50th EUROPEAN ASSOCIATION for Behavioural and Cognitive Therapies CONGRESS

2 - 5 SEPTEMBER 2020

Virtual version
Adapting CBT to socially and culturally diverse environments
The present 50th Annual EABCT Congress Magazine was edited by all the members of the Organizing Committee. At first, the magazine was planned to be edited in a typed form and be distributed to all participants. It was planned to include much information for various topics in it:

First of all, more material for the 50 years of EABCT. Information about Athens: From transport information to museums and historical sights which are worthy to be visited. Restaurants with traditional Greek cuisine and bars for a drink with a marvelous view!

Moreover, the plan was to include some relaxing mindfulness exercises for the end of each day, and a lot of other details which are meaningless to be mentioned here.

However, all of our plans for the magazine changed when we decided to transform the congress into a virtual version, due to the pandemic. None of us, wanted to cancel the magazine edition thus, we decided to edit it electronically with less material, to be easily readable.

Therefore, we would like to acknowledge all the colleagues who contributed to the magazine with their interesting articles: Ioanna Giannopoulou, Fragiskos Gonidakis, Maria Karapatsia, Fotini Lekka, Rozina Palaiologou. Many thanks to the members of the Children and Adolescents Therapy Section of the Institute of Behaviour and Research Therapy (IBRT), for having answered to our questions for their wonderful work with the stories of Iolina and Koronakos for children referring to the covid-19.

Also, our colleague Katerina Aggeli, member of the same section of IBRT for her astonishing sketches for children, as well as the video she made about the congress.

We should not avoid acknowledging the contribution of our colleagues-members of the other congress committees who shared with us their experience about how their work was modified according to the new conditions.

The Organizing Committee

Before you start reading the magazine, you can watch the video made by Katerina Aggeli and Effi Giannou about the congress

https://www.youtube.com/watch?v=fpgONnUAcuQ
Dear friends and colleagues,

Welcome to the 50th EABCT annual congress, which comes online for the first time in EABCT’s history.

None of us could ever imagine the dramatic change we currently experience in our lives. The COVID-19 pandemic has caused worldwide loss of lives, sadness in so many families, immense pressure at Health Care units and poverty for a large number of people. Our thoughts and warm wishes, from all EABCT members, go out to reach each one in physical or psychological pain. We remain hopeful that the scientific community will soon provide an effective solution to tackle the virus.

Right from the beginning of this crisis, CBT professionals showed quick reflexes in responding to the pandemic by adjusting therapeutic protocols and ways to provide psychotherapy services to those in need. In close collaboration with all its Member Associations, other regional Associations and the CBT World Confederation, EABCT was mobilized to circulate relevant information and material for the psychological care of children, adolescents and adults. We wish to thank all EABCT representatives and colleagues worldwide for their valuable contribution to this major challenge. We wish to encourage each one of you to do everything in your power, whether at the university carrying out research, in training, or in the treatment room, to improve what CBT can offer to all those affected by the pandemic.

Due to the fast-changing circumstances, it was uncertain until recently if we were to meet this year. Despite the initial disappointment after four years of preparations and numerous practical difficulties, our host in Athens faced courageously the challenge to re-organize the whole congress in just few weeks before the Opening. We express our heartfelt appreciation and congratulations to the organizing teams, the contributors to the scientific program and all of you, the participants, for keeping the congress alive. The online version may not provide the opportunity to also explore beautiful Greece, enjoy the famous Greek hospitality, have a memorable time at EABCT’s 50th Anniversary party or gala dinner, but it very much signifies that we, as a scientific community, are staying together at difficult times.

Enjoy the congress and, above all, stay safe!

Thomas Kalpakoglou
President, EABCT
Dear colleagues and friends,

The pandemic of COVID-19, that more or less has struck most of our countries, has influenced deeply our professional, social and personal life.

Since the beginning of the virus outbreak, we had been hoping that the situation would ameliorate soon, thus giving us the exiting opportunity to welcome the EABCT community in Athens. However, to this date, there are still quite a few uncertainties about a possible second virus outbreak in the fall, not to mention the existing restrictions related to air travel.

Given the above and taking into account that everybody’s safety should be our top priority, the Organizing Committee was led to the decision to “move” the congress online.

We are determined to use every advantage that the technology can offer us in order to be able to stay connected in safety even if we are not able to meet in person. We firmly believe that, in these difficult times, the role of the mental health expert is to provide a second line of defense against the pandemic by helping people to deal with the intense negative emotions and the mental exhaustion that both the pandemic and the prolonged isolation are causing. CBT is an evidence-based intervention that can be proved to be valuable in our struggle against the effect of the pandemic on the mental health of the population; and we believe our congress can be an important contribution towards this goal.

We would like to thank you all for your continuous, inspiring support during the past few months and ask you to stay connected with us until we virtually meet in Athens, 2-5/9/2020

Fragiskos Gonidakis
Congress President
A virtual trip to Athens!

Since the pandemic 'forced' you not to be here, you can have a virtual trip to Athens, similarly to our congress, through the following videos:

https://www.youtube.com/watch?v=WtYQBkyfb9A&list=LL525hTb6rxyNslr1fA2a1A&index=4&t=0s
https://www.youtube.com/watch?v=qkSuEmRjBE
https://www.youtube.com/watch?v=fL3Cy7VJEHU
The experience of preparing the first EABCT virtual congress

When we gained the honor to host the EABCT congress in Athens our first thought was to organize a successful scientific congress with presentations of high quality, with excellent participations regardless of gender and with balanced distribution of scientific topics. The members who were decided to participate in the scientific board, Evangelos Papadakis, Maria Evangelopoulou, Vasiliki Batrakouli, Christi Passalidou, Georgia Nasiopoulou, Fani Siamouli, Olga Zikopoulou, are all reliable colleagues who have scientific knowledge, ethos, judgment, and objectivity.

In the beginning we met every fortnight to decide and define the topics of the presentations. Our criteria were the originality of the research, the method applied, the non-repeatability in previous congresses, the offer of knowledge to new scientists. When the Covid crisis began striking our lives and we realized that in order to have the congress done we should have it in an online version, we decided to add submissions which would refer to the related crisis and to the new adjustment needed to be done in the therapeutic context. We all had the feeling that this is only the beginning of a new age in clinical practice.

Also, our live meetings turned to meetings via zoom, which was tedious because it lasted many hours every week. When the submissions began, we realized the difficulty of accepting and rejecting in the sense that a scientific work was judged only through one abstract which might have diminished the scientific property. This was the greatest difficulty we faced but we tried to be as objective as possible.

The change of congress to online version caused a lot of cancellations of submissions being accepted and this led us to a new distribution of the scientific topics and presentations, which we believe we handled successfully.

Speaking from my view, as in chair of the scientific board, I believe that as members of the scientific group we had an excellent collaboration and mutual support. The main care of all was the success of the congress by targeting at a high scientific level. We hope we have succeeded!
The assignment of the organization of the 50th European Association for Behavioral and Cognitive Therapies Congress to our association, the Greek Association for Behavioral Modification and Research, filled us with feelings not only of excitement and joy but of responsibility and commitment as well. Our association hasn’t organized an EABCT congress since 1994 in Corfu, and this time it happens to be the milestone of the 50th anniversary of the European Association, therefore, the burden of such an organization seemed huge.

Being the chairperson of the Organizing Committee, I had to think about the synthesis of it. I first proposed to young colleagues, all psychologists who had already finished the training programme in CBT to participate in it and ‘thank god’ they all were willing to partake.

