### ASSOCIATIONS AND COLLABORATIONS

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### **Psychological therapy organisations**

### Introduction

#### **Brian Martindale**

This article informs readers of four organisations that have undergone substantial development in recent years. All four aim to be European or even wider vehicles for the exchange of clinical knowledge and expertise in particular psychological therapies relevant to psychiatry and allied professions.

Psychodynamic, cognitive—behavioural and systemic models are the three core theoretical modalities on which much practice is based in public services, although technical applications of these take many creative forms. Three of the European organisations described below bring the particular practitioners of these modalities from different countries together and the fourth organisation focuses more on a specific clinical field — psychosis — where psychological therapies still tend to be somewhat neglected.

Training in psychotherapy for psychiatrists as well as the regulation of the practice of psychotherapy varies considerably, even in Europe, from one country to another and readers may find considerable food for thought and debate in reading the 2004 report on psychotherapy from the Section of Psychiatry of the European Union of Medical Specialists at http://www.uemspsychiatry.org/section/sectionReports.htm.

### The European Federation for Psychoanalytic Psychotherapy

### Siv Boalt Boëthius, Chair, EFPP

The European Federation for Psychoanalytic Psychotherapy (EFPP) was inaugurated in 1991. It was founded by the British psychoanalyst and psychiatrist Brian Martindale in collaboration with some colleagues from different countries in Europe. Its overall aim is to contribute to the mental health of people living in Europe and to facilitate communication between psychoanalytic psychotherapists in Europe. The EFPP is concerned with extending the availability of psychoanalytic psychotherapy, and is especially concerned with psychoanalytic psychotherapy within mental and physical health and related public services.

The EFPP promotes networks of psychoanalytic psychotherapists through annual conferences, publication of the EFPP book series, support of training programmes and research, and its website. The EFPP supports its member networks in their discussions and the setting of national training standards for psychoanalytic psychotherapists. The EFPP's training standards are agreed upon as the benchmark

for national networks and the general principle is that the EFPP is an inclusive organisation.

Membership of the EFPP is open to all European countries; at present 26 are members. The EFPP consists of three sections, which work with psychoanalytic psychotherapy for adults, children and adolescents, and groups. A fourth section, for psychoanalytic couple and family psychotherapy, is being developed. The membership of the EFPP is built on national networks. Each country with full membership can have at most two delegates on each of the three sections. Delegates are appointed by the organisation or network of organisations from the member countries.

The executive committee consists of three delegates from each section. Members of the executive serve a maximum of two 4-year periods. The executive seeks to keep up to date with the development of psychotherapeutic work in the member countries, especially in relation to conditions for work with patients, facilities for training in psychoanalytic psychotherapy, and research. A major task has been to agree standards of training that are desirable and functional.

Another main area of work is the EFPP conferences. Each section arranges its own conferences in turn: the group section's conference was held in Lisbon in 2004, the adult section's conference in Dresden in 2005, and the child and adolescent section's conference in Berlin in 2006. A three-section conference will be held in Copenhagen in 2007. Besides the section conferences there are the Francophone conferences, the latest of which took place in 2006 in Ibiza in Spain. Until 2005, special conferences were also arranged for Central and Eastern Europe, but these countries have now joined the regular EFPP conferences.

Special features of the EFPP conferences are the discussion groups after each plenary session and a number of ongoing workshops on, for example, infant observations, trauma and state violence, research, training, psychoanalytic couple and family psychotherapy and peer-review sessions in collaboration with the editorial board of the *International Journal of Psychoanalysis*.

An area where much remains to be done is in relation to clinically based research, where the clinicians themselves can contribute in a more integrated way by systematic documentation of their own clinical work. This type of research is often done in cooperation with a university and has to have the support of the clinical centre.

How to develop the publication of the EFPP book series and other publications is another area of concern, as we need good publications.

We are also working with different types of summer school, focusing on, for instance, supervision of psychotherapeutic work and other ways of supporting such work in Eastern and Central European countries.

For further information see http://www.efpp.org.

### The European Family Therapy Association

#### Arlene Vetere, President, EFTA

The European Family Therapy Association (EFTA) was inaugurated in 2001 in Budapest. Its statutes set out its seven aims, two of which are:

- O to link and coordinate European-wide national family therapy organisations, family therapy training institutes and practitioners in the field of family therapy and systemic practice, and family mediation
- O to spread information about family therapy and systemic approaches throughout Europe to individuals, institutions and organisations concerned with the health and development of families and human systems.

