



A M E R I C A N

PSYCHOANALYTIC

A S S O C I A T I O N

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**STANDARDS
FOR
EDUCATION and TRAINING IN PSYCHOANALYSIS**

Approved by the Board on Professional Standards
of the American Psychoanalytic Association
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I. Definition and Goals of Psychoanalytic Education:

Psychoanalysis is a set of theories of structure, function and development of mental life, psychopathology, and treatment. The application of these theories forms the basis of both a specialized form of psychotherapeutic treatment, psychoanalysis, and the principles of the psychodynamic psychotherapies.

The American Psychoanalytic Association first established national standards for professional psychoanalytic education and training for its constituent institutes in 1938. The current Educational Standards apply only to psychoanalytic education and training (adult, combined adult and child/adolescent, and child focused training) in the Association's approved institutes. Throughout these Educational Standards, the term "institutes" refers to the psychoanalytic education and training component of approved psychoanalytic institutes and centers. These Standards do not refer to other education or training components of approved institutes or centers, such as psychotherapy training.

Psychoanalytic education and training provides knowledge and critical understanding of theoretical and clinical psychoanalysis, and proficiency in the practice of clinical psychoanalysis and its application in other forms of psychological intervention. Completion of education and training, and graduation from an approved institute are based upon the acquisition of sufficient knowledge and skill to conduct psychoanalytic treatment independently and competently.

The American Psychoanalytic Association (APsaA) recognizes two applications of the tripartite Eitingon model of psychoanalytic training. They are sufficiently similar in goals and approach to the training process, and are sufficiently coherent, evolved, and integrated. The APsaA Board on Professional Standards deems as acceptable both models for our approved institutes: (a) the "Original APsaA model," which has two pathways to TA/SA appointment, (1) the Traditional Pathway and (2) the Developmental Pathway; (see Section VIII. "Selection and Development of Training and Supervising Analysts, below") and (b) the "William Alanson White Institute (WAWI) model." Approved institutes may organize their training programs around either of these two models, providing that the "model" is adopted in its entirety; APsaA-approved institutes cannot pick and choose from among features of each model. Reference herein to the "WAWI training model" shall mean and incorporate the approach to policy and procedures in congruence with these Educational Standards. [The **Bulletin** of the William Alanson White Institute, published periodically by the White Institute and available on the Institute's website <www.wawhite.org>, includes the detailed procedures employed by the William Alanson White Institute that are essential to implementing the WAWI training model].

APsaA recognizes that the "tripartite model" of psychoanalytic education can be implemented through each of the approved training models. The three required components of the tripartite model of psychoanalytic education and training include:

1. A non-reporting analysis with a training analyst. In the "Original APsaA Model," this analysis should be conducted with the analysand *on the couch* at a frequency of *at least four and preferably five sessions per week* on separate days in person. In the "William Alanson White Institute (WAWI) model" the analysis may be conducted *either with the use of the couch or face-to-face* at a frequency of *at least three times per week*.
2. A didactic curriculum described in detail in Section IV, below.
3. The supervision of a minimum number of psychoanalytic treatments: In the original APsaA model, the supervision of at least three psychoanalytic

treatments, which should include different genders, each conducted at a frequency of at least four sessions per week on separate days in person. In the “WAWI model”, the supervision of at least *four* psychoanalytic cases, which should include different genders, each seen for a minimum of *three* weekly sessions, with at least three different supervisors, for a total of at least 200 supervisory hours.

The American Psychoanalytic Association uses a Training and Supervising Psychoanalyst system in its approved institutes. The appointment processes, modifications and waivers, are described in Section VIII, below.

II. Responsibility for Psychoanalytic Education and Clinical Training

Psychoanalytic education and clinical training is a shared responsibility of the Board on Professional Standards (BOPS) and its affiliated Institutes. Establishing and maintaining standards for psychoanalytic education and clinical training is a responsibility of the Board on Professional Standards, as defined in the bylaws of the American Psychoanalytic Association.

Approved Institutes are responsible for ensuring that the training analysis, didactic curriculum, and supervision of psychoanalytic work of all candidates are consistent with these standards.

Participating approved institutes and new training facilities of the American Psychoanalytic Association will participate in periodic site visits from the Committee on Institutes (COI), the Committee on New Training Facilities (CNTF) and the Committee on Child and Adolescent Analysis (COCAA). These site visits are designed to review the institute’s educational and training programs and to assess the institute’s compliance with the BOPS standards. When institutes are not in full compliance with standards, the COI consults with the institute to assist in strengthening its programs to return to full compliance. If these collaborative efforts fail to result in full compliance with these standards, the Bylaws of the American Psychoanalytic Association outline the relevant processes and procedures (see. Article XI, Section 5).

III. Selection of Candidates for Psychoanalytic Education and Training

It is the policy of The American Psychoanalytic Association that an applicant for candidacy is never excluded on the basis of age, gender, sexual orientation, religious affiliation, race, or ethnic background, or disability status. Selection is based on an applicant’s eligibility, readiness and suitability. All applicants for clinical training must (i) have a license recognized by the jurisdiction of their institute that permits the clinical practice of psychoanalysis; (ii) be training in a jurisdiction in which the clinical practice of psychoanalysis is exempt from or not regulated by licensure; or (iii) with respect to institutes that are authorized by their jurisdictions to offer training leading to the licensure of graduates in the clinical practice of psychoanalysis, be eligible within that jurisdiction to provide clinical services as part of their institute training.

A. Eligibility

Applicants who hold the following degrees and post-graduate clinical training are eligible for training.

1. Doctors of Medicine or of Osteopathic Medicine who have graduated from an accredited medical school or osteopathic school; and have completed or are near completion of a psychiatry residency program.

