

What is Expected of AASECT Certified Sex Therapists

In order to become an AASECT Certified Sex Therapist, and to maintain or renew Certification, the member is required as follows:

1. To maintain membership with AASECT in good standing as defined in Article III, Section G of the AASECT Bylaws at www.aasect.org
2. To adhere to the AASECT Code of Ethics posted at www.AASECT.org.
3. Only licensed individuals can move to certification as a Certified Therapist. (If the member is not licensed and/or licensure is not needed for the member to practice, he/she should provide an appropriate explanation of such). AASECT reserves the right to decline to offer or decline to renew sex therapy certification to otherwise qualified Members who do not hold licenses in the jurisdiction(s) in which they practice.
4. To respond to and provide full and accurate information about pending or actual actions against any license or surrender of a license that serves as a partial condition for certification.
5. To respond truthfully, accurately and completely to any and all questions on initial and renewal applications.
6. To stay up-to-date on new developments in the field of sexuality and sex therapy.
7. To earn a minimum of 20 AASECT approved Continuing Education credits/hours every five years (three years for those newly certified).
8. For those Certified Therapists who wish to supervise candidates for AASECT certification as Sex Therapists or Sexuality Counselors, application for Supervisor status is recommended. When no Certified Supervisor is available in a given area, a Certified Therapist may act as a supervisor provided the Therapist's certification has been in effect for a minimum of three years, and the Executive Office has approved the Supervision Agreement in advance of commencement of supervision.

Failure to comply with any of the above may result in actions against the Certified Professional's membership in AASECT. The AASECT Board reserves the right to investigate and take actions against the Certified Professional's membership and/or certifications when other complaints (not listed above) are introduced against an AASECT certified therapist.

Falsification of information provided in an application, or any other information related to certification (e.g., continuing education credits earned) shall be grounds for either action towards revocation of membership/certification or report to a licensing board. Inaccuracy will require immediate corrective measures, including possible revocation of certification.

Any person may, in good faith, lodge a complaint with AASECT against a certificate holder, as long as it is in writing, signed, and with an agreement to be contacted by AASECT to provide any necessary clarification or supporting documentation available.

A complaint may allege that a certificate holder has violated either the requirements for certification or the Code of Ethics of AASECT or the Bylaws.

Any complaint will be reviewed by AASECT for substance. The name of the member shall be known only to the Directors or other appropriate body designated by the AASECT Board or Executive Committee. AASECT will make an educational advisory regarding any ethical or practice issues or Bylaw violations regarding the case, which shall be shared with the Member. The Member will be required to read and respond to the advisory giving assurance that it was understood, and that the Member will only practice in accordance with its recommendations.

The Board of Directors may also consider action against a certificate holder if it learns in any manner (e.g., national clearinghouse) about an action against the certificate holder's license. The Board may take action against a certificate holder who has received an educational advisory from AASECT if AASECT later learns that problem practices identified therein persist.

If the Board of Directors decides to pursue a complaint, both the certificate holder and the relevant licensing board shall be contacted to ascertain, in writing, if any action is pending or has been taken.

If action is pending before a licensing board or other similar body, the Board of Directors may choose to await the decision of the licensing board or other agency of authority before considering further action. The relevant body and/or the certificate holder shall be contacted on a reasonably regular basis to determine the status of the case.

If action is taken against a license, the Board of Directors shall consider parallel action. A license revocation should result in an automatic revocation of a certificate (and possibly AASECT membership as well). A license suspension should result in a suspension of a certificate. Depending on the sanctions imposed by the licensing board, the Board of Directors may impose additional requirements for reinstatement if deemed appropriate (e.g., education, supervision).

If a serious complaint is lodged against a certified therapist or a flagrant violation is reported, the member's certification status is considered "Pending" until the time the inquiry or complaint is satisfactorily resolved, or there is a 2/3 vote by the Board of Directors to utilize the Pending status. This constitutes a limited abridgment of good standing in AASECT.

