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Psychotherapy in France

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Quick Historical Review

It is interesting to note that several forerunners of Psychotherapy practiced *in France and in Austria*, the line between *Paris and Vienna* seems to have been particularly favorable to the development of this approach since the 18th century! **Franz Anton Messmer** (1734-1815), born in Germany, first studied theology and then medicine. The subject of his thesis in medicine was “The influence of the planets on human diseases.” He then went on to meet Father Hell (sic!), a Jesuit Professor of Astrology, who healed the sick with the help of magnets. Messmer borrowed this method and used his famous *oak tubs*, which allowed him to treat 30 patients at a time. In these tubs filled with water, crushed glass and iron filings soaked; moveable metal bars protruded from the covers and each of the patients held onto one end, while a pianist played the melodies of Mozart... The patients were roped together and the magnetizer-doctor, dressed in lilac silk, moved around with his magician’s wand and stared into the eyes of each one, in turn. The patients were seized with hysterical convulsions and thus the treatment room was given the name, “Hell of Convulsions.” A tub that was separate from the others, and free of charge, was reserved for poorer patients, and — as we would expect — the results were clearly less successful!

He was soon banished from the Faculty of Medicine in Vienna for “charlatan practices” and he left quickly for Paris —where he developed the methods described further. However, in 1784, the King of France ordered a review by experts and a number of famous scholars (including Lavoisier, Dr. Guillotin, the astronomer Bailly and B. Franklin) came to the same conclusion, in a very negative manner, specifying that “imagination without magnetism produces convulsions, whereas magnetism without imagination produces nothing” . After this new conviction, Messmer took refuge in Germany, but without any more luck, then to London — from where he returned to die, unknown by all, in his native country, Germany.

But why spend so much time on this story? Because we see here the beginnings of hypnosis, developed further by *Puységur*, *Liébault* (1823-1904), *Bernheim* (School of Nancy), *Charcot* (1825-1893) and *Janet* (1859-1947). And we know that *Freud* (1856-1939) was profoundly influenced by the four months of training that he undertook with them in 1885-86.

In the meantime, Jules Cloquet (1839) and Paul Broca (1859) practiced surgery using hypnotic anaesthesia, and in 1882, Charcot resuscitated hypnosis at the psychiatric hospital in *La Salpêtrière*. We know today that his service sheltered both epileptics as well as hysterics (who were always hypnotized by his students or assistants and thus, “prepared” without his knowledge, through “suggestion” to respond with inspired epileptic fits)!

In 1889, the first International Congress of Hypnotism was organized.

We also find with the work of Messmer the first approach to *hysteria* using *suggestion*, *placebo effect* and the *influence of the psyche on neurophysiology* as well as an attempt to using *group* psychotherapy.

Finally, it was in *France* that the first principal experiments took place of what would progressively become the Psychotherapy of the 20th century, with notably: **Messmer, Bernheim, Charcot, Janet and Freud.**

Psychoanalysis

We can consider most contemporary psychotherapies — with the notable exceptions of cognitive-behavioral approaches, Morenian Psychodrama, Family Systemic Therapy, NLP, etc. — as stemming from psychoanalysis, even if certain have clearly deviated from it.

Psychoanalysis has existed now for a *whole century* and has obviously evolved considerably, due, in one respect to changing mentalities, and secondly, to scientific research — especially in the fields of neurosciences, genetics and pharmacology.

Before reaching the age of 30, Freud opened his first office in April 1886, in Vienna, after a period of four months of training with Professors Bernheim and Charcot, in France.

His first four professional articles were written *in French*, between 1893 and 1896, concerning the subjects of hysterical paralysis, obsession, phobias, heredity and the etiology of neuroses. At the time however, these articles received absolutely no response. It wasn't until 11 years later that the first article was published about Psychoanalysis in the French language (written, by the way, by a Swiss from the *Zurich School*), and 18 years (1911) until Freud remarked with joy “the first Frenchman who has openly accepted Psychoanalysis.” (Dr. Morichau-Beauchant, of Poitiers); and it wasn't until 1921 that Freud suggested to Eugenie Sokolnicka to become “the first representative of Psychoanalysis in France,” that is, almost *thirty years after* the birth of Psychoanalysis.

In 1926, the *Paris Society for Psychoanalysis* (*Société Parisienne de Psychanalyse* — SPP) was formed, with the support of the Princess Marie Bonaparte. At this time, there were only *two* psychoanalysts in France, both trained in other countries (Sokolnicka and Loewenstein). At the time of Freud's death in 1939, there were 24, but this number fell to *only 11 French psychoanalysts*, at the outbreak of the Second World War *in 1945*. Since then, there has been considerable developments in France: today there exist about 1,000 psychoanalysts officially

recognized by the *International Psychoanalytical Association* (IPA), and about 5,000 “unofficial” psychoanalysts, divided into about thirty rival organizations, more or less formally structured, most of Lacanian inspiration.

In *My Life and Psychoanalysis*, Freud himself wrote in 1924: “During more than a decade after my separation with Breuer, *I didn’t have one single disciple*. I remained *absolutely isolated*. In Vienna, I was avoided; abroad, I was unknown.”

And so, the *First International Congress of Psychoanalysis*, in April 1908 in Salzburg (Germany), attracted only 42 participants: 26 Austrians, 5 Germans, 6 Swiss, 2 Hungarians, 2 English and 1 American. Therefore, there were *no representatives* for Latin, Slavic or Scandinavian countries.

