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## HISTORY OF PSYCHOTHERAPY IN SLOVAKIA

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Authors present the history of psychotherapy in Slovakia. The first section refers to the social requirements for psychology and psychotherapy development. The history of psychotherapy alone is analysed in three stages of development. The first stage includes the years 1918–1945, where, related to the activities of the Clinic of Psychiatry and Neurology of the Faculty of Medicine of Comenius University in Bratislava, we come across the first attempts at applying psychotherapeutic approaches in medical practice and in the training of physicians. The second developmental stage (1945–1989) introduces individuals that significantly influenced the development of psychotherapeutic theories and their application in individual fields of clinical practice. They simultaneously show the contribution of the training school SUR to the development of psychotherapy in Slovakia. The most significant changes in the aspect of domestication and development of psychotherapy in Slovakia happened in the last characterised stage, in the period following the Velvet Revolution in 1989. The previously almost unavailable psychotherapeutic literature became available and psychotherapy was gradually introduced into the undergraduate and postgraduate education of physicians and other professionals. The first Slovak Society of Psychotherapy was founded and became a common ground for professionals in this field. In the final section of this paper, the authors present current questions and problems of the development, research and application of psychotherapy in Slovakia and briefly characterise the influence of legislation changes and reforms in healthcare on the position of psychotherapy.

**Keywords:** history, 20–21<sup>th</sup> century, psychotherapy, psychology, psychiatry, communism, dictatorship, helping profession, Slovakia

**Geschichte der Psychotherapie in der Slowakei:** Die Verfasser stellen die Geschichte der Psychotherapie in der Slowakei dar. Im ersten Teil geht es um die gesellschaftlichen Voraussetzungen nach den drei Phasen ihrer Entwicklung behandelt. Die erste Phase umfasst den Zeitraum von 1918 bis 1945. Damals fanden im Zusammenhang mit den Aktivitäten der Klinik für Psychiatrie und

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Neurologie der Medizinischen Fakultät der Comenius-Universität in Bratislava die ersten Versuche der Anwendung psychotherapeutischer Ansätze in der medizinischen Praxis und bei der Ausbildung von Ärzten statt. In der zweiten Entwicklungsphase (1945–1989) traten Persönlichkeiten auf, die die Entwicklung psychotherapeutischer Theorien und ihrer Anwendung in den einzelnen Bereichen der klinischen Praxis erheblich beeinflusst haben. Sie zeigen zugleich den Beitrag der Ausbildungsstätte SUR zur Entwicklung der Psychotherapie in der Slowakei. Die bedeutendsten Veränderungen hinsichtlich der Etablierung und der Entwicklung der Psychotherapie in der Slowakei erfolgten in der letzten der drei Phasen, in der Zeit nach der Samtenen Revolution im Jahr 1989. Zuvor beinahe unzugängliche psychotherapeutische Literatur wurde zugänglich, und die Psychotherapie wurde schrittweise in die postgraduale Ausbildung von Ärzten und anderen Fachleuten integriert. Die erste Slowakische Gesellschaft für Psychotherapie wurde gegründet und wurde zur gemeinsamen Basis der in diesem Bereich tätigen Fachleute. Im abschließenden Teil des Beitrags zeigen die Verfasser aktuelle Fragen und Probleme der Entwicklung der Psychotherapie in der Slowakei, der Forschung in diesem Bereich und der Anwendung der Psychotherapie in der Slowakei. Außerdem gehen sie kurz auf die Auswirkungen von Gesetzesänderungen und Reformen im Gesundheitswesen auf die Stellung der Psychotherapie ein.

**Schlüsselbegriffe:** Geschichte, 20–21. Jahrhundert, Psychotherapie, Psychologie, Psychiatrie, Kommunismus, Diktatur, helfende Berufe, Slowakei

## **1. Social requirements for the development of psychology, psychiatry and psychotherapy in Slovakia**

Since the end of the 10<sup>th</sup> century until 1918, Slovakia was a part of the Hungarian Kingdom, and since 1526 of the Habsburg Monarchy that was formed by uniting the Austrian countries, the Czech Kingdom, and Hungary into one state under the rule of the Habsburg dynasty. The first universities in Hungary (Pécs 1367, Óbuda 1395, Pozsony/Pressburg/Bratislava 1465) survived only for a few years, thus higher education and culture was influenced by students returning from universities abroad, mainly from neighbouring countries, where universities existed continually since the second half of the 14<sup>th</sup> century (Prague, Cracow, Vienna). However, there is also evidence of students attending more distant universities in Italy or Western Europe. These graduates could be the first to introduce a certain segment of psychologically focused knowledge, although it is impossible to speak about specialised education in psychology at medieval universities. The study of the psyche received, however, more space within the study of philosophy and theology at newer Jesuit universities, including the university in Trnava (Nagyszombat, Tyrnau) founded by Cardinal Peter Pázmány in 1635. The first two faculties of the university were the Faculty of Arts and the Faculty of Theology. The Faculty of Law was added in 1667 and later the Faculty of Medicine in 1769 (ŠIMONČIČ & HOLOŠOVÁ 2010; BOKESOVÁ-UHEROVÁ 1962). Philosophical thinking and, thus, psychological knowledge was influenced mainly by the Neo-Scholastic version of the teachings of Aristotle, catholic theology, and later, especially following the enlightened reforms of Maria Theresa, by the eclectic reception of the elements of modern philosophy and natural sciences. Among

