

DEPARTMENT OF PSYCHOLOGY

2006-2007
GRADUATE ACADEMIC
HANDBOOK

**Including Departmental & Area
Requirements, Course Listings,
and Thesis/Dissertation
Information**

UNIVERSITY OF HOUSTON
COLLEGE OF LIBERAL ARTS AND SOCIAL
SCIENCES

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This handbook is updated annually. Graduate students are to follow the handbook from the year they entered the program.

INTRODUCTION

This handbook presents some of the information you need as a graduate student in psychology at the University of Houston. It provides information, which is essential for fulfilling your degree requirements. It is important to realize that some of these requirements may be subject to change. The aid of a faculty or staff expert will be helpful in defining some of the more complex questions and concerns you may encounter during your enrollment in the graduate program. A few of our many experts are:

- academic advisors.
- program directors.
- faculty advisors.
- administrative staff.

DEPARTMENTAL GOALS, PROCEDURES, & REQUIREMENTS

This handbook describes current academic departmental regulations and program area requirements for graduate education in psychology. The University has minimum requirements for all graduate students, but these requirements are superseded by the more specific departmental requirements and/or program requirements. In some cases the program requirements take precedence.

Students are accountable for familiarizing themselves with requirements. Staff are available to assist and guide students; however, it is the students' responsibility to know the University, College, and Departmental policies and procedures as they apply to graduate study.

In extenuating and/or unusual circumstances, written permission from the Program Director, Department Chair, Director of Graduate Education and/or the Graduate Education Committee may waive or revise departmental requirements. Decisions on such requests are made on an individual basis and must be approved at the Departmental, College, and University level.

GENERAL REQUIREMENTS

➤ ***Undergraduate Degree***

Every student must have an official transcript with a posted bachelor's degree on file in the academic affairs office.

➤ ***Transfer Hours and Credit***

- ◆ Transfer Courses (limit: 6 hours)
Students who have completed graduate courses at other accredited institutions may petition to have those courses accepted by the University of Houston. No course credits below the 6000 level will satisfy departmental or area course requirements. First, the student should meet with the instructor

teaching the equivalent course at UH with a course description, syllabus, and text that was used for the course completed at the other institution. If the instructor agrees that the course is equivalent to ours, a graduate petition must be submitted with the supporting documentation to the academic affairs office for processing and approval by the Program Director, the Director of Graduate Education and/or Department Chair. (GRADUATE PETITION FORMS ARE AVAILABLE IN THE ACADEMIC AFFAIRS OFFICE)

- ◆ **Transfer of a Master's Degree**
Students entering the program at the University of Houston with a Master's degree must provide official transcripts indicating satisfactory completion. The transfer of Master's degree credit must be approved by the student's Program Director, the Director of Graduate Education and/or Department Chair. A memo indicating such approval should be filed with the academic affairs office. Additional work may be deemed necessary for satisfactory conformance with departmental standards. **Credit for a previously earned Master's Degree is not automatic; every case is decided on its own individual merits.**

➤ ***Continuous Enrollment***

All graduate students in the Department of Psychology are required to maintain full-time, continuous enrollment during their entire educational career. Please refer to Appendix A for the Department's Graduate Full-Time Status Policy. Exceptions to this requirement may be made in some cases but must be approved by the Program Director, the Director of Graduate Education, and/or the Department Chair. The requests must be submitted to the academic affairs office prior to the beginning date of the semester when the reduced load is desired.

(GENERAL PETITION FORMS ARE AVAILABLE IN THE ACADEMIC AFFAIRS OFFICE)

➤ ***Degree Objective***

During your graduate education, your progression from masters to doctoral student will require a change in academic status. This typically changes at the beginning of your third year of study.

(MORE INFORMATION IS AVAILABLE IN THE ACADEMIC AFFAIRS OFFICE).

➤ ***Incomplete***

A grade of "I" which has not been changed within one calendar year will be changed to an "F".

➤ ***Leaves of Absence***

Leaves of absence for one semester may be approved by the faculty of the program area. Any leaves longer than one semester must be approved by the Program Director, Director of Graduate Education and/or Department Chair, and the Graduate Education Committee. Unauthorized leaves will necessitate competitive readmission.

(GENERAL PETITION FORMS ARE AVAILABLE FROM THE ACADEMIC AFFAIRS OFFICE)

➤ **Time Limits**

- ◆ **Master's**
The Master's degree should be completed within 2 years after admission to the graduate program. University policy states that any student who does not complete the master's degree within 5 years will be automatically dropped from the program.
 - ◆ **Ph.D.**
Students are generally expected to complete the doctorate within a total of 100 hours, excluding hours awarded at the Master's level. ***Clinical students are expected to complete the program's requirements within 130 doctoral hours.*** After the 100 (or 130) doctoral hour cap is reached, the University will begin charging students premium tuition rates, equivalent to out-of-state rates.
 - ◆ **Social and Developmental Students**
Students entering with a Master's degree should complete the Ph.D. within three years. Students without a Master's degree should complete the Ph.D. within four years. The **MAXIMUM** expected time allowed for the completion of the Ph.D. is six years.
 - ◆ **Clinical and I/O Students**
Students entering with a Master's degree should complete the Ph.D. within four years. Students without a Master's degree should complete the Ph.D. within five years. The **MAXIMUM** expected time allowed for the completion of the Ph.D. is seven years, including the time to complete the master's degree.
- ⇒ Students who do not meet the time limitations must request an extension by contacting the Program Director and the Director of Graduate Education and/or Department Chair for initial approval. The request must come before the Graduate Education Committee for the final approval. Extensions will only be awarded under exceptional circumstances. Further, any deviation from a standard master's thesis or doctoral dissertation must be approved by the department's Graduate Education Committee.

➤ **Recording, Implementing, and Enforcing Requirements**

Each student, upon acceptance, is assigned a faculty advisor by the appropriate Program Director. The faculty advisor may be changed at the request of either the student or the faculty member. Please see Appendix D for Guidelines for Student-Faculty Relationships. The faculty advisor has primary responsibility for monitoring the student's progress. A minimum of three meetings per year is essential: 1) before fall for registration, 2) before spring for registration, 3) a final meeting in May to evaluate the graduate student's progress. The student and the faculty advisor are responsible for seeing that the student's progress and accomplishments are properly recorded in the file maintained by the academic affairs office.

- ◆ **Annual Graduate Student Evaluation**
This evaluation is intended to analyze the educational and intellectual

achievement of each student and to track the progress of matriculation. Each program area has its own evaluation procedures and forms that differ, so check with both the faculty advisor and Program Director. The evaluations must be filed with the academic affairs office.

All students will be evaluated on the following criteria: progression towards degrees, performance in courses, research performance, teaching performance (if applicable), involvement in program/department, ethical and professional conduct and sensitivity to cultural and individual diversity. In addition, students in the clinical and I/O programs will be evaluated on professional practicum performance. Clinical students will also be evaluated on the dimension of interpersonal effectiveness. Interpersonal effectiveness subsumes those characteristics that are associated with effective professional competence, including freedom from behavioral problems that may seriously limit a student's effective functioning in a professional capacity, commitment to personal growth and self understanding, accurate representation of professional competencies, responsibility for identification of needs and seeking additional training or assistance, personal maturity, ability to work with others, motivation, responsiveness to feedback, and professional communication and follow-through.

Based on the annual student evaluation, any significant problem identified by the faculty will be communicated to the student in writing by the program director, including recommendations for remediation, deadlines for resolving any concerns, possible consequences of the failure to do so, and the appeals process.

➤ **Termination**

The Department may terminate a student at any time if the rate of progress, academic performance or performance across other competencies is not satisfactory. A satisfactory rate of progress toward completion of degree requirements is required throughout the student's enrollment (see time limits for completion of departmental requirements on page 5). Students earning three grades of "C+" or lower during the course of graduate training will be dismissed automatically from the program.

Termination procedures may also be initiated by programs if a student's competence is substandard in any one of the following areas: teaching, research, ethical conduct, sensitivity to cultural and individual diversity, professional practicum performance (clinical and I/O students), or interpersonal effectiveness (clinical students).

Programs may initiate termination proceedings based on the egregiousness of the deficiency or student misconduct or the student's failure to complete appropriate remedial measures in a timely manner.

- 1) Before formal termination procedures begin, the student will receive written notification from the appropriate Program Director indicating his/her competency or academic performance is being evaluated for possible termination from the Department. This letter describes the reasons for the possible termination and, if appropriate, conditions for continued enrollment in the Department. If the program faculty deems it

appropriate that termination be initiated, the procedure for termination is as follows:

- 2) The appropriate Program Director submits a written memo to the Director of Graduate Education and Department Chairperson indicating that program faculty members have reached a decision requesting the student's termination from the program and the Department.
- 3) The Director of Graduate Education and the Department Chairperson independently review the student's records and reach a joint decision regarding termination.
- 4) If the request is approved, the student is notified in writing of his/her termination from the Department. This letter is signed by the Department Chair, Director of Graduate Education, and the Program Director.
- 5) If the student wishes to appeal, he/she will notify the Chairperson of the Psychology Department in writing within 10 working days. At such time, the Department's Graduate Education Committee will review the student's records and reach a decision as to whether or not they concur with the request of the Program to terminate the student.
- 6) Should the student wish to continue the appeal process, he/she would submit a written appeal to the Associate Dean of Graduate Studies in the College of Liberal Arts and Social Sciences within 10 working days. The role of the associate dean is only to determine if the department followed correct termination procedures.
- 7) If so desired, students also may continue the appeal process by submitting a written appeal to the Graduate and Professional Studies Grievance Committee within 30 calendar days of the College decision.

➤ ***Grievances and Complaints***

Any student who wishes to file a grievance or complaint should contact their Program Director and/or the Department Chair. The student must file official notice of an intention to grieve within 30 days of the point in time when the grievant has knowledge or should have had knowledge of the problem being grieved. At this time, informal efforts will be made to resolve the grievance. In the event that an informal resolution is not possible, the grievant must submit a formal grievance within 60 days of filing the intent to grieve notice. In filing the formal grievance, the grievant must state 1) when he/she discovered the issue being grieved, 2) what issue is being grieved and provide evidence to support the grievance, 3) what is the desired solution. Depending on the nature of the grievance or complaint, the Program Director and/or Department Chair will initiate appropriate review procedures. The American Psychological Association Ethical Principles of Psychologists Code of Ethical Conduct shall govern the manner in which any ethical complaints are addressed (see Appendix C). In the event that a resolution is not possible at the Departmental level, the grievant may submit a written Notice of Appeal to the Associate Dean of Graduate Studies of the College within 10 days of the Departmental decision. Links to the College and University procedures for addressing student grievances regarding grades, course requirements, and classroom procedures or other academic problems are presented below.

For the grievance policy of the College of Liberal Arts and Social Sciences, please see http://www.uh.edu/grad_catalog/las/las_policies.html. and http://www.class.uh.edu/classmain/class_gradgrievance1.htm

For the grievance policy of the University of Houston, please see http://www.uh.edu/grad_catalog/garr/grievance_pol.html.

TEACHING REQUIREMENTS

- **Teaching Assistant Requirements**

Teaching assistants (TA's) aid the instructor of record with responsibilities such as grading, proctoring exams, and holding office hours. To serve as a TA, students must be in good standing, progressing satisfactorily toward their degree, and enrolled in a minimum of 9 hours for fall and spring semesters, or 6 hours for summer semesters. TA assignments are typically for 20 hours/week. During the second semester of the first year, students are required to participate in a teaching seminar as part of their TA assignment. This seminar will constitute one-third (6.66 hours/week) of the TA assignment for that semester.

- **Teaching Fellow Requirements**

Teaching Fellows (TF's) are instructors of record for courses. To serve as a TF, students must have completed two years of graduate study in this program*, be in good standing, progressing satisfactorily toward their degree, and enrolled in a minimum of 9 hours for fall and spring semesters, or 6 hours for summer semesters. TF assignments are typically for 20 hours/week. During the first semester of serving as a TF (typically the first semester of the third year), students are required to enroll in the teaching practicum course.

**Students who received a masters degree in Psychology from another institution before beginning graduate study here and have prior teaching experience from that other program may be considered for a TF assignment prior to their third year.*

All teaching assignments are based on Departmental need. The University does not allow students to receive any form of graduate student appointments (including TA and TF) after their sixth year in the program.

MASTER'S DEGREE REQUIREMENTS

*****The Psychology Department does not offer a terminal MA degree (many requirements for the MA and Ph.D. are similar).

➤ Course requirements

Minimum departmental requirements are 45 semester hours for the MA degree. These hours should be completed during the student's first two years. **All core courses must be passed with a grade of B- or higher.**

Departmental Core Courses

PSYC 6300 Statistics for Psychology
PSYC 6302 Experimental Design
PSYC 6301 Psychological Theory: History
& Systems*

9 semester hours

Four Required Courses in Major Area
12 semester hours

Two or more Foundations Courses outside
of Major Area (or equivalent)
6 semester hours

Four Research and/or Applied Practica
12 semester hours

Two Master's Thesis Courses
PSYC 6399, 7399
6 semester hours

All graduate students must take one Foundations course, or equivalent, from each of two areas other than their major area. Students also frequently take the Foundations course in their area. Therefore, students will often take three or more Foundations courses.

The courses listed below meet the Foundations requirement:

PSYC 6303 Foundations of Clinical
Interventions I (only offered for Clinical
students)

PSYC 6304 Foundations of
Developmental Psychology

PSYC 6306 Foundations of Cognitive
Psychology

PSYC 6397 Foundations of Cognitive
Neuroscience

PSYC 6308 Foundations of
Neuropsychology I

PSYC 6338 Foundations of Social
Psychology

PSYC 6370 Foundations of Industrial/
Organizational Psychology

PSYC 7342 Biological Bases of Behavior

*Note. Students may receive their masters degree without PSYC 6301 if their schedule did not permit completion of the course prior to completing all other masters requirements. The course **MUST** be completed prior to receiving their Ph.D.

➤ Thesis requirements

The Department of Psychology requires the MA, including a formal Masters thesis based upon research for all students. A Masters degree equivalency is not acceptable for fulfilling this degree requirement. Students entering with an MA or MS degree and a research thesis from another university may petition their area committee to review that thesis and recommend that it be accepted as meeting this requirement.

Sequence for the Thesis

1) Posted Bachelor's Degree: The Academic Affairs Office must have a posted bachelors degree in the student's file.

2) Completion of the 45 core hours

3) Enrollment in Thesis Courses: PSYC 6399 and PSYC 7399 (6 semester hours) is required. Once you have begun taking thesis hours, you must remain continuously enrolled in one of these courses until the thesis is completed and approved.

4) Committee: A committee comprising three (3) members is required. Two faculty members, including the committee chair, must be from the Department of Psychology. The third faculty member may be selected from outside the student's area within the Department of Psychology, a university department other than Psychology, a psychology department from another U.S. university, or the psychological professional community. Of the three required members, no more than one may be an adjunct or part-time faculty member. If the part-time or adjunct faculty member serves as chair of the committee, a full-time, tenure-stream faculty member must serve as co-chair.

a) Approval of the Committee: Committee membership must be approved by the Program Director and the Director of Graduate Education and the Department Chair prior to notification of the Dean of the College of Liberal Arts and Social Sciences. ***

5) Graduation: An application for graduation must be filed at the beginning of the desired graduating semester. If you do not graduate, then you must refile for graduation. ***

6) Written Thesis Proposal: A written thesis proposal must be prepared and provided to each committee member with two signature forms. ***

7) Defense: A written thesis and a public oral defense are required. The final oral defense of the thesis will be publicized as follows:

a) The candidate will circulate a summary of the thesis (may be the thesis abstract) to all Department of Psychology faculty, with a notice posted in the Department no less than one week before the scheduled orals. This will be an open invitation to attend, stating the time and location of the oral examination.

b) A memo with all information should be sent to the Dean of the College of Liberal Arts and Social Sciences.

8) Final Oral Defense: The committee chair must notify the Academic Affairs Office by memo that the student has passed orals and the thesis has been accepted.

9) Submission for Binding: The original and two copies of the approved thesis must be submitted to the College of Liberal Arts and Social Sciences.

***** all forms are available in the Academic Affairs Office**

PH.D. DEGREE REQUIREMENTS

➤ Comprehensive Examination

Memorandum announcing completion of comprehensive examination - Upon successful completion of the comprehensive examination, the area Program Director must send a memo to the Director of Graduate Education with a copy to the Academic Affairs Office (124 Heyne) to be filed in the student's folder.

During the third year, each student should complete the major comprehensive examination. **Students may not attempt the comprehensive examination until they have completed the Master's degree.** The format and requirements for completing the comprehensive examination are established by the area faculty. A memo must be forwarded to the Director of Graduate Education with a copy to the Academic Affairs Office (124 Heyne) stating the date of completion of the comprehensive examination.

➤ Course Requirements

*****A STUDENT MAY NOT ENROLL FOR DISSERTATION HOURS UNTIL THE MASTER'S THESIS IS COMPLETED AND THE COMPREHENSIVE EXAMINATION HAS BEEN PASSED*****

REGISTRATION FOR DOCTORAL DISSERTATION HRS

Graduate students in psychology who are officially working on a dissertation are required to register for Doctoral Dissertation hours each succeeding semester. Once you have begun taking dissertation hours, you must remain enrolled in such hours until the dissertation has been completed and approved.

The minimum * requirements for the Ph.D. degree are 72 hours. In addition to fulfilling the requirements for the MA degree listed above, at least 27 additional hours (i.e., in addition to the 45 hours listed above) must be completed for the Ph.D.

* The minimum requirements for the Clinical Ph.D. degree are considerably greater than above. See Clinical Program Guidelines.

DOCTORAL DISSERTATION COURSES:

These courses, as well as the dissertation itself, should be completed by the fourth (or fifth) year.

Individual area curricula may involve additional semester hours.

These 27 semester hours should include:

Five Additional Courses
(in major area, minor area,
specified related courses, or electives)
15 semester hours

Four Dissertation Courses
PSYC 8399, 8699, 8999
12 semester hours

Note. Students may enroll in fewer than 12 dissertation hours if dissertation is completed before that time and student has enough hours to complete the Ph.D.

Sequence for the Doctoral Dissertation

1) Posted Master's Degree: The academic affairs office must have a posted Master's degree in the student's file.

2) Completion of the 72 hours: These hours include the MA degree courses (45 hours) and the Dissertation courses (27).

3) Enrollment in Dissertation Courses: PSYC 8399, 8699, & 8999 (total of 12 semester hours) is required. Once you have begun taking dissertation hours, you must remain continuously enrolled in one of these courses until the dissertation is completed and approved.

