## Psychotherapy Study Roberts Klotins and Thomas Gargot 04 April, 2016



# Shaping the future of psychiatry

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#### **EFPT**

The European Federation of psychiatric trainees (EFPT) is an independent federation of psychiatric trainees associations. It represents

the consensus of psychiatric trainees organizations across European countries and advocates for what training should look like, regardless of the country.

EFPT website 1

¹http://efpt.eu

#### Presentation

The psychotherapy study run from 2013 to 2015 to understand the actual opportunities and wishes for training in psychotherapy in Europe among psychiatrist trainees in 19 countries.

#### *Presentations of the survey :Past*

- "The EFPT Psychotherapy working Group and its Survey on Psychotherapy Training 2013-2015" was presented at the Royal College of Psychiatrists - faculty of Psychotherapy Annual Meeting 22-24 April 2015 by Alina Petricean (UK, Romania)
- "The EFPT Psychotherapy working group" was presented at the "Portuguese Psychiatric National Congress in 2013 by Rita Silva (Portugal)
- "Should all psychiatrists be skilled to practice psychotherapy? Thomas GARGOT (France) and Ekin Sonmez (Turkey), European Psychiatric Association Congress, March 12th - March 15th 2016, slides

### **Projects**

- Submission Project: "How psychiatrist trainees are trained in Psychotherapies in Europe ? A European trainee survey", Thomas GARGOT (France), European Association of Behavioural and Cognitive Therapies conference (EABCT), August 31st - September 3rd 2016, deadline 31st march
- Submission Project: How psychiatrist trainees are trained in Psychotherapies in Europe ? A European trainee survey" in Italian, Diego Quattrone (Italy) Italian Federation of Psychotherapy Associations (FIAP)

#### About data

You can download our data and our analysis script on GitHub.<sup>2</sup> You can find ToDo list here.

<sup>2</sup> https://github.com/r0bis/efptPWG

#### Actual recommandations

## EFPT Psychotherapy Working Group statement

"A working knowledge of psychotherapy is an integral part of being a psychiatrist and this must be reflected in training in psychiatry. All trainees must gain the knowledge, skills and attitudes to be competent in psychotherapy. Competence should be gained in at least one recognised form of psychotherapy (of the trainees choice) and basic knowledge should be gained in the other forms of psychotherapy to allow the trainee to evaluate suitability for referral to specialist psychotherapist. Training in psychotherapy must include supervision by qualified therapists. A personal psychotherapeutic experience is seen as a valuable component of training. It is crucial that trainees have access to relevant psychotherapy experience to cater to the needs of the appropriate patient group that the trainee is dealing with or is expected to deal with in the future.

Relevant training authorities should ensure that time, resources and funding are available to all trainees to meet the above mentioned psychotherapy training needs."

Discussed and voted by EFPT delegates in Lisbon 1996, Tampere 1999, Napoli 2001, Sinaia 2002, Paris 2003, Istanbul 2005, Gothenburg 2008, Cambridge 2009 and Zurich 2013. See all EFPT statements<sup>3</sup>.

#### UEMS Psychiatry Board and Section Reports on Training

Since its establishment the Board has worked on a number of important aspects of psychiatric training in Europe. The work was normally carried out through working groups which published their recommendations in the form of reports. See all UEMS reports related to psychiatry training<sup>4</sup>.

### European results

AGGREGATE EUROPEAN DATASET IS QUITE LARGE. Data are collected in different tables, but because thay are of the same format we can easily bind them together and perform summarisation and analysis as needed. Further thoughts would be to see how countries differ along the main parameters. For that we have to look carefully at the data from Europe to formulate further questions of interest that can be answered by this data set.

For example it would be very interesting to know if the 27 trainees <sup>5</sup> who have said that they do not see Psychotherapy as an important

<sup>3</sup> http://efpt.eu/statements/

<sup>4</sup> http://uemspsychiatry.org/board/ training-reports/

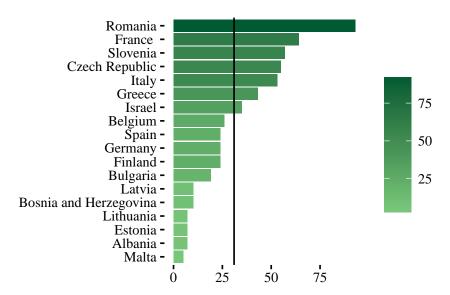
<sup>&</sup>lt;sup>5</sup> Whole sample consisted of 571 trainees.

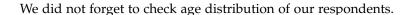
part their professional identity would still show interest in psychotherapy and would wish to undertake training in psychoterapy if it were provided for free.