As for the first essential works of Freud: *Studies on Hysteria* and *The Interpretation of Dreams*, they were unsuccessful, and the 600 copies of the latter work took... 8 years to be sold out!

It is amusing to see that France – where it took 30 years to be “converted” — is today (along with Argentina) the country where psychoanalysis is the most developed, even imperialistic, especially within universities — although the first signs of its decline have been noticed in the last few years.

The majority of psychoanalytic organizations in France remain faithful to the traditional couch and the various types of the “psychodynamic” movement have found very little response. Concerned with the preservation of the original purity of their approach, most French psychoanalytic groups remain separate from psychotherapy organizations — which they consider with a certain air of condescendence, even *opposing* most often psychoanalysis to psychotherapy¹.

This brief chapter does not allow for a detailed account of the principal French psychoanalysts who have played an important role in the positioning of this discipline — which has been marked by a succession of conflicts and splits, sometimes quite spectacular. I will simply list some of the most well-known: Angelo Hesnard, Marie Bonaparte, René Laforgue, René Allendy, Sacha Nacht, Daniel Lagache, Françoise Dolto, Jacques Lacan, Maud Mannoni, Serge Lebovici, Didier Anzieu, René Kaës, Serge Leclair, Jacques Sedat, André Green, Elisabeth Roudinesco, etc. Each one has emphasized one or another aspect of psychoanalysis. Thus, for example, Nacht attempted to heal; Lacan, to create and innovate; Lagache, to explain...

In the same way, each organization is unique: the *Paris Society of Psychoanalysis* (*Société Parisienne de Psychanalyse — SPP*), the largest and most well-known, is composed primarily of medical doctors, and practices a traditional psychoanalysis; the *French Society of Psychoanalysis* (*Société Française de Psychanalyse — SFP*) tends to gather together University teachers and writers; the *lacanian* groups have been increasing in numbers and are dedicated to controversy and innovation: thus, since 1954, Jacques Lacan was excluded for having introduced his famous ultra-short sessions (several minutes, instead of the usual 45).

¹ Cf. special issue of the magazine *Cultures in Mouvement* (*Cultures en Mouvement*), n°41: “Psychotherapies vs. Psychoanalysis, the debate” (October 2001).

Finally, I will mention **Jungian** psychoanalysis, which, through the impetus of Roland Cahen, Elie Humbert and Pierre Solié, saw the creation in 1969 of the *French Society of Analytic Psychology (Société Française de Psychologie Analytique)*, a branch of the International Association in Zürich.

The “New Humanistic Existential Therapies”

In France, after a strong development during a twenty year period (1960-80), psychoanalysis seems to show a progressive *decline* in relation to *cognitive-behavioral approach*, *family therapies* and to different variants of the movement called “*humanistic*” or *existential*, including: Gestalt Therapy (Perls), Transactional Analysis (Berne), Client-centered Therapy (Rogers), Psychodrama (Moreno), Psychosynthesis (Assagioli), NLP (Grinder and Bandler), New Hypnosis (Erickson), Psycho-Organic Analysis (Boyesen), Sophia-analysis (Mercurio), and Body Psychotherapies.

In the past few years, *Transpersonal* approaches (Grof) are gaining support, while *Vegeto-Therapy* (Reich), *Bio-Energetic Analysis* (Lowen) and *Primal Therapy* (Janov) are becoming less popular.

Psychodrama

Moreno created *impromptu theater* in Vienna in 1921 — he involved the audience as participants in a sort of “theater in the round,” without scenery. Two years later, a participant named Barbara, found herself transformed by the role she had played. This was the beginning of *therapeutic theater*. In 1925, Moreno moved to Beacon, USA, and established his first therapeutic theater, in 1936.

Psychodrama for *children* came to France in 1946 to the Claude Bernard Center (J. Favez-Boutonnier, Mauco, Berge, Lebovici, M. Monod).

In 1955, the *French Group for Sociometric Studies, Group Dynamics and Psychodrama (Groupe français d’Études de Sociométrie, Dynamique des Groupes et Psychodrame)*, was formed under the direction of Anne Ancelin-Schützenberger, with J. Favez-Boutonnier, Sivadon, Ouzilou, S. et A. Ginger, etc. France organized the first *World Congress for Psychodrama* in Paris in 1964, with the participation of Jacob-Levy Moreno and his wife, Zerka. There was even their 10 year-old son, Jonhatan, who played a role in almost all sessions!

But today, traditional *Morenian* psychodrama has almost disappeared in France, in response to the competition of *psychoanalytic* psychodrama (Lebovici, Diatkine, E. Kestenberg, Anzieu, G. et P. Lemoine).

Psychodrama suffers from a serious handicap: it is difficult to practice in *individual* sessions (except through the specific form of *monodrama*) and therefore, it is hardly used today except in *institutional* settings for children, the mentally ill, or even for groups of personal growth, rather than psychotherapy.

Client Centered Approach (CCA)

The basic text by Carl Rogers, *On Becoming a Person*, was published in 1942, but it wasn't until 1966 that Rogers came to Europe for the first time: to France (for a seminar in Dourdan), then to Belgium and the Netherlands. At this time, his concept of "non-directivity" was the most attractive and the most famous, and later, it contributed to the *anti-establishment* ideas which led to May 1968. But this concept, in fact, created prejudice against the ideas of Rogers, since the concept of *non-directivity* was often associated with a lax, "*laissez-faire*" attitude. Therefore, Rogers finally abandoned this label, in exchange for "Client Centered Approach" (CCA).