In an alphabetical order they are, Evi Kontaxi (Clinical Psychologist, Msc), Irini Kotsi (Psychologist, Msc), Elli Kouvaraki (Clinical Psychologist, Msc), Kelly Kyriakopoulou (Psychologist, Msc), Myrto Lemonoudi (Clinical Psychologist, Msc), Mariefi Mitella (Health Psychologist, Msc) and Katerina Poulou (Psychologist, Msc). In fact, from the very first moment we all started working on better organizing of the congress. Later on, Thomas Kalpakoglou (Clinical Psychologist, Phd) joined us to contribute to our efforts in organizing the celebration activities for the 50 years of EABCT. It was a great experience working with such good and collaborative colleagues, sharing ideas and helping each other. A lot of fresh ideas were put forward as well as a lot of joyful moments were experienced and these two things could characterize our meetings. We worked really as a team and I should thank warmly all of them.

We had prepared many activities for the congress, such as the gala in a wonderful place, a party at a big bar in the center of Athens and plenty of other social actions which are pointless to be mentioned any more. The transformation of the congress into a virtual form, because of the pandemic COVID-19, changed dramatically all our plans and actions for the congress. It was disappointing to cancel all the events we had planned after so much thought and so many efforts, and to limit it to a non-human e-congress. However, the priority should be over the safety of all participants, thus, we put all of our energy to organize the congress under the new circumstances. Nevertheless, finally, we think that all our efforts were not in vain. All this period we have come closer to each other, and gained more experience. So, the new challenge became to succeed technologically since it is the first virtual congress which takes place in our country and also the first one for an EABCT congress. Surprisingly enough, the new global conditions absolutely justified the title of our congress since the whole world was asked to adapt to a brand new way of living beyond the so far conventional one. Furthermore, we, as the Organizing Committee, we rapidly adapted to the needs of the times. We wish this ‘different’ congress to be one more success of EABCT!

Finally, on behalf of all the team, I would like to acknowledge the valuable support of Mr. Takis Marlandis, of Easy Travel. He was always available and willing to support any of our ideas.

Diana Charila, Clinical Psychologist, PhD
Chairperson of the Organizing Committee
When I was requested to write a text for the Congress Magazine, I hesitated. How could I put all my thoughts about this amazing journey on one page? So many feelings and experiences! Back in 2017, our association was assigned to host the EABCT Congress for 2020 and the 50th anniversary of EABCT. We were all so happy, excited and ready to commit for the next three years to ensure a congress of the highest quality! It was a great surprise and honor when Elena Heinz and Diana Charila put me forward as the chairperson of the Promotion Committee. Having the support of the whole Congress team, certainly filled me with gratitude, excitement and...anxiety! Next came the creation of a team I feel lucky and grateful to be part of: Caterina Vafeiadi, Konstantina Velisari, Ellie Koumantarou, Tina Feidia: psychologists and reliable collaborators. All of them have a great spirit of cooperation, fresh ideas, dedication to the project, willingness to help each other, adaptive skills and extreme resilience. Last but not least, Giorgos Chalimourdas, the latest entry to our team, brought a brand new look to our twitter account and fresh ideas regarding the promotion of the congress. In the same vein, Vanessa Matsouka, an experienced event manager herself, although not officially registered in our team, helped us visualize and design our social media campaign to a great extent.

Caterina Vafeiadi’s words sums up my experience in the best possible way: “Each and every meeting session is an exciting and entertaining experience. As everyone has an adorable personality and loads of humor, laughter fills the room always!”

As a Promotion Committee we had two specific goals, to update people for the congress tasks as well as familiarize them with the Congress Venue, the 50th Anniversary of the EABCT, and the events and the city of Athens. In order to achieve these goals we had to cooperate closely with all the Committees. Our closest collaborators were Fragiskos Gonidakis, the President of the Congress and Takis Marlandis, owner of Easy Travel. We took a long tour with Takis, to the Congress Venue, the web designers and the communication sponsors offices. We prepared promotional and graphic material, sent emails and scheduled posts on our social media. Fragiskos Gonidakis was always there to tirelessly review everything we prepared and reply to every question we had.

Unfortunately, in March the COVID-19 outbreak changed everything. At first, we had to deal with changes it brought to our emotional state and to our everyday lives and practices, as everything moved to quarantine mode. When the Congress moved to Cyberspace, we had to change the whole promotion strategy. Almost half of the material and posts we had already prepared were useless; there was no Venue, events and city sightseeing of Athens to promote. Additionally, our team had other limitations: Tina and Ellie were volunteering for the 24hour COVID-19 helpline and Konstantina had just given birth to little Margaret. Thus, it took a lot of strength, effort and courage from all of us to adapt and think of a new way to approach the promotion of the Congress.

During the quarantine days, I exchanged many emails with Dinie Naezer-Heerschop, Association Manager of the EABCT. In one of those emails she sent me a really moving message, “It’s one of the biggest challenges in EABCT congresses, stay safe, motivated and happy.” I think that we tried a lot to deal with this challenge and to adapt as best as we could.

During this amazing journey, we cooperated with a lot of people, who I would like to thank from the bottom of my heart: Fragiskos Gonidakis, Elena Heinz, Diana Harila, Thodoris Chalimourdas, Takis Marlandis, Vaggelis Papadakis, Thomas Kalpakoglou, Dinie Naezer-Heerschop, Katy Grazebrook, all the members of the Committees and of course my Promotion Committee team! We are very happy that we still have the chance to meet the EABCT community, online. Stay connected with us until we virtually meet in September!

Efi Matsouka
Chairperson of Promotion Committee

The experience of preparing the first EABCT virtual congress

The Promotion Committee

https://youtu.be/RINVmq5F3t4

Our Avatars!
The experience of preparing the first EABCT virtual congress

The Finance Committee

As a finance committee the 50th European Association for Behavioral and Cognitive Therapies Congress, we were assigned a great responsibility. It was both a challenging and a fulfilling experience. Our main duties involved management of the finance of the Congress, finding and booking the venue for the congress, approaching prospective sponsors, fundraising and setting up and managing the website of the congress. Our group consisted of individuals of diverse discipline backgrounds and experience including psychology, management, art advising, marketing and event planning etc. This setup deemed essential for the success of the committee. Our members were Takis Marlandis (director of Easy Travel), Stefania Choremi (HR Manager), Katerina Danielaki (Psychologist, Msc), Constantinos Laskaridis (Philosophy and Economics, Bsc and Shipping Trade and Finance, Msc), Vanessa Matsouka (Event Manager, Services Management, Msc), Maria Migadi (Art Advisor), Dimitra Owens (Psychologist, Msc), Evdokia Pasalari (Psychologist, Msc) and Katerina Vasileiou (Psychologist, Msc).

Throughout the year of working together, we held a handful of meetings, contacted and had agreements with sponsors. We also organized an art exhibition “Τα πάντα ρει” (Everything flows) (catalog of the paintings presented: https://www.martixart.com/wp-content/uploads/2019/12/Catalogue-Final-3.pdf) to raise funds in which seven promising and acclaimed artists' were presented. The exhibition was held with great success. A second art exhibition was also scheduled to take part in May. Sadly, due to the pandemic, it was cancelled.

Given the COVID-19 situation, our congress had to be held in a virtual form in ZOOM. This transition was a challenging one and our team played a significant role in this venture. During the pandemic, video conferences were held to brainstorm ideas and make decisions in setting up the virtual form of the congress and approaching new sponsors that could contribute financially to this.
All in all, this was a fulfilling year and a great experience. We are looking forward to the EABCT congress that will take place virtually in September. Before ending this article, as a chair of this committee, I would like to thank Mr. Takis Marlandis (director of Easy Travel) for his essential contribution to the team and valuable help, Mrs. Maria Migadi (art advisor and organizer of the art exhibition, our sponsors (Institute of Behavioral Research and Therapy, and Pedio publications) and the seven artists (Rostislav Romanov, Christos Baloukos, Antinea Boletsi, Aglaia Perraki, Sofia Petropoulou, Petros Xenakis, Sofia Maria Xenaki, and Iro Xenaki) that offered a significant part of their earnings from their work to financially support this congress.