the Trnava University professors, psychological knowledge is found in the works of the Jesuit polymath Martin Szentiványi in the 17<sup>th</sup> century and then mainly in the works of the representatives of the mentioned Enlightenment movement, professors of philosophy and natural sciences (A. Reviczky, A. Jaszlinszky, J. Ivanchich, J. B. Horváth and others) (MARCINKECH 1986). In 1777, Trnava University was relocated to Buda and the only college in the territory of today's Slovakia was the Mining Academy in Banská Štiavnica (Schemnitz), founded in 1762. As this school was a technical type of college, we cannot expect lectures or research in psychology. The Elizabeth University was founded in Bratislava in 1912, but the organisational procedures lasted years and were heavily restricted by World War I. Lectures at the Faculty of Arts started in the summer semester of 1917/1918, and at the Faculty of Medicine even later, in the academic year 1918/1919, and only in the clinical study programs. Although it was an institution with the potential to focus also on modern trends in psychiatry, after unsuccessful negotiations with the new Czechoslovak government the school was relocated to Hungary in 1919.

At medieval and Jesuit universities classes were in Latin. The use of national languages in university classes and science was introduced by the Enlightenment movement, which was also shown in the rise of national academies and other scientific or cultural institutions, especially in the 19<sup>th</sup> century. In regard to the Slovak language, this trend was applied only marginally due to the lack of national institutions, e.g., academies. Although attempts to nurture sciences, including psychology, existed within the national cultural society, *Matica slovenská*, and in the Slovak national movement, due to the strong Magyarisation in the country in the last decades of the 19<sup>th</sup> century and a fragmented national movement, these initiatives were never brought to fruition (HOLLÝ 2013). From the national point of view, more favourable conditions for Slovaks arose only after the foundation of the Czechoslovak Republic in 1918. Nevertheless, a whole group of experts with Slovak origins found success before that at research centres in Budapest, Vienna, or other foreign scientific centres.

Foundation of the Czechoslovak Republic in 1918 brought free usage of the national language on the one hand, and, on the other hand, caused rupture of old ties in the economic and cultural fields and it became necessary to create new relationships in these areas. In place of the Hungarian Elizabeth University, Czechoslovak national university was founded in 1919, which bore the name of J.A. Comenius since November 1919. The Faculty of Medicine was the first out of the four faculties founded (FALISOVÁ 2010). Shortly thereafter the Faculties of Arts, of Law, and of Theology were founded, however, the Faculty of Natural Sciences established by law was not de facto founded until 1940. Comenius University was established by Czech professors who gradually educated their Slovak successors. The fate of the university, and of the whole republic, was influenced by politics, even on an international level. In October 1938, the Slovak autonomy was announced, and in March 1939, heavily assisted by Nazi Germany, the Slovak State was established – the Slovak Republic, according to the later adopted constitution. Hitler's army occupied Bohemia and Moravia and, by announcing the protectorate *Böhmen und Mähren*, finished the dis-

integration of Czechoslovakia. Due to these events there were other changes in the system of education, science and also healthcare. Especially in 1938–1939, the majority of Czech government officials had to leave Slovakia, including teachers and doctors. They were replaced by Slovak experts, in some cases ensuring continuity, in others, however, discontinuity of a promising development. Even crueller was the fate of those removed by violence due to the anti-Jewish laws, which is one of the darkest chapters in Slovak history. Naturally, this ideology had a negative influence on the approach to some modern schools in psychiatry.

After World War II the existence of the Czechoslovak Republic was renewed, however, after a short period of repairing war damages, the political establishment entered the road towards Stalinist dictatorship. This was the result of a communist coup d'état in February 1948 that led to the Sovietisation of the country and to the establishment of a totalitarian power represented by the Communist Party. This period of history ended with the Velvet Revolution in November 1989, while attempts to weaken this hegemony during the events of the so called Prague Spring were brutally suppressed when the armies of the Soviet Union and the Warsaw Pact occupied Czechoslovakia in August 1968. In regard to the development of psychology, psychiatry and especially psychotherapy, the worst damage was caused by the Communist Party ideology that adamantly rejected all alternative methods and brought the country to economic and also substantial scientific isolation. Western scientific literature was difficult to obtain, travelling to and scientific contact with western countries was restricted, and often attempts to apply alternative methods had to be carried out in secret or semi-legally.