4) Committee: A committee comprising at least four members is required. It is recommended that one faculty member be selected from a Psychology program other than the candidate's own major area, and one faculty member be from a department other than the Department of Psychology. The remainder of the committee may be selected from the Department of Psychology, a university department other than Psychology, a psychology department from another U.S. university, or the psychological professional community. Of the four required members, it is recommended that no more than one may be an adjunct or part-time faculty member. If the part-time or adjunct faculty member serves as chair of the committee, a full-time, tenure-stream faculty member must serve as co-chair.

a) Approval of the Committee: The committee membership must be approved by the Program Director and the Director of Graduate Education and Department Chair prior to notification of the Dean of the College of Liberal Arts and Social Sciences. ***

5) Graduation: An application for graduation must be filed at the beginning of the desired graduating semester. If you do not graduate, then you must refile for graduation. ***

6) Written Doctoral Dissertation Proposal: A written dissertation proposal must be prepared and provided to each committee member with two signature forms. ***

7) Defense: A written doctoral dissertation and a public oral defense is required. The final oral defense of the dissertation will be publicized as follows:

a) The candidate will circulate a summary of the dissertation (may be the dissertation abstract) to all Department of Psychology faculty, with a notice posted in the Department no less than one week before the scheduled orals. This will be an open invitation to attend, stating the time and location of the oral examination.

b) A memo containing all information should be sent to the Dean of the College of Liberal Arts and Social Sciences.

8) Final Oral Defense: The academic affairs office must be notified by memo that the student has passed orals and the doctoral dissertation has been accepted.

9) Submission for Binding: The original and two copies of the approved dissertation must be submitted to the College of Liberal Arts and Social Sciences.

***** all forms are available in the Academic Affairs Office**

GENERAL WRITING REQUIREMENTS FOR THESIS/DISSERTATION

**SUCH REQUIREMENTS ARE PROVIDED AND UPDATED BY THE COLLEGE OF LIBERAL ARTS
AND SOCIAL SCIENCES. CURRENT GUIDELINES ARE AVAILABLE FROM THE COLLEGE
(402 AGNES ARNOLD HALL) OR FROM THE DEPARTMENT'S ACADEMIC AFFAIRS OFFICE
(124 HEYNE).**

CLINICAL PSYCHOLOGY

The clinical psychology program at the University of Houston endorses the Boulder Model of training with particular emphasis on the integration of the scientific and professional aspects of the field. The program is based on a strong advisor-advisee relationship and adheres to a broad-based empirical orientation. Further, the program attempts to expose students to a range of theoretical, research and clinical approaches to problems. The program offers specialty training in three areas of concentration: 1) adult behavior disorders, 2) child-family, and 3) clinical neuropsychology, .

The program attempts to prepare students in the following abilities and skills: 1) research skills including research methods, statistics, measurement, and computer usage; 2) assessment skills, including intellectual, personality, observational, neuropsychological, and program evaluation techniques; 3) intervention skills including interviewing, psychotherapy, behavior therapy and unit-wide programs, with emphasis on evidence-based procedures; 4) conceptual skills in the basic methods, theories, and empirical bases of clinical psychology; 5) awareness of and sensitivity to cultural and individual diversity, and 6) above all, adherence to the highest standards of ethical and professional conduct consistent with the American Psychological Association Ethical Principles of Psychologists and Code of Conduct (see Appendix C). The program works to prepare students to be capable of professional roles beyond direct service, such as supervision, administration, consultation, program planning, and evaluation. The program intends to train clinical psychologists who can work effectively in a variety of clinical, research, and academic settings. The program's training philosophy, goals, objectives, and curriculum plan are consistent with the mission of the University of Houston and the College of Liberal Arts and Social Sciences.

Although program and institutional requirements take precedence, a minimum of 3 full-time academic years of graduate study and completion of an internship prior to awarding the doctoral degree is required of each student. At least 2 of the 3 academic training years must be at UH, at least 1 year of which must be in full-time residence.

The program publicly states an explicit philosophy of training by which it intends to prepare students for the practice of psychology. Psychological practice is based on the science of psychology, which, in turn, is influenced by the professional practice of psychology. Training for practice is sequential, cumulative, graded in complexity, and designed to prepare students for further organized training.

The program demonstrates commitment to excellence through periodic systematic reviews of its goals and objectives, training model, and curriculum to ensure their appropriateness in relation to the psychology department, UH, local, regional, and national needs for psychological services, national standards of professional practice, the evolving scientific and professional knowledge that serves as the basis of practice and our graduates' job placement and career paths.

The program is fully accredited by the American Psychological Association Committee on Accreditation. Information about the program's accreditation status is available upon request from the Director of Clinical Training. Information about accreditation can be obtained from the Committee for Accreditation of The American Psychological Association by phone (202) 336-5500 or (202) 336-6123 (TDD) or through written

correspondence:

To: Office of Program Consultation and Accreditation
American Psychological Association
750 First Street, NE
Washington DC 20002-4242

Course Requirements*

A supplemental list of course requirements may be obtained from the Clinical Program Office

During the student's first year the student and advisor should formulate an overall curriculum plan. This plan should include a set of time goals for completing aspects of the program. It should be placed in the student's file and reviewed at least annually.

DEPARTMENT REQUIREMENTS

Statistics for Psychology	6300
Experimental Design	6302
Psyc. Theory: Hist. & Sys.	6301
Thesis (6 units)	6399-7399
Dissertation (12 units)	8399-8699-8999

REQUIRED DEPARTMENTAL FOUNDATION COURSES

Biol. Bases of Behavior OR	7342
Neuropsych. I (Only for Clin/Neuro Track)	6305
Foundations of Cognitive	6306
Foundations of Social	6338

REQUIRED CLINICAL COURSES

Foundations of Clin. Intervention I	6303
Intervention in Clin. Psychology II	6316
Psychopathology I*	6317
Psychopathology II*	6318

Clinical Assessment I (Theory and Cog. Assessment)	6356
Clinical Assessment II (Assessment of Personality & Psychopathology)	6357
Research Methods	7345
Professional Problems	7326
Multicultural Psychology	7329

SPECIALTY COURSES

(24 hrs required - Child-Family Specialty)
(24 hrs required - Adult Beh Disorders Specialty)
(24 units required - Clinical Neuro. Specialty)

PRACTICA

Clin. Research Practicum (no min.)	6393
Clin. Practicum (12 units required)	6392
Internship (9 units req.)***	8321-8621-8921

**Satisfies individual differences foundations requirement of APA Accreditation Guidelines & licensing requirements of many states.*

***Additional practica may be required depending on specialty track.*

****Students enroll for three hours per semester for the fall, spring, and summer semesters of the internship year. This constitutes full-time enrollment. In rare instances of financial hardship, one hour per semester for the internship year may be requested.*

➤ **Elective Courses**

The intent of this requirement is for the student, together with his/her advisor to formulate an individual academic program relevant to the student's interests and needs. It is intended that this requirement form a central and important part of the student's graduate program. Elective courses that are required or recommended in each of the three specialty tracks (clinical neuropsychology, child-family, adult behavior disorders) are listed below, beginning on page 18.

Planning a program of electives should take into account the overall curriculum as well as other factors. For example, students should attempt to obtain at least one course each sampling in greater depth the areas of assessment, intervention and psychopathology. Students with academic/research career goals should take additional courses in statistics, design or computer use.

Elective courses may include graduate level courses or seminars within the program, in other programs in the Department or in other departments. One elective may be filled by a Special Problems course, but this should be (1) a well-defined course equivalent (i.e. with at least a reading list and term paper involved), (2) logically important to the overall curriculum plan, and (3) approved in advance by the Director of Clinical Training. Practicum courses (clinical or research, required or elective) do not qualify as meeting the elective course requirement.

➤ **Practica**

- ◆ **Clinical Research Practicum: PSYC 6393**
(prerequisite: consent of instructor) This course involves research activity including design of experiments, data collection, quantitative analysis and preparation of research reports. **Clinical students should be continuously involved in research throughout their graduate careers.** This course serves as a vehicle to recognize research involvement when the student's master's or dissertation research is not the focus of this involvement (and thus, the student is not signed up for Master's or Dissertation credits).
- ◆ **Clinical Practicum: PSYC 6392**
(prerequisite: - graduate standing in the Clinical Psychology Program and PSYC 6333, 6334, 6303, 6373, 6330) This course provides pre-internship supervised clinical experience. A minimum of four semesters is required of all clinical students, although students are encouraged to enroll for practica until they leave for internship. The first two semesters of practicum are in the Psychology Research and Services Center (PRSC) under the supervision of primary program faculty (first year of practicum). Two additional semesters will be required in the third year (second year practicum) to broaden exposure to a wider spectrum of problems, populations and treatment modalities. This requirement may be met through the PRSC or external sites. Elective practica may also be fulfilled by community or PRSC placements. Overall the practicum experience should provide exposure to assessment and intervention from multiple orientations by different supervisors in various modalities with both adults and children. While the emphasis and concentration may vary from student to student, attention is given to breadth of experience. Class discussions, group supervision, and program meetings provide a forum for discussion of the professional experience. Practicum involves approximately 12 hours a week of the student's time. Clinical Neuropsychology Track students complete 12 hours a week of clinical practicum in the PRSC for at least two semesters during the their second year and at least 12 hours a week of clinical practicum in an external setting for at least two semesters during their fourth year in the program.

Clinical Neuropsychology Practicum : PSYC 6392

(new course number expected by Fall 2006 to differentiate it from Clinical Practicum)

Additional practicum perquisites include PSYC 6305 and Baylor Medical Neurosciences 340-452. This course provides pre-internship supervised clinical neuropsychology experience for students in the Clinical Neuropsychology (CN) specialty track and occasionally for students in other tracks. CN students are expected to complete 11 ½ months of CN practicum, 10-20 hours per week, in their second, third and fourth years in the program. Twenty hour a week practicum experiences are completed under contract with various Texas Medical

Center hospitals and facilities providing student financial support and are primarily clinical or clinical research in nature. Ten hour a week CN practica are conducted in the same clinical settings but do not provide student financial support; in those occasional cases, the student may receive scholarship funding or a teaching assistantship. Students do not sign up for course practicum hours for each semester throughout this training but should sign up for a minimum of 12 hours.

First Year of Clinical Practicum. The aim of the first year practicum (which occurs during the second year of the program) is to provide students in all tracks with basic professional skills in case management, assessment, and therapy, with emphasis on evidence-based procedures. Case management and assessment includes topics such as confidentiality procedures, record keeping, the nature and use of supervision, procedures for intake, history taking, assessment planning, assessment, and integration of results and report writing. Students acquire limited skills with particular therapy techniques, which may be relevant to specific populations. This would include treatment planning, therapy procedures, evaluation of progress, trouble-shooting the treatment plan, and termination. Sensitivity to individual and cultural diversity and adherence to the highest standards of ethical and professional conduct are specifically addressed. Some of the course material may be presented in didactic sessions developed cooperatively among practicum supervisors in any given year. On the average, one hour supervision is provided for every one or two hours of client contact. A group format is used for supervision, with additional individual supervision as indicated by student needs and the clinical demands of cases.

Second Year of Clinical Practicum. The aim of the second year of practicum (third year of the program for the Adult Behavior Disorders and Child-Family Tracks; fourth year for the Clinical Neuropsychology Track) is to expose students to clinical applications in the advanced specialty tracks as well as to a wider variety of populations, supervisors, orientations, and techniques. Advanced skills in the implementation of evidence-based therapies are also emphasized. While no specific requirement for obtaining breadth on these dimensions has been set, planning and case selection by students and supervisors should take into account the desirability of breadth of experiences. Continued attention is directed toward ensuring student sensitivity to individual and cultural diversity and strict adherence to the standards of ethical and professional conduct. At this level, students learn to evaluate the clinical needs of a case, develop a treatment plan, carry out intervention procedures, and adjust and change procedures with only moderate supervision. Students should be able to conceptualize cases and be conversant with alternative conceptualizations. They should acquire a broader range of technical skills in evaluation and treatment and be able to make decisions with regard to their use. At this level of practicum, one hour of supervision should correspond to between one to three hours of client contact. Both group and individual supervision formats are used in these practica.

First, Second, and Third Year of Clinical Neuropsychology Practicum. Clinical Neuropsychology practicum (second, third and fourth years of the program) consist of graded experiences in which students are exposed to a wide variety of neurological and related psychiatric disorders in various settings in The Texas Medical Center and related facilities and practices. All practica are supervised by licensed psychologists who are clinical neuropsychologists and often work on interdisciplinary teams involving such

professionals as psychologists, physicians, social workers, speech pathologists, occupational therapists, physical therapists, vocational counselors, nurses and others. Departmental and physician specialties include neurology, neurosurgery, oncology, pediatrics, physical medicine and rehabilitation, intensive care, psychiatry, pathology and others. The general approach to assessment by clinical neuropsychologists in Houston is a flexible battery approach in which a core of tests is given that is appropriate to the referral question, disorder, age, language, and other variables along with other tests that elucidate the particular neurobehavioral/cognitive problems of each patient. Students who intend to become adult neuropsychologists are encouraged to obtain practicum experience with children and students who intend to become clinical child neuropsychologists are encouraged to obtain experience with adults. Initial practicum placements for inexperienced students are at sites that enjoy training beginning students and usually take a more senior student as well. At these sites, students learn to conduct a interview for neurological and psychiatric disorders, to assess patients with instruments appropriate to the disorder and stage of the disorder (e.g., coma vs. late recovery from mild-severe TBI; early vs. late stage of dementia), to score and norm tests appropriately, to write a coherent, integrated report that includes referral question, behavioral observations, relevant history, tests administered e.g., (intellectual, academic, cognitive, and personality), findings for each test, summary, diagnosis and recommendations, as well as interpretative interviews with patients, family members and significant others, and interpretation of findings to other professionals. Reports and their content vary with their purpose (e.g., medical record, school, physician). At some sites students are involved in rehabilitation treatment planning and carrying out treatment. Experience in consultation is provided also. Students also learn to read medical charts and are expected to become familiar with various imaging techniques, especially CT scans and MRIs. Students often become involved in clinical research projects at their practicum sites, make presentations and sometimes write papers based on the findings. We generally find that students need to observe neuropsychologists and their staff for about 3 months, practicing the tests many times, before they can be "tested out" and allowed to assess patients by themselves. Learning to write a well-thought out, fully integrated report can take several years.

Elective Practica. Students may take additional elective practica beyond the required four semesters. These practica may vary in the number of credits as a function of caseload. Greater depth or intensity of experience with particular techniques or populations may be the focus of elective practica. Students at this level may be involved in supervision, consultation or administrative projects under supervision. Flexibility, innovation, and student interests should shape elective practica. Certain practicum experiences are recommended for students in each of the specialty tracks. Below are listed the community practicum sites that are available in addition to the basic and advanced practica at the PRSC. The availability of specialized practicum training at each site is listed in parentheses (CN = Clinical Neuropsychology, CF = Child-Family, ABD = Adult Behavior Disorders).

Second year and elective practicum sites

UH-CAPS	University of Houston Counseling & Psychological Services (ABD)	CAC	Children's Assessment Center (CF)
UH-PRSC	University of Houston Psychology Research and Services Center General Clinical Services (ABD, CN, CF) Depression Research Clinic (ABD) Victims' Resource Institute (CF, ABD) Domestic Violence Project (CF, ABD) Forensic Psychology Services (ABD, CF, CN) Mood Disorders Clinic (CF, CN, ABD) Texas Young Autism Project (CF) Victims Resource Institute (CF)	MDA	M.D. Anderson Cancer Center Department of Neuro-oncology (CN) Department of Pediatrics (CN) Department of Behavioral Sciences (ABD)
UT-HCPC	University of Texas Harris County Psychiatric Center (ABD, CF, CN)	TIRR	Texas Institute for Rehab & Research (CN) Challenge Program (ABD, CN) Brain Injury Research Center (CN) Dept Psychology/Neuropsychology (CN)
RCC	Rice University Counseling Center (ABD)	JWL	J. W. Largen, Ph.D. Private Pract (CN)
VAMC	Veterans Admin. Medical Ctr (ABD, CN)	MN	Matthew Nance, Ph.D., Private Pract (CN)
BCM	Baylor College of Medicine Department of Psychiatry and Behavioral Sciences (ABD, CF) Department of Neurosurgery (CN) Blue Bird Circle Clinic (CF, CN) Department of Phys Med & Rehab (CN) Department of Neurology (CN) Family Counseling Clinic (CF)	TCH	Texas Children's Hospital Department of Psychiatry (CN, CF) Learning Support Center (CF, CN) Teammates/Family Transition Clinic (CN, CF)
UT	University of Texas Health Sciences Cent. Department of Pediatrics (CN) Department of Neurosurgery (CN)	DCC	Depelchin Children's Center Chimney Rock Center (CF) Child Guidance Center (CF)
		HAWC	Houston Area Women's Center (ABD, CN)
		BTGH	Ben Taub General Hospital (ABD, CN)
		MC	Menninger Clinic (ABD)
		MCC	Montrose Counseling Center (ABD)
		DBTC	Dialectical Behavior Therapy Center (ABD)

Adult Behavior Disorders Specialty Track

The overall objective of the Adult Disorders Specialty Track is to train Clinical Psychologists as scientist-professionals. This track strives to integrate the science and practice of Clinical Psychology throughout the training program to prepare students for careers involving both evidence-based practice and applied research and evaluation. Aims include a thorough didactic grounding in the science of psychology with an emphasis on theoretical models and empirical content relevant to the etiology, maintenance and amelioration of behavior disorders in the adult population. The program is also designed to provide practicum experiences in state-of-the-art, empirically validated assessment and treatment technology for adult populations. Due to faculty strengths, it is expected that students will take didactic courses and practica that allow a focus on the severely mentally ill, health psychology, adult mood disorders, or anxiety.

DEPARTMENTAL REQUIREMENTS

A. Core Courses:	9
1. PSYC 6300 Statistics for Psychology (3)	
2. PSYC 6301 Psyc. Theory History & Systems (3)	
3. PSYC 6302 Experimental Design (3)	
B. Thesis / Dissertation Courses	
1. Masters: PSYC 6399, 7399	6
2. Dissertation: PSYC 8399, 8699, 8999	12
C. Foundations Courses	9
1. PSYC 7342 Biological Bases of Beh. (3)	
2. PSYC 6306 Foundations of Cognitive (3)	
3. PSYC 6338 Foundations of Social (3)	
PROGRAM/TRACK REQUIREMENTS	
A. Clinical Courses	33
1. PSYC 6303 Interventions I (3)	
2. PSYC 6316 Interventions II (3)	
3. PSYC 6317 Psychopathology I (3)	
4. PSYC 6318 Psychopathology II (3)	
5. PSYC 6356 Clinical Assessment I (3)	
6. PSYC 6357 Clinical Assessment II (3)	
7. PSYC 7329 Clinical Research Methods (3)	
OR PSYC 7345 Psychological Methods	
8. PSYC 7326 Professional Problems (3)	
9. PSYC 6392 Clinical Practicum (6)	
10. PSYC 7329 Multicultural Psychology	
B. Adult Behavior Disorders Courses	12
1. PSYC 6343 Psychopharmacology	
2. PSYC 7329 Seminar in Depression OR Anxiety and Fear Disorders	
3. PSYC 7336 Mental Health Systems I	
4. PSYC 7337 Mental Health Systems II	

C. Elective Courses (12 units required; it is expected that these courses will be grouped to allow a focus on the severely mentally ill, health psychology, mood disorders, or anxiety (see sample curriculum) with further emphasis to develop areas of expertise for research, teaching, and service.	12
PSYC 6313 Multivariate Methods	
PSYC 6314 Factor Analysis	
PSYC 7305 Structural Equations	
PSYC 7397 Multilevel Modeling	
PSYC 6341 Perception	
PSYC 6342 Psychophysiology	
PSYC 6308 Foundations of Neuropsych.	
PSYC 6331 Cognitive and Clinical Neuro	
PSYC 6349 Neuropsych. Assess of Adults	
PSYC 6352 Human Memory	
PSYC 6374 Organizational Change & ev.	
PSYC 7320 Child and Family Therapy	
PSYC 7322 Issues in Community Psyc.	
PSYC 7331 Psyc. Research in Health Care Settings	
PSYC 7332 Program Evaluation	
PSYC 7333 Experimental Neuropsychology	
PSYC 7335 Dementia	
PSYC 7397 Personality Assessment	
PSYC 8394 Selected Topics in Psychopathology	
PSYC 8395 Memory Disorders	
PSYC XXXX Mental Health and Law (UH law center; occasional offerings)	
PSYC XXXX Prevention of Mental Disorders	
D. Internship	9
Total	102

Similarly, the program is designed to provide students with practicum experiences in state-of-the-art assessment and treatment technology for the adult disorders. Because of the interests of the faculty, it is expected that students will take didactic and practica that allow a focus either on the severely mentally ill or on disorders that have a direct effect on physiological functioning (e.g. "behavioral medicine").

