Child & adolescent psychotherapy is an intense specialist training which is taught at Master’s level over 3-5 years. The New Zealand training is based on the Tavistock model of psychoanalytic psychotherapy. In addition, New Zealand training incorporates theoretical knowledge and constructs of psychodynamic psychotherapy, object relations and systems theory with a strong focus on working with the child in the context of the family and their environment, adapted to New Zealand culture and social structure.

Child & adolescent psychotherapy training was first offered in New Zealand in the early 1970’s at Otago Med School and is currently offered at AUT in Auckland. The initial AUT programme ‘Graduate Diploma in Clinical Child Psychotherapy’ was offered in 1995, and the programme became a Master’s level qualification in 1999.

There are currently 50+ graduates from these trainings who work in a variety of roles in clinical settings including specialist consultancy and clinical supervision.

Theoretical content of child & adolescent psychotherapy training includes
* in-depth understanding of child development – physical, cognitive, psychological, emotional and social
* in-depth theoretical knowledge of attachment theory; object relations theory; psychoanalytic theory; psychodynamic theory and systems theory
* development through the lifespan
* social & cultural dynamics
* different clinical population for example adolescents; different cultures; refugees; parent/child dyads; adoption / foster-care; trauma related disturbances
* psychiatric disorders / childhood disorders
* liaison with other relevant disciplines - knowing when to consult / make a referral
* report writing / record keeping

Development of clinical knowledge and skills: NB integral to child and adolescent psychotherapy training are -
a two-year mother/infant observational study; and
a minimum of two years supervised clinical work

In addition, clinical knowledge and skills developed during training incorporate:
* ability to take a comprehensive developmental history & family history
* ability to develop an appropriate treatment plan informed by the known referral information, developmental history & family history, direct observation and interaction
* compiling a mental status report
* understanding symbolic and non-verbal communication
* clinical skills and therapeutic techniques for working with children & adolescents
* ability to write comprehensive clinical reports
* ability to work within a multi-disciplinary system
* research skills; since child and adolescent training became a Master’s level all graduates have undertaken independent research and completed a dissertation. NB this is in addition to a final clinical assessment of an extensive case study of a child seen in individual psychotherapy, and a write up of their two year M/I study.

Registration
Psychotherapy became a registered profession under the HPCAA in 2007. The specialist scope of practice (Psychotherapist scope of practice with child and adolescent psychotherapist specialism) was developed in recognition of the different training for child and adolescent psychotherapists. Only people who have completed a formal clinical
training in child and adolescent psychotherapy that includes all of the above, in particular a two year infant observation and final clinical assessment as identified above, are eligible for registration in this scope.

NB other people can work with children within their level of competence. There is no assessment of this by the Board.