A Pending status implies that the member may not renew any certification within AASECT until the status is resolved. The Pending status will prohibit the member from running for AASECT elected or appointed positions, or from displaying the AASECT Sex Therapy certification, or having referrals made by AASECT to the Pending status Therapist until the

status is resolved. AASECT Office will maintain a list of all certificate holders who are assigned Pending status.

The Pending status has no authority to prevent the member from practicing as a therapist in their licensed state or for practicing another profession which AASECT does not certify.

Confidentiality of the member is respected and only the Board of Directors is aware of the circumstances surrounding the Pending status. The responsibility for resolving the Pending status rests on the member.

If action against a certificate holder's license is neither pending nor has been taken, the Board of Directors may choose to initiate a complaint to a licensing board based on direct evidence at its disposal. (It should be noted here that most if not all states grant immunity from liability to anyone participating in a Board case in good faith.)

If conditions warrant (such as, failure to meet CE requirements or falsification of CE information), the Board of Directors may choose to take action against a certificate holder whether or not action has been taken against his or her license. Such actions could include probation with conditions for reinstatement (e.g., education, supervision), suspension, or revocation. A 2/3 vote by the Board is required in order to revoke membership in AASECT.

The AASECT website and other appropriate documents state clearly what conditions are expected of a certificate holder to earn or retain said certificate, and what procedures may be followed if a client/patient or other individual feels that the standards of AASECT may have been violated. Procedures described could include the possibility of lodging complaints with AASECT and/or the relevant licensing board.

I, _____ have read and agree to the above terms.

(Member's Signature)

(Date)

AASECT REQUIREMENTS FOR SEX THERAPIST CERTIFICATION

The American Association of Sexuality Educators, Counselors, and Therapists (AASECT) has established that the following education and experiential activities will meet the requirements for certification as a Sex Therapist.

I. Membership in AASECT:

The applicant may hold Full, Institutional, Retired, or Life Membership in AASECT.

II. AASECT Code of Ethics:

The applicant will have read the AASECT Code of Ethics. By signing the certification application form, the applicant agrees to be bound by the AASECT Code of Ethics.

III. Academic and Psychotherapy Experience:

The applicant will have earned an academic degree in a human service program that included psychotherapy training from an accredited college or university, and clinical experience as follows:

A. Master's degree plus two years of post-degree clinical experience as a psychotherapist (20 hours/week x 50 weeks/year = 1,000 hours/year).

OR

B. A Doctorate degree plus one year of post-degree clinical experience as a psychotherapist (1000 hours/year).

IV. Clinical Certification:

A. The applicant will hold a valid state regulatory license or certificate in one of the following disciplines: psychology, medicine, social work, counseling, nursing, or marriage and family therapy.

OR

B. If such regulatory system is not in effect in the state where the applicant practices, one of the following criteria will be met:

1. Listing in the *National Register of Health Science Providers in Psychology*.

2. Certification by the Academy of Certified Social Workers (or other recognized accrediting bodies in social work).
 3. Clinical Membership in the American Association for Marriage and Family Therapy.
 4. Certification by the American Nursing Association as a Clinical Specialist or Nurse Practitioner in Adult Psychiatric and Mental Health Nursing Clinical Specialist or Nurse Practitioner in Child and Adolescent Psychiatric and Mental Health Nursing.
 5. Certification by the National Board of Certified Counselors.
- C. Applicants from outside the United States will document equivalent certification.

V. Human Sexuality Education:

The applicant will have completed a minimum of ninety (90) clock hours of education covering general knowledge in the following core areas. This knowledge may have been gained through academic courses and training workshops.

- A. Sexual and reproductive anatomy and physiology.
- B. Developmental sexuality (from conception to old age) from a psychobiological perspective.
- C. Dynamics of interpersonal relationships.
- D. Gender-related issues.
- E. Socio-cultural (ethnicity, religion, socioeconomic status) factors in sexual values and behavior.
- F. Partnering and family dynamics.
- G. Medical factors that may influence sexuality including illness, disability, drugs, pregnancy and pregnancy termination, contraception and fertility.
- H. Knowledge of sexually transmitted infections and safer sex practices.
- I. Sex research/literature.
- J. Sexual abuse.
- K. Varieties of sexual orientation and gender identities.
- L. Atypical sexual behavior, hyper-sexuality, and sexual dysfunction.
- M. Substance abuse and sexuality.
- N. History of the discipline of sexology.

