AEDP Therapist Certification Guidelines [and Application Review Process]

Accelerated Experiential Dynamic Psychotherapy is a comprehensive, integrative theoretical and clinical model that requires ample time to fully grasp and assimilate into competent practice. AEDP certification requires that clinicians exhibit clear understanding of the theoretical model, competency in applying AEDP interventions to diverse clinical populations, and an overall understanding and endorsement of the AEDP ethos and values (please see the Institute's Mission Statement).

We recognize and appreciate that individuals learn at different paces, enter our training program with diverse skill sets, and may have an array of previous clinical experiences. As such, we have crafted a set of *minimum* guidelines that can be tailored, with the input of your supervisor, to your particular learning style and pace. While we support every candidate in reaching his or her ultimate goal of excelling as an AEDP therapist, the Institute's faculty reserves the right to extend certification requirements beyond the scope of the minimum guidelines listed below, or to recommend certain individuals for an accelerated course toward certification.

In addition to the basic guidelines, we also strongly encourage candidates to attend workshops, seminars and conference presentations offered by AEDP faculty. These learning forums foster a vital sense of community and inclusion that lies at the heart of AEDP and foster the ongoing growth of AEDP as an emerging, dynamic model. Attendance at these events will be taken into account in the overall assessment of a candidate's application.

These guidelines to apply for certification are organized by the following sections:

Part I. REQUIREMENTS Part II. GUIDELINES FOR SELECTION OF VIDEO Part III GUIDELINES FOR MICRO-ANALYSIS Part IV. PROCESS FOR SUBMITTING VIDEOS Part V. POLICY FOR REVIEW PROCESS BY AEDP FACULTY

GUIDELINES TO APPLY FOR CERTIFICATION

PART I. REQUIREMENTS

Please note that these guidelines reflect *minimum* requirements only and most clinicians training in AEDP require more than the minimum training to satisfy the supervisor's assessment that they are ready for certification.

- 1. State licensure or certification in your discipline (copy to be submitted with your certification materials)
- 2. Achievement of Level 3 AEDP training as outlined below:

Level 3 AEDP Therapists: Must have completed Immersion, Essential Skills (ES1) and either option A or option B

Option A) Advanced Skills Course (5 Modules) AND One Supervision Option **Option B)** Two Supervision Options

Supervision options

Core Training (commitment of 1 year | 5 modules) 30 hours Group Supervision with a minimum 5 hours of you presenting video 15 hours Individual Supervision

Applicants should submit their hours and dates of supervision to their supervisor(s), copying <u>admin@aedpinstitute.org</u>, directing the supervisor(s) to please verify for AEDP admin; admin will include these emailed confirmation with the applicant's application materials.

3. After completing level 3, an additional 10 hours is required with either a faculty or certified supervisor. This final phase with your supervisor is to focus on the preparation of tapes and transcripts for the submission of your application to become a certified AEDP therapist. In addition, these hours provide are an opportunity to identify any areas that are lacking or need improvement.

Please note: Faculty believe strongly in the value of having two different supervisors as it helps to broaden and deepen the experience of becoming a Certified AEDP practitioner. In accruing your total hours, two supervisors are required with a minimum of 10 hours each. We want to point out that AEDP Certification often requires more than the minimum supervision to achieve proficiency.

4. Videotaped recordings: Certification materials to be submitted must include two case reviews, including videotaped material of each case, transcript of each case, and a micro-analysis of each videotape annotating the AEDP principles and interventions applied in the clinical psychotherapy sessions. [See below: Guidelines for Selection of Videos and Guidelines for Micro-analysis]

Part II. GUIDELINES FOR SELECTION OF VIDEOS:

The submission of your clinical work showing the integration of AEDP theory with your clinical practice is a very important step in the AEDP certification process.

Two Clinical Sessions, audio visually recorded. We ask that you submit audio visually recorded clinical sessions from two different patients. **Each one should be 25 to 40 minutes in length with no more than two edits**. The first clinical sample should show work with a new patient. It should be from an early session with that patient (from session one to four), constituting the initial evaluation utilizing AEDP techniques. The second example of AEDP clinical work should be from either the middle or the termination phase of the treatment process with a different patient. Clinical skills using the AEDP interventions should be in evidence in both samples.

These clinical samples from two different sessions with two different patients represent an opportunity for you to demonstrate your competency in applying the principles of AEDP outlined below.

For certification purposes, the emphasis in the video should be on the therapist demonstrating AEDP principles. While it is important that the patient demonstrate the transition between the four states and three state transformations, in the course of the two submitted sessions, we specifically want to see the interventions of the therapist, and how the therapist is guiding the process.

By way of reminder: to protect yourself and your clients be sure that you have written consent for sharing the videos with supervisors.

Part III. GUIDELINES FOR MICRO-ANALYSIS:

In recognition of the fundamental value of coherency, integration and meta-processing, we ask that a microanalysis accompany your videotapes, with annotations that describe how you apply the above principles in AEDP and your corresponding interventions. The goals of the microanalysis are:

1) To provide theoretical support for the specific intervention strategies demonstrated in your clinical work

2) To provide you with a successful and satisfying learning experience that affirms and enhances your own self- reflective function.

Faculty and/or supervisors are available to you for ongoing guidance and support in the development and preparation of these materials.

Please include at the beginning of each case a paragraph or two (synopsis) outlining the pertinent psychosocial history. For the mid/late treatment session, please include a paragraph or two about the treatment process, orienting the reviewer to the client, the past defense structure of person and what has been worked on in the treatment.

