

APPIC GUIDELINES FOR PARENTAL LEAVE DURING INTERNSHIP AND POSTDOCTORAL TRAINING

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This document is a revision of *APPIC Guidance for Pregnancy and Family Care Issues During Internship and Postdoctoral Residency Training* by Kaslow, Garfield, Illfelder-Kaye and Mitnick (2004).

These guidelines do not constitute APPIC policy but are meant to offer guidance to training programs, prospective and current interns and postdoctoral trainees, and institutions when considering options to manage parental leave during the training experience. Trainees and programs may wish to consult with legal counsel and human resources to determine the best course of action for each individual situation. This is intended for informational purposes only.

Questions regarding these matters can be directed to APPIC's Informal Problem Consultation (IPC) program via the APPIC website at www.appic.org. Parties may also contact APPIC Central Office at (832) 284-4080.

Given the timing of psychology graduate training, it is not unusual for interns and postdoctoral trainees to become pregnant or adopt children during their internships or fellowships/residencies.

It is important for training programs and trainees to come to mutually agreeable solutions that accomplish, at a minimum, the following goals:

- Allow appropriate parental leave for parents and their new children
- Provide sufficient time for bonding with new children and postpartum recuperation (in the event of birth) for mothers, which may include physical healing, establishing breastfeeding (should a mother choose to do so) and managing with postpartum depression or anxiety
- Ensure that trainees meet the program's aims, training goals, competencies and outcomes
- Comply with state, federal, and institutional standards regarding parental leave

APPIC encourages its member programs to be as creative and flexible as possible in accommodating the family needs of their trainees. This includes at the time of birth or adoption and in the times both before and after when medical appointments or other complications for parents and/or children may occur. In turn, trainees are encouraged to be open-minded, realistic and collaborative when requesting leave.

The Issues:

Birth, adoption, and parenting of children are common phenomena among psychology interns and postdoctoral trainees. Prospective and current trainees and psychology training programs must consider what is appropriate and reasonable for parents, what is practical and feasible for the site, and how to ensure that the trainee receives the full benefit of the training experience.

APPIC does not have an established requirement for parental leave in recognition of diversity of member programs' perspectives and constraints. However, APPIC encourages programs to articulate an approach for managing parental leave. Such approaches should be developed in collaboration with the program's human resources department to ensure compliance with relevant regulations and standards. In addition, it is recommended that programs include information about leave in the program's policies and procedures manual and public materials.

The landscape related to parental leave is ever shifting in the face of scientific literature, social awareness of issues related to parental leave, and legal and policy changes. Considerations for the involved parties include how much parental leave will be accommodated, whether or not it will be paid, and the extent to which benefits will be maintained during the leave and during any time that may be added to the training experience. These questions are applicable to both mothers and fathers, whether they are biological or adoptive parents, single or partnered in same sex or opposite sex relationships.

From the training perspective, it is essential that all parties attend to the need for the trainee to participate in a planned, programmed sequence of training experiences as outlined in the APPIC Membership Criteria. In addition, those programs that are accredited, or plan to be accredited, by the American Psychological Association (APA) Commission on Accreditation (CoA) must consider the Standards of Accreditation (APA, 2015). When planning for parental leave, the integrity of the training experience must be taken into consideration alongside the need for new parents to be afforded the opportunity for bonding and in many cases physical recuperation and the establishment of breastfeeding. There are also significant program and institutional considerations including financial, clinical, and cohort dynamics.

National and State/Provincial Regulations:

While both the United States and Canada have national, and some state and provincial, policies that govern family leave for employees, the extent to which these are applicable to interns and postdoctoral trainees varies depending on many individual and organizational factors.

Given that policies and regulations change, APPIC strongly recommends that training programs and affected trainees familiarize themselves with their country's and state's/province's regulations and laws, as well as the training program's aims, training, competencies, and outcomes such that the integrity of the program is maintained.

Considerations:

Issues may arise relating to the structure, content, and process of the training experience for those individuals who miss some of their internship or postdoctoral fellowship for family reasons. These include, but are not limited to: orientation to the site, consideration of responsibilities upon their return, the clinical needs of the population served, participation in didactics, and cohort issues. The training staff/faculty should work with the trainee to determine the best course of action for addressing each of the challenges. The handling of such matters often depends upon when in the training year the leave is to be taken, the nature of the training program, and the availability of resources.

Prospective and current trainees often ask when they are obliged to inform sites that they may need time off or other forms of flexibility. This is a complex question, with no clear answer. Ideally, sites would be informed as early as is reasonably possible. Prospective trainees who are pregnant or are planning a pregnancy or adoption during the training year *are not* required to inform sites of this prior to Match Day for interns, or the acceptance of an offer for postdoctoral training. Again, however, it is recommended that trainees discuss their needs and wishes with their sites right away to maximize the opportunity to plan for the leave. An exploration of how sites have managed this in the past might inform an intern applicant as to whether a particular site would be a good match for her or him.

