



Certified APT-Therapist Criteria	
Didactic instruction	Mandatory attendance of four, 3-day workshops per year (Minimum of 40hours/year) Friday/Saturday: 10am-6pm Saturday/Sunday: 10am-6pm Sunday/Monday: 10am-6pm
Individual Supervision	Individual supervision with a Certified-APT Supervisor. (Minimum 6 hr/year for 3 years, 4 hours must be with a Certified-APT Supervisor)
Group Supervision	Watching other supervisees receive supervision from a Certified APT-Supervisor (Minimum of 32 hours per year for 3 years)
Knowledge Proficiency Exam	A short exam (30 min) will be given at the end of each semester to insure that <i>basic didactic knowledge of Affect Phobia Therapy</i> is acquired.
Recommended Training	
Peer Supervision	Each trainee is encouraged to build a peer supervision group of 2 to 6 members in their local area where taped sessions can be shared and evaluated. Recommended time is 2 hr/ per week or 8 hours/ monthly.
ATOS Rating of Videos	Each trainee is encouraged to practice rating videos using the ATOS scale. (Instruction manual and rating scales are available online at www.affectphobiatherapy.com). Trainees can obtain APA videos and their ratings can be compared to expert ratings (www.atostrainer.com) to sharpen understanding and observational skills. A minimum of 8 hours per year is recommended, but as much can be done as desired. After rating a few APA videos, we recommend that trainees begin rating own sessions.
Empirical Case Studies	Trainees are encouraged to keep session by session records of problem severity, core conflict focus and ratings of affects, anxieties and defenses, (ratings are to be done with the patient at the end of each session) so that the degree of progress can be noted during treatment. End of session rating forms and charts of treatment progress will be available online.
Independent ATOS Rating and Case Evaluation	Only if desired by the trainee, and when the trainee feels ready, the APT Training Program will offer Independent Assessment of Cases by trained ATOS raters – plus a written Case Evaluation.

Mandatory Requirements For Certification			
	Year One	Year Two	Year Three
Didactic instruction	40 hrs	40 hrs	40hrs
Individual Supervision	6 hrs	6 hrs	6 hrs
Group Supervision	32 hrs	32 hrs	32hrs
APT Exam	2	2	2

Recommended Training				
Certificates of completion available when submitted at an additional cost				
	Year One	Year Two	Year Three	Total Received
Peer Supervision	40hrs	40 hrs	40 hrs	100+ hrs
ATOS Rating of APA or Own Videos	10 hrs	10 hrs	10 hrs	30+ hrs
Empirical Case Studies	4+ hrs	6+ hrs	10+ hrs	Data from 20 cases
Independent Assessment of Cases				
Certificates of completion available when submitted at an additional cost				
Independent ATOS Rating and Case Evaluation	1 case	1 case	1 case	3 cases

Certified APT-Therapist Criteria		
	<p>Respond to each section in the following way:</p> <ol style="list-style-type: none"> 1. Answer 'Yes' or 'No' when required 2. Answer questions fully when required 3. Or use this list to identify the knowledge or skills for which you have and rate them (A-D) <p>A) A high level of understanding / proficiency B) A moderate of understanding / proficiency</p>	Rate yourself

	C) A beginning knowledge or proficiency D) Have difficulty with/ need help with	
Recommended Reading & Practice		
A	Have you read Changing Character (McCullough, 1997)?	
B	Have you read Treating Affect Phobia: A Manual (McCullough et al, 2003)?	
C	Did you complete all exercises in Treating Affect Phobia: A Manual?	
Knowledge and Skills		
1. Treatment Selection		
1.1	What is the GAF score that divides good responders from poor responders?	
1.2	Do you know who is appropriate for rapid uncovering?	
1.3	With higher functioning patients, what interventions can be used?	
1.4	With lower functioning patients, what interventions can be used?	
2. Malan's Triangle of Conflict		
2.1	Describe the Triangle of Conflict	
2.2	Describe the Triangle of Person	
2.3	Identify what pole you place maladaptive thoughts, feelings or behaviors	
2.4	Identify what pole you place inhibitory affects	
2.5	Identify what pole you place activating affects	

