

An affiliate of the American Psychological Association

Officers

President Linda K. Knauss, Ph.D.

President-Elect Peter A. Keller, Ph.D.

Past President Jeffrey Pincus, Ph.D.

Treasurer Emily L. Stevick, Ph.D.

Secretary Debra B. Resnick, Psy.D.

Board Chairs

Communications Pauline W. Wallin, Ph.D.

Internal Affairs Stephen N. Berk, Ph.D.

Professional Affairs Jeffrey A. Gold, Ph.D.

Program & Education Melvin L. Rogers, Ph.D.

Division Presidents

Academic Psychology Jed Yalof, Psy.D.

Clinical Psychology Peter Goldenthal, Ph.D.

Industrial/Organizational Psychology Stanley Frankel, Ph.D.

Public Sector Psychology Richard J. Cohen, Ph.D.

School Psychology Charles J. Lambert, Ph.D.

APA Representatives

Patricia M. Bricklin, Ph.D. Mary Anne Murphy, Ph.D. Stephen A. Ragusea, Psy.D.

Executive Officer Thomas H. DeWall, CAE

Professional Affairs Officer & Deputy Executive Officer Samuel J. Knapp, Ed.D.

Government Relations Consultant Susan M. Shanaman, J.D.

PENNSYLVANIA PSYCHOLOGICAL ASSOCIATION

416 Forster Street • Harrisburg, Pennsylvania 17102-1714 • Telephone 717-232-3817 • Fax 717-232-7294

March 23, 1998

ORIGINAL: 1931

Ms. Jackie Lutz, Counsel State Board of Psychology 116 Pine Street PO Box 2649 Harrisburg, PA 17105-2649

RECEIVED

MAR 25 1993 BPOA LEGAL COUNSEL

Dear Ms. Lutz:

On behalf of the Pennsylvania Psychological Association (PPA), I am writing in regard to the proposed regulations of the State Board of Psychology dealing with sexual intimacies. PPA agrees with the State Board of Psychology that there is a need to amend this section of the regulations and we find much merit in regulations proposed by the State Board of Psychology. We do, however, find one section to be ambiguous and in need of clarification and change.

Need for Regulations

PPA finds much merit in the proposed regulations which, for the most part, are similar to those found in the Ethical Principles and Code of Conduct of the American Psychological Association. The State Board of Psychology regulations go a step beyond the APA Code of Conduct by explicitly prohibiting sexual contact with immediate family members (parent/guardian, child, spouse) of patients. PPA supports these changes and believes they are consistent with the manner in which the APA Ethics Office interprets the APA Code of Conduct.

Suggested Modification

However, PPA does have a problem with the wording of the definition of sexual intimacies. The definition of sexual intimacies prohibits many activities such as sexual intercourse, sexual invitations, soliciting a date, masturbation, etc., which are clearly sexual and clearly should be grounds for disciplinary actions. However, the definition also includes "kissing, inappropriate hugging or touching or any other inappropriate physical contact or inappropriate self-disclosure" which may not be sexual and should not always be grounds for disciplinary actions in and of themselves. I do not believe that members of the State Board of Psychology want to prohibit or discipline psychologists who may engage in an occasional hug or who have, at sometime or another, touched a patient. These activities are certainly part of normal social interaction and some patients (especially child patients) may feel offended if a psychologist avoids a hug or withdraws quickly from an accidental physical touch. Unfortunately, the wording in the section on sexual intimacies is ambiguous and could lead to consistent misinterpretations by psychologists and patients.

A first reading of the proposed regulations would make it seem that the wording "inappropriate hugging, etc." would be sufficient to clarify the intent of the Board. However, the word inappropriate has a broad meaning that encompasses a wide range of behaviors that are not suitable or fitting. By analogy, a physician may, using the best of his or her judgement and following acceptable medical standards, order an antibiotic medication for a patient. If the medication does not clear up the infection, then it was inappropriate. We certainly would not discipline a physician who prescribed a medication which did not work, if he or she followed acceptable medical practice in doing so. Similarly, a psychologist may, using the best of his or her judgement and following acceptable professional standards, engage in limited and focused selfdisclosure to help a patient "normalize" a problem or as a means of expressing empathy. If the self-disclosure did not help the patient, then it would be inappropriate. It would not be desirable, however, to discipline a psychologist for using reasonable and professionally acceptable interventions which, for whatever reason, were not successful.

Conclusion

We would like the definition of sexual intimacies rewritten so that it is clear that the State Board is prohibiting sexualized or eroticized hugging, touching, physical contact or selfdisclosure. Obviously such eroticized behaviors should be grounds for disciplinary actions.

If modifications are made to clarify the intent of the proposed definition of sexual intimacies, then PPA would be able to support these proposed regulations. We hope that such a clarification can be made.

I would be glad to provide you with additional information if you wish.

Sincerely,

Samuel Knapp, Ed.D. Professional Affairs Officer