I have highlighted these two of the seven because they capture the essence of our mission – to promote systemic thinking and practice through communication, liaison and cooperation, both within and outwith our organisation. Such a mission carries with it special responsibilities for overseeing and monitoring standards of practice, for training, qualified practice and supervision within our own field at a European level, and assisting other mental health disciplines that include systemic training as part of their own professional training and practice.

The EFTA was originally founded in the early 1990s by a group of committed trainers who wished to promote systemic training and practice across Europe. It was their vision, under the then presidency of Mony Elkaim, to invite the national family therapy associations to meet and discuss how they might all work in cooperation. It posed an interesting systemic problem: how to develop a structure that would support the autonomy of all the interest groups that operate at different levels of systemic influence and responsibility, while retaining the coherence and cooperative potential of the whole.

The EFTA is a vibrant and complex organisation. Our new statutes were designed to support our organisational structure. We host three autonomous 'chambers', each represented by an autonomous board:

- O the Chamber of National Family Therapy Organisations (which has 25 participating countries)
- O the Chamber of Family Therapy Training Institutes (120 training institutes)
- O the Chamber of Individual Practitioners and Trainers (1500 members)

Each board comes together to form the General Board of the EFTA, which is chaired by the President. The Coordinating Body comprises the President, the three board chairpersons, the General Secretary and the General Treasurer; it oversees and supports the cooperative activity of the three chambers. Each chamber hosts separate activities for its members and participates in EFTA-wide organisational activities. The EFTA has always mounted an international conference every 3 years. Our last conference, held in Berlin, attracted over 3500 participants.

Nearly all EFTA members are dual-trained; the disciplines of clinical psychology and psychiatry are the most commonly represented. In practice this means we have strong informal links with national professional associations of psychology and psychiatry, at European and international level. For example,

Tamas Kurimay, a member of our General Board, is also a member of the board of the World Psychiatric Association.

Our vision for the future includes consolidating our achievements and developing our ambassadorial roles. We intend to help regional and national associations develop their influence on social policy, with an emphasis on preventive work and, at the very least, to help social policy makers bear in mind the wider systemic consequences of a more narrow, individualised approach to mental health in our communities.

We welcome contact from other European-level psychotherapy and mental health organisations. We believe we should be working together at European level to promote well-being in our communities, and in helping to think about and resolve community-based inequalities and conflicts.

Please contact us if you would like to know more about us, or visit http://www.efta-europeanfamilytherapy.com.

## The European Association for Behavioural and Cognitive Therapy

#### Rod Holland, Communications Officer, EABCT

The European Association for Behavioural and Cognitive Therapy (EABCT) was established in 1976. It is an organisation of national cognitive and behavioural therapy associations and brings together 41 individual associations from 28 different European countries plus Israel; it has a combined membership of over 25 000 clinicians and researchers. Membership continues to rise: three new associations have already applied for membership in 2007.

Associations vary widely in size and structure: they range from associations of over 5000 members in the UK (the British Association for Behavioural and Cognitive Psychotherapies - see http://www.BABCP.com), Germany and The Netherlands to smaller associations in Iceland, Estonia and in Lithuania (one of the most recent member associations). Most countries have one association representing cognitivebehavioural therapy (CBT) but some (Austria, Germany, Belgium, Switzerland, Italy, Finland and Romania) have two or more, reflecting regional and sometimes language differences. Associations may also have a different focus, with some being more cognitive or behavioural than CBT in orientation. This highlights the fact that cognitive and behaviour therapy is more than just one approach but rather represents a family of approaches. This family will no doubt continue to grow as new CBT approaches develop, such as schemafocused therapy, 'mindfulness', acceptance and commitment therapy (ACT) and so on.

The professional background of members reflects the broad mix of professionals who are trained in the approach. The UK group has the broadest membership, with practitioners from psychiatry, clinical and other applied psychology, nursing, counselling, social work, occupational therapy, special needs teaching and so on. Other associations have a narrower range of professionals in their membership, which is often the result of the regulations or traditions that govern who can or cannot practise psychotherapy in their country.

The EABCT and each of its member associations is committed to empirically based principles and the practice of behavioural and cognitive therapy approaches in the

health, social, education and related fields. They have a common goal – to develop the highest standards of clinical practice – and the EABCT is committed to ensuring the training of competent therapists in each of its member associations. The EABCT has developed a set of core training standards that apply to all member associations that accredit their members as cognitive—behavioural therapists.

One of the EABCT's main activities as an international forum in Europe has been to host an annual congress and workshop programme; this is open not just to members but also to non-members who are interested in the development of cognitive and behavioural therapies. This congress is organised by a different member association each year, which ensures that it moves around Europe and is made accessible to as wide a membership as possible. Each year the congress will draw in over 1000 clinicians and researchers from across Europe and the rest of the world.

