



## **ICP Standards for Working Therapeutically with Children and Adolescents in Psychotherapy**

### **1. Introduction**

It is generally recognized that there are common elements in all psychotherapy training courses including modality specific philosophies, theories, and skills. However, therapeutic work with children and adolescents (henceforth referred to as children) requires different knowledge, skills, and competencies. It is recommended that the ideal way to acquire these skills is within a training course that includes content and assessment components directly related to working with children.

Psychotherapists working with children need to demonstrate competence in taking into account the developmental stage of the child they are working with. They should also take cognisance of their level of dependence and their need for appropriate care. This document emphasises the centrality of the therapeutic relationship and the importance of the availability of the therapist for genuine congruent relationships. This ability to form a therapeutic working relationship with children and their families is a key skill and needs to be complemented by the therapist's ability in developing a comprehensive and collaborative understanding of the child's therapeutic needs. Each modality will approach the necessary competencies differently. Some may view the primary client as the child while others will consider child focussed therapy as happening within the family system where the family is the client rather than the individual child.

In addition to the above there is a need to develop competence in working with multi-disciplinary teams and/or other systems of professionals that may be involved in the child's life.

To address these differences of working with children ICP have adopted a set of eight standards with implementation being the responsibility of each individual section. With due regard to these standards, each modality will determine the specific requirements for their own members in regard to working with children. Each standard addresses a core area. As

there is much diversity in modality approaches these core areas will need to be addressed in different ways to match the unique approach of each modality.

Each standard is deliberately broad based to allow modalities to have flexibility about how it may be implemented, yet at the same time setting an agreed common standard for safe practice. It is acknowledged that the modalities within ICP have diverse ways of approaching psychotherapy with children. These approaches range from indepth one to one work with children to methods that work with the child within the context of their family and their wider social milieu.

## **2. What is a Child**

For the purposes of this document the ICP are using the Irish legal definition of child which is:

“A child is defined as any person up to the age of 18 years; adolescence defines that period of childhood extending from puberty to adulthood” (In accordance with Irish law and the UNCRC).

## **ICP Standards for working therapeutically with children and adolescents in psychotherapy**

### **Standard 1: TAC compliant training**

In keeping with ICP general requirements for recognition of training courses and registration of members, it is essential that all those who are training in psychotherapy, including those whose client groups will include children, complete a course that is fully compliant with European Association for Psychotherapy and European Certificate of Psychotherapy standards (see appendix 1).

### **Standard 2: Work in accordance with EAP competencies for working with 'special' client groups as described at 10.2.4 of the Core Competencies of a European Psychotherapist.**

The European Association of Psychotherapy agreed and adopted [Core Competencies of a European Psychotherapist](#) at the EAP AGM in July 2013. These core competencies refer specifically to practice with children in Domain 10: Ethics and Cultural Sensitivities, Clause 10.2.4. This provides a relevant competency standard as a resource and guide for European Associations in relation to working with 'special' clients (appendix 2). This clause will facilitate each modality in ensuring that they determine and agree processes and procedures to ensure compliance.

### **Standard 3: Knowledge of child development and modality specific integration into practice**

Developmentally appropriate practice requires the psychotherapist to integrate an indepth knowledge of child development (biological, psychological, emotional, social, and linguistic), and awareness of the particular dependancy and vulnerability of children, into their practice.

### **Standard 4: Recognition, respect and knowledge of the child's individual human rights**

Children have the same human rights as adults, including the right to self-determination. Such rights are only constrained by their need for due safety, protection and care and the rights of their parents and carers.

### **Standard 5: Ethical, safe and competent practice as established by each modality**

Each modality will ensure that their Code of Ethics is sufficiently robust to ensure that members who work with children are competent to do so, and engage in safe and ethical practice with each child client and their family (as appropriate).

### **Standard 6: Recognition of the role of the family and other systems in the life of the child**

Psychotherapists who work with children must give due consideration to the experience of children within the context of their family and other systems. This

requires an understanding of and ability to work with the familial and social context of the child.

**Standard 7: Knowledge of current legislation in relation to the protection and safeguarding of children**

Working with children takes place within specific legal and statutory requirements. It is incumbent on all who engage in this work to maintain an up to date knowledge base in regard to child protection and relevant legislation.

**Standard 8: Ongoing supervision and appropriate continuing professional development**

Psychotherapists who work with children must comply with all ethical and practice requirements in relation to clinical practice, supervision and continuing professional development. Modalities will consider any specific requirements that may apply in relation to:

- appropriate supervision and/or supervisors for those who practise with children
- areas of CPD that may be required.

## Appendix 1

### European Certification of Psychotherapy Requirements

The following is taken from the Training Accreditation Committee of the European Association for Psychotherapy and the European Certificate of Psychotherapy text.

#### 9. Training programme

9.1 Total length: 3 200 hours, spread over a minimum of 7 years

9.2 First 3 years of general training in human sciences (Medical, psychological, social, educational, or equivalent). Estimated length = 1800 hours

9.3 Minimum of 4 years of training in a specific modality = 1400 hours, for example, divided into:

9.3.1 250 hours of *personal psychotherapeutic experience*, or equivalent in individual or group setting

9.3.2 500 – 800 hours of *theory or methodology*, including psychopathology, in accordance with the usual standards of the modality

- 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
- Theories of psychopathology
- Theories of assessment and intervention

9.3.3 300 – 600 hours of *clinical practice* with clients/patients

- Either within a mental or social health setting, or equivalent

- Either with individual clients/patients, families or groups, under regular supervision

Even if this practice is not directly organized by the institute, it remains its responsibility.

9.3.4. 150 hours of *supervision* of an effective clinical practice of the trainee.

9.3.5. Practice does normally not take place in the first two years of the training.

Note: Exceptions of early practice must be justified by the training institution that the student has prior knowledge of practice or that the institute offers special condition for such practices.

## Appendix 2

### Particularly relevant clauses from the European Association of Psychotherapy [Core Competencies of a European Psychotherapist](#) Document

10.2.4 Adapt practices if working with 'special' client groups: which involves - when working with clients where additional specialist competencies may be required and/or where their capacity to give valid consent may be in some way restricted or impaired, as in the case of children, people with learning disabilities, people with communication difficulties, people who have experienced strokes or other mental & physical impairments, or those experiencing mental illness or any extreme or altered states – obtaining further training and awareness, additional information and input, and, where appropriate, experienced supervision, (especially if one's usual supervisor is not experienced in the particular area); obtaining valid consent from, agreeing responsibilities with, checking out the patient/client's needs, and generally communicating openly about the process of the therapy with parents, guardians, or significant others (where appropriate and without breaking professional confidentiality or ethics) and recording this; when obtaining or issuing reports relevant to such a patient/client, getting the appropriate consent from other parties (parents, guardians, etc.), consulting and informing them, involving their views, and recording this; where there are any possible language or communication difficulties, ensuring translators, those familiar with other mediums of communication, or patient advocates are present, as and when needed; and that the therapeutic environment and conditions are appropriate to the patient/clients' age, developmental stage and particular needs; etc.