Sample Course Sequence		
Fall Semester	Spring Semester	Summer Semester
First Year		
Statistics	Experimental Design	Professional Problems
Interventions I	Interventions II	
Clinical Assessment I	Clinical Assessment II	
Psychopathology I	Psychopathology II	
Second Year		
Clinical Practicum (PRSC)	Clinical Practicum (PRSC)	Clin. Prac. (PRSC)
Thesis	Thesis	Thesis
Foundations Course	Clinical Research Methods	Multicultural Psychology
Mental Health Systems I	Mental Health Systems II	
Third Year		
Clinical Practicum (UT-HCPC or VAMC)	Clinical Practicum (UT-HCPC or VAM)	Comprehensive Exam
Psychopharmacology	Depression Seminar	Elective
Foundations Course	Psych Theory: History & Systems	Elective
Elective	Biological Bases of Behavior	
Fourth Year		
Practicum (VAMC or UT-HCPC)	Practicum (VAMC or UT-HCPC)	Dissertation
Elective	Elective	Elective
Elective	Elective	
Dissertation	Dissertation	
Fifth Year		
Internship	Internship	Internship

Child-Family Specialty Track

The overall objective of the child/family clinical track is to offer a Boulder model, scientist-practitioner program in child and family psychology. The aims of the scientist training portion of this track are to provide knowledge concerning individual and family developmental processes, including common deviations from normal development; and to train psychologists who can produce and use research bearing on the practice of clinical psychology. The aims of the practitioner portion of this track are to provide training in the use of a broad range of child/family assessment techniques, and methods of intervention for child/family problems. Throughout the program, emphasis is placed on the integration of science and practice.

DEPARTMENTAL REQUIREMENTS

- | | |
|---|-----------|
| A. Core Courses: | 9 |
| 1. PSYC 6300 Statistics for Psychology (3) | |
| 2. PSYC 6301 Psychological Theory History and Systems (3) | |
| 3. PSYC 6302 Experimental Design (3) | |
| B. Thesis / Dissertation Courses | |
| 1. Masters: PSYC 6399, 7399 | 6 |
| 2. Dissertation: PSYC 8399, 8699, 8999 | 12 |
| C. Foundations Courses | 9 |
| 1. PSYC 7342 Biological Bases of Beh. (3) | |
| 2. PSYC 6306 Foundations of Cognitive (3) | |
| 3. PSYC 6338 Foundations of Social (3) | |

PROGRAM/TRACK REQUIREMENTS

- | | |
|--|-----------|
| A. Clinical Courses | 33 |
| 1. PSYC 6303 Interventions I (3) | |
| 2. PSYC 6316 Interventions II (3) | |
| 3. PSYC 6317 Psychopathology I (3) | |
| 4. PSYC 6318 Psychopathology II (3) | |
| 5. PSYC 6356 Clinical Assessment I (3) | |
| 6. PSYC 6357 Clinical Assessment II (3) | |
| 7. PSYC 7345 Research Methods (3) | |
| 8. PSYC 7326 Professional Problems (3) | |
| 9. PSYC 6392 Clinical Practicum (PRSC) (6) | |
| 10. PSYC 7329 Multicultural Psychology (3) | |
| B. Child-Family Courses | 18 |
| 1. PSYC 6304 Foundations of Develop. (3) | |
| 2. PSYC 6361 Social Development (3) | |
| 3. PSYC 6393 Clin Research Practicum (6) | |

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|--|-----------|
| 4. PSYC 6392 Clinical Practicum (6)* | |
| C. Elective Courses (12 hours total; 6 from Group I and 6 from Group II) | 12 |
| Group I | |
| 1. PSYC 7329 Clin Child Neuro Assess (3) | |
| 2. PSYC 6345 Developmental Neuro (3) | |
| 3. PSYC 7329 Adolescent Depression (3) | |
| 4. PSYC 7329 Child Assess and Interv (3) | |
| 5. PSYC 7329 Childhood Anxiety (3) | |
| 6. PSYC 7329 Child Behavior Mgmnt (3) | |
| 7. PSYC 7329 Family Violence | |
| 8. PSYC 7329 Marriage and Marital Therapy (3) | |
| Group II | |
| 1. PSYC 7396 Sel Top in Quant Mthds (3) | |
| 2. PSYC 6313 Multivariate Methods (3) | |
| 3. PSYC 7301 Applied Data Analysis (3) | |
| 4. PSYC 7305 Structural Equations (3) | |
| 5. PSYC 7336 Mental Health Systems I (3) | |
| 6. PSYC 7337 Mental Health Systems II (3) | |
| 7. PSYC 7379 Categorical Data Analy. (3) | |
| 8. PSYC 6342 Psychophysiology (3) | |
| 9. PSYC 7329 Forensic Psyc I (3) | |
| 10. PSYC 7329 Forensic Psyc II (3) | |
| 11. PSYC 6343 Psychopharmacology | |
| D. Internship | 9 |

Total	108
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*At least 6 credits of Clinical Practica 6392 are CHILD focused, i.e., child assessment or child intervention or parent management intervention. To this end, students should seek outside practica at child focused sites.

Sample Course Sequence		
Fall Semester	Spring Semester	Summer Semester
First Year		
Interventions I Clinical Assessment I Psychopathology I Statistics	Interventions II Clinical Assessment II Psychopathology II Experimental Design	Professional Problems Research Methods
Second Year		
Elective Practicum (PRSC) Thesis Foundations of Dev. Psy.	Elective Practicum (PRSC) Biological Bases of Behavior Thesis	Multicultural Psychology Elective or Thesis
Third Year		
Practicum (External) Social Development Elective Elective	Practicum (External) Psychology Theory: History and Systems Foundations of Social Psyc. Elective	Comprehensive Exam Elective Elective
Fourth Year		
Clinical/Research Practicum Foundations of Cognitive Elective Dissertation	Clinical/Research Practicum Elective Elective Dissertation	Dissertation Elective
Fifth Year		
Internship	Internship	Internship

Clinical Neuropsychology Specialty Track

The goal of this specialty track is to train clinical psychologists, who can bring to bear knowledge and skills from a number of different areas on the problems of brain function and behavior, both in research and clinical application. Students completing the program will be qualified for positions in academic psychology departments, medical school settings, and a variety of clinical settings such as hospitals, neuropsychological clinics, private practice, rehabilitation and training centers, special education services, etc. The psychological services would specifically focus on the behavioral effects of human brain involvement, defined in the broadest terms--genetic, maturational, impairments and dysfunctions, drugs, aging, etc. Depending upon specific interest, graduates could be concerned with a range of populations from infants and learning disabled children to geriatric cases. They should have an effective understanding of the relevant neurosciences, populations, and behavioral techniques for assessment, management, and remediation programs, and research. The graduate of this clinical program specialty track should be the expert in behavioral analysis, particularly as it relates to higher cognitive processes and brain function. The guidelines of the Houston Conference on Specialty Education and Training in Clinical Neuropsychology are followed for doctoral training.

NEUROPSYCHOLOGY TRACK GUIDELINES

DEPARTMENTAL REQUIREMENTS

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|---|-----------|
| A. Core Courses: | 9 |
| 1. PSYC 6300 Statistics for Psychology (3) | |
| 2. PSYC 6301 Psychological Theory History and Systems (3) | |
| 3. PSYC 6302 Experimental Design (3) | |
| B. Thesis / Dissertation Courses | |
| 1. Masters: PSYC 6399, 7399 | 6 |
| 2. Dissertation: PSYC 8399, 8699, 8999 | 12 |
| C. Foundations Courses | 9 |
| 1. PSYC 6306 Foundations of Cognitive | |
| OR PSYC 6397 Cognitive Neuroscience (3) | |
| 2. PSYC 6308 Neuropsychology I: Foundations (3) | |
| 3. PSYC 6338 Foundations of Social (3) | |

PROGRAM/TRACK REQUIREMENTS

- | | |
|--|-----------|
| A. Clinical Courses | 33 |
| 1. PSYC 6303 Interventions I (3) | |
| 2. PSYC 6316 Interventions II (3) | |
| 3. PSYC 6317 Psychopathology I (3) | |
| 4. PSYC 6318 Psychopathology II (3) | |
| 5. PSYC 6356 Clinical Assessment I (3) | |
| 6. PSYC 6357 Clinical Assessment II (3) | |
| 7. PSYC 7329 Clinical Research Methods (3) | |
| OR PSYC 7345 Psychological Methods | |
| 8. PSYC 7326 Professional Problems (3) | |
| 9. PSYC 6392 Clinical Practicum (6) | |
| 10. PSYC 7329 Multicultural Psychology | |
| B. Neuropsychology Courses | 21 |
| 1. Baylor 340-452 Medical Neurosciences (6) | |
| (2 three hour courses at Baylor College of Medicine registered through UH) | |

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|--|-----------|
| 2. PSYC 6331 Cognitive and Clinical Neuropsychology (3) | |
| 3. PSYC 6349 Neuropsychological Assessment of Adults (3) | |
| 4. PSYC 6340 Neuropsychological Rehabilitation (3) | |
| 5. Two or more electives from the following list (6) | |
| 1) PSYC 6345 Dev. Neuropsychology* | |
| 2) PSYC 6350 Neuro. Assess. of Children* | |
| 3) PSYC 6397 Attent. Deficits in Children | |
| 4) PSYC 6397 Neuro. of Psychopathology | |
| 5) PSYC 6397 Epilepsy | |
| 6) PSYC 7321 Head Injury | |
| 7) PSYC 7324 Memory Disorders | |
| 8) PSYC 7325 Aphasiology | |
| 9) PSYC 7334 Dementia | |
| 10) PSYC 6341 Perception | |
| 11) PSYC 6342 Psychophysiology | |
| 12) PSYC 6343 Psychopharmacology | |
| 13) PSYC 6362 Cognitive Development | |
| 14) PSYC 7333 Experimental Neuropsych | |
| 15) PSYC 7338 Attention | |
| 16) PSYC 6397 Movement Control | |
| 17) PSYC 6397 Cerebral Dominance | |
| 6. Neuropsychology Practica | 12 |
| 7. Internship | 9 |

Total	111
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*Students who have completed a Master's thesis or dissertation elsewhere in psychology, or in a related area such as Neuroscience, must submit two copies of the material to the CN faculty for review. If the thesis or dissertation is deemed acceptable, it shall substitute only for a thesis requirement in the Clinical Program. A dissertation acceptable to the Clinical Neuropsychology faculty must be completed at the University of Houston.

Students who enter with a Master's degree in any area shall be paid at the doctoral rate on all neuropsychology practicum contracts. Those who achieve a Master's degree while in the program can apply to the CN Track for an upgrade to the doctoral rate on neuropsychology paid practica on either January 1 or June 1 of any practicum year closest to and following the completion of all requirements for Master's degree. Rates are automatically changed to the appropriate level at the beginning of each year, starting September 1.

**Students who expect to become clinical child neuropsychologists shall take PSYC 6345 and 6350 as their electives.

SAMPLE COURSE SEQUENCE		
Fall Semester	Spring Semester	Summer Semester
First Year		
Interventions I Clinical Assessment I Psychopathology I Foundations of Neuropsychology	Interventions II Clinical Assessment II Cog. and Clin. Neuropsychology Neuroscience (3 hours)	Professional Problems Neuroscience (3 hours)
Second Year		
Statistics Neuropsychological Assessment Clinical Practicum (PRSC) Neuropsychology Practicum	Experimental Design Psychopathology II Clinical Practicum (PRSC) Neuropsychology Practicum	Neuropsych. Practicum Thesis (3 hours)
Third Year		
Psych History and Systems Found. of Cog. or Social Neuropsychology Practicum Thesis (3 hours)	Psych Methods Neuropsychology Practicum Neuro. Rehabilitation or Elective	Multicultural Psychology Neuropsych. Practicum Comprehensive Exams
Fourth Year		
Clinical Practicum (external) Found. of Cog. or Social Possible Elective Dissertation	Clinical Practicum (external) Neuro. Rehabilitation or Elective Dissertation	Elective Dissertation
Fifth Year		
Internship	Internship	Internship

Students are required to take thesis hours in the semester that they defend the thesis. This is likely to be in the fall of the second year, but might be in another semester. Also, students should continuously enroll in thesis hours once they begin to enroll in such hours.

DEVELOPMENTAL PSYCHOLOGY

WITH A FOCUS ON DEVELOPMENTAL COGNITIVE NEUROSCIENCE

The 20th century brought us deeper understanding of the relationship between the mind and the brain. As we move into the 21st century researchers have begun to expand on this knowledge by asking how the developing mind relates to the developing brain. Developmental Cognitive Neuroscience, a new interdisciplinary field, has been created to bring together researchers interested in understanding how the brain and mind change over time. Current faculty interests cover the lifespan and include childhood trauma, adolescent psychopathology and addictive behaviors, cognitive processes, laterality, Traumatic Brain Injury, neurodevelopmental disorders, aging and dementia, and neural bases of bilingualism. They are using the latest imaging, electrophysiological, and neurochemical techniques to determine the neural correlates of these processes. Animal models are also employed by some of these researchers to further our understanding of the developing brain and disorders of development. Faculty in the program have many collaborations with faculty and researchers in other departments at the University of Houston and at Rice University as well as at the Texas Medical Center which includes the Baylor College of Medicine, The Methodist Hospital, and University of Texas, Houston. Taken together students will have a rich set of opportunities for research and learning within the psychology department and the research community in the Houston area.

During the first two years of the program, the graduate student will complete several basic, core courses as well as develop specific research interests and skills needed to complete the Master's Degree requirements by the end of the second year. Formal coursework involves completing core courses in the program, courses in the student's minor area, seminars, and other departmental courses. By the end of the third year, the student should complete all requirements to advance to doctoral candidacy, including the Master's Thesis and the comprehensive examination. Ideally, the doctorate will be completed by the end of the fourth year. The main focus of training in the program is to guide each student in developing independent research in an area of continuing interest to him or her.

GENERAL PROGRAM REQUIREMENTS

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|--|---|
| <p>A. Core Courses: 9</p> <ol style="list-style-type: none"> 1. PSYC 6300 Statistics for Psychology (3) 2. PSYC 6301 Psychological Theory History and Systems (3) 3. PSYC 6302 Experimental Design (3) <p>B. Thesis / Dissertation Courses 6</p> <ol style="list-style-type: none"> 1. Masters: PSYC 6399, 7399 6 2. Dissertation: PSYC 8399, 8699, 8999 12 <p>C. Foundations Courses 12</p> <p>(3 of items 1-4 below can be used toward foundations requirement of masters degree)</p> <ol style="list-style-type: none"> 1. PSYC 6306 Cognitive Neuroscience (3) 2. PSYC 6308 Neuropsychology: Foundations (3) 3. PSYC 6304 Foundations of Developmental (3) 4. PSYC 7342 Bio Bases of Behavior (3) | <p>D. Seminar in neurodevelopmental research</p> <ol style="list-style-type: none"> a. Weekly meetings. Review paper with one proposed experiment. <p>E. Students will be encouraged to take one or more advanced statistics courses, e.g., multivariate analyses, structural equation modeling.</p> <p>F. Master's thesis proposal at end of first semester.</p> <p>G. Master's thesis at beginning of Fall of 2nd year (masters degree not posted until other degree requirements completed).</p> <p>H. Qualifying exam in Summer of 2nd year.</p> |
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I. An integrative paper which considers an area from at least three different perspectives (e.g. cognitive development, cognitive neuroscience, physiological psychology).

J. Dissertation proposal end of the 3rd year.

SAMPLE PROGRAM OF STUDIES FOR STUDENTS IN DEV PSYCHOLOGY

Fall Semester	Spring Semester	Summer Semester
<u>FIRST YEAR</u>		
PSYC 6300 Statistics for Psyc.	PSYC 6302 Exp. Design	PSYC 6399 Masters Thesis
PSYC 6308 Foundations of Neuropsych.	PSYC 7342 Bio Bases	PSYC 6398 Special Problems
PSYC 6398 Special Problems	PSYC 6397 Cog Neuroscience	
Foundations Course	PSYC 7345 Research Mthds	
<u>SECOND YEAR</u>		
PSYC 6301 Hist & Systems	PSYC 6338 Found. of Develop.	PSYC 6498 Special Problems
Elective	Elective	PSYC 6298 Special Problems
PSYC 7399 Masters Thesis	PSYC 6398 Special Problems	
PSYC 6398 Special Problems	Elective or addtl Sp. Problems	
<u>THIRD YEAR</u>		
PSYC 6397 Teaching Practicum	PSYC 8399 Dissertation	PSYC 8699 Dissertation
PSYC 7392 Research Practicum	PSYC 7392 Research Practicum	
Elective	Elective	
<u>FOURTH YEAR</u>		
PSYC 8999 Dissertation	PSYC 8999 Dissertation	

INDUSTRIAL-ORGANIZATIONAL PSYCHOLOGY

The Industrial/Organizational (I/O) program subscribes to the Guidelines for Education and Training at the Doctoral Level as prepared by the Society for Industrial and Organizational Psychology and Division 14 of the American Psychological Association. These guidelines are based on a scientist-practitioner model. That is, the I/O psychologist is frequently both a generator of knowledge and consumer/user of such knowledge. As a scientist, he or she develops theory using research and empirical skills. As a practitioner, he or she provides services to individuals and groups by applying theory and research findings to specific situations.

The primary goal of the graduate training program is for students to develop the state-of-the-art competencies needed to function effectively as a scientist-practitioner. The strategies chosen to accomplish this goal include formal courses, individual reading/research projects with faculty, and supervised practicum experience. The formal course work required in this program is described below. In individual study projects students explore topics of special interest to them in consultation with qualified faculty. In supervised practicum courses, students learn through "hands on" experience in a field setting under the guidance of practicing I/O psychologists.