Thodoris Chalimourdas
Psychologist PhD
Chair of the Finance Committee

Interview with the President of the 50th Annual EABCT Congress, Prof. Fragiskos Gonidakis

Fragiskos Gonidakis is Assistant Professor of Psychiatry in National and Kapodistrian University of Athens (NKUOA) Medical School. He is currently the Head of Eating Disorders Unit and Dialectical Behavioral Therapy service of NKUOA 1st Psychiatric Department at Eginition Hospital. He has been trained in Cognitive Behavioral Therapy, Systemic Family Therapy and Dialectical Behavioral Therapy. His clinical and research interests are focused on Eating Disorders, Transcultural Psychiatry and Borderline Personality Disorder. He has worked extensively in training and supervising mental health experts in Greece and Europe in CBT for Eating Disorders and DBT for Borderline Personality Disorders. He has developed two distance learning programs on Eating Disorders and Borderline Personality Disorders that are delivered through the e-learning platform of NKUOA. He is the co-writer of five books in Greek: “Anorexia Nervosa”, “Talking about Eating Disorders” “Eating Disorders. Cognitive Behavioral approach” “Talking about Borderline Personality Disorder, Dialectical Behavioral Therapy” and “Ten steps for the treatment of Bulimia Nervosa”. He has published in English and Greek more than 80 papers in psychiatric textbooks and scientific journals. He is currently the president of the “Greek Association for Behavioral Research” and secretary of the Eating Disorders section of the “Greek Psychiatric Association”.

In his free time he enjoys spending time with his family and friends, riding his motorcycle and reading crime and fantasy literature. Among his closest friends and colleagues he is known for his untreated addiction to tv series, games and technological products of a certain brand with an apple logo.
1. Doing this job and holding this position can be very demanding. What helps you stay focused in difficult moments? The highly rewarding moments when I observe the smiling faces of satisfied colleagues who have participated in one of the events organized by our association. Also, the feedback that we get from the mental health community concerning the training experiences that we provide.

2. Do you have any special recommendations for the participants of this year’s EABCT congress? To be prepared for an exciting congress both scientifically and culturally.

3. Which EABCT goals for the future do you find particularly interesting and why? Providing expert knowledge for therapists who provide treatment to immigrants and refugees and in general diverse social and ethnic groups around Europe.

4. What do you think is important for a young CBT therapist to know and why? To be able to combine knowledge coming from seminars, articles and books with clinical experience and compassion for their patients.

5. Can you tell us about a specific challenge you had to face during your presidency? Everything is difficult and exciting at the same time.

6. Can you tell us something about yourself that not many people know? I am a big Apple fan boy to the point of addiction (but then everyone knows about that).

7. Is there a specific place where you and your colleagues meet after work to get drinks and unwind? We usually meet at lunch break at a cozy restaurant near Eginition Hospital and once a month I meet my old DBT team for dinner at a restaurant close to the congress venue.

8. What's the silliest thing you are pretty good at? Making funny faces to my daughter.

9. When someone finds out what you do, or where you are from, what question do they always ask you? Where is that? (I come from Kythnos a small island in the Cyclades).

10. What topic could you give a 20-minute presentation on without any preparation? Eating Disorders and Dialectical Behaviour Therapy for Borderline patients.

11. Are you more productive at night or in the morning? In the morning.

12. If you could start a charity, what would it be for? To combat the stigma associated with Borderline Personality Disorder.

13. What are some of your guilty pleasures? Anything that has sugar as an ingredient.

14. Who is the most interesting person you’ve met and talked with? Marsha Linehan and Leonidas Kirkos (old Greek left politician). Great story-tellers both of them.

15. What do you wish someone taught you a long time ago? How to validate the emotions of myself and others.

16. What's the biggest vehicle you've driven? My 7 seats Renault Grant Scenic.

17. What was the last thing you were excited about? The last thing is going to happen today.

18. Can you tell us five places you really want to visit? The pyramids in Egypt, Machu Pichu in Peru, Taj Mahal in India, the Great Wall in China, the landscape in Iceland and New York.

19. What works of art have really made an impression on you? The Vincent Van Gogh museum in Amsterdam.

20. What do you want to do when you retire? Am I going to retire? This is Greece!!!
The European Association for Behavioural and Cognitive Therapy (EABCT) was officially founded in 1976, but its origins date back to five years earlier when behavioral working groups in Germany, the Netherlands and the United Kingdom came together to create a European movement. In 1992, the cognitive element was added to the organization’s name, creating the European Association for Behavioural and Cognitive Therapy (EABCT). EABCT is an organization of cognitive-behavioral companies, operating under the auspices of 54 companies from 40 different European and other countries. The European Association for Behavioural and Cognitive Therapies (EABCT) is an organization that brings together 54 individual associations from 40 different countries, and more than 25,000 clinicians and researchers, making it one of the largest psychotherapeutic organizations worldwide.

Scientific collaborations are increasing and many new companies have joined the organization in the last decade. These companies vary in size, structure, and scientific activity, which promote Cognitive Behavioral Therapy, and the work of important researchers. This proves that Cognitive-Behavioral Therapy is not just a therapeutic approach, but represents a family of scientific approaches that follow the basic theoretical model. This family is growing, as new approaches of cognitive-behavioral direction are being developed (Approaches based on Mindfulness, Acceptance and Commitment Therapy, approaches of the third wave of CBT, etc.), and EABCT is the scientific and modern organization that is evolving. The professionalism and scientific knowledge of the members, the administration, but also the people, who are being trained, is the main feature of their philosophy. EABCT and member companies are committed to empirically based principles and cognitive-behavioral practices in health, social, educational and other related fields.

Companies and members that participate in EABCT adopt some common goals: the therapeutic strategies and techniques used are the product of empirically documented research - to contribute to new knowledge - to promote professional development and the creation of high standards of education - to act on the basis of the autonomy and improvement of the people they serve therapeutically - to support their customers’ right to proper medical care and their right to be treated with respect - to adopt appropriate techniques and strategies instead of those that are less effective and adequate.

All the companies share a common goal, to cultivate the highest standards of clinical practice. EABCT is the organization that ensures the proper training of competent therapists, and has set of basic training criteria, which jointly the members of the companies must meet to be certified as CBT therapists. The first attempts to set criteria began in the 1970s. Many proposals were made before the final form for proper foundations of CBT education in Europe was formed. However, it was only after the start of the Working Groups (WGTS) regarding the criteria, in 2002, that the official form was finalized. WGTS, through the contribution of the members from the companies - representatives, continues to investigate and process the training criteria of EABCT, making the organization a basic training pillar of CBT (https://eabct.eu/training-and-accreditation/training-supervision-and-accreditation-standards/).
One of the main activities of EABCT, as an international European federation of companies, is the hosting and organization of conferences and seminars, with a rich scientific program. The knowledge transmitted through these actions is open to the wider scientific community that is interested in participating in the development of CBT. The conferences are organized each time by a different country, promoting its cultural and scientific spirit. EABCT works closely with CBT organizations around the world, and participates in actions aimed at promoting CBT and its scientificity worldwide [World Confederation of Cognitive and Behavioral Therapies Strategic Plan (2019-2024) - https://eabct.eu/world-confederation-of-behavioural-and-cognitive-therapies/].

