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EIRT BOOK of REGULATIONS for REALITY THERAPY COUNSELLOR TRAINING

1. INTRODUCTION

1.1

Based on article 5 of the Statute of the European Institute for Reality Therapy (EIRT) this document defines educational standards, conditions and ways of obtaining the title of Reality Therapy Counsellor (RTC).

1.2

This Book of Regulations upholds the mission of the William Glasser Institute (WGI), the European Association for Reality Therapy (EART) and the European Institute for Reality Therapy (EIRT). It provides educational standards, conditions and ways of obtaining the title of RT Counselor (RTC) in accordance with the standards and criteria of WGI and EART.

1.3

The training for a Reality Therapy Counselor lasts for a minimum of 4 years. It is divided into two phases: Phase One lasts for 2 years and Phase Two lasts for 2 years. The whole programme includes a minimum of 1128 hours of training.

1.4.

Faculty in both phases of the training are trained in accordance with the educational standards of WGI and EIRT, who maintain a list of accredited faculty.

2. ENTRY REQUIREMENTS

The entry requirements are as follows:

a) A minimum of a Bachelor's degree preferentially in human sciences (medical, psychological, social, educational, etc). If the degree is missing content areas necessary for a foundation in counselling study, these will be identified and EIRT will help the candidate to find a way to cover the missing content during Phase Two of the training. An undergraduate trainee can exceptionally become a candidate for RTC if

An undergraduate trainee can exceptionally become a candidate for RTC if s/he graduates before Phase Two of the training.

b) Completion of Phase One of RT training

Phase One of the training is open also to individuals who wish to learn Reality Therapy, but are not interested in progressing to full RTC training.

c) Accepting the Conditions of Training and Ethical Principles

The candidate needs to sign the agreement that accepts both the conditions of the training programme and the Code of Ethics. Before the candidate signs the agreement s/he needs to receive and read the relevant documentation: The Book of Regulations for Reality Therapy Counseling Training, the Code of Ethics and the Complaints and Appeals Procedures.

d) Practice in counseling under regular supervision

Candidate's responsibility is to find practice in counselling under regular supervision. Institutions that offer practice in counselling to candidates should have organised, regular supervision. If not, the candidate can choose for that purpose one of his/her training supervisors accredited by EIRT.

3. CURRICULUM

3.1 COMPONENTS OF THE CURRICULUM

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

a) 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 RT and understanding of social and cultural issues in relation to psychotherapy and
- Multiple applications of Choice Theory

b) REALITY THERAPY PRACTICE

- Practicing RT in training settings under EIRT Faculty supervision
- Practicing RT either with individual clients, families, or groups under regular supervision

c) PERSONAL 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.

3.2 METHOD

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

a) HOW WE TEACH THEORY

We use comprehensive and diverse theoretical and didactic lectures.

- Instructors' lectures combined with group discussion
- Lectures by Dr. William Glasser, the author of CT and RT, and other successful RTP on videotapes and audiotapes combined with group discussion:
- Candidates' presentations combined with group discussions
- Analysing filmed materials on the topics related to the course
- Critical essays written by participants on suggested literature
- Discussions initiated by participants
- Recommending the lectures of other approaches
- Recommending relevant literature
- Teaching by modelling.

b) HOW WE TEACH COUNSELLING SKILLS

We train candidates' 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 RTC 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 practice by giving them feed back
- Individual supervision
- Group supervision
- Candidates improve their skills by practicing RT in their own practice

c) 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 relationships in his/her personal life
- To do written work (self-evaluation, diary, portfolio, extracts from the readings)
- To make co-operative self-evaluation with supervisor and group members
- To experience client's role during the role-plays
- To review his/her life stories and experiences from the CT perspective and to deepen personal insight and understanding.