Internship applicants should remember the binding nature of the APPIC Match when submitting their rank order lists. Trainees and sites often ask about the possibility of deferment of the internship year. Pregnancy and adoption, in and of themselves, are not grounds for deferment.

Sites must remember that it is not acceptable to ask prospective employees about their health, pregnancy status, or family status during the interview process. However, once the prospective trainee raises these issues, they may be open for discussion. It may be helpful for sites to review information related to the Pregnancy Discrimination Act of 1978 (U.S. Equal Opportunity Commission, 1978) for further discussion of pregnancy, childbirth, and related conditions relevant to the workplace.

It is important for trainees who request parental leave to understand that sites will usually try to be as accommodating as possible, and there are real considerations that may restrict the amount of leave that can be granted. For example, the training program must ensure that trainees have achieved the program's aims, training requirements, competencies and outcomes and have received a sufficient number of hours of training.

Range of Options:

While APPIC does not endorse a standard amount of parental leave, it is strongly recommended that both parties be as flexible and creative as possible when establishing an agreement. This applies to arrangements for birthing, non-birthing, and adopting parents.

In some cases, it will be determined that the trainee should delay the start of the internship. In other cases, the trainee may take a leave in the middle of the training year and return, or the trainee may end the training year early, or extend the training year as necessary. Each of these scenarios requires a plan (preferably in writing) for the trainee to complete the required number of hours of training and to achieve the program's requirements.

Some programs offer paid leave during the training year, then the trainee returns and continues, paid or unpaid, during an extension of the training year. Some programs encourage trainees to use their sick and vacation time as paid leave, and then offer additional paid or unpaid leave. Some sites allow trainees to acquire additional hours before and/or after the leave so that they will be able to start and finish within the original parameters of the training year. Some arrangements may include a number of full weeks of leave combined with some weeks of part-time leave. It might be possible for the trainee to conduct some training activities at home, such as preparing presentations or working on de-identified reports. There are many ways of accommodating parental leave and these should be thoughtfully and collaboratively discussed to match the needs of both the trainee and the program.

The amount of time granted for leave varies from site to site. Most often, birth mothers and adoptive parents are able to take between 6 and 12 weeks of parental leave. However, it can be very difficult to complete a full training experience when a longer leave (such as 12 or more weeks) is taken and most sites are not able to accommodate that. Though some sites are able to offer relatively generous leaves, it is important for trainees to understand that resources and clinical considerations vary enormously from site to site.

Questions often emerge regarding the compensation of trainees who have a leave during the internship or postdoctoral fellowship year. Typically, it is most reasonable for sites, given budget cycles, to pay the trainee for the year she or he was contracted to work, with a written agreement about the additional amount of training at the end. It is useful to work toward the trainee having benefits (e.g., healthcare) while employed and while engaging in additional hours. It is also essential that sites that normally provide liability coverage continue to provide such coverage during the extension period as well.

While trainees should think through what amount of time they would like for a parental leave, they are strongly urged to enter into discussions with the Training Director with an open mind about what is possible for the site to accommodate. It is important to ask for what one needs while at the same time being collaborative and flexible as there may be structural, human resources, and other types of constraints that the programs must manage.

For the sake of both the program and the trainee, APPIC recommends that the parties create a written agreement of the parental leave plan. It can also be helpful to involve the Director of Clinical Training from the trainee's doctoral program in discussions about leave arrangements.

One further consideration is finding ways to support women who choose to breastfeed. While not all mothers want or are able to breastfeed, it is important for training sites to work with breastfeeding women who may need to express breast milk while onsite. APPIC strongly encourages sites to accommodate breastfeeding women to support their choice to supply breast milk to their children. This can be done by providing a private, clean location with adequate time to express milk. Sites and trainees will need to discuss the amount of time needed for this and how it may impact the daily schedule and the total number of hours worked.

Questions from trainees and programs about parental leave may be addressed through the APPIC Informal Consultation Process accessed at www.appic.org.

References

- American Psychological Association, Commission on Accreditation (2015). *Standards of Accreditation for Health Service Psychology*. Retrieved from <http://www.apa.org/ed/accreditation/about/policies/standards-of-accreditation.pdf>
- Kaslow, N., Garfield, N., Illfelder-Kaye, J., & Mitnik, Mona (2004, July). APPIC guidance for pregnancy and family care issues during internship and postdoctoral residency training. *APPIC Newsletter*, XXIX (1), pp. 1, 11.
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