### **Demographics**

OVERALL DEMOGRAPHICS SEEM TO BE AS EXPECTED. There are more female trainees who tok part in the survey and this correlates with the overall training trend. However the male trainees were definitely represented in the sample.

Respondents came from 17 different countries. We still have not collected data from some countries where response would be very interesting. That is from the UK and Austria. in the UK the training system is well centralised and if we could distribute the survey through the central address database we could ensure a large dataset. Austria to our knowledge is the only country where all psychiatrists must train in psychohterapy too.





By age the respondents showed maximal response rate between ages 26 and 32. However this was expected as it reflects on general population of psychiatry trainees. Median age however was 31 and this shows the significant number of older trainees - a few well into their fifties who voiced their opinion regarding the psychotherapy issue. It would be interesting to establish correlations among odler and younger trainee populations and perhaps do it on country by

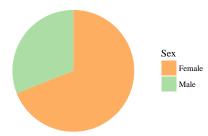


Figure 1: Population by gender

Figure 2: Response in countries where survey was conducted.

Number of answers: 563 from 18 countries Mean number of answers per country: 31 Top five response counts from: Romania, France, Slovenia, Czech Republic and Italy

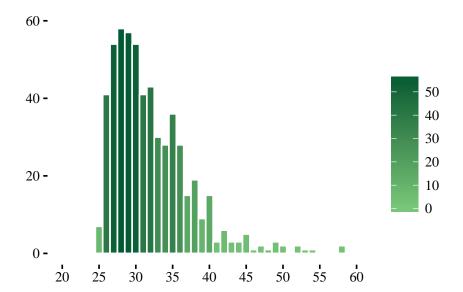
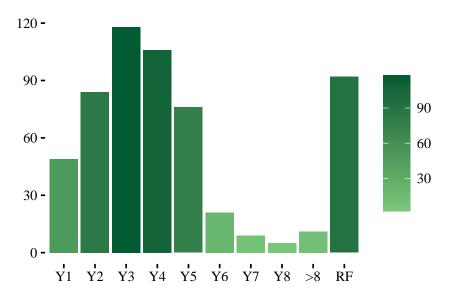


Figure 3: Age distribution

country basis too. We could try to find a cutoff point at which core opinions diverge. Or establish that there is no age difference.

YEAR IN TRAINING generally reflected the age distribution as well. We also collected data from among trainees who had spent more than eight years in training and from those who had recently finished their training.<sup>6</sup> Recent in this case was defined as within the last 5 years.



<sup>6</sup> RF in the diagram means Recently

Figure 4: Population by Year in training

Was the trainee in therapy? A further interesting characteristic in our sample was to identify whether the trainees were receiving

personal therapy or not. As expected most of the respondents (59.02%) had no experience of being in personal therapy. Whether the 40 % who had had some experience in therapy were an unusually large proportion for the population of psychiatric trainees is not known yet.

Was the trainee in psychotherapy training? This question was somewhat multifacted. We recognise that some trainees might have partial ir full training in psychotherapy training within their training programme in psychiatry. However by experience we also knew that many trainees undertook training outside their training programme - most often paying for that out of their own pocket. We therefore asked to tell who were in psychotherapy training, whether their training had been completed previously. To account for unusual situations we also provided an opportuinty to choose Other in response and to provide a textual summary of that.

AND AS WE CAN SEE this can be quite interesting. Lorem ipsum dolor sit amet, suspendisse at nec, dis sit dui faucibus. Parturient donec dictumst, ut suspendisse imperdiet hendrerit ipsum nunc, commodo est. Aliquet, in, sed non in hendrerit in, auctor malesuada eu nam laoreet magna ac. Nisl odio curae scelerisque eget nisi congue. Aliquam, a eu tincidunt nec ut nostra platea. Sem, quis viverra nisl, malesuada amet. Non, eu sed pulvinar a, sed velit tincidunt. Auctor aliquet, efficitur netus ut, convallis lacus sed nam faucibus cras venenatis senectus quis. Nisl, dapibus ante parturient euismod, sit nec suscipit sed ut massa, augue vel. Magna lacinia tortor hac magna, nulla natoque eu. Sed, augue in erat vulputate ligula. Ultricies, rutrum auctor quam aptent.

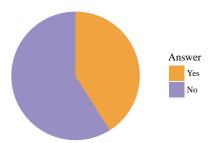


Figure 5: Proportion of trainees in therapy

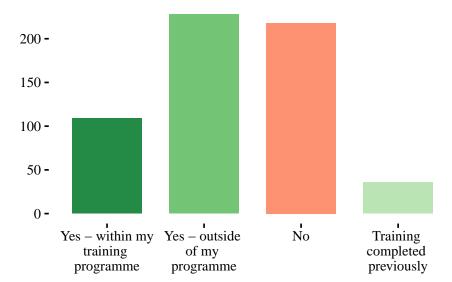


Figure 6: Whether respondents were in training

This was an overview of the 24 answers provided in the other option.

