

**REGULATION OF CLINICAL SEXOLOGY  
AS A PROFESSION IN PUERTO RICO**

**DISSERTATION  
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REQUIREMENTS FOR THE DEGREE OF DOCTOR OF  
PHILOSOPHY IN CLINICAL SEXOLOGY**

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## DISSERTATION APPROVAL

This dissertation, submitted by Carmen G. Valcárcel-Mercado, M.D., has been read and approved by three faculty members of the American Academy of Clinical Sexologists.

The Dissertation Committee has examined the final copies and the signatures, which appear here, verify the fact that any necessary changes have been incorporated into the text. This dissertation is now given the final approval with reference to content, form, and mechanical accuracy.

The dissertation is therefore accepted in partial fulfillment of the requirements for the degree of Doctor of Philosophy.

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## **Vita**

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## **Abstract**

The purpose of this dissertation is to demonstrate the need of regulating the practice of sexology in Puerto Rico as a way to legitimize it as a profession with proper standards. Sexology needs standards and regulations because it is a field that requires specialized education and clinical skills. Regulation is needed since there are practitioners giving incorrect information and making therapeutic recommendations to people; including to those with sexual difficulties or dysfunctions. This endangers public health.

The goal of this work is to present the various advantages of regulating the practice of sexology by the government. These include: increased professional competence, help in the prevention of public exploitation and fraud, and legitimizing the professional status of the sexologist in relation to other health care providers within the framework of our health care system. In order to ensure professional competence and continued education there is a need for developing safeguards within the bylaws of a licensing board. Regulation also ensures the further advancement of the art and science of sexology.

A legislative campaign was developed after interviewing local professionals who identified themselves as sexologists during the period of May 1<sup>st</sup>, 2010 through May 31, 2011. The proposed bill included in this work addresses topics gathered from: literature review, interviews, and previous legislation. This bill was presented to the Puerto Rico Senate in order to legitimize the profession of Sexology with a license for practicing sexology granted by the state.

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# CHAPTER I

## Introduction

### Definition of Sexology and its Scope

Sexuality has fascinated humanity from the dawn of civilization. The continued existence of our species depends on it. Sexuality has played a role in the rise and fall of almost every cultural movement and government. It has been considered at different times as sacred, sacrilegious, an impulse or a way of life. In spite of this, many fail to understand the complexities of sexuality itself and how it defines a human being.

Sexology is the science dedicated to study all aspects of human sexuality. Sexology comprises such a diverse group of philosophies and disciplines that it is considered to be one of the most challenging professional fields to understand. It includes contributions from the fields of anatomy, physiology, psychology, medicine, and anthropology among others. Its study includes aspects from the common to the uncommon and from the conventional to the unconventional. Sexology unifies the theory and practice of sexuality within the multiplicity of cultural environments in a scientific framework.

Globalization and advances in communication provide unprecedented access to sexuality information. Unfortunately that also increases the access to sexuality misinformation. In addition, there are also misinformed professionals that give incorrect or improper advice. In response to this public health threat

many countries and professional organizations are establishing policies to improve professional and public sexuality education.

As in other countries around the world, the Commonwealth of Puerto Rico (Puerto Rico)<sup>1</sup> has the need to regulate the practice of sexology. The current public policy in Puerto Rico, regarding sexological interventions, is limited to the reduction of unwanted pregnancies and the prevention of the spread of sexually transmitted infections. A few professionals, whom in many cases have very limited training in sexology, provide the few available resources for sex education, sex counseling or sex therapy in Puerto Rico. Therefore, there is a need to establish standards and best practices as public policy in Puerto Rico to ensure the public health.

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<sup>1</sup> The Commonwealth of Puerto Rico is an unincorporated, organized territory of the US with commonwealth status; policy relations between Puerto Rico and the US are conducted under the jurisdiction of the Office of The President (CIA 2010)

## **Rationale / Research Questions**

The ongoing situation creates the following critical concerns:

- How can society be sure that the professionals offering such services have at least the minimal competency to safely practice sexology when there is no need for periodic demonstration of competence, basic skills, and knowledge?
- Who provides or verifies these professionals with the continued education required for assuring the ongoing improvement of their professional competence?
- Who will oversee the integration and application of knowledge, acquired skills, and judgment to practice sexology?
- How ethical concerns by fellow sexologists, clients, patients, and the general public will be addressed?

Enacting legislation to establish the credentials of the practice of sexology will regulate the profession and create competency standards.

## Objectives

The objectives of this work are:

- Promote sexology as a profession.
- Identify unique characteristics of the field of sexology and how it differs from other professions.
- Describe the complementary potential of sexology to other professions.
- List countries and organizations that recognize sexology as an independent discipline of knowledge or profession.
- Present a legislative campaign for the regulation of sexology as a profession in Puerto Rico.
- Make this dissertation available as a working template for legitimizing sexology through governmental regulation.
- Create awareness about the need of professional competency of sexology practitioners
- Promote debate to encourage peer review of professionals even in the absence of government oversight.

## CHAPTER II

### Sexology as a Profession

#### **Credentials Needed to Legitimize a Professional Field:**

Social and legal aspects of modern health care practice require more than academic training and designation of professional competence by peers (Sales 2005). This creates the need for regulatory practices from government agencies to enforce the provision of qualified and safe services to citizens. Studies reveal that state regulatory practices in health care protect the best interest of patients/clients and require services to be rendered at their utmost quality (Balthazar 2008, Epstein 2002, Habgood 2000, Hight 2010).

The creation and validation of a new kind of health care professional has many issues that should be addressed. These issues include: education, practice, qualities, qualifications, supervision, and continued education. It should be clear to the community the benefits and potential pitfalls that this professional class will bring to society. These issues should be addressed whenever professional competence is needed to ensure public health and safety. When a new profession emerges it is the government's responsibility to foresee any possible damages as per its fiduciary duty to protect the public (Habgood 2000).

Professional competence in health care professions has been studied extensively (Annals 2005, Balthazard 2010, Bolis 2003, Epstein

2002, Habgood 2000, Miroli 2006, OECD 2002, Randall 2000). The establishment of standards of care and the ethical management of complex human interactions are the object of numerous studies by professional, government, and peer organizations. Professional competence is defined by Epstein as “the habitual and judicious use of communication, knowledge, technical skills, clinical reasoning, emotions, values, and reflection in daily practice for the benefit of the individual and the community being served” (Epstein 2002). Regulation does not guarantee competence of practitioners but does promote best practices and standardization in the various health care fields.

The goal of professional regulation is to ensure public beneficence by establishing guidelines to comply with minimal competence. Professional regulation promotes the development of evidence-based standards, homogenizes practices, and promotes continued education to ensure a minimum basic current knowledge (OMS 2003). Regulating sexology as a profession gives the state the tools to require standardized training and practice of professional health care providers. This can be achieved through the establishment of professional boards that oversee the professional practice.

Self-regulation does not ensure enforceable standards as well as government regulation (Ogus 1997). This is due to the fact that self-regulation usually responds to private interests, which may differ from the interests of the public. It is in the best public interest that the

government oversees professional health care delivery by the best resources society can develop.

The legislative process is the appropriate tool for the development of such regulation. The laws regulating medical, psychological, and other health care professions provide a model that will guarantee the standard competence of the sexology professionals. There is a reasonable expectation from the people that any of the government certified professionals will be able to fulfill their needs. If these expectations are not met, legislation will grant mechanisms of regulation, compliance, and rectification to those affected.

### **Sexology as a Professional Discipline:**

Sexology is a field that integrates aspects of education, sexual health, and interpersonal dynamics. In describing sexologists Milton Diamond said, “those trained in sexology will be individuals aware of and knowledgeable about the relevant factors in each of those other fields so that they can integrate, evaluate, and otherwise further the overall subject” (Diamond 2000). Sexology is practiced by several kinds of professionals including: psychologists, physical therapists, and physicians. Its objective is to improve sexual health of clients/patients and promote the enjoyment of sexuality.

Various institutions (World Association of Sexual Health, World Health Organization) proposed that professionals who provide sex

therapy require a specific level of training and should be considered specialists. Dissenting opinions state that this is just another psychotherapy procedure to be performed by those who are trained in the practice of other types of psychotherapy (LoPiccolo 1978). Experts in sexual therapy, such as doctor William Granzig, have advocated the use of specifically trained professionals for sex therapy as created by William Masters and Virginia Johnson (Feifer 2004).

A trained professional sexologist is educated with a complete and broad knowledge of human sexuality. This training includes, but is not limited to: sex, gender issues, typical and atypical sexual behavior, human sexual anatomy and physiology, sexual dysfunctions, sexual anthropology, and sexuality throughout the life cycle (Zucker 2002, Krieger 2008, Dupras 2009). Sexologists can: evaluate, diagnose, and recommend interventions that can include education and therapy. The sexologist should also be able to educate and counsel in regards to common sexual non-pathological concerns or situations throughout the lifespan of individuals, couples, and/or families.

Several institutions grant degrees in sexology. Most of them include in their curriculum what is commonly recognized as the essential knowledge needed to become a specialist in sexology. These courses are named as:

- biological aspects of human sexuality: anatomy and physiology, including the sexual response cycle

- gender identity issues
- human sexual development throughout the lifespan
- diversity in human sexual behavior
- human eroticism
- relationships and love
- sexual dysfunctions

Many other courses can be included in the formation of a sexologist. Those additional courses vary depending on the politics, culture, and social environment of the institution granting the degree (AACSB 2011, Widener 2011, IASHS 2011, Curtin 2011, Almería 2011, Hispamap 2011).

Although other professionals can take similar courses, sexologists devote their complete academic career to study sexuality as an integral part of human nature. They are qualified to address those issues from many perspectives including: the biological, the psychological, the sociological, and the spiritual aspects of sexuality. These health care professionals engage in activities pertaining to the promotion of sexual health. Sexologists are also trained to deal with: reproductive health, prevention and control of sexually transmitted infections, sexual education, research, and sex therapy.

The World Health Organization (WHO) defines health as “a state of complete physical, mental, and social well-being and not merely the absence of disease, or infirmity.” A healthy person has a healthy, enjoyable sexual life. However, sexuality is a difficult topic to approach

because of the myths and taboos associated with it. Also, the propagation of incorrect information about sexuality means a hazard to public health.

There is a need to ensure competence in the training and practice of professionals dedicated to the practice of sexology. There are peer organizations that grant certified qualifications and define credentials for those pursuing a career in sexology (AASECT 2011, ASSERT 2011, CAPSEX 2009, ACS 2011, ABS 2011). However, without government regulation there are no unified standards of training and practice to ensure universal competence and therefore to better protect the public from unqualified practitioners.

According to the World Association of Sexual Health (WAS), sexology is a generic term encompassing the scientific study of all aspects of sexuality. The word sexologist is a noun describing a person who practices sexology (WAS 2008). Sexologists are classified according to their training and areas of expertise. The WAS defines five distinctive specialties of sexology: medical sexology, behavioral sexology, sexual education, sexual anthropology, and research sexology. These specialties have three goals: treating patients/clients, developing educational experiences, and continuing research.

International experts from the WAS and the WHO have met and compiled a great deal of information on the professionalization of sexology. Both organizations have issued statements on the development of adequate and ethical professionals in sexual health (WAS 2008). For

example, in 2000, the Panamerican Health Organization presented the document "Promotion of Sexual Health: Recommendations for Action". This document's purpose is to provide the conceptual framework for developing local sexual health promotion initiatives. On its third goal the document states that governments should "provide education, training and support to professionals working in sexual health related fields." On the third proposed strategy to achieve that goal the document list the following needs: "Establish training standards for sexual educators, sexuality specialists. Promote Sexology as a discipline/profession. Advocate to governments for sexuality training programs for professionals" (PAHO 2000).

More than a decade later, after the above PAHO statements, efforts are still being made to help achieve these goals in many parts of the world, including Puerto Rico.

### **Sexology as a Complement to Other Professions:**

Many professions can enhance their integrative framework by consulting a professional sexologist. The sexologist's knowledge and expertise can improve professional interventions in several ways such as: support other healthcare professionals, aiding in sexual education, complementing social scientists, and helping sexuality related law enforcement.

### **Support Other Health Care Professionals:**

A trained sexologist can help health care providers improve their evaluation and management of patients with sexual concerns and dysfunctions. Education, as of 2012, for physicians and other health care professionals in many countries is deficient in the training of sexual issues, focusing mostly on basic human anatomy and physiology. It has been shown that there is a lack of training in managing difficulties related to: relationships, gender, sexual orientation, and sexual violence in medical schools (Malhotra, et. al. 2008, Wittenberg, Gerber 2009). In 1974, Helen Singer Kaplan advised against the practice of licensed professionals, in fields like medicine and psychology, that without the proper sexological training became self-proclaimed experts (Singer 1974).

Interpersonal, couple, and family behavior are crucial to many aspects of health maintenance and disease prevention (Fisher 2006). Many health care providers do not acknowledge the difference between sex and gender as needing attention. Homosexual, bisexual, and transgender patients advocate for health care that addresses the specific needs of their special populations. Studies show that in medicine the lack of specialized training on gender specific issues can worsen the patient's health status and endanger the doctor-patient relationship (Schuster et al. 2005).

Proper sexual education leads to better health outcomes. As such, the sexologist is in a unique position to help other healthcare professionals to achieve their goal of improving their patients' sexual

health by providing accurate education. By referring to a properly licensed sexologist a healthcare professional can be confident that their patient/client is receiving appropriate information on issues such as contraception, disease prevention, and normal sexual functioning among others.

For example, surgeons and endocrinologists give very specialized care to their patients who may present with gender specific concerns. The most specific example of such an intervention is when a transgender patient goes through sex reassignment surgery. A sexologist can help those patients and physicians as a mediator, communicator, educator, and therapist regarding relationship and sexual issues (Butler 2010). Consulting a sexologist can help the physician to better understand patient's needs such as: validation, reassurance, and reframing current situations. Hence, sexology can uniquely contribute to reach the goals of achieving health as defined by the WHO.

#### **Aiding in Sexual Education:**

Sexologists have the training to validate correct information and help eradicate erroneous beliefs in sexuality. An appropriate view of sexuality is needed when teaching human sexual behavior to children, adolescents, adults, couples, and families (Perez et al 2004). Sexual education goals are detailed by many organizations worldwide, which take into consideration the social circumstances of particular regions.

Proper sexuality education by sexologists integrates concepts difficult to manage by many educators. A sexologist can aid in developing proper curricular design that addresses sexuality issues. The sexual education of special needs children is of particular interest due to the challenges that they present. The educational system, the community, and even their parents often neglect their sexuality (Urbina 2011). The sexologist has the knowledge to guide the education of individuals with these particular needs.

In places where sexuality education is lacking in the formal educational system the sexologist can develop learning experiences for adults. This can help in correcting myths and erroneous concepts due to lack of formal education.

