



Österreichischer Bundesverband für Psychotherapie

Mitglied des Europäischen Verbandes für Psychotherapie – EAP
Member of the World Council for Psychotherapy - WCP

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**Guideline for the Follow-Up Training in
Infant, Child and Youth Therapy
Outline
As from March 2006**

Preamble

(Translated from the German by Luna Gertrud Steiner)

Declaration of Principles on Specialization and Disorder Specificity in
Psychotherapy

On principle, the ÖBVP supports the acquisition and the consolidation of stage and disorder specific treatment skills, within the framework of a full vocational psychotherapy training, or as a follow-up on such trainings. Apparently, there are areas of treatment which lie beyond the scope of those core competences of treating mental and psychosomatic illnesses, and which, albeit to varying degrees, require additional and specific abilities, to be acquired in practical experience in this field, or/and by further training, or in advanced vocational follow-up programs. The psychotherapeutic work with addicts, or with individuals suffering from serious mental diseases, with transsexuals, with the aged, or with infants, children and juveniles, to name a few examples, belongs to these areas of expertise, the focuses of which will each be set according to the clinical pictures, or to the age and target groups involved.

Taking such a position calls for a systematic approach which is closely and solely oriented towards the thematical and methodological requirements of the psychotherapeutic practice, and for one that clearly names and explicates the need for specific cognitions surpassing the rather vague concept of an experience which increases by ongoing practice anyway.

The reason why we emphasize this, is that we currently witness the emergence of a host of new “specialized psychotherapists” in the psychotherapeutic training landscape (calling themselves “trauma psychotherapist”, “psychosis psychotherapist”, “addiction psychotherapist”), a trend having come up under the guise of quality assurance and under the pressure of institutions and facilities such as the health insurance carriers. The increase of (University) training programs, diplomas and (master) degrees, offering specialization in psychotherapy relevant or psychotherapy related domains (e.g. a MSc in “bereavement support work”), has to be viewed within this context and examined critically. Such and similar work focuses have to be integral components of psychotherapeutic work, and they must be imparted within the framework of psychotherapeutic core competence training, by an in-depth involvement in such specific topics. We clearly oppose the above-mentioned tendencies for their not being sufficiently grounded and for merely orienting themselves towards methodological or current thematic necessities, and for fostering the propensity to abandon complex theoretical foundations for the

acquisition of sheer “techniques” only. We furthermore, hold the view that, principally, psychotherapists, after their conclusion of a full psychotherapy training, are in possession of a very high standard of core competences, which enable them to choose the amount and the focus of complementary specific skills independently and responsibly, in answer to the needs which arise in their daily psychotherapeutic practice.

The development toward the specialized psychotherapist, which is comparable to the system of medical specialists and thus entails a restriction, namely of having to focus on and work in one task area throughout one’s whole professional life, is not worth supporting. We hold that the most essential quality of the psychotherapist is the manifold and multi-layered expansion and the continual growth of her range of experience. The personal development of a psychotherapist and the continual broadening of her system of reference enhances the quality of her deliberations and of her psychotherapeutic work.

When she restricts herself and her activities to one focus, she runs a higher risk of suffering burn outs, due to the monotony of problems and issues. If a therapist works with one target group exclusively for a number of years, it is advisable to change or to complement her work by new work focuses. This holds particularly true if a therapist runs her own practice, as there are no possibilities of relieving herself through team cooperation.

The above mentioned aspects form the background of the ÖBVP’s clear position against any development that implies restriction or exclusive commitment to one area of psychotherapeutic expertise. By offering a follow-up training program in Infant, Child and Youth Therapy, we do not at all mean to support the trend which we are, for instance, observing in Germany, that is the emergence of subjects areas which are isolated from the basic psychotherapeutic competence, nor do we foster the idea of an independent, stand-alone vocational training program in Infant, Child and Youth therapy.

The special features in the stage specific developmental psychodynamics of infants, children and juveniles, and the specific techniques and methods involved in the work with this target group, do however demand and justify a separate leg of advanced trainings and follow-up trainings, which are clearly distinguishable from other fields of activity and are subject to particular regulations.

Entry Requirements for the Vocational Follow-Up Training Program in Infant, Child and Youth Therapy and for Carrying the Title “Infant, Child and Youth Therapist”

MINIMAL STANDARDS OF THE CURRICULUM OF THE VOCATIONAL FOLLOW-UP TRAINING IN INFANT, CHILD AND YOUTH THERAPY

Premises:

It is the expert group’s objective to set up a curriculum which describes the minimum standard of entry requirements in a language common to all psychotherapeutic disciplines: Basing themselves on the *Advanced Training and Vocational Follow-Up Training Guideline, as it has been put forward by the Austrian Ministry of Health and Women’s Issues (BMFG)*, the group will describe the contents of at least 200 training units and rank them. It is the particular training institution itself who will flesh out this curriculum by their method-specific subjects.