The central interest of Carl Rogers was *psychotherapy*. His approach was rapidly considered "revolutionary" in relation to Freudian psychoanalytic concepts, and it remains so.

In France, during the first period, it spread especially in *educational* circles, under the influence of André de Peretti.

Actually, the *therapeutic* aspects of this approach are underlined. The French Umbrella, *l'Association Française de Psychothérapie dans l'Approche Centrée sur la Personne* (AFP-ACP), chaired by Elisabeth Kremer, gathers about one hundred psychotherapists. The training lasts 4 years and it is given in four institutes, under the coordination of Berenice Dartevelle (Paris) and Patrick Kauffmann (Annecy).

The impact of ACP has become considerable in Anglo-Saxon countries (Germany, United Kingdom, Austria, Swiss Germany).

Gestalt Therapy

Conceived by Fritz Perls as of 1942 and presented in theoretical form nine years later (in 1951), Gestalt Therapy didn't begin to truly develop until the period of the international movement for liberation and creativity of May 1968. Gestalt is linked to an anarchical trend, emphasizing the irreducible originality of each human being, his responsibility as a unique and unified being, beyond norms yet socially integrated. Gestalt Therapy proposes a *holistic* approach of the five main dimensions of being: physical, emotional, cognitive, social and spiritual; or if preferred — body, heart, head, others and the world (Ginger, 1987). It is practiced equally well in group as in individual sessions and contemporary practitioners are interested in current research in the *neurosciences* and the various approaches of dynamic psychopathology.

Gestalt Therapy developed rapidly in Western Europe since the beginning of the 70's: in Germany, the Netherlands, Belgium, then in France. Gestalt Therapy is practiced today in 26 European countries — where we can count more than a dozen regular scientific journals and a research activity that has become more productive than that of the United States.

Today in France, there exist about ten training institutes, spread throughout the principal cities (Paris, Bordeaux, Grenoble, Nantes, Limoges, Rennes, Lille, etc.) and grouped into two national umbrella associations: the *French Society for Gestalt* (*Société Française de Gestalt* —

SFG, 1981) which publishes the *Gestalt Journal* (22 issues of an average of 200 pages each, published to date) and the *French College for Gestalt Therapy* (*Collège Français de Gestalt-thérapie*, 1996) which publishes the *Journal Cahiers de Gestalt Thérapie* (10 issues of an average of 200 pages each, published to date). The *Paris School of Gestalt* (*Ecole Parisienne de Gestalt — EPG*) with its different regional branches, created by Serge and Anne Ginger and currently directed by Gonzague Masquelier, has itself trained about 80% of the French Gestalt practitioners. The complete training lasts 4 to 6 years, depending on the institutes, and about a thousand qualified psychotherapists currently practice in France.

Transactional Analysis

Eric Berne has succeeded in popularizing psychoanalysis by making it accessible to common mortals, through a lively and humorous vocabulary, stemming from “games” and transactions of everyday life. *Games People Play* (1964) achieved rapidly a well-deserved success and several of its concepts reached the public domain: *the rebellious child*, *the critical parent*, *life script*, *parental injunctions*, “win/win”, as well as other terms which are widely known among therapists of neighboring disciplines: *the contract*, *the dramatic triangle of Karpman*, *re-decision*, *re-parenting*, etc.

The TA movement was immediately *highly organized* with a well-structured hierarchy, which sometimes attracted criticism but which allowed it to develop with a solid foundation and to enter into new areas such as Government institutions and private enterprises.

In its *psychotherapeutic* version, TA emphasizes the importance of a clear contract, and it is an approach that associates cognitive, emotional, behavior and group dimensions, giving value to tangible results, without neglecting the dimension of transference.

TA is practiced today in 23 countries of Europe and the *European Association* (EATA) includes almost 6,000 members. *Certification* is strictly regulated and centralized at an international level, attesting to the comparable competence of therapists trained in the different institutes. There are several in the various regions of France, but the final examination is always taken on a European level after an average of 6 or 7 years of study, and includes written theoretical exams and an oral test with demonstration. The European coordinator is currently a French woman: Isabelle Crespelle — who works quite actively, as well, within the EAP (*European Association for Psychotherapy*).

Psychosynthesis

Roberto Assagioli met Jung in Zurich in 1909. Assagioli was the *first Italian Psychoanalyst* but remained faithful to Jung after his separation with Freud. Assagioli created his own method, *Psychosynthesis*, in 1926 and this was undoubtedly the first *integrative* psychotherapy in the West, including the body, emotions, intellect and the *spiritual* dimension, incorporating as well music, drawing, visualization, as well as catharsis.

Today, this approach is still quite active in Great Britain (where three different training institutes co-exist), in Ireland, the Netherlands, Switzerland, Sweden and Austria, but especially *in Italy*, its country of origin — where a dozen institutes, as well as the University, teach its methods. The *European Federation* (EFPP) includes *eight institutes*.

In certain countries, Psychosynthesis is associated with Gestalt Therapy (Netherlands, Belgium, Norway), developing a *holistic* approach that includes both body and spirit.

In France, two training institutes are coordinated by Tan Nguyen and the number of specialists seriously trained is about several dozens.

Neuro-Linguistic Psychotherapy (NLP Therapy)

Neuro-Linguistic Programming (NLP) was developed by Grinder and Bandler, in California during the 70's, and it was based especially upon their observations of renowned psychotherapists: Fritz Perls (Gestalt therapy), Virginia Satir (Family therapy) and Milton Erickson (Hypnotherapy). NLP is based on meticulous *models of functioning* of each person, on learning *efficient* methods of communication and change (rather than the analysis of *pathological* behavior — as several other therapies have done).