### **Complementing Social Services:**

The sexologist's work can help social services to better manage cases related to sexual violence. Sexologists can diagnose, establish therapeutic plans, and recommend interventions for situations and cases commonly encountered by social services such as: sexual abuse, sexual offenses, and domestic abuse. In accordance with their training they can concentrate in evaluating and treating victims of sexual and/or domestic abuse. Sexologists also provide forensic treatment of perpetrators and sex offenders (Flores 1992).

There are many examples of how a sexologist's intervention can make a difference when working with social workers. Sexologists can help social workers in: developing adolescent pregnancy prevention initiatives, working with transgender organizations to address individual empowerment, developing programs for addressing the sexual behavior of prison inmates, and including a better perspective of sexuality in their social work studies among many others. A social worker has certain knowledge of sexuality but the sexologist can bring the theories and execution together to improve social work.

#### **Support Law Enforcement:**

Forensic sexology is a recently developed specialty within sexology. Sexologists help the justice system as forensic advisors. The courts rely increasingly on expert witness testimony in order to make decisions on complex issues. In this legal climate, the forensic sexologist evaluates and advises in cases related to sexuality. As a result of this trend, sexology programs are adjusting their academic programs to accommodate this new forensic reality. For example, in 2003, Curtin University in Australia established the first Master of Forensic Sexology.

Sexologists trained in forensic sexology help investigators involved in cases related to sexual abuse, hate crimes, and other sex related offenses (Money 1990). Investigators and attorneys can benefit from the expert opinion of professional sexologists. Sexologists help law

enforcement professionals gain insight into criminal behavior specific to sexually related crimes. The sexologist helps to formulate treatment and rehabilitation programs to prevent recurrence (Babin 2007). A sexologist has the training that qualifies him to provide a unique contribution in all of the above situations.

## CHAPTER III

### Attempts to Regulate Sexology as a Profession

#### Outside the United States of America:

The regulation of sexology as a profession is being considered in several countries due to the growing consensus about the best practices of sexology (Giami 2003, Almaas 2006, Krieger 2008, Russo 2009, Even 2009). In 2008 the WAS made public The Declaration of Sexual Rights (WAS 2008). This document calls for developing strategies that guarantee that professionals who give services regarding sexuality issues have adequate and correct knowledge of sexuality. It emphasizes that the sexologist's fund of knowledge should be built on evidence-based, competent, and accurate data.

The most common practice to legitimize sexology as a profession throughout the world is the establishment of professional societies. Those professional societies establish rigorous bylaws and codes of ethics. They have requirements for admission in order to ensure proper training, credentialing, and professional conduct. These organizations rely on professional self-regulation that has proved effective in terms of peer regulation but not as effective for the public welfare (Ogus 1997).

Those who do not study history are doomed to repeat it. Therefore, it is useful to take a historical perspective of the various attempts throughout the world to establish professional standards and/or

organizations in sexology in order to duplicate past successes and avoid previous mistakes. The rest of this chapter presents a synthesis of the various international efforts to establish standards in the field.

An example of such efforts occurred in Quebec, Canada. Although the Canadian government delegated sexual education to graduates of schools of sexology, the government does not recognize sexology as a profession. Nevertheless, the Quebec Sexologist Association (ASQ in french) has a code of ethics to promote the highest standards of quality in services offered to the population. To keep updated, the ASQ provide advanced courses and supervision (ASQ 2011). When examined closely, the ASQ acts like a government entity, providing the most common example of professional self-regulation.

In 1980, sexologists in Norway founded the Norwegian Association for Sexology (Almaas 1994). A study of Sexology in Europe performed by Giami *et al.* in 2006 (known by most sexuality professionals in Europe as “The Euro-Study”) showed that Norway had the highest percentage of paraprofessionals with minimal sexology preparation claiming to be sexologists. Government regulation would improve this situation.

In 1995 the French Council for Educational Coordination created the Interuniversity Diploma of Sexology to legitimize the training of sexologists. However, the creation of the sexologist title was refused by local organizations because the diploma only recognized educational training but not qualifications of that professional (Bonierbale, Waynberg

2007). In France, a university diploma does not give the “right to practice.” It only provides evidence of in-depth and extensive knowledge in a field (Bonierbale, Waynberg 2007).

In Spain, sexology is practiced within a licensed profession such as: medicine, psychology or social work. Spain has several peer professional organizations for practitioners of sexology. Most of the trained sexologists joined to create the Federación Española de Sociedades de Sexología (Spanish Federation of Sexological Societies) and the Asociación Estatal de Profesionales de Sexología (State Association of Sexology Professionals). These two organizations provide regulatory mechanisms to those with academic training in sexology to practice sexology within their profession (Lucas 2006).

In 1988, the European Federation of Sexology proposed the creation of a European certification that would unify the training of sexologists in Europe (Porto 2006). Their proposed model presents the idea that professional status and recognition was impossible if the field continued to be undermined by non-trained and non-professional self-proclaimed sexologists.

Mexico considers sexology a psychological specialty. Although other professionals can perform sexological functions, the state only gives professional sexologist credentials to licensed psychologists (CIPPSV 2010).

Brazil is developing rules regarding proficiency of professionals working with human sexuality issues. The title “Sexólogo” (sexologist) is part of the classification of occupations in Brazil. Nevertheless, it is optional to aspire for such a title. Most professionals deem seeking the title unnecessary, as they perceive little professional or economical benefit from having an additional title (Russo 2011).

Argentina regulates the practice of clinical sexologists. They recognize the title of sexologists to physicians and psychologists who seek the title through additional training. There is a defined set of government rules with requirements and sanctions for the profession (Miroli 2006).

In 2009, the Israel Medical Association recommended the regulation of sexology. The recommendation was intended to ban practices by people without a professional background in sexology (Even 2009).

Countries recognize there is a need for regulating sexology. There seems to be an emerging international consensus within both the different professional fields as well as the different governmental bodies that sexology is a field with important contributions to public health. It can also be surmised that there are many different approaches to legitimizing the profession. Such efforts must take into the account the idiosyncrasies of each country and its people. That way sexology can be accepted by a culture at large and practiced to the greatest benefit of the public.

### **Sexology as a Profession in the United States of America:**

Currently there are three academic programs that grant graduate professional sexology degrees in the US: the American Academy of Clinical Sexologists (AACCS), the Institute for Advanced Study of Human Sexuality (IASHS), and the Widener University. There are also a few peer organizations that grant certifications in sexual education, counseling, and/or sex therapy. The most widely recognized of these organizations is the American Association of Sex Education, Counseling, and Therapy (AASECT). Nevertheless, no state has legislation regulating sexology as a profession in the United States or its territories.

The State of Florida has statutes establishing rules to regulate the practice of sex therapy, but not sexology as a profession. At the time of this writing, it is the only state with such legislation in the United States. Florida statutes dictate the academic preparation, supervised practice, and continuing education requirements to maintain a level of competency. This protects the public health interest regarding the appropriate delivery of sexual therapy. The state requires completion of 120 course hours in sexology and at least 20 hours in clinical supervision with a qualified supervisor of sex therapy (Florida Board of Health 2004).

### **Sexology as a Profession in Puerto Rico:**

In Puerto Rico, as in most countries, sexological services are fragmented and given by a diverse group of people. Examples include:

teachers, physicians, psychologists, social workers, and professional counselors. These are professionals that further specialized in the sexual aspects of their own profession. Puerto Rico has laws governing the practice of medicine, psychology, professional counseling, social work, and other professions. However those laws do not address how those professionals can practice sex therapy, sex education, and sex counseling within their profession. There are a few formally educated sexologists that claim the above professions cannot integrate all these disciplines as well as a formally trained sexologist (Rampolla 2002, Solís 2002).

In terms of sexual education the official public policy of the Department of Education of Puerto Rico (DEPR) is the promotion of abstinence-only education in schools. The policy emphasizes on the prevention of sexually transmitted infections and the prevention of unwanted pregnancies. On July 19, 2011, an official policy was made available by the DEPR promoting integral sexual health education in schools from elementary to high schools (DEPR 2011). That policy was withdrawn three days later when the Office of the Governor requested it to be withdrawn for further evaluation prior to implementation. This action was reported in the media to be due to pressure from conservative groups. Finally, the public policy was changed to have the parents be responsible for the sexual education of their children, barring schools from being a major player in sexual education. The problem with this

policy is that if parents are not knowledgeable in sexuality they will not be able to give proper education to their children.

Legislators have acknowledged the lack and the urgent need of professional sexologists to educate the younger population on sexual issues (García 2009). A study done in Puerto Rico, in 2006, reported that among the teenage population up to thirty percent (30%) already had their first sexual intercourse by age thirteen and that more than 60 percent (60%) have done so before they reach the age of sixteen (Correa 2007). Given the above, the current public policy of deferring sexual education to be provided by parents will not work if parents do not have the tools to properly educate their children.

Puerto Rico has no formal public policy for andragogy (sexual education for adults). The only attempt at adult sexual education promoted by the government is media campaigns promoting prevention of HIV, HPV, and domestic violence (Figueroa 2011).

Puerto Rico has a history of being at the forefront of legislation in health care programs and health care practices. An example is establishing “La Reforma de Salud,” which is a government sponsored health care insurance for the indigent that includes freedom in the choice of health care providers (Puerto Rico Department of Health 2001). Another example is the state sponsored rehabilitation from heroin addiction with methadone treatment programs. These programs were established in Puerto Rico long before other states or jurisdictions (Puerto

Rico Department of Health 1993). Examples of health care practice initiatives are the use of AZT in pregnant mothers to prevent HIV transmission to the unborn child (Cooper, et. al. 1996) and the use of oral contraceptive pills (Sheps 1965). There is an excellent tradition of public health initiatives and professional regulation to safeguard the best interest of the citizens of Puerto Rico.

Puerto Rico has rules and regulations for the delivery of almost every aspect of health care. Legislation is introduced in every legislative session to enhance public health and safety. Professional regulation of sexology should be introduced due to the public hazards inherent to the delivery of sexological services without proper training or oversight. These hazards include among others: gross malpractice, physical and psychological trauma, and client/patient abuse.

During the last few decades, sexology has been receiving increased attention in Puerto Rico. On reviewing those who claim the title of sexologist in the current health care environment, it can be found that most of them have professional degrees and training in areas that relate to health care (Rampolla 2002, AsPECTS 1999). However, some of those have little or no academic background in the field of human sexuality. Some have established private practices and advertise themselves as “Sexólogo” (sexologist in Spanish). They give sexual therapy and advice lacking formal training to support the claim of being a sexologist (Smith

2002). Because there is no statute or law to regulate such a title there is no oversight or way to safeguard citizens.

There exists a correlation between abuse of clients, lack of formal training, and absence of codes of ethical conduct (Randall 2000). Professional abuse occurs when the professional acts in a way that goes against their professional standards and, in some cases, against criminal law (Bolis 2006). This creates a need to regulate the profession in order to: increase public awareness, safeguard the public, and develop public confidence in the delivery of professional sexological services.

## CHAPTER IV

### Methodology

#### **Description:**

A descriptive research design was used for this study in order to meet its two main objectives: to obtain data regarding the viability of developing sexology as a profession in Puerto Rico and to establish the need for regulating sexology professionals. The Commonwealth of Puerto Rico's legislative process was used as a model for the steps needed to establish sexology as a profession. From this work, a framework emerged regarding the guidelines needed for regulating by law the sexology professionals in Puerto Rico.

The instrument used for this research was conducting individual interviews. The interviews were made from July 2010 until December 2010. Follow up interviews were made from January 2011 until June 2011 in order to: clarify response from initial interview, inform status of legislative campaign, and to collect further data.

According to the United States Census Bureau, in 2010, Puerto Rico had a population of 3,725,789 (USCB 2010). During this study thirty-eight (38) sexologists were identified in Puerto Rico. This research study only considered interviewing individuals who were legal residents of the jurisdiction of Puerto Rico at the time of the study.

Finally, a legislative campaign was developed by presenting a bill to the Puerto Rico Senate for the purpose of regulating by law the profession

of sexology. The bill was modeled after similar laws governing other health care related professions. If passed, the bill would have made Puerto Rico the first United States jurisdiction that validated and regulated sexology by the government.

### **Selection of Participants:**

Sexologist was defined as anyone claiming to be a “sexual educator,” “sexual counselor,” “sexual therapist,” and/or “sexologist.” A request for interview was sent to self-identified sexologists who appeared in local yellow pages, local newspaper ads, and in an Internet search using the Google search engine for local sexologists. Individuals identified as sexologists by peers, in local radio, television or newspapers were also sent requests for interview. Using the criteria just mentioned thirty-eight (38) sexologists were identified. Thirty-eight (38) requests for interview were sent by e-mail, U.S. postal service, and in person.

### **Individual Interviews:**

Twenty-three (23) requests were returned giving authorization for interview. Twenty-one (21) interviews were conducted. Written consent was obtained for each of the twenty-one (21) interviews performed. Six (6) gave written authorization to audio record the interview.

Interviews were conducted at the convenience of the sexologist. They selected both the place and the time of the interview. Because the native

language of Puerto Rico is Spanish, all the interviews were conducted in Spanish. Answers are translated into English throughout this work. The interview questions were open ended in nature. Interviewees were allowed to answer freely, with the interviewer asking for clarification when necessary. The interviewer recorded the answers as notes, supplemented by audio recordings in the six cases where permission was granted.

#### **Instrumentation for the Interviews:**

To conduct these interviews ten (10) guide questions were developed (Appendix A, Spanish version; Appendix B, English version). Demographic and open-ended questions were used. Questions included: aspects regarding the professional practice, opinion about sexology as a profession, and thoughts about professional regulation of the practice of sexology. Recommendations about credential requirements, licensure maintenance, continued education, and scopes of practice were also noted. The investigator was the only person involved in collecting and analyzing data throughout the study.

#### **Legislative Campaign:**

A legislative process requires many protocols. In Puerto Rico a bill first needs evaluation and approval by both the Senate and the House of Representatives. After being passed by both houses it is sent to the

Governor for the signature that will make the bill into a law. (See Appendix C “How a Bill Becomes a Law in Puerto Rico”).

The bill developed was modeled after Puerto Rico laws regulating other health care professions like: medicine, professional counseling, psychology, naturopathy, and social work. The recommendations made by WHO and WAS as to what characteristics were basic requirements for a professional to be considered a sexologist were included in the bill. Suggestions made during the interviews were also included. A legislative campaign took form and the bill was presented as proposed legislation to the Puerto Rico Senate on May 13, 2011.

This legislative campaign was developed following the “Rules of Procedure” required by the Puerto Rico Senate for the presentation of bills. This included the following steps:

- (a) A senator was contacted to present the bill. For this the Honorable Senator Antonio Fas-Alzamora, the senator with the longest career in the Senate (35 years), was approached so that the bill could be presented by petition from a citizen. The Honorable Senator Fas-Alzamora agreed and presented the Bill to the PR Senate for initial consideration on May 13, 2011(Appendix D). The Bill, designated as P. del S. 2175 by the Puerto Rico Senate, was recommended for evaluation during the first legislative session of fiscal year 2011-2012. The session ran from August 2011 through November 2011.