2. Mental health professionals who have completed a doctoral level degree from an accredited mental health program and a minimum of 3000 hours or two years full time mental health clinical experience post-graduation, including in-patient and/ or emergency care experience.
3. Mental health professionals who have graduated from an accredited masters program which is generally recognized as the highest clinical degree in the field (currently a masters degree in social work, psychiatric nursing, or marriage and family counseling) and have completed at least two additional post masters degree years of didactic and clinical training including 3000 hours of clinical immersion, 60 post masters hours of psychodynamic psychotherapy supervision and 60 post masters hours of psychodynamically oriented coursework and clinical seminars; or a two year organized post masters psychodynamic psychotherapy program including supervised clinical experience. They must be licensed in the jurisdiction in which they practice, or practice in a jurisdiction in which their practices are exempt from or not regulated by licensure.
4. In the "William Alanson White Institute model," mental health professionals who have a doctoral level degree as defined in (III. A. 2) or a masters level degree as defined in (III A. 3) above but have not yet accrued postgraduate clinical experience as defined in (III. A. 2 or III. A. 3), provided such trainees are eligible to obtain a "limited permit" from the NYS Education Department and are documented to have achieved postgraduate experience as defined in (III. A. 2. Or III A. 3) by the end of their psychoanalytic training.
5. Other persons who qualify under applicable law for admission to an approved institute that is authorized within its jurisdiction to offer a training program leading to licensure in psychoanalysis. (In New York State, such programs are formally designated as "Licensure Qualifying Programs" under the regulatory oversight of the State Education Department.)

B. Readiness

1. Eligible applicants must fulfill the prerequisite criteria of didactic education and clinical experience specified in A, above, prior to matriculation.
2. The applicant should be able to demonstrate some knowledge of psychoanalysis as well as the ability to meet the demands inherent in psychoanalytic training.
3. Personal and professional readiness for matriculation is determined through the application process using interviews and a review of clinical material provided. Individuals accepted for analytic training but evaluated as not fully prepared for matriculation (i.e. starting seminars) should participate in didactic and supervised clinical activity commensurate with their skill and educational level.

C. Suitability

Applicants must demonstrate a level of maturity, as well as the personal, professional, and ethical integrity necessary for full psychoanalytic training.

D. Modifications of Eligibility Standards

The American Psychoanalytic Association will consider requests from participating psychoanalytic institutes or centers choosing to accept candidates who do not fall within the Eligibility criteria outlined above.

The Board on Professional Standards has developed procedures and criteria for the modification of the usual eligibility standards for psychoanalytic education and clinical training for Institutes wishing to accept candidates who do not fully meet the above eligibility criteria:

1. Institutes should consult the Committee on Preparedness and Progress (COPAP) of the Board on Professional Standards when consideration of other licensed professionals is being requested.
2. Institutes should consult the Committee on Research and Special Training (CORST) of the Board on Professional Standards when consideration of scholars, researchers, and other professionals is being requested.

IV. Components of Psychoanalytic Education and Clinical Training

Psychoanalytic education and training has three essential and required components:

1. The Non-reporting Training Analysis:

A non-reporting training analysis: In the original APsaA model, the training analysis should be conducted with the analysand on the couch at a frequency of at least four, preferably five, sessions per week in person. In the “WAWI model,” the training analysis may be conducted on the couch *or* face-to-face, at a frequency of at least *three* weekly sessions. In the original APsaA model, it is expected that the candidate’s training analysis begins prior to matriculation, and should continue through a substantial portion of the candidate’s supervised clinical psychoanalytic work. In the “WAWI model” the candidate’s training analysis may begin no later than October of the first academic year of training, and should continue at a minimum of three sessions weekly for at least 300 hours. The WAWI Training Committee may recommend additional training analysis depending on the candidate’s progress toward graduation.

The Board on Professional Standards recognizes that the “original APsaA” training model may permit occasional modifications of the frame, including changes in frequency and the use of the couch. A portion of a training analysis conducted in part via the telephone or other electronic means or a condensed personal analysis (a personal analysis with more than one session per day on a regular basis) requires a waiver. Waiver requests are evaluated by the Committee on Institutes (COI) or the Committee on New Training Facilities (CNTF) based on guidelines developed by the Board on Professional Standards (BOPS). If recommended by COI or CNTF, the waiver request is presented to the BOPS for approval. A waiver is also required if the candidate’s analysis will be conducted by an analyst who is not a Training Analyst. (See VIII, C). The “WAWI model” provides that waiver requests are under the purview of the Institute’s Training Committee, and permits the Institute’s Training Committee, after due consideration, to grant waivers of the approved Training Analyst requirement.

A non-reporting analysis is defined as completely confidential, without any participation of the candidate's analyst in progression decisions. The decision to participate together in a class of the didactic curriculum by a candidate and their training analyst should be determined at the Institute level and ultimately should be based on respect for the wishes of the analysand and analyst.

2. Psychoanalytic Curriculum

An integrated curriculum of psychoanalytic study must provide a comprehensive understanding of the fundamentals of and interrelationship between psychoanalytic theory and clinical practice. It should teach critical thinking about the historical and conceptual structure and developments of psychoanalytic theory and practice.

A candidate's training experience should involve the simultaneous participation in the didactic course work, their training analysis and supervised clinical work. Such immersion enables the candidate to understand the empirical basis of theoretical formulations and their revisions, and to develop skill in the conceptualization of case material. When a candidate's participation in seminars occurs during a period of less than optimal clinical immersion a program of post-seminar study is indicated to provide candidates maximal opportunities for such integration.

The didactic curriculum consists of a scheduled series of seminars distributed over a period of a minimum of four years or a minimum of 450 hours. Although the titles and timing of seminars vary among Institutes the curriculum should be organized to include the following subject matter:

a. Psychoanalytic Treatment Situation and Technique

The study of psychoanalysis as a treatment process includes diagnosis, indications for and appropriateness of psychoanalysis, the establishment of the psychoanalytic situation, and the theoretical and technical issues relevant to the development and unfolding of the psychoanalytic process. Subsequent readings and clinical case seminars include the technical considerations presenting in the beginning, middle, and ending phases of the analytic process, and may include the conceptual and technical aspects of combined psychoanalytic and psychopharmacological treatments, and other appropriate, adjunctive therapeutic modalities (e.g. couples, child, or family therapies). Technique seminars should explore the applications of theory to clinical process.

b. Psychoanalytic Theory

The basic concepts of psychoanalysis and the major models of the mind are studied from a historical and critical perspective. This includes the critical exploration of the basic writings of Freud and subsequent major psychoanalytic theorists.

c. Psychopathology

A psychoanalyst must develop a dynamic understanding of a broad range of psychopathology. Seminars on psychopathology typically consider historical and contemporary psychoanalytic theories of the neuroses, character disorders, borderline and narcissistic disorders, affective disorders, psychosomatic disorders, and the psychoses. Clinical examples illustrate the multiplicity of

dynamic, structural, genetic, and developmental factors leading to the formation of the presenting clinical picture.

