



EABCT Accreditation Application Form

Contact details

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Abbreviation in English:	SACBT
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General Information

Please provide information on the following:

1. How many years is your Association a full member of EABCT?

Serbian Association for Cognitive and Behavioural Therapies is a full member of EABCT for 15 years (since September 2002).

2. How many years has your Association an accreditation scheme in force?

The Accreditation scheme is in force for 20 years, since the establishment of the Association. In October 1998th, in collaboration with REBT Canter Belgrade, Affiliated Training Center of Albert Ellis Institute (New York), a structured and accredited training program in REBT was established and implemented. The training in REBT was integrated into a broader perspective of training in

cognitive and behavioural psychotherapy modalities and above the minimum of standards for Affiliated Training Centres of Albert Ellis Institute. The Association has three Serbian speaking trainers who were accredited supervisors of Albert Ellis Institute.

In September 2002 the Association became a member of EABCT and in 2003 it submitted a detailed training program of the Association to the EABCT Committee for training standards. The total duration of training is four years with 3 levels of competence. Training includes theoretical and skills training delivered in the format of workshops (300 hours), group supervision (60 hours) and individual supervision (tape recordings of 24 therapy sessions). Primary and Advanced level last for one year each and Final level of training lasts two years.

In 2006 the duration of the training program was extended to 1500 hours (four years, depending of duration of individual supervision after the fourth year of training) in order to fulfil requirements for being accredited by the Society of Psychotherapists of Serbia (national “umbrella” association). In 2007 the extended training program of the Association was accredited by the Society of Psychotherapists of Serbia. Since then, each candidate who successfully completes the training in accordance with the training standards of the Association receives a “Certificate for psychotherapy” of the Society of Psychotherapists of Serbia.

3. What are the entry requirements for professionals in your Association to start CBT training and to get your Associations’ accreditation?

Entry requirement for Primary level of training in RE&CBT:

- Diploma/Master in psychology,
- Medical Doctor or MD with specialization in psychiatry
- Diploma/Master in social work
- Diploma/Master in defectology/special education and rehabilitation
- Diploma/Master in pedagogy

Prerequisites for Advanced level of training in RE&CBT:

- Certificate of Primary level of training in RE&CBT

Prerequisites for applying for Associate Fellowship level of training (Final Level):

- 1) Certificate of Advanced level of training in RE&CBT
- 2) Supervision of five 20-minute segment therapy recordings supervised by at least two different supervisors after completion of Advanced level of training

NOTE: Candidates with diploma/master degree in defectology /special education and rehabilitation, social work and, pedagogy must complete one year University postgraduate training in clinical psychology and psychopathology in order to be eligible for supervision of five 20-minute segment therapy recordings after completion of Advanced level of training and prior to applying for the Final level of training.

4. What is the total length of the CBT training you organize or require for accreditation?

The CBT training starts after completion of University training in eligible basic profession. The length of the CBT training after completion of University training is 4 years, with three additional workshops which candidates must choose from the more comprehensive list with many workshops (pages 4-5). The training is divided in three stages/levels.

1. Primary level of training in CBT

This stage of training consists of theoretical part, peer-counseling supervision and practical exercises in therapeutic skills. Training lasts one year and it covers 220 hours, of which:

- 120 hours of theoretical and skill training delivered in 16 workshops
- 100 hours of independent study

2. Advanced level of training in CBT

This stage of training consists of theoretical part, practical exercises in therapeutic skills and peer-counseling under supervision. Training lasts one year and it covers 235 hours, of which:

- 135 hours of theoretical and skill training delivered in 18 workshops
- 100 hours of independent study

3. Final level of training in CBT

This stage of training consists of theoretical part, group and individual supervision of candidate's case presentations/formulations and session recordings. Training lasts two years. It covers:

- 270 hours of theoretical training and group supervision delivered in 36 workshops
- 200 hours of independent study

The Final stage must include:

- supervision of 24 candidate's session recordings (fourteen supervisions of 20-minute segments of sessions and ten supervisions of full therapy sessions)
- four written up case studies
- four written self evaluations of four transcripts of candidates sessions
- presentations at expert meetings, which must relate to the area of behavioural and cognitive therapies and be carried out during the training period

