The Language of Feelings

What is the language of feelings? How will you know when someone is speaking the language of feelings or may be looking for a response from you in the feeling language? If you are a typical health physicist, you will know that you are in the world of feelings when, for example, you find yourself confused about another person's upset or dismay, which you cannot understand by any logical analysis.

When you cannot readily identify clues to where the other person is coming from and they sound emotional and irrational, they may simply be speaking the language of feelings. The language of feelings is not just a matter of the words used. This language also reflects a culture and a lifestyle that are completely opposite to the normal language of "thinking" used by most health physicists. HPs commonly prefer to speak in terms of logical objective analysis, based on fundamental principles, and impersonal evaluation for deriving the truth. In contrast, the feeling language draws conclusions based on personal empathy and subjective evaluation of circumstances. The feeling language emphasizes values, harmony, appreciation, sympathy, caring and what is best for the people involved.

When people speak in the feeling language, they will often preface their comments with the words, "I feel ..." They will want to know your feelings and will want you to hear their feelings. They will judge your credibility in terms of human values and how they perceive you care about people. They will not be persuaded by logical analysis, which seems impersonal, cool and uncaring.

To talk in the feeling language, we need to know some words that describe feelings. For example, a feeling person may say, "I am feeling: happy, angry, depressed, nervous, jubilant, furious, upset, excited, anxious, cheerful, delighted, pleased, distressed, disturbed, satisfied, unhappy, melancholy, wonderful or splendid." Whenever you hear such feeling words, an appropriate response is to reflect the feelings. That is, you respond with words that describe the feelings which you heard.

For example, "You are feeling ..." You then include a synonym for the feeling you perceived. If you find that you are having difficulty identifying the feelings, you can narrow down the possibilities by noting that there are only four words which capture the essence of all feelings. These words are mad, sad, glad and afraid. Usually you can readily identify which of these four feelings is closest and then choose an appropriate synonym for your response.

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New Certification Exam Requirements -- Are They Appropriate?

Steven D. Rima
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To the Editor:

Upon receipt of the November Newsletter, I became very dismayed upon reading the "CHP Corner" section, particularly regarding the change to the ABHP Exam requirements that have just been announced. The ABHP has long (and often) been accused of being elitist, and I fear that it is becoming even more so. I was not in attendance at the AAHP Executive Committee meeting when the requirements were changed, so I do not know the rationale for this decision, but I fail to see any value to the new degree requirement.

My concerns with the new requirements are as follows:

1. If the certification exam is truly valid in its scope and content, and I must assume that it is, why have a requirement for an "...appropriate B.S. degree..." as a prerequisite for taking the exam? If a candidate meets the experience requirement, which I have no complaint with, and that candidate has sufficient knowledge to pass both parts of the exam process, WHY DOES THE ABHP/AAHP CARE WHERE THAT CANDIDATE GAINED THAT KNOWLEDGE? Is knowledge from an "...accredited institution" any better than that same knowledge gained from self-study, experience, the military or any other source?

2. The stated requirement starting in 1997 is that "...an appropriate B.S. degree" will be required of all candidates. Who determines what an "appropriate" degree is? Does this exclude anyone with a B.A. degree? If so, why? As the policy is stated, a candidate with a B.A. in English and an M.S. in health physics cannot take the exam; I certainly hope that this is not the intent.
3. Having non-degreed personnel take the exam has not caused any problems that I am aware of. If a candidate meets the present credit requirement, pays the registration fee and fails the exam, no harm is done to the ABHP. If that person passes the exam, he or she obviously has the required knowledge; so again, no harm is done to the ABHP. What rationale was used to change the requirement after so many years with the present credit requirement?

4. As a corporate officer, I have been very involved with EEO and Affirmative Action issues and regulations which, like it or not, must be considered in a decision of this kind. Since being a CHP is often a key factor in hiring and promotion decisions, changing the exam prerequisites now would have almost no chance of withstanding a legal challenge from a future candidate meeting the "old" credit requirement. The ABHP/AAHP should not invite a potentially damaging lawsuit without a very good reason.

It seems to me that in these days of shrinking enrollment in health physics programs at those colleges that still offer one, we should be encouraging everyone to pursue both NRRPT Registration and ABHP Certification. As someone who is proud of my accomplishment of becoming certified, and as one who has strongly encouraged others to pursue certification, there are times when I find it very hard to defend the AAHF's attitude and requirements. This is one of those times.

I sincerely hope the ABHP/AAHP will revisit this issue and return to the previous requirements to take the exam. It worked for many years without causing any major problems that I am aware of so why change now?

ABHP/AAHP Response

Ruth McBurney, 1994 Chair, ABHP
William R. (Bob) Casey, 1994 President, AAHP

To the Editor: 19 December 1994

At the 1994 summer meeting of the American Board of Health physics, the Board made a modification in its policy regarding educational requirements for certification, effective with the 1997 exam. The modification, to require a minimum of a bachelor's degree*, was made after much discussion, input from Board members and Panel Chairs and American Academy of Health Physics Executive Committee members. The policy change was also approved by the AAHP Executive Committee.

The primary reasons for the change were as follows:

1. Concern over the quality of background of the applicants -- The Board felt that applicants accepted to sit for the ABHP exam should have a reasonable chance of passing. Under the current system, an applicant who has received as few as 30 semester hours of college credit in a physical science and who has passed the NRRPT exam and has been granted an additional 30 hours college credit for that registry may be accepted (with appropriate experience).

The experience of the Panels has shown that the passing rate of candidates without a strong science background is low.

2. Consistency with other professional board certifications -- The Board looked into the requirements for similar boards, including the American Board of Industrial Hygiene, Professional Engineers and the American Board of Medical Physics. These certifications require a degree for eligibility.

3. The maturation of the profession -- The profession of health physics is becoming increasingly complex and requires the knowledge and insight to apply scientific principles to radiation protection. If health physicists are to be respected and accepted as highly trained and knowledgeable professionals in radiation safety, the standards for certification must be consistent with the level of knowledge required.

In addition, although not key factors, the grading workload of the Part II Panel and low passing rates were discussed. The Panel and Board members contribute many long hours over weekends and nights to grade the exams. Three graders review and score each question. Grading many exams from ill-prepared candidates demands a significant amount of valuable volunteer time. The Board and Panels have, on occasion, been criticized for a low passing rate for certain certification exams. The Board and Panels felt that if the applicants' credentials met higher standards, the passing rate will also improve.

The Board did not take this action to make certification more elitist but to reflect the maturation and increasing complexity of the field of health physics. The resulting goal is to advance the professionalism of health physics and increased respect of the profession.

*Additional discussion with Ruth McBurney further clarified the response to one of Steven Rima's concerns. A candidate with a B.A. in English and an M.S. in health physics can, indeed, take the exam. The M.S. would satisfy the requirement for a "minimum of a bachelor's degree in an appropriate subject." I find this personally reassuring, since it describes my own situation when I applied for the exam. I had a B.A. in English (with additional credits in math and science) and an M.S. in health physics. Recognizing that the B.A. might be questioned, I took - and passed - the ABHP Certification Exam as soon as I had acquired the requisite experience. -- Nancy Daugherty, CHP Corner Editor

Don't Forget . . .
Nominations for the Wm. B. McAdams Outstanding Service Award are due to Tom Buhl, Vice Chair, ABHP, 1 March 1995.