Substantial change was brought by the non-violent revolution in November 1989 which ended the period of communist totalitarianism and steered Czechoslovakia 'back to Europe', back to parliamentary democracy. On January 1, 1993, two republics, the Czech and the Slovak, embarked on their independent journeys, but their similar political systems, their membership in the EU and especially their refusal of any violent ideologies fully opened the gate for the application of psychotherapy and other progressive movements in schooling, research and the application sphere (ČAPLOVIČ et al. 2000).

## **2. Psychotherapy in Slovakia in the years 1918–1945**

The beginnings of psychotherapy in Slovakia are closely related to the activities of the Clinic of Psychiatry and Neurology at the Faculty of Medicine UK in Bratislava. This clinic provided psychiatry classes, at first only as lectures, but later practical classes were also added. The Czech professor Zdeněk Mysliveček was named head of the clinic on 29/9/1919 and he remained in this function until 1930. He wrote the first university textbooks of general and specialised psychiatry and was interested also in forensic psychiatry. He emphasised the importance of supportive psychotherapy in addition to increasing the effect of current treatment (MOROVICSOVÁ 2013).

A step in the right direction for the domestication of psychotherapy in Slovakia was that in the academic year 1921/1922 the syllabus of general medicine included the subject 'Vybrané kapitoly z pathologickej psychologie s demonstráciami' (Selected chapters from pathological psychiatry with demonstrations) (Soznam prednášok UK 1921/22, 6). Classes comprised demonstrations of interesting cases and case studies, supplemented by analyses and explanations of significant causes of mental disorders in specific patients. In the following years, this subject was again absent from the syllabus (MOROVICSOVÁ 2012, 158). When prof. Z. Mysliveček left for the Faculty of Medicine of Charles University in Prague, other Czech professors took over the clinic, Miroslav Křivý in 1930–1937 and Stanislav Krákora in 1937–1939, who was one of those Czech employees dismissed due to Slovakisation. The aforementioned Czech professors raised the first generation of Slovak psychiatrists during their time at the clinic and these gradually entered the process of classes, primarily practical classes. Among them were, e.g., physicians Antonín Pekelský, Karol Hlava, Ľudmila Radimská-Jandová, Ignác Matis, František Gašpar, Ján Prokop, Karol Matulay and others. The merit of the Czech professors in raising Slovak psychiatrists, but also physicians and intelligentsia in general, is really significant (MOROVICSOVÁ 2012).

The first Slovak professor of psychiatry was Karol Matulay (1906–2002) (MATULAY, K., Osobný spis, Archív UK). After graduating from the Faculty of Medicine of Comenius University in Bratislava he worked as an assistant at the Clinic of Psychiatry and following the mentioned dismissal of Czech professors he took over as the head of the clinic. As the head of the clinic in 1939–1945 he made some radical changes in the treatment of mental patients. He removed cells, introduced routine treatment, active work and sports therapy, art therapy, and he founded the children's ward. He gradually introduced active mental therapy also in the psychiatric hospital in Pezinok (TICHÝ & SEDLÁČKOVÁ 1996). The hospital was founded on the initiative of Professor Z. Mysliveček in the old spa compound in 1925 and was managed under the clinic. It served the treatment of chronic mental patients (BENIAK et al. 1989). The outcome of his research work in regard to psychotherapy are the works *Liečenie duševných chorôb zamestnaním* (Work therapy in the treatment of mental disorders), *Chronická schizofrénia a možnosti jej rehabilitácie* (Chronic schizophrenia and possibilities of rehabilitation), *Sociálne problémy zamestnania dospelých epileptikov* (Social problems of employing adults suffering from epilepsy), *Cvičná terapia nervových porúch* (Training therapy of neural disorders), *Liečebná telesná výchova a rehabilitácia v psychiatrii* (Healing physical education and rehabilitation in psychiatry), *Mentálna retardácia* (Mental retardation), and others (TICHÝ & SEDLÁČKOVÁ 1996). Without any obvious reasons he was dismissed from the position of Head of the Clinic of Psychiatry of the Slovak University in May 1945 and was completely made redundant in 1946 (MATULAY, K., Osobný spis, Archív UK). Following his dismissal from the Clinic of Psychiatry of the Faculty of Medicine of Comenius University in Bratislava he worked at the psychiatric hospital in Pezinok. In ergotherapy, which was an essential part of treatment, he was striving for activity with a concrete and practically applicable outcome. The patients treated with ergotherapy wove and sewed carpets among other things. He