d. Development

Understanding the ways in which psychic functions and structures originate, evolve, and progress throughout the life cycle is essential to a psychoanalytic understanding of the human mind, and essential to an understanding of the psychoanalytic clinical situation. The curriculum should include study of psychoanalytic theories of psychological development beginning with the parents' experience of the pregnancy and extending through adulthood. Many Institutes integrate clinical material from child analyses with theoretical study.

e. Continuous Case Seminars and Clinical Conferences

Case seminars and other types of clinical conferences are intended to offer opportunities for learning about the deepening of the analytic process and the phases of treatment. They should also offer exposure to a range of differing clinical methods and approaches in special situations.

f. Research Courses

Courses should be designed to cover basic knowledge and developments in empirical research studies of psychoanalytic theory and practice, research studies of psychoanalytic education, and interdisciplinary or applied psychoanalytic studies and methods.

g. Interdisciplinary and Allied Fields of Knowledge

The curriculum should include courses such as cognitive neuroscience, gender and sexuality, combined treatment methods, the writing of case reports and other psychoanalytic work and the ethics of psychoanalytic practice. Electives offer opportunities for candidates to develop and deepen individual interests.

3. Supervision of Adult Psychoanalysis

The supervision of analytic cases should teach the relationships between theory, clinical process, and technique, thereby providing the knowledge and skill to conduct effective psychoanalytic treatment. The "original APsaA model" requires *three* supervised psychoanalytic treatments during training. Supervised psychoanalytic treatments should be conducted with the analysand on the couch at a frequency of at least *four* sessions per week on separate days. The "WAWI model" requires at least *four* cases, seen at a frequency of minimally three sessions weekly (either on the couch or face-to-face) with at least *three* different supervising analysts, for a total of 200 hours of supervision. The Board on Professional Standards recognizes that modifications of the analytic frame, including the frequency of sessions and the use of the couch, can be clinically indicated for periods of time (in the "original APsaA model"), and may differ according to the institute's training model (see above)

In the "original APsaA model," the supervision of clinical work should occur weekly with a supervising analyst to review and discuss the case the candidate is learning to analyze. Candidates should have a separate supervisor for each case and should meet weekly with each one. As the supervised psychoanalytic treatment progresses, and as the candidate progresses in the educational program, the supervisor and candidate

may change the frequency of supervision. In the “WAWI model,” supervision of each case is required to be weekly until graduation and requires that candidates work with at least one SA of an opposite gender. In neither model should the candidate’s training analyst serve as one of the candidate’s supervisors.

Candidates should be encouraged to begin a first case by the middle of their first year of training upon evaluation of the candidate’s readiness to begin supervised psychoanalytic work by the Progression Committee in the original APsaA model, or the Training Committee in the WAWI model, or its functional equivalent. Once a first case is established, capable candidates should be encouraged to pursue additional cases early in their training.

In the “original APsaA model,” candidates are required to have at least three adult *non-psychotic* cases, including patients of different genders; in the “WAWI model,” the decision to conduct psychoanalytic treatment with psychotic states is regarded as a learning experience, jointly discussed and decided between candidate and supervising analyst. In both models, the supervision of cases should occur over a length of time that allows the candidate to develop sufficient knowledge and skill to conduct psychoanalysis independently and competently. Demonstration of this competency is a component of graduation.

Institutes following the “original APsaA model” may allow a candidate to substitute one child or adolescent psychoanalytic case supervised by a Child Supervising Analyst for one of the required adult supervised cases, provided that the candidate also has supervised psychoanalytic treatment experience with cases of different genders. If the candidate is not already trained as a child mental health clinician it is expected that the supervision of this case would continue through termination even if termination occurs beyond graduation. Institutes should be clear with candidates who are not trained as child or adolescent mental health clinicians but who choose to have a child or adolescent analysis as a part of their training, that they should continue in supervision through the termination phase of this treatment. The “WAWI model” does not provide for child (pre-adolescent) psychoanalytic cases to substitute for the training requirement of four separate adult or adolescent cases.

Ongoing assessment and feedback is a crucial dimension of the candidate’s supervision. Each supervisor is expected to periodically assess the progress of the candidate’s ability to conduct psychoanalytic treatment through written reports or evaluations which will be communicated to both the candidate and the Progression Committee, the Training Committee, or its functional equivalent.

4. Psychotherapy Supervision (“WAWI Model” only)

In the “White Institute” model, candidates are required to work in the Institute’s Psychotherapy Service, providing 80 hours of clinical service (either two patients seen on a once-weekly basis or one person seen on a twice-weekly basis), under the supervision of an Institute-appointed Supervisor of Psychotherapy. Psychotherapy supervision (one hour weekly) is provided to the candidate at no fee. This graduation requirement is monitored by the Institute’s Training Committee.

V. Assessment of Adequacy of the Candidate's Education in Adult, Child and Adolescent Psychoanalytic Training

1. Assessment of Candidate Progress

A candidate's progression towards graduation is determined by a thorough assessment of the candidate's evolving competency in understanding and conducting psychoanalysis. Direct feedback to the candidate about their progression based on assessments by instructors and supervisors is an essential component of the educational process.

All Institutes of the Association are responsible for the periodic formal evaluation of a given candidate's progress by their Progression Committee, Training Committee, or its functional equivalent. This should include the candidate's performance in didactic seminars and clinical work, and an assessment of the degree to which clinical work is progressing in concert with their overall educational progression. Assessment of progress should begin at the first opportunity upon admission and continue until graduation.

Assessment Methodology Optimal training outcome requires both facilitating and assessing progression. Institutes may choose one of two pathways for facilitating and assessing the progression of candidates: the traditional pathway and the developmental pathway, although there is much overlap between the two. Candidate evaluations should include written assessments communicated to the candidate, the candidate's supervisors, and the Progression Committee, Training Committee, or its functional equivalent. The Progression Committee, Training Committee, or its functional equivalent approves all requests to begin supervised cases as well as requests for graduation. Minutes should be kept of all such committee meetings. The components of candidate evaluation should include:

- a) Instructor assessments of the candidate's mastery of the course material, class participation and ability to work effectively with classmates, critical thinking, and competence in presenting clinical material. Faculty evaluations of the candidate's performance in seminars should, at a minimum, occur at the end of each seminar.
- b) Written supervisory reports assessing the candidate's progress in conducting clinical work should occur at a minimum on a yearly basis. The content of these reports should be communicated to the candidate.
- c) All Institutes are encouraged to use academic colloquia to assess competency and progression. Developmental Pathway Institutes are required to conduct two colloquia; one during the third year or prior to beginning a third case and a second pre-graduation colloquia. Colloquia should consist of two elements: submission of case write-ups and a formal meeting or series of meetings with several faculty preceptors to discuss the candidate's clinical work and mastery of psychoanalytic theory and technique. The preceptors recommend to the Progression Committee or its functional equivalent any remedial educational measures that should be undertaken.
- d) The "WAWI model" requires that the candidate make at least one case presentation to the Institute community prior to graduation, providing one additional source of

information to the Training Committee about readiness to engage in independent psychoanalytic practice as an Institute graduate.

