects, assess the impact of Western values on Arab community practice, and present scientific evidence when raising awareness about a social problem. Seven of these participants also emphasized the importance of assessing the needs of a community prior to planning solutions, in order to tackle existing social problems and provide appropriate solutions for the target beneficiaries, rather than assume expertise. Moreover, an Egyptian community practitioner claimed that the absence of needs assessments usually results in a waste of funds, explaining that “we have seen millions of Euros spent on very small areas to develop them over years and still no real outcome happened, because people feel like, this is how things are, because they have studied somewhere in Europe . . . the funds go to the drain.”

Creativity. Only two community practitioners, who have been working with children in Egypt, shared about the importance of creativity in Arab community practice, yet it is worth mentioning as a standalone theme due to the significance of this value. The participants recommended using innovative solutions when working with communities, in order to tailor the programs to the targeted culture and attract community members. In fact, one of the participants raised the issue that community practitioners have been applying the same ideas that have even shown to be ineffective. Hence, creative community practitioners were believed to be needed for effective Arab community practice.

Ecological holism. Three interviewees who work with refugees and cultural diversity, mentioned the usefulness of using a holistic approach when supporting Arab communities. One of the participants explained that it is important to involve community members and the whole family when working on empowering women, in order to avoid increasing issues in the family or causing cases of divorce. Another participant suggested targeting the communities surrounding refugees to raise awareness about their social problems throughout their ecology. Therefore, as implied by the participants, the ecological framework could be a valuable tool when working with Arab communities.

Strengths focus. Eight interviewees emphasized the use of strengths-based approaches in Arab community practice. The participants explained that all disadvantages and problems could be turned into advantages and used for the benefit of the community. Four participants suggested that every value could be turned into a beneficial value. For example, a female community psychologist explained that instead of focusing on the struggles of misguided religiosity, a practitioner may take advantage of religiosity in a community by collaborating with its religious leaders to engage with the community members. Moreover, she emphasized that focusing on strengths does not mean that one would preserve problematic values, such as shame, but that a strengths-based approach would gradually result in subsiding the negative impact of a value. It was also stated by the interviewees that values cannot be harmful and that it only depends on a person's perception of the value.

Sustainability. Seven interviewees highlighted the importance of sustainability in Arab community practice. The participants recommended that community solutions would be sustainable, criticizing projects and services that are based on providing charity. Two participants suggested that offering money to underprivileged beneficiaries may be more harmful than beneficial. Moreover, five participants explained that empowerment would be an effective tool for achieving sustainability.

Professionalism. Eight participants shared about the importance of professional behavior, emphasizing the values of professionalism, accuracy, commitment, conscientiousness, and planning. The interviewees discussed concerns such as inaccurate translation between community members and practitioners, distractions from project goals, exposing sensitive information about the project to the beneficiaries, and not respecting the plan or system. Accordingly, it was recommended to avoid distractions by committing to the program goals and ensuring program continuity. Moreover, the interviewees shared about the importance of conscientiousness to respect the workplace and exert enough effort and time. Planning and following through with the approved plan were also recommended, claiming that Arabs tend to change the plans when they come to power. As a result, it can be concluded that professionalism is an important value for Arab community practice.

Punctuality. Four interviewees from North Africa expressed the need for punctuality in Arab community practice. The participants discussed how there is a lack of consistency with time and meeting deadlines. One of the interviewees also shared that it is a problem that respect for time is not even emphasized in the Arab world. Accordingly, there is a need for encouraging punctuality among Arab community practitioners.

Flexibility. Seven interviewees recommended that community practitioners should be flexible, despite commitment and planning. The participants explained that things don't always go as planned, and hence, flexibility and patience are important. Moreover, a participant who works with victims of violence suggested that rules should be bended sometimes, claiming that "if we are doing what we're doing by the book, that's when we will become rigid, and when we become rigid, we will make mistakes." In fact, four Ashoka fellows who work on youth empowerment and cultural dynamism were concerned that Arabs tend to be highly opinionated and fixed to their own ideas, lacking open-mindedness and resisting change. The participants explained that such inflexibility creates challenges when introducing new ideas to Arab communities or when attempting to collaborate and reach consensus.

Objectivity. Five participants who work with children, youth, women, and refugees, expressed their view on the need for the value of objectivity, due to the emotionality and prejudice among Arab communities. While it was recommended to adapt community projects to the emotionality of Arab communities, the participants also suggested that Arab people need to be more rational and controlling of their feelings. One of the mentioned problems resulting from being emotional is making irrational promises to the community yet failing to carry out these promises and disappointing the beneficiaries. Additionally, the participants

explained that many Arabs tend to misjudge people's behaviors in a community, which is also problematic. Hence, objectivity is needed among Arab practitioners as well as community members.

Recommended Values Related to Relationship-Building with the Community

This group of themes discuss values that are important for building appropriate relationships with the target community in Arab community practice. In addition to the value of relationship-building itself, the values that were recommended for an effective relationship are credibility, respect for human dignity, effective communication, empathy, mutual respect, humility, kind-heartedness, generosity, collaboration, privacy, and non-maleficence. These values are all applicable to the relationship and interaction between the community practitioner and the beneficiaries. This section further explores the values that are needed to develop an effective and ethical relationship with the community.

Relationship-building. Nine interviewees highlighted the importance of building a relationship with the target community in Arab community practice. An Ashoka fellow claimed that without building a relationship, advocacy would be ineffective. Since Arab communities tend to feel suspicious and avoid disclosure, the participants recommended communicating in a manner that would make the beneficiaries feel comfortable and safe to speak openly. To build such a relationship with the community, practitioners are advised to approach community members with friendliness, engage with the beneficiaries and learn to speak their language and culture. Moreover, simplifying information and providing accessible, low-cost services were also emphasized. An Egyptian community psychologist also recommended setting boundaries and expectations together with the community members in order to avoid issues and misunderstandings.

Credibility. All 18 participants stated that the community practitioner in the Arab world must have credibility in order to have an effective relationship with the target community. Interviewees discussed the values of integrity, transparency, trust, financial credibility and spreading awareness about community work to enhance the public image of the community practice field. In relation to integrity, the participants recommended the values of honesty, morality and staying true to one's values and principles, as they viewed Arab people to usually being dishonest and having double standards. As a participant said, "what you preach is what you say, and what you do is what you say. It's not changing, not changing facts and ideas based on what you think, but staying true to whatever you believe in." Moreover, the participants emphasized the importance of trustworthiness for Arab

communities and advised the practitioners to allow the beneficiaries to speak openly and remain transparent about project goals to build community trust.

Several participants associated honesty with trust and transparency, as Arab community practitioners sometimes instill false hopes among community members and fail to meet their expectations. Transparency was not only associated with building trust, as participants shared about organizations that have caused harm by hiding their honest objectives and later being exposed and attacked. Finally, financial transparency and credibility were also emphasized as important values in Arab community practice, since many community organizations were criticized for inappropriately allocating their funds or refusing to publicize about their expenditures, causing the public to feel skeptical towards their interests and goals. As apparent, the value of credibility is one of the most recommended values for ethical Arab community practice.

Human dignity. A total of 10 participants emphasized the importance of respecting human dignity in Arab community practice. Interviewees recommended that community practitioners value the worth of people in Arab communities, by treating them with justice and dignity, valuing their needs and beliefs, and defending their rights. The practitioners were concerned with the lack of human dignity and human rights among some Arab communities, where women are expected to accept abuse to keep the family together and people with different beliefs or appearance are attacked and abandoned. Accordingly, Arab practitioners are encouraged to treat all people with dignity and strive to protect the rights of vulnerable groups.

Effective communication. During the interviews, five participants, who have been practicing in Egypt, discussed the importance of using dialogue with Arab communities and recommended developing the communication skills of both Arab practitioners and the beneficiaries. The participants explained that dialogue skills are needed to clearly communicate project goals and services to the beneficiaries, in addition to properly debating and discussing ideas with community members. Additionally, the interviewees were concerned about the verbal aggressiveness of many Arab people and suggested that assertiveness needs to be taught and practiced in the Arab world.

Empathy. The value of empathy was emphasized by nine interviewees, who also recommended using active listening and making the beneficiaries feel accepted and valued when they speak, since being heard is rare in the Arab world. The participants also highlighted the importance of using empathy to allow community members to freely express their problems and feelings, in addition to putting themselves in the beneficiaries' shoes to

fully comprehend their needs. According to the interviewees, empathizing with the beneficiaries will make them more optimistic and cooperative towards community practitioners.

Mutual respect. From among the values related to having an ethical relationship with the community is the value of respect, which was highlighted by nine interviewed participants. The interviewees discussed both the importance of respecting others and being respected in the community. Based on these interviews, respect in Arab community practice allows freedom, facilitates self-expression, builds community trust, creates a sense of worthiness, and makes the beneficiaries willing to listen to the community practitioner. Moreover, respecting people when they make mistakes and respecting boundaries were also emphasized.

Humility. According to seven interviewees, the value of humility is needed for ethical Arab community practice. The participants were concerned about the superiority portrayed by development agencies, particularly Western organizations, as well as some practitioners with high qualifications or ranks. Moreover, participants claimed that many Arab people tend to not admit their mistakes. One of the community psychology participants also associated the value of humility to the discipline of community psychology. Accordingly, the interviewees believed that humility is a value that needs to be emphasized in Arab community practice.

Kind-heartedness. A total of 13 participants believed that kind-heartedness needs to be encouraged in Arab community practice. The participants shared about the existing values of altruism, benevolence, chivalry, and helpfulness among Arab communities. In addition to highlighting these values, compassion and forgiveness were also recommended. Two Ashoka fellows practicing in Egypt shared that it is a conflict when the practitioner is incapable of supporting a community to solve all its problems and must decide which need to address with the community members. Nevertheless, it was recommended to find different ways to support the community, possibly through other support providers. Thus, kind-heartedness was highlighted many times by interviewees, as they recommended the values of altruism, benevolence, chivalry, helpfulness, compassion, and forgiveness.