## What psychotherapy modality have you trained in?

This was an optional question presented to only those 547 respondents who had answered positively to the previous question i.e. those who had trained in any modality of psychotherapy. We wanted to get a qualitative overview as to what therapies they had trained in. Since this number is quite large we can only present you with a sample summary of these 329 answers, but to give a feel for what they were like we have included the first 4 rows of these answers.

#### Summary of psychotherapeutic methods that trainees had experience in

We summarised data along the following categories after reading them manually. Lorem ipsum dolor sit amet, risus venenatis ligula quis sed. Facilisis ante sit fermentum ac, et ante et in laoreet dignissim. Eleifend, gravida parturient, phasellus dui nullam, ex luctus hendrerit tellus, in in ullamcorper. Interdum scelerisque, ultrices. Euismod, taciti ultrices aenean in! Proin, mauris ultrices finibus nostra. Pretium nullam massa porta interdum felis id at tortor. Vivamus tempus litora libero eleifend aliquam rutrum vivamus praesent. Sodales morbi diam auctor nulla taciti egestas proin mollis gravida semper suspendisse., Pulvinar sed, ut lacus, vestibulum. Condimentum habitant sapien ac conque porta risus. Aliquam

#### Other answers

- 1
- I have done some training in psychotherapy during my training 2 programe in psychiatry
- In our training programme in psychiatry we have the first 2 years 3 initiative sessions in the different psychotherapy options.
- During our training programme in psychiatry, the first 2 years we 4 get initiation sessions on the different types of psychotherapy
- I will undertake training in psychotherapy, probably next year on 5 my own initiative
- training interrupted and finished 6
- completed training in the past, on my own initiative 7
- 8 I have completed a three-year training in psychotherapy within my training programme in psychiatry, but I am not a qualified psychotherapist.
- I have applied for training
- I will be undertaking training
- I will next year 11
- mindfulness-based stress reduction programme 12
- Around 50 hours overall discussing cases from the psychodynamic point of view
- I undertook training in the past 14
- **Psychoanslysis**
- starting next year 16
- nothing 17
- We have some training in psychodynamic therapy, CBT, group and family training but we are not trained to be able to work as psychotherapists
- I've started training in Cbt on my own initiative but had to stop from personal reasons
- i have undertaken training in psychotherapy on my own iniative, but I have since interrupted
- I had one year of psychodynamic training in uk. I've returned to Romania and I am not undertraining any training here.
- i am undertaking training in psychotherapy after comleted specialisation of psychiatry
- I COMPLETED THE INTRO COURSE IN GROUP PSY-23 CHOTHERAPY
- just magistral classes, no assessments of work with patients 24

mauris tempus et sociosqu eu gravida sodales, nec mi feugiat. Lacus iaculis, suscipit posuere dolor pellentesque. Consequat inceptos sem Table 1: Other responses to the question whether trainees have trained in psychotherapy

### Experience in modality

- psychoanalysis
- Cognitieve Behavioural Therapy
- We received a introduction course in cliented centered en systemic therapy yet.
- Family and Marital Therapy

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Your preferences - the second group of questions

Is psychotherapy training important for your PROFESSIONAL IDENTITY AS A PSYCHIATRIST? was the key question in the mind of several creators of this survey. We expected quite clear preference one way or the other, but we wanted to also give an opportunity to not have to choose. We expected that there might be quite a large group of people who would answer I don't know. However we were somewhat surprised by the results:

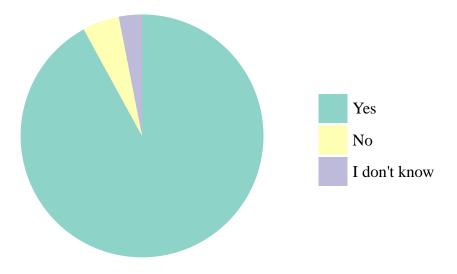


Table 2: What modality have trainees had experience with

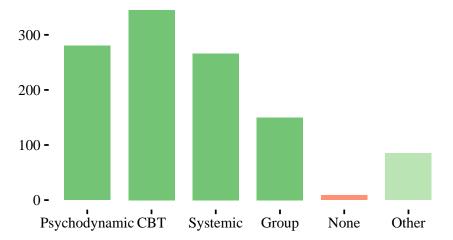
Figure 7: Importance of psychotherapy for professional identity

Do you want to practise Psychotherapy? This was a very interesting question to us - we wanted to find out if trainees would want to practise any form of psychotlogical therapy after they qualify as psychiatrists. The actual question appeared in survey as a Yes/No

questions: Do you want to practice psychotherapy after you finish your training in psychiatry? We thought that there should be a significant mirrroring of answers in the previous question.