5. **What is the content of the theoretical courses you organize or require? Please provide detailed curricula.**

Primary level topics:

1. Historical development of CBT (three stages of CBT: Behavioural therapy, Second wave of CBT, Third wave therapies)
2. REBT in the context of CBT; distinctive characteristics of REBT (the philosophical basis, Ellis's theory of emotional disturbance, conditional vs. unconditional self-acceptance; ego vs. discomfort disturbance; demands vs. preferences; inferences vs. evaluations)
3. Goals of REBT: 1) personal development and improvement of quality of life ; 2) prevention of psychological disorders and 3) treatment of psychological disorders
4. Research in REBT/CBT, The concept of evidence based psychotherapies
5. The therapeutic relationship and basic relationship skills in CBT/REBT
6. Understanding and assessing cognitions of various dysfunctional emotions and maladaptive behaviours
7. Socratic method/guided discovery method and other cognitive techniques
8. Behavioural experiments and other interventions; homework assignments
9. Structure and format of the therapeutic session; The course of therapy
10. Learning from errors in REBT

Advanced level topics:

1. Achieving change through a variety of styles of cognitive restructuring irrational beliefs (guided discovery, the use of metaphors and humour; didactic presentations, therapist disclosure etc.)

2. Types of arguments in cognitive restructuring irrational beliefs (logical, empirical, pragmatic type of argumentation)
3. Clinical strategies, flexibility and compromises in psychotherapy
4. Modification of various negative beliefs and schemas (e.g. danger, discomfort, uncertainty etc.)
5. Modification of low self-esteem vs. achieving unconditional self-acceptance
6. Overcoming resistance in psychotherapy; Transference and countertransference issues
7. Ethical approach and ethical dilemmas in psychotherapy
8. Acceptance and mindfulness in REBT/CBT (Eli's concept of unconditional self/other/life acceptance; mindfulness based CT; ACT)
9. Problem solving vs. solution focused approach in REBT/CBT
10. Social skills training and assertive behaviour
11. Anger management
12. Dealing with procrastination

Associate Fellowship level topics:

1. Transdiagnostic approach vs. specific diagnoses approach in psychotherapeutic practice
2. Understanding the person in the context of his/her problems and strengths (REBT/CBT case formulation approach)
3. REBT/CBT treatment for Social phobia
4. REBT/CBT treatment for Health anxiety
5. REBT/CBT treatment for Panic disorder
6. REBT/CBT treatment for Obsessive-compulsive disorder
7. REBT/CBT treatment for Specific phobias
8. REBT/CBT treatment for Generalized anxiety disorder
9. REBT/CBT treatment for Post-traumatic stress disorder
10. REBT/CBT treatment for Major depression
11. REBT/CBT treatment for Bipolar disorder
12. REBT/CBT treatment for Personality disorders
13. REBT/CBT treatment for Psychotic disorders
14. REBT/CBT treatment for Eating disorders
15. REBT/CBT treatment for Body dysmorphic disorder
16. REBT/CBT for relationship problems in couples and families

Besides mentioned core RE&CBT workshops candidates must choose three additional workshops from the list below:

17. Schema therapy for Borderline personality disorders
18. Dialectical behavioural therapy for severe personality disorders
19. Basic training in Acceptance and commitment therapy
20. Basic training in Compassion focused therapy
21. REBT/CBT for problems in children and adolescents
22. Combined pharmacotherapy and REBT/CBT

6. What is the content of the skills training you organize or require? What is the format and duration of this training?

Skill training is organized at each level of training (e.g. Primary level, Advanced level and Final level of training). The content of skills training includes three broad domains of skills:

Ability to assess, understand and formulate a client's problem(s) according to CBT model(s) using:

- effective interviewing and listening skills and appropriate verbal and non-verbal communication skills
- appropriate behavioural and cognitive assessment methods (questionnaires, rating scales, observational techniques) and understanding their validity and reliability.
- REBT/CBT case formulation approach in order to understand client in the context of his problems and strengths and select and apply appropriate interventions
- summarising and contrasting CBT theoretical frameworks with different types of therapies to ensure that the appropriate model of intervention is applied.