Generosity. The value of generosity was highlighted by 10 interviewees, as they described Arab people as generous and hospitable communities. The participants discussed the importance of charity in the Arab world, as a Lebanese community practitioner recommended that generosity would be more effective if exchanging, rather than just giving, was encouraged. For instance, Arab community practitioners might encourage the exchange of charity for craft skills or agricultural information. Moreover, it was suggested that

practitioners would use generosity to reconcile dispute between communities, by encouraging blood donation from one community to another, for example. Nevertheless, a Palestinian female suggested that, despite the benefit of generosity, people must be cautious when giving or helping others to avoid deception. Hence, the value of generosity was mostly viewed as beneficial for Arab community practice.

Collaboration. A total of 11 participants emphasized the value of collaboration with community members, stakeholders, and other community practitioners. Five participants shared about the importance of developing a partnership with the community to find solutions. The practitioners are recommended to learn from the beneficiaries and must know that they are the experts of their own problems, rather than give advice or act as expert providers. Moreover, the practitioners are advised by five interviewees to develop synergies and networks with other active stakeholders. One of the community psychologists, who works on women empowerment and disease prevention, claimed that although spending funds on networking provokes the beneficiaries, strengthening networks facilitates collaboration, which in turn is beneficial for supporting communities. Interviewees also discussed the usefulness of collaborating with community partners and religious leaders, who clarify cultural boundaries and reduce feelings of suspicion towards the practitioners. Additionally, five interviewees suggested that teamwork is needed in the Arab world and emphasized the importance of working collectively towards the common good. Participants explained that instead of being competitive, practitioners need to collaborate, acknowledge, and respect the community work of other practitioners more.

Privacy. During the interviews, 10 participants brought up the value of privacy and emphasized its importance in Arab community practice. The participants were concerned about the lack of privacy among many Arab communities, claiming that the media is against privacy and that people tend to interfere in each other's lives, sometimes out of care for each other. Accordingly, the interviewees emphasized the importance of privacy and confidentiality, and explained that it could only be breached when referring a beneficiary to other professionals.

Non-maleficence. It was suggested by nine participants that preventing harm should be valued by Arab community practitioners. The interviewees discussed that practitioners should beware of causing more problems if they pushed for change or put the beneficiaries under pressure. An Ashoka fellow shared an interesting example, "nobody would say that justice is not a good thing, but justice, if it is implemented in a way that will alienate somebody, instead of creating justice, you will create oppression." Moreover, according to

the participants, it is problematic when community practitioners disappoint beneficiaries when they instill hope by making false promises or assessing needs without following through with a solution. Two of the interviewees, who have been working with people with disabilities and gender issues, shared examples of conflicts that occur when solutions may cause harm, such as excluding skillful beneficiaries or protecting the rights of marginalized individuals who may harm other community members in the project. Therefore, community practitioners were advised to pay adequate attention to risks and avoid harming the beneficiaries.

Recommended Values Related to Valuing Diversity

This section comprises themes of recommended values needed to respect and value diversity in the Arab world for more effective and ethical community practice in the region. During the interviews, the participants discussed the importance of respecting the community's culture, celebrating diversity, acquiring cultural competence, and encouraging unity and acceptance among Arabs.

Respect for culture. Nine interviewees emphasized the value of respecting the beliefs and culture of the target community in Arab community practice. Respect for the culture of the organization was also recommended. The participants shared that conflicts often occur when the values in the community oppose the practitioner's own values. Nevertheless, they suggested that the values of the community must continue to be respected and that practitioners could possibly work around unfavored values to prevent harm or promote beneficence. Moreover, the interviewees discussed the importance of respecting cultural boundaries and avoiding sensitive issues in the community, especially that crossing the boundaries may impede building a relationship with the community. Hence, respect for a community's culture was highly recommended by the participants.

Celebrating diversity. A total of 12 participants shared about the importance of celebrating diversity in Arab community practice, which goes beyond respecting diversity. It was emphasized that Arab people feel more comfortable around similar people, and often criticize those who have a different appearance or belief, to the extent that community support are sometimes provided to groups from similar backgrounds only. Accordingly, participants recommended that community practitioners, as well as Arab people in general, need to be tolerant to diversity and appreciate differences and inclusiveness. An Ashoka fellow who works on exclusion issues explained,

It's even more than not doing harm, because we are supposed not to do any harm but to be inclusive or to accept other people that don't look like us, because in the public

sphere each group is, they tend to create the same group, the same political party, the same association, the same structure based on their like ideology or their values. But their values exclude the others.

Additionally, two female participants shared their need for being accepted themselves, due to frequently being disrespected for a younger age, being a woman, or having a disability. Participants also emphasized the importance of valuing a community's culture and beliefs, and not only respecting them, as discussed in the previous theme.

Cultural competence. During the interviews, 14 participants highlighted the prominence of cultural competence when working with Arab communities. They explained that community practitioners must culturally assimilate themselves into the target community and strive to understand and learn about its values, culture, language, context, social expectations, and limitations. Consequently, interventions would be developed using approaches that are suitable for the community. The interviewees also discussed the importance of cultural relevance, cultural adaptation, and cultural sensitivity towards both community members and organizations, in addition to assessing community readiness for the proposed ideas. Participants recommended that community practitioners would adapt their plans and activities to integrate the community's existing values. In particular, interviewees recommended using emotions and entertainment when working with Arab communities to adapt to Arab cultures. An example that was shared by an Ashoka fellow with a mass communication background, involved adapting an awareness campaign in an Arab country to use emotional phrases relating to family members, since Arab people are believed to be emotional. Additionally, participants suggested avoiding generalization and rather apply every value differently in different contexts, since values are perceived differently from one community to another, as discussed earlier.

Unity and peace. Three participants, who are from Egypt, Palestine, and Lebanon, talked about the need for unity in the Arab world, and how Arabs need to accept each other and unite for the good of the region. Moreover, six participants from various Arab countries expressed their concern about the Arab world being divided and how sectarianism has become quite prevalent. An Ashoka fellow explained that "there is no unified position. The nationalism itself is not as strong. I mean, you can't call that Arabs are nationalized. They are divided." The participants also explained that communities refuse to accept each other's differences, including the varying religious and political beliefs. Accordingly, the participants emphasized the importance of peace and reconciliation to better serve society in the Arab world.

Recommended Values Related to Self-Determination and Social Justice

This group of themes encapsulates values that are important for achieving self-determination and social justice among Arab communities through community practice. Practitioners were advised to value personal freedom, respect for autonomy, cultural pride, community participation and ownership, empowerment, and social justice to reach self-determination and social justice in the Arab world.

Personal freedom. The value of personal freedom was recommended by five participants who were particularly concerned about the resistance of society towards freedom in the Arab world. The interviewees discussed the lack of freedom to express religion, choose their clothing and appearance, participate in decision-making, and make personal choices. Moreover, the participants were concerned about the overwhelming traditions and prejudice among Arab communities, especially towards women. Two Ashoka fellows, one male and one female, shared that “[Arabs] want the woman to be free, to be [politically] nominated,” and that “everyone has the right to express religion in his own way.” Nevertheless, a male Ashoka fellow who practiced in Egypt, Lebanon, and the UAE, pointed out that Arab communities would value freedom more when it is within the moral values of society.

Respect for autonomy. A total of 10 participants emphasized the importance of respecting people’s choices and advocating for autonomy in society, since individuals in Arab communities struggle to take control of their own decisions. The interviewees explained that the community practitioner must never impose opinions, values, cultures, or participation in a project on community members. The practitioner must also avoid being directive and should allow and encourage people to make their own decisions and choose if they want to have change.

Cultural pride. Cultural pride was discussed by three interviewees as an important value in the Arab world. The participants, who practiced mainly in Egypt and Lebanon, explained that Arabs value their history and have a sense of patriotism, which should be respected, advocated for, and considered in community projects. The interviewees also emphasized the value of nationalism towards Arab unity but were concerned about the deterioration of this value. Accordingly, the participants recommended that community practitioners would work on enhancing cultural pride and include it in project plans and activities.

Community participation and ownership. It was recommended by eight interviewees that community practitioners must allow and encourage the participation (it was also termed as “involvement”) of community members in planning and finding solutions, and

not only when assessing needs. The participants believed that practitioners should develop partnerships with communities, helping them discover and decide on solutions to their own problems, rather than acting as the expert and imposing ideas on the community. The interviewees also emphasized the importance of inclusiveness, such that all members of the community are involved, and not just the youth, for example. The participatory approach was viewed as a highly effective and sustainable tool in Arab community practice, since community members become more positive, hopeful, responsible, and active when they realize their capabilities and are involved in planning the solution. However, two participants who work on the empowerment of women and refugees explained that participation is sometimes resisted by the beneficiaries, possibly because they are used to having experts. According to the interviewees, once the community members feel ownership towards a project, they become less suspicious and immediately take actions to solve their problems, without any further motivation from the practitioner. Therefore, it was recommended to value participation and ownership of community members in project planning, which would lead to self-determination and social justice.

Empowerment. The value of empowerment was emphasized by all participants, especially because one of the interview questions specifically asked about the importance and challenges of empowerment in Arab community practice. All interviewees stated that empowerment is highly important yet challenging and takes a lot of time to achieve. The participants claimed that many people in the Arab world are quite dependent and do not think for themselves. Hence, they explained that community practitioners should enable people to become independent and responsible, make their own choices, know their needs, learn about their capabilities, become active actors of change in society, find solutions for their own problems and communicate effectively, so that strong, sustainable communities are eventually created.

In addition to the prominence of this value, nine participants communicated the challenges of empowerment in Arab community practice, claiming that empowerment is sensitive and is often resisted in the Arab world, particularly if it may affect family relations or involve politics. According to the interviewees, Arab people tend to value empowerment if it will help in obtaining income, education, or power against enemies, while female employment and literacy are sometimes resisted. Moreover, it was pointed out that the term empowerment is perceived in the Arab world as a tool for making people rebellious and disrespectful. Nevertheless, the participants have observed that the concept of empowerment is progressing in the Arab world but may vary from one country to another. Hence, the

participants suggested that practitioners must be cautious when empowering communities, such that they do not cause harmful, unintended consequences, and should provide complete, productive empowerment, rather than mobilizing communities without providing them with appropriate tools of change and autonomy.