It appears that a very significant proportion - 89.67% of psychiatry trainees would want to practice psychological therapies after they become psychiatrists.

What kinds of therapies they were interested in most was our next question. Lorem ipsum dolor sit amet, dapibus eleifend in dis sed justo. Mus nec vitae ut mauris ultricies. Ut augue tincidunt tincidunt class, eros, vestibulum lacinia sociis in. Massa congue volutpat non dictumst accumsan laoreet. At in quis amet condimentum. Ac luctus porttitor rhoncus sed lacus non tincidunt. Augue ut. Vel scelerisque nostra gravida et augue turpis fermentum egestas. In praesent vitae venenatis in. In mauris id luctus accumsan dis dolor aliquam.



This shows that psychiatrists seem to be most interested IN CBT. Lorem ipsum dolor sit amet, eu faucibus magna venenatis adipiscing ac nunc duis montes, taciti donec sed. Vel venenatis ligula id lectus inceptos diam lacinia parturient dictumst! Urna ut ante in dolor ac sed lorem a suspendisse. Maecenas a pulvinar quam orci orci. Eleifend inceptos aliquam vitae nisi. Donec sed pellentesque convallis malesuada purus at cursus etiam, potenti nunc a ipsum. Condimentum eu dictum eget luctus nisl eros placerat facilisi sed curae in. Ut laoreet mauris lacus dapibus sed mi, luctus ligula ante. Curae sed, leo ac sagittis in luctus commodo augue vel. Odio nec aliquam mauris tristique nunc, lacus justo fermentum quis cursus ut a nec nullam luctus. Parturient ut sociosqu himenaeos a nullam eros

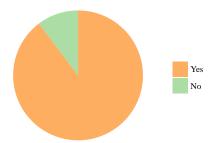


Figure 8: Trainees who want to practise psychotherapy after they qualify as psychiatrists

Figure 9: Therapies that trainees show interest in

Table 3: Other therapies trainees are interested in

#### Other\_therapies

- EMDR, treatment of dissociative disorders 1
- integrated psychotherapy 2
- emdr, hypnotherapy 3
- Mindfulness therapy 4
- Existential Psychotherapy 5
- 6 problen solvig psychotherapy
- 7 Motivational Interviewing
- 8 Existential Psychotherapy
- Existential Psychotherapy 9
- dramatherapy, musicotherapy 10
- Nondirective Psychotherapy 11
- body-oriented therapy 12
- gestalt therapy 13
- Morito 14
- nondirective psyhotherapy 15
- DBT, existential psychotherapy, gestalt
- trauma/EMDR 17
- 18 DKT, Trauma-, schema-, CAT
- 19 trauma
- gestalt therapy 20
- integrative, mindfulness based, body-oriented psychotherapy 21
- 22 brief therapies
- Psychoanalisis 23
- psycho-corporel 24

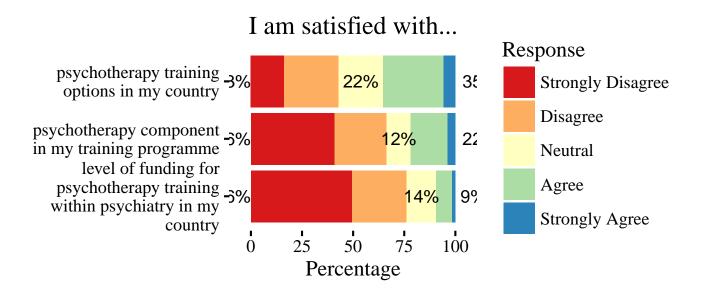
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Plot: Satisfaction group

perhaps we should use likert package to plot likert type items

## Concluding notes

[1] "Lorem ipsum dolor sit amet, ante sapien dolor egestas viverra proin augue aenean, quis elit tincidunt et. Nam placerat ante venenatis a. Eget ut rhoncus vestibulum massa diam aptent aliquam efficitur habitasse! Elementum iaculis a blandit at volutpat elit condimentum varius tincidunt. Aptent egestas amet ut fames curae velit lorem. Accumsan sem est sed cum accumsan. Mus dignissim turpis! Ultrices ligula. Eget litora, tincidunt. Ac eget lacus inceptos nisl auctor vestibulum fermentum."



#### Research

UEMS recommendations states that research methodology should be included in psychotherapy training.

## Bibliography

• You are welcome to join our zotero group<sup>7</sup>

7 https://www.zotero.org/groups/ 480046