VI. Sex Therapy Training:

The applicant will have completed a minimum of sixty (60) clock hours of training in how to do therapy with patients/clients whose diagnoses include the Psychosexual Disorders described in the current edition of the *Diagnostic and Statistics Manual of the American Psychiatric Association*. Sex therapy training may have been obtained through credit courses, tutorials, workshop, etc. The following must have been included:

- A. Theory and methods of sex-related psychotherapy, including several different models.

- B. Techniques of assessment and diagnosis of the Psychosexual Disorders described in the current edition of the DSM.
- C. Theory and methods of approach to intervention in relationship systems experiencing sex and intimacy problems.
- D. Theory and method of approach to medical intervention in the evaluation and treatment of psychosexual disorders.
- E. Principles of consultation, collaboration, and referral.
- F. Techniques for evaluating clinical outcomes.
- G. Practicum experience, i.e. exposure to treatment of clinical cases through observation, demonstration, videotape presentation, role-playing, etc.

Note: The difference between the requirements V and VI is that the education requirements in V are directed at general knowledge about human sexuality, while the training requirements in IV are directed at specific skills in sex therapy. The two overlap, but they are sufficiently different that documentation is necessary in each.

VII. Attitudes/Values Training Experience:

The applicant will have participated in a minimum of ten (10) clock hours of structural group experience consisting of a process-oriented exploration of the applicant's own feelings, attitudes, values, and beliefs regarding human sexuality and sexual behavior (e.g., a SAR). Such training may not be personal psychotherapy or an academic experience in which the primary emphasis is on cognitive information. It is strongly recommended that this experience occur early in the applicant's training to be most beneficial.

VIII. Clinical Experience:

The applicant will have completed a minimum of two hundred fifty (250) hours of supervised clinical treatment of patients/clients who present with sexual concerns. Clinical experience will include, but not be limited to, the diagnosis and treatment of psychosexual dysfunctions and will include therapy with patient/clients of both genders and with couples. This supervised experience may have been completed prior to, during, or following the receipt of the terminal graduate degree.

Note: Supervised clinical work is the crux of certification. It is in the therapy milieu in which competency is demonstrated.

IX. Supervision:

The applicant shall have completed a minimum of fifty (50) hours of supervision with an AASECT Certified Supervisor. Where such supervision is not feasible or possible, supervision can be arranged, with prior approval, from an AASECT Certified Sex Therapist who has experience in the supervision of clinical practice.

A supervision contract, signed by both the proposed supervisor and the supervisee, will be submitted to and approved by the Supervision Certification Committee prior to the commencement of the supervision. The proposed supervisor is responsible for formulating and submitting the contract/plan. (See: AASECT Supervision Designate Endorsement Form.)

The goal of supervision will have been directed toward the improvement of professionalism by emphasis upon the enhancement of clinical skills and the continuation of the educative process. The presentation of sex-related case materials utilizing direct observation or audio/video is encouraged. Cases selected for supervision should be, as much as possible, followed from the beginning to the end of the clinical process.

Supervision can take place in either an individual or group context, with group supervision accounting for no more than 50% of the supervision hours. Group supervision, to be most effective, should contain no more than four (4) supervisees and, where possible, should be extended beyond one hour. Supervision must occur over a period of no less than six (6) months.

An applicant with a minimum of fifteen (15) years of post-degree clinical experience (including working with couples), will require twenty-five (25) hours of supervision (50% percent of which is individual supervision) and an endorsement of clinical skill history by an AASECT certified sex therapist.

Creative plans and uses of supervision will be considered. Questions about supervision arrangements should be directed to the Supervision Certification Committee via the AASECT office. (Please see appendix for examples of how to plan for creative supervision.)