also encouraged the founding of a psychiatric hospital for chronic mental patients in Veľké Leváre, where he also used psychotherapy in the treatment of mental disorders. He was one of the first to use the autogenous training of J. H. Schulze in the treatment of neurotic patients. When the Jessenius Faculty of Medicine in Martin was founded, he participated in establishing the faculty's Clinic of Psychiatry (CÍFFRA & HULÍN 1982). Attempts to use psychotherapy in clinical practice are already present in the inter-war period in the treatment of chronic alcohol abusers in the detoxification centres in Tuchlov and in Istebné nad Oravou, being the first institutions of this kind. The preferred methods were work therapy, bibliotherapy and music therapy. Work therapy focused on activities keeping the centres running. In the winter it was mainly workshop activities. There were daily physical trainings, walks or even day trips (KOŇAŘÍK 1924). Bibliotherapy and music therapy took place usually in the evenings. According to the director of the detoxification centre in Istebné (KRAUS 1965), treatment consisted of individual and group therapy. The essence of individual psychotherapy was a personal interview by the director and the centre physician with the patient and their family, and group therapy comprised a set of lectures.

As opposed to Hungary, *psychoanalysis* was introduced slowly to Slovakia. The Society for Psychoanalysis had already been founded by S. Ferenczi in Budapest in 1913. And Bratislava, former Pozsony/Pressburg, lies only 50 km away from Vienna, the city where Sigmund Freud, the founder of psychoanalysis, lived and worked. He even spent some holidays in the Slovak mountains. He regularly visited the High Tatras, however, he went there for picking mushrooms and not introducing psychoanalysis. Psychoanalysis pioneers in Bohemia were Russian expats B. Dosužkov and N. J. Osipov. The Czechoslovak Society for the Study of Psychoanalysis was accepted only after the arrival of O. Fenichel in Prague in 1935. However, the most well-known Czech psychoanalyst Jaroslav Stuchlík (1890–1967) was active in Slovakia (in Košice and Bratislava) in the inter-war period. He published first works on psychoanalysis; moreover, he was also interested in hypnosis, the principles of mental hygiene, and the application of projection methods (the Rorschach test of associations) in clinical psychodiagnostics. As a private assistant professor, he gave lectures in general psychopathology and psychotherapy (Zoznam prednášok UK 1946/47–1947/48) at the Faculty of Medicine of Comenius University in Bratislava in the after war period (in the academic years 1946/47–1947/48). Psychoanalysis became politically undesirable during the Slovak State (1939–1945), when not only the Czech, but, due to adopted racial laws, the Jewish physicians were also forced to leave the country.

### **3. History of psychotherapy in the years 1945–1989**

The rise of the Communist regime in 1948 and the ideological dictate of the Soviet Union resulted in radical changes on the psychotherapeutic scene in Slovakia in the 1950s. Psychology was denounced as a 'bourgeois pseudoscience' and replaced by I. P. Pavlov's teachings on higher neural activity. Only those psychotherapeutic methods

were accepted that could be explained by reflexology theory, e.g., hypnosis (as partial sleep) or aversive therapy for alcohol abusers, where the effective mechanism was interpreted as conditioned conditioning. Psychoanalysis was written about in critical nature, emphasising its reductionism and pansexualism.

Psychotherapy alone during the communist regime did not have almost any support and its regional development encountered many obstacles. Fear because of the communists was too large, sometimes larger than the real danger was. Several academics and other professionals were well-informed and they had a wealth of knowledge in this field, but they were afraid of openly disseminating the theory and practice of psychotherapy, as well as other knowledge coming from the west. Some professionals addressed this problem of being devoted to western theories by using other names or by using different modifications of these theories. For example, Ernest Guensberger in his textbook of psychiatry and medical psychology, while writing about the ego-defense mechanisms, termed them generally as ‘mechanisms of personality’ (‘mechanizmy osobnosti’) (GUENSBERGER et al. 1963). Ondrej Kondáš labelled his methodology as discent psychotherapy, although he was devoted to the cognitive and, respectively, the cognitive-behavioral directions (KONDÁŠ 1973).