GENERAL PROGRAM REQUIREMENTS

(1) Course Work Required:

- a) PSYC 6300/6302 Stat. for Psyc. & Exp. Des.
 - b) PSYC 6301 Psychological Theory
 - c) 2 Foundations courses from the list below:
 - PSYC 6304 Developmental
 - PSYC 6306 Cognitive
 - PSYC 6308 Neuropsychology
 - PSYC 6338 Social
 - PSYC 6397 Cognitive Neuroscience
 - PSYC 7342 Biological Bases of Behavior
 - d) PSYC 6370 Foundations of I/O
 - e) PSYC 7345 Research Methods
 - f) PSYC 7326 Professional Problems
 - g) 2 advanced statistics courses; one must be PSYC 6313 (Multivariate or equivalent)
 - h) 6 advanced I/O content seminars; at least one must be in the organizational area and one in the personnel area.
 - i) 2 graduate courses outside of I/O (business, communication, computer science, psychology, sociology, etc.). These are in addition to courses listed in a, b, & c above.
 - j) 6 hrs of practicum (PSYC 7392, 7393).
 - k) 6 hrs of Master's Thesis (PSYC 6399, 7399).
 - l) 12 hrs of Dissert. (PSYC 8399, 8699, 8999).
- (2) Comprehensive examination.** Each student takes a comprehensive examination, usually at the end of the third year, after completing the Master's thesis. Students entering with a Master's Thesis Waiver should take Comprehensive Exams at the end of the second year.

This exam is a written test. Students are given two opportunities to pass this exam. Failure to pass on the second attempt will result in termination from the program.

(3) Teaching experience. Most students serve as teaching assistants or as instructors with full responsibility for courses.

(4) Practicum. All students must spend at least one year in a practicum. These practica are 50% time, paid positions in organizations and consulting firms (e.g., Aon, Assessment and Development, Jeanneret & Associates, Personnel Decisions International, Vandaveer Group). Practica are supervised by Ph.D. level I/O Psychologists and allow students to learn how to apply their skills in actual organizations.

(5) Research experience. Ph.D. degrees in I/O Psychology are research degrees. Students are required to engage in research projects starting their first semester in order to prepare for completion of an M.A. thesis and doctoral dissertation in a timely manner. Research opportunities are to be discussed with the students' advisor, and students are encouraged to work with more than one faculty member to enhance exposure to different models of conducting research, and in order to ensure high levels of student and faculty productivity. All students are expected to collaborate with faculty and their graduate student colleagues in submitting their research results for conference presentation and journal publication.

SAMPLE PROGRAM OF STUDIES FOR STUDENTS IN I/O PSYCHOLOGY

Fall Semester	Spring Semester	Summer Semester
FIRST YEAR		
PSYC 6300 Statistics for Psyc.	PSYC 6302 Exp. Design	PSYC 6399 Master Thesis
PSYC 6370 Foundations of I/O Psyc.	PSYC 7345 Rsch Mthds	I/O Seminar (Interviewing)
PSYC 6398 Special Problems	I/O Seminar (Ex: Training)	
I/O Seminar	Foundations Course (Ex: Cognitive)	
SECOND YEAR		
PSYC 6313 Multivariate Methods	Statistics (Ex: Structural. Equations)	PSYC 7399 Master Thesis
I/O Seminar (Ex: Motivation)	PSYC 6301 Psychological Theory	I/O Seminar (Legal Issues)
I/O Seminar (Ex: Personnel Psyc.)	I/O Seminar (Ex: Org. Psyc.)	
Outside Course (Ex: Manag. Theory)	Foundations Course (Ex: Social)	
THIRD YEAR		
PSYC 6397 Teaching Practicum	PSYC 7326 Professional Prob.	Comprehensive Exam
PSYC 6398 Special Problems	Seminar in I/O (Ex: Occup. Health)	Elective Courses
Outside Course (Ex: Org. Behav.)	PSYC 6398 Special Problems	
FOURTH AND FIFTH YEAR		
PSYC 8399;8699;8999 Dissertation		
PSYC 7392;7393 Practicum		
Elective Courses		

Notes:

Students are expected to participate in faculty and their own research projects throughout their graduate program. Enrollment in Special Problems courses (6398) permits course credit for such research experience.

All courses are not offered every year.

SOCIAL PSYCHOLOGY

The Graduate Program in Social Psychology is designed to train our graduate students for careers as social psychologists. As such, the program provides broad coverage of all aspects of social psychology, as well as scholarly competence in specific social psychological content areas. The program is designed to develop the high level of research competence necessary for attaining the Ph.D. degree and for professional preparation for research careers in academic or other research settings.

A practical aspect of increasing breadth while also achieving expertise in a specialty area is to facilitate the degree of flexibility required to deal with a job market which is expanding beyond the traditional academic roles of the social psychologist. For example, relating social psychology to health behavior has been one area in which the program has offered extensive research training opportunities. In addition, relating social psychology to cognition, communication, and interaction in close relationships is another research area in which students can acquire knowledge and training. In view of this, faculty research interests are sufficiently broad to provide students with research opportunities in several areas of social psychology.

During the first two years of the program, the graduate student will complete several basic, core courses as well as develop specific research interests and skills needed to complete the Master's Degree requirements by the end of the second year. Formal coursework involves completing core courses in the program, courses in the student's minor area, seminars, and other departmental courses. By the end of the third year, the student should complete all requirements to advance to doctoral candidacy, including the Master's Thesis and the comprehensive examination or paper. Ideally, the doctoral dissertation is to be completed by the end of the fourth year. The main focus of training in the program is to guide each student in developing independent research in an area of continuing interest to him or her.

Curriculum and Evaluation Procedures

The social psychology graduate program is divided into two major segments:

- Predoctoral candidacy (54 hours)
- Doctoral candidacy (27 hours)

Each of these segments is expected to require two years or less for completion. Thus, the entire program should require a maximum of four years of study depending on availability of courses.

Predoctoral Candidacy Requirements (54)

Successful completion of the following requirements is required for admission to candidacy for the Doctoral Degree in Social Psychology.

I. Departmental Course Requirements (18)

- A. General (9)
 1. 6301: Psychological Theory
 2. 6300: Statistics for Psychology
 3. 6302: Experimental Design
- B. Foundations (9)
 1. 6338: Foundations of Social Psychology
 2. Foundations Elective 1
 3. Foundations Elective 2

II. Social Area Course Requirements (18)

A series of six core social seminars offered by members of the social psychology faculty must be completed with superior performance during the first two years. Note that a student must choose two of 5a, 5b, or 5c.

1. PSYC 6378: Social Cognition
2. PSYC 6337: Social Psychology/
Behavioral Medicine
3. PSYC 6389: History & Theory of Soc. Psyc.
4. PSYC 6381: Social Psychology Methodology
- 5a. PSYC 6394: Social Psychology & Health

OR

- 5b. PSYC 6380: Personal Relationships: Theory
and Research

OR

- 5c. PSYC 6394 Attitudes and Persuasion

III. Research Training (18)

A. Research Practica (12)

Each student will be exposed systematically to one or more areas of research in social psychology during the first two years of training. Assignments will be determined according to the needs of the student and the activity schedule of the research project in which the student will be participating. The student will be evaluated according to a formal set of criteria established by the supervisor(s) of each research project.

B. Master's Thesis (6)

The student must propose, design, and implement an original research project to be conducted under the supervision of his/her advisor. The written proposal and final report of the project must be approved by a thesis committee constituted as described in the "Sequence for the Thesis" section of this handbook.

Doctoral Candidacy Requirements (27)

Successful completion of all formal M.A. degree requirements and completion of the comprehensives (examination or paper) are necessary before the student may be admitted into candidacy for the Ph.D. degree. Major area and minor area requirements, and the dissertation are required before the Ph.D. is granted. Due to varying availability of courses, major and minor area requirements may be fulfilled before and after doctoral candidacy.

I. Comprehensive Examination or Paper

The student must complete one of two options to achieve doctoral candidacy: **(1)** The comprehensive examination is a written and oral examination covering the history, theory, and methods of contemporary social psychology, and is usually taken by the third year of study. The student must successfully complete this examination. **(2)** The comprehensive paper should provide a thorough, integrated, and critical review of the theoretical and empirical literature on an important social psychological problem of the students' choice. The student will submit the paper to a committee and will participate in an oral defense of the paper. The committee should consist of a chair (one of the program faculty) and two other faculty members (at least one of whom should be outside of our program). Contact the program director for more detailed instructions regarding each comprehensive option.

II. Major Area Requirements (9)

Major Area Requirements may be taken before or after admission to candidacy:

1. Professional Development
2. Multivariate Methods
3. Elective

III. Minor Area Requirements (6)

The student is required to present to the Social Psychology faculty a written outline of a planned course of study in an area complementary to the area of specialization, but outside of the Social Program. The minor proposal should be submitted to the social psychology faculty during the fall term of the third year for those students entering the program with a Bachelor's degree, and during the fall term of the second year for students entering the program with an M.A. degree. Coursework for the approved minor area of study must be completed prior to the final defense for the doctoral dissertation, but may be completed before or after admission to

candidacy. See the program director for written models for the minor proposal.

IV. Dissertation (12)

The doctoral dissertation must represent original research in the area of the student's choice. At least one member of the social psychology faculty

will serve as chair and/or co-chair of the dissertation committee. Other criteria for composition of the committee are described in the "Sequence for the Doctoral Dissertation" section of this handbook.

SAMPLE PROGRAM OF STUDIES FOR STUDENTS IN SOCIAL PSYCHOLOGY

Fall Semester	Spring Semester	Summer Semester
FIRST YEAR¹		
*6300: Statistics for Psychology	*6302: Experimental Design	7392: Research Practicum
*6338: Foundations of Social Psych	* 6381: Social Psy. Methodology	Elective /
6378: Social Cognition	6389: History & Theory of Social Psych	Research Practicum
7392: Research Practicum	7392: Research Practicum	
SECOND YEAR		
*6301: Psychological Theory	*Foundations – Elective	7392: Research Practicum
*Foundations – Elective	6394: Professional Development	Elective /
6337: Social Psych / Behavioral Medicine	Social Seminar	Research Practicum
6399: Master's Thesis	7399: Master's Thesis	
	Master's Thesis Defense	Comprehensive Exam
THIRD YEAR		
6313: Multivariate	Social Seminar	8699: Doctoral Dissertation
Minor Elective	Minor Elective	
PSYC 6397 Teaching Practicum	8399: Doctoral Dissertation	
Minor Proposal	Dissertation Proposal	
FOURTH YEAR		
Social Seminar / Minor Elective	8399: Doctoral Dissertation	
8699: Doctoral Dissertation	Dissertation Defense	

¹ This schedule is based on full-time status of twelve (12) hours (for the fall and spring semesters) for the first two years and nine (9) hours beginning the third year. An asterisk (*) denotes required courses for changing from 12 to 9 hours (based on the Graduate Full-Time Status Policy, in this Handbook).

COURSE LISTINGS

All courses numbered 6000 or higher in this department are restricted to graduate students in psychology. All other graduate students or post-baccalaureate students must have the approval of the instructor prior to registration. Courses are punctuated as follows:

Department Core

PSYC 6300: Statistics for Psychology (Credit 3)

The origins of inferential statistics. Emphasis is placed on understanding the uses of statistical concepts in psychological research.

PSYC 6301: Psychological Theory: History and Systems (Credit 3)

Survey of topics in philosophy of science and technology: rational (rule-governed) and paradigmatic (arbitrary) components of natural science, contemporary psychological research and practice, logical structure, and cognitive status of scientific theory.

PSYC 6302: Experimental Design (Credit 3)

Review of basic principles and design models. Concentration on multivariate factorial designs, both parametric and nonparametric, including analysis of variance, co-variance, Latin and Greco-Latin squares, and trend analysis.

General Courses

PSYC 6100: Psychological Research Data Analysis (Credit 1)

Instruction and practice in data analysis using large and small computer systems. Emphasis on use of packaged software.

PSYC 6397:7396: Selected Topics in Quantitative Methods (Credit 1-3)

Prerequisite - PSYC 6300 or consent of instructor. May be repeated for credit when topics vary. Examples of topics are factor analysis, test theory, Bayesian methods, and computer simulations.

PSYC 6198:6298:6398:6498:6598: Special Problems (Credit 1-5)

Prerequisites - Approval of chair. Individual student projects conducted in conjunction with a faculty member.

PSYC 6303: Foundations of Clinical Intervention I (Credit 3)

History and scope of clinical interventions; major theoretical models.

PSYC 6304: Foundations of Developmental Psychology (Credit 3)

Examines major theories and research findings that characterize a developmental perspective.

PSYC 6306: Foundations of Cognitive Psychology (Credit 3)

Advanced introduction to basic concepts, current issues, and applications of cognitive psychology. Areas represented are information processing, language, judgment, memory, and thinking.

PSYC 6308: Foundations of Neuropsychology (Credit 3)

Review of current status of research and theory of brain functioning in normal and

abnormal behavior for the non-specialist; introduction to nomenclature, concepts, and clinical and research techniques.

PSYC 6397: Foundations of Cognitive Neuroscience (Credit 3)

Study of brain bases of cognitive functioning including memory, learning, perception, and language.

PSYC 6309: Motivation and Emotion (Credit 3)

The development of the concepts of motivation and emotion: current views as to their status and as to models of motivational and emotional processes.

PSYC 6313: Multivariate Methods (Credit 3)

Prerequisite - PSYC 6300 or consent of instructor. Application of multiple regression and correlation to psychological data; introduction to discriminant analysis, canonical correlation, multivariate analysis of variance, and the general linear model.

PSYC 6314: Factor Analysis (Credit 3)

Exploratory and confirmatory factor analysis. Emphasis on theoretical understanding and practical use of major software packages.

PSYC 6315: Microcomputing in Psychological Research (Credit 3)

Role of microcomputers in psychological research. Emphasis on data acquisition, management, and analysis.

PSYC 6338: Foundations of Social Psychology (Credit 3)

An advanced introduction to the basic concepts, current issues, and applications of social psychology.

PSYC 6361: Social Development (Credit 3)

Prerequisite - PSYC 6304 or consent of instructor. Considers in greater detail the bearing of developmental theory and research on social relations and the socio-emotional aspects of knowledge and conduct.

PSYC 6362: Cognitive Development (Credit 3)

Prerequisite - PSYC 6304 or consent of instructor. Considers in greater detail the bearing of developmental theory and research of the problem of knowledge acquisition and its relationship to action. Readings include Piaget, Vygotsky, and information-processing researchers.

PSYC 6370: Foundations of Industrial Organizational Psychology (Credit 3)

Survey of the major content areas of I/O psychology as well as the relevant journals, the roles played by I/O psychologists, and the major ethical issues.

PSYC 6391: Selected Topics in Teaching of Psychology (Credit 3)

PSYC 6397: Selected Topics in Psychology (Credit 3)

PSYC 6399-7399: Master's Thesis (Credit 3-3)

PSYC 7301: Applied Data Analysis (Credit 3)

Advanced forum for students to explore unusual problems in data analysis or statistical

alternatives for exploring hypothesis that are difficult to analyze with traditional techniques.

PSYC 7302: Data Acquisition in Psychology (Credit 3)

Methods of data acquisition in psychological research. Provides an opportunity for student initiated research.

PSYC 7303: Data Management in Psychology (Credit 3)

Techniques for management of data bases for psychological research.

PSYC 7305: Structural Equations In Psychological Analysis (Credit 3)

Estimation, testing, and assessment of fit using LISREL are examined for path analytic, confirmatory factor, and latent variable models.

PSYC 7342: Biological Bases of Behavior (Credit 3)

The biological neurological and physiological aspects of behavior as they are relevant to psychology.

PSYC 7389: History of Psychology (Credit 3)

The history of psychology as a scientific and human enterprise is considered, including its major figures, theoretical systems, and historical and social contexts.

PSYC 7397: Categorical Data in Psychology (Credit 3)

Models and methods for working with categorical data, from joint probability and two-way contingency tables through log-linear models and their application to higher order tables.

PSYC 7392: Psychology Practicum (Credit 3)

Prerequisite - Consent of instructor, enrollment limited. Faculty supervised field work in clinical, industrial, and institutional settings.

PSYC 7393: Field Practicum in Psychology (Credit 3)

Prerequisite - Consent of instructor; enrollment limited. Supervised field work in clinical, industrial, and institutional settings.

PSYC 8399:8699:8999: Doctoral Dissertation (Credit 3-6-9)

Clinical Courses

PSYC 6316: Interventions in Clinical Psychology II (Credit 3)

Problem-specific techniques and therapeutic strategies based on functional analytic and cognitive-behavioral perspectives.

PSYC 6317: Psychopathology I (Credit 3)

Major theoretical formulations associated with functional disorders.

PSYC 6318: Psychopathology II (Credit 3)

Major theoretical formulations of behavior disorders in childhood; systemic and alternative perspectives on psychopathology.

PSYC 6320: Clinical and Research Team (Credit 3)

Enrollment limited. May be repeated. Practical introduction to clinical research activities.

PSYC 6331: Cognitive and Clinical Neuropsychology (Credit 3)

Study of behavioral and cognitive concomitants of damage to various structures and systems in the central nervous system.

PSYC 6340: Neuropsychology Rehabilitation (Credit 3)

Theory and implementation of specific psychological techniques in the retraining of neurological patients, including cognitive training, behavior modification, biofeedback, and training under drug states.

PSYC 6341: Perception (Credit 3)

Concerned with visual perception and other sense modalities. Topics include sensory organization and processes, space perception, constancies and illusions, pattern recognition, contributions of neurophysiology, perceptual learning and development, visuo-motor coordination.

PSYC 6342: Psychophysiology (Credit 3)

A study of central electrical activities of the brain and peripheral autonomic processes including recording techniques and clinical applications.

PSYC 6343: Psychopharmacology (Credit 3)

Electrical activity of the brain and synaptic transmitter systems. Manipulation by endogenous and exogenous chemicals and drugs, and their operation in various brain pathologies.

PSYC 6345: Developmental Neuropsychology (Credit 3)

Survey of development and maturation processes related to abnormal brain function.

PSYC 6349: Neuropsychological Assessment of Adults (Credit 3)

Prerequisite - PSYC 6330 and consent of instructor. A survey of neuropsychological tests and diagnostic procedures for adults.

PSYC 6350: Neuropsychological Assessment of Children (Credit 3)

Prerequisite - Psyc 6345 or consent of instructor. Survey of neuropsychological tests and diagnostic procedures for children.

PSYC 6356: Clinical Assessment I (Credit 3)

Test standards, the history of assessment, basic measurement theory, dependability of data, models of prediction, decision theory, Cognitive Assessment.

PSYC 6357: Clinical Assessment II (Credit 3)

Enrollment limited. Required for clinical psychology concentration. Rationale, administration, scoring, and interpretation of basic, personality, and behavioral assessment instruments.

PSYC 6373: Intervention in Clinical Psychology (Credit 3)

Role of psychologist in psychotherapy: clinical interviewing; major approaches in intervention.

PSYC 6392: Clinical Practicum (Credit 3)

May be repeated. Enrollment limited. Supervised field work in clinical psychology.

PSYC 6393: Clinical Research Practicum (Credit 3)

Prerequisites - PSYC 6330 and 6302 and consent of instructor. May be repeated for a maximum of nine semester hours. Clinical research involving experimental design, data collection, quantitative analysis, and preparation of research reports.