The following do not meet the supervision requirements:

- A. Personal psychotherapy or counseling.
- B. A process that is primarily didactic, such as a workshop or seminar, in which the primary focus is teaching rather than the raw data of the supervisee's clinical practice.
- C. Management and/or administrative meetings with an organizational director or executive.
- D. Peer supervision.
- E. Co-therapist supervision.
- F. Supervision from a family member or significant-other person.
- G. Supervision from a colleague with whom one is involved in a partnership.

X. Application and Approval Process:

Application

In addition to the appropriate application fee (\$250), which is non-refundable, the candidate will submit four (4) copies of the following:

- A. Completed formal application for AASECT Certified Sex Therapist, signed and dated.
- B. An official transcript from program(s) where degree(s) were earned (Item III).
- C. Copy of license, certification, or proof of membership in one of the approved disciplines or professional organizations (Item IV).
- D. Official transcripts, attendance certificates, syllabi, etc, documenting ninety (90) hours of education in the designated core areas of human sexuality (Item V).
- E. Official transcripts, attendance certificates, syllabi and other credible evidence documenting sixty (60) hours of training in sex therapy that includes the designated areas of focus (Item VI).
- F. Official documentation of participation in a structured group experience focusing on sexual attitudes and values e.g., a SAR (Item VII).
- G. Letter(s) from employers and/or supervisor(s) certifying a minimum of two hundred fifty (250) hours of clinical experience serving as the sole or primary therapist for patients/clients with diagnosed Psychosexual Disorders (DSM IV) (Item VIII).
- H. Endorsements must be received from the following persons on the appropriate forms:
 1. A clinical supervisor attesting to the applicant's supervised clinical work.
 2. A professional colleague who can comment on the applicant's professional responsibilities, professional ethics and overall ability as a sex therapist.
 3. A character reference from a professional psychotherapist outside the applicant's immediate work setting.

Each document should be clearly marked to identify the certification requirement to which it applies. All documentation will become the property of AASECT.

Approval

Upon receipt of a complete application package, AASECT will forward the application to the Sex Therapist Certification Committee for action and approval.

XI. Miscellaneous:

- A. All certified members are required to comply with the ethical standards established by AASECT as expressed in the AASECT Code of Ethics.
- B. Upon approval of the Committee on Sex Therapists, the successful applicant will receive a certificate in recognition of having met AASECT requirements for certification in the area of sex therapy. This certificate will be subject to renewal every three (3) years.

- C. Each AASECT Certified Sex Therapist will be listed in the AASECT Membership Directory and will be eligible to receive referrals from the National Office and AASECT website.
- D. Membership in AASECT will be maintained on an annual basis to retain the AASECT certification status. If membership in AASECT lapses, certification will also lapse.

Approved March 2002



american association of sexuality educators, counselors and therapists

APPLICATION FOR AASECT CERTIFICATION SEX THERAPIST

NAME: _____

ADDRESS: _____

CITY: _____ STATE: _____ ZIP: _____

TELEPHONE : _____ FAX: _____ E-MAIL: _____

INSTRUCTIONS

NOTE: Applicants will be judged on the basis of the requirements in effect at the time of application if it is determined that they meet all requirements in effect at the time of application. If the applicants do not meet the requirements in effect at the time of their original application and the certification requirements are changed, then they will be judged according to the requirements in effect at that later time. Only those members whose application information meets the requirements for certification prior to the date of application are eligible for certification. Applications must be COMPLETE before they are reviewed. Please read instructions carefully and include all required documentation.

1. Fill out COMPLETELY all pages of the application form.
2. Applicant's signature must appear as designated on the final page of the application
3. Applicants must assure submission of endorsement forms, transcripts and other relevant supporting materials to accompany this application.
4. The non-refundable application fee of \$250.00 must accompany the application.
5. Mail completed application with all supporting documentation to the Ashland office. ORIGINAL & THREE COMPLETE, COLLATED COPIES WITH ALL SUPPORTING DOCUMENTS MUST BE SUBMITTED

I. **AASECT Membership** starting date. _____
If you are not yet a member of AASECT, a membership application and appropriate dues payment must accompany this application.

II. By signing this application, you confirm that you have read the **AASECT Code of Ethics** and agree to be bound by them.

III A. Please list below your earned **academic degrees**.

