

## TRAINING STANDARDS COMMITTEE

### Definitions Survey Report

January 2010

#### Introduction

As an outcome of the motion that was passed at the August 2009 AGM, the Training Standards Committee sent out a survey to all Member Associations asking them to consider and comment upon the current definition of psychotherapy and counselling as developed by Jan Grant.

#### AGM Motion

*That Council seek to clarify possible definitions of the terms 'Psychotherapy' and 'Counselling', for PACFA and ARCAP use, that would build upon the original definition developed by Jan Grant, and that such definitions be submitted to Council for approval.*

#### AGM Outcome

*That the results of this vote:*

- a) be referred back to the Training Standards Committee, and if necessary the Reference Group, to attend to what is currently described as 'Psychotherapy' and 'Counselling'; and*
- b) the TS Committee be asked to engage MAs in the process of clarification of these terms; and*
- c) the results be brought back to the next Council Meeting.*

#### Training Standards Committee Action

The Definitions Survey of Member Associations was sent out in September 2009. Subsequently a reminder email was sent at the beginning of November 2009. Collation and analysis of Member Association responses occurred during December 2009 and results were finalised in January 2010.

Additionally, the survey included a question about the current definition of supervision which will be analysed and reported on at a later date.

#### Summary of Responses

- In total, 24 replies were received of which 20 were from Member Associations, 1 from a Register Section representing 5 Member Associations (one of which also responded separately), 2 individual responses (from members of Member Associations) and 1 from a training body.
- Of the 24 Member Associations represented, 16 Member Associations agreed that the current definition (Appendix 1) is still applicable and relevant for the field today.
- Of these 16 responses in favour of retaining the current definition, 6 Member Associations made additional suggestions, summarised below (see also Appendix 2 & 3).
- Of the 8 Member Associations responding in favour of substantially changing the current definition, 2 replies outlined their preference for a clear distinction to be made between psychotherapy and counselling, summarised below (see also Appendix 4 & 5). 1 Member Association responded that they preferred the definition developed by the CEO (see Appendix 6).

#### Review of Responses

##### 1. Respondents

1.1. The 20 Member Association replies were from the following associations:

Australian Association of Relationship Counsellors; Clinical Counsellors Association; Melbourne College of Contemporary Psychotherapy; Psychotherapists and Counsellors Association of WA; Melbourne Institute for Experiential and Creative Arts Therapy; Counselling Association of South Australia; Gestalt Australia New Zealand; Association of Transpersonal and Emotional Release Counsellors; Counselling and Psychotherapy Association Canberra and Region; Professional Counselling Association of Tasmania; Queensland Counsellors Association; Western Pacific Association of Transactional Analysis; Music and Imagery Association of Australia; Society of Counselling and Psychotherapy Educators; Counsellors and Psychotherapists Association of Victoria; Counsellors and Psychotherapists Association of NSW; NSW Institute of Family Psychotherapy; Australian and New Zealand Association of Psychotherapy; Australian and New Zealand Psychodrama Association; Australian and New Zealand Society of Jungian Analysts.

- 1.2. The 1 Register Section reply was from the *Psychoanalysis/Psychoanalytic Psychotherapy Section* representing the following Member Associations: Australia and New Zealand Society of Jungian Analysts; Australian Association of Group Therapists; Australian Centre for Psychoanalysis; Australian Psychoanalytical Society; Psychoanalytic Psychotherapy Association of Australasia.

**2. Summary of responses from Member Associations that agreed in principle with the current definition with some suggestions:**

**2.1. Society of Counselling and Psychotherapy Educators**

SCAPE offered the following considerations:

- It is important that psychotherapy and counselling are defined and perceived as one profession, containing nuances and differences within one diverse and rich field.
- While counselling is sometimes perceived or described as more superficial than psychotherapy, or as an earlier stage of professional activity, it is important to note that most of the counselling training in Australia occurs in university settings at post-graduate level with a strong evidence base.
- The use of a definition depends on who the definition is for. As well as definitions for use within the profession, psychotherapists and counsellors need to define the profession for the external community, and be able to differentiate counselling and psychotherapy from other related professions.