PSYC 6397: Neuropsychology of Psychopathology (Credit 3)

PSYC 7320: Family Therapy (Credit 3)

May be repeated for a maximum of six semester hours. The family as a focus for problems and a medium for change; theory, assessment and intervention.

PSYC 7321: Head Injury (Credit 3)

Prerequisite - PSYC 6305 or consent of instructor. Research and clinical issues in pathophysiology, epidemiology and neurobehavioral sequelae of head injury.

PSYC 7322: Issues in Community Psychology (Credit 3)

May be repeated for a maximum of six semester hours.

PSYC 7323: Research in Personality and Clinical Psychology (Credit 3)

Major concepts and methods of study of personality and clinical psychology.

PSYC 7325: Aphasiology (Credit 3)

Prerequisite - Consent of instructor. Historical and current approaches to the study of aphasia are discussed. Topics include localization of function, group versus case study methodology and the analysis of deficits in syntactic and phonological components of language.

PSYC 7326: Professional Problems in Applied Psychology (Credit 3)

Issues involved in service delivery and service delivery systems (ethics, program administration, inter-professional relationships, etc.).

PSYC 7328: Group Processes (Credit 3)

May be repeated for a maximum of nine semester hours. Dynamics, leadership styles, and therapies in groups.

PSYC 7329: Seminar in Clinical Psychology (Credit 3) May be repeated.

PSYC 7333: Experimental Neuropsychology (Credit 3)

Behavioral and physiological techniques for studying human brain function.

PSYC 7334: Dementia (Credit 3)

Prerequisite - Consent of instructor. The etiology, prevalence, neuropathology and clinical aspects of major dementing disorders are discussed. Emphasis is placed on behavioral symptomatology, differential diagnosis, especially with regard to neuropsychological testing and in the context of normal aging.

PSYC 7336: MHS-I: Research & Services for the Severely & Chronically Mentally Disabled (Credit 3)

Prerequisite - Second year or beyond in clinical psychology program and /or consent of instructor. An advanced seminar in clinical psychology covering research requirements, problems, and empirically validated structures and procedures for effective programs with

psychotic and other chronic mental disorders.

PSYC 7337: MHS-II: Assessment and Diffusion of New Technologies (Credit 3)

Prerequisite - PSYC 7336 and/or consent of instructor. An advanced seminar in clinical psychology extending MHS-I to in-depth coverage of assessment and decision-making practices in service delivery systems and research requirements, problems, and principles for effective dissemination of new technologies.

PSYC 7390: Selected Topics in Neural Mechanisms (Credit 3)

May be repeated for a maximum of nine semester hours. Various topics relevant to central processing of information, e.g., localization and hemispheric functioning, predictability and control of stressors, state dependent learning, brain models of memory, motivational, and cognitive processing.

PSYC 7395: Topics on Clinical Research (Credit 3) May be repeated.

PSYC 7397: Personality Assessment (Credit 3)

An advanced course on methods of personality assessment, reviewed in terms of administration, scoring and interpretation.

PSYC 8321:8621:8921 Clinical Psychology Internship (Credit 3:6:9)

May be repeated (three terms required for completion of the program requirement).

PSYC 8394: Selected Topics in Psychopathology (Credit 3)

PSYC 8395: Selected Topics in Neuropsychology (Credit 3) Examples include Attention, Cerebral Dominance, Memory Disorders, Neuropsychology of Movement, Epilepsy. May be repeated when topics vary.

Cognitive Courses

PSYC 6352: Human Memory (Credit 3)

Prerequisite - PSYC 6306 or consent of instructor. An informational processing approach to the analysis of empirical evidence and theoretical issues regarding human memory, its development and demise. Topics include short-term memory, long-term memory, autobiographical memory, automatic and control processes. Various theoretical perspectives are examined in detail.

PSYC 6397: Cognition and Emotion (Credit 3)

Prerequisite - Approval of graduate advisor. Examines the relationship between "normal" emotions (e.g., anxiety, happiness, sadness) and cognitive processes involved in memory, attention, and problem-solving. Research and theory from both the adult and developmental literatures are considered.

PSYC 7394: Selected Topics in Cognitive Psychology (Credit 3)

Prerequisite - Approval of graduate director. May be repeated for credit when topics vary. Example topics are semantic memory, search strategies, judgmental heuristics, and computer models.

PSYC 7397: Selected Topics in Applied Cognitive Psychology (Credit 3)

Prerequisite - Approval of graduate advisor. May be repeated for credit when topics vary. Example topics are: applications of cognitive perspectives to law enforcement,

education, curriculum development, and medical compliance.

Developmental Courses

PSYC 8396: Selected Topics in Developmental Cognitive Neuroscience (Credit 3)

Prerequisite - PSYC 6304 or consent of instructor. May be repeated when topics vary.

Intensive study of selected topics that are central to the field or current interests of faculty and students.

Industrial-Organizational Courses

PSYC 6351: Research Methods in Industrial-Organizational Psychology (Credit 3)

Designed to provide experience in the process of research in industrial/organizational psychology.

PSYC 6371: Seminar in Personnel Psychology (Credit 3)

Theory and application of principles of individual differences and psychological measurement to the study of behavior in organizational settings. Applied emphasis is on employee selection and development.

PSYC 6374: Organizational Change and Development (Credit 3)

Diagnostic and intervention strategies concerned with social processes in organizational functioning.

PSYC 6390: Topics in Current Literature in Industrial-Organizational Psyc (Credit 3)

May be repeated for a maximum of six semester hours with approval of Program Director. Review of present psychological knowledge on topics broadly related to work behavior. The aim is to define future research needs. Topics are determined by instructor and student research interests.

PSYC 7304: Survey Methods in Psychology (Credit 3)

Design and use of surveys to assess attitudes in organizations; use of the data as organizational feedback.

PSYC 7361: Organizational Effectiveness (Credit 3)

Overview of the literature including measuring effectiveness, the role of productivity in effectiveness, and research needs.

PSYC 7362: Interviewing (Credit 3)

Theory, research and legal issues involved in the use of the interview in personnel selection.

PSYC 7363: Seminar in Organizational Psychology (Credit 3)

Research methodologies and theories related to social processes in organizations.

PSYC 7364: Legal Issues (Credit 3)

Overview of the influence of law, government regulations and guideline, and professional principles and standards on the practice of Industrial-Organization Psychology. Primary focus is on fair employment and ethical issues.

PSYC 7365: Leadership (Credit 3)

Theories, issues, and research in organizational leadership. Reviews basic paradigms of

leadership, controversies among theories and studies, and difficulties in measuring leadership processes in organizations.

PSYC 7366: Work Motivation (Credit 3)

Theories, issues, and research in work motivation, factors and processes influencing effort, intentions, performance, and other job behaviors such as work needs, motives, and values.

PSYC 7360: Seminar in Training (Credit 3)

Training needs-analysis, development of training programs, evaluation of training outcomes.

PSYC 8320: Field Work in Organization Development (Credit 3)

Skill-building for OD field work. Emphasizes process facilitation, communication, group problem solving, and organizational diagnosis skills.

PSYC 8393: Selected Topics in Industrial-Organizational Psychology (Credit 3)

May be repeated for a maximum of nine semester hours with approval of Program Director. Topics will be described and posted in the Psychology Department prior to registration.

Social Courses

PSYC 6337: Social Psychology/Behavioral Medicine (Credit 3)

Prerequisite - Graduate standing or consent of instructor. Social psychological theories as related to health behavior/behavioral medicine and research, including the preparation of applications for funding of research grants.

PSYC 6378: Social Cognition (Credit 3)

Prerequisite - Graduate standing or consent of instructor. The course is designed to explore perspectives and research on social cognition that both reflect and challenge mainstream assumptions in the field.

PSYC 6380: Personal Relationships: Theory and Research (Credit 3)

Prerequisite - Graduate standing or consent of instructor. This course is designed to help students acquire greater knowledge about how research on relationships is approached and to critically analyze theory and research in the field.

PSYC 6381: Social Psychological Methodology (Credit 3)

Various methodological orientations pertaining to experimental and quasi-experimental research in the social sciences.

PSYC 6389: History and Theory of Social Psychology (Credit 3)

Prerequisite - Graduate standing in Psychology or consent of instructor. Survey of major historical and theoretical antecedents of modern social psychology.

PSYC 6394: Current Topics in Social Psychology (Credit 3) May be repeated when topics vary. In-depth coverage of special topics in social psychology. (Topics include: Motivation, Professional Development, Psychophysiology and Stress, Health, Attitudes and Persuasion.)

PSYC 7332: Program Evaluation (Credit 3)

Design and evaluation of treatment and educational programs.

PSYC 7391: Research in Personality and Social Contexts (Credit 3)

Systematic examination of topics relating personality factors and dimensions of social contexts.

APPENDIX A

GRADUATE FULL-TIME STATUS POLICY

DATE: May 15, 2000

TO: Psychology Faculty and Graduate Students

FROM: John P. Vincent, Ph.D., Chairman

RE: Graduate Full-time Status

XC: Marco J. Mariotto, Ph.D., Dean of Grad. and Prof. Studies
 Richard M. Rozelle, Ph.D., Dean of the College of Social Sciences
 Karen Baldassare, SOS Coordinator, Academic Records
 Suzanne Kieffer, Ph.D., Psy. Dir. of Admin. Affairs
 Sherry Rivera, Psy. Coord. of Academic Affairs

Effective immediately, the following *Graduate Full-Time Status Policy* is in effect for all graduate students in the Department of Psychology. This policy is a revision of, and supercedes, the October 21, 1998 policy. Further, it is in compliance with the November 8, 1995 memorandum from the Office of the Vice Provost for Graduate Studies which defines full-time status as 12 hours per long semester for students who have not yet completed core curricula such as is outlined in our graduate student handbook.

Students in the Clinical Psychology Program, are required to take 12 semester credit hours each long semester, and 6 semester credit hours during the summer for the first four years of graduate study. Thereafter, full-time status will be maintained by registering for the minimum number of hours required for full-time doctoral status at the University (9 semester credit hours for each long semester and 6 semester credit hours for summer).

For students in the other three department doctoral programs, the full-time enrollment requirement is 12 semester credit hours during each long semester and 6 credit hours for summer for the first two years of graduate study or until the student has finished the departmental core courses. After completion of the core courses, full-time status will be maintained by registering for the minimum number of hours required for full-time doctoral status at the University (9 semester credit hours for each long semester and 6 semester credit hours for summer).

The departmental core minimum of organized courses required of all graduate students consists of 6 credit hours of statistics, 3 credit hours of Philosophy of Science, 9 credit hours of Psychology Foundation Courses, 3 hours of Research Methods, and 3 hours of Professional Problems/Ethics.

Exceptions

Completion of a General Petition initiates the approval process for the following full-time equivalency exceptions. General Petitions are available through the department's Academic Affairs Office, located in 124 Heyne. Exceptions must be submitted at least 2 weeks prior to the official 1st day of classes to ensure that approval at all levels has been granted.

1.) Graduate students in their last semester and taking only dissertation hours may register for 3 credit hours.

2.) Clinical graduate students engaged in full-time internships may register for 3 credit hours during their year of internship*.

3.) Industrial/Organizational graduate students engaged in full-time practicums may register for 6 credit hours (PSYC 7392 and 7393) during the semester of the practicum*. This does NOT apply to I/O students who do their practicum part-time over the course of one year.

* Note that once students enroll for dissertation hours, they must continuously do so. As such, if students have begun to register for dissertation hours prior to their internship/practicum, they will be required to enroll for 3 dissertation hours in addition to the internship/practicum hours.

4.) Other unusual circumstances. These circumstances should be detailed in a memo directed to the department chairman from the appropriate program director.

APPENDIX B

ACADEMIC AND ADMINISTRATIVE GUIDELINES

The University of Houston, Department of Psychology adheres to the guidelines established by the American Psychological Association for Graduate Programs. These fundamental principles are outlined below.

Our programs have an identifiable core faculty responsible for its leadership whom:

- function as an integral part of the academic unit
- are sufficient in number for their academic and professional responsibilities
- have theoretical perspectives and academic and applied experiences appropriate to the program's goals and objectives
- demonstrate substantial competence and have recognized credentials in those areas which are at the core of the program's objectives and goals
- are available to and function as appropriate role models for students in their learning and socialization in the discipline and profession

Our programs have an identifiable body of students at different levels of matriculation whom:

- are of sufficient number to ensure opportunities for meaningful peer interaction, support, and socialization
- by interest, aptitude, and prior achievement are of quality appropriate for the program's goals and objectives
- reflect through their intellectual and professional development and intended career paths the program's goals, objectives, and philosophy

Additionally, all programs adhere to the following guidelines:

- The rights of students and faculty to be treated with courtesy and respect are recognized. In order to maximize the quality and effectiveness of students' learning experiences, all interactions among students, faculty, and staff should be collegial and conducted in a manner that reflects the highest standards of the scholarly community and of the profession.
- Students are informed of these principles and other avenues of recourse should problems arise.
- Faculty are accessible to students and provide them with a level of guidance and supervision that actively encourages timely completion of the program. The faculty provide appropriate professional role models and engage in actions that promote the students' acquisition of knowledge, skills, and competencies consistent with the program's training goals.
- Programs engage in actions that indicate respect for and understanding of cultural and individual diversity. Cultural and individual diversity refers to diversity with regard to personal and demographic characteristics. These include, but are not limited to, age, color, disabilities, ethnicity, gender, language, national origin, race, religion, sexual orientation, social economic status, and psychosocial functioning.
- Respect for an understanding of cultural and individual diversity is reflected in the program's policies for the recruitment, retention, and development of faculty and students, and in its curriculum and field placements.
- Nondiscriminatory policies and operating conditions are promoted and programs avoid any actions that would restrict program access or completion on grounds that

- are irrelevant to success in graduate training or the profession.
- Systematic, coherent, and long-term efforts have been initiated to attract and retain students and faculty from differing ethnic and racial backgrounds, and the programs within the department of psychology play an integral part of the mission of the academic college and The University of Houston. This mission is represented in the institution's operating budget and plans in a manner designed to enable the program to achieve its goals and objectives. The program must have students in sufficient number and the facilities necessary to ensure meaningful peer interaction, support, and socialization.
 - Any actions that would restrict program access on grounds that are irrelevant to success in graduate training are avoided.
 - A thoughtful and coherent plan to provide students with relevant knowledge and experiences about the role of cultural and individual diversity in psychological phenomena as they relate to the science and practice of professional psychology has been implemented.
 - Programs adhere to and make available to all interested parties formal written policies and procedures that govern: academic admission and degree requirements; administrative and financial assistance; student performance evaluation, feedback, advisement, retention and termination decisions; and due process and grievance procedures for students and faculty.
 - Program policies and procedures are consistent with those of The University of Houston and with those guidelines of the Council of Graduate Schools in the United States that pertain to faculty and student rights, responsibilities, and personal development.
 - Programs engage in regular, ongoing self studies that address (with appropriate involvement from its students):
 - effectiveness in achieving program goals and objectives (i.e., its outcomes)
 - how its goals and objectives are met through graduate education and professional training (i.e., its processes)
 - its procedures to maintain current achievements or to make program changes as necessary
 - Programs demonstrate commitment to excellence through personal systematic review of their goals/objectives, training models and curriculum in relation to:
 - the University of Houston Mission and goals
 - local, regional and national needs for psychological teaching, research, and service
 - national professional standards
 - the evolving body of academic and professional knowledge
 - our graduates' job placement and career paths

The programs recognize that students need access to support services during their course of graduate study. Student Support Services are available in the Know-It-All Guide provided by the Office of the Dean of Graduate and Professional Studies. In addition to these services, if a graduate student wishes referral for assessment, counseling, or psychotherapy beyond the service resources available to University faculty, staff, and students, the Director of Clinical Training may provide a list of qualified providers, many of whom offer reduced fees for graduate students. Mental health services are also covered by several of the sponsored health insurance plans that are available to graduate students who receive financial support through the department.

Academic Honesty - (see complete policy in UH Student Handbook)

The university can best function and accomplish its objective in an atmosphere of high ethical standards. It expects and encourages all students, faculty and staff to contribute to such an atmosphere in every way possible and especially by observing all accepted principles of academic honesty.

Academic Problems - Students have the right to redress their grievances, examine student evaluations for every class offered, and follow the chain of command listed in the UH Student Handbook if any academic problems occur.

Classification - Graduate classification denotes students who have been formally admitted to a graduate program.

Student Records: Family Educational Rights and Privacy Act - UH adheres to the Family Educational Rights and Privacy Act listed in the UH Student Handbook. UH will disclose information from a student's education records only with the written consent of the student, except with regard to the law that provides for disclosure without consent as indicated in the UH Student Handbook.

Procedure to Inspect Education Records - A student has the right to inspect his or her educational records and to challenge the contents. To review records, a student must make a request in writing to the Custodian of those records (see UH Student Handbook) for a complete listing.

Withdrawal - If students must drop all classes, they must officially withdraw from the university.

Student Life Policies - Members of the university community share the same responsibilities of citizenship as other members of the broader community. Students, faculty, and staff members are all subject to the same laws and ordinances. The university does not stand between national, state, or local law enforcement agencies and persons who break the law. Persons who break the law on the campus are subject to action by these agencies and also, when appropriate, the university's internal discipline procedures. All policies and procedures regarding student life are available in the UH Student Handbook.

APPENDIX C

AMERICAN PSYCHOLOGICAL ASSOCIATION

ETHICAL PRINCIPLES OF PSYCHOLOGISTS AND CODES OF CONDUCT

Ethical Principles of Psychologists and Code Of Conduct 2002

[History and Effective Date Footnote](#)

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INTRODUCTION AND APPLICABILITY

The American Psychological Association's (APA's) Ethical Principles of Psychologists and Code of Conduct (hereinafter referred to as the Ethics Code) consists of an Introduction, a Preamble, five General Principles (A – E), and specific Ethical Standards. The Introduction discusses the intent, organization, procedural considerations, and scope of application of the Ethics Code. The Preamble and General Principles are aspirational goals to guide psychologists toward the highest ideals of psychology. Although the Preamble and General Principles are not themselves enforceable rules, they should be considered by psychologists in arriving at an ethical course of action. The Ethical Standards set forth enforceable rules for conduct as psychologists. Most of the Ethical Standards are written broadly, in order to apply to psychologists in varied roles, although the application of an Ethical Standard may vary depending on the context. The Ethical Standards are not exhaustive. The fact that a given conduct is not specifically addressed by an Ethical Standard does not mean that it is necessarily either ethical or unethical.

This Ethics Code applies only to psychologists' activities that are part of their scientific, educational, or professional roles as psychologists. Areas covered include but are not limited to the clinical, counseling, and school practice of psychology; research; teaching; supervision of trainees; public service; policy development; social intervention; development of assessment instruments; conducting assessments; educational counseling; organizational consulting; forensic activities; program design and evaluation; and administration. This Ethics Code applies to these activities across a variety of contexts, such as in person, postal, telephone, internet, and other electronic transmissions. These activities shall be distinguished from the purely private conduct of psychologists, which is not within the purview of the Ethics Code.