Social justice. During the interviews, seven participants discussed the need for equality and social justice in Arab community practice. While social justice was argued by the participants to be rare in many Arab countries, the participants suggested that achieving social justice is important and that practitioners must be aware that it will require a lot of work. The interviewees highlighted equal and fair treatment towards the beneficiaries, rather than treating the community members as inferior counterparts or mere recipients of a service. From among the valuable recommendations made by a community practitioner who works on blood donation campaigns to promote peace and equality, was the concept of exchanging aid between groups of people instead of having one group give another, as mentioned previously. This participant uses this method to ensure equality between the practitioners and the beneficiaries in community practice.

Self-Administered Questionnaire Results

A total of 211 eligible participants responded to the online self-administered questionnaire. A list of 37 ethical values was presented for the participants to assess the extent to which the value was extremely problematic (coded as -2) to extremely beneficial (coded as +2) when working with Arab communities. The midpoint, coded as zero, represented that the value does not impact decision making. Descriptive statistics for all 37 ethical values were calculated and the means and standard deviation are listed in Appendix G. All of the means are above zero, indicating that there were no values that the majority of participants had consensus would be problematic.

Table 14 demonstrates 14 values of which the mean was greater than 1.0 and the percentage of participants who rated these values as “somewhat” or “extremely” beneficial when working with Arab communities ranged from 71.09% to 79.15%. Hence, these 14 values were assessed by the participants to be the most beneficial in Arab community practice.

Table 14

Values Most Rated as Beneficial in Arab Community Work ($M > 1.00$, $n=211$)

Ethical Values	“Somewhat / Extremely Beneficial”	<i>M</i>	<i>SD</i>
Hospitality	79.15%	1.17	0.971
Respect for Human Dignity	78.67%	1.18	1.272
Humility	76.78%	1.06	1.190
Integrity	76.30%	1.17	1.145
Beneficence	75.36%	1.10	1.093
Building Rapport	75.36%	1.10	1.049
Responsibility	75.36%	1.08	1.209
Competence	75.36%	1.07	1.134
Non-maleficence	74.41%	1.10	1.166
Respect for the Rights of People	73.93%	1.08	1.289
Empowerment	73.46%	1.03	1.177
Sense of Community	72.99%	1.03	1.163
Loyalty	71.09%	1.04	1.154
Collaboration	71.09%	1.01	1.211

The extent to which each ethical value impacts community practice in the Arab world is shown in Table 15, which presents the percentages of participants who viewed each value as problematic or beneficial. The frequencies of “somewhat” and “extremely” problematic were combined, while the same was applied to the extent of benefit of the ethical values. As evident, the values of “respect for social class” ($M = 0.35$, $SD = 1.397$) and “conservatism and traditionalism” ($M = 0.31$, $SD = 1.322$), seemed to be controversial since the distribution was spread over the 5 points and the difference between the percentage of participants rating them as beneficial and problematic was not large. Additionally, almost a quarter of the participants rated the values of “appreciation for diversity” ($M = 0.80$, $SD = 1.414$), “prevention and promotion” ($M = 0.69$, $SD = 1.333$), “strengths perspective” ($M = 0.57$, $SD = 1.257$), and “collectivism” ($M = 0.52$, $SD = 1.189$) as problematic. Moreover, a large number of respondents (more than 20%) rated each of the seven values listed in Table 16 as having no impact on community practice in the Arab world.

Table 15

Extent of Benefit / Inconvenience of Values on Arab Community Practice (n=211)

Ethical Values	Problematic (-2 and -1)	Beneficial (1 and 2)
Hospitality	6.64%	79.15%
Gallantry	9.00%	70.62%
Building Rapport	9.95%	75.36%
Loyalty	9.95%	71.09%
Integrity	10.90%	76.30%
Beneficence	10.90%	75.36%
Courage	11.37%	66.35%
Generosity	11.85%	72.99%
Unity	11.85%	70.14%
Competence	12.32%	75.36%
Non-maleficence	12.32%	74.41%
Sense of Community	12.32%	72.99%
Respect for Human Dignity	13.74%	78.67%
Humility	13.74%	76.78%
Respect for Elders and Authority	14.22%	72.51%
Empowerment	14.69%	73.46%
Collaboration	14.69%	71.09%
Responsibility	15.17%	75.36%
Respect for the Rights of People	15.17%	73.93%
Conscientiousness	16.11%	69.67%
Morality	16.11%	68.25%
Efficiency	16.59%	68.25%
Inclusion	17.54%	71.09%
Honor	18.01%	68.25%
Empathy	18.01%	68.25%
Religiosity	18.01%	58.29%
Justice	18.48%	74.41%
Ecological Perspective	18.48%	60.19%
Social Change	18.96%	71.09%
Empiricism	19.43%	60.66%
Transparency	19.91%	70.62%
Collectivism	20.38%	53.55%
Strengths Perspective	21.80%	55.45%
Prevention and Promotion	22.75%	63.98%
Appreciation for diversity	24.17%	66.82%
Respect for Social Class	30.33%	51.18%
Conservatism and Traditionalism	30.33%	49.29%

Note. Ethical values are ordered by extent of benefit.

In addition to the specified values that were assessed, in response to open-ended questions participants suggested a few more values as problematic or beneficial when doing

community practice in the Arab world. Problematic values included superstition, nepotism, dependence, rigidity, gender inequality, opportunism towards ingenuine interests, individualism, prejudice, hypocrisy, sectarianism, inferiority, and respect for non-Arabs. The participants also recommended beneficial values such as flexibility, social justice, privacy, innovation, communication, social inclusion, selflessness, community ownership, accepting criticism, commitment, and cultural competence. Since the suggested beneficial values are many, they have been listed in Table 17.

In order to further analyze the data, the ratings of the ethical values were correlated to age and compared according to gender and the geographical regions where the participants practiced community work. A Pearson correlation coefficient was computed to assess the relationship between age and rating of the 37 ethical values. Age was not found to be correlated with any of the ethical values.

Table 16

Values Highly Rated as Uninfluential in Arab Community Practice (n=211)

Ethical Values	“No Impact” Frequency	Percentage	<i>M</i>	<i>SD</i>
Collectivism	55	26.07%	0.52	1.189
Religiosity	50	23.70%	0.60	1.196
Strengths Perspective	48	22.75%	0.57	1.257
Courage	47	22.27%	0.88	1.066
Ecological Perspective	45	21.33%	0.64	1.208
Gallantry	43	20.38%	1.00	1.058
Conservatism and Traditionalism	43	20.38%	0.31	1.322

Additionally, an independent-samples t-test was conducted to compare the female and male participants’ ratings of the ethical values. There was a significant difference in the ratings of the value of humility with higher ratings among females ($M = 1.27, SD = 1.036$) compared to males ($M = 0.90, SD = 1.274$); $t(209) = 2.230, p = 0.027$. The ratings for empathy were also significantly different with higher ratings among females ($M = 1.18, SD = 1.176$) compared to males ($M = 0.66, SD = 1.288$); $t(209) = 2.989, p = 0.003$. Moreover, non-maleficence was rated as more beneficial by female ($M = 1.29, SD = 1.144$) compared to males ($M = 0.97, SD = 1.169$); $t(209) = 1.997, p = 0.047$. As for the other ethical values in the

questionnaire, there were no significant differences in the participants' ratings based on gender. Hence, these results suggest that female respondents endorsed the values of empathy, humility and non-maleficence more than men.

Table 17

Additionally Suggested Beneficial Values

Suggested Values	Suggested Values	Suggested Values
Respect	Selflessness	Freedom of Speech
Continuity	Gratitude	Achievement
Excellence	Pride	Understanding Employees
Valuing Identity	Community Ownership	Caring for Employees
Cultural Competence	Information Sharing	Stewardship
Flexibility	Accepting Criticism	Passion
Communication	Volunteerism	Respecting Values
Public Interest	Skills Development	Peace
Education	Creativity	Social Justice
Commitment	Privacy	

A one-way ANOVA was conducted to compare the participants' views about the ethical values based on the four different regions where they practiced community work. However, the analysis was insignificant, as shown in Table 18, indicating that the region where community work was experienced was not significantly related to the participants' ratings of the ethical values.

Chapter 4

Discussion

The purpose of this thesis was to identify key values adopted by community psychologists and community practitioners when working with communities in the Arab world and assess the extent to which each value is problematic, beneficial, or irrelevant to Arab community practice. This section will discuss the findings of the study, as well as explore some of the questions that have been raised throughout the data collection process. The findings will also be compared to the values that have been explored in the literature.

The interviewees suggested that there are certain core values that are important for all communities around the world, such as respect, integrity, and justice. They explained that each community may have its own specific additional values relevant to its culture. Moreover, some interview participants argued that because Arab communities have become diverse, they would have different values across the region. The interviewees argued that it is difficult, and might be impossible, to find a set of common values that are appropriate for the diverse communities in the Arab world. However, the analysis of variance among the participants' ratings of the ethical values based on Arab regions did not show any significant differences. Hence, the perception of the interviewees regarding diversity of values among Arab communities was refuted, showing that defining common ethical values for Arab community practice is possible.

Additionally, some interview participants believed that Arabs historically adopted important values before other communities started documenting and preaching about ethical conduct. It was suggested, however, that the values of Arab communities deteriorated and changed as a result of not documenting and preserving the values. Moreover, the interviewees discussed Western influences on Arab values, which might have also been a reason for the change in Arab values reported by the interviewees. The interviewees portrayed the influence of Western values as more harmful than beneficial, claiming that some Western values and concepts, such as freedom and individualism, are problematic when applied within Arab communities, especially if they were not culturally adapted.

