

European Family Therapy Association

MINIMUM EFTA TRAINING STANDARDS 2025

Guidelines for training family and systemic therapists and supervisors at the European level and training levels for membership of the EFTA Chamber of Training Institutes (TIC) and Chamber of Individual Members (CIM).



Contents

Background Information.....	2
Status of the Work:	2
Commencement of New Training Standards:.....	2
Opportunity for Information Sharing in Respect of the New Standards	2
1. Introduction	3
2. Context	5
3. Principles.....	6
4. Guidelines for Training Family and Systemic Therapists	7
Pathway One - EFTA Enhanced 2025 Pathway: 900 Hours Total	8
Pathway Two: EFTA Enhanced EAP Standards – 1400 Hours	9
5. Guidelines for Training Family and Systemic Therapy Supervisors and Trainers	12
6. Guidelines for Family and Systemic Therapy Training Institutes/Schools at the European Level.	13
Appendix 1	14
Chart Showing the Origin for the Pathways 1 and 2	14
Appendix 2: Application Process and Documentation	18

Background Information

This work was undertaken by EFTA TASK Force. Membership of the Task Force includes:

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Status of the Work:

This is the final version of the EFTA Minimum Training Standards 2025. They replace the draft version, which was circulated in August 2025, following sign off by the General Board of EFTA in July 2025. The draft was discussed at the EFTA Roundtable at the Conference in Lyon. The Task Force provided a period up to Sept 30th, 2025 to receive questions / feedback.

The origin of the standards contained in this document is outlined in Appendix One. A range of new documentation required at the application stage and currently under development is outlined in Appendix Two.

The standards are core to the training of family and systemic therapists at the European level. They will be used for determining training levels for membership of the EFTA Chamber of Training Institutes (TIC) and EFTA Chamber of Individual Members (CIM).

Commencement of New Training Standards:

The New EFTA Minimum Training Standards 2025 are required to be implemented in all Training Programmes for students commencing their four year training commencing 2027 and later.

The old standards will continue for all other students who commenced their training before 2027 .

Graduates who commence their training in 2027 must opt to register in either Pathway one or Pathway two by 2031.

Opportunity for Information Sharing in Respect of the New Standards

Over the course of the next year, information sessions will be hosted by EFTA. A suite of new documents is currently being developed application

If any queries, please contact the Chair of the Task Force Valerie O'Brien at valerie.obrien@ucd.ie and info@efta-tic.eu.

1. Introduction

1.1 EFTA is primarily an advisory rather than a regulatory body. In relation to training standards its role is to define, through its three chambers, the criteria for the quality of training both of individual, couple and family systemic therapists and supervisors and of training programmes in institutes and schools.

1.2 EFTA is recognised by the European Association for Psychotherapy (EAP) as the European Wide Accrediting Organisation (EWAO)¹ for family and systemic therapy.

1.3 The guidelines below set minimum standards that should be progressively applied by local/national registration and accrediting bodies.

1.4 The language of Accreditation/Recognition is used interchangeably in these two pathway EFTA training standards. This is defined as a process that indicates that a Programme/Course, Institute or individual member meets established standards.

1.5 A two-pathway approach is used in EFTA Training standards. The two-pathway approach is not a demarcation of different titles. It does not differentiate between two different titles such as systemic practitioner or systemic psychotherapist. The regulatory law or registration requirements in an individual country is the highest authority in this regard and will both shape the training context, and the titles people are permitted to use.

1.6 The hours in both pathways one and two refer to the *minimum* hours. In pathway one the *total* number of hours is 900 hours and in pathway two the *total* is 1400 hours across the 4 years of post-graduate training.

1.7 The two pathways and standards define the minimum training standards expected to be recognised by EFTA. On completion of training, qualified therapists may choose to work in a range of different settings and areas, using their systemic skills, attained within the qualifying level training from either pathway.