- (b) The Puerto Rico Senate referred the Bill to the following commissions for evaluation: the Government Commission, the Treasury Commission, and the Health Commission. These commissions were requested to present detailed evaluations, public hearings, and recommendations as needed.
- (c) Meetings were scheduled with the presidents of the commissions evaluating the bill. A letter of presentation and request for deposition was delivered to each of the three commissions.
- (d) Meetings were scheduled for educating government officials. In order to explain the benefits of the bill to the public, meetings were scheduled with the following parties: the Puerto Rico Secretary of Health and his representatives, Honorable Senators, Psychologists Board, Professional Counselors Board, and the Asociación Puertorriqueña de Educación, Consejería y Terapia Sexual (Puerto Rico Association of Education, Counseling, and Sex Therapy). Letters requesting meetings with each party were sent to ask for opinion, counsel, help, and their participation at the public hearings.

## CHAPTER V

### Findings

#### Findings:

Findings were compiled from the answers provided by participants. Twenty-one (21) participants were interviewed. Of the participants thirteen (13) were female and eight (8) were male. The age distribution is presented in Illustration #1:

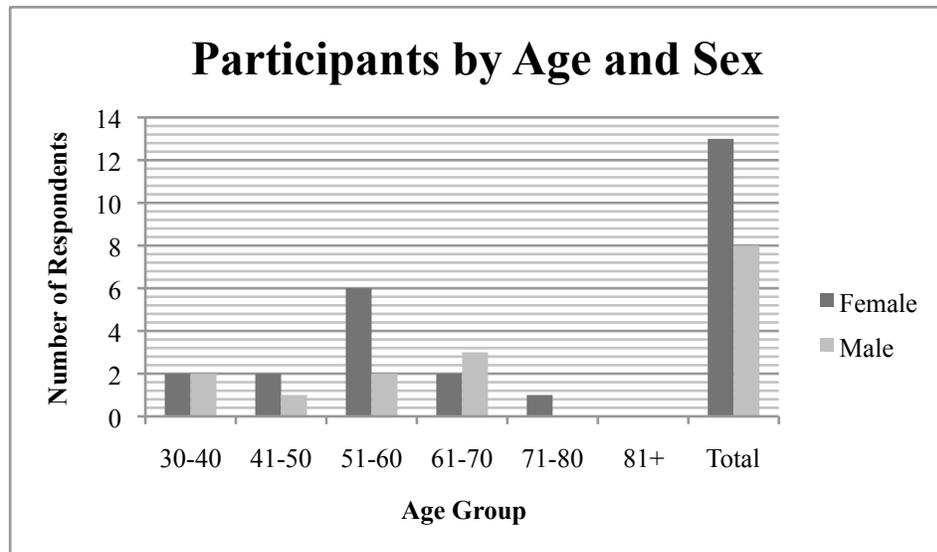


Illustration 1  
Distribution of Participants by Age and Sex

Academic preparation of the participants was: eight (8) participants had a Master's degree (either Master of Arts, Master of Science or Master of Public Health), thirteen (13) participants had a Doctoral degree. The distribution of the Doctoral degrees is shown in illustration #2.

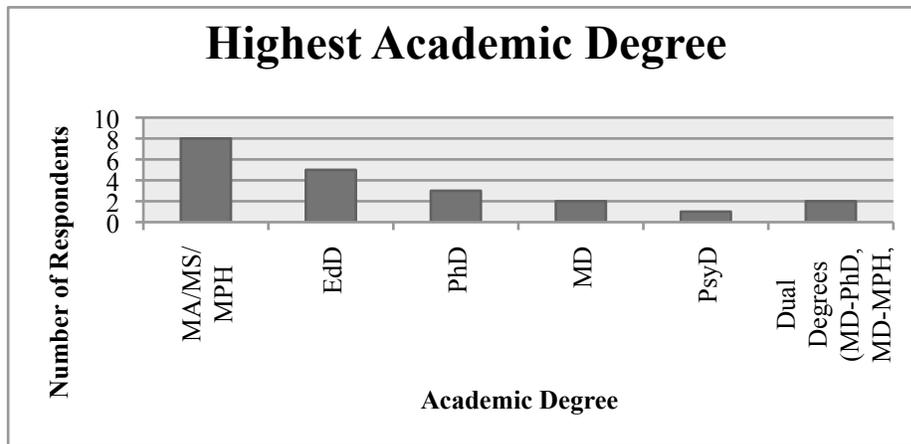


Illustration 2  
Highest Academic Degree of Participants

All participants recommended that a sexologist should have as an academic background of at least a Master’s degree. Of these, eleven (11) recommended at least a Doctoral degree. Illustration #3 shows their academic recommendations.

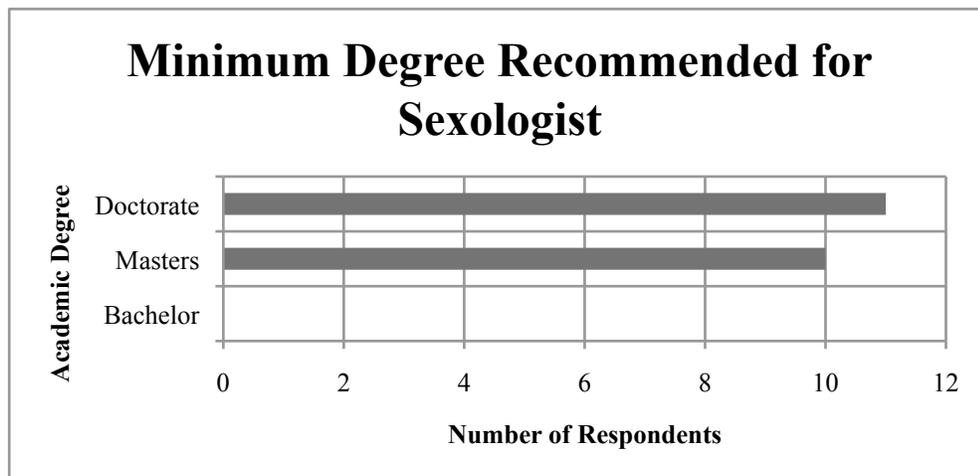


Illustration 3  
Recommended Minimum Degree to Be Able to Hold A Sexologist Title

When asked about the need for a professional title of sexologist fifteen (15) participants responded “yes.” Six (6) participants referred that the title of sexologist is not necessary.

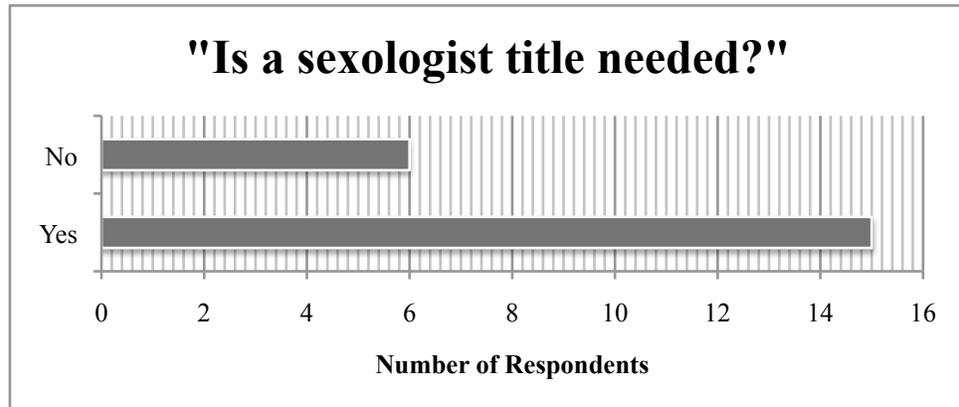


Illustration 4  
Perceived Need of a Sexologist Title

Only two (2) participants stated they were not willing to take continued education to keep any kind of sexology certification.

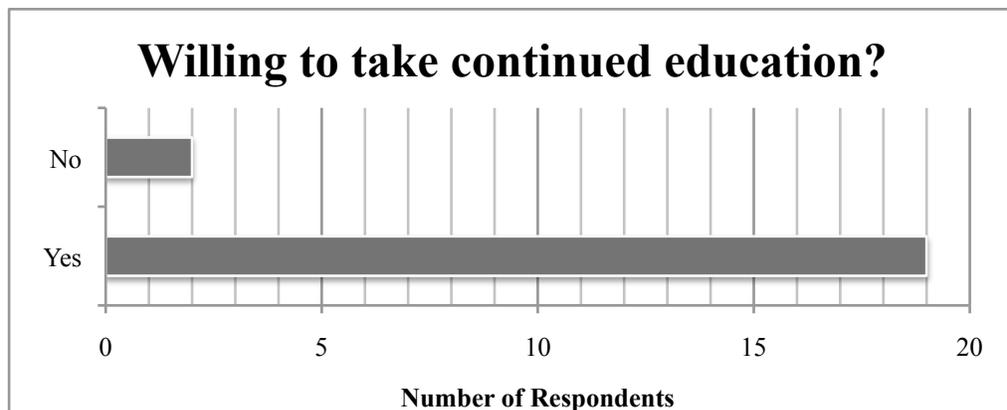


Illustration 5  
Willingness to Take Continued Education

When asked about how they got their clients, the participants named various methods. The majority receives referral from colleagues who know of the participant's professional practice. One (1) participant stated: "they just find me."

Five (5) participants stated that they are not available to the media due to prior negative experiences. Two (2) said they rather not deal with the media unless necessary.

Fourteen (14) participants have some kind of Internet presence including: social networks (Facebook, Twitter, LinkedIn), blogs, and/or websites.

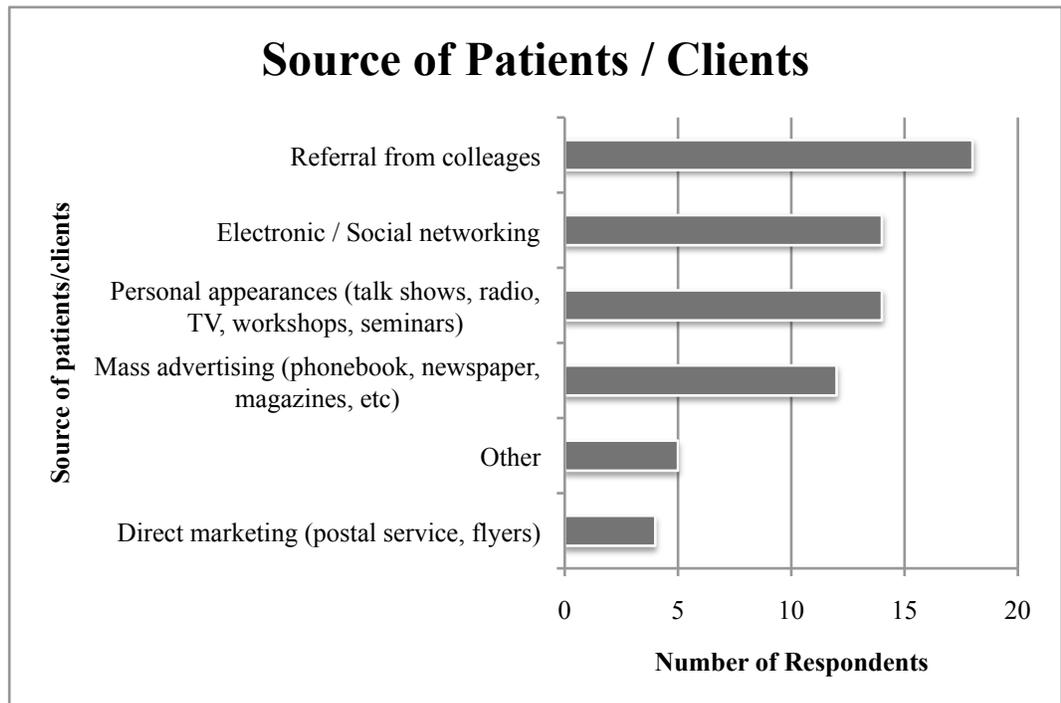


Illustration 6  
Sources of Patients / Clients

### **Participant Recommendations:**

Participants were asked to make specific recommendations about the academic requirements necessary for a practitioner to be considered a professional sexologist. They were asked to consider: their professional experiences, their academic preparation, their current practices, their ideal practice settings, and any other comments they could contribute.

### **Academic Recommendations for a Sexologist:**

This section represents the collection of all recommendations made by the participants. In discussing the requirements for a person to become a sexologist the participants responded that a person who aspires to become a sexologist should:

1. Start his education with a Bachelor's degree and then complete at least a Master's degree with concentration in the following areas: life sciences, biological sciences or social sciences. Sixty seven percent (67 %) of the participants agreed that the person should complete a doctoral degree.

2. Include the following specialized courses in his education:

- History of sexology
- Sexual anatomy and physiology
- Human development
- Gender identity
- Family systems
- Sexual dysfunctions
- Sexual violence

- Erotology
- Technology and sex
- Sex, culture, and religion
- Medical aspects of sexuality
- Theories of sexual development
- Seminar in current sexological knowledge
- Supervised practice

3. Some proposed that the minimal degree to become a clinical sexologist should be a Doctoral degree in the above concentrations, adding to the previous courses the following:

- Sex therapy: evaluation and intervention
- Paraphilias
- Forensic sexology
- Sex education with curriculum design
- Research methodology in sexology
- Professional ethics
- Practice management and professional development
- Supervised practice

**Other recommendations from interviewees and other participants:**

1. Develop two licenses: Sexologist (for education and counseling) and Clinical Sexologist (for direct client/patient care with sex therapy).

2. Develop a government certification for each profession (sexological psychologist, sexological physician, sexological educator, sexological counselor, etc).
3. They recommend grandfathering those active in a sexology practice.
4. Use the same requirements as AASECT (American Association of Sex Education, Counseling, and Therapy) to grant licensure.
5. Continue the status quo; meaning no regulation or any further governmental interventions.

**Additional findings:**

In addition to the above, several participant remarks are of note. The interviewed sexologists did not have a clear definition of the scope of a sexology practice. Some of the participants seemed to misunderstand the role of a sexologist on education, counseling or therapy. For example, one of the participants, a professional counselor claimed to perform sex therapy without any formal training in any form of psychotherapy.

A few sexologists voiced their opposition to regulating sexology. This came from professionals who saw regulation of sexology by the government as a bureaucratic procedure that will detract from the profession. Others opposed regulation out of fear that the government will limit the scope of their practice.

## CHAPTER VI

### Limitations, Conclusions, and Recommendations

#### **Limitations:**

Limitations were encountered in acquiring the data. Several of the individuals identified as sexologists refused to participate. It is noteworthy that those who refused to participate were those with an academic preparation of a bachelor degree or less. This decreased the opportunities of evaluating current practitioners and their opinions regarding regulation of sexology professionals.

Another limitation is that there could be other methods of identifying sexologists in Puerto Rico that were not identified. It is possible that the number of practicing sexologist is higher than the number identified.

Not all interviewees gave permission to audio record interviews. This means some data might have been lost due to the method of recording answers.