The Board on Professional Standards and its subcommittees gather information to develop and evaluate guidelines for best practices for progression, including colloquia. It serves as a consultative resource to institutes developing and using progression measurement tools.

VI. Completion of Psychoanalytic Education and Readiness for Graduation

An approved Institute of the American Psychoanalytic Association will graduate a candidate when, in its opinion, the candidate has satisfactorily completed all education requirements of that Institute. Such requirements shall fully adhere to the Standards for Education and Training in Psychoanalysis of the American Psychoanalytic Association. Graduation shall be construed as an indication that the Institute has adequately and carefully evaluated the candidate and considers the candidate competent to conduct psychoanalytic treatment independently. A written statement confirming completion of training shall be furnished to the candidate. The national office of the American Psychoanalytic Association shall also be notified in writing of a candidate's graduation.

1. Graduation Criteria

Graduation depends on the candidate's demonstration of an adequate command of clinical and theoretical psychoanalytic knowledge and the capacity to conduct competent and independent psychoanalytic work. Three adult cases (*four* in the "WAWI model") including cases of different genders are required to demonstrate the candidate's competency to conduct an analysis in the opening, middle, and if possible, termination phase. Candidates who are in combined adult/child psychoanalytic training are required to have only two adult cases of different genders in addition to their child and adolescent cases.

Each institute should ensure that a suitable methodology is used to assess candidate readiness for graduation. Assessment for graduation should include a review of reports by instructors and supervisors, case write-ups, meetings between the candidate and faculty preceptors to discuss the candidate's ability to conduct competent and independent psychoanalytic work.

Institutes that adopt the developmental pathway for Training Analyst appointment (see Section VIII) are required to use a graduation colloquia as described in V1. c above to determine readiness for graduation. The graduation colloquium has two elements: written reports up to 20 pages each of at least two of the candidate's supervised psychoanalytic cases, and a formal meeting or series of meetings between several faculty preceptors to discuss the cases and the candidate's clinical work and mastery of psychoanalytic theory and technique. The Progression Committee or its functional equivalent will use the results of the graduation colloquium in addition to faculty evaluations and supervisory reports to determine a candidate's eligibility for graduation.

The "White Institute model" requires at least one clinical case presentation to the Institute community prior to graduation. This presentation provides relevant information to the Training Committee about the candidate's readiness to be graduated and to engage in independent clinical psychoanalytic practice.

The Board on Professional Standards and its committees will, over time, gather information, evaluate and develop guidelines and best practices for graduation colloquia or their equivalent, and serve as a consultative resource for institutes developing and using graduation colloquia or their equivalent.

2. Institute Self Assessment and Evaluation

The Progression Committee, Training Committee, or its functional equivalent, should periodically conduct a comprehensive critical review of the evaluation methods and standards used to determine completion of training and competence for graduation.

VII. Selection and Development of Institute Faculty

1. Faculty Appointment

The Institute must establish clear policies and procedures for faculty appointment. These should include published eligibility criteria, assessment of suitability, and clear and transparent procedures for the process of appointment. A faculty committee can serve this function. Graduates who are appointed to the Institute faculty can participate in all components of the Institute structure. This includes teaching, research, scholarship, advising and mentoring, committee service, administration, representation of the institute in organizations, and educational outreach.

2. Faculty Development

Institutes should have policies and procedures designed to encourage and develop individual talents of faculty members, especially recently appointed faculty. This may be a system of mentoring, study groups, or post-graduate seminars. Faculty should be encouraged to deepen their own individual interests which may result in publications or development of courses in a chosen area.

3. Termination of Faculty Appointment

Institutes must have clear and transparent policies and procedures for the removal of any individual from faculty appointment. This requires ongoing assessment of competence to perform the duties of the appointment in the following areas: ethical conduct, personal conduct, clinical competence, and cognitive functioning.

VIII. Selection and Development of Training and Supervising Analysts

The American Psychoanalytic Association has a Training and Supervising Analyst system to develop and select graduate analysts who conduct the analyses and supervision of candidates. Prospective Training and Supervising Analysts are graduate analysts who are of good ethical standing, have been certified by the Board on Professional Standards (in the Direct Pathway), have extensive clinical experience, demonstrate a commitment to psychoanalytic education, and who agree to extensive peer review. The William Alanson White Institute utilizes a functionally equivalent system for the consideration of appointment or promotion of SA's and TA's, based on an evaluation of the presentation of clinical material to a committee of TA's elected by members of the Institute's graduate Society. In the "WAWI training model," the recommendation of appointment as William Alanson White Institute SA or ~~as~~ TA is a form of certification acceptable to APsaA.

For SA's and TA's from the time of APsaA approval of the White Institute, and those appointed during the ten years following such approval will be "grandparented" by APsaA, continuing to function in role, with all the rights and privileges of those APsaA members who have been or are "traditionally" certified or certified by the "developmental pathway." WAWI's graduates will continue to seek appointments and promotions through application to its Appointments and Promotions Committee, regarded as integral to the White Institute's training model.

Training Analysts have responsibility for the personal, non-reporting analyses of candidates. Supervising Analysts have responsibility for the supervision of candidates' psychoanalytic training cases. In addition, both Training and Supervising Analysts participate in the development and implementation of the curriculum and other aspects of the educational program. The criteria for appointment as a Training Analyst and/or Supervising Analyst are outlined below.

A. Appointment of Training Analyst, Supervising Analyst, and Training and Supervising Analyst

An analyst may be appointed to function as a Training Analyst only (TA), a Supervising Analyst only (SA), or a Training Analyst and Supervising Analyst (TA/SA) simultaneously, provided that the criteria for appointment for both designations have been met. The "White Institute model" requires at least two years in role as an SA before being eligible to apply for TA appointment.