1.8 Each component or training element or area - theory, clinical and personal and professional development (PPD) - contains minimum hours to be reached. There is scope for Training Institutes to exercise their preferences when increasing the hours in each training element in order to reach the prescribed number of total hours of 900 or 1400, depending on which pathway is being implemented. The training institutes can therefore use their discretion to make up the extra hours on top of the set minimum requirements, in any of the training component areas, such as theory, clinical or PPD.

1.9 For those training institutes that wish their trainees on completion to be able to reach the standard to apply for the European Psychotherapy Certificate (ECP) awarded by the European Association of Psychotherapy (EAP), they must meet the hours and requirements laid out in pathway two.

¹ A European Wide Accrediting Organisation (EWAO) (EAP Statutes 4.1.3.) may be appointed as stipulated below (EAP Statutes: 4.1.3.1).

The EWAO must have, in each of six or more European countries, either a training at or above the level required for the ECP; or, have, as members, professional organisations with training at this level. (https://www.psychotherapy-competency.eu/Documents/ECP_document.pdf P. 3)

1.10 Implementation: These standards are intended to be applied by the EFTA Training Institutes Chamber (TIC) to all programmes commencing in 2027. Anyone currently training in a programme that is recognised by TIC will be permitted to qualify under the 2011 standards. The standards will only come into effect for future trainees in courses ending in 2031 and onwards. For those training institutes moving their training from Pathway One to Two, this can be done incrementally at a pace that suits them.

1.11 Psychotherapy training should not be 100% online. A full online training will not be considered as an adequate standard for meeting either EFTA pathways. There is a further clarification required between 'live' in the moment online training and recorded material available 'on demand.' The latter pre-recorded material should be kept to a minimum as systemic training requires a significant input of experiential learning. Further guidance will be issued as this becomes available across Europe in relation to theory, clinical and personal professional development. The regulation in specific countries may also set specific ratios.

1.12 It is recognised that hours specified for both pathways and for elements within each pathway will be met through a combination of direct tutor-led hours, and a proportion will be tutor-directed student autonomous hours.

'Tutor Led Hours' refers to lecturer / trainer/ tutor leading and facilitating the work.

'Tutor Directed Student Autonomous Work' refers to work directed by Tutor but without the presence of Tutor.

Training Institutes need to pay attention to the general framework of the European Credit Transfer and Accumulation System (ECTS). ECTS is a tool of the European Higher Education Area (EHEA) for enabling studies and courses more transparent and thus helping to enhance the quality of higher education².

1.13 Training Programmes should utilise a range of training and teaching methods aligned to learning outcomes and family therapy competencies. The experiences in the Covid era combined with technological and digital advancements has propelled changes in training and education.

1.14 Training Institutes seeking program recognition need to show how an alignment between hours, learning outcomes, family therapist competencies, assessment strategies as part of curriculum design.

² https://egracons.eu/sites/default/files/ects-users-guide_en.pdf. Training Institutes and EFTA will need to pay attention to any changes in ECTS going forward - to ensure that this resource can be of use. Resources available <https://www.cedefop.europa.eu/en/projects/european-qualifications-framework-eqf>

2. Context

2.1 The goal of EFTA is to achieve recognition for family and systemic therapy as a distinct, scientifically based form of therapy practice and to ensure rigorous standards of training and professional practice throughout Europe.

2.2 Where local standards or legislation are inconsistent with those determined as appropriate by EFTA, EFTA will advocate having those standards and laws amended.

2.3 In some European countries therapy practice and training is regulated by statute. In others where there is, as yet, no legislative framework, the responsibility for registration and/or recognition and/or voluntary or statutory accreditation, normally rests with the National Family Therapy Organisation (NFTO) where such exists.

2.4 Where no statutory regulation exists, the local NFTO sets the detailed standards in collaboration with the three EFTA chambers and ensures compliance in its jurisdiction.

2.5 Where no NFTO yet exists, recognition by EFTA temporarily replaces the regulatory process.

2.6 EFTA seeks to ensure that a local regulatory authority is created at the earliest opportunity. This is in accord with the principle of subsidiarity described below (3.4)

3. Principles

The following general principles apply:

3.1 Flexibility

Training in family and systemic therapy builds on the theoretical and clinical training/experience received as part of basic professional training in a health or social discipline. The guidelines allow for the fact that models of training in different professions and countries provide different starting points for specialist training in family therapy. Flexibility is needed both to accommodate the various learning pathways adopted by different trainings but also to leave room for future developments.