Surveys included open-ended questions. Although this facilitated obtaining candid opinions from the participant it did not allow for a uniform questionnaire, which might be subjected to better statistical analysis.

**Conclusions:**

This dissertation addresses the need for professional regulation of the practitioners of sexology in Puerto Rico. It is also the goal of this work to serve as a model to others who might want to attempt similar efforts. Professionals trying to regulate sexology in other countries will likely face similar issues to those encountered in this work.

The state needs to regulate professional practices to comply with the fiduciary duty of protecting its citizens. Sexologists are professional experts with a unique set of skills. As such, they provide unique services not offered by other professionals. The absence of regulation makes it difficult to guarantee safeguards for the public. With regulation professional competence of practitioners can be assured.

Making sexology a legitimate profession is the subject of debate within the international community of sexuality professionals. Well-respected worldwide health care organizations such as the WHO and the WAS have issued statements about the best standards and practices of sexology. At the moment, these are the consensus guidelines for the field.

Several professionals identified as practicing sexologists were interviewed. Those sexologists came from diverse range of professions such as: physicians, psychologists, social workers, and counselors. They were individually interviewed about their current practice and their views of sexology as a profession. They were asked for opinions about

the Bill created for this dissertation. Taking their suggestions and comments, the resulting Bill, P. del S. 2175, was presented to the Puerto Rico Senate and the House of Representatives as a legislative proposal. The Bill was sent for evaluation to three of the Puerto Rico Senate Commissions. Finally, the commissions decided to shelve the Bill for the first legislative session of August 2011 through November 2011.

If approved, the project would have become the first law in the United States and its Territories to regulate the practice of sexology as a profession. The political and economical environment prevented this Bill from becoming law. Conservative groups oppose legitimizing the field of sexology due to political reasons. Politicians are weary of alienating their religious constituents. Legislators are also reluctant to enact legislative initiatives that require additional budget assignments. As this environment is not expected to change, the regulation of sexology as a profession by the Government of Puerto Rico will not happen in the foreseeable future.

**Recommendations:**

Regulating sexology as a profession endeavors to legitimize and advance sexological work. It seeks to standardize the education and practice of sexologists in order to ensure public safety with government oversight. Even if the efforts lead to no regulation it is an opportunity to engage in an open discussion within legitimate forums of the

professional practice of sexual education, counseling, and therapy.

A sexologist should abide to the highest standards of integrity and ethics. Such a professional should be an example in all actions toward the public to gain the respect of the professional community. Sexologists should set standards for practice, education, and professional development even if no government mechanisms of regulation are in place.

There is a great need to expand the professional networking of sexological professionals in Puerto Rico. A unified voice is needed in order to advance any initiative to legitimize sexology as a profession. Continued education of sexologists needs to be promoted in order to have professionals knowledgeable in the latest advancements in the field. Professionals with effective and correct information will gain the respect of the public, their peers, and the government.

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**Appendix A-1**  
**American Academy Of Clinical Sexologists, Inc**  
**3203 Lawton Road Suite 170**  
**Orlando, FL 32803**  
**(407)-645-1641**

**www.esextherapy.com**

Dear Collaborator:

This letter is an invitation to participate in a research study. As a Ph.D. student at the American Academy of Clinical Sexology, I am currently conducting research under the supervision of Professor William Granzig, Ph.D., M.P.H. The subject of this work is *Sexology as a Profession and its regulation in Puerto Rico*.

The regulation of professional practice by the state presents an opportunity for an ethical revision and regulation that benefit not only the professionals but also the community. Finding better methods of managing professional competence and practice is essential for ensuring social wellbeing into the future. The purpose of this study is to learn what is the current educational background of sexologists in Puerto Rico and how they define and practice sexology. This will provide some insights about how practitioners see sexology as a profession in Puerto Rico and how professional practice and management can be improved.

The research will be carried out in the following manner: 1) Interviews will be performed to individuals identified as sexologists in Puerto Rico or who qualify by certain criteria established for the purpose of this study. The purpose of the interviews will be to find out about the decision-making processes in each named sexologist and to ask for opinions about the impact of the development of sexology as a profession. 2) Interviews will be conducted with key people in sexual health organizations, municipalities, and other agencies involved in sexual health public policy establishment.

You play an important role in this evaluation and your input would provide key information and opinions to this study. I would like to invite you to participate in a personal interview.

*Your Involvement*

The interview includes questions about the demographics, education, and professional certifications of sexologists. I would ask that any opinions expressed be your own.

If you agree to participate, I will contact you to schedule the interview at your convenience. All interviews will be conducted in person. After the

interviews are finished, I will contact you again to review your answers and provide you with an opportunity to add additional comments and clarification. I will be scheduling in-person interviews beginning in May 15, 2010. The interview would last about half hour. To ensure the accuracy of your input, I would ask your permission to audio record the interview.

Participation in the survey and interview is entirely voluntary and there are no known or anticipated risks to participation in this study. You may decline to answer any of the questions you do not wish to answer. Furthermore, you may decide to withdraw from this study at any time, without any negative consequences, simply by letting me know your decision. All the information you provide will be considered confidential unless otherwise agreed to, and the data collected will be kept in a secure location and confidentially disposed of in five years time.

Your name and the name of your organization will not appear in any dissertation or publication resulting from this study unless you provide express consent to be identified and have reviewed the dissertation text and approved the use of the quote. After the data is analyzed, you will receive a copy of the executive summary. If you are interested in getting more detail of the work, an electronic copy (PDF) of the entire dissertation can be made available to you. After the approval of the dissertation it will be published as a PDF file at the website of the American Academy of Clinical Sexologists ([www.esextherapy.com](http://www.esextherapy.com))

#### Contact Information

If you have any questions regarding this study, or would like additional information about participation, please contact me at XXX-XXX-XXXX\* or by email [XXXXXXXXXX@gmail.com](mailto:XXXXXXXXXX@gmail.com)\* You can also contact my supervisor Professor *Dr William Granzig, PhD, MPH* by email at [XXXXXXX@aol.com](mailto:XXXXXXX@aol.com)\*.

Thank you in advance for your interest and assistance with this research.

Yours very truly,

Carmen G, Valcárcel-Mercado, MD, PhD Candidate\*

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\* For purposes of presentation of the final work phone numbers and e-mail are blocked. This work will be available as a public document. As such, any private information is concealed.

## CONSENT FORM

By signing this consent form, you are not waiving your legal rights or releasing the investigator(s) or involved institution(s) from their legal and professional responsibilities.

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I have read the information presented in the information letter about a study being conducted by Carmen G. Valcárcel-Mercado, MD as student of the PhD in Clinical Sexology at the American Academy of Clinical Sexologists, under the supervision of Professor William Granzig PhD, MPH. I have had an opportunity to ask any questions related to this study, to receive satisfactory answers to my questions, and any additional details I wanted.

I am aware that I have the option of allowing my interview to be audio recorded to ensure an accurate recording of my responses.

I am also aware that excerpts from the survey and/or interview may be included in the dissertation and/or publications to come from the research, with the understanding that quotations will be either anonymous or attributed to me only with my review and approval.

I was informed that I might withdraw my consent at any time without penalty, by advising the researcher.

With full knowledge of all the foregoing, I agree, of my own free will, to participate in this study.

Yes  No

I agree to have the in-person interview and any follow-up telephone conversations audio-recorded.

Yes  No

I agree to the use of anonymous quotations in any dissertation or publication that comes of this research.

Yes  No

I agree to the use of direct quotations attributed to me only with my review and approval.

Yes  No

Participant Name: \_\_\_\_\_ (Please print)

Participant Signature: \_\_\_\_\_

Witness Name: \_\_\_\_\_ (Please print)

Witness Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## Appendix A-2

### Interview Questions Guide:

Age / Sex

Professional degree(s)

Highest position related to sexology

What is sexology?

Who is a sexologist?

Have you ever been called (by yourself or others) "sexologist"?

Who could use the services of a sexologist?

Do you think it is necessary to hold a title of sexologist?

What qualities/ qualifications are needed to be a sexologist?

Do you consider necessary the regulation of the State of professionals like sexologists? Expand your answer.

Would you favor the development/presentation of a project to regulate that profession in Puerto Rico?

How and where do you get your clients/patients from?

Will you be willing to take continued education credits?

Please expand your answer

Final comment

## Appendix A-3

### Guía Para Preguntas de Entrevista

Edad / Sexo

Grados profesionales

Posición más alta alcanzada en sexología

¿Qué es sexología?

¿Qué es un sexólogo(a)?

¿Alguna vez te has hecho nombrar o has sido nombrado por otros como “sexólogo”?

¿Quién puede hacer uso de los servicios de un sexólogo?

¿Qué cualidades y/o calificaciones debe ser necesarias para ser sexólogo(a)?

¿Considera necesario que el Estado regule la práctica profesional de los sexólogos(as)? Abunde en su respuesta.

¿Favorecería el desarrollo de un proyecto que regule esa profesión en Puerto Rico?

¿Cómo y de dónde obtiene sus clientes/pacientes?

¿Estarías dispuesto a tomar créditos de educación continua?

Por favor abunda en tu respuesta.

Comentarios finales

## **Appendix B**

### **How a Bill Becomes a Law in Puerto Rico**

The legislative branch of the Commonwealth of Puerto Rico is, vested as the Legislative Assembly, composed of two chambers: the Senate and House of Representatives. Both chamber members are directly elected in general elections held every four years. The Senate consists of at least twenty-seven (27) members; two (2) elected by each of the eight (8) Senate districts and, at least, eleven (11) chosen at-large. The House of Representatives consists of at least fifty-one (51) members: one (1) elected by each of the forty (40) representative districts and at least eleven (11) at-large.

The Legislature, although consists of two chambers, is a continuous body. They meet in seven regular sessions during the four years of their mandate. This is known as a term. The first regular session each year begins the 2<sup>nd</sup> Monday in January and ends on June 30. The second ordinary session of each year starting the 3<sup>rd</sup> Monday in August and ends the Tuesday before the 3<sup>rd</sup> Thursday of November. There is no second regular session in the last year of the term.

During the last five days of the first regular session of the year and the last five days of the second, only measures that have been approved by both legislative bodies and resolutions can be

considered. A regular session may be extended by a joint resolution approved by both legislative bodies and signed by the Governor. Daily sessions of both bodies and all hearings are open to the public.

The Governor may convene the Legislature into a special session by an Executive Order. The Governor sets the agenda for this meeting, that is, the measures to be considered. Other legislative matters cannot be considered except resolutions that do not require approval of both bodies. An extraordinary session may last up to 20 consecutive days. It cannot be extended but the Governor may extend the agenda.

**Types of Legislation That May be Presented:**

**Bill:** A proposal to amend or repeal an existing law or create a new one. The projects are numbered consecutively throughout the term. A project may contain an explanatory statement that establishes the reasons for its proposal. Projects that propose new tax legislation must originate in the House of Representatives. If a legislator presents a project at the request of a citizen or special interest group, the project will include the phrase "(by petition)." This means that the legislator does not necessarily endorse the measure. Projects must be approved by both legislative bodies and signed by the Governor to become law.

The projects submitted by the Government, with the support of legislators of the ruling party, is called an "Administration Project." These projects generally have to do with the ideas presented in the party program or suggestions made by the Governor in his annual message on the status of the Commonwealth. These measures are identified with the letter F followed by year and number.

The projects submitted by the Parliamentary Majority called programmatic projects are related to the ideas presented in the Party program. These measures are identified with the letter P followed by year and number. As a general rule programmatic projects are filed in both chambers simultaneously to facilitate the legislative process. In this way the committees of both bodies, in charge of those projects evaluation, may hold joint public hearings when necessary, instead of waiting until the other body approval. This procedure is always followed in the case of joint resolutions for the annual budget.

The projects submitted by the minority parties and supported by legislators who are members of such parties usually have to do with the ideas of the agenda of those parties. Measures submitted by individual lawmakers incorporate their own ideas or those of particular interest groups.

**Surrogate Measure:** It is a review prepared and hosted by the

committee (or committees) that is referred for consideration. A substitute bill is reprinted in its entirety before its final presentation for discussion and the word "Substitute" above its legislative number.

**Joint Resolution:** It is a proposal to allocate funds for a specific purpose. It includes fund assignments for the district of a legislator, funds to extend a regular session of the Legislature or even less frequently, funds to establish a committee or special joint committee of the Legislative and Executive Branches to perform a specific task, among others. Those are numbered consecutively throughout the term. Joint resolutions must be approved by both legislative bodies and signed by the Governor to become a formal joint resolution. A joint resolution remains in force until it fulfills its purpose.

**Resolution:** It is a proposal for a legislative body to express congratulations, condolences, adhesion or rejection, comments on issues of importance, creating non-permanent commissions, or requests of studies and research. A resolution needs to be approved only by the originating body in order to take effect. It is also used to establish the rules of procedure or the internal government of each legislative body.

**Concurrent Resolutions:** Are those legislative bills adopted by the

Legislature and whose purpose is: (a) to propose amendments to the Constitution, (b) to allocate expressions of the Legislative Assembly that are not a matter of law, and (c) to provide governance to the Legislative Assembly. Concurrent resolutions proposing to amend the Constitution require a vote of two thirds of both bodies if the referendum is held on a day other than Election Day, and a vote of three fourths of both bodies, if takes place on Election Day. These resolutions must be approved by both bodies to take effect, but do not require the signature of the Governor.

### **How a Bill Becomes Law in Puerto Rico**

**Filing:** During the first 120 days of the first regular annual session and the first 60 days of the second annual regular session, legislators may file bills and resolutions in the Office of Acts and Records of the House and the Office of Procedures and Records of the Senate, as appropriate. By the consent of the body, it may be considered in the current legislative session any bill that was filed after the expiration of the term as described above. Each bill must be duly signed and submitted in original and 5 copies. Any piece of legislation filed during a regular meeting may be considered in any session of the four-year term.

When the bill is filed, the original is still stamped with the date and time of its filing. It gets assigned an identifying number that is used

throughout the proceedings and is referred to the requested committee (s) for review and consideration, according to its content.

The titles of all bills filed in that body and those received from the other body, with their assigned numbers and referral commissions, are presented in the document known as the First Reading. This is published and circulated each day of session.

Every bill, joint resolution, and concurrent resolution is reproduced in printed form. In this print the proposed amendments, changes or new words are presented with italics. The words and sections eliminated or abrogated are indicated with striking out text, using bold characters or presenting them in brackets. The citizen may request a mailbox in the Archives of the House and Senate, at no cost, to receive copies of each bill and related documents.

**Procedure in the first legislative body:** Once the bill is printed in the usual way, identifying every line with a consecutive number in the left margin, it is sent to the commission (or commissions) of reference. When the commission receives the bill, it makes a decision on whether or not to consider the bill. If the commission decides to consider the bill, it must also determine whether or not to hold public hearings, which are not required. This is the step in the process in which citizens can influence the decision of the

president and the members of the commission. The commission may summon the author (or authors) of the project and related government officials to discuss the issue. Citizens interested in testifying may request participation in the hearings in order to do so.