Ability to apply an appropriate range of CBT interventions using:

- broad knowledge and skills in implementing a range of CBT interventions that are effective and evidence-based.
- relevant information from the fields of psychology and other disciplines that have contributed to the knowledge base of CBT.
- knowledge on normal and abnormal behaviour (e.g., psychopathology), developmental and social contexts which are relevant to the area in which the practitioner works.
- collaborative way of working with clients (e.g. explaining at all points during therapy the relevance of the interventions used and seeking consent etc.).
- appropriate evaluation methods (questionnaires, rating scales, observational techniques) to assess the impact of the interventions undertaken.

Ability to build, maintain and conclude a therapeutic working relationship including capacities to:

- set and maintain appropriate professional boundaries
- be able to effectively assess the risk of harm to clients, therapists or others
- be aware of and consider ethical and legal principles as applied to therapeutic relationships
- have an understanding of the impact that their own cognitive, emotional and behavioural characteristics (personal development) can have on their work, and to have the willingness and ability to change, making appropriate use of supervision and feedback

The methods to acquire therapists' competences during Primary and Advanced level include:

- theoretical lessons
- readings
- live demonstrations of therapeutic sessions with discussion (modeling and observation)
- video demonstrations of therapeutic sessions with discussion (modeling and observation)
- peer-counseling under supervision (supervisee must bring their own real problem)

The methods to acquire therapists' competences during Final level include:

- having individual supervision from qualified supervisor on recorded sessions (from supervisee own caseload)
- having group supervision from qualified supervisor on recorded sessions (from supervisee own caseload)
- participation in clinical skills-training workshops with group discussion of clinical case studies
- case study and case presentations
- self-supervision of supervisee own transcribed session on self-supervision form

Duration of the training is 4 years (after University training in core profession). The skill training portion of the total training includes four main methods of training:

1. Skill demonstration is organized at each level of training.

During Primary and Advanced level of training several methods are used: 1) supervisor conducts therapy session in front of the group with one trainee who is volunteering as a client presenting his/her real life issue/problem; trainees observe and after demonstration discuss the session in small

groups; 2) video demonstration of relevant skills for each presented topic (e.g. Cognitive Therapy, Problem Solving Therapy; Therapist/client boundary challenges; Responding therapeutically to patient's anger; Overcoming procrastination; Anger management etc.) followed with group discussion after observation.

During Associate Fellowship level of training skill demonstration and observation method is in the form of video presentations of the relevant skills for each clinical workshop topic (e.g. CBT for panic disorder, CBT for social phobia; CBT for personality disorders; CBT for generalised anxiety disorder; CBT for depression etc.) followed with group discussions.

2. Peer-counselling under supervision

During Primary and Advanced level of training candidates conduct peer-counselling sessions in front of the group and under supervision of Albert Ellis Institute ITSPRC-approved Training Supervisor. Candidates bring their real life problems for each peer-counselling session. Role-play with artificial issues/problems is not allowed. During primary level of training each candidate should be 4 times in the role of the therapist and 4 times in the role of client. The same procedure is during advanced level of training (e.g. each candidate should be 4 times in the role of the therapist and 4 times in the role of client at advanced level). This means that each candidate must have four 20-minute segments of supervised sessions during the primary training and four 20-minute segments of supervised peer-counselling sessions during the advanced training. Minimum time per person is no less than twenty minutes per supervision session.

Each candidate receives feed-back from supervisor and their peers after each conducted sessions. Each candidate must receive feedback from at least two different Albert Ellis Institute ITSPRC-approved Training Supervisors, which means that during primary training two peer-counselling sessions are supervised by one Albert Ellis Institute ITSPRC-approved Training Supervisor and the other two peer-counselling sessions are supervised by other Albert Ellis Institute ITSPRC-approved Training Supervisor. The same principle applies for the Advanced level of training.