Similar beneficial and important values were recommended through the interviews and questionnaire, although the wording used was slightly different. The most important values identified were respect for human dignity and rights, integrity and credibility, non-maleficence, generosity and hospitality, beneficence and genuine motives, relationship-building, social responsibility, competence, humility, empowerment, sense of community and

collaboration. Although loyalty was rated as highly beneficial by questionnaire participants, it was not recommended by any of the interviewees. In addition, the questionnaire respondents suggested other beneficial values for Arab community practice that were also discussed by the interviewees, including commitment, passion, education and intellectual development, creativity, professionalism, respecting and applying values, flexibility, selflessness, privacy, cultural competence, peace and unity, freedom, community participation and ownership, social justice, and having cultural pride towards the Arab identity. Appendix H presents two lists of the important ethical values in Arab community work, ordered according to the average rating of each value in the questionnaire and the number of interviewees who recommended the value.

The interview participants discussed several challenges in Arab community practice, and several values were assessed by numerous questionnaire respondents as problematic. All challenges were portrayed as opposites to values that are beneficial to Arab community practice. For example, the challenge of suspicion and the need for trust were mentioned several times in both the interviews and questionnaire responses. Accordingly, integrity, honesty and trust were identified as important and beneficial values in Arab community practice. However, while these values have been emphasized by all codes of ethics that have been examined in the literature, the participants showed that they are particularly needed in the Arab world due to the perceived prevalence of suspicion and deception.

While several challenges were denoted, no actual consensus was reached from the interviews or questionnaire responses in assessing any of the ethical values as problematic. However, across both the interviewees and questionnaire respondents, there were controversial views about some Arab values, including respect for social class, elders and authority, conservatism and traditionalism, religiosity, honor, and collectivism. The interviewees shared some benefits and challenges resulting from these values, while some participants suggested that any value could be used as an advantage, rather than viewed as a problem. Moreover, around a quarter of the participants rated the values of conservatism and traditionalism, respect for social class, appreciation for diversity, prevention and promotion, strengths perspective, and collectivism as problematic, but the overall rating of each of these values indicated that they are more beneficial than problematic. It was surprising that values such as appreciation for diversity, prevention and promotion, strengths perspective, justice, and transparency were rated as problematic by a large number of participants. Although the participants' perceptions cannot be confirmed, the participants' might have meant that these

values are problematic because they cannot be found among Arab communities or are difficult to achieve.

Although literature on the Arab culture highlight the values of religiosity, honor, conservatism, collectivism, and respect for elders, authority, and social class, these values were criticized by numerous participants in this study. In fact, interviewees suggested that the Arab value system needs to be revised and updated to become more relevant to the current culture in reality. However, although the participants of this study are Arabs or have been practicing community work in the Arab world, they are all community practitioners and are not representative of the entire Arab community. Community members may have a different perspective regarding the importance of these controversial values. Hence, the importance of the Arab cultural values needs to be tested from the perspective of the community. Studies may find that some Arab cultural values have become rejected by Arab communities in general, or that there are conflicting points of view between community members and the professionals that serve them. Such findings should be reflected in future codes of ethics for community practitioners in the Arab world.

Many of the ethical values in the findings encompass the values and principles that have been found in existing codes of ethics, as discussed in the literature. The values shared by the national, regional, universal and Arab codes of ethics for psychologists include respect for the rights and dignity of people, integrity, competence, and responsibility, as discussed previously in the introduction. These values were also emphasized by the study participants, with a focus on social responsibility, rather than just responsibility. Moreover, the Arab societal values from the literature were all discussed by the interviewees, except for the value of loyalty. The mentioned Arab values were religiosity, morality, honor, shame, hospitality, generosity, conservatism, collectivism, and respect for elders, authority, and social class.

Moreover, the values of community psychology and other fields of community practice, including collaboration, participation, social justice, ecological perspective, empowerment, respect for diversity, collaboration, and empirical grounding, were also recommended by the interviewees and questionnaire respondents. Community psychologists were more aware than other community practitioners about ethics codes and the values of community psychology and practice. Moreover, they understood the research aims and questions more easily. Other community practitioners, on the other hand, usually discussed general ethical problems in the Arab world, and needed more effort on the researcher's part to constantly redirect them back to the discussion on ethics in Arab community practice specifically. However, the views of community psychologists and other community

practitioners regarding the importance of certain values had no significant differences. Therefore, while other community practitioners may need more awareness about ethics codes and ethical guidance than community psychologists, the importance and impact of the ethical values identified in this study can be applied to all community practitioners.

In addition to the values presented by existing codes of ethics, Arab cultural values and community psychology literature, the interviewees and questionnaire respondents suggested several values that have not been mentioned in other codes. The participants emphasized commitment, genuine motives, and proactivity, for example. Moreover, there were numerous values related to professionalism, effective approaches and relationship-building, including respecting and applying values, punctuality, flexibility, creativity, sustainability, kind-heartedness, humility, and selflessness. This is one of the interesting findings of this study that presents new information to be considered when developing codes of ethics.

While some of the mentioned interesting values are measurable and could be clearly emphasized in a code of ethics, such as commitment, punctuality, and sustainability, other values are intangible. Being selfless and having genuine motives towards the community, for instance, are qualities in an individual's personality that are not commonly professionally required and cannot be accurately measured. Even though such values may not be explicitly stated as major values in a professional code of ethics, they may be encouraged and emphasized under overarching ethical principles. For example, social responsibility may be an ethical principle in the code, under which genuine motives, passion and proactivity are encouraged. Nevertheless, further research on the applicability of such values in a code of ethics for Arab community practice will be useful in constructing a clear and effective code of ethics for community psychologists and other practitioners in the Arab world.

Strengths and Limitations

There are several strengths and limitations to this study that will be discussed in this section. This study is a valuable addition to the body of research on community psychology ethics in general, and ethics in Arab community practice and psychology in particular, since literature on this matter is insufficient. Therefore, this study is a step towards building an essential body of research for accurately and scientifically promoting ethical Arab community practice and community psychology. Moreover, the inadequacy of existing research has created the need for collecting qualitative information, which enabled this study to collect rich data about Arab community practice ethics, and deeply explore values,

challenges and conflicts thought interviews. Additionally, the use of a mixed methods enabled confirming the validity of the findings, by comparing the results obtained from the quantitative and qualitative methods, giving significance and strength to the findings of the study.

Moreover, one of the strengths of the study is that the interview questions managed to enable the participants to deeply reflect and explore ethical values in their practice, such that many of the values already existing in relevant ethics codes were suggested in the interviews, as well as other additional values. The interviewees emphasized the values of mainstream psychology, community psychology, community practice, the Arab culture, and other interesting values related to commitment, professionalism, effective approaches, and relationship-building. Hence, it is a strength that the identified list of values for Arab community psychology and practice in this study is quite comprehensive; nevertheless, further research is needed to also address existing challenges and ethical dilemmas in the field.

On the other hand, the inefficiency of resources, tools, and research on ethics in the Arab world led to some limitations to this thesis study. It was a challenge finding a comprehensive sampling frame of all community practitioners in the Arab world. An association or organization where all or most community practitioners could be affiliated was not found. Hence, although LinkedIn and Ashoka's databases may not be fully representative of all community practitioners in the Arab world, they were found to be the most comprehensive and accessible sampling frames. Several online databases were examined as possible sampling frames, including Idealist, which is a database of employment opportunities for individuals who want to benefit the world, but profiles of the individuals themselves were not accessible. As for LinkedIn, a comprehensive list of individuals working in the non-governmental industry that was filtered by each Arab country could be obtained in return for a payment, so the free options used for this study were less effective. Moreover, Ashoka's database included experienced community practitioners from several Arab countries and was publicly accessible. Moreover, the sample size of the questionnaire was large enough to collect adequate and reliable data to counter this problem, reaching 211 participants.

As community psychology is studied in Egypt and Palestine only, it was quite difficult to reach community psychologists from Birzeit University to participate in the interviews. Hence, all community psychology participants in the study were from the M.A program in Egypt, which is a limitation of this study. However, several community

psychologists from Birzeit University participated by responding to the questionnaire and more Ashoka fellows were interviewed instead, reaching a sufficient number of interviews. Another limitation is that the number of community psychologists in the samples was little compared to other community practitioners. This is because the actual number of community psychologists in the Arab world is very small, and hence, all the community psychologists in the Arab world, who were from the only two established community psychology programs in the region, were targeted in this study. Including community psychologists in the study was important in order to represent the points of view of community practitioners in the psychology field.

It might seem that having an uneven number of interviewees from each Arab country is also a limitation. However, having an even number was not possible because it would not have been representative of the actual situation in the Arab world. In addition to the fact that community psychology programs are only established in Egypt and Palestine so far, community practitioners in other fields of work are prevalent in some Arab countries more than others. Some countries have a larger number of community-based organizations or a longer history of community work.

Additionally, since this study aimed to identify culturally-relevant values for Arab community practice, a potential limitation was the influence of Western ethics on the views of Arab community psychologists and practitioners. The dominance of INGOs in the Arab world has affected the beliefs of Arab community psychologists and community practitioners towards Western ideologies. Moreover, community psychology programs in the Arab world have also been adopted from the West and include the study of American codes of ethics. As a result, Arab community psychologists and practitioners have become highly aware of and influenced by Western values. Nevertheless, in order to address this possible limitation, Arab societal values were included in the questionnaire and their impact was examined during the interviews, in addition to the fact that the interviewer constantly probed the participants to discuss practical situations in the Arab context and deeply reflect about the Arab culture.

Conclusions and Recommendations

This thesis defined a list of important values for community practice and community psychology in the Arab world, in addition to exploring controversial values that may cause challenges and measuring the impact of each value on Arab community work. Appendix H presents two lists of the important ethical values in Arab community work, as an initial step for building a code of ethics for community psychologists and practitioners in Arab

communities. These recommended lists of values are based on the opinions of a total of 229 participants in this mixed-methods study, who shared their views and reflections through an interview or a questionnaire.

