

EART BOOK OF REGULATIONS FOR REALITY THERAPY PSYCHOTHERAPY TRAINING

1. INTRODUCTION

1.1. RATIONALE

Based on article 4 and 35 of the Statute of the European Association for Reality Therapy (EART) the Book of Regulation is the document that defines educational standards, conditions and ways of obtaining the title of RT Psychotherapist.

1.2 PHILOSOPHY

The creator of Reality Therapy (RT) is Dr. William Glasser. Reality Therapy is a holistic approach to psychological well-being and the management of psychological problems and offers distinctive knowledge in the domain of psychotherapy. Reality therapy is based on Choice Theory psychology and understands the locus of control to reside inside the person. It believes in the creative potential of human beings and understands human behaviour as being always purposeful and implicitly circular, not linear, in causality.

1.3 AIMS

This Book of Regulation upholds the mission of the William Glasser Institute (WGI) and EART. It provides educational standards, conditions and ways of obtaining the title of RT Psychotherapist (RTP) in accordance with the standards and criteria of WGI and of the European Association for Psychotherapy (EAP).

1.4. ACCREDITED TRAINING INSTITUTES

The Expert Council of EART accredits training institutes providing RT psychotherapy training in Europe. The individual training institute sets training fees

1.5. TRAINING PROGRAMME DESIGN

The full programme of training in the psychotherapeutic school of Reality Therapy lasts a minimum of 5 years (part time). It is divided into two phases. Phase One is developed and set out by WGI. Phase Two is developed and set out by EART. The contents are divided into 16 modules, which require a minimum of 1489 hours of training. The training programme in each country is in accord with the requirements that may be set by the NUO (see Glossary) of individual countries in accordance with EAP requirements.

2. ENTRY REQUIREMENTS

To train for RTP an aspiring candidate needs the following:

1. Completion of Phase One training in RT
2. A minimum of a Bachelor's degree in human sciences (medical, psychological, social, educational, etc) or equivalence.

If the aspirant for RTP has a degree in a non-humanistic discipline, then s/he is obliged to compensate for the gaps that are identified in his/her required knowledge. The missing areas of knowledge will be defined in an individual program arranged by the RT training institute and the aspirant. This individual programme should be completed during the Phase Two.

An undergraduate aspirant can exceptionally become a candidates for RTP if s/he graduates with a humanistic degree during Phase Two of RTP training.

2.1 ENTRY INTERVIEW

Before Phase Two a participant needs to attend an entry interview based on the recommendation of one of his previous teachers from Phase One, and on a written self-evaluation. In the written self-evaluation the participant explains his/her motivation and personal potential for psychotherapist's profession. The Entry Interview Board is composed of at least two faculty members (see Glossary) who teach in Phase Two. The aim of the interview is to review entry requirements with the participant and through cooperative self-evaluation to assess if the participant is suited to the profession of psychotherapy.

2.2 ACCEPTING THE CONDITIONS OF TRAINING AND ETHICAL PRINCIPLES

If the Board and participant agree that the candidate is suited to psychotherapy training, s/he needs to sign an agreement that accepts both the conditions of the training programme and the Code of Ethics of EART. Before the participant signs the agreement s/he needs to receive and read the documentation relevant to RTP training.

3. CURRICULUM

3.1 COMPONENTS OF THE CURRICULUM

Training for RTP is balanced between theory, practice and personal experience. These three components of the programme are:

3.1.1 THEORETICAL STUDY

- Choice Theory, Reality Therapy and conventional psychopathology
- Reality Therapy and other approaches: different epistemologies, different understanding of life, personality and behaviour
- RT and theories of change
- Assessment and intervention in RT
- Multicultural dimension of the RT and understanding of social and cultural issues in relation to psychotherapy and
- Multiple applications of Choice Theory

3.1.2 REALITY THERAPY PRACTICE

- Practicing RT in training settings under Faculty supervision
- Practicing RT either within mental or social setting or equivalent – either with individual clients, families, or groups under regular supervision, not necessarily by a Reality therapy psychotherapist.

3.1.3 PERSONAL PSYCHOTHERAPEUTIC EXPERIENCE

- Continuous self-evaluation of personal beliefs and behaviour during the training;
- Experience of and reflection on the relationships amongst learning group members and between individual and trainer;
- Personal development through a process of making and implementing plans for raising the quality of life, journaling, peer group experiences, portfolios, etc.
- Personal psychotherapy

3.2 METHOD

The main philosophy of teaching and personal development in our training is experiential. During the training participants are continuously encouraged to evaluate the application of the concepts of CT and RT in their own life before starting practicing them with clients. The core principle is that the concepts need to be internalised by the RTP candidates before s/he can ethically or effectively use them with others.