210 hours

3.3 STRUCTURE OF TRAINING

Phase One (RTC)

1st year

Organised	training
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Basic Intensive Training 4 days – 30 hours
Basic Practicum 8 practicum sessions – 60 hours

2nd year

Advanced Intensive Training 4 days - 30 hours Advanced Practicum 8 practicum sessions - 60 hours

4 days - 30 hours

Phase Two

Organised training

Certification Process (RTC)

3rd year

Workshop: CT/RT and psychological problems I. 4 days – 30hours
Practicum I. 4 practicum sessions – 30hours
Workshop: CT/RT and psychological problems II. 4 days – 30hours
Practicum II. 4 practicum sessions – 30hours

4th year Phase

Two

Workshop: CT/RT and working with group I. 4 days – 30hours

Practicum III. – 4 practicum sessions – 30hours 240

hours

Workshop: CT/RT and group psychotherapy II. 4 days – 30hours Practicum IV. 4 practicum sessions – 30hours

Required Additional Activities – both phases

Written examples – 6 at BP (3h / 1example) 18 hours Written examples -6 at AP (5 hours / 1 example) 30 hours Supervised case studies – 3 at PTP I. (10 hours / 1 case study) 30 hours Supervised case studies – 3 at PTP II. (10 hours / 1 case study) I.+II. Phase 30 hours Analysing literature and preparing the presentations 150 hours Peer (supervision) review (16 hours yearly / 4 year) 64 hours 408 hours Individual sessions with supervisor (9 hours yearly /4 year) 36 hours Personal experiences: (journal, portfolio, plan of personal development) 50 hours

Practice in counselling

Practice in counselling begins during year 2: Advanced Practicum 250 hours

Demonstration of RTC competency

20 hours

Summation

Theory and training of counselling skills	540
Supervision	96
Personal experience	222
Practice in counselling	250
Demonstration of the counselling competency	20

Total 1128 hours

3.4 CONTENT OF TRAINING

PHASE ONE

FIRST YEAR

MODULE - I

Module One is designed to familiarise trainees with the basic concepts of Choice Theory (CT) and Reality Therapy (RT). During this Module, there is a combination of lectures, demonstration role-plays, practice, experiential exercises, and discussions:

BASIC INTENSIVE TRAINING

- a) The history and development of Reality Therapy (RT) and Choice Theory (CT)
- b) Basic concepts of CT including the understanding of personality in CT:
- c) CT compared to other main psychological theories about human behaviour, theory of the human being, of mental health, of the therapeutic relationship, the similarities and main differences with other theories of human development, personality, theories of psychopathology, assessment, diagnosis, intervention, theory of change.
- d) Origin of ineffective behaviour in the Choice Theory model
- e) The meaning and importance of the client's connectedness in his/her everyday life.
- f) Application of Choice Theory to understanding self and relationships;
- f) CT as the theoretical basis for: Counselling, Psychotherapy, Well-being and Mental Health, Lead Management, Quality Schools
- g) Introduction to W. Glasser Institute, EART, National RT institutes
- h) Practical training: exercises, role-plays, demonstrations, discussions.

The training is conducted throughout using Lead Management principles.

MODULE - II

BASIC PRACTICUM SESSIONS (8)

The purpose of the eight Basic Practicum Sessions is to assist the trainee to test out his/her knowledge and understanding of CT and to become more familiar and comfortable with choice theory, reality therapy and lead-management. Emphasis is placed on trainee's personal experience.

REQUIRED ADDITIONAL ACTIVITIES (See Appendix A)

a) Written Examples (6)

- b) Individual Sessions with Supervisor
- c) Peer Group Work
- d) Personal Experiences
- e) Literature Review

SECOND YEAR

MODULE - III

ADVANCED INTENSIVE TRAINING

The Advanced Intensive Training programme is designed primarily to afford the trainee an opportunity to study Dr. Glasser's concepts in socio/psychological problems in much greater depth and to develop professional skills for counseling. There is more time allotted to role-playing and processing of the role-plays. During this training, trainees increase their knowledge of the interrelationship of the various components of the process. The content of the training:

a) Reality Therapy (RT):

Understanding CT principles helps the Counsellor to lead effective therapy; Diagnosis and assessment in Reality Therapy (RT);

The meaning and role of connectedness between the therapist and his client; Procedures, methods and techniques in RT;

Metaphors, paradox and humour in RT.

b) RT applied to different groups of clients

Participants participate fully in role-playing as both the counsellor and the client and explore the utilisation of reality therapy concepts with a wide variety of client population.

c) Understanding RT compared to other approaches

Comparisons: CT, Psychodynamic, Humanistic-Existential Cognitive-behaviour approach.

d) Applications of CT in diverse contexts

Therapy, Education, Mental Health and Management

e) Guidance in counselling and psychotherapy

Theoretical. Practical and Ethical issues

- f) Multicultural dimensions of CT and RT
- g) Ethics in counselling and psychotherapy
- h) Practical training: exercises, role-plays, demonstrations, discussions

MODULE - IV

ADVANCED PRACTICUMS SESSIONS (8)

Advanced Practicum Sessions offer the opportunity to trainees to deal with various clients. Emphasis is placed on trainee's personal experience and the counselling work using the method of role-playing.