<i>Degree</i>	<i>Department/Field</i>	<i>Institution</i>	<i>Year Awarded</i>

attach an original transcript of your highest earned academic degree

B. Please list below your **professional experience** as a Psychotherapist (most recent position first).

<i>Position</i>	<i>Employer</i>	<i>Dates (month/year)</i>	<i>Hours/Week</i>

attach additional sheet, if necessary

total hours _____

IV. Attach a copy of your valid **state regulatory license or certificate** in one the areas stated in Requirement IV.
OR
If there is no appropriate state licensure or certification available, then provide a copy of an alternative clinical certification.

V. Please list below a minimum of **ninety-(90) clock hours of Human Sexuality Education.**

<i>Core Areas</i>	<i>Course Title</i>	<i>Institution</i>	<i>Dates (month/year)</i>	<i>Hours</i>
Anatomy & Physiology				
Psychobiological Developmental Sexuality				
Interpersonal Relationships				
Gender Issues				
Socio-Cultural Factors				
Marital & Family Dynamics				
Medical Factors				
STI's & Safer Sex				
Sex Research				
Sexual Abuse				
Sexual Orientation & Gender Identities				

These courses must appear on your academic transcript(s), submitted under requirement III, or be supported by CE certificates, attached.

Total Hours _____

VI. Please list below a minimum of sixty-(60) clock hours of **Sex Therapy Training**.

<i>Core Areas</i>	<i>Course Title</i>	<i>Institution</i>	<i>Dates (month/year)</i>	<i>Hours</i>
Theory & Methods				
Sex-Related Therapy				
DSM-IV Assessment & Diagnosis				
Relationship				
Systems Intervention				
Medical				
Intervention				
Consultation & Referral				
Ethical				
Issues				
Evaluation of Clinical Outcomes				
Practicum				
Experience				

These courses must appear on your academic transcript, submitted under requirement III, or be supported by CE certificates, attached.

Total Hours _____

VII. **Attitudes and Values Training Experience (SAR)** Attach copy of CE certificate/certificate of attendance.

<i>Title</i>	<i>Sponsor/Leader</i>	<i>Hours</i>	<i>Dates (month/year)</i>
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Attach a one page comprehensive statement of your professional philosophy and goals of sex education, including how the SAR affected that philosophy.

VIII. Please list below your **clinical experience** in sex therapy.
Attach additional sheets, in this format, if necessary.

<i>Position # 1</i>	<i>Setting</i>	<i>Date (month/year)</i>	<i>Hours</i>
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List kinds of Psychosexual Disorders (DSM-IV) of clients in this setting:

List hours of therapy with (1) couples ____ (2) adult males ____ (3) adult females ____ (4) children ____ (5) families ____

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<i>Position #2</i>	<i>Setting</i>	<i>Date (month/year)</i>	<i>Hours</i>
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List kinds of Psychosexual Disorders (DSM-IV) of clients in this setting:

List hours of therapy with (1) couples ____ (2) adult males ____ (3) adult females ____ (4) children ____ (5) families ____

IX. List below the 50 hours of **Supervision** you have had with either an AASECT Supervisor or someone approved by the Supervision Certification Committee. A supervision contract, signed by both the proposed supervisor and the supervisee, will be submitted to and approved by the Supervision Certification Committee **PRIOR** to the commencement of the supervision. The proposed supervisor is responsible for formulating and submitting the contract/plan.

INDIVIDUAL SUPERVISION

<i>Supervisor</i>	<i>Setting</i>	<i>Dates (month/year)</i>	<i>Hours</i>

attach a copy of the Supervision Certification Committee letter approving the contract/plan
 attach additional sheets, in this format, if necessary

SMALL GROUP SUPERVISION

<i>Supervisor</i>	<i>Setting</i>	<i>Dates (month/year)</i>	<i>Hours</i>

attach a copy of the Supervision Certification Committee letter approving the contract/plan
 attach additional sheets, in this format, if necessary

TOTAL HOURS _____

- X. Additional **documentation** submitted.
- A. Completed AASECT form Certificate of Endorsement Professional Colleague.
- B. Completed AASECT form Certificate of Endorsement Character
- C. In the space below, please provide any additional information you believe may be relevant for the Committee in examining your application.

attach additional sheet, if necessary

Acceptance of membership in AASECT connotes acceptance by the member of the AASECT Code of Ethics, a copy of which has been reviewed by the applicant, as it may be amended in accordance with the AASECT Bylaws, and shall constitute the member's agreement to carry on the profession of Sex Therapist, as the case may be, in conformity with Part A of the Code and to be bound by the procedural provisions of Part B.