At the same time, browsing the website provides information about all member companies, the actions supported by EABCT, the constitution, the board of directors, conference details and other information related to the CBT. The official website also provides the ability to search for a certified CBT Therapist. EABCT is the main data pool for CBT certified therapists, providing a list of participating countries that have certified programs.

Website quote: “Behavioural and Cognitive Therapy comes in different forms and names: Behaviour Therapy, Cognitive Therapy, Cognitive Behaviour Therapy. There are also more specialised forms for more specific problems: Rational Emotive Behavior Therapy, Dialectic Behaviour Therapy, Mindfulness Based Cognitive Therapy, Acceptance and Commitment Therapy, etc. They all share the same principles: they are based on scientific research and they are committed to look for evidence of their effectiveness to alleviate Mental Health problems.”

Special interest groups

The aim of these special interest groups is 1) to create a group of people, within each company, who are interested in conducting research and training in specific areas that are related to areas of interest of the CBT, and 2) to produce scientific production, which will allow each company to participate in global scientific programs, promoted by major National and World Mental Health Organization (eg. WHO). Psychologists are given the opportunity to participate in discussions and thus contribute to scientific activity. Special interest groups focus on areas such as bipolar disorder, OCD, psychosis, couple therapy, dysfunctional behavior in children and adolescents, positive psychology, trauma, personality disorders, cognitive mechanisms such as worry, and rumination, education and supervision, and more.
A regular visitor of EABCT conferences will undoubtedly observe that the beauty of Europe lies in its unique diversity of cultures, landscapes, traditions, languages, food, and weather conditions. At the same time, this heterogeneity is grounded on shared values, such as the importance of human rights, equality, and football. EABCT chose diversity as the topic of the conference this year, for good reason, as providing psychotherapy to marginalized groups remains one of the key challenges of mental health research and policy. I hope that, in the next 50 years to come, EABCT will continue to celebrate its heterogeneity at conference dinners while contributing to develop ways to overcome barriers to psychotherapy for those in need, inside and outside Europe.

Frank Neuner
Bielefeld University
Germany

EABCT’s 50th anniversary is a wonderful opportunity to celebrate decades of international research and clinical collaboration. For 50 years, EABCT has provided a space to share clinical and research ideas, advance scientific knowledge, and foster training in Europe and around the globe. For me, EABCT has been a wonderful place to foster collaboration with junior and senior colleagues alike. I am greatly looking forward to this year’s conference – be it virtually - and to many more in the years to come. I hope you will join me in celebrating EABCT’s 50th anniversary in September. Best wishes and I heard that the conference this year will be virtually - showing tremendous resilience and many conferences are going that route - happy to participate.

Thröstur Björgvinsson
Harvard Medical School
USA

On behalf of the Beck Institute for Cognitive Behavior Therapy, www.beckinstitute.org, I congratulate EABCT on its 50th anniversary. I also send best wishes from my father, Dr. Aaron Beck. We are both so pleased by the great advances of CBT in so many countries in the world and we thank EABCT for their invaluable contributions to the field. We are happy to have EABCT as a valued partner as we expand our CBT training globally. We have many fond memories from past EABCT conferences, catching up with friends and colleagues, meeting new people, presenting on a variety of topics, learning about new research, and discussing directions for the field. I look forward to making more memories at this year’s conference in Athens.

Judith Beck

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As a young student, in August 1968, I attended the 7th International Congress on Mental Health in London and was spell-bound by Joseph Wolpe, outlining the scientific nature and controlled studies of Behaviour Therapy. He was on a panel with an American psychoanalyst, Curt Boenheim. There could not have been a sharper contrast between the two men. Boenheim was 21 years his senior, a flamboyant character, smoking a fat cigar, and Wolpe (who was 51 at the time), in his white-rimmed round glasses, mild and soft-spoken manner was the archetypal image of an assured and authoritative scientist – you could imagine him in his laboratory in a white coat. Boenheim represented the ‘establishment’ whereas Wolpe the emerging beginnings of an uncertain new approach. Boenheim systematically dismissed Wolpe’s claims and the new methods he was advocating. At a certain point, Boenheim pointed his finger at Wolpe, most dramatically and provocatively, and asked the audience rhetorically something to the effect ‘Can you not see why this man is getting good therapeutic results? Just look at him!’ implying that Wolpe was a calm person with an assured and reassuring presence. ‘The success of his therapy’ he continued, ‘is not based on these new ideas of Behaviour Therapy; it is all based on the good transference that he is developing with his patients’. Wolpe, not picking up the bait, ignoring totally Boenheim’s challenge, continued serenely with his scientific exposition of the principles of Behaviour Therapy. I was so excited! With the other young students in the audience we were exchanging cheering glances. It was as if we were at the ringside of a boxing match and our underdog challenger was knocking out the big champion. We felt like cheering Wolpe and lifting him up in celebratory jubilation! We could feel that the old order was crumbling, and a new one was emerging, and we felt so exhilarated to be part of it. At the time, I was doing a summer internship at the Institute of Psychiatry, at the Maudsley Hospital, where Hans Jurgen Eysenck had accepted me to observe Behaviour Therapy, mainly aversion therapy and assertive training, and across the river, I had contact with the effusive philhellenic Vic Meyer at the Middlesex Hospital Medical School. Unmistakably, a new era was dawning, indeed!

Many years have passed since. Behaviour Therapy is no longer struggling for legitimacy. On the very contrary, now it has become the ‘establishment’! Moreover, the wide acceptance of CBT all over the world has given it an almost supreme monopoly over virtually all resources (financial, training and research, employment, etc).

Yet, a new challenge faces Behaviour Therapy now. How to move away from its experimental phase (no longer the enfant terrible of therapy) and embrace the complexities of human pain and suffering in a perplexing world, beyond compartmentalisation and pathologisation.
Distinguished Members of the EABCT Family, Dear Colleagues,

I started to attend the EABCT Congresses since the year 1988. They are always organized with care, compassion and high scientific quality. On top of that every EABCT congress provides the attendees the opportunity to establish closer social and professional links. As a past president of EABCT and as the president of 7 International congresses I can tell that organizing an International congress is an honour, pleasure and a great opportunity to learn. However, organizing international congresses may be challenging as well as rewarding in many different ways. EABCT congresses that we organized in the year 2001 and 2017 have become more than a challenge. Our first congress in the year 2001 coincided with the devastating 9/11 events in New York. I would like to express my gratitude once again to all of our American colleagues who have accomplished a great performance despite the terrible circumstances they had passed through. The one in 2017 had to be relocated from Istanbul to Ljubljana. I do have to confess that during this journey of relocation we passed through times of fear, but transforming fear into freedom became our motto. There were times that we felt damaged but we did not take it as a defeat. We thought that it is not the destination but the journey that counts. We believed in the generosity of the EABCT society and we thought that what seems like a loss may turn into an accomplishment and there is nothing permanent except change. A meaningful life could only exist in acceptance and flexibility. Despite these challenges both of the congresses we organized turned out to be memorable events both scientifically and socially. We owe the success of these congresses to the contribution of our esteemed colleagues who have devoted most of their lives in promoting and disseminating good practice of CBT and the friendly, warm and compassionate interaction of the attending delegates. I would like to express my gratitude to all of EABCT associations and their members who became a rainbow in our clouds.

EABCT has always been a friendly society that welcomes everyone who believe in the significance of evidence based psychological treatments in order to improve the quality of service given to our clients.

I have no doubt that the 50th anniversary of EABCT will turn out to be a memorable event. I believe that all of the attendees will find something meaningful in the 50th anniversary that will be celebrated in the beautiful and historical city of Athens regardless of whether they are a longstanding supporter of EABCT or a brand newcomer. Apart from offering a very scientific content, I have no doubt that this congress will offer you opportunities to meet with your old friends and make new ones.