The commission meets in executive session, which is not open to the public, and makes recommendations as appropriate on the bill under consideration, namely: 1) favorable recommendation of approval, with or without amendments; 2) recommendation is not favorable.

The favorable report, with or without amendments, will be kept in the Acts or Procedures Office, as applicable. It contains a full explanation of the bill and the reasons why approval is recommended. Citizen action can influence this step. If the commission issues a negative report, it sends the report and the bill to the Committee on Rules and Calendar of the relevant body, where it is archived permanently.

**Consideration in the Legislative Body:** Once the commission's positive report is filed, a copy is sent to the Commissions on Rules and Calendar. This commission determines which bills will be discussed and included in the Schedule of Special Orders of the Day, which is considered the Second Reading. The schedule

consists of the hard copy of each bill included for consideration that day and the report(s) from the related commission(s). The Commission on Rules and Calendar may delay the submission of the bill for discussion in the legislature body. The speaker of the majority may directly request the consideration of a bill, thus relieving the referring commission from the requirement to file a report.

At the beginning of that legislative session, the Third Reading proceeds; that is, reading out loud the complete text of the bill and its report(s). When finished, the legislators begin the debate of the legislative project. The Chairman of the commission that studied the bill opens the discussion and debate takes place. The members of the body have the power to submit amendments to the bill.

A motion is formally presented to conclude the debate. They proceed to vote out loud for the consideration of the bill, first voting for the amendments, if any, and then for the bill. If a majority votes in favor of the bill at this stage, it is included in the Final Approval Schedule, during which each legislator gets up and says his vote in favor or against each bill in the Calendar. They also can abstain from voting. This vote, called "Roll Call" is the official record of the position of each legislator. To be approved a bill requires a majority vote; half plus one of all the members of each

body. A bill may be defeated in any of these votes.

The bill is printed again after its approval by the body of origin, as it was approved. The italics, strike out characters, and words in brackets are removed and all the amendments are included. The following heading is printed in the bill: "Text of Final Approval [House or Senate], [date]." The Secretary of the body sends copies of the approved bill to the Secretary of the second legislative body with a request to be considered by that body.

**Second Step in the Legislature, the Conference Committee:** The Secretary of the second body bills refers bills, received from the first body, to the appropriate commission(s). The commission(s), listed on its front page, and is (are) homologous to the commission(s) that evaluated the bill in the body of origin.

The legislative process in the second body is identical to the one in the first body. When this body approves the bill it is printed in the format known as "Forma Enrolada." This form does not mention authors, the date of filing, or referral to committees. It has the legislative numbers in parentheses in the upper left corner and the word "law" in the next line. If the bill is approved without amendments, it is submitted to the Presidents of both legislative bodies for their signatures and then is sent to the Governor for final action.

If the bill passes with amendments, the “Forma Enrolada” is sent back to the originating body for approval of them. If the body of origin concurs, the bill is signed by both Presidents and sent to the Governor for final action. If the body of origin does not concur with the amendments, a motion is made to send the bill to a conference committee.

The conference committee is composed of an equal number of representatives and senators. This committee may file a report with amendments based on the text in “Forma Enrolada”, or may delay its action indefinitely. The body of origin may reconsider its non-concurrence with the amendments of the second body, and choose to accept them, in which case the Conference Committee is dissolved, and the bill is signed by both presidents and sent to the Governor.

When the conference committee produces its report, it is sent directly to the Chamber of both bodies for a vote. If both bodies approve the Conference Report, the bill is reprinted in “Forma Enrolada” format and the word “(Conference)” is added to its legislative number. After being signed by both Presidents, the bill is sent to the Governor.

**Governor's Action:** If a bill is sent to the Governor during the legislative session, he has 10 days, excluding Sundays, from the

date of receipt at La Fortaleza (Governor's house/office) to sign or veto it. If the bill that the Governor approves is a legislative bill, it becomes law. If the bill is a joint resolution of the Senate or the House, it becomes a joint resolution. The laws and resolutions passed are listed consecutively for each calendar year.

If the Governor does not want to pass a bill received during a legislative session, he returns the bill to both bodies with an explicit explanation of his veto. It requires a vote of two thirds of both bodies to go over the Governor's veto. If the Governor does not act on a bill during the 10 days after he receives it automatically becomes law or joint resolution, respectively.

The Governor has 30 days, counted from the date of receipt, to approve or veto the bills that are submitted after the end of the legislative session. The bills signed by the Governor, become law or joint resolutions, those that remain unsigned become "pocket vetoes." Citizen action is appropriate during the Governor's signature.

From: <http://www.camaraderepresentantes.org/como.asp>

(Translated and edited from original text in Spanish.)

## APPENDIX C-1

ESTADO LIBRE ASOCIADO DE PUERTO RICO

16<sup>ta</sup>. Asamblea  
Legislativa

5<sup>ta</sup>. Sesión  
Ordinaria

SENADO DE PUERTO RICO

P. del S. 2175

13 de mayo de 2011

Presentado por el señor Fas Alzamora (Por Petición)  
*Referido a las Comisiones de Gobierno; Salud y de Hacienda*

### LEY

Para reglamentar la práctica de la Sexología en Puerto Rico; para crear la Junta Examinadora de Sexólogos (as) de Puerto Rico; establecer criterios y procedimientos para acreditarse como sexólogo; para establecer responsabilidades y requisitos para obtener la licencia; y para asignar fondos.

### EXPOSICION DE MOTIVOS

La Constitución de Puerto Rico, en el Artículo II, Sección 5 establece el derecho de toda persona “a una educación que propenda al pleno desarrollo de su personalidad y al fortalecimiento del respeto de los derechos del hombre y de las libertades fundamentales”. Además, en la Sección 20 del mismo artículo, se reconoce el derecho de toda persona a disfrutar de un nivel de vida adecuado que asegure la salud, el bienestar y la obtención de los servicios sociales necesarios.

Por otro lado, en la Sección 16 del Artículo II que recoge la Carta de Derechos se reconoce el derecho de toda persona a escoger libremente su ocupación.

La jurisprudencia ha definido y clasificado el ámbito de la práctica de

las profesiones de cuidado de la salud. En Puerto Rico se han aprobado leyes para reglamentar la práctica de varias profesiones tales como los trabajadores sociales, los consejeros en rehabilitación y los psicólogos. Estas piezas de legislación evidencian el compromiso del Gobierno del Estado Libre Asociado de Puerto Rico de armonizar las protecciones constitucionales antes mencionadas de una manera coherente y beneficiosa, tanto para los practicantes de la profesión como para el público en general. Al regular la práctica de la sexología, se busca garantizar que la ciudadanía se beneficie adecuadamente de la práctica de una profesión de reciente desarrollo y gran utilidad social.

Al momento no existía una regulación que certifique que la persona que se promueve como sexólogo (a) tenga preparación académica, acreditación, la capacidad y experiencia profesional en el campo de la sexualidad que valide su reclamo.

De hecho, la idea de reglamentar la práctica de esta profesión no es novel. En el estado de Florida de los Estados Unidos de América ya se han aprobado leyes específicas para reglamentar la práctica de la Terapia Sexual, principal proceso de intervención con personas, parejas y grupos realizado por los sexólogos. El Estado Libre Asociado de Puerto Rico hace su parte con la aprobación de esta ley por entender justo, meritorio y necesario el proveer el mecanismo de validación profesional para la protección del bienestar ciudadano.

DECRETASE POR LA ASAMBLEA LEGISLATIVA DE PUERTO RICO:

**Artículo 1.-Título**

Esta Ley se conocerá como “Ley para Reglamentar la Práctica de los Sexólogos(as) en el Estado Libre Asociado de Puerto Rico”.

**Artículo 2.-Definiciones**

Para propósitos de esta Ley, los siguientes términos tendrán el significado que a continuación se expresa:

(a) “Sexólogo(a)”: se refiere a una persona que posee una licencia otorgada de acuerdo con las disposiciones de esta ley. El uso de dicho título estará restringido a personas con la preparación académica requerida por medio de esta ley y con experiencia en la aplicación de una combinación de teorías y procedimientos en la sexualidad humana, y que haya obtenido y tenga en vigencia una licencia expedida por la Junta Examinadora de Sexólogos que por esta ley se crea.

(b) Sexólogo(a) con Licencia provisional: Se refiere a cualquier persona a quien la Junta creada por esta ley le haya concedido una autorización temporera o provisional para ofrecer servicios de sexología bajo supervisión directa de un(a) mentor(a) certificado(a) mientras está en adiestramiento, según se define en esta ley y bajo la supervisión que la misma requiere.

(c) Mentor(a) Certificado(a): SE REFIERE A TODO Sexólogo con licencia que ha sido certificado por la Junta creada por esta ley para supervisar la práctica de quienes aspiran a obtener la licencia que confiere esta ley y que asume responsabilidad profesional y civil por los sexólogos con licencia provisional a quienes le sirve de mentor.

(d) Práctica de la Sexología: Se refiere a ejercer la profesión mediante el uso de métodos, estrategias y principios éticos que incluyen, pero no

se limitan a:

- 1) Brindar terapia sexual, que significa el proceso de ayuda que tiene lugar a través de una relación personal y directa en la cual se utilizan teorías, principios, métodos y estrategias basados en el conocimiento científico, para promover el desarrollo y el bienestar de la sexualidad integral de las personas.
- 2) Realizar la evaluación, que significa el desarrollo de un historial, la selección, administración e interpretación de instrumentos diseñados y validados para evaluar la sexualidad integralmente, y la utilización de métodos y técnicas para observar, medir y comprender la sexualidad humana integral en relación con el modo de enfrentar, adaptarse y modificar situaciones de su vida sexual.
- 3) Brindar consejería sexual que significa la aplicación de teorías, principios y procedimientos científicos de consejería y de desarrollo humano para proveer ayuda, comprender, entender y resolver las situaciones relacionadas a la sexualidad actual o potencial que una persona plantee con relación a sí mismo (a), hacia otra persona o a un grupo u organización.
- 4) Unir a la educación sexual que significa impartir

conocimientos de forma sistemática y ética sobre las teorías y principios de la sexualidad humana integral. Fomenta el conocimiento correcto fundamentado en el estudio formal de la sexualidad humana.

5) Referir, que significa la recomendación de consultar a otros especialistas, después de haber identificado y evaluado las necesidades de un cliente para determinar la conveniencia de hacer dicha consulta y la coordinación con el especialista seleccionado.

6) Investigar, que significa el esfuerzo sistemático de recopilación, análisis e interpretación de información o datos mediante métodos científicos, cuantitativos o cualitativos para describir la sexualidad sus características, su conducta y las transacciones de las personas o de las organizaciones relacionadas a la misma regidos por los estándares éticos y legales establecidos por la Junta y la jurisprudencia vigente.

e) “Junta” significa la Junta Examinadora de Sexólogos(as) de Puerto Rico que en virtud de esta Ley se crea.

f) “Departamento” significa el Departamento de Salud del Estado Libre Asociado de Puerto Rico.

g) “Secretario” significa el Secretario de Salud del Estado Libre Asociado

de Puerto Rico.

h) “Licencia” significa la licencia de sexólogo (a) que se establece por medio de esta Ley.

### **Artículo 3.-La Junta Examinadora de Sexólogos(as)**

Se crea la Junta Examinadora de Sexólogos(as) de Puerto Rico, la cual tendrá a su cargo la reglamentación de la práctica de la Sexología en el Estado Libre Asociado de Puerto Rico, incluyendo pero no limitándose a la concesión, denegación, suspensión y revocación de la licencia para la práctica de la profesión de Sexólogo en Puerto Rico. La Junta estará adscrita a la Oficina de Reglamentación y Certificación de los Profesionales de la Salud del Departamento de Salud del Estado Libre Asociado de Puerto Rico, bajo cuyo presupuesto operará.

### **Artículo 4.-Composición de la Junta Examinadora**

La Junta Examinadora estará compuesta de cinco (5) personas mayores de edad que sean residentes de Puerto Rico por un período mínimo de dos (2) años antes de su nombramiento. Los mismos serán nombrados por el Gobernador y contarán con el consejo y consentimiento del Senado de Puerto Rico.

De los cinco (5) miembros de la Junta, uno (1) será representante del interés público y los cuatro restantes deberán ser Sexólogos(as) con licencia no provisional. De éstos cuatro (4), dos (2) deben ser profesores de cualquiera de las disciplinas de sexología que hayan practicado la profesión,

por un periodo no menor de cuatro (4) años en la jurisdicción de Puerto Rico, uno (1) deberá estar empleado como sexólogo en el sector público y uno (1) deberá estar empleado como sexólogo en el sector privado. Las asociaciones reconocidas de Sexólogos podrán someter nombres de candidatos para ser miembros de dicha Junta. Los sexólogos(as) miembros de la primera Junta constituida bajo esta ley, recibirán su licencia otorgada por el Secretario de Salud de Puerto Rico basada en el nombramiento realizado por el Gobernador y la evaluación realizada por el Senado de Puerto Rico.

El miembro de la Junta que representará el interés público deberá ser un ciudadano que no tenga familiares dentro del cuarto grado de consanguinidad y segundo por afinidad que hayan participado o estén participando en un campo comercial o profesional relacionado con la sexología, y que en el transcurso de los últimos dos (2) años, previos a su nombramiento no haya tenido interés económico con una persona que esté bajo la regulación de la Junta.

**Artículo 5.-Términos y Condiciones de Servicio de los Miembros de la Junta**

El nombramiento como miembro de la Junta será de tres (3) años. Los miembros de la Junta que inicialmente se nombren, sin embargo, servirán por períodos de tiempo según se especifica a continuación: el representante del interés público y los profesores de consejería servirán por

tres (3) años cada uno; el sexólogo empleado en el sector privado por dos años y el sexólogo empleado en el sector público por el término igual. Al final de su término cada miembro de la Junta continuará sirviendo hasta que su sucesor sea designado y confirmado. Los miembros de la Junta pueden ser renominados, pero no podrán pertenecer a la Junta por más de dos términos.

Los miembros de la Junta elegirán cada dos (2) años de entre sus miembros, un Presidente, un Vice-Presidente y un Secretario para ejercer dichas funciones, disponiéndose que el representante del interés público podrá votar para escoger los directores, pero no podrá ocupar ninguno de estos tres (3) cargos dentro de la Junta.

El Gobernador podrá destituir mediante justa causa, previa formulación de cargos, notificación y celebración de vista, a cualquier miembro de la Junta por incompetencia, negligencia en el cumplimiento del deber, cuando haya sido encontrado culpable por cometer un delito grave o uno menos grave que conlleve depravación moral o cuando la licencia del Sexólogo(a) miembro de la Junta sea revocada o anulada por la Junta de acuerdo a las disposiciones de esta Ley.

#### **Artículo 6.-Pago de Dietas**

Los miembros de la Junta, tendrán derecho al pago de dietas de cincuenta dólares por día o fracción de día, por asistencia a reuniones o sesiones oficiales.