The softening of the ideological oppression in the 1960s gave new life to the psychotherapy scene. Prof. Ernest Guensberger (1912–1987) was then the head of the Clinic of Psychiatry at the Faculty of Medicine of Comenius University in Bratislava, and he supported the interest in psychotherapy. In addition to clinical hypnosis and narcoanalysis, he also pioneered the use of behavioural psychotherapy methods. He focused on the theoretical questions of psychotherapy; however, his primary focus was on rational psychotherapy and treatment by conditioning. He had no deeper interest in group psychotherapy (FLEISCHER 1997). His experience with psychotherapy in treatment of mental disorders was published in co-authorship with his successor, Ján Molčan (MOLČAN & GUENSBERGER 1979) and other colleagues (J. Pogády, T. Čaplová, J. Fleischer). Professor J. Molčan focused primarily on psychopharmacology. However, he published also works on psychotherapy, mainly on music therapy and work therapy (MOLČAN 1954; 1955; 1957). He gave a lecture on relaxation psychotherapeutic methods within the psychotherapy workshop on 6/5/1965 in Bratislava (MOLČAN, Osobný spis, Archív UK). Credit for the development of behavioural psychotherapy is given to Professor Ivan Žucha (1935–2009). He developed the method of systematic desensitisation in thiopental subnarcosis (BÁRDOŠ, HERETIK & ŽUCHA 1976). Žucha authored several great essays and philosophical reflections on important questions of psychiatry, society and his own experience in psychotherapy (ŽUCHA 1991; 1997; 1999a; 1999b; 2000). Other university textbooks, scientific papers and studies focusing on psychotherapy were written together with doc. Tatiana Čaplová (ŽUCHA & ČAPLOVÁ 1999; 2003; 2006; 2007).

Psychologists have contributed significantly to the rise and development of psychotherapy. Professor Ondrej Kondáš (1930–2002) is considered as the founder of psychotherapy in Slovakia. He elaborated a complex behavioural approach in psychotherapy, later labelled as discent psychotherapy (with the name originating in the

Latin term *disco, discere* – to learn) (KONDÁŠ 1973). Professor Kondáš obtained basic clinical experience while working at the Psychiatric hospital in Veľké Leváre and at the Clinic of Psychiatry at the Faculty of Medicine of Comenius University in Bratislava. His theory of discent psychotherapy was fully developed at the Department of Psychological Sciences at the Faculty of Arts of Comenius University in Bratislava. He taught special classes of the Basics of Re-education, Psychotherapy and Rehabilitation since the academic year 1960/61, which later became a compulsory class (Zoznam prednášok na FF UK 1961/62–1968/69). Discent psychotherapy is based on the theory of learning and relies also on critically re-evaluated findings of behavioural therapy in regard to cognitive processes (KONDÁŠ et al. 1989). His specific approach to the psychotherapy of neuroses, stage fright, and stammering was miles ahead of the development of cognitive-behavioural psychotherapy (KONDÁŠ 1983). In addition to behaviour modification methods he also emphasised the analysis of life history and work with intervening variables – attitudes and irrational beliefs (KONDÁŠ & KORDAČOVÁ 2000).

A significant role in the development of psychotherapy in Slovakia was played by an excellent – even in Bohemia – training school. Stanislav Kratochvíl (\*1932) founded a ward for the treatment of neuroses 18B in the Psychiatric hospital in Kroměříž. The unique model of neurosis treatment by means of group and community psychotherapy is used to this day. The ward simultaneously became an unofficial training base for group psychotherapy. Moreover, Kratochvíl also organised hypnosis, relaxation methods, and functional sexual neurosis treatment classes that were attended by many physicians and psychologists even from Slovakia (KRATOCHVÍL 2012).

Psychotherapy was the main interest not only on academic grounds within the undergraduate training of physicians, psychologists, and in the postgraduate training of healthcare professionals but also directly in clinical practice. Psychiatrists in cooperation with clinical psychologists attempted more and more to apply psychotherapy in the treatment of patients in psychiatric hospitals and in several areas of somatic medicine. The form and content of psychotherapy were given by the nature of the mental disorder and somatic disease. Psychiatrists and psychologists in various fields of clinical practice for children and adults used group therapy. In the Daycare psychiatric sanatorium in Bratislava, group therapy was used since 1976. Credit for its implementation and development is given to Z. Gešová, M. Odehnalová, N. Križková, L. Klenovský and others. The principles of group therapy were also applied to the work with dissocial and pre-delinquent youths in the Research Institute for Child Psychology and Pathopsychology in Bratislava. Active in this area were J. Kožnar, J. Štúrová, S. Martínková, Š. Matula, K. Lukáčová and others. Several institutions use adult group psychotherapy in the treatment of addictions, e.g., the psychiatric hospitals in Veľké Zálužie, Hronovce, Pezinok and other facilities. At the rehabilitation ward in Veľké Zálužie, individual groups for psychotics and alcohol abusers were introduced, and practical application of group psychotherapy can be attributed to M. Kabátová and A. Imrišková. In the psychiatric hospital in Pezinok, the modelling of psychotherapeutic processes was the focus of