Membership in the APA commits members and student affiliates to comply with the standards of the APA Ethics Code and to the rules and procedures used to enforce them. Lack of awareness or misunderstanding of an Ethical Standard is not itself a defense to a charge of unethical conduct.

The procedures for filing, investigating, and resolving complaints of unethical conduct are described in the current Rules and Procedures of the APA Ethics Committee. APA may impose sanctions on its members for violations of the standards of the Ethics Code, including termination of APA membership, and may notify other bodies and individuals of its actions. Actions that violate the standards of the Ethics Code may also lead to the imposition of sanctions on psychologists or students whether or not they are APA members by bodies other than APA, including state psychological associations, other professional groups, psychology boards, other state or federal agencies, and payors for health services. In addition, APA may take action against a member after his or her conviction of a felony, expulsion or suspension from an affiliated state psychological association, or suspension or loss of licensure. When the sanction to

be imposed by APA is less than expulsion, the 2001 Rules and Procedures do not guarantee an opportunity for an in-person hearing, but generally provide that complaints will be resolved only on the basis of a submitted record.

The Ethics Code is intended to provide guidance for psychologists and standards of professional conduct that can be applied by the APA and by other bodies that choose to adopt them. The Ethics Code is not intended to be a basis of civil liability. Whether a psychologist has violated the Ethics Code standards does not by itself determine whether the psychologist is legally liable in a court action, whether a contract is enforceable, or whether other legal consequences occur.

The modifiers used in some of the standards of this Ethics Code (e.g., *reasonably*, *appropriate*, *potentially*) are included in the standards when they would (1) allow professional judgment on the part of psychologists, (2) eliminate injustice or inequality that would occur without the modifier, (3) ensure applicability across the broad range of activities conducted by psychologists, or (4) guard against a set of rigid rules that might be quickly outdated. As used in this Ethics Code, the term *reasonable* means the prevailing professional judgment of psychologists engaged in similar activities in similar circumstances, given the knowledge the psychologist had or should have had at the time.

In the process of making decisions regarding their professional behavior, psychologists must consider this Ethics Code in addition to applicable laws and psychology board regulations. In applying the Ethics Code to their professional work, psychologists may consider other materials and guidelines that have been adopted or endorsed by scientific and professional psychological organizations and the dictates of their own conscience, as well as consult with others within the field. If this Ethics Code establishes a higher standard of conduct than is required by law, psychologists must meet the higher ethical standard. If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to this Ethics Code and take steps to resolve the conflict in a responsible manner. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing authority in keeping with basic principles of human rights.

PREAMBLE

Psychologists are committed to increasing scientific and professional knowledge of behavior and people's understanding of themselves and others and to the use of such knowledge to improve the condition of individuals, organizations, and society. Psychologists respect and protect civil and human rights and the central importance of freedom of inquiry and expression in research, teaching, and publication. They strive to help the public in developing informed judgments and choices concerning human behavior. In doing so, they perform many roles, such as researcher, educator, diagnostician, therapist, supervisor, consultant, administrator, social interventionist, and expert witness. This Ethics Code provides a common set of principles and standards upon which psychologists build their professional and scientific work.

This Ethics Code is intended to provide specific standards to cover most situations encountered by psychologists. It has as its goals the welfare and protection of the individuals and groups with whom psychologists work and the education of members, students, and the public regarding ethical standards of the discipline.

The development of a dynamic set of ethical standards for psychologists' work-related conduct requires a personal commitment and lifelong effort to act ethically; to encourage ethical behavior by students, supervisees, employees, and colleagues; and to consult with others concerning ethical problems.

GENERAL PRINCIPLES

This section consists of General Principles. General Principles, as opposed to Ethical Standards, are aspirational in nature. Their intent is to guide and inspire psychologists toward the very highest ethical ideals of the profession. General Principles, in contrast to Ethical Standards, do not represent obligations and should not form the basis for imposing sanctions. Relying upon General Principles for either of these reasons distorts both their meaning and purpose.

Principle A: Beneficence and Nonmaleficence

Psychologists strive to benefit those with whom they work and take care to do no harm. In their professional actions, psychologists seek to safeguard the welfare and rights of those with whom they interact professionally and other affected persons, and the welfare of animal subjects of research. When conflicts occur among psychologists' obligations or concerns, they attempt to resolve these conflicts in a responsible fashion that avoids or minimizes harm. Because psychologists' scientific and professional judgments and actions may affect the lives of others, they are alert to and guard against personal, financial, social, organizational, or political factors that might lead to misuse of their influence. Psychologists strive to be aware of the possible effect of their own physical and mental health on their ability to help those with whom they work.

Principle B: Fidelity and Responsibility

Psychologists establish relationships of trust with those with whom they work. They are aware of their professional and scientific responsibilities to society and to the specific communities in which they work. Psychologists uphold professional standards of conduct, clarify their professional roles and obligations, accept appropriate responsibility for their behavior, and seek to manage conflicts of interest that could lead to exploitation or harm. Psychologists consult with, refer to, or cooperate with other professionals and institutions to the extent needed to serve the best interests of those with whom they work. They are concerned about the ethical compliance of their colleagues' scientific and professional conduct. Psychologists strive to contribute a portion of their professional time for little or no compensation or personal advantage.

Principle C: Integrity

Psychologists seek to promote accuracy, honesty, and truthfulness in the science, teaching, and practice of psychology. In these activities psychologists do not steal, cheat, or engage in fraud, subterfuge, or intentional misrepresentation of fact. Psychologists strive to keep their promises and to avoid unwise or unclear commitments. In situations in which deception may be ethically justifiable to maximize benefits and minimize harm, psychologists have a serious obligation to consider the need for, the possible consequences of, and their responsibility to correct any resulting mistrust or other harmful effects that arise from the use of such techniques.

Principle D: Justice

Psychologists recognize that fairness and justice entitle all persons to access to and benefit from the contributions of psychology and to equal quality in the processes, procedures, and services being conducted by psychologists. Psychologists exercise reasonable judgment and take precautions to ensure that their potential biases, the boundaries of their competence, and the limitations of their expertise do not lead to or condone unjust practices.

Principle E: Respect for People's Rights and Dignity

Psychologists respect the dignity and worth of all people, and the rights of individuals to privacy, confidentiality, and self-determination. Psychologists are aware that special safeguards may be necessary to protect the rights and welfare of persons or communities whose vulnerabilities impair autonomous decision making. Psychologists are aware of and respect cultural, individual, and role differences, including those based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, and socioeconomic status and consider these factors when working with members of such groups. Psychologists try to eliminate the effect on their work of biases based on those factors, and they do not knowingly participate in or condone activities of others based upon such prejudices.

ETHICAL STANDARDS

1. Resolving Ethical Issues

1.01 Misuse of Psychologists' Work

If psychologists learn of misuse or misrepresentation of their work, they take reasonable steps to correct or minimize the misuse or misrepresentation.

1.02 Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority

If psychologists' ethical responsibilities conflict with law, regulations, or other governing legal authority, psychologists make known their commitment to the Ethics Code and take steps to resolve the conflict. If the conflict is unresolvable via such means, psychologists may adhere to the requirements of the law, regulations, or other governing legal authority.

1.03 Conflicts Between Ethics and Organizational Demands

If the demands of an organization with which psychologists are affiliated or for whom they are working conflict with this Ethics Code, psychologists clarify the nature of the conflict, make known their commitment to the Ethics Code, and to the extent feasible, resolve the conflict in a way that permits adherence to the Ethics Code.

1.04 Informal Resolution of Ethical Violations

When psychologists believe that there may have been an ethical violation by another psychologist, they attempt to resolve the issue by bringing it to the attention of that individual, if an informal resolution appears appropriate and the intervention does not violate any confidentiality rights that may be involved. (See also Standards 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority, and 1.03, Conflicts Between Ethics and Organizational Demands.)

1.05 Reporting Ethical Violations

If an apparent ethical violation has substantially harmed or is likely to substantially harm a person or organization and is not appropriate for informal resolution under Standard 1.04, Informal Resolution of Ethical Violations, or is not resolved properly in that fashion, psychologists take further action appropriate to the situation. Such action might include referral to state or national committees on professional ethics, to state licensing boards, or to the appropriate institutional authorities. This standard does not apply when an intervention would violate confidentiality rights or when psychologists have been retained to review the work of another psychologist whose professional conduct is in question. (See also Standard 1.02, Conflicts Between Ethics and Law, Regulations, or Other Governing Legal Authority.)

1.06 Cooperating With Ethics Committees

Psychologists cooperate in ethics investigations, proceedings, and resulting requirements of the APA or any affiliated state psychological association to which they belong. In doing so, they address any confidentiality issues. Failure to cooperate is itself an ethics violation. However, making a request for deferment of adjudication of an ethics complaint pending the outcome of litigation does not alone constitute noncooperation.

1.07 Improper Complaints

Psychologists do not file or encourage the filing of ethics complaints that are made with reckless disregard for or willful ignorance of facts that would disprove the allegation.

1.08 Unfair Discrimination Against Complainants and Respondents

Psychologists do not deny persons employment, advancement, admissions to academic or other programs, tenure, or promotion, based solely upon their having made or their being the subject of an ethics complaint. This does not preclude taking action based upon the outcome of such proceedings or considering other appropriate information.

2. Competence

2.01 Boundaries of Competence

(a) Psychologists provide services, teach, and conduct research with populations and in areas only within the boundaries of their competence, based on their education, training, supervised experience, consultation, study, or professional experience.

(b) Where scientific or professional knowledge in the discipline of psychology establishes that an understanding of factors associated with age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status is essential for effective implementation of their services or research, psychologists have or obtain the training, experience, consultation, or supervision necessary to ensure the competence of their services, or they make appropriate referrals, except as provided in Standard 2.02, Providing Services in Emergencies.

(c) Psychologists planning to provide services, teach, or conduct research involving populations, areas, techniques, or technologies new to them undertake relevant education, training, supervised experience, consultation, or study.

(d) When psychologists are asked to provide services to individuals for whom appropriate mental health services are not available and for which psychologists have not obtained the competence necessary, psychologists with closely related prior training or experience may provide such services in order to ensure that services are not denied if they make a reasonable effort to obtain the competence required by using relevant research, training, consultation, or study.

(e) In those emerging areas in which generally recognized standards for preparatory training do not yet exist, psychologists nevertheless take reasonable steps to ensure the competence of their work and to protect clients/patients, students, supervisees, research participants, organizational clients, and others from harm.

(f) When assuming forensic roles, psychologists are or become reasonably familiar with the judicial or administrative rules governing their roles.

2.02 Providing Services in Emergencies

In emergencies, when psychologists provide services to individuals for whom other mental health services are not available and for which psychologists have not obtained the necessary training, psychologists may provide such services in order to ensure that services are not denied. The services are discontinued as soon as the emergency has ended or appropriate services are available.

2.03 Maintaining Competence

Psychologists undertake ongoing efforts to develop and maintain their competence.

2.04 Bases for Scientific and Professional Judgments

Psychologists' work is based upon established scientific and professional knowledge of the discipline. (See also Standards 2.01e, Boundaries of Competence, and 10.01b, Informed Consent to Therapy.)

2.05 Delegation of Work to Others

Psychologists who delegate work to employees, supervisees, or research or teaching assistants or who use the services of others, such as interpreters, take reasonable steps to (1) avoid delegating such work to persons who have a multiple relationship with those being served that would likely lead to exploitation or loss of objectivity; (2) authorize only those responsibilities that such persons can be expected to perform competently on the basis of their education, training, or experience, either independently or with the level of supervision being provided; and (3) see that

such persons perform these services competently. (See also Standards 2.02, Providing Services in Emergencies; 3.05, Multiple Relationships; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.02, Use of Assessments; 9.03, Informed Consent in Assessments; and 9.07, Assessment by Unqualified Persons.)

2.06 Personal Problems and Conflicts

(a) Psychologists refrain from initiating an activity when they know or should know that there is a substantial likelihood that their personal problems will prevent them from performing their work-related activities in a competent manner.

(b) When psychologists become aware of personal problems that may interfere with their performing work-related duties adequately, they take appropriate measures, such as obtaining professional consultation or assistance, and determine whether they should limit, suspend, or terminate their work-related duties. (See also Standard 10.10, Terminating Therapy.)

3. Human Relations

3.01 Unfair Discrimination

In their work-related activities, psychologists do not engage in unfair discrimination based on age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, socioeconomic status, or any basis proscribed by law.

3.02 Sexual Harassment

Psychologists do not engage in sexual harassment. Sexual harassment is sexual solicitation, physical advances, or verbal or nonverbal conduct that is sexual in nature, that occurs in connection with the psychologist's activities or roles as a psychologist, and that either (1) is unwelcome, is offensive, or creates a hostile workplace or educational environment, and the psychologist knows or is told this or (2) is sufficiently severe or intense to be abusive to a reasonable person in the context. Sexual harassment can consist of a single intense or severe act or of multiple persistent or pervasive acts. (See also Standard 1.08, Unfair Discrimination Against Complainants and Respondents.)

3.03 Other Harassment

Psychologists do not knowingly engage in behavior that is harassing or demeaning to persons with whom they interact in their work based on factors such as those persons' age, gender, gender identity, race, ethnicity, culture, national origin, religion, sexual orientation, disability, language, or socioeconomic status.

3.04 Avoiding Harm

Psychologists take reasonable steps to avoid harming their clients/patients, students, supervisees, research participants, organizational clients, and others with whom they work, and to minimize harm where it is foreseeable and unavoidable.

3.05 Multiple Relationships

(a) A multiple relationship occurs when a psychologist is in a professional role with a person and (1) at the same time is in another role with the same person, (2) at the same time is in a relationship with a person closely associated with or related to the person with whom the psychologist has the professional relationship, or (3) promises to enter into another relationship in the future with the person or a person closely associated with or related to the person.

A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist's objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.

(b) If a psychologist finds that, due to unforeseen factors, a potentially harmful multiple relationship has arisen, the psychologist takes reasonable steps to resolve it with due regard for the best interests of the affected person and maximal compliance with the Ethics Code.

(c) When psychologists are required by law, institutional policy, or extraordinary circumstances to serve in more than one role in judicial or administrative proceedings, at the outset they clarify role expectations and the extent of confidentiality and thereafter as changes occur. (See also Standards 3.04, Avoiding Harm, and 3.07, Third-Party Requests for Services.)

3.06 Conflict of Interest

Psychologists refrain from taking on a professional role when personal, scientific, professional, legal, financial, or other interests or relationships could reasonably be expected to (1) impair their objectivity, competence, or effectiveness in performing their functions as psychologists or (2) expose the person or organization with whom the professional relationship exists to harm or exploitation.

3.07 Third-Party Requests for Services

When psychologists agree to provide services to a person or entity at the request of a third party, psychologists attempt to clarify at the outset of the service the nature of the relationship with all individuals or organizations involved. This clarification includes the role of the psychologist (e.g., therapist, consultant, diagnostician, or expert witness), an identification of who is the client, the probable uses of the services provided or the information obtained, and the fact that there may be limits to confidentiality. (See also Standards 3.05, Multiple Relationships, and 4.02, Discussing the Limits of Confidentiality.)

3.08 Exploitative Relationships

Psychologists do not exploit persons over whom they have supervisory, evaluative, or other authority such as clients/patients, students, supervisees, research participants, and employees. (See also Standards 3.05, Multiple Relationships; 6.04, Fees and Financial Arrangements; 6.05, Barter With Clients/Patients; 7.07, Sexual Relationships With Students and Supervisees; 10.05, Sexual Intimacies With Current Therapy Clients/Patients; 10.06, Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients; 10.07, Therapy With Former Sexual Partners; and 10.08, Sexual Intimacies With Former Therapy Clients/Patients.)

3.09 Cooperation With Other Professionals

When indicated and professionally appropriate, psychologists cooperate with other professionals in order to serve their clients/patients effectively and appropriately. (See also Standard 4.05, Disclosures.)

3.10 Informed Consent

(a) When psychologists conduct research or provide assessment, therapy, counseling, or consulting services in person or via electronic transmission or other forms of communication, they obtain the informed consent of the individual or individuals using language that is reasonably understandable to that person or persons except when conducting such activities without consent is mandated by law or governmental regulation or as otherwise provided in this Ethics Code. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

(b) For persons who are legally incapable of giving informed consent, psychologists nevertheless (1) provide an appropriate explanation, (2) seek the individual's assent, (3) consider such persons' preferences and best interests, and (4) obtain appropriate permission from a legally authorized person, if such substitute consent is permitted or required by law. When consent by a legally authorized person is not permitted or required by law, psychologists take reasonable steps to protect the individual's rights and welfare.

(c) When psychological services are court ordered or otherwise mandated, psychologists inform the individual of the nature of the anticipated services, including whether the services are court ordered or mandated and any limits of confidentiality, before proceeding.

(d) Psychologists appropriately document written or oral consent, permission, and assent. (See also Standards 8.02, Informed Consent to Research; 9.03, Informed Consent in Assessments; and 10.01, Informed Consent to Therapy.)

3.11 Psychological Services Delivered To or Through Organizations

(a) Psychologists delivering services to or through organizations provide information beforehand to clients and when appropriate those directly affected by the services about (1) the nature and objectives of the services, (2) the intended recipients, (3) which of the individuals are clients, (4) the relationship the psychologist will have with each person and the organization, (5) the probable uses of services provided and information obtained, (6) who will have access to the information, and (7) limits of confidentiality. As soon as feasible, they provide information about the results and conclusions of such services to appropriate persons.

(b) If psychologists will be precluded by law or by organizational roles from providing such information to particular individuals or groups, they so inform those individuals or groups at the outset of the service.

3.12 Interruption of Psychological Services

Unless otherwise covered by contract, psychologists make reasonable efforts to plan for facilitating services in the event that psychological services are interrupted by factors such as the psychologist's illness, death, unavailability, relocation, or retirement or by the client's/patient's relocation or financial limitations. (See also Standard 6.02c, Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work.)

4. Privacy And Confidentiality

4.01 Maintaining Confidentiality

Psychologists have a primary obligation and take reasonable precautions to protect confidential information obtained through or stored in any medium, recognizing that the extent and limits of confidentiality may be regulated by law or established by institutional rules or professional or scientific relationship. (See also Standard 2.05, Delegation of Work to Others.)

4.02 Discussing the Limits of Confidentiality

(a) Psychologists discuss with persons (including, to the extent feasible, persons who are legally incapable of giving informed consent and their legal representatives) and organizations with whom they establish a scientific or professional relationship (1) the relevant limits of confidentiality and (2) the foreseeable uses of the information generated through their psychological activities. (See also Standard 3.10, Informed Consent.)

(b) Unless it is not feasible or is contraindicated, the discussion of confidentiality occurs at the outset of the relationship and thereafter as new circumstances may warrant.

(c) Psychologists who offer services, products, or information via electronic transmission inform clients/patients of the risks to privacy and limits of confidentiality.

4.03 Recording

Before recording the voices or images of individuals to whom they provide services, psychologists obtain permission from all such persons or their legal representatives. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)

4.04 Minimizing Intrusions on Privacy

(a) Psychologists include in written and oral reports and consultations, only information germane to the purpose for which the communication is made.