We need to work harder for unity and compassion not only to make our lives happier but to make our worlds larger and more meaningful. A mind always needs another mind to develop. So, let’s meet and unite in Athens.

To sum up, coming together is a beginning, keeping together is a progress and working together is success. We hope that we will all work together to make this 50th anniversary congress a success and a memorable event that will be unforgettable. I would like to thank our esteemed congress organizers for the responsibility taken to actualize such a major event and wish them all the best and success.
Anastasia Kalantzi-Azizi is Professor Emeritus of Clinical Psychology, former Director of the Master’s Program of Specialization in Clinical Psychology and the Counseling Center for Students of the University of Athens. She was specialized in Cognitive-Behavioral Psychotherapy at the Psychiatric Hospital of the University of Vienna as a national merit scholar. She is Scientific Officer of the Department of Therapy for Children and Adolescents of the Institute of Behaviour Research and Therapy (IBRT). The most distinctive characteristic of Mrs. Kalantzi-Azizi is her insatiable love and devotion to scientific research, especially in the sector of clinical psychology and the spread and implementation of the Cognitive-Behavioral Therapy model in Greece. Specifically, her research interests concern the psychological counseling of students, the cognitive-behavioral therapy for children and adolescents, the implementation and evaluation of programs of cognitive-behavioral interventions, the employment of Internet in clinical psychology etc. She has done a considerable work in psychotherapy and counseling and is a writer of many published scientific projects and books both in Greece and abroad. To cite some examples, book titles are mentioned, which she had undertaken to write, translate and/or edit: “The Little I am me”, “Cognitive-Behavioral Therapy of Children and Adolescents”, “Self-consciousness and self-management – Cognitive-Behavioral approach”, and “Introduction to cognitive-behavioral therapy – Techniques and implementations”.

Ioannis Papakostas is ex. associate professor of psychiatry at the University of Athens with a significant contribution to scientific research and teaching of psychiatry. In 1977 he completed his education in Cognitive and Behavioral Psychotherapies in New York, USA. He returned to Greece in 1981 and he created the program of Cognitive Psychotherapies at Eginition Hospital. He lectured in universities allover Greece and expanded the educational team with participants that were mental health professionals. In 1988 he established the specialist medical practice of Cognitive Psychotherapy of the mental hospital. His written work about this field includes publications of scientific articles in international and Greek journals. In 1997 he wrote the first book in Greece, Cognitive psychotherapy – Theory and Action, while in 1984 he was responsible for the writing of a reference for interns in Cognitive Psychotherapies. In 2006 he founded the Greek Association of Cognitive Psychotherapies. He is distinguished for his clinical expertise in Cognitive Psychotherapy, his long-standing clinical experience and teaching of this therapy via the widely known educational seminars and the educational program at the University Clinic.
Andreas D. Rabavilas is Professor Emeritus of Psychiatry and Chairman of the 1st University Psychiatric Department in General Hospital. He is Vice Chairman and Director of the Psychophysiological Laboratory at the University Mental Health Research Institute and Director of the Psychophysiological Laboratory at Athens University Medical School, Eginition Hospital. Moreover, Professor Rabavilas is a Founding Member and ex-president of the Greek Association of Behaviour Therapy, and also a Founding Member and ex-secretary of the Greek Psychiatric Association. He is author or co-author of 142 scientific publications (60 International and 82 greek) and co-editor of 9 international psychiatric books. Dr Rabavilas is an ex-editor of the World Psychiatric Association Bulletin and the official Journal of the Greek Psychiatric Association. His research interests focus on Psychophysiology and Experimental Psychopathology, as well as Behavioural Analysis and Behaviour Therapy. He has been a member of the Organizing Committees of 17 International and 12 Greek Psychiatric Congresses (included the 8th World Congress of Psychiatry).

Nikolaos Vaidakis is ex. associate professor of psychiatry at the Medical School - University of Athens. He was retrained for two years in behavioral psychotherapies at the Warneford Hospital of Oxford, where he was specialized in therapies of psychosexual disorders. From 1980 he organized an outpatient clinic for psychosexual disorders, which became autonomous as a specialized clinic from 1986 and operates until today at the Psychotherapy Center of Eginition Hospital. He is former president of the Association of Study and Research of Sexual Behaviour and Inter-gender Relations. He has publications in foreign and Greek journals, published abstracts of papers in Greek and international conferences and has written chapters for Greek educational books. The majority of his written work and publications are about sexual behaviour, psychosexual-psychosocial development, physiology of sexual function and sexual disorders. To cite some examples, book titles are mentioned, which he had undertaken to write, translate and/or edit: “Human sexual behaviour”, “Premature (Quick) ejaculation”, “Couples counseling. Psychotherapeutic approaches from a psychoanalytic, behavioral and systemic perspective”, “Psychology in medical field”.
Ioannis Boulougouris (1935-2000) Psychiatrist was one of the most important figures in the field of Behaviorism in Greece, as well as internationally. He came from Tripoli, Arcadia. He studied at the Medical School of the University of Athens and continued his studies at postgraduate level in England. He worked as a Curator at the Institute of Psychiatry of the University of London until 1970. He was a Director of the Psychiatric Clinic of the Tripoli Mental Illness Hospital, until 1972. He was then appointed Curator at the Psychiatric Clinic of the University of Athens in 1979. After leaving the University, he founded and headed the Institute of Behavior in Athens until the end. He was the founder of the Greek Association of Behavioral Research (1972), President of the European Association for Behavioural Therapies and a member of many international and Greek scientific associations.

Ioannis Boulougouris was a pioneer of Behaviorism in Greece. His pioneering work in treating phobias using the "psychoanalytic" method, later known as exposure therapy to stressful stimuli, made him known to the global psychiatric community. He published a series of books, wrote important articles in the international and Greek medical press and organized many international and Greek scientific conferences with great success. He has participated in international research studies and supervised many trainees in Clinical Psychiatry and the application of Learning theories in the treatment of mental disorders.

At the Institute of Behavior in Athens, which he founded and headed until his death, he continued his writing, research and teaching work with consistency and systematicity. He was a pioneer and heretic in his beliefs, but at the same time a sensitive, humane and patient teacher and colleague. He has gained worldwide recognition and appreciation for his work and contribution to Behavioral Therapies. His death deprived many young scientists of an excellent and tireless teacher and the psychiatric world of a pioneering and charismatic clinician and researcher.

Mika Haritos-Fatouros (1931-2014), Professor Emeritus of Psychology at the Aristotle University of Thessaloniki, Greece, was a prominent figure in the field of Clinical Psychology and Cognitive Behavioral Therapy.