The training to become a *Practitioner* or *Master* is rather brief (about 150 hours) and as a result, involves about 2000 people each year in France. The training to become a *Teacher* involves a year of practice, followed by two additional years of training.

Therapeutic NLP was recently established in 1999 and is more rigorous, involving a personal therapy, a training of 2000 hours during 4 years (both within NLP and in a *complementary* approach) as well as supervision. The therapeutic work is generally conducted in *individual* sessions of varying lengths and duration. A *European Association for Neuro-Linguistic Psychotherapy* (EANLPt) has recently been formed, with national associations in most countries of Western Europe.

In France, there are currently 4 institutes that offer preparation for the *therapeutic* aspect of NLP (as compared to 27 institutes which offer general training) and they have now trained 20 psychotherapists at the ECP level. The French coordination is currently entrusted to Catherine Tamiser, Nicole Catona, and Grazyna Koperniak.

Sophia Analysis

Created by Antonio Mercurio, Sophia Analysis stems from Psychoanalysis and integrates existential, philosophical and anthropological dimensions. It refers especially to concepts from *the English School of Psychoanalysis* (M. Klein and Winnicott) and freely incorporates group work as well as creative and artistic aspects.

Sophia Analysis is especially present in *Italy* (with 9 training institutes) as well as Belgium (with specialization in *couples therapy*). The various European institutes can be found within *Sophia University of Rome* (SUR) that regularly organizes international colloquiums.

The *Institute of Sophia Analysis of Paris* was founded in 1986 and is currently directed by Hervé Etienne. The number of qualified therapists currently practicing is still quite small.

Psycho-Organic Analysis (POA)

POA was developed by Paul Boyesen at the end of the 70's on the basis of *Biodynamics Psychology*. POA associates two approaches: psychoanalysis and a body-oriented approach.

In POA, a thought isn't only a content, but also a container: the body. A word is transmitted by an image and touches the body; and conversely, from the "cellular unconscious," an image and a word are formed.

This approach is present in France, Germany, Belgium, Spain, Luxembourg, Switzerland, as well as Latvia. Another group is currently being formed in Russia. The *European Association* (EAPOA), created in 1986 and recognized by the EAP, contains 500 psychotherapists belonging to several national associations.

The most well-known training institute is located in France and includes around 30 specialists. Each national association publishes a journal and books. The principal French coordinators are: Paul Boyesen, Eric Champ, Jacqueline Besson, Chantal Vaglio, Anne Fraise.

The French journal (ADIRE) has published 18 volumes and 5 training manuals.

Ericksonian Hypnosis

Ericksonian Hypnosis has progressively taken the place of traditional hypnosis in France. It involves a self-hypnosis with modified states of consciousness. It is practiced notably in the management of pain, symptoms of post-traumatic stress and psychosomatic problems.

In France, it is taught today in a half-dozen institutes and is often reserved primarily for medical doctors. The principal French teachers are: Jacques Antoine Malarewicz, Jean Godin, Thierry Melchior, and François Roustang.

For the moment, these institutes do not wish to adhere to the *French Umbrella Federation for Psychotherapy* (FFdP) and therefore function somewhat independently.

Systemic Family Therapies

The systemic approach is taught in France in several different schools, each presenting specific characteristics.

The theoretical references are diverse: Nathan Ackerman, Virginia Satir and Carl Whitaker, Gregory Bateson, Paul Watzlawick, Jay Haley, Salvador Minuchin, Mara Selvini, and in France, notably: Robert Neuburger, Jean-Claude Benoît, Marie-Christine Manuel and Mony Elkaïm — who coordinates a part of the teachings and chairs the *European Family Therapy Association* (EFTA).

Most of the institutes and associations of Family therapy have not asked to adhere to the French National Umbrella for Psychotherapy (FFdP) and therefore function somewhat independently.

Cognitive-Behavioral Therapies

The Cognitive-Behavioral Therapies are based on an approach that is essentially experimental and practical, giving an important role to validation studies. These therapies are practiced in individual sessions, in groups or within institutions. They are based on learning theories, conditioning theories (Pavlov and Skinner) and the study of beliefs. They use standard procedures and a clear and progressive contract, allowing for an ongoing evaluation of the work. The treatments are usually short-term (10 to 20 sessions, in less than six months).

These therapies are often used in the Anglo-Saxon and Scandinavian countries, but have had relatively less impact in France, aside from some hospital services that treat phobias and obsessive disorders. In France today, there are several hundreds of specialists, the majority being psychiatrists — the most famous being Dr. Jean Cottraux.

These therapies are taught in several universities and are used mostly by medical doctors — with no requirement of undergoing a prior individual psychotherapy.

Sexology

In France, Sexology is not considered to be a specific method of psychotherapy. Since its creation in 1974, the *French Society of Clinical Sexology* (*Société Française de Sexologie Clinique – SFSC*) has chosen an *eclectic* approach, under the coordination of Charles Gellman, Gérard Vallès, Michel Meignant, Georges Teboul, etc.

Thus, various trainings and specializations have been developed in parallel, some inspired by psychoanalysis (Gérard Vallès, Georges Teboul) — enriched by “sexoanalysis” (Claude Crépault, from Montreal) — some inspired by cognitive-behavioral therapies, following the work of Masters and Johnson (Mireille Bonierbale, Robert and Claire Gellman); others inspired by Gestalt Therapy (“Sexo-Gestalt” — with Charles Gellman, Martine Masson, Chantal Higy-Lang), by hypnotherapy or systemic approach.