**Artículo 7.-Funciones y Deberes de la Junta Examinadora de los Sexólogos**

La Junta creada mediante esta Ley tendrá las siguientes funciones y deberes:

- a) emitir y renovar la licencia para autorizar el uso del título de Sexólogo(a) con Licencia Provisional y la práctica de la sexología por las razones que se consignan en esta Ley;
- b) aprobar y administrar dos (2) veces en cada año natural, en fechas fijas, un examen que considere apropiado para determinar la idoneidad de los candidatos a Sexólogo(a); a tales fines la Junta establecerá mediante reglamentación, todo lo concerniente al contenido de los exámenes, el promedio general necesarios para aprobar los mismos, el número de veces que un aspirante podrá tomar el examen y cualquier otro dato pertinente con relación a los mismos;
- c) establecer criterios adicionales que pudieran ser necesarios para evaluar las cualificaciones de las personas que solicitan la licencia;
- d) establecer los requisitos y procedimientos para la certificación de los Mentores Certificados;
- e) establecer los requisitos y procedimientos para la supervisión y certificación de los Sexólogos(as) con Licencia

Provisional;

f) establecer mediante reglamento las horas y los requisitos de educación continua y de recertificación para los Sexólogos(as);

g) determinar el monto de los aranceles para la emisión y renovación de cada una de las dos licencias que serán recaudados por el Departamento de Hacienda y habrán de ingresar al Fondo de Salud y serán destinados por el Secretario de Salud para el uso exclusivo de las Juntas Examinadoras del Departamento de Salud para cubrir los gastos administrativos y operacionales que esto conlleve;

h) denegar, suspender o revocar la licencia por una causa justa, según se defina en reglamentos establecidos por la Junta, luego de celebrar los procedimientos administrativos correspondientes;

i) establecer todos los reglamentos necesarios para el funcionamiento de la Junta que aseguren la implantación y el cumplimiento de los propósitos de esta Ley;

j) adoptar un Código de Ética aplicable a la práctica de los Sexólogos(as) con licencia y de los Sexólogos(as) con licencia provisional;

k) realizar investigaciones relacionadas con el cumplimiento de esta ley e investigar querellas presentadas por violaciones a

la misma, oír testimonios, expedir citaciones para la comparecencia de testigo y presentación de pruebas o documentos en cualquier vista que se celebre por la Junta y tomar juramentos en conexión con dichas vistas o investigaciones;

l) adoptar un sello oficial para la tramitación de todas las licencias y demás documentos expedidos por la Junta;

m) mantener un registro actualizado de todos los Sexólogos(as) el cual deberá contener el nombre, dirección y fecha y número de licencia de dichos profesionales, el cual será publicado y estará disponible mediante solicitud;

n) abrir y mantener un registro actualizado de los Mentores Certificados y de los Sexólogos con licencia provisional que estén bajo su supervisión, según se define por esta Ley;

o) someter un informe anual por conducto del Secretario de Salud, al Gobernador y a la Legislatura de Puerto Rico, no más tarde del 31 de enero de cada año; que incluya información completa sobre el funcionamiento de la Ley, de la Junta y de las reclamaciones radicadas contra individuos, la resolución de estas reclamaciones y del número de licencias expedidas, suspendidas, canceladas o revocadas;

p) llevar un libro de actas de todos sus procedimientos en el

cual se anotarán las resoluciones y actuaciones de la Junta;

q) establecer los requisitos y mecanismos necesarios para el registro cada tres (3) años de las licencias que otorgue. En dicho registro se consignará el nombre del sexólogo(a) a quien se le expida la licencia, la fecha de expedición, el número y término de la vigencia y una anotación al margen sobre las licencias re-certificadas, suspendidas, revocadas o canceladas;

r) establecer los requisitos y mecanismos necesarios para la recertificación, cada tres (3) años, de los profesionales a base de educación y a las normas dispuestas por la Organización de Reglamentación y Evaluaciones Profesionales;

s) aprobar normas y procedimientos y adoptar cualquier medida que se considere necesaria para atender las solicitudes de acomodo razonable que puedan ser presentadas por aspirantes con impedimentos físicos al amparo de las disposiciones de cualquier legislación o reglamentación federal o estatal que pueda aplicar;

t) realizar cualesquiera otra gestión en adición a las consignadas que sea necesaria para cumplir con las disposiciones de esta Ley.

#### **Artículo 8.-Requisitos para obtener la licencia**

La Junta emitirá una licencia como Sexólogo(a) a aquella persona que

presente una solicitud en la forma y modo establecidos por la Junta mediante reglamento, y que cumplan con los requisitos establecidos, en esta ley, que son:

- a) que sea mayor de edad, bajo las disposiciones del Código Civil de Puerto Rico;
- b) sea un residente legal de Puerto Rico;
- c) que no haya cometido delito grave o menos grave que implique depravación moral, lo cual se evidenciará con un certificado negativo de antecedentes penales emitido por el Superintendente de la Policía de Puerto Rico;
- d) que pague al Departamento de Hacienda los aranceles establecidos mediante reglamento para la otorgación de dicha licencia;
- e) que declare bajo juramento que se compromete a cumplir con el Código de Ética establecido por la Junta mediante reglamento para la otorgación de dicha licencia;
- f) que haya obtenido como preparación mínima el grado de Maestría en alguna disciplina que cumpla con los requisitos establecidos por la Junta. Disciplinas que pueden considerarse incluyen Doctor en Medicina, Juris Doctor, Maestría en Psicología, Maestría en Consejería, Maestría en Educación, Maestría en Antropología, Maestría en Profesiones

Relacionadas a la Salud y otras a ser evaluadas en solicitud. Cualquiera de estos grados deberá haber sido obtenido en una institución acreditada por el Consejo de Educación Superior (CES) de Puerto Rico o de una institución de un estado de los Estados Unidos de América o país cuyo grado sea validado por el CES, que incluya cursos cuyo contenido en combinación con una práctica o internado, cubran un mínimo de ocho (8) de las siguientes diez (10) áreas de conocimiento teórico:

1. Tránsito histórico y status actual de la sexología
2. Anatomía y fisiología sexual y reproductiva
3. Desarrollo de la sexualidad a través del ciclo de vida
4. Aspectos relacionados con identidad sexual, género y orientación sexual
5. Dinámicas interpersonales, familiar y de relaciones de pareja que pueden relacionarse con la sexualidad
6. Tipos de violencia sexual y de género
7. Disfunciones sexuales y factores médicos que pueden influenciar la sexualidad
8. Aspectos psico-sociales que impactan la salud sexual
9. Conductas sexuales atípicas, hipersexualidad, abuso sexual y adicción sexual

10. Investigación científica contemporánea en aspectos de sexualidad y disfunciones sexuales

Será deber del aspirante especificar a la Junta su área de especialidad en sexología si tiene alguna. Para los efectos de este inciso, será deber de la Junta establecer mediante reglamento los procedimientos y requisitos necesarios que deberá cumplir dicho aspirante para que se reconozca dicha especialidad.

g) que haya demostrado conocimiento del campo profesional mediante la aprobación del examen escrito que administre y requiera la Junta Examinadora. No obstante, la Junta Examinadora autorizará, sujeto a la reglamentación que a estos efectos establezca, la administración del examen escrito a candidatos a obtener el grado de Maestría o Doctorado requerido mediante esta Ley.

h) que luego de haber aprobado el examen exigido en el inciso anterior, haya completado un mínimo de 50 (cincuenta) horas de práctica supervisada por un Mentor Certificado.

**Artículo 9.-Emisión y término de la licencia provisional de un Consejero Profesional**

La Junta emitirá una licencia provisional, que será válida por un período

máximo improrrogable de tres (3) años, a cada solicitante que cumpla con los requisitos especificados en los incisos (a) al (g) del Artículo 8 de esta Ley, incluyendo haber obtenido el grado mínimo de Maestría requerida en esta Ley, pendiente al cumplimiento de lo establecido con el inciso (h). del Artículo 8 de esta Ley y sin haber obtenido una licencia de Sexología debidamente emitida por la Junta, la licencia provisional expirará y el solicitante vendrá obligado a someter una nueva solicitud al amparo del Artículo 8 de esta Ley y a cumplir nuevamente con todos los requisitos del mismo.

#### **Artículo 10.-Exposición de Certificación Oficial**

Será requisito de estricto cumplimiento para todo Sexólogo(a) o un Sexólogo(a) con Licencia Provisional exponer en un lugar prominente de su despacho profesional la Certificación oficial emitida por la Junta Examinadora que acredite su licencia.

#### **Artículo 11.-Renovación de Licencia**

Se le requerirá a los Sexólogos que renueven su licencia cada tres (3) años y que acompañen la solicitud de renovación con el pago de unos aranceles al Departamento de Hacienda, según establezca la Junta mediante reglamentación. Con la solicitud de la renovación de la licencia cada profesional incluirá evidencia de haber completado un mínimo de cuarenta y cinco (45) horas de educación continua relacionada con las áreas especificadas contenidas en el Artículo 8, inciso (f) de esta Ley.

#### **Artículo 12.-Denegación, suspensión o revocación de la licencia**

La Junta, mediando el debido proceso de ley, podrá denegar, suspender o revocar cualquiera licencia concedida bajo esta Ley por cualquiera de las siguientes razones:

- a) uso de drogas lícitas o ilícitas, alcohol o ambos o de cualquier otra sustancia a tal grado que interfiera con la habilidad de la persona para practicar la sexología;
- b) si la persona ha sido convicta por cometer un delito grave o menos grave que implique depravación moral;
- c) cometer fraude, usar engaño, falsa representación o soborno para obtener una licencia emitida de acuerdo con las disposiciones de esta Ley;
- d) obtener o tratar de obtener honorarios u otro tipo de compensación o beneficio mediante fraude, engaño, o falsa representación;
- e) incompetencia, mala conducta, fraude, falsa representación o deshonestidad en la realización de las funciones o deberes de un Sexólogo(a) según definidos en esta Ley, los reglamentos y el Código de Ética aplicables;
- f) violar o colaborar para que otra persona viole cualquier disposición de esta Ley o cualquier regla o reglamento establecido bajo esta Ley;
- g) utilizar o permitir que otra persona utilice una licencia u

otro documento falso, para cumplir con las disposiciones de esta Ley;

h) colaborar o permitir que otra persona que no esté licenciada de acuerdo con las disposiciones de esta Ley, se presente o actúe como Sexólogo o un Sexólogo con Licencia Provisional ;

i) habersele denegado, revocado o suspendido la licencia o autorización para titularse o practicar la sexología en otra jurisdicción por razones por las cuales se denegaría, revocaría o suspendería la licencia de acuerdo con esta Ley;

j) haberse determinado que está mentalmente incapacitado para practicar la Sexología por un tribunal competente;

k) habersele otorgado la licencia a base de un error de hecho;

l) comunicar información profesional falsa o confusa con la intención de engañar al público o a la persona a quien va dirigida;

m) habersele encontrado culpable de violar cualquier estándar ético o profesional, según sea definido por la Junta, en el Código de Ética o en la demás regulación aplicable;

n) no exponer en un lugar prominente de su despacho de

trabajo certificación oficial de la licencia de Sexólogo(a) o un Sexólogo(a) con Licencia Provisional que la Junta Examinadora emite al amparo de esta Ley.

Si la persona es un Sexólogo(a) o un Sexólogo(a) con Licencia Provisional no podrá practicar la sexología hasta la terminación del período de suspensión y podrá estar sujeta a revisiones subsiguientes de la Junta, según ésta lo determine en acuerdo con los reglamentos que ésta adopte.

La sanción de revocación de licencia por orden de la Junta, por cualquiera de las razones especificadas en este Artículo podrá ser permanente o por un período de tiempo que la Junta determine mediante reglamento.

### **Artículo 13.-Reciprocidad**

La Junta podrá establecer acuerdos de reciprocidad con aquellas jurisdicciones estatales, territoriales o libremente asociadas a Estados Unidos que regulen la práctica de la sexología, en acuerdo con éstas, si la Junta celebra un acuerdo de reciprocidad con su cuerpo homólogo en dicha jurisdicción. El acuerdo deberá especificar que la Junta otorgará la licencia a toda persona que posea una Licencia de Sexólogo(a) de otra jurisdicción que cualifique, si la persona ha cumplido con igual o mayor número de requisitos para obtener la misma. La Junta no otorgará la licencia por reciprocidad a un solicitante que esté bajo investigación en otra jurisdicción geográfica, por la imputación de un acto que pudiera constituir una violación de esta Ley, hasta tanto haya concluido

la investigación y la Junta determine que puede otorgar la misma.

#### **Artículo 14. Reuniones**

La Junta se reunirá dentro de los treinta (30) días siguientes a la fecha en que sus miembros fueren nombrados y tomaren posesión. Celebrará por lo menos cuatro (4) reuniones ordinarias anuales para la consideración y resolución de sus asuntos oficiales, pero podrá reunirse cuantas veces fuere necesario para la pronta tramitación de sus gestiones y deberes. En su primera reunión los miembros elegirán de entre sí un(a) presidente(a), el cual ocupará el cargo por el término y bajo las condiciones que fijen lo establecido en esta Ley y los reglamentos que la Junta establezca para estos efectos. El Presidente convocará para la celebración de las reuniones, las cuales serán notificadas por el Director de las Juntas Examinadoras del Departamento de Salud.

En dichas reuniones, tres (3) miembros de la Junta constituirán quórum. Los acuerdos de la Junta se tomarán por el voto de la mayoría de los miembros presentes, que en este caso constituirán tres (3).

#### **Artículo 15.-Práctica ilegal de la Sexología o de la Sexología con Licencia Provisional**

(A) Sanción Administrativa: Será ilegal para cualquier persona llevar a cabo cualquiera de los siguientes actos:

- a) presente a sí mismo con el título de Sexólogo o de Sexólogo con Licencia Provisional sin estar debidamente autorizado de acuerdo con las disposiciones de esta Ley;

- b) ejercer la práctica de la Sexología o con Licencia Provisional sin haber cumplido primero con las disposiciones de esta Ley y sin poseer una licencia válida según es requerido por esta Ley;
- c) utilizar cualquier título, siglas o abreviaturas que puedan razonables confundirse con una designación, según sea dispuesta por esta Ley, para indicar un estándar de competencia profesional u ocupacional para el que no está debidamente autorizado;

Toda persona que luego de formulación de cargos, notificación y celebración de vista en un proceso administrativo se le haya comprobado que ha realizado cualquiera de los actos descritos en este Artículo incurrirá en conducta punible para lo cual se faculta al Secretario de Salud la imposición de multas administrativas, previo el debido proceso de ley, hasta un máximo de mil (1,000) dólares.

En el caso de tratarse de una segunda o subsiguiente violación, se le impondrá una multa no menor de dos mil (2,000) dólares y no mayor de cinco mil (5,000) dólares.