Contents of the Curriculum

Description of Entry Requirements

Advanced Theory minimum: 70 units

Ethical and legal foundations

Developmental Psychology/-Pathology

Diagnoses and Indications

Technical literature reading

Advanced Methodological Training minimum: 70 units

Child specific, nonverbal methods (method related)

Setting issues (individual or group therapy)

Working with parents and/or social surround

Shaping the psychotherapeutic relationship (method-specific ways)

Formal termination including certification (of having successfully concluded the specific method training program)

Compulsory optional subject, i. e. at least 25 training units in approved methods other than one's "home"-method; the accurate number of units will be laid down in each curriculum)

Practical Training minimum: 60 units

The practical training comprises method-guided application as well as the reflection on the psychotherapeutic doings with infants, children and adolescents

including:

Supervision minimum: 40 units

Case presentation minimum: 40 units

the number of cases to be presented is defined by the institution which offers the vocational follow-up training and it must be put down in writing in the curriculum.

Self exploration and personal growth minimum 20 units

Psychotherapeutic Practice

Description of Contents

Aptitude Requirements

Personal aptitude, motivation, experience with children and adolescents in the educational/ psychosocial field, willingness to play, role flexibility, empathic understanding of the phenomenal cosmos of children and young people.

ADVANCED THEORY

Ethical and legal fundamentals

Special needs of protection and dependence in the child; professional confidentiality and discretion; consent/voluntariness, protection against any kind of abuse, be it misuse of power, sexual abuse or others, basic rights of a child, child custody and alimony, family law, divorce law, youth welfare code, etc.; passing on information to third parties

Developmental Psychology and Theory (Method-Specific rather than Interdisciplinary)

Knowledge of developmental concepts and theories

Age-specific developmental tasks and non-mastery of those

Update in new concepts of developmental psychology (e.g. findings of attachment and infant research, interaction theories etc.)

Specific Issues

The handicapped child
The chronically ill child
The retarded child

Developmental Disorders and Pathologies

Age-specific clinical pictures
Psychosomatic diseases
Psychiatric diseases

Diagnoses and Indications

Initial Stage

Clarification Stage

Specific history taking and intake interview

Collaboration with representatives of related professions during the clarification stage

Basic knowledge of the diagnostic possibilities which related professions hold

Observation of play

Observation of behaviour and interaction

Diagnostic procedures in the psychotherapeutic process

The three dimensions of the "Guideline of Psychotherapeutic Diagnostics", i.e.:

Symptomatology in Relation to Personality Aspects

Diagnosing Relationships

Critical Potential

Indication of Psychotherapy

Differentiating and distinguishing psychotherapeutic treatment from crisis intervention, counseling and educational measures

Technical Literature Reading

Fundamentals, thought history and philosophy; history and evolution of Infant, Child and Youth Therapy

Refining one's methodological tools

Metatheoretical foundation

Specific areas

ADVANCED METHODOLOGICAL TRAINING

Child-specific media

Infantine ways of expression

Creative media, play, movement, verbal and nonverbal approaches

Interpretation and analysis within the overall context

Shaping the Relationship

Patterns of relationship and interaction in the psychotherapeutic process; the effective factors of the process, the dynamics of the initial stage, of therapy breakup and termination; taking into account role of the social environment within relationship dynamics; psychotherapy within a coercive context; specific issues of protecting the confidence based psychotherapeutic relationship; social control, setting boundaries, unambiguity of roles;

Setting Issues

Age and problem specific setting issues

Working with Parents and Social Surround

Familiarity with relevant psychosocial institutions and sensitization to the child's social surround

Social, cultural and religious background

Socioeconomic conditions

Work with parents/reference system

Obligatory Optional Subject

Making oneself acquainted with alternative methods

How to discern when other methods are a "must"

Specific Seminars

(depend on the competence of the suppliers)

PRACTICE

Supervision

Case presentation

Self exploration and personal growth

Psychotherapeutic practice

Supervision, case presentation and personal growth seminars have to be attended; they should be led by psychotherapists with specific experience and knowledge in the particular field. The choice of suitable psychotherapists is up to the suppliers of the overall follow-up training program.

TERMINATION

The certification is method-specific and carried out in the pertaining training institution.

Crediting Key/Credit Transfer

The crediting of further training and follow-up training components from other registered methods has to be approved by the institution which provides the certification program.

Transitional Regulations for Suppliers of the Follow-Up Training Program in Infant, Child and Youth Therapy

Follow-up training courses currently underway are not subject to this guideline. New courses will have to be adjusted accordingly, that is no later than in the semester after the resolution has been passed.

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