

A Better Comprehension of Psychotherapy: Reflections on 6th EPA Summer School

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The European Psychiatry Association's (EPA) commitment to education has resulted in developing scholarship programs addressed to young psychiatrists and trainees in order to promote quality medical training. Gaining new skills at an early stage of our career is essential to ensure continuation of valuable professional development and central to learning a holistic approach that should be implemented in every mental health facility around the globe.

The European Psychiatry Association's Committee on Education organised annual Summer School for the sixth time, this time inviting young doctors from across the continent to try themselves with the difficult subject of psychotherapy. The meeting was entitled "ABCs of Psychotherapy" and took place in Brussels, right in the heart of Europe, between 9th and 11th September 2016. A three-day-long program was designed to equip us with the clinical tools which we can use and expand throughout our long professional career. The main topic has been changed after five consecutive and successful editions from the one focusing on comorbidities between mental and physical disorders to psychotherapy mainly because it is considered to be missing in the majority of training programmes throughout Europe. It also represents one of the main challenges of our education (1).

Twenty seven scholars from nineteen different countries were selected based on their achievements presented in curriculum vitae, motivation letter, and supported by recommendations from senior colleagues. All of them were under the age of forty. Also representatives of the European Federation of Psychiatry Trainees, a dynamic network gathering young professionals from Europe at early stage of their career, were invited to take part in the summer school as participants, enriching discussions with their valuable perspective.

Prior to the meeting in Brussels, selected participants had a chance to talk and get to know each other on the arranged online calls. Short biographies focusing on their accomplishments in the field of psychiatry were published on the European Psychiatry Association's website. Early autumn, in the very heart of Europe, participants spent three days together with highly renowned faculty members such as Dr Marc Hermans, Prof. Yves Sarfati and Prof. Norman Sartorius. We were also able to participate in a simulation session organised by the Maudsley Simulation Center, UK's first simulation training centre focusing on mental health, which was a very new and eye-opening experience for many of us.

The aim of this article is to share our experience and reflect on our overall impressions of this wonderful educational opportunity.

The origin of species in Psychotherapy

We could not have had a more appropriate start to the proceedings than a lecture given on the very first day by Dr Marc Hermans titled, 'The origin of species in psychotherapy' (2). This lecture was an overall introduction to the different 'schools' and their 'derivatives' in psychotherapy. Various general aspects and considerations were discussed, including closer look at origins and development of psychotherapy as well as the typical development cycle of new therapies and practices. We also discussed the threats on psychotherapy such as the biological-only-approach or the philosophical-only-approach and damages made by the public image of psychiatry. Participants, together with the facilitator, examined the different components of working towards a treatment plan which include the expectations of a patient, working hypotheses of therapist and asked questions focusing on what kind of psychotherapy will be most efficacious from both the patient and financial perspective. Participants also reflected on interesting

thesis arguing if psychotherapy is ever contraindicated. We also considered how the effectiveness of various interventions could be evaluated. Next, different 'schools' of psychotherapy such as psychodynamic therapies, humanistic, behaviour, cognitive, family and system therapy were introduced to young professionals. This lecture was a fantastic overview of the history of psychotherapy and its evolution, setting the scene perfectly for the rest of the weekend's exciting activities.

Communication Skills

Since medical curriculum across Europe rarely focuses on training of communication and presentation skills, early morning of the second day was designed to give participants basic knowledge on the much needed soft skills which are necessary in the clinical work of every psychiatrist. In the world of constant collaboration between clinicians and researchers, enhanced by growing intersections of different medical fields, it is essential to address any gaps in the basic education of essential skills. We started with a role-play held by Prof Norman Sartorius. The purpose of it was to introduce a colleague to an audience. We were provided with useful tips on how to introduce a colleague properly and how to point out the most interesting and necessary facts about the person. For instance, it was stressed that an introduction of a person should not be over detailed and we should never say anything personal without permission as it can embarrass the person in the eyes of the audience. However, it is important to emphasize particular characteristics or qualifications of the introduced person to help the audience to understand his or her role and achievements. The training was interactive and after the participants introduced their colleagues, we discussed positives and negatives of these presentations. Great attention was paid to the etiquette, body language, gestures, manners and manner of their speech such as the tone of their voice.