I agree to accept the AASECT Code of Ethics. I agree to have my name listed in the Membership Directory.

Signature Date

The foregoing information (on seven pages) has been voluntarily supplied by the undersigned for the purpose of being certified as a Sex Therapist, with the understanding that it will be reviewed by the Sex Therapist Certification Committee of AASECT and that, in the process of verification of the facts stated in the application, such facts may become known to third parties, and the undersigned expressly waives any claim to confidentiality of the material stated herein.

Signature Date

I hereby agree that I am submitting this application voluntarily and that, if my application is not acted upon favorably, I will in no way seek to hold AASECT or any of its officers, members or agents responsible for action.

Signature

Date

**CERTIFICATE OF ENDORSEMENT
CLINICAL SUPERVISOR
REQUIREMENT X**



Ref: _____
(Candidate's Name)

I, _____, desire to endorse the above Candidate for AAASECT certification as a Sex Therapist.

Attached is a copy of the letter from the Supervisor Committee, which previously approved the contract/plan between the Candidate and myself.

I am currently an AAASECT Certified Sex Counselor Yes No

I am currently an AAASECT Certified Sex Therapist Yes No

I am currently an AAASECT Certified Supervisor Yes No

If "no" please attach documentation concerning your qualifications (training and experience, and related credentials) as a sex therapist.

I have known the Candidate for _____ years.

I have supervised the Candidate from _____ (month/year) to _____ (month/year) for _____ hours per _____.

The Candidate performed _____ hours of sex therapy under my supervision.

The setting(s) for this supervised clinical experience: _____

The cases seen by the Candidate under my supervision included (check all that apply):

adult males adult couples adolescents adult females
 children families

What type of sex-related problems were dealt with in counseling by the Candidate while under your supervision?
(Attach an additional sheet if necessary or use the back of this form)

**CERTIFICATE OF ENDORSEMENT
CHARACTER
REQUIREMENT X**



Ref: _____
(Candidate's Name)

I, _____, desire to endorse the above candidate for AASECT certification as a Sex Therapist.

To the best of my knowledge, the Candidate meets the qualifications for certification effective July 1, 2002 and as stated in the Bylaws of AASECT. I have known the Candidate for _____ years.

COMMENTS ON CANDIDATE'S QUALIFICATIONS AND ACTIVITIES
(Use reverse side if necessary)

Would you recommend the Candidate for certification as a Sex Therapist? Yes No

Do you know of any physical or mental condition of the Candidate, which might impair competence? If so, please comment.

Using the scale below, rate the Candidate's overall ability as a Sex Therapist.

/ _____ / _____ / _____ / _____ / _____ /
excellent very good good fair poor

Name (Print)

Signature

Address

Title

Date

Telephone

**CERTIFICATE OF ENDORSEMENT
PROFESSIONAL COLLEAGUE
REQUIREMENT X**



Ref: _____
(Candidate's Name)

I, _____, desire to endorse the above candidate for AAASECT certification as a Sex Therapist.

To the best of my knowledge, the Candidate meets the qualifications for certification as stated in the Bylaws of AAASECT. I have known the Candidate for _____ years.

COMMENTS ON CANDIDATE'S QUALIFICATIONS AND ACTIVITIES
(Use reverse side if necessary)

Would you recommend the Candidate for certification as a Sex Therapist? Yes No

Using the scale below, rate the Candidate's overall ability as a Sex Therapist.

/ _____ / _____ / _____ / _____ / _____ /
excellent very good good fair poor

Name (Print)

Signature

Address

Title

Date

Telephone