Toward building a code of ethics for community psychology and community practice in the Arab world, the main recommendations of this study are:

1. Conducting further research on ethical dilemmas and values in Arab community practice and psychology. Collecting information about ethical dilemmas will be useful in further exploring the impact of the important values and will help in defining ethical principles and standards to develop a code of ethics for Arab community psychology and practice.
2. Conducting further research to validate the defined set of ethical values in this study from the perspective of the Arab communities. Subsequent research should explore community members' views on the ethical values recommended by both the community and the practitioners, as well as clarify which ethical values are important to have as a practitioner and which need to be promoted within the Arab communities.
3. Discussing the development of a code of ethics for Arab community psychology and practice at relevant conferences and meetings with representative stakeholders and experts, such as a conference for community psychologists or the Middle East Psychological Association (MEPA) conference.
4. Establishing a committee of community psychologists and other practitioners currently practicing with Arab communities to finalize a list of important ethical values and develop corresponding principles and standards.
5. Taking account of the challenges and situations among Arab communities that were raised by the interview participants in this study when developing the code of ethics, including the lack of application and enforcement of values and the prevalence of suspicion, for example.
6. Following a moral framework that is ordered by importance when developing the code of ethics, which is the format that was first used by the CPA and followed by other psychological associations around the world, due to its clarity and usefulness. Accordingly, the code would be organized by ethical values and ordered by priority, with principles and standards to correspond to each value.

Therefore, it can be concluded that this thesis obtained rich qualitative and quantitative data to define the ethical values needed for community psychology and practice in the Arab world. It is a promising step towards developing a comprehensive code of ethics and achieving ethical practice in these fields.

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Appendix A

English Interview Informed Consent Form and General Questions



Documentation of Informed Consent for Participation in a Research Study

Project Title: Ethical Values for Community Psychology and Community Practice in the Arab World

Principal Investigator: Fatema Abou El Ela (ffarghal@aucegypt.edu, +201009005708)

You are invited to kindly participate in a research study for a thesis that aims to examine the values needed in the field of community psychology and community practice in the Arab world. Arab countries include Algeria, Bahrain, Comoros, Djibouti, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Palestine, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, the United Arab Emirates and Yemen.

You will be asked to first provide some general information. Consequently, you will be contacted to arrange a date and time for a 30-40 minute online interview at your convenience. In the interview, you will be asked to share your thoughts regarding the values that are important for ethical community practice in the Arab world.

There will not be any risks or discomforts associated with this research. There will be no direct benefits to you from this research. However, this research will be the first step towards achieving a code of ethics in Arab community psychology and practice, by defining the most important values needed to work with Arab communities.

The information you provide for purposes of this research is confidential. The information will be analyzed to identify the values needed for ethical community psychology and community practice in the Arab world. Findings may be presented and published, yet your specific answers will not be publicized in any way that could identify who you are.

In order to be able to revise your responses thoroughly and acquire accurate data for this research, this interview will be audio-recorded. The audio files will be saved in a secure and password-protected location. The audio file will be destroyed permanently once this thesis has been completed and published.

Participation in this study is voluntary. Refusal to participate will not involve any penalty or loss of benefits to which you are otherwise entitled. You may discontinue participation at any time without penalty.

Questions about the research and your rights should be directed to Fatema Abou El Ela (ffarghal@aucegypt.edu, +201009005708)

By clicking 'Next Page', you agree that you have read and understood the information included in this form and agree to participate in this study.

* Please select 'I agree' to indicate understanding the above and agreeing to participate in this study.

- I agree

Next Page

General Questions

Thank you for agreeing to participate in this study. As a reminder, your personal and professional information will not be linked in any way to the final analysis and results when presented.

1. Full Name: _____
2. Preferred Email: _____
3. Cell Phone: _____
1. Gender: Male Female
2. Age: _____
3. Nationality / Nationalities: _____
4. Highest Degree of Education:
 - High school diploma or the equivalent
 - Trade/technical/vocational training
 - Some college courses, no degree
 - Bachelor's degree
 - Master's degree
 - Doctorate degree
 - Other (please specify): _____
5. Area of specialization of your highest degree: _____
6. Are you pursuing or have completed a degree in community psychology?
Yes No Not sure
7. If currently working or volunteering, please enter the name of your organization: _____
8. Current organization location (City, Country): _____
9. Years of work experience doing community-based work: _____
10. Was any of that community-based experience during the past three years? Yes No
11. Arab countries where you practiced community work:
 - Algeria Jordan Oman Syria
 - Bahrain Kuwait Palestine Tunisia
 - Comoros Lebanon Qatar UAE
 - Djibouti Libya Saudi Arabia Yemen
 - Egypt Mauritania Somalia
 - Iraq Morocco Sudan
- Other (please specify): _____
12. Have you been participating in community practice activities that service or impact members of any community? Yes No

13. Please list societal issues that you have been working on:

(Examples: child sexual abuse, women empowerment, disease prevention, microfinancing, etc.)

Appendix B

Arabic Interview Informed Consent Form and General Questions

الجامعة الأمريكية بالقاهرة



استمارة موافقة مسبقة للمشاركة في دراسة بحثية

عنوان البحث : القيم الأخلاقية لعلم النفس المجتمعي والعمل المجتمعي في العالم العربي

الباحث الرئيسي: فاطمة ابو العلا، طالبة دراسات عليا في علم النفس المجتمعي

البريد الإلكتروني: ffarghal@aucegypt.edu

الهاتف: 00201009005708

انت مدعو للمشاركة في دراسة بحثية تهدف إلى دراسة القيم الأخلاقية اللازمة في مجال العمل المجتمعي وعلم النفس المجتمعي في العالم العربي. الدول العربية هي الجزائر والبحرين وجزر القمر وجيبوتي ومصر والعراق والأردن والكويت ولبنان وليبيا وموريتانيا والمغرب وعمان وفلسطين وقطر والسعودية والصومال والسودان وسوريا وتونس والإمارات العربية المتحدة واليمن.

المدة المتوقعة للمشاركة في هذا البحث من 30 إلى 40 دقيقة في الوقت الذي يناسبكم. ستكون إجراءات الدراسة كما يلي: سوف يطلب منك الإجابة أولاً على بعض الأسئلة العامة. وبعد ذلك سيتم التواصل معك لترتيب موعد لإجراء مقابلة عبر الإنترنت لمدة 30 إلى 40 دقيقة في الوقت الذي يناسبكم. في المقابلة، سوف يطلب منك تبادل أفكارك فيما يتعلق بأهمية القيم المطلوبة للعمل المجتمعي الأخلاقي في العالم العربي.

لن تكون هناك أي مخاطر أو مشكلات مرتبطة بهذا البحث. لن تكون هناك استفادة مباشرة لك من هذا البحث. ومع ذلك، فإن هذا البحث سيكون الخطوة الأولى نحو تحقيق ميثاق أخلاقي في علم النفس العربي والعمل المجتمعي العربي من خلال تحديد أهم القيم اللازمة للعمل مع المجتمعات العربية.

السرية واحترام الخصوصية: المعلومات التي ستدلى بها في هذا البحث سوف تكون سرية، وسوف يتم تحليل المعلومات لتحديد القيم الأخلاقية المطلوبة لعلم النفس المجتمعي والعمل المجتمعي في العالم العربي. من المحتمل عرض ونشر نتائج الدراسة، ومع ذلك لن يتم نشر إجاباتك المحددة بأي شكل من الأشكال التي يمكن أن تحدد هويتك.

من أجل أن نكون قادرين على مراجعة ردودكم بشكل دقيق والحصول على بيانات دقيقة لهذا البحث، سوف يتم تسجيل هذه المقابلة. سوف يتم حفظ الملفات الصوتية في مكان آمن ومحمي بكلمة مرور سرية. سيتم تدمير الملف الصوتي بشكل دائم بمجرد الانتهاء من البحث ونشره.

ان المشاركة في هذه الدراسة ماهي الا عمل تطوعي، حيث أن الامتناع عن المشاركة لا يتضمن أى عقوبات أو فقدان أى مزايا تحق لك. ويمكنك أيضا التوقف عن المشاركة في أى وقت من دون عقوبة أو فقدان لهذه المزايا.

في حال كنت بحاجة الى مزيد من التوضيح أو كان لديك أي أسئلة من فضلك لا تتردد في الاتصال بالباحثة: فاطمة ابوالعلا
(ffarghal@aucegypt.edu)

من خلال نقر 'الصفحة التالية' فإنك توافق على قراءة المعلومات الواردة في هذا النموذج وفهمها والموافقة على المشاركة
في هذه الدراسة.

يرجى اختيار 'موافق' اذا كنت قرأت وفهمت ما سبق، وتوافق على المشاركة في هذه الدراسة.

○ موافق

الصفحة التالية

أسئلة عامه

شكرا لموافقتك على المشاركة في هذه الدراسة. اذكرك أن لن يتم ربط معلوماتك الشخصية والمهنية بأي شكل من الأشكال إلى التحليل النهائي والنتائج عند تقديمها.