3.2 Generality

Wherever possible the guidelines have been defined at a level of generality that allows for commonalities between different models of family and systemic therapy training to be identified. This also allows for comparisons with models of training being developed for other psychotherapies.

3.3 Specificity

There are aspects of family and systemic therapy training that are specific to family and systemic therapy, whether in terms of theory, personal attitudes, methods of supervision or clinical practice. These are important because of the central role that they play in family and systemic therapy but also because they provide a rationale for why it is appropriate to retain some of the differences from other training models.

3.4 Subsidiarity³

Subsidiarity is the organisational principle that matters ought to be handled by the least centralised competent authority. The central authority should have a subsidiary function, performing only those tasks that cannot be performed effectively at a more immediate or local level.

³ EFTA pays particular attention to the work undertaken by , 'TAC -Training Accreditation Committee, within EAP in respect of subsidiarity. TAC operates a 'Clause of Subsidiarity' according to the specificities of each country and each modality, slight variations might occur and will be studied by the TAC, in order to allow enough flexibility. If some conditions are missing with acceptable justifications, the Committee will take them into account. https://www.europsyche.org/portals/0/media/docs/TAC-Procedures_voted-in-October%202024.pdf p.1

4. Guidelines for Training Family and Systemic Therapists

4.1 Teaching and Learning Philosophy: Being systemic, is being focussed on relational positioning within different levels of context, both in the therapy work itself, and in the process of learning and training.

4.2 Specialist training in family and systemic therapy builds on previous training and clinical experience that is normally gained within one of the health or social sciences/disciplines or equivalent.

4.3 Duration

- i. Training should be no less than seven years (including a primary degree or equivalent) of which at least four should normally be specific to family and systemic therapy.
- ii. Minimum hours of the 4 years systemic training are stated for both pathways. 900 hours in Pathway One and 1400 hours in Pathway Two. In order to fulfil the overall requirement of the hours for both pathways, achieving the minimum in all components (theory, clinical and PPD) will not be sufficient to meet the total hours required. Therefore, each training institute/course can use some discretion and choice, as to which components and to what extent, each component is allocated more than the minimum to reach the overall total hours.
- iii. However, it is essential to be careful not to double count in achieving the required hours. That is, hours counted in one component cannot also be counted in another component.

Pathway One - EFTA Enhanced 2025 Pathway: 900 Hours Total

Revised EFTA Standards

Minimum Theory Hours: 300 hours

Courses should cover the following aspects of

1. Systemic Theory:
 - a. History of Systemic Thinking (includes models of family and systemic therapy, systems and communication)
 - b. Contemporary systemic theories
 - c. Contextual and Relational Frameworks
 - d. Epistemology as an influence for theory development
 - e. Individual and family dynamic processes over time (includes theories of individual and family life-cycle development)
 - f. Recognition of a range of family forms and different social systems
 - g. Positive and strength-based understanding that counters normative ideas
2. Relational understanding of human conditioning and suffering (instead of what in EFTA 2011 was referred to as “psychopathology: general and systemic”):
 - a. Social and emotional stressors including trauma
 - b. A critique of general psychopathological understandings with a systemic relational view
 - c. Structural and contextual tensions and injustices as opposed to pathologizing the individual or the family.
3. Systemic models of change and the range of systemic interventions:
 - a. Risk assessment and the appropriate interventions
 - b. Mental Health (includes psychological models and therapies)
4. Research evidence for family and systemic interventions and understanding research methodology.
5. Ethical issues and cultural sensitivities and social justice
 - a. Decolonising theory and anti-oppressive and culturally sensitive practices

Minimum Clinical Hours: 300 hours

Clinical experience should include all the following:

1. Working with a range of difficulties, mental health problems and presentations.
2. Both direct work with families and indirect observing/discussing the work of others
3. Work with diverse clientele: with families, couples, individuals, groups and organisations. A considerable proportion of cases should be with more than one person in the session.
4. Independent practice -refers to without a supervisor present; 250 hours must be provided by the trainee in a lead therapist role.
5. Supervision of different methods, preferably with a significant component of ‘live’ supervised practice, review of recordings as well as retrospective supervision.