They further suggest the following factors as affecting the overlap between counselling and psychotherapy:

- Length of time that a practitioner works with an individual: the longer the engagement, the more likely it is to be psychotherapy;
- The context: some contexts lend themselves to psychotherapy, such as working with trauma;
- Clients have different natures, needs, and styles of being, requiring different responses.

**2.2. Counsellors and Psychotherapists Association of Victoria**

CAPAV offered information about the current situation occurring in the UK (BACP) where the Health Professionals Council seeks to differentiate counselling and psychotherapy. BACP support the view not to differentiate. (See Appendix 2 for full response).

CAPAV recommend a working party to:

- review prevalent and emerging practices overseas
- investigate and determine the strategic context in which counselling and psychotherapy, and its supervision exist
- determine the basis for “making similar” or “distinguishing between” the terms counselling and psychotherapy, in the context of maintaining unity and without separately registering counsellors and psychotherapists
- develop a process for ensuring that evidence-based practice and practice-based evidence inform the discourse on counselling and psychotherapy
- determine uses for, and the target audience of, the terms counselling and psychotherapy
- examine legislative, funding and regulatory implications.

**2.3. Australia and New Zealand Psychodrama Association**

ANZPA stated that whereas treatment of “deeply disturbed individuals” certainly is within the domain of psychotherapy, the definition as it stands has too exclusive a focus on pathology and emphasise that a client does not need to be deeply disturbed to see a psychotherapist. They suggest the definition could be widened to be inclusive of those engaging in psychotherapy for personal development. A possible re-wording is offered:

*“Psychotherapists are more likely to work intensively, with more deeply disturbed individuals who are seen more frequently over a longer period of time as well as with those who choose to enhance their life and relationships through in-depth personal work”.*

**2.4. New South Wales Institute of Family Psychotherapy**

NSWIFP would like to see reference to family and couples psychotherapy included in the definition.

2.5. Melbourne Institute for Experiential and Creative Arts Therapy

MIECAT would prefer to eliminate from the existing definition all that follows below the dot points, beginning with “Although counselling and psychotherapy overlap considerably...” Alternative wording that attempts to cover general similarities is offered which may be valid and non-discriminatory and might sit appropriately at this point. (See Appendix 3 for full response).

2.6. Music and Imagery Association of Australia

MIAA stated that while they define themselves as psychotherapists, their methodology is drawn from both depth psychology and specialist counselling as mentioned in Jan Grant’s definition. They would like to see an acknowledgement in the definition of psychotherapy that it includes the application of specialised counselling skills at advanced levels.

**3. Summary of responses from Member Associations stating their preference for a clear distinction to be made between psychotherapy and counselling:**

3.1. Psychoanalysis/Psychoanalytic Psychotherapy Section

The view of the Psychoanalysis/Psychoanalytic Psychotherapy Section is that there is a fundamental difference between the theory and practice of psychotherapy and counselling which is occluded in the current definition. They put forward a definition of psychotherapy (see Appendix 4 for full response).

3.2. Australian and New Zealand Association of Psychotherapy

The ANZAP training faculty state that their concern is not so much with the definition itself, but rather that counselling and psychotherapy, as noted in the definition, have different aims and techniques and should be defined separately (see Appendix 5 for full response).

**RECOMMENDATION**

It is the recommendation of the Training Standards Committee to remain with the current PACFA definition of psychotherapy and counselling.

However, it is suggested by the Training Standards Committee that each of the Register Sections could optionally include in their description of their Register Section on the website an outline or further refinement of their particular view on psychotherapy and/or counselling. To ensure consistency with this spirit of acknowledging both similarities and differences, it is proposed that, before publishing, the Training Standards Committee would approve the sector descriptions.

This would acknowledge and support the rich and unified tapestry of the profession at the same time as allowing the consumer to recognise the factors common to both psychotherapy and counselling as well as the additional specific identifying factors arising within each Section.