(b) Psychologists discuss confidential information obtained in their work only for appropriate scientific or professional purposes and only with persons clearly concerned with such matters.

4.05 Disclosures

(a) Psychologists may disclose confidential information with the appropriate consent of the organizational client, the individual client/patient, or another legally authorized person on behalf of the client/patient unless prohibited by law.

(b) Psychologists disclose confidential information without the consent of the individual only as mandated by law, or where permitted by law for a valid purpose such as to (1) provide needed

professional services; (2) obtain appropriate professional consultations; (3) protect the client/patient, psychologist, or others from harm; or (4) obtain payment for services from a client/patient, in which instance disclosure is limited to the minimum that is necessary to achieve the purpose. (See also Standard 6.04e, Fees and Financial Arrangements.)

4.06 Consultations

When consulting with colleagues, (1) psychologists do not disclose confidential information that reasonably could lead to the identification of a client/patient, research participant, or other person or organization with whom they have a confidential relationship unless they have obtained the prior consent of the person or organization or the disclosure cannot be avoided, and (2) they disclose information only to the extent necessary to achieve the purposes of the consultation. (See also Standard 4.01, Maintaining Confidentiality.)

4.07 Use of Confidential Information for Didactic or Other Purposes

Psychologists do not disclose in their writings, lectures, or other public media, confidential, personally identifiable information concerning their clients/patients, students, research participants, organizational clients, or other recipients of their services that they obtained during the course of their work, unless (1) they take reasonable steps to disguise the person or organization, (2) the person or organization has consented in writing, or (3) there is legal authorization for doing so.

5. Advertising and Other Public Statements

5.01 Avoidance of False or Deceptive Statements

(a) Public statements include but are not limited to paid or unpaid advertising, product endorsements, grant applications, licensing applications, other credentialing applications, brochures, printed matter, directory listings, personal resumes or curricula vitae, or comments for use in media such as print or electronic transmission, statements in legal proceedings, lectures and public oral presentations, and published materials. Psychologists do not knowingly make public statements that are false, deceptive, or fraudulent concerning their research, practice, or other work activities or those of persons or organizations with which they are affiliated.

(b) Psychologists do not make false, deceptive, or fraudulent statements concerning (1) their training, experience, or competence; (2) their academic degrees; (3) their credentials; (4) their institutional or association affiliations; (5) their services; (6) the scientific or clinical basis for, or results or degree of success of, their services; (7) their fees; or (8) their publications or research findings.

(c) Psychologists claim degrees as credentials for their health services only if those degrees (1) were earned from a regionally accredited educational institution or (2) were the basis for psychology licensure by the state in which they practice.

5.02 Statements by Others

(a) Psychologists who engage others to create or place public statements that promote their professional practice, products, or activities retain professional responsibility for such statements.

(b) Psychologists do not compensate employees of press, radio, television, or other communication media in return for publicity in a news item. (See also Standard 1.01, Misuse of Psychologists' Work.)

(c) A paid advertisement relating to psychologists' activities must be identified or clearly recognizable as such.

5.03 Descriptions of Workshops and Non-Degree-Granting Educational Programs

To the degree to which they exercise control, psychologists responsible for announcements, catalogs, brochures, or advertisements describing workshops, seminars, or other non-degree-granting educational programs ensure that they accurately describe the audience for which the program is intended, the educational objectives, the presenters, and the fees involved.

5.04 Media Presentations

When psychologists provide public advice or comment via print, internet, or other electronic transmission, they take precautions to ensure that statements (1) are based on their professional knowledge, training, or experience in accord with appropriate psychological literature and practice; (2) are otherwise consistent with this Ethics Code; and (3) do not indicate that a professional relationship has been established with the recipient. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

5.05 Testimonials

Psychologists do not solicit testimonials from current therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence.

5.06 In-Person Solicitation

Psychologists do not engage, directly or through agents, in uninvited in-person solicitation of business from actual or potential therapy clients/patients or other persons who because of their particular circumstances are vulnerable to undue influence. However, this prohibition does not preclude (1) attempting to implement appropriate collateral contacts for the purpose of benefiting an already engaged therapy client/patient or (2) providing disaster or community outreach services.

6. Record Keeping and Fees

6.01 Documentation of Professional and Scientific Work and Maintenance of Records

Psychologists create, and to the extent the records are under their control, maintain, disseminate, store, retain, and dispose of records and data relating to their professional and scientific work in order to (1) facilitate provision of services later by them or by other professionals, (2) allow for replication of research design and analyses, (3) meet institutional requirements, (4) ensure accuracy of billing and payments, and (5) ensure compliance with law. (See also Standard 4.01, Maintaining Confidentiality.)

6.02 Maintenance, Dissemination, and Disposal of Confidential Records of Professional and Scientific Work

(a) Psychologists maintain confidentiality in creating, storing, accessing, transferring, and disposing of records under their control, whether these are written, automated, or in any other medium. (See also Standards 4.01, Maintaining Confidentiality, and 6.01, Documentation of Professional and Scientific Work and Maintenance of Records.)

(b) If confidential information concerning recipients of psychological services is entered into databases or systems of records available to persons whose access has not been consented to by the recipient, psychologists use coding or other techniques to avoid the inclusion of personal identifiers.

(c) Psychologists make plans in advance to facilitate the appropriate transfer and to protect the confidentiality of records and data in the event of psychologists' withdrawal from positions or practice. (See also Standards 3.12, Interruption of Psychological Services, and 10.09, Interruption of Therapy.)

6.03 Withholding Records for Nonpayment

Psychologists may not withhold records under their control that are requested and needed for a client's/patient's emergency treatment solely because payment has not been received.

6.04 Fees and Financial Arrangements

(a) As early as is feasible in a professional or scientific relationship, psychologists and recipients of psychological services reach an agreement specifying compensation and billing arrangements.

(b) Psychologists' fee practices are consistent with law.

(c) Psychologists do not misrepresent their fees.

(d) If limitations to services can be anticipated because of limitations in financing, this is discussed with the recipient of services as early as is feasible. (See also Standards 10.09, Interruption of Therapy, and 10.10, Terminating Therapy.)

(e) If the recipient of services does not pay for services as agreed, and if psychologists intend to use collection agencies or legal measures to collect the fees, psychologists first inform the person that such measures will be taken and provide that person an opportunity to make prompt payment. (See also Standards 4.05, Disclosures; 6.03, Withholding Records for Nonpayment; and 10.01, Informed Consent to Therapy.)

6.05 Barter With Clients/Patients

Barter is the acceptance of goods, services, or other nonmonetary remuneration from clients/patients in return for psychological services. Psychologists may barter only if (1) it is not clinically contraindicated, and (2) the resulting arrangement is not exploitative. (See also Standards 3.05, Multiple Relationships, and 6.04, Fees and Financial Arrangements.)

6.06 Accuracy in Reports to Payors and Funding Sources

In their reports to payors for services or sources of research funding, psychologists take reasonable steps to ensure the accurate reporting of the nature of the service provided or research conducted, the fees, charges, or payments, and where applicable, the identity of the provider, the findings, and the diagnosis. (See also Standards 4.01, Maintaining Confidentiality; 4.04, Minimizing Intrusions on Privacy; and 4.05, Disclosures.)

6.07 Referrals and Fees

When psychologists pay, receive payment from, or divide fees with another professional, other than in an employer-employee relationship, the payment to each is based on the services provided (clinical, consultative, administrative, or other) and is not based on the referral itself. (See also Standard 3.09, Cooperation With Other Professionals.)

7. Education and Training

7.01 Design of Education and Training Programs

Psychologists responsible for education and training programs take reasonable steps to ensure that the programs are designed to provide the appropriate knowledge and proper experiences, and to meet the requirements for licensure, certification, or other goals for which claims are made by the program. (See also Standard 5.03, Descriptions of Workshops and Non-Degree-Granting Educational Programs.)

7.02 Descriptions of Education and Training Programs

Psychologists responsible for education and training programs take reasonable steps to ensure that there is a current and accurate description of the program content (including participation in required course- or program-related counseling, psychotherapy, experiential groups, consulting projects, or community service), training goals and objectives, stipends and benefits, and requirements that must be met for satisfactory completion of the program. This information must be made readily available to all interested parties.

7.03 Accuracy in Teaching

(a) Psychologists take reasonable steps to ensure that course syllabi are accurate regarding the subject matter to be covered, bases for evaluating progress, and the nature of course experiences. This standard does not preclude an instructor from modifying course content or requirements when the instructor considers it pedagogically necessary or desirable, so long as students are made aware of these modifications in a manner that enables them to fulfill course requirements. (See also Standard 5.01, Avoidance of False or Deceptive Statements.)

(b) When engaged in teaching or training, psychologists present psychological information accurately. (See also Standard 2.03, Maintaining Competence.)

7.04 Student Disclosure of Personal Information

Psychologists do not require students or supervisees to disclose personal information in course- or program-related activities, either orally or in writing, regarding sexual history, history of abuse and neglect, psychological treatment, and relationships with parents, peers, and spouses or significant others except if (1) the program or training facility has clearly identified this requirement in its admissions and program materials or (2) the information is necessary to

evaluate or obtain assistance for students whose personal problems could reasonably be judged to be preventing them from performing their training- or professionally related activities in a competent manner or posing a threat to the students or others.

7.05 Mandatory Individual or Group Therapy

(a) When individual or group therapy is a program or course requirement, psychologists responsible for that program allow students in undergraduate and graduate programs the option of selecting such therapy from practitioners unaffiliated with the program. (See also Standard 7.02, Descriptions of Education and Training Programs.)

(b) Faculty who are or are likely to be responsible for evaluating students' academic performance do not themselves provide that therapy. (See also Standard 3.05, Multiple Relationships.)

7.06 Assessing Student and Supervisee Performance

(a) In academic and supervisory relationships, psychologists establish a timely and specific process for providing feedback to students and supervisees. Information regarding the process is provided to the student at the beginning of supervision.

(b) Psychologists evaluate students and supervisees on the basis of their actual performance on relevant and established program requirements.

7.07 Sexual Relationships With Students and Supervisees

Psychologists do not engage in sexual relationships with students or supervisees who are in their department, agency, or training center or over whom psychologists have or are likely to have evaluative authority. (See also Standard 3.05, Multiple Relationships.)

8. Research and Publication

8.01 Institutional Approval

When institutional approval is required, psychologists provide accurate information about their research proposals and obtain approval prior to conducting the research. They conduct the research in accordance with the approved research protocol.

8.02 Informed Consent to Research

(a) When obtaining informed consent as required in Standard 3.10, Informed Consent, psychologists inform participants about (1) the purpose of the research, expected duration, and procedures; (2) their right to decline to participate and to withdraw from the research once participation has begun; (3) the foreseeable consequences of declining or withdrawing; (4) reasonably foreseeable factors that may be expected to influence their willingness to participate such as potential risks, discomfort, or adverse effects; (5) any prospective research benefits; (6) limits of confidentiality; (7) incentives for participation; and (8) whom to contact for questions about the research and research participants' rights. They provide opportunity for the prospective participants to ask questions and receive answers. (See also Standards 8.03, Informed Consent for Recording Voices and Images in Research; 8.05, Dispensing With Informed Consent for Research; and 8.07, Deception in Research.)

(b) Psychologists conducting intervention research involving the use of experimental treatments clarify to participants at the outset of the research (1) the experimental nature of the treatment; (2) the services that will or will not be available to the control group(s) if appropriate; (3) the means by which assignment to treatment and control groups will be made; (4) available treatment alternatives if an individual does not wish to participate in the research or wishes to withdraw once a study has begun; and (5) compensation for or monetary costs of participating including, if appropriate, whether reimbursement from the participant or a third-party payor will be sought. (See also Standard 8.02a, Informed Consent to Research.)

8.03 Informed Consent for Recording Voices and Images in Research

Psychologists obtain informed consent from research participants prior to recording their voices or images for data collection unless (1) the research consists solely of naturalistic observations in public places, and it is not anticipated that the recording will be used in a manner that could cause personal identification or harm, or (2) the research design includes deception, and consent for the use of the recording is obtained during debriefing. (See also Standard 8.07, Deception in Research.)

8.04 Client/Patient, Student, and Subordinate Research Participants

(a) When psychologists conduct research with clients/patients, students, or subordinates as participants, psychologists take steps to protect the prospective participants from adverse consequences of declining or withdrawing from participation.

(b) When research participation is a course requirement or an opportunity for extra credit, the prospective participant is given the choice of equitable alternative activities.

8.05 Dispensing With Informed Consent for Research

Psychologists may dispense with informed consent only (1) where research would not reasonably be assumed to create distress or harm and involves (a) the study of normal educational practices, curricula, or classroom management methods conducted in educational settings; (b) only anonymous questionnaires, naturalistic observations, or archival research for which disclosure of responses would not place participants at risk of criminal or civil liability or damage their financial standing, employability, or reputation, and confidentiality is protected; or (c) the study of factors related to job or organization effectiveness conducted in organizational settings for which there is no risk to participants' employability, and confidentiality is protected or (2) where otherwise permitted by law or federal or institutional regulations.

8.06 Offering Inducements for Research Participation

(a) Psychologists make reasonable efforts to avoid offering excessive or inappropriate financial or other inducements for research participation when such inducements are likely to coerce participation.

(b) When offering professional services as an inducement for research participation, psychologists clarify the nature of the services, as well as the risks, obligations, and limitations. (See also Standard 6.05, Barter With Clients/Patients.)

8.07 Deception in Research

(a) Psychologists do not conduct a study involving deception unless they have determined that the use of deceptive techniques is justified by the study's significant prospective scientific, educational, or applied value and that effective nondeceptive alternative procedures are not feasible.

(b) Psychologists do not deceive prospective participants about research that is reasonably expected to cause physical pain or severe emotional distress.

(c) Psychologists explain any deception that is an integral feature of the design and conduct of an experiment to participants as early as is feasible, preferably at the conclusion of their participation, but no later than at the conclusion of the data collection, and permit participants to withdraw their data. (See also Standard 8.08, Debriefing.)

8.08 Debriefing

(a) Psychologists provide a prompt opportunity for participants to obtain appropriate information about the nature, results, and conclusions of the research, and they take reasonable steps to correct any misconceptions that participants may have of which the psychologists are aware.

(b) If scientific or humane values justify delaying or withholding this information, psychologists take reasonable measures to reduce the risk of harm.

(c) When psychologists become aware that research procedures have harmed a participant, they take reasonable steps to minimize the harm.

8.09 Humane Care and Use of Animals in Research

- (a) Psychologists acquire, care for, use, and dispose of animals in compliance with current federal, state, and local laws and regulations, and with professional standards.
- (b) Psychologists trained in research methods and experienced in the care of laboratory animals supervise all procedures involving animals and are responsible for ensuring appropriate consideration of their comfort, health, and humane treatment.
- (c) Psychologists ensure that all individuals under their supervision who are using animals have received instruction in research methods and in the care, maintenance, and handling of the species being used, to the extent appropriate to their role. (See also Standard 2.05, Delegation of Work to Others.)
- (d) Psychologists make reasonable efforts to minimize the discomfort, infection, illness, and pain of animal subjects.
- (e) Psychologists use a procedure subjecting animals to pain, stress, or privation only when an alternative procedure is unavailable and the goal is justified by its prospective scientific, educational, or applied value.
- (f) Psychologists perform surgical procedures under appropriate anesthesia and follow techniques to avoid infection and minimize pain during and after surgery.
- (g) When it is appropriate that an animal's life be terminated, psychologists proceed rapidly, with an effort to minimize pain and in accordance with accepted procedures.

8.10 Reporting Research Results

- (a) Psychologists do not fabricate data. (See also Standard 5.01a, Avoidance of False or Deceptive Statements.)
- (b) If psychologists discover significant errors in their published data, they take reasonable steps to correct such errors in a correction, retraction, erratum, or other appropriate publication means.

8.11 Plagiarism

Psychologists do not present portions of another's work or data as their own, even if the other work or data source is cited occasionally.

8.12 Publication Credit

- (a) Psychologists take responsibility and credit, including authorship credit, only for work they have actually performed or to which they have substantially contributed. (See also Standard 8.12b, Publication Credit.)
- (b) Principal authorship and other publication credits accurately reflect the relative scientific or professional contributions of the individuals involved, regardless of their relative status. Mere possession of an institutional position, such as department chair, does not justify authorship credit. Minor contributions to the research or to the writing for publications are acknowledged appropriately, such as in footnotes or in an introductory statement.
- (c) Except under exceptional circumstances, a student is listed as principal author on any multiple-authored article that is substantially based on the student's doctoral dissertation. Faculty advisors discuss publication credit with students as early as feasible and throughout the research and publication process as appropriate. (See also Standard 8.12b, Publication Credit.)

8.13 Duplicate Publication of Data

Psychologists do not publish, as original data, data that have been previously published. This does not preclude republishing data when they are accompanied by proper acknowledgment.

8.14 Sharing Research Data for Verification

- (a) After research results are published, psychologists do not withhold the data on which their conclusions are based from other competent professionals who seek to verify the substantive claims through reanalysis and who intend to use such data only for that purpose, provided that the confidentiality of the participants can be protected and unless legal rights concerning

proprietary data preclude their release. This does not preclude psychologists from requiring that such individuals or groups be responsible for costs associated with the provision of such information.

(b) Psychologists who request data from other psychologists to verify the substantive claims through reanalysis may use shared data only for the declared purpose. Requesting psychologists obtain prior written agreement for all other uses of the data.

8.15 Reviewers

Psychologists who review material submitted for presentation, publication, grant, or research proposal review respect the confidentiality of and the proprietary rights in such information of those who submitted it.

9. Assessment

9.01 Bases for Assessments

(a) Psychologists base the opinions contained in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, on information and techniques sufficient to substantiate their findings. (See also Standard 2.04, Bases for Scientific and Professional Judgments.)

(b) Except as noted in 9.01c, psychologists provide opinions of the psychological characteristics of individuals only after they have conducted an examination of the individuals adequate to support their statements or conclusions. When, despite reasonable efforts, such an examination is not practical, psychologists document the efforts they made and the result of those efforts, clarify the probable impact of their limited information on the reliability and validity of their opinions, and appropriately limit the nature and extent of their conclusions or recommendations. (See also Standards 2.01, Boundaries of Competence, and 9.06, Interpreting Assessment Results.)

(c) When psychologists conduct a record review or provide consultation or supervision and an individual examination is not warranted or necessary for the opinion, psychologists explain this and the sources of information on which they based their conclusions and recommendations.

9.02 Use of Assessments

(a) Psychologists administer, adapt, score, interpret, or use assessment techniques, interviews, tests, or instruments in a manner and for purposes that are appropriate in light of the research on or evidence of the usefulness and proper application of the techniques.

(b) Psychologists use assessment instruments whose validity and reliability have been established for use with members of the population tested. When such validity or reliability has not been established, psychologists describe the strengths and limitations of test results and interpretation.

(c) Psychologists use assessment methods that are appropriate to an individual's language preference and competence, unless the use of an alternative language is relevant to the assessment issues.