1. الاسم: _____
2. البريد الإلكتروني المفضل: _____
3. رقم الهاتف المحمول: _____
4. النوع: ذكر أنثى
5. السن: _____
6. الجنسية / الجنسيات: _____
7. أعلى مؤهل حصلت عليه:
 - a. ثانوية عامة، دبلوم، أو ما يعادلها
 - b. تدريب تجاري / تقني / مهني
 - c. دراسات جامعية، بدون درجة علمية
 - d. درجة بكالوريوس / ليسانس
 - e. ماجستير
 - f. دكتوراه
 - g. أخرى (يرجى التحديد): _____
8. تخصص أعلى مؤهل حصلت عليه: _____
9. هل تسعى في أو أكملت شهادة في علم النفس المجتمعي؟ نعم لا غير متأكد
10. إذا كنت تعمل أو تقوم بالتطوع حاليا ، يرجى إدخال اسم مؤسستك الحالية: _____
11. مكان المؤسسة الحالية التي تعمل بها (مدينة، بلد): _____
12. عدد سنوات الخبرة في القيام بالعمل المجتمعي: _____
13. هل كان أي من هذه الخبرات في العمل المجتمعي خلال السنوات الثلاث الماضية؟ نعم لا
14. حدد الدول العربية التي مارست أو تمارس فيها العمل المجتمعي:

<input type="radio"/> الجزائر	<input type="radio"/> الأردن	<input type="radio"/> عمان	<input type="radio"/> سوريا
<input type="radio"/> البحرين	<input type="radio"/> الكويت	<input type="radio"/> فلسطين	<input type="radio"/> تونس
<input type="radio"/> جزر القمر	<input type="radio"/> لبنان	<input type="radio"/> قطر	<input type="radio"/> الامارات
<input type="radio"/> دجيبوتي	<input type="radio"/> ليبيا	<input type="radio"/> السعودية	<input type="radio"/> اليمن
<input type="radio"/> مصر	<input type="radio"/> موريتانيا	<input type="radio"/> الصومال	
<input type="radio"/> العراق	<input type="radio"/> المغرب	<input type="radio"/> السودان	
- أخرى (يرجى التحديد): _____
15. هل شاركت في أنشطة عمل مجتمعي تخدم أو تؤثر على أعضاء أي مجتمع؟ نعم لا
16. حدد القضايا المجتمعية التي تعمل عليها:

(أمثلة: الاعتداء الجنسي على الأطفال، تمكين المرأة، الوقاية من الأمراض، التمويل الصغير، وما إلى ذلك)

Appendix C

English Interview Guide

Introduction

“Thank you for accepting the invitation to participate in this research study. The interview is expected to take 30 to 40 minutes. I am reminding you that this interview is being recorded but be assured that all your responses will be kept confidential.

“You are helping in building the foundation for a future code of ethics for community psychology and community practice in the Arab world that would be culturally appropriate and realistic. A code of ethics is a document that defines what is morally right or wrong within professional practice. It usually presents guidelines or standards for how professionals should conduct their work in an ethical way. Such a code is key in creating an ethical work environment within Arab communities. It takes many years of efforts to develop an ethics code, and the first step is to identify what are the underlying values that are important in the profession.

“When I say ‘values’, how would you define that?” (*if defined incorrectly, define it further as a set of beliefs of what is moral, right or good*). “Knowing the important values now can lead to future efforts to establish specific ethical rules and guidelines. For example, if a family highly values honesty, then they will establish rules in their home to prohibit lying, to report their taxes accurately, and to always tell each other what they truly think.

“So, the purpose of the interview today is to discuss the underlying values that would be important to have as a professional involved in community work.”

Interview Questions

1. What specific values do you believe are important to have as a community practitioner / psychologist when conducting community work with Arab communities, and why?
2. There are many values that are shared across Arab cultures. Which (additional) Arab values are *beneficial* when working with Arab communities?
3. What Arab cultural values do you find *problematic* when working with Arab communities?
4. Most community practitioners and community organizations are influenced by values from the West. Which (additional) values from Western professional community practice do you find *beneficial* when working with Arab communities?
5. Which Western professional values do you find *problematic* when working with Arab communities?

6. The field of community psychology is also based on the value of empowerment. Do you think empowerment is an important value in Arab community work?
7. What experiences have you had in your community work in which values conflicted with each other? For example, have you observed any situations in which a value that is important to your professional work may contradict a value that is important in the local culture or religion?

“Thank you so much for taking the time to discuss these issues with me. Are there any final issues you would like to raise regarding ethical values?”

Notes:

- *After each question, ask for clarifications and examples.*
- *If the participant discusses rules, standards, or other guidelines, guide them to focus on the values.*

Appendix D

Arabic Interview Guide

مقدمة

"شكرا لك على قبول الدعوة للمشاركة في هذه الدراسة البحثية. من المتوقع أن تستغرق المقابلة 30 إلى 40 دقيقة. أذكرك أن هذه المقابلة سوف تكون مسجلة، ولكن وتأكد من أن جميع ردودكم ستبقى سرية.

"إنك تساعد في بناء الأساس لميثاق أخلاقي مستقبلي للعمل المجتمعي و علم النفس المجتمعي في العالم العربي تكون مناسبة ثقافيا وواقعا. فإن الميثاق الأخلاقي يقوم بتحديد ما هو حق أخلاقي أو خطأ في الممارسة المهنية، وهو يقدم عادة مبادئ توجيهية أو معايير لكيفية قيام المهنيين بعملهم بطريقة أخلاقية. فإن مثل هذا الميثاق هو المفتاح لخلق بيئة عمل أخلاقية داخل المجتمعات العربية. ويستغرق الأمر سنوات عديدة من الجهود لوضع ميثاق أخلاقي، والخطوة الأولى هي تحديد القيم الأساسية التي هي مهمة في المهنة.

"عندما أقول كلمة 'القيم'، كيف يمكنك تعريف ذلك؟" (إذا تم تعريفها بشكل غير صحيح، حددها كذلك كمجموعة من المعتقدات لما هو معنوي أو صحيح أو جيد).

"إن معرفة القيم المهمة الآن يمكن أن تؤدي إلى جهود مستقبلية لوضع قواعد أخلاقية محددة ومبادئ توجيهية. على سبيل المثال، إذا كانت الأسرة تقدر قيمة الصدق، ثم أنها سوف تضع قواعد في بيتهم لمنع الكذب، للإبلاغ عن الضرائب بدقة، ولدائما يقولون لبعضهم البعض ما يعتقدون حقا.

"لذا، فإن الغرض من المقابلة اليوم هو مناقشة القيم الكامنة التي ستكون مهمة لك كخبير مهني في العمل المجتمعي."

أسئلة المقابلة

1. ما هي القيم المحددة التي يجب أن تكون لدى العامل المجتمعي / عالم النفس المجتمعي عند العمل مع المجتمعات العربية، ولماذا؟
2. هناك العديد من القيم المشتركة بين الثقافات العربية. ما هي القيم العربية (الإضافية) التي تجدها مفيدة عند العمل مع المجتمع العربي؟
3. ما هي القيم الثقافية العربية التي تسبب مشاكل عند العمل مع المجتمعات العربية؟
4. يتأثر معظم العاملين المجتمعيين والمنظمات المجتمعية بقيم من الغرب. ما هي القيم (الإضافية) من العمل المجتمعي الغربي التي تجدها مفيدة عند العمل مع المجتمعات العربية؟
5. ما هي القيم المهنية الغربية التي تسبب مشاكل عند العمل مع المجتمعات العربية؟
6. يستند مجال علم النفس المجتمعي إلى قيمة التمكين. هل تعتقد أن التمكين هو قيمة مهمة للعمل المجتمعي العربي؟
7. ما هي التجارب التي مررت بها في العمل المجتمعي الذي تعارضت فيها القيم مع بعضها البعض؟ على سبيل المثال، هل لاحظت أي حالات قد تكون فيها قيمة مهمة لعملك المهني متناقضة مع قيمة مهمة في الثقافة المحلية أو الدين؟

"شكرا جزيلاً على أخذ الوقت لمناقشة هذه القضايا معي. هل هناك أي قضايا أخرى ترغب في التعبير عنها فيما يتعلق بالقيم الأخلاقية؟"

ملاحظات:

- بعد كل سؤال، اطلب توضيحات وأمثلة.

- إذا كان المشارك يناقش القواعد، أو المعايير، أو غيرها من المبادئ التوجيهية، قم بتوجيههم للتركيز على القيم.

Appendix E
English Self-Administered Questionnaire



Documentation of Informed Consent for Participation in a Research Study

Project Title: Ethical Values for Community Psychology and Community Practice in the Arab World

Principal Investigator: Fatema Abou El Ela (ffarghal@aucegypt.edu, +201009005708)

You are invited to kindly participate in a research study for a thesis that aims to examine the values needed in the field of community psychology and community practice in the Arab world. Arab countries include Algeria, Bahrain, Comoros, Djibouti, Egypt, Iraq, Jordan, Kuwait, Lebanon, Libya, Mauritania, Morocco, Oman, Palestine, Qatar, Saudi Arabia, Somalia, Sudan, Syria, Tunisia, the United Arab Emirates and Yemen.

The expected duration of your participation is approximately 10 minutes. This questionnaire asks you to identify how certain values impact community practice in the Arab world, whether they are beneficial, problematic or irrelevant in decision-making. The findings may be presented and published.

There will not be any risks or discomforts associated with this research. There will be no direct benefits to you from this research. However, this research will be the first step towards achieving a code of ethics in Arab community psychology and practice by defining the most important values needed to work with Arab communities.

The information you provide for purposes of this research will remain anonymous and confidential. The information will be analyzed to identify the values needed for ethical community psychology and community practice in the Arab world, yet your specific answers will not be publicized.

Participation in this study is voluntary. Refusal to participate will not involve any penalty or loss of benefits to which you are otherwise entitled. You may discontinue participation at any time without penalty.

By clicking 'Next Page', you agree that you have read and understood the information included in this form and agree to participate in this study.

If you need further clarification or have any questions, please feel free to contact the researcher: Fatema Abou El Ela (ffarghal@aucegypt.edu)

* Please select 'I agree' to indicate understanding the above and agreeing to participate in this study.

- I agree

Next Page

General Questions

14. Gender: Male Female

15. Age: _____

16. Nationality / Nationalities: _____

17. Highest Degree of Education:

- High school diploma or the equivalent
- Trade/technical/vocational training
- Some college courses, no degree
- Bachelor's degree
- Master's degree
- Doctorate degree
- Other (please specify): _____

18. Area of specialization of your highest degree: _____

19. Are you pursuing or have completed a degree in community psychology?

Yes No Not sure

20. If currently working or volunteering, please enter the name of your organization: _____

21. Current organization location (City, Country): _____

22. Years of work experience doing community-based work: _____

23. Was any of that community-based experience during the past three years? Yes No

24. Arab countries where you practiced community work:

- Algeria
- Bahrain
- Comoros
- Djibouti
- Egypt
- Iraq
- Jordan
- Kuwait
- Lebanon
- Libya
- Mauritania
- Morocco
- Oman
- Palestine
- Qatar
- Saudi Arabia
- Somalia
- Sudan
- Syria
- Tunisia
- UAE
- Yemen

Other (please specify): _____

25. Have you been participating in community practice activities that service or impact members of any community? Yes No

26. Please list societal issues that you have been working on:

(Examples: child sexual abuse, women empowerment, disease prevention, microfinancing, etc.)