Recently, a distinction has been proposed between medical doctor “sexologists” and “sexotherapists” which includes non-medical specialists who are psychotherapists (psychologists, marriage counselors, social workers, nurses, midwives, etc.)

The training takes place in several universities (Bobigny, Toulouse, Nantes, Paris 7) as well as private associations (SFSC, Gestalt Institut de Neuilly, etc.)

Among the trainers and leaders are: Jacques —Waynberg, Marc Ganem, Nicole Arnaud-Beauchamps, Pierre Benghozi.

Most of the practitioners incorporate biomedical or endocrinology interventions, behavioral therapies, studies of profound psychological problems, both intra- and inter- psychic, as well as relationship-oriented problems within the couple. In order to emphasize the important role of the emotional and relational² dimension within Humanistic Sexology, Michel Meignant has proposed the term “*amourologie*” (“Love-ology”).

A particular variety of Sexotherapy is represented by the work with couples, notably within Gestalt Therapy (Anne and Serge Ginger, Charles Gellman, Martine Masson).

In France, some more or less classic European approaches have not been developed, such as: Biosynthesis, Logotherapy, Positive psychotherapy, Communicative psychotherapy, Catathymic approach, etc.

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After this quick review of the main French approaches, let us take a look at the overall situation.

The General State of Psychotherapy Today in France

The professions involved ... and their rivalries

The practice of psychotherapy is not yet officially or legally regulated in France: It includes psychotherapists, psychiatrists, psychologists and psychoanalysts.

Psychotherapists are grouped together within a National Umbrella Organization: the *Fédération Française de Psychothérapie (FFdP)* which officially represents in France *the European Association for Psychotherapy (EAP)* and *the World Council for Psychotherapy (WCP)*.

Psychiatrists are represented by the “Order of Doctors” (*l’Ordre des médecins*), the French Union of Psychiatrists (*le Syndicat Français des Psychiatres*) and the French Association of Psychiatry (*l’Association Française de Psychiatrie*).

Psychologists are represented by the *National Umbrella Association of Organizations of Psychologists (Association Nationale des Organismes de Psychologues — ANOP)* and the *National Union of Psychologists (Syndicat National des Psychologues - SNP)*.

Psychoanalysts are represented today by more than *twenty associations* and rival groups, and are often in conflict. With the initiative of Serge Leclaire, and Jacques Sedat (APUI) and

² In Paris today, we see one divorce for two marriages.

finally, Jean Cournut, a national coordination has been attempted, but with little or no success as of now.

AFNOR (*Association Française de Normalisation*) has tried — with the encouragement of the SNPPsy (*Syndicat National des Praticiens en Psychothérapie*) and then the FFdP (*Fédération Française de Psychothérapie*) — to elaborate a standardization of the training for psychotherapy by defining common minimal standards, but it has not yet been able to obtain the consensus of different professional groups (psychiatrists, psychologists, psychoanalysts and psychotherapists).

In fact, the psychiatrists maintain that all psychiatric actions contain a psychotherapeutic dimension and that the practice of psychotherapy should be strictly reserved for psychiatrists and clinical psychologists, with the latter being placed in a position of auxiliary to the psychiatrists, and under their supervision — having decided to call themselves “psychotherapists” with no process of verification as to their own personal therapy, their *specific* training, nor their supervision.

This “imperialistic” position of the psychiatrists is upsetting to the psychologists and psychotherapists — who legitimately claim the right to practice psychotherapy in an autonomous and independent manner, after a long specific training at an advanced level (7 years of post-graduate training).

The *French State Council (Conseil d’Etat)* has decided that the practice of psychotherapy should not be reserved only for medical doctors and that its practice should be open to all specifically trained specialists who have formally accepted an ethical commitment. Psychotherapy is not limited to the treatment of the mentally ill but also concerns a large portion of the population that suffer from emotional and social problems. It is involved, for example, in family separations, and problems concerning immigration, violence, unemployment, drug abuse, etc.

For more than 20 years, French psychotherapists — under the aegis of the PSY’G (1966) and the SNPPsy (1981) — have proclaimed the necessity of respecting the principles which were re-expressed, in 1990, in the *Strasbourg Declaration (Strasbourg Declaration)* of the EAP, that is, the independence and the specificity of psychotherapy as well as the free choice of psychotherapist and the modality of intervention (*Paris Declaration, 1998*).

Recently, within their *European Federation of Professional Psychologists Associations (EFPPA)*, psychologists recognized that their university training was not sufficient for them to practice psychotherapy and that it would be necessary for them to add to their 5 or 6 years of studies, another supplementary *specific* training of at least 3 years.

Psychotherapists

There are today in France around **12,000 psychotherapists**. A certain number of them are members of the four principal professional interdisciplinary organizations (non specialized in one or another modality), which are:

- PSY'G (1966): *Groupement Syndical des Praticiens de la Psychologie, Psychothérapie, Psychanalyse (Union Group of Practitioners of Psychology, Psychotherapy, Psychoanalysis)* which unites around a hundred practitioners in Psychotherapy ;
- SNPPsy (1981): *Syndicat National des Praticiens de la Psychothérapie (National Union of Practitioners of Psychotherapy)* which gathers together several hundred practitioners of Psychotherapy of different modalities ;
- FFdP (1995): *Fédération Française de Psychothérapie (French Umbrella Federation of Psychotherapy)* which gathers together 60 organizations and societies which represent several thousand practitioners ;
- AFFOP (1999): *Association Fédérative Française des Organismes de Psychothérapie (Federative French Association of Psychotherapy Organizations)* which gathers together around a thousand practitioners

...But many others work in an independent manner, without being affiliated to any of these federal or union structures, and therefore escaping any control, in the absence of any legislation or obligatory national regulations³.