9.03 Informed Consent in Assessments

(a) Psychologists obtain informed consent for assessments, evaluations, or diagnostic services, as described in Standard 3.10, Informed Consent, except when (1) testing is mandated by law or governmental regulations; (2) informed consent is implied because testing is conducted as a routine educational, institutional, or organizational activity (e.g., when participants voluntarily agree to assessment when applying for a job); or (3) one purpose of the testing is to evaluate decisional capacity. Informed consent includes an explanation of the nature and purpose of the assessment, fees, involvement of third parties, and limits of confidentiality and sufficient opportunity for the client/patient to ask questions and receive answers.

(b) Psychologists inform persons with questionable capacity to consent or for whom testing is mandated by law or governmental regulations about the nature and purpose of the proposed

assessment services, using language that is reasonably understandable to the person being assessed.

(c) Psychologists using the services of an interpreter obtain informed consent from the client/patient to use that interpreter, ensure that confidentiality of test results and test security are maintained, and include in their recommendations, reports, and diagnostic or evaluative statements, including forensic testimony, discussion of any limitations on the data obtained. (See also Standards 2.05, Delegation of Work to Others; 4.01, Maintaining Confidentiality; 9.01, Bases for Assessments; 9.06, Interpreting Assessment Results; and 9.07, Assessment by Unqualified Persons.)

9.04 Release of Test Data

(a) The term *test data* refers to raw and scaled scores, client/patient responses to test questions or stimuli, and psychologists' notes and recordings concerning client/patient statements and behavior during an examination. Those portions of test materials that include client/patient responses are included in the definition of *test data*. Pursuant to a client/patient release, psychologists provide test data to the client/patient or other persons identified in the release. Psychologists may refrain from releasing test data to protect a client/patient or others from substantial harm or misuse or misrepresentation of the data or the test, recognizing that in many instances release of confidential information under these circumstances is regulated by law. (See also Standard 9.11, Maintaining Test Security.)

(b) In the absence of a client/patient release, psychologists provide test data only as required by law or court order.

9.05 Test Construction

Psychologists who develop tests and other assessment techniques use appropriate psychometric procedures and current scientific or professional knowledge for test design, standardization, validation, reduction or elimination of bias, and recommendations for use.

9.06 Interpreting Assessment Results

When interpreting assessment results, including automated interpretations, psychologists take into account the purpose of the assessment as well as the various test factors, test-taking abilities, and other characteristics of the person being assessed, such as situational, personal, linguistic, and cultural differences, that might affect psychologists' judgments or reduce the accuracy of their interpretations. They indicate any significant limitations of their interpretations. (See also Standards 2.01b and c, Boundaries of Competence, and 3.01, Unfair Discrimination.)

9.07 Assessment by Unqualified Persons

Psychologists do not promote the use of psychological assessment techniques by unqualified persons, except when such use is conducted for training purposes with appropriate supervision. (See also Standard 2.05, Delegation of Work to Others.)

9.08 Obsolete Tests and Outdated Test Results

(a) Psychologists do not base their assessment or intervention decisions or recommendations on data or test results that are outdated for the current purpose.

(b) Psychologists do not base such decisions or recommendations on tests and measures that are obsolete and not useful for the current purpose.

9.09 Test Scoring and Interpretation Services

(a) Psychologists who offer assessment or scoring services to other professionals accurately describe the purpose, norms, validity, reliability, and applications of the procedures and any special qualifications applicable to their use.

(b) Psychologists select scoring and interpretation services (including automated services) on the basis of evidence of the validity of the program and procedures as well as on other appropriate considerations. (See also Standard 2.01b and c, Boundaries of Competence.)

(c) Psychologists retain responsibility for the appropriate application, interpretation, and use of assessment instruments, whether they score and interpret such tests themselves or use automated or other services.

9.10 Explaining Assessment Results

Regardless of whether the scoring and interpretation are done by psychologists, by employees or assistants, or by automated or other outside services, psychologists take reasonable steps to ensure that explanations of results are given to the individual or designated representative unless the nature of the relationship precludes provision of an explanation of results (such as in some organizational consulting, preemployment or security screenings, and forensic evaluations), and this fact has been clearly explained to the person being assessed in advance.

9.11. Maintaining Test Security

The term *test materials* refers to manuals, instruments, protocols, and test questions or stimuli and does not include *test data* as defined in Standard 9.04, Release of Test Data. Psychologists make reasonable efforts to maintain the integrity and security of test materials and other assessment techniques consistent with law and contractual obligations, and in a manner that permits adherence to this Ethics Code.

10. Therapy

10.01 Informed Consent to Therapy

(a) When obtaining informed consent to therapy as required in Standard 3.10, Informed Consent, psychologists inform clients/patients as early as is feasible in the therapeutic relationship about the nature and anticipated course of therapy, fees, involvement of third parties, and limits of confidentiality and provide sufficient opportunity for the client/patient to ask questions and receive answers. (See also Standards 4.02, Discussing the Limits of Confidentiality, and 6.04, Fees and Financial Arrangements.)

(b) When obtaining informed consent for treatment for which generally recognized techniques and procedures have not been established, psychologists inform their clients/patients of the developing nature of the treatment, the potential risks involved, alternative treatments that may be available, and the voluntary nature of their participation. (See also Standards 2.01e, Boundaries of Competence, and 3.10, Informed Consent.)

(c) When the therapist is a trainee and the legal responsibility for the treatment provided resides with the supervisor, the client/patient, as part of the informed consent procedure, is informed that the therapist is in training and is being supervised and is given the name of the supervisor.

10.02 Therapy Involving Couples or Families

(a) When psychologists agree to provide services to several persons who have a relationship (such as spouses, significant others, or parents and children), they take reasonable steps to clarify at the outset (1) which of the individuals are clients/patients and (2) the relationship the psychologist will have with each person. This clarification includes the psychologist's role and the probable uses of the services provided or the information obtained. (See also Standard 4.02, Discussing the Limits of Confidentiality.)

(b) If it becomes apparent that psychologists may be called on to perform potentially conflicting roles (such as family therapist and then witness for one party in divorce proceedings), psychologists take reasonable steps to clarify and modify, or withdraw from, roles appropriately. (See also Standard 3.05c, Multiple Relationships.)

10.03 Group Therapy

When psychologists provide services to several persons in a group setting, they describe at the outset the roles and responsibilities of all parties and the limits of confidentiality.

10.04 Providing Therapy to Those Served by Others

In deciding whether to offer or provide services to those already receiving mental health services elsewhere, psychologists carefully consider the treatment issues and the potential client's/patient's welfare. Psychologists discuss these issues with the client/patient or another legally authorized person on behalf of the client/patient in order to minimize the risk of confusion

and conflict, consult with the other service providers when appropriate, and proceed with caution and sensitivity to the therapeutic issues.

10.05 Sexual Intimacies With Current Therapy Clients/Patients

Psychologists do not engage in sexual intimacies with current therapy clients/patients.

10.06 Sexual Intimacies With Relatives or Significant Others of Current Therapy Clients/Patients

Psychologists do not engage in sexual intimacies with individuals they know to be close relatives, guardians, or significant others of current clients/patients. Psychologists do not terminate therapy to circumvent this standard.

10.07 Therapy With Former Sexual Partners

Psychologists do not accept as therapy clients/patients persons with whom they have engaged in sexual intimacies.

10.08 Sexual Intimacies With Former Therapy Clients/Patients

(a) Psychologists do not engage in sexual intimacies with former clients/patients for at least two years after cessation or termination of therapy.

(b) Psychologists do not engage in sexual intimacies with former clients/patients even after a two-year interval except in the most unusual circumstances. Psychologists who engage in such activity after the two years following cessation or termination of therapy and of having no sexual contact with the former client/patient bear the burden of demonstrating that there has been no exploitation, in light of all relevant factors, including (1) the amount of time that has passed since therapy terminated; (2) the nature, duration, and intensity of the therapy; (3) the circumstances of termination; (4) the client's/patient's personal history; (5) the client's/patient's current mental status; (6) the likelihood of adverse impact on the client/patient; and (7) any statements or actions made by the therapist during the course of therapy suggesting or inviting the possibility of a posttermination sexual or romantic relationship with the client/patient. (See also Standard 3.05, Multiple Relationships.)

10.09 Interruption of Therapy

When entering into employment or contractual relationships, psychologists make reasonable efforts to provide for orderly and appropriate resolution of responsibility for client/patient care in the event that the employment or contractual relationship ends, with paramount consideration given to the welfare of the client/patient. (See also Standard 3.12, Interruption of Psychological Services.)

10.10 Terminating Therapy

(a) Psychologists terminate therapy when it becomes reasonably clear that the client/patient no longer needs the service, is not likely to benefit, or is being harmed by continued service.

(b) Psychologists may terminate therapy when threatened or otherwise endangered by the client/patient or another person with whom the client/patient has a relationship.

(c) Except where precluded by the actions of clients/patients or third-party payors, prior to termination psychologists provide pretermination counseling and suggest alternative service providers as appropriate.

History and Effective Date Footnote

This version of the APA Ethics Code was adopted by the American Psychological Association's Council of Representatives during its meeting, August 21, 2002, and is effective beginning June 1, 2003. Inquiries concerning the substance or interpretation of the APA Ethics Code should be addressed to the Director, Office of Ethics, American Psychological Association, 750 First Street, NE, Washington, DC 20002-4242. The Ethics Code and information regarding the Code can be found on the APA web site, <http://www.apa.org/ethics>. The standards in this Ethics Code will be

used to adjudicate complaints brought concerning alleged conduct occurring on or after the effective date. Complaints regarding conduct occurring prior to the effective date will be adjudicated on the basis of the version of the Ethics Code that was in effect at the time the conduct occurred.

The APA has previously published its Ethics Code as follows:

American Psychological Association. (1953). Ethical standards of psychologists. Washington, DC: Author.

American Psychological Association. (1959). Ethical standards of psychologists. *American Psychologist*, 14, 279-282.

American Psychological Association. (1963). Ethical standards of psychologists. *American Psychologist*, 18, 56-60.

American Psychological Association. (1968). Ethical standards of psychologists. *American Psychologist*, 23, 357-361.

American Psychological Association. (1977, March). Ethical standards of psychologists. *APA Monitor*, 22-23.

American Psychological Association. (1979). Ethical standards of psychologists. Washington, DC: Author.

American Psychological Association. (1981). Ethical principles of psychologists. *American Psychologist*, 36, 633-638.

American Psychological Association. (1990). Ethical principles of psychologists (Amended June 2, 1989). *American Psychologist*, 45, 390-395.

American Psychological Association. (1992). Ethical principles of psychologists and code of conduct. *American Psychologist*, 47, 1597-1611.

Request copies of the APA's Ethical Principles of Psychologists and Code of Conduct from the APA Order Department, 750 First Street, NE, Washington, DC 20002-4242, or phone (202) 336-5510.

APPENDIX D

GUIDELINES FOR STUDENT-FACULTY RELATIONSHIPS

INTRODUCTION

This document has its roots in a department-wide student survey administered by the UCLA Psychology Graduate Association in 1992. The first draft of this document was distributed to UCLA faculty members and GSA representatives in 1994. After incorporating their comments, a final review was conducted by the UCLA Faculty Executive Committee in 1995. A revised version was posted on the Northwestern University web site in 1998. The Northwestern version served as the first draft for this document. The document was then revised for the UH web site by the Director of Graduate Education after incorporating changes recommended by the Department Executive Committee and Graduate Student Council (GSC).

PURPOSE

Everyone has a different view of the ideal advising relationships and good advising relationships take many different forms. There is widespread agreement, however, that certain responsibilities and rewards are an inherent part of any mentoring relationship between student and faculty member. The purpose of this document is to describe the basic expectations that should hold for advising relationships. It will recommend ways of insuring that these expectations are met and that relationships are maximally beneficial to both parties. The goal is to increase awareness of the factors that produce a valuable partnership in the pursuit of scientific knowledge.

The advising relationship will ideally foster students' confidence, skills, and grounding in theory. This relationship should be the student's doorway to participation in the profession of psychology. In most cases, students and faculty will both feel that the relationship is productive and rewarding. However, if a student is not making good progress toward a degree or is not engaging in requisite presentation and publication activities, this may indicate a problem in the advising relationship. Students who feel the necessary support is missing from their advising relationship are encouraged to communicate their needs, discuss possible remedies, or perhaps find a new advisor. It is important that students are able to recognize unsatisfactory situations early on, and handle them appropriately. It is ultimately the student's choice and responsibility to terminate an unsatisfactory relationship.

WHAT TO EXPECT FROM YOUR ADVISING RELATIONSHIP

Basic Expectations

At a minimum, students can expect advising relationships to provide:

1. Guidance with ongoing research.
2. Guidance in planning professional progress and achieving necessary milestones.
3. Opportunities for and assistance with professional publications and conference presentations.
4. Letters of reference required for professional opportunities.

In addition, some advising relationships also provide students with:

1. Financial support from a grant and other external sources.

2. Facilitation of exchange of ideas among students and faculty with similar research interests, often in the form of lab meetings, etc.

At a minimum, faculty members can expect advising relationships to provide:

1. Opportunities to exchange ideas with intelligent and motivated students.
2. Opportunities to collaborate on research projects and publications
3. Gratification that they are training a new generation of scholars and practitioners.

In addition, some advising relationships also provide faculty with:

1. Employed research assistants.
2. Exposure to new areas of research and new statistical techniques as a result of their students' interests and expertise.
3. Letters of evaluation required for professional advancement.
These letters of evaluation can be the primary method through which advising is given weight in faculty promotions. If you have had a good or bad experiences with a professor, or if you have any thoughts as to whether a professor will serve students' interests in the future, you can make these known in a letter of evaluation.

Other Expectations

Below are five aspects of the mentoring relationship that tend to vary across advising relationships. Expectations regarding these aspects should be mutually understood throughout the advising relationship. Negotiation of these expectations is often informal, and mutual understanding may well be reached with little discussion. The activities of the advisor and advisee will evolve naturally to meet the changing needs of the student and changing demands of research projects. The important thing is that both parties are aware of what to expect and feel that they can safely raise issues if expectations are frequently unfulfilled.

1. Frequency and method for scheduling advising meetings:

There appears to be a common feeling among some faculty members (UCLA, NW and other schools polled) that advising meetings should occur roughly one to eight times a month, depending on the current needs of the student and the research project(s) in progress. Within these guidelines, however, there are several different ways to schedule meetings.

Advisor and advisee set up a regular meeting time, and/or the advisor holds a lab meeting attended by all of his/her students. The expectation is that they will always meet at that set time to ensure continuity and frequent communication.

Advisor and advisee set aside a weekly meeting time during which the student can count on the advisor to be available. However, the student may cancel the meeting (in advance) if he or she has nothing new to discuss.

Advisor is available to advisee on an "as needed" basis, usually by appointment, and occasionally, by stopping by the advisor's office. If this is the arrangement, advisors are expected to be on campus and available for meetings on a regular basis. Students should keep in mind that faculty members may not want to be interrupted at certain times (e.g., while preparing for a class). The important thing is not that faculty are always available, but that they are available for meetings on a regular basis and do not communicate to the student that a meeting would be an imposition.

2. How the advisee should prepare for advising meetings:

Advisee should come prepared with ideas, questions, or results to discuss.

If the advisee has written work (e.g., a manuscript for submission or a thesis draft), a copy should be given to the advisor about a week before the scheduled meeting, so that the advisor has sufficient time to read over it. Keep in mind that a key component of a professor's job is review of manuscripts submitted to journals; this means that your advisor may have a backlog of papers to read, and yours may or may not be at the top of the list. If in doubt, simply ask your advisor how much time he/she needs in advance for the purpose of examining written documents.

3. How quickly the advisor will return a written draft with comments, and how quickly the student will incorporate the advisor's comments and bring in a new draft.

Of course, this depends on the size of a document or other task and the proximity of deadlines. Revisions of journal manuscripts will often require 24 hour turn-around. In general, a maximum of two weeks is often appropriate. Remember, if the faculty member is traveling or either party becomes ill, the turn-around time must be extended. The important thing is to make this turn-around time explicit to both parties and then to honor this commitment. As in a game of badminton, both parties are expected to keep the birdie in the air, so to speak.

4. It is important to develop a shared understanding of the timeline for the advisee's progress through the doctoral program. Typically, the area (e.g., clinical, social) has established guidelines. Also, regulations regarding maximum/minimum courses and support have been set up by the State of Texas Coordinating Board for Higher Education.
5. As research projects become formalized, it is important to have mutual agreement about the advisor's participation in the planning and write-up of the advisee's research. It is also important to establish as early as possible how this participation will figure into order of authorship for collaborative papers.

GETTING WHAT YOU EXPECT: COMMUNICATION

1. Share your expectations as early as possible. Attempt to clarify your agreements about essential aspects of the relationship. (It might be helpful for students to prepare a list of questions and concerns prior to meeting with your advisor).
2. Communicate concerns or questions to your advisor or advisee as soon as they arise. If you avoid addressing difficulties they are likely to get worse. Students can take heart in one professor's comment "we are often as relieved as the students are when tensions are acknowledged and dealt with." Usually, difficulties can be worked out; if it appears there is an inherent incompatibility, advisors should be changed.

CHOOSING AN ADVISOR (SUGGESTIONS FOR STUDENTS)

1. Ask other students.

Other students, especially more senior students, have a great deal to offer. Ask them to relate their experiences working with an advisor you are considering. What are the positives, what are the negatives? How much time has the advisor devoted to meeting with students? Do students feel supported psychologically by this advisor? Try to talk to as many sources of information as possible because different students can have

dissimilar experiences with the same advisor.

2. Create a relationship that is mutually beneficial.

Look for advisors who would themselves benefit from the mentor relationship. An ideal situation is when your work fits somehow into your advisor's research program.

3. Teach and entice your prospective advisor.

If you can't find someone pursuing research in your area, remember that most faculty members are motivated to advise because of the intellectual stimulation it provides. Therefore, if you want a certain faculty members to take you on as an advisee, take time to get this person interested and motivated. You may have to educate this person on the background of your research. Working together, you might find a way to link your ideas to his/her current projects or interests. you may even discover a new angle for approaching your own work.

4. Ask other faculty members.

Faculty members tend to know one another's area of interest, and may be able to guide you to someone who has an interest in line with your own. While some professors will gently steer you away from colleagues they don't think would be ideal mentors for you, others will be reluctant to provide an opinion on a specific colleague's style of advising. One good way to be sensitive to the political constraints on professors is to ask them in an open ended fashion who they might recommend to serve as your advisor.

IMPORTANT REMINDERS FOR STUDENTS

1. With proper communication, most advising relationships are productive and satisfying for both parties.
2. If it seems to you that your relationship will never reach this point of mutual satisfaction, you have the right and the responsibility to yourself to switch advisors. The sooner you switch, the easier it will be for you to build another relationship, and the less you will have invested in the original relationship. Remember, as one professor said, "ending a collaboration does not imply personal rejection." Some people just don't work well together because of differences in style, values, or intellectual interests
3. No matter who your primary advisor is, always make sure that more than one faculty member knows you well, and can attest to the quality of your work and character. This way, you will not have to depend solely upon one person for a letter of recommendation. You will thus be protected in the case of a relationship turned sour, or a departure of your advisor from the university. Moreover, with two or three advisors, you will have the benefit of advice from several sources.