3. Group and individual supervision of candidate's session recordings (e.g. from their actual caseloads)

During Final level of training candidates receive supervision of their actual session recordings. Each trainee must bring at least 24 recorded sessions from their actual caseload (14 recordings should be 20 minutes in length, and 10 recordings should be 45 minutes full therapy sessions). The portion of fourteen 20-minutes recordings could be submitted for group supervision; however 10 recordings of 45 minutes full therapy sessions should be submitted for individual supervision.

Each trainee must have at least three different ITSPRC-approved Training Supervisors during Associate fellowship training. After receiving feedback during each supervision candidates are expected to incorporate given feedback while recording the next sessions for supervision. In group supervision supervisee receives feedback from supervisor and peers after they listen each recorded session.

4. Psychotherapy/clinical practice

Each trainee should have at least 500 hours of psychotherapy practice during training and supervision.

7. How is supervision organized? How much supervision do you require? What are the qualifications you expect your supervisors to have?

Supervision of therapy sessions from supervisee's actual caseloads is organized during Final level of training (third, fourth and fifth year of training). Each trainee should submit minimum 24 session recordings for supervision during training (14 recordings should be 20 minutes in length, and 10 recordings should be 45 minutes full therapy sessions). The portion of fourteen 20-minute recordings could be submitted for group supervision. All ten recordings of 45 minutes full therapy sessions should be submitted for individual supervision. All session recordings must be accompanied with written case formulation form consisting of background information, main problems, assessment data; problem presented in the session, RE&CBT problem conceptualisation with specific goals and treatment plan, client's strengths and/or resistance; data on suicidality or homicidality tendencies.

All supervisors are Albert Ellis Institute ITSPRC-approved Training Supervisors

A minimum of 8 clients will be treated during the period of training from assessment to completion or termination of treatment before a therapist is regarded as having completed their training. These cases will cover at least 3 types of problems and minimum 3 cases will have been closely supervised as defined above. Details of supervised clinical practice will be recorded in a training record.

The minimum supervision portion of the training during third year of training must include:

- A. Group supervision done by at least two ITSPRC-approved Training Supervisors where minimum 4 recorded work samples are presented and supervised. Minimum time is to be no less than 1/2 hour per recording. This supervision is included as part of the minimum group supervision work requirement.

The minimum supervision portion of the training during fourth year of training must include:

- B. The individual and/or group supervision of ten 20-minute segments of therapy sessions during which the candidate successfully demonstrates RE & CBT techniques

The individual supervision portion of the training during fourth and/or fifth year of training must include:

- C. The supervision of ten full therapy sessions (each 45 minutes in length) during which the candidate successfully demonstrates RE & CBT techniques

Supervision of session recordings under B. and C. (see above) must be completed by at least three different ITSPRC-approved Training Supervisors. After receiving feed-back during each supervision candidates are expected to incorporate that feedback while recording the next sessions for supervision.

- D. One final recording of a full therapy (45 minute) session with relevant client background information to be submitted for evaluation by a member of the ITSPRC who was not involved in supervision of 24 recordings supervised during training.

8. How is the acquisition of this theoretical knowledge and of the necessary personal and therapeutic skills evaluated or measured?

1. Multiple choice test at Primary and Advanced level
2. four case studies with CBT case formulations (each presenting different symptoms/problem) at the Final level of training (2000-4000 words)
3. Self-evaluation of therapeutic skills using standardized self evaluation-form to evaluate their own two transcripts of full therapy sessions

4. Record of supervision

9. How does your association organize and monitor the continuing professional development of your accredited members? What are your criteria for re-accreditation?

SACBT regularly promotes and organizes REBT/CBT Continuing Professional Development Events:

- Symposia and workshops during National Psychotherapy Congress
- Practice/skills workshops
- Specialized CBT Training (REBT/CBT for children and adolescents; CBT for couples, etc.)
- Application of REBT/CBT in non-clinical contexts (schools, organizations)
- Ethics and law in psychotherapy

10. Please describe the process of accreditation in your Association and provide evidence verifying this process (e.g., copies of related documents and certificates).

Serbian Association for Cognitive and Behavioural Therapies issues certificates to candidates who fulfil all requirements and achieve the appropriate criteria, as stipulated by the Training Standards. The Association accredits a therapist for a period of five years.