Questionnaire

Thank you for accepting the invitation to participate in this research study. You are helping in identifying the key values that are important for underlying community practice in the Arab world, as the first step for developing an ethics code that would be culturally appropriate and realistic. Values are a set of beliefs of what is moral, right or good. Knowing the important values now can lead to future efforts to establish specific ethical rules and guidelines. For example, if a family highly values honesty, then they will establish rules in their home to prohibit lying, to report their taxes accurately, and to always tell each other what they truly think. Hence, the purpose of this questionnaire is to identify the underlying values that impact decision-making in the professions involved in community work.

Below is a list of values that may potentially impact the way you conduct community-based work particularly in Arab communities.

On a scale from 1 to 5, please identify how the following values impact community practice in the Arab world specifically, whether they are beneficial, problematic or irrelevant in community-based work, where:

- 1: the value is extremely problematic when conducting community-based work in Arab communities
- 2: the value is somewhat problematic when conducting community-based work in Arab communities
- 3: the value does not impact community-based work in Arab communities
- 4: the value is somewhat beneficial when conducting community-based work in Arab communities
- 5: the value is extremely beneficial when conducting community-based work in Arab communities

Value	1	2	3	4	5
Beneficence (Benefiting and improving the lives of others)					
Non-maleficence (Avoiding doing harm to others)					
Responsibility (Being accountable for one's actions and for the well-being of the community)					
Respect for the rights of people (Valuing people's rights)					

Respect for human dignity <i>(Appreciating the worthiness of people)</i>					
Justice <i>(Attaining people's rights, as well as treating people fairly)</i>					
Integrity <i>(Having credibility, honesty, and trust-worthiness)</i>					
Transparency <i>(Being straight-forward and public about goals, intentions, and plans)</i>					
Efficiency <i>(Being productive and allocating resources appropriately)</i>					
Empathy <i>(Being able to understand other people's feelings and perspectives as if you were in their situation)</i>					
Competence <i>(Developing one's knowledge and capabilities needed to perform a certain task)</i>					
Inclusion <i>(Including all sections of society and accepting others)</i>					
Empiricism <i>(Using research and data to create effective plans and solutions)</i>					
Strengths perspective <i>(Focusing on assets and resources rather than the problems and deficits)</i>					
Sense of community <i>(Promoting the feeling of belonging and commitment to one's community)</i>					
Collaboration <i>(Cooperating with others to find solutions to community problems, rather than assuming expertise)</i>					
Empowerment <i>(Building capacity and enabling others to make their own choices)</i>					
Ecological perspective <i>(Considering different layers of ecology, including the family, peers, community, policies, etc.)</i>					
Conscientiousness <i>(Demonstrating punctuality, commitment, reliability and good work ethic)</i>					
Appreciation for diversity <i>(Accepting and valuing people's differences in culture, religion, sex, age, etc.)</i>					
Social change <i>(Encouraging social action and mobilization to create change within the community)</i>					
Building rapport <i>(Taking the time to bond and build a positive relationship with others)</i>					

Prevention and promotion <i>(Preventing problems and promoting well-being, rather than waiting for problems to happen in order to address them)</i>					
Humility <i>(Having a humble heart to be able to assist selflessly)</i>					
Generosity <i>(Being altruistic and ready to give to others)</i>					
Religiosity <i>(Acknowledging and considering religion's role in the lives of others)</i>					
Respect for elders and authority <i>(Having high regard for elders and authority figures)</i>					
Conservatism and traditionalism <i>(Committing to traditional beliefs, norms, and customs)</i>					
Unity <i>(Being united with others towards the same goals)</i>					
Hospitality <i>(Being welcoming, kind and generous with guests and visitors)</i>					
Collectivism <i>(Prioritizing the collective needs of the group over individual independence)</i>					
Gallantry <i>(Being keen to do good deeds and help others)</i>					
Honor <i>(Focusing on protecting others' reputation, honor and social-standing)</i>					
Courage <i>(Being bold and brave)</i>					
Loyalty <i>(Being faithful)</i>					
Respect for social class <i>(Considering the impact of social class on personal status)</i>					
Morality <i>(Adhering to principles that determine what is right and wrong, or good and bad behavior)</i>					
<i>The order of this list was automatically randomized in the online questionnaire.</i>					

If there are other values that you think are problematic when conducting community-based work in Arab communities, please list them below and explain why:

If there are other values that you think are beneficial when conducting community-based work in Arab communities, please list them below and explain why:

Any other general comments?

Appendix F

Arabic Self-Administered Questionnaire

الجامعة الأمريكية بالقاهرة



استمارة موافقة مسبقة للمشاركة في دراسة بحثية

عنوان البحث: القيم الأخلاقية لعلم النفس المجتمعي والعمل المجتمعي في العالم العربي

الباحث الرئيسي: فاطمة ابو العلا، طالبة دراسات عليا في علم النفس المجتمعي

البريد الإلكتروني: ffarghal@aucegypt.edu

الهاتف: 00201009005708

انت مدعو للمشاركة في دراسة بحثية تهدف إلى دراسة القيم الأخلاقية اللازمة في مجال العمل المجتمعي وعلم النفس المجتمعي في العالم العربي. الدول العربية هي الجزائر والبحرين وجزر القمر وجيبوتي ومصر والعراق والأردن والكويت ولبنان وليبيا وموريتانيا والمغرب وعمان وفلسطين وقطر والسعودية والصومال والسودان وسوريا وتونس والإمارات العربية المتحدة واليمن.

المدة المتوقعة للمشاركة في هذا البحث هي حوالي عشر دقائق. هذا الاستبيان يطلب منك تحديد كيف تؤثر بعض القيم على علم النفس المجتمعي والعمل المجتمعي في العالم العربي، سواء كانت مفيدة أو إشكالية أو غير ذات صلة في صنع القرار. من المحتمل عرض ونشر نتائج الدراسة.

لن تكون هناك أي مخاطر أو مشكلات مرتبطة بهذا البحث. لن تكون هناك استفادة مباشرة لك من هذا البحث. ومع ذلك، فإن هذا البحث سيكون الخطوة الأولى نحو تحقيق ميثاق أخلاقي في علم النفس العربي والعمل المجتمعي العربي من خلال تحديد أهم القيم اللازمة للعمل مع المجتمعات العربية.

السرية واحترام الخصوصية: المعلومات التي ستدلى بها في هذا البحث سوف تكون سرية وستكون هويتك غير محددة. سوف يتم تحليل المعلومات لتحديد القيم الأخلاقية المطلوبة لعلم النفس المجتمعي والعمل المجتمعي في العالم العربي، ومع ذلك لن يتم نشر إجاباتك المحددة بأي شكل من الأشكال التي يمكن أن تحدد هويتك.

ان المشاركة في هذه الدراسة ماهي الا عمل تطوعي، حيث أن الامتناع عن المشاركة لا يتضمن أى عقوبات أو فقدان أى مزايا تحقق لك. ويمكنك أيضا التوقف عن المشاركة في أى وقت من دون عقوبة أو فقدان لهذه المزايا.

من خلال نقر 'الصفحة التالية' فإنك توافق على قراءة المعلومات الواردة في هذا النموذج وفهمها والموافقة على المشاركة في هذه الدراسة.

في حال كنت بحاجة الى مزيد من التوضيح أو كان لديك أي أسئلة من فضلك لا تتردد في الاتصال بالباحثة: فاطمة ابو العلا

(ffarghal@aucegypt.edu)

يرجى اختيار 'موافق' اذا كنت قرأت وفهمت ما سبق، وتوافق على المشاركة في هذه الدراسة.

○ موافق

الصفحة التالية

أسئلة عامة

1. النوع: ذكر أنثى
2. السن: _____
3. الجنسية / الجنسيات: _____
4. أعلى مؤهل حصلت عليه:
 - ثانوية عامة، دبلوم، أو ما يعادلها
 - تدريب تجاري / تقني / مهني
 - دراسات جامعية، بدون درجة علمية
 - درجة بكالوريوس / ليسانس
 - ماجستير
 - دكتوراه
 - أخرى (يرجى التحديد): _____
5. تخصص أعلى مؤهل حصلت عليه: _____
6. هل تسعى في أو أكملت شهادة في علم النفس المجتمعي؟ نعم لا غير متأكد
7. إذا كنت تعمل أو تقوم بالتطوع حالياً ، يرجى إدخال اسم مؤسستك الحالية: _____
8. مكان المؤسسة الحالية التي تعمل بها (مدينة، بلد): _____
9. عدد سنوات الخبرة في القيام بالعمل المجتمعي: _____
10. هل كان أي من هذه الخبرات في العمل المجتمعي خلال السنوات الثلاث الماضية؟ نعم لا
11. حدد الدول العربية التي مارست أو تمارس فيها العمل المجتمعي:

○ الصومال	○ لبنان	○ الجزائر
○ السودان	○ ليبيا	○ البحرين
○ سوريا	○ موريتانيا	○ جزر القمر
○ تونس	○ المغرب	○ دجيبوتي
○ الامارات	○ عمان	○ مصر
○ اليمن	○ فلسطين	○ العراق
	○ قطر	○ الأردن
	○ السعودية	○ الكويت
- أخرى (يرجى التحديد): _____
12. هل شاركت في أنشطة عمل مجتمعي تخدم أو تؤثر على أعضاء أي مجتمع؟ نعم لا
13. حدد القضايا المجتمعية التي تعمل عليها:

(أمثلة: الاعتداء الجنسي على الأطفال، تمكين المرأة، الوقاية من الأمراض، التمويل الصغير، وما إلى ذلك)

الاستبيان

نشكرك على قبول الدعوة للمشاركة في هذه الدراسة البحثية. إنك تساعد في تحديد القيم الرئيسية التي تعتبر مهمة للعمل المجتمعي في العالم العربي، كخطوة أولى لوضع مدونة للأخلاقيات تكون ملائمة ثقافياً وواقعية. القيم هي مجموعة من المعتقدات ما هو الأخلاقي، الحق أو الخير. إن معرفة القيم المهمة الآن يمكن أن تؤدي إلى جهود مستقبلية لوضع قواعد أخلاقية محددة ومبادئ توجيهية. على سبيل المثال، إذا كانت الأسرة تقدر قيمة الصدق، ثم أنها سوف تضع قواعد في بيئهم لمنع الكذب، للإبلاغ عن الضرائب بدقة، ولدائماً يقولون لبعضهم البعض ما يعتقدون حقاً. وبالتالي، فإن الغرض من هذا الاستبيان هو تحديد القيم الكامنة التي تؤثر على صنع القرار في المهن المشاركة في العمل المجتمعي.