She studied Psychology at University College London and was then trained in Behavioral Psychotherapy at Oxford University, Department of Psychology and at the University College Hospital, Psychiatry Department. From 1966 to 1967 she was a Research Fellow in the Department of Psychology at Yale University (Connecticut, USA). In 1969 she received her PhD (Faculty of Philosophy of the Aristotle University of Thessaloniki) and in 1970 she began her academic career as a curator in the Department of General Psychology at the School of...
Philosophy of the Aristotle University of Thessaloniki. In 1983 she was elected Professor of Psychology and retired in 1997. She has taught as a Visiting Professor at Universities in the USA, Europe and Australia. She worked consistently for the dissemination of the cognitive-behavioral model of Psychotherapy. In 1986/87 she founded the first Postgraduate Program in Clinical Psychology in Greece, at the Aristotle University of Thessaloniki, which offered specialization in this model. She also pioneered the establishment of the Macedonia Branch of the Greek Association of Behavioral Research of which she was the president for many years. She was also President of the Greek Association of Behavioral Research for a number of years and a member of the Board and associate until the end of the Institute of Behaviour Research and Therapy. She was a supervisor in CBT for children and adults. She had a rich and pioneering writing and research work. She has published works on the subjects of psychotherapy, populations in crisis, women’s issues and the psychology of state torturers. Her work is characterized by originality, such as her internationally pioneering psychological and social study of torturers, which has gained international recognition. For this innovative study, the Cambridge Biographical Center awarded her the International Personality of the Year award, and the book was named Best Book of the Year in 2003. In addition, being sensitive in the gender equality subject, she conducted her first psychologist training in Women’s counseling in Greece and created the Guide for Women Counselors on Equality Issues. In 2010 she was named a female scientist by the American and Cambridge International Curriculum Vitae for her contributions to Psychology and Psychotherapy. She was a member of the Board of the "Gender Equality Council" and the Board of the Research Centre for Gender Equality (KETI), a member of the Scientific Committee for Combating Violence against Women, the General Secretariat for Family Policy and Gender Equality (GGIF). She was also responsible for the program "Schools of Collaborative Learning and Prevention". In 2009, the American CV Institute ranked her among the great minds of the 21st century. She was a Mental Health professional with excellent scientific knowledge and incalculable contribution in the field of Psychology and Psychotherapy in Greece. She was a pioneer, a model university teacher and a model Clinical Psychologist, achieving the connection of theory and documented scientific research with the application of knowledge in numerous intervention programs. With her work on burning issues on politics and society, she enriched critical political thought. Her work, her exuberant character, her active and enthusiastic nature, and at the same time the simplicity and generosity of her character, have forever engraved her in our minds as an excellent colleague and individual, who we had the pleasure to meet and socialize with.
Konstantinos Efthimiou (1966 - 2017), Clinical Psychologist

He studied Psychology at the University of Salzburg in Austria. He specialized at postgraduate level in Clinical Psychology at the University of Vienna. He completed a four-year training as a Behavioral Psychotherapist in Austria, followed by two years of postgraduate training in couples therapy and sex therapy in Munster, Germany. He held a PhD in Clinical Psychology from the University of Athens. He was a founding member, lecturer and supervisor of the Association of Cognitive and Behavioral Studies, treasurer of the Institute of Behaviour Research and Therapy as well as inspirer, founder and Head of the Department of Adult Therapies. He founded and headed the “Hellenic Journal of Cognitive Behavioral Research & Therapy” and developed a rich authorial scientific work. He has taught as a research associate in the Undergraduate Program in Psychology and in the Postgraduate Program in Clinical Psychology of the University of Athens. He was a member of the Austrian Society of Psychotherapists and was elected Vice President of the Panhellenic Psychological Association for eight years. He has worked at the Salzburg Psychiatric Hospital and was the Counselor of the General Hospital of the Democritus University of Thrace. He was the Deputy Scientific Officer of the Ministry of Health project "Non-Smoking University". He was a member of the organizing committee of the program "Psychosexual disorders: diagnosis & treatment" of EPIPSY. He was distinguished for his vision and passion for psychotherapy both clinically and research-wise. He worked with dedication and zeal for the dissemination of the cognitive-behavioral model in our country. He had high scientific training, critical spirit and dedication to scientific knowledge. His interests were varied and he did not hesitate to express his opinion openly and support it with passion. He was characterized by high morals, straightforwardness, immediacy, honesty and a strict value system, which he served unwaveringly. He influenced by his example and thought a large number of colleagues who were trained by him. His premature loss leaves behind an unfilled void. He was a beloved collaborator, teacher and friend. We are grateful that we met him and shared a large part of our journey with him.
In the last decades there is a rapidly growing body of interventions in which mindfulness plays an important role. In these interventions, such as MBSR, MBCT, DBT and ACT, mindfulness is presented as a set of skills that can be taught through practice and as an attitude towards individual experience that can be cultivated, independently from any religious belief system.

There are different definitions for mindfulness. In all of them there is an agreement that mindfulness is a special kind of attention accompanied by specific attitudes. More specifically, mindfulness involves intentionally paying attention to the present moment experience in mind and body as it unfolds moment by moment. This kind of attention has certain attitudinal qualities which are fundamental, such as:

- **Acceptance**: acknowledging things as they are
- **Curiosity and openness**: investigating the present moment experience with interest as for the first time (beginner’s mind).
- **Nonattachment and non-striving**: Allowing the observation to unfold without clinging to any specific outcome, with no specific goal to be achieved.
- **Nonjudging**: observing whatever arises, pleasant or unpleasant, without evaluation and categorization.

In mindfulness based interventions mindful awareness is cultivated through different methods such as formal meditation practices and informal practices and activities. Formal practices involve the engagement in structured guided exercises for a specific period of time (up to 45 minutes) while attention is directed in specific ways. Informal practices involve awareness of everyday activities such as walking and eating.

In both kinds of practices attention is guided directly to a specific target of observation. When attention wanders into thoughts, memories, and images or is drawn towards emotions or sensations, this is briefly noted and acknowledged and then gently attention is redirected towards the initial target of observation. The experience is carefully observed with an open and accepting attitude, which prevents the habitual tendency to forcefully change it or act upon it. This way of engaging with individual experience creates a pause between the self and the habitual patterns of thought and behavior and cultivates skillful action. Mindful awareness can also be cultivated with exercises using observing, describing, labeling, and imagery skills, through which an observer’s stance towards inner phenomena is practiced.

It is argued that a decentering is one of the main mechanisms of change in mindfulness-based interventions. Mindfulness practice enhances a shift in perspective by which an observer like and non-judgmental stance towards thoughts and feelings in undertaken. In this process mental
phenomena are seen for what they are: passing events in awareness.

This shift in perspective fosters additional change mechanisms such as: self-regulation, cognitive and emotional flexibility, values clarification and exposure to internal events such as difficult thoughts, emotions and bodily sensations.

Practicing mindfulness is linked to many positive effects such as:

- Reduced rumination about the past and worry about the future by being more in the present.
- Awareness of patterns of thoughts, emotions, bodily sensations and impulses which empowers self-regulation and change.
- A more decentered relationship with difficult thoughts, feelings and urges in a way that they are seen as passing events in mind and body rather than as defying the person having them.
- Reduced cognitive and emotional reactivity.
- Kindness and compassion towards the self in times most needed.
- Wise and skillful action in accordance with important personal values of living.

Mindfulness practice is also beneficial for therapists as it is linked to personal selfcare and burn out prevention, and with increased skillfulness in attention, empathy, patience and presence during therapy.

Mindfulness-based interventions have been shown to be effective for a variety of psychological and medical conditions, such as anxiety, depression, addictions, and chronic pain. Thus, they have become prevalent in third-wave cognitive-behavioural therapies.

References
The increase of individuals and families forcibly displaced because of persecution, conflict, violence or human rights violation poses several challenges to health and other public sector services in reception countries. Unaccompanied refugee minors (URMs) have become a recognized part of today's global and mixed migration flows. In 2019, 13,800 asylum seekers applying for international protection in the 27 Member States of the European Union (EU) were URMs (7% of all asylum applicants aged less than 18). Most were males (85%); two-thirds were aged 16 to 17 (9,200 persons); two in three asylum applicants were citizens of six countries: Afghanistan (30%), Syria and Pakistan (both 10%) as well as Somalia, Guinea or Iraq (5% each). The highest number of asylum applicants considered to be URMs was registered in Greece (24% of all those registered in the EU Member States), followed by Germany (19%), Belgium (9%) and the Netherlands (8%) (Eurostat, 2019).

