

HIV and a Researchers Duty to Warn

Essential Facts of the Case

The essential facts in the case of are the following:

1. John, a professionally accredited psychologist, has information that a client who is HIV positive is having unprotected sex while not notifying their partner of such.
2. John has a signed consent form which outlines the agreement between the HIV positive client and the psychologist.
3. The psychologist is bound to professional standards
4. The client has potentially exposed her boyfriend to HIV as a direct result of her decisions.

Ethical Features of the Case

The ethical features of the case are the following:

1. Autonomy;
2. Nonmaleficence; and
3. Utility;

Autonomy

As it relates to Autonomy the psychologist is faced with determining whether the client will act in a rational manner and govern themselves accordingly. In this scenario John is able to override autonomy in an effort to prevent harm to others.

Nonmaleficence

As it relates to Nonmaleficence the psychologist is faced with acting with due care to ensure harm to others is reduced. Similarly, the client is faced with unintentional and intentional harm that could potentially be caused to her boyfriend by not disclosing her HIV status.

Utility

As it relates to Utility the psychologist is faced with the most good for the most people. In this case, most people would consider the maximum impact of the client not disclosing information. The client's trend to not inform her partners of her HIV status could go beyond just one partner.

Critical Questions of Ethical Features and Essential Facts

The critical questions of the Ethical Features are as follows:

Autonomy

1. Will the client act in a rational manner to prevent future disclosure issues?
2. Will the client disclose her HIV status to her boyfriend if confronted by the psychologist?
3. Will the psychologist breach a level of trust or confidentiality that can impose devaluation of other correspondence?

Nonmaleficence

1. Will harm be reduced if the psychologist informs the boyfriend?
2. Has harm already occurred beyond repair?
3. Will the client continue to expose her boyfriend?
4. Does the boyfriend know their HIV status?
5. Will the psychologist risk a breach of trust resulting in career discipline?

Utility

1. Has more than the client's current boyfriend been exposed?
2. Will many people be harmed by the clients approach to HIV status?

Response

The psychologist is faced with a challenge of balancing the integrity of confidentiality with the potential health of the clients boyfriend. Without more information it is hard to determine if the boyfriend has already been exposed or if they had HIV prior to having sex with their current partner. The psychologist could compel the client to inform her boyfriend by explaining the overall risk she is exposing someone she is with by virtue of rational explanation of the problem. The psychologist could work with the client to talk about the risk of HIV and the overall potential risk it could have on her boyfriend if he was found to be positive. The psychologist could explore, with the client, any additional information about previous interactions where her HIV status was not declared.

Each of the examples above would require working with the client to rationalize and reason. However, if the approach was not welcomed the psychologist could document the issue and use the data to prevent future occurrences. In this case, the psychologist would not be affecting the integrity of the study as the result is an outcome.

Ethical Recommendation

There is not enough supporting information to know if the boyfriend has already been exposed to the level that they are also HIV positive. Without the ability to verify the HIV status of the boyfriend without impact confidentiality and ultimately the study I believe it would be negligible in the overall result to inform the boyfriend of the HIV status of his girlfriend. I believe the most ethical approach would be to use the data as a keystone in development of future programs which can address and resolve such potential breaches. In this case, an amended confidentiality agreement could support the release of data if it is believed that the HIV positive client has potentially spread HIV. I believe contact tracing as a part of the release document could support such a initiative.