J. Pogády, and the rehabilitation of psychoses was the focus of C. Škoda and K. Matulay. Matulay elaborated his experience in this area further as the head of the Clinic of Psychiatry of Jessenius Faculty of Medicine of Comenius University in Martin. Together with H. Nagyová a M. Skaličanová they obtained positive results with hypnosis in the treatment of dermatologic patients. Positive effects of psychotherapy in the treatment of addictions were also achieved by doctors at the Psychiatry ward in Nitra, where it had been a long-term focus of P. Csáder and J. Stempelová, in the treatment of psychosomatic disorders by S. Heřmánek, E. Borzová and M. Arpáš. Psychotherapy was used in neurosis treatment also in Hronovce, where the therapy group for neurotics was led by P. Molnár. With time, psychotherapy became more common in other institutions as well. J. Lehotský and M. Šlepecký introduced psychotherapeutic procedures to the Psychiatry ward in Liptovský Mikuláš, J. Hašto did it in Trenčín and R. Máthé in Nové Zámky. Gradually, psychotherapy began to flourish also at the newly founded Faculty of Medicine at the Pavol Jozef Šafárik University in Košice, especially thanks to such names as J. Medvecký, J. Kafka, A. Stančák and others. There were supporters of psychotherapy also in the psychiatric hospital in Prešov and in other facilities.

In addition to the treatment of mental disorders, psychotherapy found its field of application in the treatment of psychosomatic disorders. For example, V. Zikmund used hypnosis in the treatment of psychosomatic disorders at the Institute of Normal Physiology of Slovak Academy of Sciences and at the Faculty of Medicine of Comenius University. L. Ličko applied psychotherapy in the treatment of ulcerous diseases and enuresis in children, and L. Kamenčík and V. Wohlandová did so in working with children at the psychological-educational clinic. Psychotherapy gradually found its place also in surgical and internal medicine, where it became an important element of pre-op preparation of patients before surgery. M. Verner elaborated its use in orthopedics, D. Brucháč and A. Marišová in the psychoprophylactic preparation for child delivery. V. Zikmund and E. Borzová focused on the use of psychotherapy in internal medicine, and S. Heřmánek in rheumatology (KONDÁŠ et al. 1989). Moreover, V. Zikmund was also involved in education. At the Faculty of Medicine of Comenius University in Bratislava he gave lectures on psychophysiology and psychosomatics within elective classes for Psychophysiology of Mental Health since 1971 (Zápisnica z Kolégia dekana, Archív UK).

In the late 1960s, a semi-legal initiative, the SUR training school, arose, completely outside of the official academic structures. It was founded by psychiatrists Jaroslav Skála (1916–2007), Jaromír Rubeš (1918–2000) and psychologist Eduard Urban (1928–2001). They were devoted to group psychotherapy. The substance of the SUR educational model was to gain experience with self-awareness in a large group (training community) and in a small group as part of the community. The educational model was divided into four to five years. During the training year the whole community met for weekly stays, which were followed by four weekend meetings of small groups (KALINA et al. 2008). Young psychotherapists from Slovakia were joining into this long-term community trainings. For example, in 1982, a five-year train-

ing under the leadership of J. Rubeš and P. Příhoda included about 15 psychiatrists and psychologists. J. Štúrová, J. Kožnar and J. Hašto also followed the model 'SUR' led groups focused on self-awareness.

It was also in the years 1980–1987 that the so called 'federal community F1' active. Its leader was J. Skála and his systematic nature made him maintain an equal ratio of physicians and psychologists, men and women, Czechs and Slovaks in the group. Thus, SUR played a decisive role not only in resolving fights for competence in psychotherapy among psychiatrists and psychologists, but also in popularising the eclectically focused group psychotherapy in Slovakia. Almost all Slovak psychotherapists of the middle and older generation are SUR graduates.

Analogical trainings for psychiatric nurses in Slovakia were led by Peter Breier. Trained nurses had to participate as co-therapists, particularly in psychiatric wards and psychiatric sanatoriums. P. Breier, in the 80s of the last century, also initiated the introduction of the Balint supervisory groups in Slovakia.

The so-called F group (F – as in Freud) was also active in Slovakia. Its members, Jozef Hašto, Jana Štúrová, Peter Breier, and others, held regular 'apartment classes'. These focused on education in theories and methods of psychoanalysis (BŽOCH 2007).

In the years 1977–1978 there was another group in Slovakia, led by J. Štúrová, which focused on self-awareness in the so-called 'psycho-gymnastics' for psychiatrists and psychologists working in the psychiatric hospital in Pezinok. The method was similar to concentrative movement therapy, developed by H. Junová and F. Knobloch in Prague. In the late '80s of the last century, P. Breier and J. Hašto tried to establish a section for group psychotherapy within the Psychiatric Association, which was to provide training seminars for psychiatrists, psychologists and psychotherapists. The then management of the Psychiatric Association did not support this effort.