The pre-requisites

In the absence of any official legislation, the pre-requisites to undertake a training to become a psychotherapist vary quite a bit from one institute of training to another. In general, the training is designed for professionals in the fields of health or education, and constitutes a *second profession*.

The average age of the beginning of the training of psychotherapist is usually, in France, *between 35 and 45 years*. Since this profession is not yet officially recognized, we find hardly any young students. In any case, a sufficient life-experience is requested, and it is therefore rare to find any candidates of less than 30 years of age.

Regarding their **original professions**, candidates are found especially among psychologists, medical doctors, social workers, teachers and special education professionals, nurses and psychiatric nurses, physical therapists and other paramedical professions. We may estimate, on the average, about:

- 5-10% medical doctors
- 25% psychologists
- 20% social workers
- 15% nurses or psychiatric nurses
- 15% teachers, professors or adult trainers/coaches.

³ Which explains that the exact number of qualified practicing psychotherapists remains imprecise.

It is usually required to have undertaken a **personal psychotherapy** (individual or group) before beginning specialized studies. This psychotherapy often continues during the training and at the beginning of professional practice.

The training

The first year of studies is often a **probationary period** during which the motivations and personal aptitudes of the students are evaluated, especially concerning their *personality*: maturity, general equilibrium, creativity, capacity to listen and to reach emotional controlled involvement, etc. It is not the academic diplomas that are the most important.

At the end of the studies, a written **thesis** (or mini-thesis) of reflection or personal research is required, allowing for an evaluation of the integration of the theory into a professional practice.

Internships in psychiatric hospitals are often difficult to obtain in France, due to the current legislation. On the other hand, some fieldwork is required, within psychological or social associations or organizations.

Installation

Upon receiving their diploma, a large part of the students soon set up a **private practice** with a regular and long-term supervision, usually lasting their entire professional career. This is included in the *code of ethics* that every new practitioner is invited to sign, especially if they join a professional or umbrella group or union.

However, since the profession of psychotherapy does not yet have a legal status, the surveillance is not systematic and any one is able to call himself “psychotherapist” with no legal repercussions — which leaves the door open to some charlatans or “gurus” who recruit for their sect, thus usurping the profession.

Potential users are therefore invited to inquire directly to the various unions and to *National Umbrella Organization*, the FFdP (*Fédération Française de Psychothérapie*), before choosing a therapist, in order to assure themselves of his/her training and adherence to a Code of Ethics. Young professionals usually belong to a group of colleagues of their modality (TA, Gestalt, APO, etc.) and participate regularly in *colloquiums* — conventions and meetings (in service postgraduate permanent training), often financed by various organizations.

The cost

In France, sessions of psychotherapy are not reimbursed by the **Social security system** unless the therapist is also a medical doctor. In other cases, the client pays for his own treatment, but the fees are often adapted in relation to the income of the clients. Also, some health insurance policies may reimburse the sessions. The therapist must pay an additional VAT (TVA) of 19,6%,

unless he/she is a medical doctor or clinical psychologist. Some *clinics* may allow for non-paying client care, in cases of necessity, but they are notably insufficiently limited in number, and this is the same case for *hospitals*.

For these reasons, we are actively working for a legal recognition and a *regulation* of the profession, but the FFdP don't ask for a reimbursement by Social security — in which case the psychotherapists would be dependant of the psychiatrists for the choice of the modality, the control and the duration of the therapy.

What is the FFdP?

Brief historical review

The *French Federation of Psychotherapy (La Fédération Française de Psychothérapie – FFdP)* was founded in May 1995 to regroup the totality of psychotherapeutic organizations in France: national or regional associations, institutes and schools, professional unions. The FFdP today includes around 60 organizations, representing *around twenty different modalities*.

The FFdP represents France within the *European Association for Psychotherapy (EAP)* which includes about 150,000 professional psychotherapists in 46 European countries.

The EAP and the FFdP refer to the *Strasbourg Declaration* (1990) which specifies that psychotherapy is an *independent scientific* discipline, the practice of which represents a *free profession*, requiring an *advanced level of qualification* — theoretical and clinical. This profession is therefore distinct from that of the psychologist or psychiatrist — for whom their university training does not include psychotherapy.

The ECP

The *European Certificate of Psychotherapy (ECP)* was established during a Congress in Roma (June 1997). It specifies the conditions of postgraduate training: 3,200 hours in 7 years, including an intensive training of at least 4 years in a scientifically validated modality. Today, there are around 20 modalities recognized (psychoanalysis, behavioral therapy, family therapy, humanistic-existential therapies – such as: Gestalt Therapy, Transactional Analysis, therapeutic NLP, Hypnotherapy, Psycho-organic Analysis, Psychosynthesis, etc.)

The criteria of awarding the ECP were negotiated during numerous international meetings (Vienna, London, Rome, Paris, Amsterdam, etc.) by the delegates of around 30 European countries.

In the first stage, a “grandparenting clause” is applied, concerning *already established* psychotherapists, who have been practicing for at least 5 years and are recognized by a national commission of peers. This period of “grandparenting” is scheduled to end on *the 31st December 2002*, in France.