Next, we have focused on presentation skills themselves. Facilitator of this session, Prof. Norman Sartorius, requested in advance three participants of the 6th EPA Summer School to prepare presentations on a selected topic, not necessarily covering the most recent research they have conducted. Two of the people built up their material with a support of a Power Point presentation, one decided to concentrate on the simple speech itself without visual aids. After each and every presentation, as a group, we gave feedback focusing on body language, tone of the voice, eye-contact and overall structure of the presentation. We also dismantled the concept of the fear that surrounds public speaking.

The most valuable thought that came from the brainstorming of all the important rules that we all must follow when preparing a presentation is that what really matter is not the power point, but the presenter. The audience should feel captivated, interested in the topic. To achieve that we need to focus on what we really want to share, not what we know. Being specialists in the small field makes us blunder to general level of knowledge in the audience and consequently, we usually want to offer all that we know. The content must be simple, yet progressive and consistent but never repetitive. Design of the slides must be catchy and coherent for the whole presentation. Only put things on the slides that help emphasize what you're saying. Do not over-crowd the slides, and do not read from them. We also all agreed that the less words on each of the slide, the more meaning stands behind it. It is also crucial to exercise the speech before a presentation, so that you fit in time and you do not get stuck. A good thing is to tell it in front of a person that has no relation to the topic. If you manage to convey your message to them, it means that your speech is clear enough. Try not to over-emphasize methodological aspects of your work. Present them in a concise and accessible manner and focus on results and their interpretation. We also decided that presenter has to know the terrain. Arrive early enough so that you can check the setting and acoustics of the presentation hall. During the speech, try not to fidget and not to cross your legs. Stand up straight, and, if you need to do something with your hands, have a small object in our palm, which you can discretely manipulate. Do not keep your hands in your pockets. The session was one of the most valuable during the whole meeting. Each and every person learnt how to improve much needed presentations skills. It was clear proof of how to best use time and resources.

Maudsley Simulation Center: Practicing Psychiatric competencies

We had the unique opportunity to participate to a simulation session organised by the Maudsley Simulation Center, UK's first simulation training centre focusing on mental health (3). During the Maudsley simulation we had the privileged opportunity to observe our peer colleagues facing challenging clinical situations and afterwards to reflect jointly about what could have been done differently, guided by two expert in psychiatric case simulation, Dr Gregoire Billon and Dr Howard Ryland. They explained to us that the goal of this exciting course is to combine knowledge and simulate the experience of real-life clinical situations in a safe and non-judgmental environment. This interactive way of learning allowed us to practice communication skills as well as prepare ourselves for settings with a variety of patients. After this short introduction we dived into this new and exciting world of learning! We had two different scenarios brought to us by a professional actress. The first case was a woman suffering from depression and the second was a hostile and aggressive one who was asking to be discharged after a short admission for suicidal risk. Throughout these two completely different psychopathologies we rotated so that each participant could spend 10 minutes with the patient while the rest of us watched what was happening on the screen in real time. After every rotation we had a discussion in a group about what went well and what could have been done differently. This allowed us to hear unique clinical perspectives and share our thoughts and opinions, which were priceless for us as young Psychiatrists in training. Thanks to the two trainers and professors, we were helped in this process; they prompted our critical reasoning and gave us food for thought. These case scenarios are normally very

anxiety provoking in our daily clinical practice and it was extremely useful to share our feelings and weakness, but also to mutually discover our strengths. The course was intense in terms of content and well balanced in participants, being divided in two groups provided enough space to express our opinions and feel comfortable in doing so. It is a great way to learn how to improve your skills without feeling overly anxious or nervous, as everybody is there to learn and make the most out of this experience.