2.6	Are you able to identify feelings, behaviors, and thoughts on the Triangle of Conflict and the Triangle of Person?	
3. Identify an 'affect phobia'		
3.1	Can you describe an 'affect phobia' for the four primary affect conflicts?	
3.2	Can you identify an 'affect phobia' underlying presenting problems?	
3.3	What is the treatment for an 'affect phobia'?	
3.4	How do you know when an 'affect phobia' is resolved?	
4. Can you identify and confront defenses?		
4.1	Can you identify a defense or a maladaptive behavior to your patient?	
4.2	Can you point out the cost associated with a defense?	
4.3	Can you point out the benefits associated with a defense?	
4.4	Can you identify a defense or a maladaptive behavior?	
4.5	Can you validate a defense?	
4.6	Can you distinguish the Origin of Defenses from the Maintenance of Defenses?	
4.7	Can you restructure a defense?	
5. Focusing on Activating Affects		
5.1	Can you explore and deepen feelings? (give an example for each affect)	
5.1a	Anger	
5.1b	Sadness	
5.1c	Grief	
5.1d	Self Compassion	
5.1e	Other positive feelings for self	
5.1f	Sexual feelings	
5.2	Can you decide what feeling to focus on?	

5.3	Can you repeat an affect exposure several times within a session?	
5.4	Can you expose patient to a painfully avoided feeling?	
5.5	Do you know when the patient is ready to experience a particularly painful feeling? How?	
5.6	When do you know that you need to switch affects?	
5.7	Can you differentiate between a maladaptive feeling and an adaptive feeling?	
6. Can you explore and regulate anxiety?		
6.1	What are the signals for the need to explore and regulate the following?	
6.1a	Anxiety	
6.1b	Guilt	
6.1c	Shame	
6.1d	Emotional Pain	
6.1e	Contempt/Disgust	
6.2	Do you know when to regulate anxiety?	
6.3	Can you identify non-verbal signals?	
6.4	Anxiety channeled into striated muscle?	
6.5	Anxiety channeled into smooth muscle?	
6.6	Anxiety in the form of cognitive disruption?	
6.7	Anxiety in the form of freezing?	
6.8	Can you alternate between Anxiety and Feeling Poles?	
7. Making a core conflict formulation		
7.1	Can you determine a core conflict underlying a problem behavior?	
7.2	Can you help the patient make a core conflict formulation?	
7.3	Can you reformulate a conflict formulation?	
7.4	Can you identify responses and work around the Defense, Anxiety, and Feeling Poles?	

8. Your relationship with the Patient		
8.1	Can you comfortably explore a patient's feelings about you?	
8.2	Can you identify transference responses?	
8.3	Can you work with specific feelings toward you and between you and the patient?	
8.3a	Anger toward you?	
8.3b	Sadness toward you?	
8.3c	Fear or Distrust toward you?	
8.3d	Compassion for the patient?	
8.3e	Positive feelings for the patient?	
8.3f	Sexual feelings toward you?	
8.4	Can you identify what feelings are your strengths? Why?	
8.5	Can you identify what feelings are your weaknesses? Why?	
9. Development of the Sense of Self		
9.1	Can you help patients to imagine how others see them?	
9.2	Can you help patients to find and encourage the lost voice?	
9.3	Can you help patients change perspectives?	
9.4	Can you help patients learn to parent themselves?	
9.5	Can you build the receptive capacity to others feelings?	
9.6	Can you help a patient identify a 'Lost Love'?	
10. Preparation for Termination of Treatment		
10.1	What are the signs that termination is approaching?	
10.2	How do you suggest termination?	
10.3	How do you prepare patients for relapses?	

11. Assessment of Treatment		
11.1	Can you work with your patient to fill out the 'End of Session Form' identifying core conflicts and making ratings?	
11.2	Can you use the 10-session form or another form to track focus of treatment?	
11.3	Have you charted your progress with a patient across sessions?	