The EABCT works closely with the other CBT associations around the world and in July 2007 it will be hosting what is likely to be the largest meeting on CBT, the Fifth World Congress of Behavioural and Cognitive Therapies, in Barcelona, Spain (http://www.wcbct2007.com). In 2008 the EABCT congress will be held in Helsinki, Finland, followed in 2009 in the city of Dubrovnik in Croatia.

The EABCT does not publish its own journal but many of its member associations have developed their own well respected journals and details of these can be found on their respective websites. The Association does publish its own newsletter, European Behaviour and Cognitive Therapist, which can be downloaded from the website (http://www.eabct.eu). The website also provides information on each of the member associations, activities of the EABCT that support them, the constitution, board of directors, congress details and other information relevant to cognitive and behavioural therapies.

# The International Society for the Psychological Treatments of Schizophrenia and other Psychoses

Brian Martindale and Yrjo Alanen, former members of the ISPS executive committee

As its name implies, the International Society for the Psychological Treatments of Schizophrenia and other Psychoses (ISPS) is an international organisation that focuses on the development of psychological knowledge and practice relevant to persons with psychotic disorders.

Since its foundation, more than 50 years ago, by two Swiss psychiatrists, Christian Müller and Gaetano Benedetti, it has been organising regular conferences in Europe, the USA and recently Australia, at which clinicians, theoreticians and researchers can exchange ideas, information and experiences of clinical work and service development relevant to the focus of the ISPS.

In the past decade – beginning with the innovations executed at the London conference in 1997 – the ISPS has taken substantial organisational steps to achieve its range of constitutionally stated objectives. It has promoted local networks of practitioners with the aim of offering local

support and education in (and promotion of) psychological therapies. It has developed active international and national email discussion and information groups, and has a rapidly developing book series covering a range of contemporary topics; it further aims to bring to the English-speaking world the works of some master clinicians and theoreticians, such as Gaetano Benedetti and the Swedish psychoanalyst Johan Cullberg. It also has a regular newsletter and a website (http:// www.isps.org). For 50 years it has been organising a triennial international conference, each of which attracts some 1000 participants. With the development of national networks, national and local conferences are now occurring in places stretching from Auckland in New Zealand, Stavropol in Russia, Split in Croatia, Hamar in Norway to different regions of the USA. The last and very successful triennial conference, in Madrid, was associated with a celebration of the 50th anniversary of the ISPS; many of its leading figures from over the decades were able to attend. In connection with the Madrid congress, a book in honour of the history of the ISPS, Fifty Years of Humanistic Treatment of Psychoses (Alanen et al, 2006) was published and distributed to participants.

The ISPS had its routes in psychoanalysis. From the 1980s, with the growth of a range of approaches involving the family members of those with a psychosis, the ISPS became 'multi-modal' and now includes practitioners interested in a range of psychological models of understanding aspects of psychosis and the resulting practices that have evolved.

A particular strength of its membership has been the degree of involvement from practitioners from the Scandinavian countries. Senior clinicians such as Alanen of Finland, Cullberg of Sweden, Ugelstad and Johannessen of Norway and Rosenbaum of Denmark have been national leaders in the development of clinical services. There the psychological individual, therapeutic group, community and family approaches to psychosis with an applied psychodynamic emphasis are far more the norm than in many other Western countries, where the power of the pharmaceutical companies and perhaps a lack of a more balanced training of psychiatrists has tended to marginalise psychological approaches. However, the rapidly growing local ISPS activities in the USA and Britain – as well as in some other Englishspeaking countries – indicate a growing interest at such integrated direction also in other parts of the world.

Although the ISPS promotes psychological therapies and would support the development of these to a high standard, it has an open membership and besides mental health professionals it encourages the involvement of users, carers and other family members, as well as persons such as administrators of mental health services. The ISPS is an affiliate organisation with the World Psychiatric Association, organises symposia within other bodies, such as the Royal College of Psychiatrists, and is keen to form bridges and dialogue with pharmaceutical approaches and those developing biological knowledge, fully aware that we know all our disciplines know both a lot about psychosis and very little!

### Reference

Alanen, Y. O., Silver, A.-L. S. & González de Chávez, M. (eds) (2006) Fifty Years of Humanistic Treatment of Psychoses. Fundación para la Investigación y Tratamiento de la Esquizofrenia y otras Psicosis (available from Karnac Books and via http://www.paradox.es).