All Training Analysts and/or Supervising Analysts must meet the following criteria:

1. The analyst is in good ethical standing.
2. The analyst has had five years of post-graduate clinical experience prior to the appointment (in the "original APsaA model"); five years for SA appointment, seven years for TA appointment (in the "WAWI model").
3. The analyst has conducted analyses of different genders.
4. The analyst has had experience with the termination of psychoanalytic treatment.
- 5a. ("Original APsaA model"). The analyst has shown evidence of clinical immersion, conducting at least four analytic treatments at a frequency of at least four times per week over at least five years (3000 hours) or comparable experience as defined by the Board on Professional Standards. All control cases post-graduation, whether supervised or not, will count towards immersion. It is required to have a minimum of two cases which have started independently after graduation and continued for at least three years.
- 5b. William Alanson White Institute Model: SA and TA applicants must present clinical work to a subcommittee of three Appointments & Promotion Committee members, demonstrating abilities to work psychoanalytically, with an awareness of, appreciation for, and skill in working with transference, resistance, and countertransference. Applicants may submit such written materials as they deem relevant to their application and meet with a subcommittee of the Appointments and Promotions Committee. Eligibility for SA application is a minimum of five years post-graduation, and at least two years in role as an SA is required to establish eligibility to be considered for TA application. Eligibility for TA application requires seven

years post-graduation. Appointment requires the recommendation of the full Appointments & Promotions Committee.

For a period of ten years from affiliation of White Institute as an “approved institute,” WAWI’s present TA’s and SA’s are grandparented in role. During this period, WAWI’s graduates will continue to seek appointment and promotion through application to the White Institute’s Appointments and Promotions Committee, and these subsequently appointed, WAWI-certified SA’s and TA’s will continue to function in role, and their certification will be accepted as meeting BOPS certification standards. Grandparented SA’s and TA’s are not required to seek individual membership in APsaA, and their analysands and supervisees will be eligible for full membership in APsaA without prejudice upon graduation from the William Alanson White Institute.

6. Original APsaA Model: The analyst is certified by the Board on Professional Standards (BOPS) in adult psychoanalysis.
7. The analyst is an Active Member in good standing of the American Psychoanalytic Association. For a period of ten years post-affiliation of WAWI, White Institute’s grandparented SA’s and TA’s will not be required to seek individual membership in APsaA in order to continue to function in role.

B. Training Analyst Appointment

There are three pathways for Training Analyst Appointment. The Original APsaA Model offers both a Direct Pathway, a Developmental Pathway, and the “WAWI model” employs the WAWI Pathway. Each has the following additional requirements beyond those listed above.

1. (Original APsaA Model) The Direct Pathway

The analyst applying for appointment by means of the Direct Pathway has satisfied the following criteria in addition to those listed in items 1 through 7 above.

- a. The analyst has shown evidence of clinical immersion, conducting at least four analytic treatments at a frequency of at least four times per week over at least five years (3000 hours) or comparable experience as defined by the Board on Professional Standards. All control cases post-graduation, whether supervised or not, will count towards immersion. It is required to have a minimum of two cases which have started independently after graduation and continued for at least three years.
- b. The analyst has successfully completed a vetting process which must include the review of presentations of detailed past and current clinical work to a Training Analyst Selection Committee or its equivalent at the institute seeking the appointment. The institute’s procedures for this vetting process must have been approved by the BOPS of APsaA.
- c. Once these criteria have been met, the institute sends its written application to the Committee on Institutes (COI) or the Committee on

New Training Facilities (CNTF) of the Board on Professional Standards (BOPS) of the American Psychoanalytic Association for administrative review.

- d. With successful administrative review, the application is brought to the BOPS for formal approval of the appointment.
- e. Non-appointed applicants are provided with feedback about their application and are free to reapply, without prejudice, at any time.
- f. Institutes should have a clearly written, transparent appeals process for training analyst appointment.

2. (Original APsaA Model) The Developmental Pathway

The analyst applying for appointment by means of the Developmental Pathway has satisfied the following criteria in addition to those listed in items 1 through 7 above (See section d below re: #6).

- a. The analyst seeking appointment by means of the Developmental Pathway is a graduate of an institute using the Developmental Pathway. Such institutes are required to evaluate candidate progression and graduation readiness through a process which includes two colloquia described in Section VI of this document.
- b. The analyst has shown evidence of clinical immersion, conducting at least four analytic treatments at a frequency of at least four times per week over at least five years (3000 hours) or comparable experience as defined by the Board on Professional Standards. All control cases post-graduation, whether supervised or not, will count towards immersion. It is required to have a minimum of two cases which have started independently after graduation and continued for at least three years.
- c. Prior to the application, the analyst will have at least one academic year experience in the Institute's Training Analyst development program. This developmental experience should include attendance at progression and graduation meetings of the Institute, and participation in a Training Analyst Study Group of the institute. The Training Analyst Development Committee will determine the analyst's readiness to assume the function of analyzing psychoanalytic candidates through a process that reviews the quality of past and current clinical psychoanalytic work.
- d. Applicants for TA and/or SA Appointment from a Developmental Pathway Institute have the option of applying for certification by either direct application to the Certification Examination Committee (CEC), of the Board on Professional Standards, or by application for the simultaneous evaluation for certification and TA/SA appointment through a Joint Collaborative Committee consisting of both Institute and BOPS representatives.
 - (1) Applicants who are certified directly by the CEC/BOPS will not require a Joint Collaborative Committee. These applicants will be evaluated for readiness to become a TA and/or SA by the

Training Analyst Development Committee of the Institute following the Developmental Model. This Committee will meet with the applicant for at least six interview sessions over a period of six months during which the Committee will evaluate the applicant's clinical work through case write-ups and interviews. If the Committee decides to recommend this Applicant for TA/SA Appointment, it sends its recommendation and application directly to the Committee on Institutes (COI) or the Committee on New Training Facilities (CNTF) as applicable for administrative review and ultimately, the BOPS for approval.