URMs are considered a particularly vulnerable group when it comes to the development of mental health problems, as they face unique challenges during the stages of pre-flight, flight, and resettlement in the host country. Research directed at the investigation of the impact of forced migration on the psychosocial wellbeing and mental health of this population has indicated higher prevalence rates and severity of psychopathology, such as PTSD, anxiety and/or depression, and/or externalizing type problems than among refugee minors accompanied by their families.

A growing literature describes a wide range of psychotherapeutic interventions designed to reduce mental health problems and improve psychological well-being of URMs. Most evaluated interventions that have been shown to be applicable and feasible for URMs and associated with an important decrease in PTSD symptoms include trauma-focused cognitive behavioural therapy (TF-CBT), narrative exposure therapy (NET) modified for children (KIDNET) and eye movement desensitization and processing (EMDR). All the above treatment methods share certain features, critically important when working with URMs. They start with psychoeducation, which has been shown to be an important and powerful aspect of treatment process; work on enhancing motivation for change, which is essential for allowing therapeutic processes focused on traumatic events; and use confrontation techniques with painful memories (mainly in sensu), which seem to be a significant factor in reconstructing trauma-related cognitions and emotions. While TF-CBT and KIDNET can be advantageous to adolescents who feel the need to tell their story in detail to someone else, EMDR has the advantage of not having to use much language and might therefore be delivered without translators.

Studies up to date have indicated that URMs needs for mental health care are largely unmet, as the access to public mental health care in most countries seems to be restricted for refugee children in general and, more specifically, for URMs. Given the dramatic numbers of refugee minors with mental health
problems, the gap created by a huge mismatch between refugee numbers and specialized mental health services has been filled in part, at least in Greece, by non-governmental organizations (NGOs) of varying philosophies, missions, structures and funding streams. Some of those are lacking a comprehensive psychosocial model informed by theory and empirical evidence. In order to overcome prevalent barriers to individual therapy, such as a lack of therapists, interpreters or financing, a number of trauma-focused group interventions (school and community based) have been designed for young refugees aiming at developing strategies to reduce stress and regulate emotion. So far, preliminary evidence suggests that group-based interventions may offer unique benefits for URM through peer support and normalization. They seem to be successful in targeting trauma- and stress-related symptoms, thus supporting a more pragmatic and cost-effective solution than individual therapy approaches. Teaching Recovery Techniques (TRT), developed by the Children and War Foundation in Norway, is an example of suitable brief group-based intervention, based on CBT principles, specifically designed to meet the needs of low-resource settings within an emergency, where an increased number of children require intervention.

The Symposium “CBT Applications with Unaccompanied Refugee Minors” at the EABCT Athens 2020 Congress will provide an excellent opportunity for sharing and discussing the strengths and limitations of different psychotherapeutic approaches used with UMRs. Dr Kirsi Peltonen will focus on treating children and adolescents with multiple traumas, using NET; Professor William Yule will talk about using a group-based TRT evidence-based program with URM; and Professor Panos Vostanis will contribute to the symposium as a discussant.

References
Peltonen, K., & Kangaslampi, S. Treating children and adolescents with multiple traumas: a randomized clinical trial of narrative exposure therapy. European J Psychotraum, 2019, 10(1), 1558708. DOI: 10.1080/20008198.2018.1558708
Actions on Covid-19 by the Greek Association for Behaviour Research (GBA) - Branch of Macedonia

The Branch of Macedonia is a nonprofit association which was founded in 2001 by members of the Greek Association for Behaviour Research (GBA) and it has been functioning since then under the auspices of GBA. The aim of its foundation was to facilitate the training in CBT of those mental health specialists who live mainly in Northern Greece or in islands and they had difficulties to transport. Among the initial goals of the GBA-Branch was the offered educational program to follow the European Association for Behavioural and Cognitive Therapies (EABCT) training standards.

The aims of the GBA-Branch of Macedonia are:
- The promotion of CBT through workshops and scientific events
- The spread of CBT through editions
- The low-cost psychotherapeutic support to public by psychologists and psychiatrists who are being trained in CBT and the free of charge clinical services to university students and unemployed

As long as the quarantine lasted, due to the pandemic, the Branch of Macedonia adapted its function to the new difficult conditions according to the National Health Guidelines. The offices closed, the seminars and the low-cost psychotherapy services were offered online.

One of the actions taken by the Branch of Macedonia during the lockdown was the offer of free of charge psychological support to our students and members of our association to help them to deal with the new condition and to handle all the fears and upheavals Covid-19 had caused to their lives.

Another important action was the establishment of a parallel to the vivid one educational program which would be online and it is the first online training program in CBT in Greece offered by a scientific association. It will allow mental health specialists who are interested in CBT and they live all over Greece to have access to training in a safe and protected way!!

Actions on Covid-19 taken by the Institute of Behaviour Research and Therapy (IBRT)

The Institute of Behaviour Research and Therapy (IBRT) is a nonprofit association which was founded in 1992 by members of the Greek Association for Behaviour Research.

Among the initial goals of the IBRT was the training of mental health specialists in the Cognitive - Behavioural Therapy, according to the European Association for Behavioural and Cognitive Therapies (EABCT) training standards. In our days the educational programme of IBRT is continued through the Association of Cognitive-Behavioural Studies.

The IBRT works like a research agent offering therapeutic services.

The aims of IBRT are:
- The promotion of clinical research on relative to CBT subjects
- The spread of CBT through scientific events and editions
- The offering of low-cost clinical services, by psychologists and psychiatrists who are being trained in CBT.

Just after the quarantine started, due to the pandemic, the IBRT adapted its function to the new conditions.

Following the National Organization of Public Health guidelines, concerning the Covid-19, the IBRT proceeded to the closure of its offices. It continued offering low cost psychotherapy services via teleconference. In this way, it protected the health of the benefited people, as well as the psychologists and psychiatrists who work in it. Also, IBRT continued supporting people in a safe way under those difficult circumstances.

At the same time, a lot of further actions were undertaken by the IBRT members:

“We remain by your side continuing our work”

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At the same time, a lot of further actions were undertaken by the IBRT members:
The social distancing guidelines and the ban on unnecessary movement has led to a new everyday reality, in which we have to manage our time staying at home, without being able to take part in outdoor activities. Many people are now working from home and have to distribute their time indoors between work and other activities. Myrto Lemonoudi, MSc

IBRT

https://www.ibrt.gr/edu/node/720

How can we plan and manage our time while remaining at home:

Fotini Lekka, PhD, Msc
MBCT Tutor
IBRT

The Oxford Mindfulness Centre at the Oxford University, one of the greatest organisations for training in Mindfulness Based Cognitive Therapy (MBCT), presented the premiere of the movie “My Year of Living Mindfully”. The movie received the Thrive Award at Cinequest and was available online till the 3rd of June.

https://ibrt.gr/edu/node/731

How not to put my hands on my face?

George Efstathiou, MSc, PhD / IBRT

According to the instructions of the National Organization of Public Health for the new coronavirus SARS – CoV-2 (https://eody.gov.gr/erotiseis-kai-apantiseis-gia-to-neo-koronio-covid-19/), hand contact with eyes, nose and mouth, must be avoided to reduce the risk of infection. However, for many of us the contact of the hands with the face happens automatically and unconsciously.