**Alison Strasser, Chair**  
**Training Standards Committee**

**Committee Members**

Karen Anderson  
Peter Cantwell  
Maggie Down

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## **APPENDIX 1. Current PACFA Definition of Counselling and Psychotherapy (2007)**

Psychotherapy and counselling are professional activities that utilise an interpersonal relationship to enable people to develop self understanding and to make changes in their lives. Professional counsellors and psychotherapists work within a clearly contracted, principled relationship that enables individuals to obtain assistance in exploring and resolving issues of an interpersonal, intrapsychic, or personal nature.

Professional psychotherapy/counselling:

- Utilises counselling, psychotherapeutic, and psychological theories, and a set of advanced interpersonal skills which emphasise processes of facilitation. Such processes are based on an ethos of respect for clients, their values, their beliefs, their uniqueness and the right to self-determination.
- Requires an in-depth training process to develop understanding and knowledge about human behaviour, therapeutic capacities, and ethical and professional boundaries. Because it is explicitly contracted and requires in-depth training to utilise a range of therapeutic interventions, professional counselling should be differentiated from the use of counselling skills by other professionals.
- Takes account of the cultural and socio-political context in which the client lives and how these factors affect the presenting problem. This includes an awareness and assessment of cultural influences such as age, development, disability, religion, ethnicity, sexual orientation, socioeconomic status, indigenous identity, nationality, gender. Professional psychotherapists and counsellors value such differences and avoid discrimination on the basis of such factors.
- May involve work with current problems, immediate crisis, or long-term difficulties. Depending on the nature of the difficulties, the work may be short-term or long-term, and may involve working with an individual, a couple, a family or a group, and may occur in a variety of organisational contexts in the public or private sectors.
- Regards the processes of self-monitoring, self-examination, self-awareness, self-development, professional development and on-going clinical supervision as central to effective practice. Such practices lead to an enhanced capacity to utilise oneself in the therapeutic endeavour.

Although counselling and psychotherapy overlap considerably, there are also some differences.

The work with clients may be of considerable depth in both modalities. The focus of counselling is more likely to be on specific problems or changes in life adjustment. Psychotherapy is more concerned with the restructuring of the personality or self.

Although both psychotherapists and counsellors work with a wide variety of clients, psychotherapists are more likely to work intensively, with more deeply disturbed individuals who are seen more frequently over a longer period of time. Counsellors are more likely to work in specific areas where specialised knowledge and method are needed, such as marital and family counselling, bereavement counselling, school counselling, addictions counselling, HIV/AIDS counselling. At advanced levels of training, counselling has a greater overlap with psychotherapy than at foundation levels.

*Originally prepared by a working party chaired by Dr Jan Grant, and adopted at the 1997 conference of the Standing Conference of Educators and Trainers in Counselling and Psychotherapy.*

## APPENDIX 2. CAPAV Response

CAPAV submits that the ongoing debate about distinctions between counselling and psychotherapy is potentially divisive. It damages the overall strategy of obtaining professional recognition as a unified self-regulating profession, distinct from social work, psychology and psychiatry. We are informed by the views expressed by the British Association for Counsellors and Psychotherapists (BACP) in their response to proposals from the Health Professionals Council (HPC) who seek to differentiate. The BACP respond that there is no meaningful distinction, at least on the basis of education or competency:

*"The proposal to differentiate between counselling and psychotherapy is out of step with research and other developments in the field of the psychological therapies... The work undertaken by Skills for Health to develop National Occupational Standards for the Psychological Therapies does not differentiate between counselling and psychotherapy.*

*There are 52 Standards of Proficiency for counsellors and psychotherapists of which 49 are common to both counsellors and psychotherapists with only 3 different standards for psychotherapists and 2 different standards for counsellors.*

*The current situation is that standards of training are so variable that existing titles are no reliable guide to the skills and competence of the practitioner.*

*To my knowledge there is no theoretical, practical or research rationale for distinguishing between counsellors and psychotherapists.*

*There is very little from a research perspective that would provide any evidence for separating counsellors and psychotherapists along the lines suggested by the HPC."*

*(Professor of Psychological Medicine & Medical Psychotherapy)*

BACP takes an evidence-based position that there is no difference between counselling and psychotherapy.

