

# **Ethical Practice of Industrial Hygiene**

**(A Status Report)**

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**modified by Robert D. Soule from a  
presentation prepared by the  
Joint Industrial Hygiene Ethics and  
Education Committee**

**AIHA – Yuma Pacific Southwest  
Meeting  
January 20, 2005**

## **Objectives for this Session**

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- Present an overview of how the industrial hygiene ethics program has evolved**
- Review the Canons of Ethical Behavior and examine examples of ethical dilemmas**
- Encourage you to think through ethical dilemmas before acting**
- Discuss the importance and benefits of ethical behavior in our profession**
- Review results of recent Ethics Survey**
- Discuss past ethical enforcement actions and path forward**

## **What is good ethical behavior?**

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**"The single largest problem in ethics is the inability to recognize ethical issues."**

Rushworth M. Kidder, Ethicist  
*Association Management*  
*October 1999*

## **Why Do We Need a Strong Code of Ethics?**

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- Professional recognition
- Legislative/regulatory status
- Changing scope of work/definition of practice
- Tension between rights of the employee and those of the employer
- External forces and threat of regulation

## **Benefits from Ethical Behavior**

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- builds trust**
- builds employee, shareholder, and public loyalty**
- avoidance of monetary fines**
- minimizes government intervention (i.e., the promulgation of regulations)**

## **Why are ethical issues a major concern for our professions and businesses?**

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### **Consider current issues facing the nation today**

- **accounting practices that misrepresent a company's financial health**
- **campaign Finance**
- **stem Cell Research**
- **cloning**
- **protecting priests accused of sexually abusing children**

## Factors That Increase the Likelihood of Ethical Misconduct

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- increased competitiveness in business
- changing social values
- cultural shifts (new role models)
- globalization and decentralization of business
- technological advances
- less oversight

Joint Industrial Hygiene Ethics Education Committee

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## Causes of Ethical Dilemmas New Jersey 1994\*

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- |   |     |
|---|-----|
| <input type="checkbox"/> On the job pressure (too many responsibilities)        | 56% |
| <input type="checkbox"/> Pressure caused by economic implications of result     | 53% |
| <input type="checkbox"/> Lack of experience                                     | 47% |
| <input type="checkbox"/> Pressure caused by professional implications of result | 42% |
| <input type="checkbox"/> Poor design of study                                   | 40% |
| <input type="checkbox"/> Friendship in regard to "whistle blowing"              | 40% |

\*Ethical Issues for Industrial Hygienists: Survey Results and Suggestions, Goldberg, L.A.,<sup>8</sup>  
Greenburg, M.R., AIHA Journal, (54) March 1993, 127-134  
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## Causes of IH Ethical Dilemmas New Jersey 1994\*

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<input type="checkbox"/> Competition with peers	<b>39%</b>
<input type="checkbox"/> Lack of training in ethics	<b>36%</b>
<input type="checkbox"/> Poor implementation of design	<b>35%</b>
<input type="checkbox"/> Lack of communication skills	<b>33%</b>
<input type="checkbox"/> Pressures not related to job	<b>15%</b>

\*Ethical Issues for Industrial Hygienists: Survey Results and Suggestions, Goldberg, L.A.,<sup>9</sup>  
Greenburg, M.R., AIHA Journal, (54) March 1993, 127-134  
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## Type of Ethical Misconduct Observed – 1994\*

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<input type="checkbox"/> Deliberate overstatement of positive and understatement of negative results	<b>36%</b>
<input type="checkbox"/> Refraining from reporting an incident	<b>30%</b>
<input type="checkbox"/> Failure to share credit on a publication	<b>26%</b>
<input type="checkbox"/> Deliberate failure to acknowledge data limitations	<b>26%</b>
<input type="checkbox"/> Holding back findings to avoid negative results	<b>26%</b>
<input type="checkbox"/> Plagiarism	<b>23%</b>
<input type="checkbox"/> Borrowing from another's proposal	<b>21%</b>
<input type="checkbox"/> Deliberate failure to control data quality	<b>21%</b>
<input type="checkbox"/> Failure to protect confidential data	<b>20%</b>
<input type="checkbox"/> Release of results of study before peer review	<b>19%</b>

\*Ethical Issues for Industrial Hygienists: Survey Results and Suggestions, Goldberg, L.A.,<sup>10</sup>  
Greenburg, M.R., AIHA Journal, (54) March 1993, 127-134  
Joint Industrial Hygiene Ethics Education Committee