In this Module more time is allotted to role-playing and processing of the role-plays. The final written assignment is profound self-evaluation of the whole training in Phase

One and of the plan for changes in an important relationship which has been made at the beginning of Phase One.

REQUIRED ADDITIONAL ACTIVITIES (See Appendix A)

- a) Written Examples and Case Studies (6)
- b) Individual Sessions with Supervisor (6)
- c) Practice in counselling
- d) Peer Group Work
- e) Other Personal Experiences
- f) Literature Review

MODULE - V

CERTIFICATION PROCESS AT THE END OF PHASE ONE

After the successful completion of the Advanced Practicum Sessions, the trainee is recommended by the teaching faculty to attend a Phase I. Certification Process. The emphases of The Certification Process are:

PRESENTATION

Certification Process is for the trainee an opportunity to demonstrate knowledge and to expand learning. Each trainee makes a presentation on an aspect of RT/CT and accepts feedback from his/her peers and from Faculty.

DEMONSTRATION OF RT SKILLS

Each trainee is involved in role-play so s/he can demonstrate his/her skill in using reality therapy to deal with familiar and unfamiliar clients.

GROUP SUPERVISION - DEALING WITH FEED-BACK

Each trainee demonstrates his/her skills in using choice theory to deal with any feed back from colleagues and trainers.

CO-VERIFICATION

The trainee participates maturely in co-operative self-evaluation with the Faculty Trainer and realistically assesses his/her strengths in knowledge and skills and the areas that s/he has additionally to work on.

Reality Therapy Certification at the end of Phase One is the recognition that a trainee has demonstrated basic knowledge and skill in choice theory, reality therapy, and lead-management.

PHASE TWO

THIRD YEAR

Modules VI, VII, VIII, and IX (workshops, practicum sessions and additional activities) are designed to develop counselling skills with as many different individual clients as possible and to deepen candidates CT beliefs, theoretical knowledge of CT/RT and its position among other theories and in the helping approaches.

MODULE - VI

- I. WORKSHOP: CT/RT PSYCHOLOGICAL PROBLEMS I
- a) Role of counsellor in Reality Therapy (RT)
- b) RT with individual client in comparison to other important approaches
- c) Reality Therapy, Choice Theory diagnostic approaches and treatment plans.
- d) RT treatment of conventionally diagnosed psychopathological human behaviour: anxiety disorders, mood disorders, psychotic disorders, personality disorders, psychosomatic and eating disorders, sexual dysfunctions, addiction, trauma.
- e) Choice Theory and RT and specific contents requested by participants
- f) Ethical questions in Reality Therapy.
- g) Preparation for practicum: role-plays, demonstrations, analysis, discussions

MODULE - VII

PRACTICUM SESSIONS (4)

The module is designed to give the candidates, through exercises, role-plays, demonstrations, analysis, and discussions, the opportunity to experience the relationship with clients and the treatment of those who are conventionally diagnosed as having psychosomatic, eating, anxiety, psychotic, addicting disorders and other diagnoses.

REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)

- a) Supervised, Written Case Studies (2)
- b) Individual Sessions with Supervisor (2)
- c) Practice in counselling
- d) Peer Group Work
- e) Personal Experiences
- f) Literature Review

MODULE - VIII

- II. WORKSHOP: CT/RT PSYCHOLOGICAL PROBLEMS II
- a) Choice Therapy and Reality Therapy (CT/RT) and problems of raising children
- b) CT and relationships including marriage and family problems
- c) Reality Therapy with couples
- d) Reality Therapy with family
- e) Reality Therapy with involuntary clients
- f) Ethical questions in Reality Therapy
- g) Preparation for practical training: role-plays, demonstrations, analysis, discussions

MODULE - IX

PRACTICUM SESSIONS (4)

The module is designed to give the candidates, through exercises, role-plays, demonstrations, analysis and discussions, the opportunity to experience the relationship and skills with clients coming, or being sent, to the counselling because of unsatisfying social relationships.

REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)

- a) Supervised, Written Case Studies (1)
- b) Individual Sessions with Supervisor (1)
- c) Practice in counselling
- d) Peer Group Work
- e) Personal Experiences
- f) Literature Review

FOURTH YEAR

The Fourth Year Modules X, XI, XII, XIII (workshops, practicum sessions and additional activities) are designed to teach candidates how to deal with groups using CT and RT. Emphasis is on personal experience as well as on group therapy skills. Candidates develop sensitivity for individual distress in groups and group development. They gain skills to lead different groups. Through role-plays with groups of clients they gain skills for group RT.

MODULE - X

III. WORKSHOP: CT/RT -- AND WORKING WITH GROUPS I

- a) General theories about leading and facilitating groups
- **b)** The Choice Theory approach to the understanding of group development and dynamics, and comparisons to other approaches
- c) Using Choice Theory with groups: The development of the group through sequential phases and recurrent crises and the way participants satisfy their basic needs
- d) Characteristics of different kind of groups and different participants in a group
- e) Training in leading and participation in the 'Choice Theory Focus Group' as self-help group designed to improve public mental health and well-being
- f) Ethical questions in working with groups

MODULE - XI

PRACTICUM SESSIONS (4)

Through demonstrations, exercises, role-plays, feed-back, analysis and discussions the candidates get the experience and skills to lead different kind of groups including the 'Choice Theory Focus Group'. Candidates develop sensitivity for the growth of the group through sequential phases and recurrent crises and the way group participants satisfy their basic needs.

REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)

- a) Supervised, Written Case Studies (2)
- b) Individual Sessions with Supervisor (2)
- c) Practice in counselling
- d) Peer Group Work
- e) Personal Experiences
- f) Literature Review

MODULE - XII

IV. WORKSHOP: CT/RT - AND WORKING WITH GROUPS II

- a) General theories about group therapy
- b) Conventional psychopathology in group from the standpoint of Choice Theory
- c) Theory of change in Reality Therapy
- d) Reality Therapy with couples
- e) Reality Therapy with families
- f) Training in leading Group Reality Therapy with clients with a variety of psychological problems

MODULE - XIII

PRACTICUM SESSIONS (4)

Through demonstrations and experience of Group Reality Therapy, exercises, roleplays, feed-back, analysis and discussions the candidates get the experience and skills to offer therapeutic help to different groups of clients. The candidates get the opportunity to experience how to connect with clients, how to support the connectedness among the clients in the group and how to help them to resolve inner conflicts and frustrations. Candidates develop sensitivity for individual distress in the group and for group development. Through role-plays with group of clients they gain skills for group reality therapy.

REQUIRED ADDITIONAL ACTIVITIES (see Appendix A)

- a) Supervised, Written Case Studies (1)
- b) Individual Sessions with Supervisor (1)
- c) Practice in counselling
- d) Peer Group Work
- e) Personal Experiences
- f) Literature Review

MODULE XIV

ADDITIONAL WORSHOPS (optional)

SPECIFIC CONTENTS I (optional)

Workshops offer topics that candidates perhaps did not go over enough in the previous education or training programme and need to study more intensively.

SPECIFIC CONTENT II (optional)

Continuation workshop offers additional topics that candidates perhaps did not go over enough in the previous training programme and need to study more intensively.

MODULE - XV

DEMONSTRATION OF COMPETENCY

To complete the demonstration of counselling competency the candidate has to submit the Training Record provided with signatures of the faculty and with the consultant's recommendation.

The demonstration of counselling competency is done through a viva, where the candidate, based on the written work, presents to the Demonstration 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 the therapy.

The Demonstration Panel organised by the EIRT includes three of the Institute's Faculty. Demonstration of competency is public.

4. EVALUATION and ASSESSMENT

4.1. ASSESSMENT PROCEDURE

Training in reality therapy is based on the trainee's self-evaluation and co-verification with the supervisor and group members. At the end of each year of the training process, the trainee is also involved in an extensive co-verification process with his/her supervisor. This means that the trainee 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 required 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 Phase Two of training, and before Final Demonstration of Competency.

4.2 STAGES OF ASSESSMENT PROCEDURE

There is significant assessment in the RT training program between specific levels of the program, and in particular at the end of 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 instructor,

PHASE TWO:

Pre-entry:

Written self evaluation, Recommendation from Faculty member from Phase One Training Programme

PhaseTwo Training Programme:

At the completion of each stage of training there is a process of self-evaluation, co-verification with Instructor/practicum supervisor, and recommendation by instructor/practicum supervisor. Successful completion of this process is required for continuation to the next stage.