When the videos are in a language other than English: Please make sure the transcripts include numerical guides to match the markers on the tape, so that the reviewer can read the transcript along with watching the tape, to follow and best understand the material. Subtitles would be ideal, but are not mandatory.

The format of the microanalysis can be as follows:

1) Follow the guidelines for transcript in an article (look at articles in Transformance for examples) Therapist and patient verbal communications is in regular print. Non-verbal communication/body language is in italics and in parenthesis. Therapist comments on the process, the theory, the interventions are in bold [in brackets.] Here is an example:

Th: If instead of doing the "so what" with a joke, or "that's life,"

[urging patient to relinquish defense]

Pt: Uh huh

Th: If you let yourself stay with this feeling (*slowing down, sobering*), the sense of emptiness, this inner sense of (*deep sigh, grave tone of voice*)... having to work so hard to keep something away. **[affective resonance]**

Pt: Yeah... (also slowing down and sobering) it's tiring. [deepening experience]

Th: It's very exhausting (*amplified exhausted intonation*)... Mmmmmm.... [**amplifying affective experience**] I mean right now it seems to me like we're sort of approaching this from the outside because it's a scary place to be [**empathic identification of fear**]. Pt: Yeah, it is...mmm... I don't know... Sometimes I wonder, is this it? Is this what life is about? It feels empty... (*pained tone*) [**deepening of despair**]

Or

2) Use a grid in which you put the content on the left side and the commentary about the interventions, theory and process on the right side. Here is an example:

PT: And I'm like, the absurdity of that...I'm in trouble, is minimizing and "going generic". what did I do...just the monkey brain. I want US to explore the specifics of the fixed and invariant replication of trauma history that has precipitated a crisis within his marriage.

> name the deeper, more explicit truth than the defensive description of "absurdity" and generic "monkey brain".

Th: Trauma

Pt.: But you're the safest person in my life.

•Establishing safety, undoing aloneness.. " He shows a remarkable demonstration that I'm a trusted ally and gives green lights and no current signs of dissociation.

[TH: (visibly touched) Oh...thank you.

receive his trust and take him in.

In the microanalysis of their clinical work, candidates should demonstrate theoretical and clinical integration in as many of the following areas as possible:

- Attachment theory and dyadic coordination of affective states
- Affective change processes and affective neuroscience
- Fostering glimmers of transformance, clicks of recognition, and positive affects
- Triangle of emotion, triangle of experience, and triangle of relational comparisons
- Regulating and deepening affect, processing to completion
- Four states and three state transformations of AEDP
- True self/True Other phenomena
- Meta-therapeutic processes
- Core State work

Some narrative may be included in the microanalysis as you explicate the process of intervening and integrating theory into your work.

In addition to the work that is viewed in the video, please add additional comments in your annotations on what and where you would have liked to intervene, what interventions you wished you had made, or not. The goal, at this point, is to demonstrate a capacity for self-supervision of your own work. This can include annotations of self-awareness and self-regulation.

Part IV. THE PROCESS FOR SUBMITTING VIDEOS With ANNOTATED TRANSCRIPT (MICRO-ANALYSIS) FOR REVIEW:

After reviewing their application with their supervisor, candidates seeking certification must submit the following materials to AEDP admin.

- 1. Copy of professional license or certification
- 2. Videotape of a session with a new patient (an initial evaluation or a session from very early in treatment)
- 3. Videotape of a session in the middle or the termination phase of treatment.

- 4. Transcripts with accompanying micro-analysis of each session*.
- 5. Narrative information about the client, and the treatment up to the current session*.

*Attention applicants: please redact all references to your supervisor(s) - i.e. black out all supervisor names from your application before submitting to admin.

All of the above, including the letter of support with the name of your supervisor redacted, are to be sent to the Administrator at the Institute admin@aedpinstitute.org. The Administrator will then provide you with a link to upload your material via a HIPAA compliant DropBox folder. You must upload a copy of all of the above materials and videos.

There is a \$300 fee for certification; the administrator will send you an invoice via PayPal where you can submit payment online.

Part V. POLICY FOR REVIEW PROCESS BY AEDP FACULTY AND SUPERVISOR

Upon receipt of your certification application, the Administrator will distribute the materials. The review process will be completed within eight weeks, and candidates will then receive notification from their supervisor of either *pass* or *revise*.

We at the AEDP Institute have a vested interest in the success of our supervisees. It is our express intention that all candidates who are deemed ready to apply for the certification process will demonstrate sufficient competency in AEDP to warrant certification. However, in the event that an applicant's clinical work does not yet meet the standards necessary for certification, we will provide specific reasons for the denial of certification and commit to helping you to develop a plan toward successful re-application and completion of the process. This feedback will be sent through the administrator to your supervisor.

In a case when two reviewers are unable to agree, a third person - a member of faculty - will be asked to review. If the third faculty person votes to **pass**, the application will be passed. If the third person votes to **not pass**, all three reviewers will submit comments

and the Administrator will pass those comments on to the supervisor who will work with the candidate on submitting a revised application, including a third tape. This new material will be reviewed by the initial reviewers to determine changes and growth in the work. The supervisor will submit a second letter of support (name redacted) addressing the changes.

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In the event that both initial reviewers concur on not passing, comments will be sent back to the supervisor through administration. The revised application and tape will be reviewed by a new faculty person.

Our goal is to make this a successful learning experience.