Several members commented that the proposal for differentiation seems to arise from a discourse of status and power rather than having regard for the actualities of practice.

However, the Australian context is one of self-regulation, rather than government regulation as is the case in the United Kingdom. For the purposes of self regulation we need to distinguish ourselves within our fraternity, by what we do and how we do it, and propose a unique value proposition from other allied health therapists such as psychologists, social workers and psychiatrists. Discussions around counselling and psychotherapy need to provide a clear pathway for our potential clients and referral organisations to choose to whom they should refer their clients.

The Australian and United Kingdom contexts differ in the emphasis on statutory regulation, the influence of the medical, psychopathological model, and its association with psychotherapy rather than counselling. If the BACP argue that a meaningful distinction cannot be supported in the latter case, then why would the body of counsellors and psychotherapists in Australia support it in the absence of a statutory regulation and pathological context?

CAPAV propose that the process lies more with determining why such a distinction is so important to our fraternity, what would constitute a meaningful distinction and definition, what is the strategic context and the basis upon which distinctions and definitions would be made, and to whom it would be important, and why. Without a strategic framework to develop unique value propositions for counselling and psychotherapy we risk falling into the discourse of status and power rather than relying upon the evidence emerging from our practice, as certain members of the BACP comment in their own context. The strength of the debate and the zeal with which certain positions were held at the PACFA 2009 annual general meeting suggest that this risk is real and that it distracts from the core strategy of obtaining professional recognition as a unified practice with a unique offering in a self-regulatory context. In support of this, views expressed by CAPAV members include:

- The current definition of counselling and psychotherapy is 'on the right track', counselling and psychotherapy being distinguished more by their emphasis on life issues in the former case and deeper insight, self-awareness and personality structure in the latter.
- Some members have purposefully studied both counselling and psychotherapy to give them well rounded integrated training with various therapies, tools and techniques being learnt.

- Some members distinguish themselves as psychotherapists by both the emphasis of their training on personal insight and the breadth and depth of their education, particularly in psycho-pathology. This suggests that somehow counselling education and its emphasis is less rigorous than psychotherapy.

We support the BACP refutation on the bases that they cannot be distinguished on the basis of education and training, and that there are now many modalities beyond the analytical orientations traditionally associated with psychotherapy and psychiatry that involve exploration of personal self-awareness. Our members trained in modalities encompassing an epistemology of self-awareness, theories of personality and wellness argue this to be the case.

Furthermore, evidence suggests where competencies can be determined there are obvious difficulties in objectively measuring them and in developing the criteria to do so. Additionally, research shows that client outcomes are more correlated with client factors and the qualities of the therapeutic relationship than with counselling or psychotherapeutic skills, competencies or particular modalities. In some respects, the discourse on counselling and psychotherapy distracts us away from the critical exploration of determining and measuring client outcomes, which must surely be the ultimate determinant of counselling and psychotherapy.

Therefore, CAPAV recommend that PACFA convene a working party involving representatives from member associations, educational institutions or otherwise commission the current working parties and reference parties on training standards. The terms of reference for this working party should be:

1. review prevalent and emerging practices overseas
2. investigate and determine the strategic context in which counselling and psychotherapy, and its supervision exist
3. determine the basis for “making similar” or “distinguishing between” the terms counselling and psychotherapy, in the context of maintaining unity and without separately registering counsellors and psychotherapists
4. develop a process for ensuring that evidence-based practice and practice based evidence inform the discourse on counselling and psychotherapy
5. determine uses for and the target audience of the terms counselling and psychotherapy
6. examine legislative, funding and regulatory implications

We recommend that this working party report within a fixed period of time on the determination of a context and the parameters for counselling and psychotherapy in Australia to coexist as practices more noted by their similarities than their differences. Once this context is accepted, the next mission for the working party would be to revise within this framework the existing definition of counselling and psychotherapy and its supervision to develop unique value propositions.

Until such time as this work is complete we recommend that the existing definition be considered as definitive and a work in progress.