In the 1970s and '80s, psychodynamic literature was distributed only in the form of samizdats, which were secretly translated and distributed works (VYBÍRAL & ROUBAL 2010). This was also the way texts for training in psychotherapy as well as some scientific publications were published. For example, the psychological counselling centre in Bratislava, led by J. Gabura, published a monograph of J. KOŽNAR (1992) *Skupinová dynamika* (Group dynamics). J. Hašto at the psychiatric department in Trenčín even published an edition *Otázky duševného zdravia* (Mental health issues), in which several monographs in the field of depth psychology were published.

#### **4. Psychotherapy after the Velvet Revolution in 1989**

Sociopolitical changes after 1989 brought a radical turn within the field of psychotherapy in four different aspects (HERETIK & HERETIK jr. 2004, HERETIK 2007):

*Availability of psychotherapeutic literature.* Already in the first decade after the revolution classic works of psychotherapy by S. Freud, C.G. Jung, V. Frankl, C. Rogers and others were swiftly published, for up till then only 30-50 year-old works had been available. Synthesising works on current integrative psychotherapy were also published

(PROCHASKA & NORCROSS 1999). Czech publishing houses like Portál, Grada, Triton and the Slovak publishing house Vydavateľstvo F, founded by J. Hašto, have published up-to-date books on all significant directions in psychotherapy.

*Undergraduate study.* The elimination of ideological restrictions significantly widened the horizons of future psychotherapists. In addition to the compulsory psychotherapy class, students of psychology can participate in many elective classes on all significant schools and methods. At the Department of Psychology at the Faculty of Arts of Comenius University in Bratislava, these include, e.g., introduction to psychoanalysis, person centred approach (PCA), short-term dynamic psychotherapy, family and systemic therapy, Gestalt therapy, art therapy, imaginative methods in psychotherapy, and cognitive-behavioural psychotherapy. These classes are taught experientially and, hopefully, personal experience will help in choosing the appropriate training form after receiving the Master's degree. Elective classes in psychotherapy are also in the curriculum of faculties of medicine or in the study of social work and nursing care.

*Postgraduate study.* Already before the Velvet revolution in 1989, foreign psychotherapeutic institutions started coming to Slovakia and offer experience workshops of their approaches. The first to come was the PCA institute under Rogers' student CH. Devonshire. Many other foreign institutes and lecturers started pouring to Slovakia after 1990 and were opening long-term trainings. In addition to PCA, these included trainings in Gestalt therapy, Process oriented psychotherapy, Short-term psychoanalytic oriented psychotherapy, Concentrative movement psychotherapy, Family and systemic psychotherapy, Kathartym imaginative psychotherapy, Logotherapy, Adlerian Individual psychotherapy and others. In all of these and many other psychotherapeutic schools, Slovak training centres were created that organise trainings and provide lecturers with theoretical classes, self-experience, supervision, and individual training therapy. At present, education of psychotherapists is under the patronage of the Slovak Institute for Education in Psychotherapy (SIVP), currently under the leadership of Pavol Černák (\*1949), director of Pinel's hospital in Pezinok. SIVP is the only institution accredited by the Ministry of Health SR to license certified psychotherapists.

*Slovak Psychotherapist Society (SPS).* It was founded as an individual expert society already in 1990, independent of medical and psychological institutions. The first president, and one of the founders, was Jozef Hašto (\*1949), at that time holding the position of senior consultant of the Clinic of Psychiatry of the Trenčín University in Trenčín. His long-term interest has been psychodynamic psychotherapy, hypnosis, autogenic training and lately even the problems of attachment and mentalisation-based treatment. Other presidents of the society were Anton Heretik, Jana Vránová, Pavol Černák and Zita Michlerová. SPS fills the role of expert society and organises common biannual Czecho-Slovak psychotherapeutic conferences, the venue being alternately in the Czech Republic or Moravia and the Slovak Republic. Simultaneously, it performs the function of a professional organisation as the appointment of an individual Chamber of Psychotherapists was not ratified in the parliament (prob-

ably due to political reasons). The SPS committee prepared a draft of the Act on Psychotherapy and later the Accreditation paper for education in psychotherapy as a certified activity. SPS is a collective member of the European Association of Psychotherapy (EAP) and has adopted its Ethical codex. Individual members can receive a European certificate in psychotherapy after meeting the given criteria.