Minimum Personal and Professional Development (PPD) hours: 120 hours

Self-Reflexivity as a core component of the training to ensure that the trainees can identify their own involvement and contribution to the process of therapy, and it can be achieved through various suitable means and methods for example:

- a) Personal therapy,
- b) Group work,
- c) Family of origin work (e.g. using genograms)
- d) Direct work with the trainee’s own family
- e) Supervision
- f) Methods involving self-reflection and feedback

Pathway Two: EFTA Enhanced EAP Standards – 1400 Hours

Revised EFTA Standards incorporating systemically enhanced EAP standards

Length and content of psychotherapy education and training

Each European country has a National Qualifications Framework that is aligned to the European Qualifications Framework under the Bologna Accord.

Most countries have now adopted the 'Bologna Process' for academic and professional training, which ensures the mutual recognition of qualifications and learning periods. The EAP supports this and is encouraging its ECP training courses to align to this process.

European Accredited Psychotherapy Training Institutes - EAPTI's are encouraged and recommended to design and develop their psychotherapy training courses at European Qualifications Framework (EQF) Level 7. Ideally, they would register their course with the National Qualifications Framework agency or bureau in their country. Programmes that are accredited by or affiliated to a university at post-graduate level would imply that their training is recognised as being at EQF Level 7.

The total duration of the psychotherapy education and training will not be less than 3200 hours:

- A. Either spread over a minimum of seven years, with the first three years being the equivalent of a relevant first (Bachelor's) university degree and the later post-graduate component of four years must be in a training specific to psychotherapy, which will not be less than 1400 hours, and which must contain all the elements or components defined below.
- B. Or conducted as a 5-year full-time academic education and professional training in psychotherapy, organised or recognised by a university, which must contain all the theoretical and practical elements defined below. (Core Competencies, Theory, Clinical component which includes a minimum mental health placement or equivalent, Personal and Professional Development.)

There will be a general part of university or professional training and a part, which is specific to psychotherapy. General university courses leading to a first university degree (or its equivalent) in subjects relevant to psychotherapy may already include psychotherapy topics in their hours, but these cannot be counted as part of the 4-year specialised course theory hours.

EAP Core Competences should be used by training institutes as central to curriculum design and by the end of the training, the trainee will have to be able to demonstrate these as defined in the specified domains:

See link below for comprehensive EAP core competencies that are required for Pathway Two.

1. Professional, Autonomous & Accountable Practice
2. The Psychotherapeutic Relationship
3. Exploration (Assessment, Diagnosis & Conceptualization) (*as specified in n.2 of Pathway 1*)
4. 'Contracting' (Developing Goals, Plans & Strategies)
5. Various Techniques & Interventions (*as specified in n.3 of Pathway 1*)
6. Completion & Evaluation of the Psychotherapy
7. Collaboration with Other Professionals
8. Use of Supervision, (Peer) Intersession and Critical Evaluation
9. Ethics and Cultural Sensitivities (*as specified in n. 5 of Pathway 1*)
10. Management & Administration
11. Research (*as specified in n.4 of Pathway 1*)
12. Prevention & Education
13. Management of Change, Crisis & Trauma Work

<https://www.europsyche.org/Portals/0/media/docs/ECP-document-version-9-0-voted-AGM-Vienna-March-2025.pdf?ver=RRjvCckPafb8W7TAL3MbKw%3d%3d>

<https://www.europsyche.org/Portals/0/media/docs/ECP-document-version-9-0-voted-AGM-Vienna-March-2025.pdf?ver=RRjvCckPafb8W7TAL3MbKw%3d%3d>

Minimum Theory Hours: 500 hours

Theoretical study (500 to 800 hours) during the 4 years of training specific to psychotherapy should include the following **EAP elements**:

- Theories of human development throughout the life cycle
- An understanding of other psychotherapeutic approaches
- A theory of change
- An understanding of social and cultural issues in relation to psychotherapy
- A critical understanding of theories of psychopathology
- Theories of assessment and intervention

Additional *Systemic Theory emphasis is also required*:

- a) History of systemic thinking (includes models of family and systemic therapy, systems and communication)
- b) Contemporary systemic theories
- c) Contextual and relational frameworks
- d) Epistemology as an influence for theory development
- e) Individual and family dynamic processes over time (includes theories of individual and family life-cycle development)
- f) Recognition of a range of family forms and different social systems
- g) Positive and strength-based understanding that counters normative ideas
- h) Relational understanding of human conditioning and suffering (instead of psychopathology: general and systemic)
- i) Social and emotional stressors including trauma
- j) A critique of general psychopathological understandings with a systemic relational view
- k) Structural and contextual tensions and injustices as opposed to pathologizing the individual or the family.
- l) Systemic models of change and the range of systemic interventions
- m) Risk assessment and the appropriate interventions
- n) Mental health (includes psychological models and therapies)
- o) Research evidence for family and systemic interventions and understanding of research methodology
- p) Ethical issues and cultural sensitivities and social justice
- q) Decolonising theory and anti-oppressive and culturally sensitive practices

Minimum Clinical Hours: 300 hours

This will include sufficient psychotherapeutic practice (not less than 300 hours) under continuous supervision (not less than 150 hours) appropriate to the psychotherapeutic modality and will be at least two years in duration. Further detail is given below.

Trainees will have experience of working with a range of difficulties, mental health problems and presentations.

Clientele: Families, couples, individuals, groups and organisations (a considerable proportion of clinical hours should be non-individual therapy sessions, i.e. with more than one person as part of the therapy).

Clinical hours can be obtained in a placement in a mental health setting or equivalent professional experience. The placement must provide adequate experience of psycho-social crisis and of collaboration with other specialists in the mental health field (such as in psychiatric institutions, medical-social facilities, psycho-social support organisations etc).

The trainee should have access to service management, as well as systemic clinical supervision in the placement. The placement should last for a minimum of 125 - 150 hours.

The minimum 300 hours of clinical work can be accumulated through a combination of live teamwork - and independent clinical practice. The 300 hours refers to direct therapy work by the trainee with clients.

Live team work generally refers to a context in which a supervisor is present - though other live teams without the presence of a supervisor can be considered.

In live teamwork, only the work where the trainee is lead therapist can be counted as part of the minimum 300 hours, although co-therapy can be included.

The remainder of the minimum clinical hours can be accumulated by the trainee working alone with clients outside of a live team structure. These hours (above) are referred to as “direct contact” hours.

Non-contact hours refer to a range of activities that are connected with training and may involve :

Observing as part of live teamwork; participating in case discussion of another trainee’s work during supervision. Non-contact hours also refer to preparation for client work, personal study time, peer group work and own learning. Non-contact clinical hours are necessary to the training but are not counted as part of the minimum clinical requirements.

Supervision

A minimum of 150 hours of supervision must be provided for the minimum 300 hours of clinical practice.

Supervision can use a range of methods, preferably with a significant component of ‘live’ supervised practice with a suitably qualified and experienced family and systemic therapist, supported by retrospective supervision - and group supervision - with the recommendation of including the use of video recordings.

If live supervision is not available, supervision should have access to video recordings of an element of the work to ensure the supervisor can assess the competencies of the therapist.

The minimum 150 hours of supervision can be provided through a combination of ‘in person’ and online mediums.

Preparation, personal study time, peer group work and own learning, are not included in the calculation of the minimum 150 hours of supervision.

Minimum Personal and Professional Development (PPD): 250 hours

Personal Psychotherapeutic Experience: This should be taken to include training analysis, in depth individual and group psychotherapy, self-experience, and other methods involving elements of self-reflection, therapy, and personal experience (not less than 250 hours) normally spread over 4 years. In March 2025 EAP updated their guidance to state: Psychotherapists need to experience in depth psychotherapy themselves.* This total number of sessions should be not less than 250 hours, in an individual and/or group setting, normally spread over 4 years. No single amount (above the minimum of 250 hours) is agreed by all psychotherapy methods.