The FFdP is the only French organization qualified to propose the award of the ECP.

The National Commission of Attribution of the ECP consists of 12 members elected by a qualified 2/3 majority, among the ECP holders of a, and representing 8 different modalities. Each of them may be represented by no more than 2 persons maximum.

At this time, the FFdP has studied about 300 detailed professional files (of 10-40 pages each) of candidates for the ECP. Each file is scrutinized with care and those who have not already been recongnized by a National Commission of peers of their modality may be called for an interview before the *National Commission of Attribution of the ECP*. More than 200 files have been transmitted to the EAP with a favorable judgment and have then obtained their ECP, whereas 70 have been refused or postponed. French candidates must be approved by a 2/3 majority and then accepted by the official European Association representing the modality they practice (*European Wide Awarding Organization – EWAO*).

French National Register of Psychotherapists

A *French National Register of Psychotherapists* is published by the FFdP and kept up-to-date on the *Internet*. The first edition (2000) includes about 500 certified psychotherapists. This directory is distributed to the public-at-large as well as to public authorities.

In order to appear in the directory, the psychotherapist must be able to justify a **complete training**, involving:

- an in-depth *personal psychotherapy*
- an in-depth specific *theoretical and clinical* training
- a regular *supervision* of their clinical practice
- a commitment to respect the FFdP's *Code of Ethics*

Each psychotherapist must, as well, be a *member of the FFdP* (as an individual or in the name of a member organization) and countersign the *Strasbourg Declaration*.

Individual members

The *Extraordinary General Meeting* (EGM) of May 1999 decided by a unanimous vote to admit, as well as institutions, *individual* members under certain conditions and notably if they were part of an organization which is not yet a member of the FFdP (for example, psychoanalysts, family therapists or hypnotherapists). The applicants are examined by an *Admissions Commission*, and then voted by the Board. The college of individual members has *one vote* for each group of 25 members. As of today, the FFdP includes around 60 organizations and almost 300 individual members. The total represents several thousand psychotherapists.

Official recognition of the profession of psychotherapist

The FFdP has undertaken regular discussions with Public Authorities concerning an official recognition of the profession. *Transitory measures* are planned for already-established psychotherapists who are duly qualified and in practice for several years.

The FFdP is concerned with protecting the public of potential users and fights *against sectarian movements* which sometimes may usurp certain psychological techniques and attempt to induce a dependency in their followers, whereas psychotherapy, on the contrary, aims to develop autonomy and responsibility. The FFdP proposes a *Charter of Users of Psychotherapy* which specifies their rights and contributes to the protection of the public against charlatans and gurus.

Colloquiums, Conventions and Congresses

The FFdP regularly organizes Colloquiums and Conventions. In 2001, it united all its members for a *large Congress (États généraux de la Psychothérapie)* in Paris and in several other cities.

It has also undertaken for this occasion a large ***national survey of research*** regarding psychotherapy, using a representative sampling of 8,000 people in the French population — in collaboration with the national institute of surveys BVA and the magazine, *Psychologies*. This survey showed that in France *5.2% of the general population* has undertaken, or is in the process of undertaking psychotherapy, that is to say, nearly three million people. This number increases regularly because of current social conditions, and thus constitutes a preoccupation of national interest.

This first large scale study — regarding *users* and not professionals — has allowed us to see that, in spite of the considerable place that psychoanalysis occupies in the French media, it concerns only 30% of the therapies (12% if we consider only the traditional psychoanalysis of the *couch variety*, with several sessions per week), whereas the non-analytical therapies, although less known, represent 70% of the treatments: 20% cognitive-behavioral, 12% humanist-existential, 12% family or couple therapies ... and 26% of therapies poorly defined by the beneficiaries — still very insufficiently informed.

2/3 of the users are women. 50% consulted for depression, sleep-related disorders, anxiety or major stress; 22% following a bereavement, an abandon or a psychic trauma, 21% for a phobia or panic attacks.

In this study, the consumption of psychotropic medicines (antidepressants, tranquilizers or antipsychotics (*neuroleptiques*)) reaches 49% during the psychotherapy and falls to 27% afterwards.

Finally, the users express their satisfaction with their psychotherapy in *84% of the cases*, particularly appreciating the quality of listening skills, the competence, intuition and discretion of

their therapist. Only 1.4% complained, notably of an “ambiguous” sexual behavior of their psychotherapist.

Thus, in spite of still insufficient information, psychotherapy is gaining recognition, little by little, in the French population, not only among top managers (23%) and intermediary professions (21%) but also among employees (13%), the working class (15%) and even farmers (2%).

Serge Ginger.

Some addresses (Organizations members of FFdP) June 2002

French National Awarding Umbrella Organization (NAO) for Psychotherapy:

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• **Association d'Analyse Psycho-Organique (AAPO)**

6 rue Léon Jouhaux - F-64000 - PAU - FRANCE. Telephone: 05 59 02 65 73

• **Centres Psycho-relationnels (ACSSA -ARSSO)**

25, avenue de l'Entre deux Mers - Bordeaux rive droite - F-33370 - FARGUES ST-HILAIRE - FRANCE. Telephone: 05 56 21 21 14 - Fax: 05 56 21 21 14

E-mail: <arssso@wanadoo.fr> Site: www.arssso.com

• **Association Européenne des Thérapeutes Psycho-corporels et Relationnels (AETPR)**

21 rue Vauban - F-67000 - STRASBOURG - FRANCE.