3.2.1. HOW WE TEACH THEORY

We use comprehensive and diverse theoretical and didactic lectures.

- Instructors' lectures combined with group discussion
- Lectures of the author of CT and RT and other successful RTP on videotapes and audiotapes combined with group discussion;
- Participants' lectures combined with group discussions
- Analysing filmed materials on the topics related to the course
- Critical essays written by participants on suggested psychotherapy literature
- Discussions initiated by participants
- Recommending the lectures of other psychotherapy schools
- Recommending relevant literature
- Teaching by modelling.

3.2.2. HOW WE TRAIN PSYCHOTHERAPEUTIC SKILLS

We train participants therapeutic skills through:

- Role play settings with various clients and analysis including self-evaluation, peer feedback and supervisor's feed back
- Self-evaluation of demonstrated skills and evaluation of feedback from others has a central role in continuous quality development in RTP training
- Demonstrations of RT with various clients by the instructor/supervisor and analysis of process
- Helping participants to improve their skills through written case studies with various clients
- From their effective clinical practice by giving them feed back
- Individual supervision
- Group supervision
- Participants improve their skills by practicing RT in their own clinical practice

3.2.3. HOW WE SUPPORT PERSONAL DEVELOPMENT

During the training we encourage the participants to use CT ideas and insights, and through a process of self evaluation:

- To improve the quality of relationship with other group members
- To improve the quality of the relationship in their personal life
- To do written work (self-evaluation, diary, portfolio, extracts from the reading)
- To make co-operative self-evaluation with supervisor and group members
- To experience client's role during the role-play;
- To experience the psychotherapy as a client during the personal psychotherapy
- To review his/her life stories and experiences from the CT perspective and to deepen personal insight and understanding.

3.3. STRUCTURE AND CONTENT OF RT PSYCHOTHERAPY TRAINING

The Curriculum outlined below is the core curriculum leading to accreditation as a RT psychotherapist. Each country offering the programme will develop its own detailed training structure and curriculum based rigorously on the structure and content outlined below. The timing of modules, the exact time given to each topic, etc. are a matter for each country to decide. If some content is not offered in one module, it must be offered in another; if the number of hours is less in one module, it must be compensated for in another, and so on. These variations are necessary depending on the kind of aspirants, teachers and history of teaching CT/RT in different countries.

The training is conducted using the philosophy and ideas of Choice Theory, so that participants not only gain theoretical understanding of these concepts and skills but also experience applications of leading and facilitating groups and practicing psychotherapy according to CT/RT.

During the whole programme, there is a combination of lectures, demonstrations, role-plays, practice, experiential exercises, and discussions including discussion about the similarities and differences among different approaches to human psychological problems.

3.3.1 STRUCTURE AND MINIMUM HOURS OF THE TRAINING

Phase One (RTC)

Organized training

Basic Intensive Training	4 days –	30 hours	Phase One 150 – 210 hours
Basic Practicum	8 practicums sessions –	30 – 60 hours	
Advanced Intensive Training	4 days –	30 hours	
Advanced Practicum	8 practicums session –	30 – 60 hours	
Certification Process (RTC)	4 days –	30 hours	

Phase Two (PCP)

Organized training

Post-Certification Programme I. (PCP I)			Phase Two 300 – 360 hours
Workshop: CT/RT and psychological problems I.	4 days –	30hours	
Practicum I.	4 practicums sessions –	30hours	
Workshop: CT/RT and psychological problems II.	4 days –	30hours	
Practicum II.	4 practicums sessions –	30hours	
Post-Certificate Programme II. (PCP II)			Phase Two 300 – 360 hours
Workshop: CT/RT and working with group I.	4 days –	30hours	
Practicum I. –	4 practicum sessions –	30hours	
Workshop: CT/RT and group psychotherapy II.	4 days –	30hours	
Practicum II. –	4 practicum sessions –	30hours	
Post-Certificate Programme III. (PCP III)			Phase Two 300 – 360 hours
Workshop: CT/RT specific contents I.	4 days –	30hours	
Workshop: CT/RT specific contents II.	4 days –	30hours	
Group Supervision Sessions:	10 sessions –	60hours	

Additional Activities outside of the organized training – both phases

Written examples – 6 at BP (3h / 1example)	18 hours	I. + II. Phase 509 hours
Written examples – 6 at AP (5 hours / 1 example)	30 hours	
Supervised case studies – 6 at PCPP I. (10 hours / 1 case study)	60 hours	
Supervised case studies – 6 at PCPP II. (10 hours / 1 case study)	60 hours	
Analysing literature and preparing the presentations	150 hours	
Peer (supervision) review (16 hours yearly / 5 year)	80 hours	
Individual sessions with supervisor (9 hours yearly / 4 year)	36 hours	
Personal therapy (within 5 years)	25 hours	
Other personal experiences: (journal, portfolio, plan of personal development)	50 hours	