All training programs should include arrangements to ensure that the trainees can identify and appropriately manage their involvement in and contributions to the processes of the psychotherapies that they will practice in accordance with their specific methods.

In order to enable the therapeutic process to be kept separate from the educational process, the trainee’s psychotherapist cannot also be in the role of their trainer or supervisor.

*Note: The meaning of ‘in depth psychotherapy’ is still being discussed with EAP, to clarify what methods will meet this requirement. However, based on the advice received so far, we are confident that our current systemic methods, in accordance with the family therapy modality, will be upheld.

5. Guidelines for Training Family and Systemic Therapy Supervisors and Trainers

5.1 EFTA seeks to ensure that family and systemic therapy supervision and training is conducted by suitably qualified practitioners and teachers. Training and supervising require specific skills and knowledge that should be provided and acquired through appropriately designed and delivered teaching and learning methodologies (e.g. courses, apprenticeships, mentoring, etc.). EFTA training standards require courses and supervisions to be delivered by professionals that have sustained a specific training.

5.2 Training to become a family and systemic therapy supervisor must be both rigorous and flexible, ensuring that the future trainer and/or supervisor has the competence to:

- i. Supervise the clinical work of those people training for registered family and systemic therapist status.
- ii. Provide supervision to registered family and systemic therapists as part of their continuing professional development.
- iii. Provide supervision of teams and staff working with families and networks or individuals wishing to work with a systemic orientation.
- iv. Teach on family and systemic therapy training programmes. Standards that ensure competence to carry out these functions should be devised at national level.

5.3 Trainers and supervisors will have successfully completed suitable additional training or equivalent in systemic supervision and training and be registered as a family and systemic therapists within their country's regulatory body or their NFTO (where such exists).

5.4 In order to be recognised as having competence as a family and systemic therapy supervisor the following training components must be successfully completed during a minimum period of four years. Not less than 300 hours composed of:

- i. Taught courses
- ii. Observing systemic supervision
- iii. Conducting systemic supervision in a variety of settings including live team supervision
- iv. Supervision of supervisory practice including retrospective and live supervision
- v. Personal and professional development (PPD)

6. Guidelines for Family and Systemic Therapy Training Institutes/Schools at the European Level.

6.1 In some jurisdictions the requirements for training institutes are specified in legislation and the accrediting body is the State. Otherwise, the accrediting body for any training institute or school would be considered the local NFTO or equivalent, where such exists, in collaboration with EFTA-TIC.

6.2 The institute/school must provide a training programme containing the components outlined in section 4 above meeting the standards of pathway one or two to be recognised by the TIC chamber.

6.3 Two thirds of the teaching/training staff of the institute/school must be registered family therapists and at least one third must be trained supervisors as specified above in section 5 (where such registration structures exist at the national level).

EAP recommends those training institutes where their trainees will be seeking to be awarded a European Certificate of Psychotherapy (ECP) to meet the following criteria: Supervision, training and, where applicable, personal psychotherapy should be provided by practitioners whose training has met the criteria of the ECP.

6.4 These guidelines were redrafted by the EFTA Training Standards Taskforce. They are based on, incorporate some elements and supersede the previous standards adopted by the EFTA Board. They were agreed by the EFTA Board at its meeting in July 2025.

Appendix 1

Chart Showing the Origin for the Pathways 1 and 2

This Chart demonstrated a comparison of hours and components in each pathway and shows the origin of training standards, based on EFTA Training Standards 2011; EAP Training Standards and work developed by the Task Force.

Please note that the different colours are used to assist people to track the origin of the material contained in the new standards.

Green content is taken from 2011 EFTA Training Standards.