(B) Sanción Penal

Toda persona que sin ser debidamente licenciada para practicar la Sexología en Puerto Rico, según lo establecido en esta Ley, practique o ejerza dicha profesión, incurrirá en delito menos grave y convicta que fuere, se le impondrá una multa no mayor de quinientos (\$500) dólares o hasta

seis (6) meses de cárcel, o ambas penas, a discreción del Tribunal.

A petición de la Junta, el Secretario de Justicia de Puerto Rico solicitará un auto de interdicto para impedir que la persona imputada y acusada de ejercer ilegalmente la sexología que se reglamenta bajo esta Ley en el Estado Libre Asociado de Puerto Rico continúe el ejercicio de dicha profesión hasta tanto se resuelva la acusación.

#### **Artículo 16.-Exenciones al cumplimiento de esta Ley**

Ningún artículo o cláusula de esta Ley se aplicará a las actividades y servicios que ofrecen rabinos, sacerdotes, ministros, pastores o laicos de cualquier denominación o secta religiosa, siempre que dichas actividades y servicios se ofrezcan como parte de sus deberes y tareas ministeriales regulares o especializadas en el marco de la consejería pastoral. Ningún artículo o cláusula de esta Ley se aplicará a las actividades y servicios que ofrecen los estudiantes de sexología de las instituciones acreditadas en Puerto Rico, si dichas actividades se realizan bajo supervisión de un profesor de sexología licenciado(a) y las mismas constituyen parte de las experiencias de aprendizaje incluidas para completar los requisitos para obtener el grado universitario. Ningún artículo o cláusula de esta Ley se aplicará a las actividades y servicios de personas que sirven como voluntarios en organizaciones públicas o privadas sin fines de lucro o instituciones caritativas, siempre y cuando estas personas estén autorizadas por las organizaciones o las agencias que rinden los servicios y no reciban compensación por éstos.

### **Artículo 17.-Cláusula de Transición**

Durante los primeros veinticuatro (24) meses subsiguientes a la constitución de la Junta, ésta podrá otorgar la licencia de Sexólogo a cualquier persona que la solicite si cumple con lo dispuesto en los incisos (a) al (g) del Artículo 8 de esta Ley y que, además, presente evidencia de haber practicado la profesión de Sexólogo por un periodo no menor de tres (3) años antes de la aprobación de esta Ley.

La Junta establecerá mediante reglamento los documentos y evidencia fehaciente que deberán presentar los solicitantes para corroborar su práctica en la profesión de sexólogo(a) por el término establecido. La Junta no requerirá el examen escrito a estos solicitantes.

**Artículo 18.** Los gastos que se incurran para la implementación de esta Ley durante el primer año provendrán de los fondos que disponga el Departamento de Salud para el funcionamiento de las Juntas Examinadoras adscritas a ese Departamento. Los fondos que se recauden por virtud de la expedición de licencias, costos por exámenes, certificaciones y otros derechos necesarios para cumplir con los propósitos de esta Ley, se depositarán en el Fondo Especial para las Juntas Examinadoras que posee el Departamento de Salud para cubrir los gastos operacionales de las Juntas Examinadoras.

### **Artículo 19.-Cláusula de Separabilidad**

Si alguna cláusula de esta Ley fuese declarada nula o inconstitucional, dicha disposición no afectará las demás partes de la misma.

**Artículo 20.-Reglamentación**

Se autoriza a la Junta Examinadora de Sexólogos(as) de Puerto Rico y al Secretario de Salud a adoptar los reglamentos necesarios para cumplir con los propósitos de esta Ley.

**Artículo 21.- Vigencia**

Esta Ley entrará en vigor ciento ochenta días (180) después de su aprobación.

**APPENDIX C-2**

**COMMONWEALTH OF PUERTO RICO**

**16<sup>th</sup> Legislative  
Assembly**

**5<sup>th</sup> Ordinary  
Session**

**SENATE OF PUERTO RICO**

**Senate Project 2175**

**May 13, 2011**

**Presented by Mister Fas Alzamora (By Petition)  
Referred to the Commissions: of Government, of Health and of Treasury**

**An Act**

To regulate the practice of Sexology within the Commonwealth of Puerto Rico; to create the Puerto Rico Board of Sexologists for the purpose of establishing criteria and procedures for certification as a sexologist; to establish the responsibilities and requirements to obtain a license; and to assign funds.

**Statement of Motives**

The Constitution of the Commonwealth of Puerto Rico, Article II, Section 5 states that “every person has the right to an education which shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms.” In addition, section 20 of the same article recognizes the right of every person to have a standard of living adequate to ensure his health, wellbeing, and access to the necessary social services.

Also, Section 16 of Article II of the Declaration of Rights of the Constitution recognizes to right of every individual to freely choose a profession.

Legal precedents have defined and classified the environment for the practice

of health care professions. In Puerto Rico, laws have been enacted to rule the practice of various professions such as: social workers, rehabilitation counselors, and psychologists. Such laws show the commitment of the Government of the Commonwealth of Puerto Rico to enable and to protect the above-mentioned rights coherently and favorably to both, the professional providers and the public. Regulating the practice of sexology guarantees that the public will benefit from the delivery of an emerging field of practice and knowledge with the potential health benefits to the individual and society at large.

At present, there is no regulation to certify that a person claiming to practice sexology has the professional accreditation and academic preparation in the field of sexuality to validate such claims.

The idea of regulating the practice this profession is not new. The State of Florida has laws to regulate specifically the practice of sexual therapy, the most common therapeutic intervention practice used by sexologists on individuals, couples, and groups. With the enactment of this law the Commonwealth of Puerto Rico meets its obligation to protect the welfare of its citizens by providing a necessary and fair mechanism of professional validation for the practice of sexology.

***Be it enacted by the legislature of Puerto Rico:***

**Article 1. -Title.**

This Law shall be popularly known as the “Law to Regulate the Practice of Sexologists in the Commonwealth of Puerto Rico.”

**Article 2. -Definitions.**

For the purposes of this Act, the following terms shall the meaning indicated below:

- (a) Sexologist: It refers to a person licensed as per the dispositions of this Act. The use of this title shall be restricted to persons with the academic preparation required by this Act and with the experience in the application of procedures and combination of theories of human sexuality and who shall have an active license given by the Puerto Rico Board of Sexologists created by this act.

(b) Sexologist with a Provisional License: It refers to any person who is provided, by the Puerto Rico Board of Sexologists created by this Act, with a temporary or provisional authorization to offer sexology services while in training under the direct supervision of a certified mentor as defined in this Act and under the supervision required by this Act.

(c) Certified Mentor: It refers to every licensed sexologist certified, by the Puerto Rico Board of Sexologists created by this Act, to supervise the practice of those candidates who desire to become licensed sexologists as per this Act. Certified mentors will assume civil and professional responsibility for the sexologists with provisional license to whom the licensed sexologist is mentoring.

(d) Practice of Sexology: It refers to the practice of the sexological profession throughout the use of methods, strategies, and ethical principles that include, but are not limited to:

1) Performing sexual therapy. This means the process of helping with a personal and direct therapeutic relationship in which theories, principles, methods, and strategies are based on the current scientific knowledge. That process promotes the integrated sexual development and wellbeing of people.

2) Performing evaluations. This means obtaining personal history by the selection, administration, and interpretation of instruments designed and validated for the evaluation of sexuality. The use of methods and techniques to observe, measure, and understand integral human sexuality as related to methods to adapt, manage, and modify situations in a person's sexual life.

3) Offering sexual counseling. This means the application of theory, principles and scientific procedures of counseling and human development to provide help in understanding and resolving situations. Those situations can be related to actual or potential sexuality that a person may have as related to himself, herself or another person, group or organization.

4) Merging sexual education. It is teaching and communicating knowledge systematically and ethically about theories and principles of integral human sexuality. To promote the current knowledge based on proper studies of human sexuality.

5) Referring clients/patients. Give recommendation for the intervention of another specialist after evaluating and identifying the needs of a client and to coordinate the intervention with the selected specialist.

6) Investigating. This means the systematic effort to: compile, analyze, and interpret the data and information through qualitative and quantitative scientific methodology. Investigation shall be done to describe human sexuality; it's characteristics, it's conduct, and the interpersonal transactions or interactions with related organizations as per established ethical and legal standards established by the Board and current legal standings.

(e) "Board" means the Puerto Rico Board of Clinical Sexologists, created by this Act.

(f) "Department" means the Department of Health of the Commonwealth of Puerto Rico.

(g) "Secretary" means the Secretary of Health of the Commonwealth of Puerto Rico.

(h) "License" means a license to practice sexology as described by this Act.

### **Article 3. -The Puerto Rico Board of Sexologists**

The Puerto Rico Board of Sexologists of the Commonwealth of Puerto Rico is hereby created, which shall regulate the practice of Sexology in the Commonwealth of Puerto Rico including, but not limited to: licensing, denial, suspension, and revoking of licenses to practice the profession of Sexologists

in Puerto Rico. The Board shall be part of the Office for Regulation and Certification of Health Professionals of the Department of Health of the Commonwealth of Puerto Rico. This Board shall operate within the Department of Health's budget.

#### **Article 4. -Composition of the Puerto Rico Board of Sexologists**

The Board shall be composed of five (5) members, of adult age, who have been residents of Puerto Rico for at least two (2) years prior to their appointment. The Governor of the Commonwealth of Puerto Rico, with the advisory and consent of the Senate of the Commonwealth of Puerto Rico, shall appoint the members.

Of the five (5) members of the Board, one (1) shall represent the public interest and the remaining four (4) shall be Sexologists with a license that is not provisional. Of these four (4), two (2) shall be professors of any of the disciples of Sexology that have practiced the profession for a period no less than four (4) years in the jurisdiction of the Commonwealth of Puerto Rico. One (1) shall be employed within public sector and one (1) shall be employed within the private sector. The recognized Sexologists associations can submit the names of candidates to be members of the Board. The members of the first Board as formed by this Act shall receive a license provided by the Secretary of Health of the Commonwealth of Puerto Rico based on the appointments made by the Governor with the advise and consent of the Senate of the Commonwealth of Puerto Rico. The public interest member of the Puerto Rico Board of Sexologists shall be a citizen that doesn't have a relative within four (4) degrees of consanguinity or two (2) degrees of affinity that have participated or is participating in the field of Sexology and that in the course of the past two (2) years prior to the appointment hasn't had economic interests with someone within the field of sexology as regulated by the Board.

#### **Article 5. -Terms and Conditions of Service of the Members of the Board**

The appointment as a member of the Board shall be for four (4) years. The members of the first Board shall serve under the following conditions: the representative of the public interest and the two (2) professors shall serve for three (3) years each. The sexologist employed in the private sector and the sexologist employed by the public sector shall serve two (2) years. At the end of his or her term each member of the Board will continue to serve until a successor is appointed and confirmed. No person shall serve on the Board for two (2) consecutive terms.

The members of the Board shall elect within their members a President, a Vice-president, and a Secretary to perform such functions. The representative of the public interest can vote but cannot occupy any of these three (3) positions within the Board.

The Governor can remove, for any justified cause upon bringing charges, notification, and after holding a hearing, any member of the Board. The cause of dismissal could be: incompetence, negligence in performing duties, conviction of a felony or misdemeanor that implies moral turpitude. The Governor can also remove a member of the Board when the license of Sexologist of a member of the Board has been revoked or annulled by the Board as per the dispositions of the Act.

#### **Article 6. -Per Diems**

The members of the Board, including employees or public employees, shall have the right to be paid fifty (50) dollars, per day or fraction of day, for attendance to meetings or official sessions.

#### **Article 7. -Powers and Duties of the Board**

The Board created by this Act shall have the following powers and duties:

- (a) Issue and renew the license to authorize the use of the title of Sexologist with provisional license and the use of the title and practice of Sexology as enacted by this Act;
- (b) Approve and administer twice (2) per natural year, on fixed dates, an examination as considered appropriate to determine the capacity of candidates to become Sexologists; for such purposes the Board shall, through bylaws, determine the details about the content of the examination, the score needed for passing, the number of times a candidate is allowed to take the test, and any other details pertaining to the test administration;
- (c) Establish additional necessary criteria to evaluate the qualifications needed for a candidate to obtain a license;
- (d) Establish the requirements and procedures to certify the Certified Mentors;
- (e) Establish the requirement and procedures for supervision and certification of Sexologists with Provisional Licenses;

(f) Establish, through bylaws, the requirements and hours of continued education for maintenance of certification as a Sexologist;

(g) Determine the cost of certification and maintenance of certification for each of the licenses to be paid to the Department of the Treasury and is to be destined to Department of Health Fund and to be allocated by the Secretary of Health for the exclusive use of the Boards of Examiners of the Department of Health to cover administrative and operational expenses of the above;

(h) Deny, suspend or revoke the license for any justified cause, as defined by the bylaws of the Board, after performing the corresponding administrative hearing;

(i) Establish all the bylaws necessary for the Board to function in order to insure the establishment and enforcement of the purposes of this Act;

(j) Adopt a Code of Ethics appropriate to the practice of Sexologists with License and Sexologists with Provisional Licenses;

(k) Perform investigations related to: enforcing this Act, investigate complaints presented due to violations of this Act, hear testimony, perform summons to witnesses, present evidence or documents in any hearing performed by the Board, and perform oaths in relation to those hearings or investigations;

(l) Adopt an official seal, for it shall be stamped on all licenses and documents issued by the Board;

(m) Keep an updated registry of all Sexologists that shall include the name, address, number and date issued of licenses of such professionals, which will be published and shall be available upon request;

(n) Keep and update a registry of Certified Mentors and Sexologists with Provisional License who are under their supervision as defined by this Act;

(o) Submit a yearly report to the Governor and the Secretaries of the House of Representatives and the Senate of the Commonwealth of Puerto Rico through the Secretary of the Department of Health no later than January 31 of each year including: complete information,

its work regarding the Act, the proceedings of the Board, the complaints filed against individuals, the resolutions of such complaints, and the number of licenses approved, suspended, cancelled or revoked;

(p) Keep a book of minutes of all proceedings including resolutions and dispositions of the Board;

(q) Establish the requirements and mechanisms for the registry every three (3) years of approved licenses. Such registry shall include the name of the Sexologist being licensed, the date in which the license was issued, the license number, the terms of the license, and annotations about maintenance of certification, suspensions, cancellations or if a license was revoked;

(r) Establish the requirements for maintenance of certification, every three (3) years, of professionals based on continued education and the norms established by the Organization of Rules and Professional Evaluation;

(s) Approve norms and proceedings and adopt any measure deemed necessary to comply with applications for reasonable accommodations that might be requested by disabled applicants as per State and Federal laws or rules as it might apply;

(t) Perform any additional actions in addition to the above as necessary to enforce the disposition of this Act.