## **5. Current scene and trends in psychotherapy in Slovakia**

The latest survey of the Slovak psychotherapy environment was conducted in 2003 (HERETIK & HERETIK jr. 2004). The survey in the SPS bulletin was answered by 110 respondents, approximately a fifth of the members. Psychotherapists in Slovakia are unevenly distributed in regard to gender, undergraduate education, years of practice and region of employment. The sample comprised 77.3% women and 23.7% men. 60% of the respondents were psychologists, 25.4% were physicians, and 24.6% were experts with other undergraduate education. Distribution of years of practice was uneven with two peaks around 5 and 25 years of practice after graduation. Almost a half of all psychotherapists work in the Bratislava region, around 10% in the Košice region, and the other six regions of Slovakia are represented by around 5% of the psychotherapists. Up to 47.1% of respondents practice psychotherapy in a non-state medical facility or private practice. 81.8% of the participants had attended long-term trainings in psychotherapy: 40% in dynamic psychotherapy, 18.2% in cognitive-behavioural therapy; and other methods were represented by less than 10%. Short-term trainings focused mainly on such methods as hypnosis, relaxation techniques, individual methods of cognitive-behavioural, systemic psychotherapy, and non-verbal techniques. Regarding theoretical focus, 57.3% of the respondents listed dynamic psychotherapy, 33.0% cognitive-behavioural therapy, 25.2% suggestive methods, 19.4% Katathym imaginative psychotherapy, 14.6% systemic psychotherapy, and 9.7% Rogersian therapy. Results are in many aspects comparable to the findings of Prochaska and Norcross (1999) in the USA, including the differences between psychologists and psychiatrists. However, there are also schools, e.g., classic psychoanalysis and interpersonal psychotherapy, which are practically non-existent in our region.

The current representation of different schools of psychotherapy is best reflected in the list of institutions providing education and training in psychotherapy, under the patronage of SPS (SPS 2016). They are listed in Appendix I.

## **6. Discussion and Conclusion**

Psychotherapy as a scientific discipline and psychotherapy as a practically applied form of treatment has undergone a very dramatic development, especially in the last 25 years. In many aspects it has narrowed the gap that the unfavourable ideological

and socio-economic situation in the country had created in psychiatry. Nevertheless, the following topics remain open or problematic:

*Low intensity of research in psychotherapy.* The Slovak Republic still lacks an institution that would focus systematically on the study of the effect or process of psychotherapy. Moreover, this research is probably the most methodologically complex among applied sciences on man. Published papers have the form of reviews or case studies and that is too little in the current, evidence-based science. Striking exceptions are the few dissertation theses, in which the problem of psychotherapy is well processed and approached, e.g., by high-quality methodology. In addition, several synthesising works of Slovak authors on the research in psychotherapy have been published (e.g., TIMUĽÁK 2003, TIMUĽÁK 2008).

*Legislative issues.* Repeated attempts to implement the act on the Chamber of Psychotherapists SR and psychotherapeutic activity failed due to various reasons. Thus, the SPS focused on legalising psychotherapy as an activity certified by the Ministry of Health SR. This process was concluded in 2008. However, the patronage of the Ministry of Health SR over psychotherapy also has its drawbacks. There is too much paperwork involved in order to organise trainings and education in psychotherapy. Psychotherapy cannot be practised by educated and trained psychotherapists who are not registered as healthcare professionals but as social workers or remedial teachers due to their undergraduate major.

*Impact of socio-economic conditions and the healthcare reform.* Experience with a permanent healthcare reform shows that cost-saving measures endanger mental health care primarily. The opinion, that psychotherapy is not a natural part of complex healthcare but a ‘luxury’ to be financed by the patients themselves, is steadily circulating in our society.

Besides, the uneven regional availability of psychotherapy, concerning especially the economically less developed regions of Slovakia, is obvious from the above cited review.

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**APPENDIX****List of institutions offering psychotherapeutic training in SR**

ABC Slovenský inštitút pre výcvik v KBT  
Dialóg Slovenský inštitút pre výcvik v Gestalt psychoterapii  
Inštitút krátkodobej psychoanalytickej psychoterapie  
Inštitút Virginie Satirovej v Slovenskej republike  
Košický inštitút pre systemickú skúsenosť ISZ KEPCA  
Inštitút PCA ISTER  
POPI Slovensko – Inštitút proces orientovanej psychológie  
SIPP Slovenský inštitút psychodynamickej psychoterapie  
Slovenská spoločnosť pre katalýmne-imaginatívnu psychoterapiu  
Slovenská spoločnosť pre koncentratívnu pohybovú terapiu  
Slovenský inštitút pre supervíziu /SIPS/  
Slovenský inštitút pre psychotraumatológiu a EMDR (SIPE)  
Slovenský inštitút logoterapie (SILOE)  
Inštitút pre výcvik v relaxačnej a symbolickej psychoterapii