Pink content is written by the Task Force to better specify and enhance EFTA standards

Blue content is taken from EAP Training Standards

Purple content is written by the Task Force to systemically enhance the EAP standards in accordance with a systemic approach

	<p><u>EFTA Pathway 1 - 900 HOURS</u></p> <p><u>New Enhanced version of EFTA 2011 level</u></p> <p>Green content is taken from 2011 Training Standards.</p> <p>Pink content is written by the Task Force to better specify and enhance EFTA standards</p>	<p><u>EFTA Pathway 2 - 1400 HOURS</u></p> <p><u>Systemically Enhanced version of EAP level</u></p> <p>Blue content is taken from EAP Training Standards</p> <p>Purple content is written by the Task Force to decline the EAP standards in the systemic approach</p>
<u>THEORY HOURS</u>	<p>Minimum 300 hours (Replacing 1/3 to 1/2 of 700-900 total training from 2011)</p> <p>1. Systemic Theory</p> <p>a. History of Systemic Thinking (includes models of family and systemic therapy, systems and communication)</p> <p>b. Contemporary systemic theories</p> <p>c. Contextual and Relational Frameworks</p> <p>d. Epistemology as an influence on theory development</p> <p>e. Individual and family dynamic processes over time (includes theories of</p>	<p>Minimum 500 hours on specific systemic therapy (500-800 on general psychotherapy)</p> <p>1. Systemic Theory (as specified in n.1 of Pathway 1)</p> <p>EAP Core Competences as defined in the domains:</p> <p>2. Professional, Autonomous & Accountable Practice</p> <p>3. The Psychotherapeutic Relationship</p> <p>4. Exploration (Assessment, Diagnosis & Conceptualization) (as specified in n.2 of Pathway 1)</p> <p>5. ‘Contracting’ (Developing Goals, Plans & Strategies)</p> <p>6. Various Techniques & Interventions (as specified in n.3 of Pathway 1)</p>

	<p>individual and family life-cycle development)</p> <p>f. Recognition of a range of family forms and different social systems</p> <p>g. Positive and strength-based understanding that counters normative ideas</p> <p>2. Relational understanding of human conditioning and suffering (instead of psychopathology: general and systemic)</p> <p>a. Social and emotional stressors including trauma</p> <p>b. A critique of general psychopathological understandings with a systemic relational view</p> <p>c. Recognition of structural and contextual tensions and injustices as opposed to pathologizing the individual or the family.</p> <p>3. Systemic models of change and the range of systemic interventions</p> <p>a. Risk assessment and the appropriate interventions</p> <p>b. Mental Health (includes psychological models and therapies)</p> <p>4. Research</p> <p>a. Research evidence for family and systemic interventions</p> <p>b. Understanding research methodology</p> <p>5. Ethical issues and Cultural Sensitivities and Social Justice</p> <p>a. Decolonising theory and anti-oppressive and culturally sensitive practices</p>	<p>7. Completion & Evaluation of the Psychotherapy</p> <p>8. Collaboration with Other Professionals</p> <p>9. Use of Supervision, (Peer) Intervention and Critical Evaluation</p> <p>10. Ethics and Cultural Sensitivities (as specified in n. 5 of Pathway 1)</p> <p>11. Management & Administration</p> <p>12. Research (as specified in n.4 of Pathway 1)</p> <p>13. Prevention & Education</p> <p>14. Management of Change, Crisis & Trauma Work</p> <p>https://www.europsyche.org/Portals/0/media/docs/ECP-document-version-9-0-voted-AGM-Vienna-March-2025.pdf?ver=RRjvCckPafb8W7TAL3MbKw%3d%3d</p> <p>https://www.europsyche.org/portals/0/media/docs/Final-Core-Competencies-v-3-3_July2013.pdf</p>
CLINICAL HOURS	<p>Minimum 300 hours</p> <p>(Replacing 2011 “1/3 to ½ the overall training”)</p> <p>1. Working with a range of mental health problems</p> <p>2. Both direct work with families and indirect</p>	<p>Minimum 300 hours</p> <p>This will include sufficient psychotherapeutic practice (not less than 300 hours) under continuous supervision (not less than 150 hours) appropriate to the psychotherapeutic modality and will be at least two years in duration. These hours (above) are “direct contact”</p>