For its part our association is prepared to nominate representatives of the working party should this be required.

### **APPENDIX 3. MIECAT Response**

Counselling and all forms of therapy occur because people in their lived experiencing wish to have some assistance in making sense of aspects of their lives. They wish to inquire and to understand the meanings of their own being, and of their being alive in their own particular contexts.

Those who have a sense of their own capacity to be present with people wanting to understand their lives better, have engaged in intensive training to become skilled in ways of understanding peoples' lives, through theories, skilled practice, self knowing, and have developed the significant skills of being present to others .

Different assumptions about human functioning and about what matters lead therapeutic professionals to adopt chosen and somewhat differing approaches to all these aspects. But at the core of the therapeutic activity there lies relationships which assist the client to feel safe and trusting, to feel heard and understood, and to find that the understandings shared together about their lives are meaningful and ontologically relevant and useful.

Whichever life concerns are dealt with, in which periods of time, there is potentially a wide range of contents that may be attended to, and different languages are used to describe these contents and understandings. To describe the differences as deep as against practical, for example, is a limiting perspective. In all genuine therapeutic engagements, there is both depth and practicality. We bring the epistemological drive for new knowing into constant reference to the ontology of our being, and reference these procedures to the axiological places in which choices are made as to which values come to matter most. And in the trusted relationship we rework the relational contents of our lives in the processes of this relationship, and come to know and potentially reconstruct our own ways of being, through such significant dialogues of meaningful subjectivity.

In so doing, the fruitfulness of these processes is likely to be an increased sense of well being mediated through to the capacity to live, choose and take meaningful responsibility in our lives.

All therapeutic engagements have the capacity to move through this vast range of interactive possibilities, as activated by the participants, not as predetermined by a generalised conceptual label.

It would be preferable for professional practitioners themselves to identify their own particular orientations to the public, than for an organisation to attempt such a generalised categorisation as psychotherapist or counsellor.

#### **APPENDIX 4. Psychoanalysis/Psychoanalytic Psychotherapy Register Section Response**

*Psychotherapy* is distinguishable from counselling on the basis that it places a central emphasis on the contribution of unconscious processes, that is, processes which are out of the individual's awareness but which have a cumulative and ongoing effect on one's the individual's state of being. If these processes remain unrecognized and unprocessed, they may manifest in a range of physical and mental health difficulties and symptoms and apparently inexplicable repeated patterns of unsatisfactory and destructive relationships.

While both counselling and psychotherapy are concerned to alleviate the suffering of individuals who seek their help, psychotherapy is not focused on an immediate solution to the suffering that each individual brings. Such forms of suffering may include depression and anxiety, addiction and eating disorders, or the effects of trauma. In the treatment, the particular problem will be placed in the broader context of that person's history and experience; it is not a problem to be solved as such but rather, the suffering the individual brings can be seen to point beyond its immediate manifestations to a pattern that is repeated in that person's life. Gaining an understanding of the origins of and functions served by this pattern is the primary condition for personal change.

Because psychotherapy is an exploratory mode of treatment directed towards personality change it continues for a longer period than may be customary for counselling. There are a range of approaches a psychotherapist might take, determined by the orientation to which he or she belongs. Where some psychotherapists explore the complexity of the relation between mind-body through working directly with the way the clients embody their emotional, social and spiritual experiences, others may employ other psychotherapeutic or psychodynamic techniques. Still others work with families and couples or groups to reveal the ways that problems in relationships can have an impact within and across generations.

Crucial to the transformative effect of the treatment is the relation of trust and respect between client and therapist. The therapeutic relationship requires commitment and responsibility from both therapist and patient. It is this relationship that enables the transformation of habitual modes of thinking and behaviour. The central importance of the therapeutic relationship in psychotherapy is reflected in an emphasis in psychotherapy on regularity of appointments, a non-directive stance of the psychotherapist, and the therapeutic alliance. The aim is to work together to make sense of the patient's emotional life and his or her repeated ways of functioning, in large part through exploration of the conscious and unconscious aspects of the therapeutic relationship. The work reveals the degree to which the past informs the present and how this can manifest in the here-and-now experience of the therapy process. Recognition and exploration of inner experiences of both parties within the therapeutic relationship further informs understanding and contributes to the resolution of presenting issues. Therapeutic change is based on insight and integration of all elements of a person's internal and external, conscious and previously unconscious issues and defences; including emotional and cognitive elements. The exploration of all these elements within the dynamics of the therapeutic relationship comprises the core of psychotherapy...