فيما يلي قائمة بالقيم التي قد تؤثر على الطريقة التي تقوم بها بالعمل المجتمعي في المجتمعات العربية. على مقياس من 1 إلى 5، يرجى تحديد كيف تؤثر القيم التالية على العمل المجتمعي في العالم العربي، سواء كانت مفيدة أو إشكالية أو غير ذات صلة في العمل المجتمعي، حيث:

- 1: القيمة مشكلة للغاية عند القيام بالعمل المجتمعي في المجتمعات العربية
- 2: القيمة مشكلة إلى حد ما عند القيام بالعمل المجتمعي في المجتمعات العربية
- 3: القيمة لا تؤثر على القيام بالعمل المجتمعي في المجتمعات العربية
- 4: القيمة مفيدة إلى حد ما عند القيام بالعمل المجتمعي في المجتمعات العربية
- 5: القيمة مفيدة للغاية عند القيام بالعمل المجتمعي في المجتمعات العربية

القيمة	5	4	3	2	1
الإحسان (إفادة وتطوير حياة الآخرين)					
عدم الإيذاء (تجنب الإضرار بالآخرين)					
المسؤولية (أن تكون مسؤول عن أفعالك وعن رفاهية المجتمع)					
احترام حقوق الناس (تقدير حقوق الناس)					
احترام كرامة الناس (تقدير قيمة الناس)					
العدالة (تحقيق حقوق الناس ومعاملة الناس بشكل عادل)					
النزاهة (أن تكون صادق وأمين وجدير بالثقة)					
الشفافية (أن تكون واضحاً وعلني حول الأهداف والنوايا والخطط)					

					الكفاءة (أن تكون منتج وتخصص الموارد بشكل مناسب)
					التقمص العاطفي (القدرة على فهم مشاعر الآخرين ووجهات نظرهم كما لو كنت في وضعهم)
					الجدارة (تطوير المعرفة والقدرات اللازمة لأداء مهمة معينة)
					الدمج (تضمن الجميع وتقبل الآخرين)
					التجريبية (استخدام البحث والبيانات لإنشاء خطط وحلول فعالة)
					منظور نقاط القوة (التركيز على الموارد والممتلكات بدلاً من المشاكل والعجز)
					الإحساس بالانتماء للمجتمع (الشعور بالانتماء والالتزام للمجتمع الخاص بالفرد)
					التعاون (التعاون مع الآخرين لإيجاد حلول لمشاكل المجتمع بدلاً من افتراض الخبرة في نفسه)
					التمكين (بناء القدرات وتمكين الآخرين من اتخاذ خياراتهم الخاصة)
					المنظور الإيكولوجي البيئي (النظر في طبقات البيئة المختلفة، بما في ذلك العائلة والأقران والمجتمع والسياسات ، إلخ)
					الضمير (الالتزام بالمواعيد والاهداف وأخلاقيات العمل الجيدة)
					تقدير التنوع (قبول وتقدير اختلافات الأشخاص في الثقافة والدين والجنس والعمر وما إلى ذلك)
					التغيير الاجتماعي (تشجيع النشاط والتحرك الاجتماعي لخلق التغيير داخل المجتمع)
					بناء علاقة (أخذ الوقت للارتباط وبناء علاقة إيجابية مع الآخرين)
					الوقاية والتقدم (منع المشاكل وتعزيز الرفاهية ، بدلاً من انتظار حدوث المشاكل لمعالجتها)
					التواضع (امتلاك قلب متواضع لتكون قادرًا على المساعدة بدون أنانية)

					الكرم (الإيثار والإستعداد لا عطاء الآخرين)
					التدين (الإقرار بدور الدين في حياة الآخرين وأخذه بعين الإعتبار)
					احترام الكبير/الشيخ والسلطة (الاحترام العالي للشيخ والشخصيات ذات السلطة)
					التحفظ والتقليدية (الالتزام بالمعتقدات التقليدية والأعراف والعادات)
					الاتحاد (أن تكون متحد مع الآخرين نحو نفس الأهداف)
					حسن الضيافة (الترحيب والطيبة والكرم مع الضيوف والزوار)
					الجماعية (إعطاء الأولوية للاحتياجات الجماعية للمجموعة على الاستقلال الفردي)
					الشهامة (الحرص على القيام بالأعمال الحسنة ومساعدة الآخرين)
					الشرف (التركيز على حماية سمعة الآخرين وشرفهم ومكانتهم الاجتماعية)
					شجاعة (أن تكون جريئاً ومقداماً)
					الولاء (الإخلاص والوفاء)
					احترام الطبقة الاجتماعية (النظر في تأثير الطبقة الاجتماعية على الحالة الشخصية)
					الفضيلة (التمسك بالمبادئ التي تحدد ما هو الصواب والخطأ، أو السلوك الجيد والسيئ)
تم ترتيب هذه القائمة بشكل عشوائي في الاستبيان تلقائياً عبر الإنترنت.					

إذا كانت هناك قيم أخرى تعتقد أنها تسبب مشاكل عند القيام بالعمل المجتمعي في المجتمعات العربية، يرجى ذكرها أدناه وشرح السبب:

إذا كانت هناك قيم أخرى تعتقد أنها تسبب/فائدة عند القيام بالعمل المجتمعي في المجتمعات العربية، يرجى ذكرها أدناه وشرح السبب:

هل لديك أي تعليقات أخرى؟

Appendix G

Descriptive Statistics for the Impact of Values on Arab Community Work

Ethical Values	<i>M</i>	<i>SD</i>
Respect for Human Dignity	1.18	1.272
Hospitality	1.17	0.971
Integrity	1.17	1.145
Non-maleficence	1.10	1.166
Beneficence	1.10	1.093
Building Rapport	1.10	1.049
Respect for the Rights of People	1.08	1.289
Responsibility	1.08	1.209
Competence	1.07	1.134
Humility	1.06	1.190
Loyalty	1.04	1.154
Empowerment	1.03	1.177
Sense of Community	1.03	1.163
Collaboration	1.01	1.211
Gallantry	1.00	1.058
Generosity	0.99	1.100
Justice	0.96	1.380
Inclusion	0.93	1.236
Conscientiousness	0.93	1.234
Transparency	0.92	1.381
Respect for Elders and Authority	0.91	1.157
Unity	0.91	1.098
Honor	0.89	1.256
Empathy	0.88	1.265
Morality	0.88	1.289
Courage	0.88	1.066
Social Change	0.86	1.245
Efficiency	0.85	1.225
Appreciation for Diversity	0.80	1.414
Prevention and Promotion	0.69	1.333
Empiricism	0.68	1.302
Ecological Perspective	0.64	1.208
Religiosity	0.60	1.196
Strengths Perspective	0.57	1.257
Collectivism	0.52	1.189
Respect for Social Class	0.35	1.397
Conservatism and Traditionalism	0.31	1.322

Appendix H

Ethical Values for Community Practitioners in the Arab World

Below are two lists of ethical values that are needed or should be considered when doing community work with Arab communities.

List A: Beneficial ethical values according to questionnaire

This list is based on the values assessed in the questionnaire, ordered according to the average rating of each value.

Ethical Values	Average Rating
Respect for Human Dignity	1.185
Hospitality	1.171
Integrity / Credibility	1.166
Non-maleficence	1.104
Rapport and Relationship Building	1.100
Beneficence and Genuine Motives	1.100
Respect for the Rights of People	1.076
Responsibility and Social Responsibility	1.076
Competence	1.071
Humility	1.057
Loyalty	1.038
Empowerment	1.033
Sense of Community	1.028
Collaboration	1.009
Gallantry	0.995
Generosity	0.991
Justice	0.962
Inclusion	0.934
Conscientiousness	0.929
Transparency	0.924
Unity and Peace	0.910
Respect for Elders and Authority	0.910
Honor	0.886
Empathy	0.882
Morality	0.877
Courage	0.877
Social Change	0.858
Efficiency	0.848
Celebrating Diversity	0.801
Prevention and Promotion	0.692
Empiricism	0.682
Ecological Perspective	0.645
Religiosity	0.602
Strengths Focus	0.569
Collectivism	0.521
Respect for Social Class	0.351
Conservatism and Traditionalism	0.308

List B: Other ethical values recommended by participants

This list includes additional values that were recommended by both the interviewees and questionnaire respondents, ordered by the number of interviewees who recommended the value.

Ethical Values	Number of Interviewees
Cultural Competence	14
Kind-Heartedness	13
Privacy	10
Respect for Autonomy	10
Intellectual Development	9
Mutual Respect	9
Respect for Culture	9
Community Participation and Ownership	8
Professionalism	8
Flexibility	7
Social Justice	7
Sustainability	7
Passion	6
Effective Communication	5
Objectivity	5
Personal Freedom	5
Proactivity	4
Punctuality	4
Cultural Pride	3
Creativity	2