## Type of Ethical Misconduct Observed – 1994\*

<input type="checkbox"/> Release study results before peer review	19%
<input type="checkbox"/> Avoiding competition by refusing to share data	19%
<input type="checkbox"/> Research designed to favor a specific result	18%
<input type="checkbox"/> Fabrication of data	17%
<input type="checkbox"/> Hide key results by releasing too much data	17%
<input type="checkbox"/> Destroy contradicting thesis data	15%
<input type="checkbox"/> Failure to protect confidentiality of human subjects	13%
<input type="checkbox"/> Avoiding work on subjects that might threaten supporters	11%
<input type="checkbox"/> Knowingly in conflict-of-interest situations	11%

\*Ethical Issues for Industrial Hygienists: Survey Results and Suggestions, Goldberg, L.A.,<sup>11</sup> Greenburg, M.R., AIHA Journal, (54) March 1993, 127-134  
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## Type of Ethical Misconduct Observed – 1994\*

<input type="checkbox"/> Deliberate failure to disclose sources of support	9%
<input type="checkbox"/> Change of definitions after the fact	7%
<input type="checkbox"/> Inadequately informing human subjects about invasive procedure	7%
<input type="checkbox"/> Deliberately voting against a competitive proposal	5%
<input type="checkbox"/> Deliberately delaying peer review of another's paper or proposal	5%
<input type="checkbox"/> Failure to share credit on a patent	2%

\*Ethical Issues for Industrial Hygienists: Survey Results and Suggestions, Goldberg, L.A.,<sup>12</sup> Greenburg, M.R., AIHA Journal, (54) March 1993, 127-134  
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## Causes of Ethical Dilemmas – Great Britain 2002\*

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<input type="checkbox"/> Economic pressure	42%
<input type="checkbox"/> Lack of ethics training	12%
<input type="checkbox"/> Lack of empathy with work force	10%
<input type="checkbox"/> Other on-the-job pressures	15%
<input type="checkbox"/> Other causes not stated	24%

\*Observations of Ethical Misconduct Among Industrial Hygienists in England,  
Burgess, G.L., Mullen, D., AIHA Journal (63) March/April 2002, 151-154  
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## Type of Ethical Misconduct Observed – Great Britain 2002\*

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<input type="checkbox"/> Plagiarism	51%
<input type="checkbox"/> Failure to protect confidential data	37%
<input type="checkbox"/> Failure to share credit on a report/publication	27%
<input type="checkbox"/> Fabrication of data	25%
<input type="checkbox"/> Criticize the ability or integrity of another hygienist for own gain	23%
<input type="checkbox"/> Holding back or disguising data	19%
<input type="checkbox"/> Survey design to favor a specific outcome	11%
<input type="checkbox"/> Destruction of data that contradicts desired outcome	7%
Deliberately not reporting an incident	7%

\*Observations of Ethical Misconduct Among Industrial Hygienists in England,  
Burgess, G.L., Mullen, D., AIHA Journal (63) March/April 2002, 151-154  
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## IH Code of Ethics – Recent Chronology

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- ❑ Code of Ethics for Professional Practice developed by the AAIH Ethics Committee in 1968
  - officers and councilors accepted the code
- ❑ renewed interest in ethics by AAIH and ABIH in 1974
- ❑ AIHA Law Committee completed a code of ethics in 1977
- ❑ AAIH revised code of ethics based upon membership input and approved by formal vote
- ❑ AIHA and ACGIH adopted the AAIH code of ethics in 1981

## IH Code of Ethics – Recent Chronology

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- ❑ The four IH organizations (I.e., AIH, ABIH, AIHA and ACGIH) chartered the Code of Ethics Task Force in 1991
- ❑ Outcome of Task Force was:
  - Revised Code of Ethics with Interpretive Guidelines in 1995
  - Development of Joint Industrial Hygiene Ethics and Education Committee
  - ABIH has authority to censure or revoke certifications (CIHs and CAIHs)
  - Education is key component for promoting code of ethics

## Why Code of Ethics was Revised

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- Past code consisted of general principles of ethical conduct only
- Lack of interpretive guidelines
- Practice of Industrial Hygiene has changed in scope since 1981
  - Employment patterns changed
  - Responsibilities of EHS professionals became more general
  - Allied EHS professionals required to take on industrial hygiene duties
  - Entry level IH professionals take on responsibilities without benefit of experience or peer association

## Joint Industrial Hygiene Ethics Education Committee (JIHEEC)

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### Mission Statement

The Joint Industrial Hygiene Ethics Education Committee, composed of members of AIHA, AIH, ACGIH, and ABIH, will jointly promote an awareness and understanding of the Code of Professional Ethics for Industrial Hygienists.