The Association's certificate confirms that a therapist has attained competencies for the implementation of cognitive-behavioural therapy including:

1. The ability to assess, understand and formulate a patient's problems in accordance with cognitive- behavioural therapy:

- to demonstrate effective interviewing and listening skills, using appropriate verbal and non-verbal communication;

- to make use of appropriate behavioural and cognitive assessment methods (questionnaires, rating scales, observational techniques) and understand their validity and reliability;

- to understand the problems in relation to cognitive-behavioural formulations;

- to summarise, compare and contrast the cognitive and behavioural theoretical frameworks with different types of therapies to ensure that the appropriate model of intervention is applied.

2. The ability to apply an appropriate range of cognitive and behavioural interventions:

- to demonstrate a broad knowledge and skills in implementing a range of behavioural and cognitive interventions that are effective and evidence based;

- to be informed by and draw upon relevant information from the fields of psychology and other disciplines that have contributed to the knowledge base of behavioural and cognitive therapies;

- to have sufficient knowledge of psychopathology and developmental and social contexts which are relevant to the area in which a therapist works;

- to work in a collaborative way with clients, explaining at all points during therapy the relevance of the interventions used and seeking their consent;

- to use appropriate evaluation methods (questionnaires, rating scales, observational techniques) to assess the impact of the interventions undertaken.

3. The ability to establish, build, maintain and conclude a therapeutic working relationship:

- to set and maintain appropriate professional boundaries within the therapist-patient relationship;

- to be able to effectively assess the risk of harm to patient, therapist or others;

- to understand and consider ethical and legal principles within the therapeutic relationship;

- to be aware of and understand the impact that their own cognitive, emotional and behavioural characteristics and responses can have on their work, and to have the willingness and ability to change, making appropriate use of supervision and feedback (personal development).

Accreditation procedure

An individual wishing to acquire accreditation and title of “Cognitive Behavioural Therapist” submits an application for accreditation to the Association which is handled by the Accreditation Commission of the Serbian Association of Cognitive and Behaviour Therapies. The application must be accompanied by all requisite annexes and certificates.

The Accreditation Commission is composed of: the President of the Association, trainers / supervisors and the accreditation Coordinator who is elected by the General Meeting of the Association. Within the period of maximum two months, the Accreditation Commission decides whether the accreditation criteria are met. The applicant who fulfils all conditions and has submitted a complete application is awarded a certificate within the same two-month period. The Association grants accreditation exclusively to its active members who have fulfilled all obligations towards the Association. Any member who pays the membership fee for the current year or for the accreditation/re-accreditation period has the status of an active member.

Re-accreditation procedure

Renewal of accreditation is done on the basis of re-accreditation criteria which require that a therapist performs the following activities during the period of five years from the previous accreditation to re-accreditation:

1. Participate in at least 50 hours of continuous training in workshops or seminars in CBT
2. Publish an article in expert periodicals or carry out two presentations at expert meetings to demonstrate theoretical and practical work.
3. Certify, in a written statement that at least 10% of his/her work has been in behavioural and/or cognitive therapies.

11. Does your Association use EABCT’s Standardized Accreditation Scheme? If yes, for how many years?

Serbian Association for Cognitive and Behavioural Therapies uses EABCT’s Standardized Accreditation Scheme for 15 years (in 2003 we revised our accreditation scheme in accordance with EABCT minimum training standards).

12. Please provide any additional useful information supporting your application.

Personal development:

The training includes 250 hours of personal development. Minimum 30 hours should be in the form of individual therapy with an accredited CBT therapist. The rest of the hours are in the form of 1) peer-counselling sessions during skills training; 2) thematic workshops (e.g. assertiveness training; anger management; problem solving, etc.) and 3) self-therapy using CBT forms and techniques. The aim of this part of the training is to enable therapists to identify and manage appropriately their personal involvement in the process of therapy and to become able to recognize when they should seek other professional advice.

Psychotherapy practice

Candidates should have minimum 500 hours of psychotherapy practice.