Psychotherapists are trained at post-graduate level, have undergone specialist training over a period of several years, including training in theory, supervised clinical practice, and usually personal psychotherapy or psychoanalysis, and are required to engage in ongoing professional development and supervision.

## **APPENDIX 5. ANZAP Response**

The current definitions from 10 years ago seem to reflect the early processes in PACFA, moving towards professionalization of these activities and thus emphasising training, ongoing development and equity.

ANZAP believes that the activities of counselling and psychotherapy are distinct and essentially different. It may be that at times a shared territory exists for particular counsellors or psychotherapists.

The definition of psychotherapy is a process within a therapy relationship in which permanent positive change is sought in the client, positive changes in self experience with integration of traumatic experience and increased capacity for flexible engagement with the social and cultural environment.

Within the range of psychotherapy modalities psychoanalytic psychotherapy can be more precisely defined. Psychoanalytic psychotherapy makes the patient-therapist relationship its focus, and uses psychoanalytic principles to explore and understand the patient's difficulties. Transference phenomena are encouraged and worked with, as they throw light on the continuing influence of past experiences/relationships, from which the patient can begin to free him/herself as he/she develops the capacity for reflectivity and comes to recognize them. It is a depth psychotherapy, with frequency of more than once a week, in which the skilled use of transference/countertransference phenomena are an important part.

ANZAP is not able to define counselling as part of its training and membership requirements but would consider the following an attempt to clarify the difference. In counselling, the exploration of current problems including the examination of relevant thoughts and feelings are helped by a sympathetic and objective counsellor. The aim may be limited to this level i.e. the relief of airing problems and coming to see them in a clearer perspective. This support is not considered synonymous with supportive psychotherapy, which is a specific mode of therapy. The BACP definition of counselling was presented by one of our faculty members and this seemed a thorough description, which PACFA would already have accessed.

## **APPENDIX 6. Definition of Counselling and Psychotherapy as put forward by Colin Benjamin**

*Professional Counsellors and Psychotherapists* work within a clearly contracted, principled relationship that enables individuals to obtain assistance in exploring and resolving issues of an interpersonal, intrapsychic, or personal nature that provide evidence-based treatment of emotional, behavioural, personality, and psychiatric disorders based primarily upon verbal or nonverbal communication within a client, patient or other professional practice relationship with a person seeking advice, opinion and support for adjustment in their life situations, in contrast to treatments utilising chemical and physical measures.

Counselling involves the development of a professional relationship and activity in which one person endeavours to help another to understand and to solve specific problems or changes in life adjustment, including situations where specialised knowledge and method are needed. Counsellors assist in making adjustments to mental health disorders, and counselling in respect of marital and family difficulties, bereavement, occupational health and safety, adjustments associated with study and educational contexts, addictions, HIV/AIDS and post-trauma conditions. At advanced levels of training, counselling has a greater overlap with psychotherapy than at foundation levels.

Psychotherapy is the application of focussed psychological treatment applications that enable people to develop self understanding and to make changes in their lives within the framework of a contracted relationship with a registered professionally qualified practitioner who is clinically trained to establish a professional relationship with the object of (1) removing, modifying, or retarding existing symptoms, (2)mediating disordered patterns of behaviour, and (3) promoting positive personality growth and development.

*Professional Psychotherapy/Counselling* utilises counselling, psychotherapeutic, and psychological theories, and a set of advanced interpersonal skills which emphasise processes of facilitation and/or the applications of treatment modalities that relate to evidence based focussed psychological strategies. Such processes are based on an ethos of respect for clients, their values, their beliefs, their uniqueness and the right to self- determination.