Role Play in Clinical Situations

According to the proposed programme of ABC's of Psychotherapy for the 6th EPA Summer School, we were introduced to the two selected psychotherapy approaches through a role play, prepared in advance and based on genuine cases taken from the facilitators' medical practice. The session on basic psychotherapy interventions was divided into two segments focusing on specific areas as follows:

- a) psychodynamic practice directed/moderated by Yves Sarfati in a collective analyses of a clinical case
- b) family approach directed/moderated by Marc Hermans

Concerning the 1st clinical situation (a) we have evaluated an adult male, recently divorced, with a son (13 years old), and an extra-marital homosexual relationship (also recently finished). He was referred to a psychotherapy consultant because of a strong, daily presentation of the classical symptoms of the ischemic heart disease (left precordial pain, sweating, difficulty in breathing, tightness in the chest). Detailed examination to this day showed no evidence of any pathology within cardiovascular, respiratory or gastrointestinal tract. Conferring to his present clinical history, the patient was actually showing signs and symptoms of anxiety and depression. By making use of the psychodynamic practice we could evaluate and understand the whole situation as well as define distinct points of intersection with the history of the patients' family. This exercise has also allowed us to identify possible first interventions resulting in positive, immediate psychotherapeutic effects.

As for the second clinical case (b), selected participants were given a task to play certain members of the family, e.g. mother, adolescent, stepmother, father, and stepfather, according to the summary provided by the facilitator. Others were taking the role of a therapist in turns. It was a Child and Adolescent Psychiatry clinical case with a family therapeutic approach in which we were struggling with a history of a teenage girl who has recently encountered ostracism at school due to her recent misbehaviour. We all learnt how to define the main topic that should be primarily covered by psychotherapeutic care by utilising a holistic approach to every case.

In conclusion, this session allowed participants go beyond theoretical knowledge and try their hand in its practical use. For many of us it was a very first contact with different kinds of Psychotherapy commonly used nowadays. As a suggestion for the next year's EPA Summer School, we would find interesting to analyse a clinical case by two different psychotherapy modalities, which would allow us to see different perspectives. Certainly a role play using behaviour and cognitive therapy would be of extreme value and importance as it is one the most common approaches used in our daily clinical practice.

Initiation to Psychodynamic practice: theoretical links with neurosciences

The amazing presentation from Saturday morning took us from the neuroscientific definition of subconsciousness to that of Freud's subconsciousness, through a great exemplification of good presentation techniques and using new theories to substantiate old ideas and to bring them back to focus, together with a new way of understanding them. The presentation focused on defining the two concepts (4). The lecture was mind-blowing and eye-opening as to how we can present complicated notions in an accessible way. Moreover, the versatility and life story of the presenter were, in themselves, inspiring for us young psychiatrists. The lecture was, first and foremost, a live example of living your passion.

We were near the end of our journey through ABC's of psychotherapy Summer School, and it was time for us to sit all together, participants as well as members of the faculty, so we can compare and discuss Psychotherapy training in various countries that are included in the World Health Organization-Europe Region. In a few participants' experience psychotherapy training has a substantial role in their psychiatry training, but in many cases it is not well integrated or neglected. When psychotherapy course is not offered or supported by the University, trainees have to invest extra-work time and their own money in order to achieve some knowledge and to acquire therapeutic skills. Despite most of our psychiatric training is commonly biologically oriented we agreed on the fact that psychotherapy has its own dignity in psychiatric practise and therefore it deserves more consideration and time, starting from the beginning of our education in the field. Also it was a great experience because we were able to compare different training systems, and then make conclusions that could help future development of ideal psychotherapy training. There is still no specific answer to the question how to design an ideal training in psychotherapy, but the urge for the qualitative training in it is obvious. Professional interaction with a patient is a one of the most important keys for the successful treatment.

Conclusions

At the end of the three days, it was clear that all of the participants enjoyed the experience of the 6th EPA Summer School. In essence, the process of psychotherapy helps the patient to achieve a better understanding of themselves. As early career psychiatrists we are also on our own journey of self-discovery. From all those present at this year's incredible summer school, we all feel that Psychotherapy has a special place at the heart of our training and identity as Psychiatrists. The participating scholars have expressed that they have derived new knowledge, an insight or perspective they did not have before and we hope that we have captured a sense of that discovery within this reflective article. We feel that Psychotherapy should be an integral part of the curriculum and training pathways in Psychiatry across Europe and a significant aspect of our training should focus on this. In the long term this will not only benefit us, but more importantly it will allow us to become the holistic Psychiatrists that our patients need us to be on their journey to recovery.

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