Clinical practice

The clinical practice begins during year 2: Advanced Practicum

I. + II. Phase
450 hours

Demonstration of the psychotherapeutic competency

20 hours

Summation

Theory and training of therapeutic skills	540
Supervision	216
Personal psychotherapeutic experience	263
Clinical practice	450
Demonstration of the psychotherapeutic competency	20
Total	1489 hours

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3.3.2 CONTENT OF THE TRAINING

Phase One (Reality Therapy Certification)

Organized Training

- a) The history and development of Reality Therapy (RT) and Choice Theory (CT)
- b) CT compared to other main psychological theories about human behaviour
- c) Basic concepts of Choice Theory including the understanding of personality in CT:
- d) Application of Choice Theory to understanding self and relationships
- e) CT as the theoretical basis for:
 - Psychotherapy;
 - Counselling;
 - Well-being and Mental Health;
 - Lead Management;
 - Quality Schools
- f) Reality Therapy (RT) method of helping clients through therapy:
 - Diagnosis and assessment in Reality Therapy (RT)
 - Procedures in RT
 - The meaning and central role of connectedness between the therapist and his client
 - The meaning and importance of the client's connectedness in his/her everyday life
 - Methods and techniques in RT
 - Metaphors, paradox and humour in RT
- g) Understanding RT compared to other approaches
- h) Origin of ineffective behaviour in the Choice Theory model
- i) RT applied to a range of client groups
- j) Psychotherapy and Lead Management: Theoretical, Practical and Ethical issues.
- k) Applications of CT in diverse contexts (Therapy, Education, Mental Health and Management)
- l) Multicultural dimensions of CT and RT
- m) Ethics in psychotherapy
- n) Introduction to William Glasser Institute, EART, National RT institutes / associations
- o) Practical training: exercises, role-plays, demonstrations, discussions

Required additional activities outside of organized training

Plan of personal development, portfolio, self-evaluation, journal
 Personal therapy
 Written case studies
 Individual supervision
 Peer group work
 Literature Review (Reading list in Appendix)

Certification Process

- a) Candidates' presentations containing a clear understanding how to use CT in different contexts.
- b) Demonstration of RT skills in different contexts: demonstration of competence in working with familiar and unfamiliar client groups.
- c) Group supervision via participants' and trainer's feed-back in the certification group
- d) Co-verification

Phase Two (PCP)

Organized Training

- a) Choice Theory understanding of conventional psychopathology compared to other main theories of psychopathology
- b) Reality Therapy treatment of conventionally diagnosed psychopathological human behaviour: anxiety disorders, mood disorders, psychotic disorders, personality disorders, psychosomatic disorders, sexual dysfunction, addiction and trauma.
- c) Theory of change in Reality Therapy
- d) Reality Therapy, Choice Theory diagnostic approaches and treatment plans.
- e) CT and relationships, including marriage and family problems
- f) CT/RT and problems of raising children
- g) Role of psychotherapist in Reality Therapy
- h) Reality Therapy with individual client
- i) Reality Therapy with couples
- j) Reality Therapy with family
- k) Reality Therapy in comparison to other important psychotherapy approaches
- l) CT/RT and specific contents requested by participants
- m) Ethical questions in Reality Therapy.
- n) Role of Supervision in Reality Therapy
- o) General theories about leading and facilitating groups
- p) The Choice Theory approach to the understanding of group development and dynamic and comparison to other approaches
- q) Using Choice Theory with groups: The development of the group through sequential phases and recurrent crises and the way participants satisfy their basic needs.
- r) Characteristics of different kind of groups and different participants in a group
- s) Training in leading and participation in the 'Choice Theory Focus Group' as self-help group designed to improve public mental health and well-being
- t) Training in leading group reality therapy sessions with clients with a variety of psychological problems
- u) Similarities and differences between lead management, counselling and psychotherapy
- v) Ethical questions in working with groups
- w) Practical training : exercises, role-plays, demonstrations, analysis, discussions
- x) CT/RT and specific topics regarding group work requested by participants
- y) Group supervision

Required additional activities outside of organized training

Plan of personal development, portfolio, self-evaluation, diary

Personal therapy

Written case studies

Individual supervision

Peer group work

Literature Review (core of readings in appendix)

Clinical practice

It is the participant's responsibility to find clinical practice placement. Clinical practice is set within mental or social health settings or equivalent and includes clients with a variety of problems. It includes work with individual clients, couples, family and group. Clinical practice is the basis for training from the second year of Phase One of the training programme. Institutions that offer clinical practice to participant should have organized

regular supervision of the therapeutic work. If not, the participant can choose for that purpose one of his/her training supervisors.