- (2) Applicants from a Developmental Pathway Institute who choose to apply for certification and TA/SA Appointment simultaneously, will be evaluated by a Joint Collaborative Committee of Institute and BOPS Representatives. This Joint Collaborative Committee will be composed of at least two participants from the Institute's Training Analyst Development Committee and two representatives from the CEC/BOPS, selected from a list compiled by the Chair of the CEC. Both the Institute and applicant will have the right of refusal. One member from the Institute following the Developmental Model will serve as Coordinator of this Joint Collaborative Committee.
 - (a) The Joint Collaborative Committee will be formed when the applicant has been deemed suitable and ready for TA/SA Appointment by the Institute's TA/SA Development Committee. The Joint Collaborative Committee will plan to meet with the applicant as outlined above in d (1).
 - (b) The applicant will submit two case write-ups up to 20 pages each,, of different genders, to members of the Joint Collaborative Committee and to the members of the Certification Examination Committee (CEC). The CEC will send its comments to the two CEC-BOPS representatives identifying areas of both strength and weakness in the case write-ups pertaining to the Core Competencies as defined by the CEC. These comments will be shared with the entire Joint Collaborative Committee and serve to focus interviews and to facilitate the assessment of independent psychoanalytic thinking.
 - (c) The CEC-BOPS representatives will be on site for a minimum of one of the six interviews. Participation in the remaining interviews in person or by teleconference is at the discretion of the Joint Collaborative Committee.
 - (d) After at least six interviews with the applicant, the Joint Collaborative Committee will vote by secret ballot to either recommend or to defer the recommendation of certification and TA/SA appointment. If two or more of the Joint Collaborative Committee Members vote to defer, the Applicant will be continued and the Committee will give appropriate feedback to the applicant regarding areas of knowledge which need to be strengthened. If no more than

one member of the Joint Collaborative Committee vote to defer, the applicant will be recommended for the simultaneous designation of certified in psychoanalysis and TA/SA Appointment. The Coordinator of the Joint Committee will send its written report to the CEC and the COI or CNTF as applicable for administrative review.

- (e) After successful administrative review, the CEC and the COI or CNTF will send the applicant names to the BOPS for simultaneous approval of certification and TA/SA appointment.
 - (f) The Coordinator of the Joint Collaborative Committee will send the case write-ups to the Certification Advisory, Research and Development Committee (CARD). These will be integrated into the ongoing study and evaluation of the certification process.
 - (g) Institutes should have a clearly written, transparent appeals process for training analyst applicants who are not confirmed.
 - (h) Candidates and recent graduates of an institute currently in the process of adopting the Developmental Pathway may be grand parented into the Developmental Pathway.
 - (i) Training Analysts appointed through the Developmental Pathway are required to attend a Training Analyst Study Group for a period of six months every five years as a condition for continuing their appointment as a training analyst.
- e. Non-appointed applicants are provided with feedback about their application and are free to reapply, without prejudice, at any time.

Institutes using the Developmental Pathway will work with the BOPS and its committees, over time, to develop mechanisms, guidelines and best practices for this pathway.

3. The William Alanson White Institute Pathway

Appointment to the roles of SA and TA is under the purview of the Institute's Appointments and Promotions Committee, members of which are all elected TA's. The Committee annually invites eligible graduates to apply for consideration, including with the application clinical material that reflects directly on their abilities to conduct psychoanalytic supervision and/or treatment. A subcommittee meets with each applicant to review in detail the applicant's clinical and/or supervisory work, and to present recommendations for discussion to the nine-member Committee, which recommends appointment on the basis of a majority vote. Non-appointed applicants are provided with feedback about their application and are free to reapply, without prejudice, at any time.

4. Institute Waiver of the Requirement of an Analysis with a Training Analyst

Institutes may request a waiver of the requirement for a training analysis should they have an applicant who is already engaged in an ongoing analysis of significant duration with an analyst who is not a Training Analyst provided that the analyst meets the following criteria for suitability and eligibility. Institutes are not required to adopt this policy.

To be eligible for consideration of this waiver the analyst must meet the following criteria:

1. Be in good ethical standing.
2. Five years post-graduation from an institute of the American Psychoanalytic Association (APsaA) or the International Psychoanalytical Association (IPA).
3. Experience with 4 non-psychotic (psychotic cases acceptable in “WAWI model”) post graduation (non training) psychoanalytic cases conducted at a frequency of at least 4 times per week (at least 3 times per week in “WAWI model”)
4. The WAWI Model permits its Training Committee to waive the requirement that the training analysis be conducted with an approved TA for good cause shown.

The institute must have an explicit assessment procedure for determining the suitability and eligibility of the analyst for performing this function. This procedure should be submitted to and approved by the COI prior to requesting a waiver. Institutes should avoid requesting multiple waivers for the same analyst.

The Board on Professional Standards may, at its discretion, allow flexibility in its evaluation of these requirements if so recommended by the Committee on Institutes or the Committee on New Training Facilities. Institutes using waivers should work with the BOPS and its committees over time in its effort to develop guidelines and best practices for this mechanism.

Waivers are granted on a case-by-case basis with the understanding that the waiver does not constitute a Training Analyst appointment. All waiver requests are reviewed by the appropriate committee of the Board on Professional Standards, either the Committee on Institutes, or the Committee on New Training Facilities to ensure that policies and procedures of the standards were followed during the waiver evaluation process. These waivers are granted upon the approval of the Board on Professional Standards.

5a. Supervising Analyst Appointment (“Original APsaA model”)

In addition to the criteria listed above in Section VIII A, appointment as a Supervising Analyst only, or as Training and Supervising Analyst requires that:

- a. The analyst has completed the vetting process for suitability as a Supervising Analyst by a Supervising Analyst Selection

Committee or its equivalent. This committee will have assessed the analyst's pedagogical knowledge and skills relevant to supervision, including the ability to clearly and effectively conceptualize and articulate theory and technique about analytic process, and establish and maintain an appropriate supervisory relationship

- b. The assessment of the analyst should include an evaluation of the analyst's immersion and pedagogic competence in the conduct of supervision for psychodynamic psychotherapy, including current and past supervisions, seminars, and lectures.
- c. If all other criteria have been met, the Institute will apply to the appropriate committee of the Board on Professional Standards, either the Committee on Institutes or the Committee on New Training Facilities, or, in the case of child supervisor appointments, the Committee on Child and Adolescent Analysis.
- d. Following successful administrative review the Board on Professional Standards will authorize the supervising analyst appointment.
- e. All Supervising Analysts are expected to participate in Institute and faculty activities, including the education and evaluation of candidates.
- f. Supervising Analysts in institutes using the Developmental Pathway should have participated in a Supervising Psychoanalyst Study Group during the evaluation process and are expected to continue their participation in the Study Group for a period of time determined by the institute. They are required to participate in a Supervising Analyst Study Group for a period of six months every five years as a condition for continuing their appointment as Supervising Analyst.