## **JIHEEC Goal**

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- Conduct educational activities for members of all four organizations and interested parties that will assist in promoting the Industrial Hygiene Code of Ethics among industrial hygienists,**

**that is, raise awareness and set the stage for discussions on ethics.**

## **JIHEE Objectives**

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- Provide representation by AIHA, AIH, ACGIH, and ABIH**
- Conduct educational activities designed to increase awareness, understanding and application of the Industrial Hygiene Code of Ethics**

## **JIHEE does not . . .**

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- Perform Enforcement Action**
  - Many violations are difficult to prove, documentation often inadequate
  - Prior to JIHEE formation, formal mechanisms to educate the membership had not been fully implemented
  - Potential for significant litigation expense
  - Professional associations have no authority to enforce codes, per federal anti-trust law

## **JIHEEC does not . . .**

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- Determine policy for individual concerns**
- Offer written determination regarding potential code violations (but do offer interpretations to the code)**

## Industrial Hygiene Canons of Ethical Conduct

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- Six Canons of conduct with interpretive guidelines
  - Interpretive guidelines intended to be a “living document”
  - Not intended to be all inclusive
- Ethical guidelines are a mixture of ethics and etiquette
- May establish a standard of behavior that is higher than the law requires
- Located in ABIH, ACGIH, and AIHA web pages
  - [www.abih.org](http://www.abih.org)
  - [www.acgih.org](http://www.acgih.org)
  - [www.aiha.org](http://www.aiha.org)

## Scenario 1

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**You are bound by a contract to protect the confidentiality of the project for which you are hired. Because of the complexity of the IH issues, you wish to obtain input from a professional peer regarding the technical aspects of the project.**

## Do You:

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- A.** Ignore your desire to obtain input from a professional peer because it would violate the code of ethics;
  - B.** Discuss the project without disclosing confidential details, e.g., name of the company, individuals or other; or
  - C.** Discuss in full disclosure with a professional peer who is unrelated to the project and lives thousands of miles away.
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## Scenario 2

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You witness what you believe is a clear violation of the code by one of your professional peers who is a CIH.

## Do You:

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- A.** Contact ABIH, ACGIH, and/or AIHA and report the incident;
- B.** Submit a written allegation of a breach of ethical duty or professional responsibility to the chair of the JIHEEC; or
- C.** Explain to the peer that they are violating the code and give them an opportunity to correct the situation before taking further action. If it remains unresolved then you could submit a written allegation of a breach of ethical duty or professional responsibility to ABIH.

## Scenario 3

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**As an industrial hygienist at a chemical manufacturing plant, you are faced with having to perform air sampling for an intermediate chemical for which there is no standard sampling method.**

## Do You:

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- A.** Search for a sampling method that is statistically significant, peer-reviewed and recognized by the profession;
- B.** Use a non peer-reviewed sampling method that was developed by the plant lab assistant; or
- C.** Use a standard sampling method developed for another intermediate chemical produced at your plant.

## Scenario 4

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**You are invited by a vendor from whom you purchase a majority of your monitoring equipment and PPE to play golf and have dinner at an exclusive country club.**

## Do You:

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- A. Accept the offer and ask if he wouldn't mind throwing in a sleeve of balls and a hat;**
- B. Investigate your company's policy on accepting vendor gifts and determine the best course of action with your supervisor; or**
- C. Decide to accept the offer, but only if you can pay for your own green fees and dinner.**

## JIHEEC Ethics Survey - 2002

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- Survey published in March 2002 issue of The Synergist requesting response**
  - **Also available for response in JIHEEC webpage**
- Twelve questions regarding experience with ethical issues**
- Twelve survey responses**
  - **127 website visits to review questionnaire**

## JIHEEC Ethics Survey Results

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- 82% are "Very Familiar" with IH canons of ethics
- 50% "Somewhat Routinely" refer to the IH canons
  - 25% Routinely
  - 17% Never
  - 8% Rarely
- 50% have not been involved in ethical dilemma
  - 42% have been involved
  - 8% did not respond