FINAL DEMONSTRATION OF COMPETENCY:

Following the successful completion of Module XV of the Training Programme the candidate chooses a consultant from amongst EIRT Faculty to help the candidate prepare the Final Demonstration. This is again a process of self-evaluation, coverification 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 Module XV above.

After successful demonstration of counselling competency, the candidate gains the title Reality Therapy Counselor.

APPENDIX - A

SHORT DESCRIPTION OF REQUIRED ADDITIONAL ACTIVITIES

Written examples at Basic Practicum Sessions (BP)

There are 6 written assignments at BP. The first two of these are based on Dr. Glasser's books "Control Theory" and "Choice Theory" which should be read before basic practicum starts. Participants write about their understanding of Glasser's ideas in these books, personal experience they were thinking about while reading and dilemmas and questions regarding the reading material. Three of the written assignments are based on everyday life frustrations in relationships by trying to analyse them using CT. The final one is profound self-evaluation based on the whole year's work in training and the plan for personal change which has been set at the beginning of the practicum. Participants usually send one example to the supervisor before each practicum session by e-mail. This is an opportunity for the supervisor to improve the relationship with the participant and to model CT principles. The supervisor reviews the participant's written examples and prepares a written answer to it by sharing his/her comments, suggestions, personal experience and ideas.

Written examples and case studies at Advanced Practicum Sessions (AP)

There are 6 written assignments at AP. The first two of them are based on Dr. Glasser's books "Reality Therapy in Action" and "Warning: Psychiatry Can Be Hazardous to Your Mental Health" which should be read before advanced practicum starts.

Candidates write about understanding Glasser's ideas in these books, personal experience they were thinking about while reading and dilemmas and questions regarding the reading material.

Three of the assignments are case studies based on work with clients. Candidates analyse the client's situation using CT and describe how they use CT in therapy – the New Reality Therapy. The final assignment is profound self-evaluation based on the whole year's work in training and the plan for personal change which has been set at the beginning of the practicum. Candidates usually send one example before each practicum session by e-mail. The supervisor reviews the candidate's written examples and prepares a written answers to it by sharing his/her comments, suggestions, personal experience and ideas.

Supervised case studies at Phase II

There are 3 written case studies at third year and 3 of them at fourth year of training. Unlike case studies at AP candidates choose the client for the case study in consultation with the supervisor. A case study at this level is much more profound. It consists of the description of the client's situation, analysis of it using CT and a short review of several sessions so that progress can be evident. During the preparation of a case study the supervisor offers his/her help and support.

After the case study is prepared the candidate discusses it with the supervisor individually (see individual supervision).

Analysing literature and preparing the presentations

Beside the books- already mentioned, all other publications from the CT/RT field are recommended to be read as well as books and written material regarding specific topics in III. and IV. year (psychosomatics, psychosis, addiction, etc; group work, ethics, review of different approaches, etc.)

Candidates usually prepare their presentations for the practicum from CT/RT publications. If they decide to use books from any other field the presentation should be adjusted and explained through CT.

Peer (supervision) review

At the beginning of training candidates are asked to put in some extra effort and to meet without the supervisor between practicum sessions. We call it peer supervision or peer review. It is an opportunity for candidates to share experiences, learn from each other focused on CT and improve their relationships and CT beliefs. It helps them sometimes to identify and later address with the supervisor some important questions. Peer review is very important personal experience.

Individual sessions with supervisor

Individual supervision begins at the same time as BP and lasts until Fourth Year. Candidates have an opportunity to work with the supervisor individually and discuss whatever they want. They can choose to do individual supervision with the supervisor who runs the practicum or may choose any other practicum supervisor who is willing to do it. During the practicum at Phase Two candidates choose the supervisor and have individual sessions based mostly on case studies. For every case study participants have 1.5 hours of individual supervision.

Personal experiences:

In addition to the personal experiences already mentioned, the candidate at the beginning of the training programme sets out a plan of personal change which focuses on at least two important relationships that the candidate evaluates to be in need of improvment in his/her life. The candidate makes a plan to improve those relationships using CT. S/he writes about the plan and its realisation in a diary so s/he can follow up her/his own personal development. The candidate uses the diary to take other relevant notes as well as collect important documents for a portfolio. All of this is used for the final self-evaluation and co-verification.