5b. Supervising Analyst Appointment ("WAWI model")

Eligibility for appointment as an SA is a minimum of five years post-graduation. Appointment to the role of SA is under the purview of the Institute's Appointments and Promotions Committee, members of which are all TA's. Applicants are free to submit all materials they consider relevant to appointment as an SA. A subcommittee meets with each applicant and presents recommendations for discussion to the full Committee, which decides whether to recommend appointment to the Institute's Council of Fellows. Non-appointed applicants are provided with feedback about their application and are free to reapply, without prejudice, at any time. In the "WAWI model," present SA's and TA's are "grandparented" by APsaA so they can continue to function in role in WAWI's psychoanalytic training program. WAWI's graduates will continue to be eligible for evaluation through the existing "Appointments & Promotions Committee" process, and if recommended for appointment by WAWI's process, will be recognized as TA's and SA's by APsaA, and may function as WAWI-certified SA's and TA's.

6. Standards for Continued Competence of Training and Supervising Analysts

Every appointment of a Training Analyst and a Supervising Analyst is contingent upon the individual's continued demonstration of ethical, professional, clinical and cognitive competence. Each Institute must have policies and procedures to evaluate such competence, and committees and subcommittees to perform this evaluative function. This requirement includes:

- 1) A clear and transparent procedure for TA/SA appointment and reappointment
- 2) A clear and transparent procedure for revoking TA/SA appointment
- 3) An Analyst Assistance Committee which has clear and transparent Procedures for evaluating cognitive competence and personal conduct
- 4) An Ethics Committee which has clear and transparent policies to process and evaluate ethics inquiries and complaints
- 5) A clear and transparent appeals process available to TAs/SAs who do not agree with the conclusions of any one of these committees

IX. Education in Child and Adolescent Psychoanalysis

Two pathways for child analytic training are offered: Combined Adult, Child and Adolescent Training; and Child Focused Training

1. Combined Education in Adult, Child and Adolescent Psychoanalysis

A. Selection for Education and Clinical Training in Child and Adolescent Psychoanalysis

1. An applicant is eligible for admission concurrent to or following acceptance as an active candidate at an accredited Institute of the American Psychoanalytic Association.
2. Eligibility for education and clinical training in child and adolescent psychoanalysis is based in part on prior clinical mental health experience with children and adolescents. The candidate should have experience with normal children and adolescents, pathological conditions in children and adolescents, diagnosis and the treatment of children and adolescents with psychoanalytically oriented psychotherapy. Institutes may need to assist their applicants in gaining these experiences which, in appropriate situations, may be attained during candidacy in child analysis and before graduation.
3. To assess suitability and eligibility for training in child and adolescent psychoanalysis, interviews conducted by child and adolescent faculty are required.

B. Components of Education and Clinical Training in Child and Adolescent Psychoanalysis

Education and clinical training in child and adolescent analysis, consistent with the tripartite model, includes an analysis with a training analyst, a didactic curriculum, and supervised clinical work. Institutes have flexibility in the construction of their educational program within the following core requirements:

1. Non-reporting Training Analysis

If child training begins subsequent to the termination of the candidate's training analysis it is strongly recommended that the candidate resume a non reporting training analysis during their supervised clinical work with children.

2. Curriculum for Child and Adolescent Psychoanalysis

Institutes are encouraged to integrate the child, adolescent and adult psychoanalytic curricula to the fullest extent possible. The curriculum should include the following subject matters:

a. Treatment Situation and Technique

These seminars should include the study of the various phases of the child analytic process, including the diagnostic issues related to case selection and the theoretical and technical issues to be considered upon beginning psychoanalysis with a child or adolescent. Topics that are specific to child and adolescent treatment such as theory and technique related to working with parents are also essential for study.

b. Psychoanalytic Theory

These seminars should include the study of basic psychoanalytic theories relevant to child development including current developmental theories and research.

c. Psychopathology

These seminars should include study of psychoanalytic perspectives on the manifestations of psychopathology in children and adolescents.

d. Development

These seminars should include the study of child and adolescent development in greater depth than usually offered in seminars in development in the adult psychoanalytic curriculum. Direct observation of infants, children, and adolescents is an important enrichment of the study of development.

e. Research

These seminars should include basic knowledge and current research in infant and child development and the treatment of children and adolescents.

f. Continuous Case Seminars and Clinical Conferences

Candidates should attend continuous case seminars in child and adolescent analysis for the duration of clinical training in child and adolescent psychoanalysis.

3. Supervised Clinical Experience

- a. Child and adolescent patients in supervised psychoanalysis should be seen at a recommended frequency of at least four times per week on separate days through termination barring exceptional circumstances necessitating temporary alteration of this frame.
- b. All standards for supervised casework for adult psychoanalytic training apply to adult cases of candidates in combined adult, child and adolescent training with the exception of the reduced required minimum number of adult cases from three to two of different genders. Candidates in combined adult, child and adolescent programs are required to analyze at least three child and adolescent patients, including different genders and preferably a pre-school child in addition to a latency child and an adolescent. However, an acceptable alternative is that the three cases include at least one child in latency and one adolescent. Each of the three required cases should demonstrate a period of significant analytic work and process beyond the opening phase. At least one of the three cases should be analyzed through termination if possible.
- c. The three cases of candidates in child and adolescent psychoanalytic training should be supervised by three different child and adolescent supervising analysts, if possible, and no fewer than two.
- d. The candidate should have a minimum of 50 hours of supervision for each case. Supervision should occur on a weekly basis until the supervisor determines that the candidate can work more autonomously with supervision at less frequent intervals. However, those candidates who are not child and adolescent mental health clinicians should continue in regular supervision through termination, even if beyond graduation, for each case involving a developmental stage not previously supervised.

C. Graduation in Child and Adolescent Psychoanalysis

The Child and Adolescent Committee of an Institute in collaboration with its Education Committee or its functional equivalent must participate in the evaluation of the candidate's progression and readiness for graduation. Graduation from a combined program of child, adolescent and adult psychoanalysis requires completion of all educational requirements for graduation in adult psychoanalysis, and all educational requirements for graduation in child and adolescent analysis. At the discretion of the institute, a candidate in a combined program may graduate in either Adult Psychoanalysis or Child and Adolescent Psychoanalysis prior to the completion of the requirements of the other component.