## JIHEEC Ethics Survey Results

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- 75% have been asked or directed to conduct themselves contrary to canons of ethics
  - 25% have not been asked
- 58% referred to canons of ethics for assistance in their dilemma
  - 42% did not refer to canons
- 50% believe the canons of ethics are not deficient
  - 33% believe the canons are deficient
  - 17% did not respond

## JIHEEC Ethics Survey Results

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- 83% responded the focus on ethical conduct within IH community needs to be enhanced
  - 17% responded the focus does not need to be enhanced
- 50% responded that additional resources and funding should be made available for reviewing and enforcing ethics
  - 50% responded no additional resources or funding are needed
- 75% were not willing to increase dues for ethics enforcement
  - 25% were in favor of dues increase

## JIHEEC Ethics Survey Results

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- General Comments (not all inclusive)
  - ABIH is only organization that actively pursues ethics concerns
  - More examples of ethical/unethical practice
  - The practice continues to change and the "explanatory notes" need regular updating
  - Hearing review of ethical behavior and/or violations
  - Jail time for managers who have IHs who violate the rules
  - The association publish the names of bad actors in the widest possible manner

## Enforcement Issues

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- ❑ Negligence and malpractice are often lumped together with ethics
- ❑ Joint task group formed in late 1994
- ❑ Charged with reviewing the options and issues relative to enforcement
- ❑ Did the following:
  - Surveyed 12 similar professional association on ethics enforcement
  - Reviewed pros/cons of 6 enforcement options
  - Legal review of enforcement without regulation issues

## Ethics Enforcement – 1994 Joint Task Group

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- ❑ Six options reviewed:
  1. No enforcement
  2. Education
  3. Mediation
  4. Arbitration
  5. Title protection
  6. Enforcement “as is”

## **Ethics Enforcement – 1994 Joint Task Group Recommendations**

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- Regardless of choice, education and communication needed**
- A continuum of options should be considered**
- The four associations should consider establishing one ethics committee**

## **Ethics Enforcement – 1994 Survey Findings**

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- Surveyed 12 Allied Professional Societies**

<b>AAEE</b>	<b>BCSP</b>	<b>NEHA</b>
<b>NSPE</b>	<b>CRBOH</b>	<b>AAHP</b>
<b>NCS</b>	<b>AAOHN</b>	<b>ACOEM</b>
<b>ASSE</b>	<b>ABOHN</b>	<b>MCA</b>

## Ethics Enforcement – 1994 Survey Findings

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- Majority have existing code
- Six associations have some form of state licensing
- Majority had ethics committee
- Only 2 have a charter to enforce
- Only 4 have attempted to resolve an ethics claim

## Recent Informal Survey of Allied Professionals

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- Three Organizations Contacted
  - BCSP
  - ABHP
  - IPEP
- BCSP is the most active handling ethical concerns
  - Generally one ethical concern per year
  - Review follows Article XIV procedure and reviewed by executive board for decision and action
- ABHP has experienced two ethical concerns
  - Handled by ethics committee following SOP
- IPEP has not experienced any ethical concerns

## **Ethical Allegations – The AIHA Experience**

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- AIHA involved in three ethical concerns**
  - One case became a legal battle at a significant cost to AIHA**
  - Enforcement actions are now deferred to ABIH**

## **Ethical Allegations – The ABIH Process**

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- ABIH evaluates ethics allegations for potential censure or revocation of Diplomates (CIHs or CAIHs)**
- Criteria for Censure or Revocation of Certification:**
  - Misrepresentation with intent to deceive**
  - Fraud in the examination or recertification process**
  - Unethical practice**
  - Activities which discredit the profession**
  - Conviction of a felony**

## Summary

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- ❑ A formal ethics program is an important and necessary element of our profession
- ❑ Education should continue as the primary means to promote ethical behavior
- ❑ Industrial Hygienists should have awareness of ethical standards of performance and practice them
- ❑ Continue to expand competency base
- ❑ Think through the outcome before acting
  - Would you want your mother to see a news story about your actions?

## Discussion on the Path Forward

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- ❑ adequacy of IH canons of ethics and interpretations
- ❑ Is ethics education enough?
- ❑ ethics enforcement
  - Who should enforce ethics?
  - What process should be used?
  - At what cost?