	<p>observing/discussing the work of others</p> <ol style="list-style-type: none"> 3. Clientele: with families, couples, individuals, groups and organisations. Adequate experience across client groups to ensure psychotherapy competencies are embedded. 4. Include independent practice (without a supervisor present; 250h already required by CIM; n.4 of Pathway 2) 5. Supervision of different types with a significant component of 'live' supervised practice 	<p>hours, which requires the presence (face-to-face or online) of a trainer, therapist or supervisor. Non-contact hours, such as preparation, personal study time, peer group work and own learning, are counted additionally.</p> <ol style="list-style-type: none"> 1. Working with a range of mental health problems 2. Both direct work with families and indirect observing/discussing the work of others 3. Clientele: with families, couples, individuals, groups and organisations (A considerable proportion of clinical hours should be non-individual therapy sessions, ie. with more than one person as part of the therapy) 4. Include independent practice (without a supervisor present) 5. Minimum 125 - 150 hrs in a Mental Health Placement/Setting 6. Minimum. 150 hrs of face-to-face (presence or online) supervision to cover a minimum 300 hrs of direct work. 7. Supervision of diverse types (live, video, retrospective) with a significant component of 'live' supervised practice is strongly recommended preferably in training teams with supervisor present. 8. Preparation, personal study time, peer group work and own learning, are counted additionally
<p><u>PERSONAL and PROFESSIONAL DEVELOPMENT HOURS</u></p>	<p>Minimum 120 hours</p> <p>Self-Reflexivity as a core component of the training to ensure that the trainees can identify their own involvement and contribution to the process of therapy, and it can be achieved through various modalities like e.g.:</p> <ol style="list-style-type: none"> 1. personal therapy, 2. group work, 3. family of origin work (e.g. using genograms) 4. direct work with the trainee's own family 5. supervision 6. methods involving self-reflection 	<p>Minimum 250 hours</p> <p>Personal Psychotherapeutic Experience (2023 version which is now updated). This should be taken to include training analysis, self-experience, and other methods involving elements of self-reflection, therapy, and personal experience (not less than 250 hours) normally spread over 4 years.</p> <p>No single amount is agreed by all psychotherapy methods. All training should include arrangements to ensure that the trainees can identify and appropriately manage their involvement in and contributions to the processes of the psychotherapies that they will practise in accordance with their specific methods.</p>

	<p>(There was no amount of time specified in 2011 EFTA standards)</p>	<p>Please note that EAP have published March 2025 Training Standards - which stipulates that psychotherapists <i>need to experience in-depth psychotherapy themselves. This total number of sessions should not be less than 250 hours, in an individual and/ group setting, normally spread over 4 years'</i></p> <p>The meaning of 'in depth psychotherapy' is still being discussed with EAP, to clarify what methods will meet this requirement, but we are confident that our current systemic modality will be upheld.</p>
<p>Mutual Recognition of Qualifications in Europe</p>	<p>The EQF refers to European Qualifications Framework (EQF) Level 7</p> <p>It is aligned to the Higher Education landscape.</p> <p>Question TF continues to consider Would 900 hours fit with EQF - level 7?</p> <p>It is not a key issue at the moment for EFTA but may be as the higher education landscape changes.</p>	<p>European Accredited Psychotherapy Training Institutes - EAPTI's are encouraged and recommended to design and develop their psychotherapy training courses at European Qualifications Framework (EQF) Level 7. Ideally, they would register their course with the National Qualifications Framework agency or bureau in their country.</p> <p>Courses that are accredited by or affiliated to a university at postgraduate level would imply that their training is recognised as being at EQF Level 7.</p>

Appendix 2: Application Process and Documentation

The following documents will be required from Institutes applying for Programme Recognition and includes:

1. *Application Form* including a range of Specified Documents
2. *Template to Summarise Hours Summary across Each Element* – Theory; Clinical and Personal and Professional Development
3. *Template to Summarise Programme Features and Cross Referenced to Programme Documentation*