#### **Article 8. -Requirements to obtain a license**

The Board shall approve a Sexologist license to a person who applies as per established by the Board through its bylaws and who complies with the requirements of this law, which are:

(a) The person must have reached adult legal age as per the laws of the Commonwealth of Puerto Rico;

(b) The person must be a legal resident of the Commonwealth of Puerto Rico;

(c) The person must not have been convicted a felony or misdemeanor that implies moral turpitude, which shall be evidenced by a negative criminal record certificate issued by the Police of Puerto Rico;

(d) The person must pay to the Department of the Treasury of the of the Commonwealth of Puerto Rico the dues and fees established as per the bylaws in order to obtain a license;

(e) The person must declare under oath the commitment to comply with the Code of Ethics established by the Board through its bylaws for the license applied;

(f) The person must have at least a Masters degree in one of the fields as established by the Board. Fields to be considered include Doctor in Medicine, Juris Doctor, Masters in Psychology, Masters in Counseling, Masters in Education, Masters in Anthropology, Masters in a health care related field, and others to be evaluated by petition. Any of these degrees must be approved by the Council on Higher Education of Puerto Rico or from another source validated by the Council on Higher Education which include courses including a practice or internship and that cover at least eight of the following fields of theory:

1. History and current state of the field of sexology
2. Sexual and reproductive anatomy and physiology
3. Sexual development through the life cycle
4. Topics related to gender, sexual identity, and sexual orientation
5. Interpersonal, family, and couples interpersonal dynamics related to sexual topics
6. Topics on sexual violence and gender
7. Sexual dysfunctions and medical issues that can affect sexuality
8. Psycho-social issues affecting sexual health
9. Atypical conducts, hypersexuality, sexual abuse, and sexual addiction
10. Current scientific investigations on sexuality and sexual dysfunctions

(g) It shall be the responsibility of the candidate to declare to the Board an area of specialty if the person has one. For such purposes the Board will enact, through bylaws, the procedures and requirements needed by that candidate to recognize such a specialty.

(h) The person shall demonstrate knowledge in the field by passing a written examination required and administered by the Board. The

Board will also, through its bylaws, establish the procedures to administer a test to the candidates that possess a degree of Masters or Doctor as required by this law.

(i) The person shall obtain a passing score in the test described above, and complete a minimum of fifty (50) supervised practice hours under the supervision of a Certified Mentor.

**Article 9. -Approval and terms of a Provisional License as a Sexologist**

The Board shall grant a provisional license for a maximum period of two (2) years without possibility of prorogue, to each candidate that meets the requirements specified on Article 8, parts (a) through (g) of this Act including having obtained a Masters degree as required by this Act, pending meeting the requirements as per part (h) of Article 8 of this Act. If the Board has not granted a License as Sexologist after two (2) years the Provisional License will expire. The candidate will require a new application as per Article 8 of this Act and again meet all the criteria of Article 8.

**Article 10. -Exposition of Official Certificate**

It shall be an absolute requirement for every Sexologist or Sexologist with provisional License to expose in a prominent place of the professional workplace the official Certificate provided by the Board.

**Article 11. -Renewal of License**

It shall be required for all Sexologists to renew the license every three (3) years and to include with the application for renewal all required fees addressed to the Department of the Treasury as the Board shall establish through its bylaws. The applicant shall include with the application for renewal evidence of completing at least forty-five (45) hours of continue education related to the topics in Article 8, part (f) of this Act.

**Article 12. -Denial, suspension or revocation of a License**

The Board, through due and lawful process, shall deny, suspend, and revoke any license obtained as per this Act for any of the following reasons:

- (a) Use of illicit drugs, alcohol or any other substance to the point of it interfering with the person's ability to practice Sexology;
- (b) If the person has been convicted of a felony or a misdemeanor

that implies moral turpitude;

(c) If the person commits fraud, engages in false representation, uses deception or engages in bribery to obtain a license in accordance with the requirements of this Act;

(d) Obtaining or trying to obtain payment or other type of compensation or benefit through fraud, deception or false representation;

(e) Incompetence, improper behavior, fraud, false representation or dishonesty in performing the functions or duties as a Sexologist as defined by this Act; its bylaws, and applicable codes of ethics;

(f) Violation or being an accessory to someone else violating any disposition of this Act or any rules or bylaws as established by this Act;

(g) Using or allowing another person to use a false license or false document to meet the dispositions of this Act;

(h) Collaborate or allow another person not licensed through the dispositions of this Act to present himself/herself or act as a Sexologist or Sexologist with Provisional License;

(i) Being denied, revoked, or suspended a license or authorization to practice sexology or have the title of Sexologist in another jurisdiction for reasons for which a license would be denied, revoked or suspended in accordance with this Act;

(j) Having determined that the person is mentally incapacitated to practice Sexology by a court;

(k) Having obtained a license based on a mistake;

(l) Communicating false or confusing information with the intention to deceive the public or a person;

(m) Being found guilty of violating any ethical or professional standard as defined by the Board in its Code of Ethics or in other applicable rules;

(n) Not exposing prominently in the professional workspace the certificate of official License or Provisional License provided by the

Board as established by this Act.

If the person is a Sexologist or Sexologist with a Provisional License the person shall not be able to practice Sexology until the end of the period in which the license is suspended and shall be subject to subsequent revision by the Board as determined through its bylaws.

The penalty of revoking a license by order of the Board, for any of the specified reasons, can be permanent or for a period of time as determined by the Board through its bylaws.

### **Article 13. -Reciprocity**

The Board shall be able to establish reciprocity agreements with state, territories or Commonwealth jurisdictions of the United States of America that regulate the practice of sexology if the Board reaches an agreement with an homologous body of reciprocity with such jurisdictions. The agreement shall specify that the Board will provide a License to every person that is a Licensed Sexologist in another jurisdiction that qualifies, if the person has met or fulfilled the requirements to obtain such license. The Board shall not grant a license of reciprocity to a candidate who is under investigation in another jurisdiction for an action, which could constitute a violation of this Act, until the investigation is over and the Board has determined that it can grant the License.

### **Article 14. -Meetings**

The Board shall meet within thirty (30) days following the date its members are appointed and sworn. It shall have at least three (3) ordinary meetings every year for the consideration and resolution of official business, but can meet as many times as necessary for the prompt processing of its duties and proceedings. On its first meeting its members will elect a President, who will serve in the office for the term and under the conditions as established by this Act and the bylaws of the Board. The President will call for meetings, which shall be notified by the Director of the Boards of the Department of Health.

In these meetings three (3) members of the Board will constitute the quorum. Voting in the Board shall be resolved by simple majority of the members who are present.

### **Article 15. -Illegal Practice of Sexology or Sexology with a Provisional License**

(A) Administrative Sanction

It shall be illegal for any person to commit any of the following acts:

(a) Present him or herself as having the title of Sexologist or Sexologist with a Provisional License without proper authorization as per the dispositions of this Act;

(b) Exercise the practice of Sexologist or Sexologist with a Provisional License without first meeting the dispositions of this Act and without possessing a valid license as required by this Act;

(c) Use any title, acronym, abbreviations that could reasonably be confused with a designation as provided by this Act to present a standard of professional or occupational competency for which the person is not properly authorized.

Every person, who after being charged, warned, and had a hearing in an administrative process, is found to commit any act described by this Article will have incurred a punishable offense. For that offense the Secretary of Health is empowered to impose administrative fines, before due process, up to a maximum of one thousand (1,000) dollars.

In the case of a second or subsequent violation the fine shall be no less than two thousand (2,000) dollars and no more than five thousand (5,000) dollars.

#### (B) Penal Sanction

Every person that without a proper license to practice Sexology in the Commonwealth of Puerto Rico, as established by this Act, practices or exercises such profession shall incur in a misdemeanor and if convicted, will be fined for no more than five hundred (500) dollars or up to six (6) months of jail time or both, at the discretion of the Court.

At the request of the Board, the Secretary of Justice of the Commonwealth of Puerto Rico will request an injunction to prevent the accused person to practice Sexology as regulated by this Act in the Commonwealth of Puerto Rico until the accusation is resolved.

#### **Article 16. -Exemptions from Compliance with this Act**

(A) No clause of this Act shall be applied to the activities and services offered by rabbis, priests, ministers, pastors or lay person of any

denomination or religious sect, if such activities or services are offered as part of its regular ministerial duties and tasks or specialized within the context of pastoral counseling.

(B) No clause of this Act shall apply to the activities and services offered by students of Sexology of the accredited institutions in Puerto Rico if such activities are made under the supervision of a licensed professor of Sexology and such activities are part of the education experiences needed to complete a university degree.

(C) No clause of this Act will apply to activities and services of persons that serve as volunteers in public and private not for profit organizations or charitable institutions if the persons are authorized by such organizations or agencies and do not receive compensation.

#### **Article 17. -Transition Clause**

During the first twenty four (24) months following the formation of the Board, the Board can grant the license of Sexologist to any person who applies for it who meets the requirements of Article 8, items (a) through (g) who, in addition, presents evidence of having practiced the profession of Sexologist for a period no less than three (3) years prior to the enactment of this Act. The Board shall establish through bylaws the documentation and evidence necessary to be presented by applicants to corroborate the exercise of the profession of Sexologist for the required period. The Board shall not require a written examination of that applicant.

#### **Article 18. -Allocation of Funds**

The Board shall be assigned funds from the General Fund to cover the operating expenses of the Board and the necessary expenses to implement this Act during the fiscal year in which the Board is formed. The funds collected by virtue of licensing fees, examination fees, certifications, and other rights necessary to fulfill the purposes of this Act, shall be deposited to the Department of Health Special Fund of the Boards of Examiners for the exclusive use of the Boards of Examiners to cover operational expenses.

#### **Article 19. -Severing Clause**

If any clause of this Act is declared null or unconstitutional, such disposition will not affect the rest of this Act,

#### **Article 20. -Regulation**

The Board of Sexologists of the Commonwealth of Puerto Rico and the Secretary of Health are empowered to adopt regulation to carry out the purposes of this Act.

**Article 21. - Enactment**

This Act shall take effect one hundred and eighty days (180) after its approval.

## Appendix D

March 14, 2011

Honorable Senator Antonio Fas Alzamora  
Puerto Rico Senate  
Government of the Commonwealth of Puerto Rico

Dear Senator Fas Alzamora:

Throughout my career I have had several opportunities to lead, to administer, and to help educate others. In this occasion, I am pursuing the completion of my doctoral dissertation and thesis through the development of the following question: Is it in the best interest of my country to regulate the professional practice of sexology?

As a physician, I have made my personal crusade the promotion of health care as team effort where all health care providers are equally responsible of patient care. I believe a good education can change society at any level.

Enclosed is my *Curriculum Vitae*. Feel free to contact me at your convenience for any information you may need to clarify. I thank you for your time and cooperation in the advancement of this work.

Sincerely,

Carmen G. Valcárcel-Mercado, MD, PhD(c), Usui Reiki Master  
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<sup>2</sup> For purposes of presentation of this work my e-mail and phone number are blocked. This work will be available as a public document. As such, any private information is concealed.

# Appendix E



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## Buscan regular la sexología

jueves, 26 de mayo de 2011  
Leysa Caro González / Primera Hora

Las opiniones sobre un proyecto de ley que busca establecer los criterios y procedimientos para la acreditación de la sexología en Puerto Rico parecen estar divididas.

El proyecto del Senado 2175, radicado por petición del senador popular Antonio Fas Alzamora, en esencia busca que cualquiera que se haga llamar sexólogo no pueda ejercer en la Isla, explicó la doctora Carmen Valcárcel.

"Ahora mismo no existe ningún tipo de regulación. Si tú quieres ser sexólogo, vas, haces un cartoncito, escribes sexólogo y montas la oficina", argumentó la sexóloga con siete años en la práctica.

Expresó que se percató de la necesidad que existe de hacer de la sexología una profesión mientras realizaba sus estudios doctorales en sexología clínica. Valcárcel es emergencióloga.

Aunque hace 25 años que la Asociación Puertorriqueña de Educación, Consejería y Terapia Sexual (Aspects) de Puerto Rico otorga "certificaciones" siguiendo un protocolo basado en una de las asociaciones más prestigiosas de sexología, Valcárcel sostiene que no es suficiente.

Actualmente, si cumple con los requisitos mínimos exigidos, dijo, se le otorga una certificación como orientador, educador o terapeuta sexual.

De hecho, Valcárcel alegó que hay pacientes que le han hecho denuncias de supuestos sexólogos que los han tocado en medio de la terapia. "Aunque el pueblo tiene que estar consciente, averiguar e instruirse, pueden caer en manos de inescrupulosos", apuntó.

La también doctora y sexóloga Wanda Smith coincidió con Valcárcel en el hecho de que hay personas en la calle "poniéndole las manos encima" a pacientes con verdaderas necesidades, pero difiere en el enfoque de la medida, cuya radicación fue solicitada por Valcárcel.

Smith señaló que la misma no puede estar dirigida a imponer regulación adicional para la acreditación de la sexología, sino al hecho de que nadie le puede poner la mano encima a un paciente si no tiene una profesión y una licencia emitida por el Estado que valide sus estudios.

Argumentó que la ley en Puerto Rico ya es clara en cuanto al hecho de que cualquier profesional tiene que tener un grado académico y, para ser clínico, una maestría o grado doctoral y licencias aprobadas por el Estado.

"El enfoque debe ser que nadie le pueda poner la mano encima si no tiene una profesión y licencia que el Estado le ha dado por sus estudios", explicó Smith.

Que cómo se atiende el tema. Dividiéndolo en profesiones, comentó. "Una certificación en sexualidad humana es una disciplina que tiene que ir anejada a tu profesión".

Ése sería el caso, por ejemplo, de los sexólogos médicos que tienen un grado doctoral en medicina y los sexólogos psicológicos que completaron previamente una carrera en el campo de la conducta humana. También está el educador sexual.

Pero, enfatizó, sólo pueden tener algún contacto clínico con sus pacientes, o sea, reconocer síntomas o dar diagnósticos, quienes tienen un grado doctoral o maestría en algunas profesiones; y ése debería ser el enfoque de la medida.

"Ninguna persona, por llamarse sexólogo, puede entrar en un proceso terapéutico... Si no tienes una profesión, dónde aprendiste a conocer síntomas, diagnósticos... cómo vas a tratar a una persona", cuestionó Smith.

La educadora sexual, la doctora Luisi Marini Denton, siempre pensó que con la certificación de la Asociación era suficiente, pero indicó que habrá que ver cuál es la verdadera preocupación que llevó a la radicación de la pieza.

Prefirió no entrar en los méritos de la misma, pues no la ha leído en detalle, pero dijo no oponerse a cualquier pieza que busque mejorar la práctica. Eso sí, aclaró que, aparte de la preparación académica, hay que velar por que el profesional tenga el sentimiento y los valores para tratar al paciente.

"Yo pienso que lo académico está como debe estar, como requisito, pero para el tema que estamos hablando (la sexualidad), tiene que venir acompañada de una formación de poder integrar los valores, la ética del ser humano y con una formación de cómo se logra una salud sexual", señaló Denton.

"Tiene que tener esa sensibilidad para trabajar la parte psicológica, emocional y afectiva. Es parte integral que lleve un estilo de vida que sea coherente, que tenga una buena salud sexual y sepa cómo

Enviar

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Me gusta

3