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• **Association Française de Psychothérapie : Approche Centrée sur la Personne (AFP-ACP)**

BP 43 - F-75261 - PARIS CEDEX 06 - FRANCE.

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• **Association Française de Programmation Neuro-Linguistique (AFPNL)**

2 square Vermeuzen - F-75005 - PARIS - FRANCE. Telephone: 01 43 36 51 32

• **Association Française de Psycho Somatothérapie (AFPS)**

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• **Association Française de Somatothérapie (AFS)**

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• **Atelier de Gestalt du Limousin (AGL de l'ILFC)**

4 bd de Fleurus - F-87000 - LIMOGES - FRANCE

Telephone: 05 55 32 59 16 - Fax: 05 55 32 93 60

• **Association de la Psychologie de la Motivation (APM)**

92, rue de la Pompe - F-75116 - PARIS - FRANCE. Telephone: 01 44 05 18 63

• **Association de Recherches Acoustiques Biologiques Electro-Radiologiques (ARABEL)**

38 rue du Docteur Paul Michaux - F-44230 - SAINT SEBASTIEN SUR LOIRE - FRANCE

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- **Centre d'Analyse Psycho-Organique de Paris (CAPOP)**
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Telephone: 01 47 00 41 23 - Fax: 01 47 00 41 23

- **Centre Évolution (CE)**
14 rue des Saints Pères - F-75007 - PARIS - FRANCE. Telephone: 01 42 60 20 50

- **Centre International Développement Personnel et Formation**
"Le Hameau de l'Etoile" Route du Frouzet - F-34380 - ST MARTIN DE LONDRES - FRANCE. Telephone: 04 67 55 75 73 - Fax: 04 67 55 09 10

- **École d'Analyse Transactionnelle (EAT)**
23 rue de Palestro - F-75002 - PARIS - FRANCE.
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- **École d'Analyse Transactionnelle - Lyon**
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- **École d'Analyse Transactionnelle de Montpellier (EAT-Montpellier)**
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- **École Européenne de Psychothérapie Socio- et Somato-Analytique (EEPSSA)**
42 rue du Général de Gaulle - F-67640 - LIPSHEIM - FRANCE.
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- **École Férenczienne (EF)**
Couperdrix - F-77560 - AUGERS EN BRIE - FRANCE .
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- **École Française d'Analyse Psycho-Organique (EFAPO)**
48 rue Monsieur Le Prince - F-75006 - PARIS - FRANCE.
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- **École Parisienne de Gestalt (EPG)**
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- **École Rennaise de Gestalt (ERG)**
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- **École Supérieure de Psychothérapie Neuro-Linguistique (ESPtNL)**
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• **École des Thérapeutiques Appliquées à la Psychosomatique et à l'Energétique (ETAPE)**
2 place Garibaldi - F-06300 - NICE - FRANCE. Tel: 04 93 55 92 31 - Fax: 04 93 55 92 31
E-mail: etapsycho@wanadoo.fr - Site: www.etapsycho.com

• **Fédération Francophone de Psychothérapeutes Neuro-Linguistique (FFPtNL)**
3 avenue de la Synagogue - Le Bonaventure - F-84000 - AVIGNON - FRANCE
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• **Fédération Internationale de Sophrologie Analytique (FISA)**
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• **Fédération Internationale des Organismes de Formation à la Gestalt (FORGE)**
183 rue Lecourbe - F-75015 - PARIS - FRANCE
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• **Gestalt Institut de Neuilly (GIN)**
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• **Institut d'Analyse Transactionnelle France-Belgique**
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• **Institut de Formation en Communication et thérapie psycho-Corporelle (IFCC)**
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• **Institut de Formation à la Méthode Camilli (INFOMECA)**

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• **Institut Psycho-Relationnel Européen (IPRE)**

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• **Institut de Sophia-Analyse de Paris (ISAP)**

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• **Le Savoir-Faire PNL (LESFPNL)**

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• **Association Francophone des Certifiés en PNL (NLPNL)**

8 rue du Faubourg Poissonnière - F-75010 - PARIS - FRANCE. Telephone: 01 64 35 89 06

- Fax: 01 69 01 62 66 E-mail : nlpnl_as@wanadoo.fr site: <http://perso.wanadoo.fr/nlpnl>

• **Person-Centered Approach Institute - France (PCAI - France)**

22 chemin des Creux - F-74140 - VEIGY-FONCENEX - FRANCE

Telephone: 04 50 94 93 12 - Fax: 04 50 94 34 47

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5 bis rue Maurice Desvallières - F-77240 - SEINE-PORT - FRANCE

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• **Institut Français de Psychothérapie Intégrative (RCH Conseils)**

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• **Recherches et Études Systémiques sur les Communications Institutionnelles et Familiales (RESCIF)** 19 rue de la 1re Armée - F-67000 - STRASBOURG - FRANCE.

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• **Société Européenne de Thérapie Analytique et Corporelle (SETAC)**

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• **Société Française de Psychologie Adlérienne**

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• **Société Française de Psychosynthèse Thérapeutique (SFPT)**

19 rue Frédéric Lemaître - F-75020 - PARIS - FRANCE

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• **Société Française de Sophrologie (SFS)**

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• **Sexologie Humaniste Analytique Association (SHAA)**

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• **Syndicat National des Psychothérapeutes Psychologues (SN2P)**

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• **Syndicat National des Sexologues Sexothérapeutes (SNSS)**

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