2. Education in Child and Adolescent Analysis – Child Focused Training

A. Introduction

Child focused training can be developed by Institutes that already offer combined adult, child and adolescent analytic training. The requirements for training these candidates must meet the minimum standards of the American Psychoanalytic Association for child and adolescent training in regards to candidate suitability, admissions, case requirements, supervision, didactic work and a training analysis. To offer this option, the Institute must present their plan to train Child and Adolescent Analysts who are not concurrently or previously trained in adult psychoanalysis to the Committee on Child and Adolescent Analysis (COCAA). Guidelines for submission of a proposal for a child focused program may be obtained from COCAA.

B. Selection for training in Child and Adolescent Psychoanalysis

Applicants for child focused psychoanalytic training must first meet the criteria for admission to the Institute. Eligibility should be based in part on prior experience with children, adolescents, and families. The applicant must have experience with normal children and adolescents and with the diagnosis and treatment of pathological conditions in this population. Institutes can assist applicants with weaker backgrounds to gain these experiences. Interviews conducted by child and adolescent faculty determine general suitability for work with children.

C. Components of Education and Clinical Training in Child Focused Child and Adolescent Psychoanalysis

1. Non-reporting Training Analysis

The Candidate must have a non-reporting training analysis. This analysis should continue during the candidate's supervised work with children.

2. Curriculum for Child Focused Child and Adolescent Psychoanalysis

Candidates in child focused programs are expected to obtain adequate exposure to general psychoanalytic theory and technique. Whenever possible, institutes are encouraged to integrate the child and adolescent and the adult curricula to the fullest extent possible. The curriculum should include the following child and adolescent focused courses:

- 1) Treatment Situation and Technique
- 2) Psychoanalytic Theory
- 3) Psychopathology
- 4) Development
- 5) Research
- 6) Clinical Case Seminars and Clinical Conferences

3. Supervised Clinical Experience

The standards for supervision are the same standards as those described in the child and adolescent component of the combined program. A minimum of 200 hours of supervision is required.

D. Graduation in Child and Adolescent Analysis

Once it is determined that a candidate in child and adolescent psychoanalytic training qualifies for graduation, the Child and Adolescent Committee of the Institute should recommend to its Progression Committee or its functional equivalent that the candidate is ready for graduation from the child and adolescent psychoanalytic program.

Graduation requires completion of all the educational requirements for child and adolescent psychoanalytic training. Ultimately, the decision to graduate a candidate resides with the Progression Committee or its functional equivalent. Most important is the candidate's demonstrated capacity to conduct the psychoanalysis of children and adolescents competently and independently.

3. Child and Adolescent Supervising Analyst

Child and Adolescent Supervising Analysts are the supervisors for the child and adolescent cases of candidates in Child and Adolescent Analysis. Certified Child Analysts with a demonstrated commitment to education, extensive clinical experience and skill, who are in good ethical standing, and whose work has been subjected to extensive peer review, may be appointed as a Child Supervising Analyst.

A. Requirements for Appointment to Child/Adolescent Supervising Analyst

1. The applicant must be five years post-graduation in child/adolescent psychoanalysis.
2. The applicant must be certified in child and adolescent psychoanalysis by the Board on Professional Standards.
3. The applicant must have experience with the analysis of children and adolescents of different genders.
4. The applicant must have had experience with the termination of child and adolescent psychoanalytic cases.
5. The applicant must show evidence of clinical immersion in the practice of child psychoanalysis carried out at a minimum frequency of four times a week on separate days, during the five years preceding appointment as Associate Child Supervising Analyst. Consideration is made of the applicant's total immersion in adult, child and adolescent cases during the 5 year period.
6. The applicant must have had both teaching and administrative experience as a member of the Institute's faculty, preferably in the child curriculum.
7. The applicant must be an Active Member in good standing of the American Psychoanalytic Association.

B. Appointment of Child and Adolescent Supervising Analysts

The appointment of Child and Adolescent Supervisors follows the same procedure as that of Adult Supervising Analysts. (See VIII. 4.) Institutes using the Developmental Pathway for Adult Training Analyst Appointment may choose either to (1) have applicants for Child Supervising Analyst apply for certification and Child Supervising Analyst appointment simultaneously, following the procedures outlined in VIII. B.2 or (2) use the

Direct Pathway to certification and Child Supervisor appointment, following the procedures outlined in VIII. B. 1.

The Board on Professional Standards is responsible for establishing and maintaining the standards for appointment of a Child Supervising Analyst. Institutes are responsible for establishing and carrying out procedures for a thorough peer review of the applicant and for making recommendation for appointment to the Committee on Child and Adolescent Analysis of the Board on Professional Standards. The Committee on Child and Adolescent Analysis in collaboration with the Chairman and Secretary of the Board on Professional Standards is responsible for reviewing the procedures and findings of the member Institute and for recommending appointment of a Child Supervisory Analyst to the Board on Professional Standards

C. Associate Child Supervising Analyst

The process for appointment as a Child Supervising Analyst may begin with an initial appointment as an Associate Supervising Child Analyst by the applicant's Institute. An Associate Child Supervising Analyst must be certified in child and adolescent analysis and should demonstrate evidence that they will fulfill the requirements for appointment as child supervising analyst outlined below. Appointment as an Associate Child Supervising Analyst is a five year appointment during which the Associate Child Supervisor may supervise child analytic cases that are not a candidate's first child case. This supervisory process must be supervised by a Supervising Child Analyst at a minimum frequency of once per month.

Appointment as an Associate Supervising Child Analyst should be viewed as a step toward preparing a child analyst for potential appointment as a Child Supervising Analyst. As part of this appointment process the Institute is expected to have evaluated the individual's ethical standards and teaching and supervision experience. There is no requirement for immersion for appointment as an Associate Supervising Child Analyst. Appointment as an Associate Child Supervising Analyst can occur any time after graduation from a child and adolescent psychoanalytic program once certification in child and adolescent psychoanalysis is achieved, without limit to the time beyond graduation. The appointment does not require review by The Board on Professional Standards but the appointment of an Associate Child Supervising Analyst by an Institute must be communicated to the Committee on Child and Adolescent Analysis at the time of the appointment. The five-year period for appointment is designed to enable the Associate Supervisor to work toward full supervisory status and to develop or maintain immersion in child and adult analytic work. Additional time for appointment as Associate Child Supervising Analyst beyond five years may be considered based on circumstances.