Demonstration of Psychotherapeutic Competency

The final demonstration of psychotherapeutic competency is done through a viva, where the candidate presents to the Accreditation Panel:

- a) His/her professional development in Reality Therapy
- b) A Case Study: Complete description and analysis of work with one client from beginning to end of therapy.

3.3.3 TRAINING RECORD

Participant's progress is recorded in the Training Record. It is created as unified document and valid for all training institutes of EART.

4. FACULTY FOR RTP ACCREDITATION TRAINING

4.1 Faculty are involved in the training in different roles (see Glossary). The training programme for Faculty is designed by the training institutes in each country in accordance with the criteria and standards of WGI and EART.

- a. **Instructors** who lead the workshops in Phase One and Phase Two
- b. **Practicum Supervisors / trainers** who lead the training at Practicum Sessions
- c. **Supervisors** who lead individual supervision of effective clinical practice. These may be WGI Faculty, but must be RT psychotherapists.
- d. **Personal psychotherapists** who offer personal psychotherapy during the training (They cannot be in the same time in any other teaching role regarding the candidate-client)

4.2 Different tasks in the course of RT education demand different competencies

Faculty in both phases of the training should be recognized by WGI.

In Phase Two all faculty, as well as having WGI recognition, should be recognized as RTP by EART.

The training institute has a list of those who are involved in training program as: instructors, Practicum supervisors, supervisors and personal therapists

4.3 All faculty as RTP are required to support quality and ethical practice with obligatory 'Continual Professional Development' (CPD). They are required to complete an average of 50 hours per year of CPD (total of 250 hours over a period of the last 5 years).

This CPD can be taken in the following forms:

- a) advanced or additional professional psychotherapy courses;
- b) professional supervision for psychotherapy practice / clinical / group work and peer supervision
- c) psychotherapy conference / symposium attendance
- d) professional activities in psychotherapy (e.g. being elected to a board or a committee and attending meetings)
- e) participation in extra psychotherapy training as a supervisor / instructor / researcher

Minimum 250 hours shall consist of no more than 75 hours from any one category.

5. EVALUATION AND ASSESSMENT

5.1. Assessment procedure

Training in reality therapy psychotherapy is based on participant's self evaluation and co-verification with the supervisor and group members. At the end of each stage of the training process, the participant is also involved in an extensive co-verification process with his/her supervisor. This means that the participant discusses his/her progress with the supervisor and gets a recommendation for continuation of training. If he/she is not ready to move to the next stage of training, the supervisor will help him/her to make a plan to get ready. In that case he/she will make a self-evaluation again after the work is done and progress is evident, and with the supervisor will engage in a co-verification process. There is particular emphasis on co-verification before starting the Phase Two of training, and before Final Demonstration of Psychotherapeutic Competency.

5.2 Stages of Assessment procedure

Significant assessment in RT psychotherapy training program is present in between specific levels and at the end of the Phase One and Phase Two.

Phase One:

Basic Intensive Training

Self evaluation, co-verification, recommendation by supervisor

Advanced Intensive Training

Self evaluation, co-verification, recommendation by supervisor

Certification Process - Demonstration, self-evaluation, co-verification

Recommendation by Certification instructor,

Phase Two:

Pre-entry:

Written self evaluation,

Recommendation from Faculty member from Phase One Training Programme

Entry Interview – co-verification process

Post-Certification Programme:

At the completion of each phase of training there is a process of

Self evaluation,

Co-verification with Instructor/practicum supervisor, and

Recommendation by instructor/practicum supervisor for continuation to the next stage.

Final Demonstration of Psychotherapeutic Competency:

Following the successful completion of the final module of the Training Programme, the candidate chooses a consultant from Faculty who works with the candidate in preparation for the Final Demonstration. This is again a process of self-evaluation, co-verification and recommendation by the consultant. When the candidate and the consultant concur that the candidate is ready, then the candidate presents for the Final Demonstration, as outlined in 3.3.2 above.

5.3 The Board for Final Demonstration

The Board is organized by the training institute and includes 2 institute Faculty and one expert in psychotherapy, who is not trainer of the institute.

6. AWARDING PROCEDURE

Awarding procedure is defined in the separate document

7. ETHICS

Ethics is regulated in the Code of Ethics and there is a Complaint and Appeals Procedure