If you can recognize the situations in which you are used to touching your face (eg when watching TV) you can influence the appearance of the behavior by simply adding a visual reminder to your environment (eg a sticker on the TV that says STOP). Conversely, you can look for those conditions that you very rarely bring your hands to your face. For example, many women do not touch their face when they have put make up. But it is a fact that an automated chain of behaviors often completely escapes from our attention and training ourselves in awareness is required in order to be able to change a behaviour. In the context of the treatment of mental disorders such as trichotillomania, certain techniques have been proposed in order to help the person knowing where his hands are. For example, it is recommended to apply cosmetics on the hands with a strong aroma (creams, soaps, perfumes, etc.) so that there is an olfactory reminder of when the hands pass above shoulder height. In the same way, ringing jewelry can be used, so that the sound signals that the hands are close to the head. However, if, although the movement of your hands is perceived through smell or sound, you may still have a strong urge to touch your face, you can try to engage in competitive behaviors, that is, behaviors that are incompatible with the touch of the face. For example, you can lower your arms and clench your fists, fold them, put them in your pockets, or sit on them. You can also push or play with objects such as your car steering wheel, jewelry, a pen or a stress ball. Two to three minutes are usually enough to reduce the urge to touch your face, but you can continue until you can wash your hands.

Not all competitive behaviors are equally effective for everyone and you should experiment until you find the one that works for you. You should also be aware that the goal is not to control completely your behavior but to minimize acts that are dangerous to your health. No human can be completely protected. Do not be discouraged and do not give up if you do not do as well as you want and keep trying to protect yourself and your loved ones.

https://www.ibrt.gr/edu/node/712

Heroes in the coronavirus era

How you can act heroically in the face of a pandemic

Steven C. Hayes Ph.D.
Professor, Department of Psychology, University of Nevada Reno (adaptation in Greek after receiving permission: Alexandra Chrysagi, PsychD, IBRT)

If you like books or movies or epic poems you’ve undoubtedly been drawn into stories of normal people suddenly challenged by extraordinary events. Captain Miller lands on Omaha Beach to save Private Ryan. Oskar Schindler has a chance to save who he can. Frodo Baggins is given a ring.

https://ibrt.gr/edu/node/718

Online premiere of the movie “My Year of Living Mindfully”

Fotini Lekka, PhD, Msc
MBCT Tutor
IBRT

The Oxford Mindfulness Centre at the Oxford University, one of the greatest organisations for training in Mindfulness Based Cognitive Therapy (MBCT), presented the premiere of the movie “My Year of Living Mindfully”. The movie received the Thrive Award at Cinequest and was available online till the 3rd of June.

https://ibrt.gr/edu/node/731
The entire planet is facing a pandemic that has led to increased anxiety, fear and agony. It is important to protect ourselves by remaining safe and providing help to those who need it using all available means. Attached you will find the latest newsletter of the World Confederation of Cognitive and Behavioural Therapies (WCCBT), which provides useful information and advice on how to deal with the current situation from a CBT perspective.

Public health emergencies, such as the onset of coronavirus disease (COVID-19), are particularly stressful for people and communities. Fear and anxiety about an illness can lead to social stigma towards people, areas or things. The current pandemic has caused social stigma and discriminatory attitudes against people of a particular ethnic background, as well as those believed to have come in contact with the virus. In addition, quarantined patients or individuals may experience shame, guilt, or stigma (internalized stigma).

- What is the social stigma and the personal stigma?
- Why has COVID-19 caused stigma?
- What can we do to deal with the "spread" of the stigma?

Connecting with other people is a basic human need (Baumeister & Leary, 1995) and a fundamental component of Recovery-Oriented Cognitive Therapy (CT-R). It includes a sense of oneness with another person or group of people, a sense of belonging or being part of a group wider than yourself, and the ability to share your ideas and skills with others (Beck et al, in press). In contrast, social disconnection is highly associated with poor physical health and lower life expectancy (Green et al, 2018), while withdrawal and isolation are associated with higher rates of recurrence, longer hospital stays for those with severe mental disorders, such as schizophrenia (Pater et al. 2015). Social exclusion, respectively, is linked with the existence and maintenance of defeatist performance beliefs in chronically ill people, such as "what is the point of trying, since I will fail anyway" or "if I fail at something, I have completely failed" (Reddy et al 2017).

Facing the stigma and discrimination associated with COVID-19
Elli Kouvaraki, Msc. / IBRT

Public health emergencies, such as the onset of coronavirus disease (COVID-19), are particularly stressful for people and communities. Fear and anxiety about an illness can lead to social stigma towards people, areas or things. The current pandemic has caused social stigma and discriminatory attitudes against people of a particular ethnic background, as well as those believed to have come in contact with the virus. In addition, quarantined patients or individuals may experience shame, guilt, or stigma (internalized stigma).

- What is the social stigma and the personal stigma?
- Why has COVID-19 caused stigma?
- What can we do to deal with the "spread" of the stigma?

Approaching the pandemic from cognitive-behavioral psychotherapy
Allen R. Miller, PhD, MBA

Beck Institute is a nonprofit organization in Philadelphia that offers national and international training in Cognitive Behavior Therapy. The absence of consistent and reliable information about the coronavirus seems to be increasing people's anxiety. We often think, “I don't know what to do”; “Am I doing the right thing”; and “What else should I be doing?” No wonder we feel confused and overwhelmed. Cognitive Behavior Therapy (CBT) can help people gain control of their lives and feel better, even in these special and unprecedented conditions.
The pandemic which is afflicting the whole world nowadays, causes a lot of adapting demands which, in turn, affect our mental health. Both the anxiety along with the sense of uncertainty and the necessary social distance along with the lockdown may deplete our emotional resources. Mindfulness can be helpful for the self-care, the emotional regulation and the creation of a sense of proximity to our fellow people, however far apart we may be these days.

Fotini Lekka, Phd, MSc
MBCT Tutor
IBRT

Online Sessions on Mindfulness by the Oxford Mindfulness Centre

The recent COVID-19 pandemic is an unprecedented situation for most people. Although pandemics are something we have historically experienced again as a human race and as a Western civilization, none of us have had a similar experience in our lifetime. In this sense, habits, activities and hobbies that until a few months ago were considered "normal" or "self-evident" (such as going to work, seeing our friends, going for a walk or an excursion), now have been significantly differentiated. No matter how effectively each of us can manage these changes and upheavals in our daily lives and the way we think about our future, the condition in which we live is a stressful condition. Much has been said about the effects of stress in our daily lives, so that we can more easily recognize, understand and deal with them. However, it may be important to focus a little more on what is causing so much stress and why.

https://www.ibrt.gr/edu/node/719

Dealing with the loss of a family member from COVID – 19

Ioulia Maimari, Msc / IBRT

In view of the matriculation exams, anxiety and fear of failure become more and more common amongst students. These need to be managed successfully, so that they will not have an impact on the students' performance. This year, because of the pandemic, there may have been more time for them to get prepared; however, the exams will take place under unfamiliar conditions. It is thus important that the adolescents get structured guidance as soon as possible, in order to overcome their fear of failure.

https://www.ibrt.gr/edu/node/730

Socially connected, physically detached

Katerina Karamani / MSc, Kamela Beiko / Bsc, Angeliki Panagiotopoulou, MSc & Alexandra Chrysagi / PsychD / IBRT

The World Health Organization (WHO) recently stressed the importance of replacing the term 'social distancing' with the term 'physical distancing', as the first term carries the risk of social isolation. "Social alienation" came into our lives as a result of trying to stay healthy by keeping our distance from each other, but it seems to take on dimensions of social alienation with unpredictable consequences on people’s mental balance.

https://www.ibrt.gr/edu/node/727

Meaning of Life and Pandemic

Katerina Augoustaki, Msc / Institute of Behaviour Research and Therapy

The pandemic which is afflicting the whole world nowadays, causes a lot of adapting demands which, in turn, affect our mental health. Both the anxiety along with the sense of uncertainty and the necessary social distance along with the lockdown may deplete our emotional resources. Mindfulness can be helpful for the self-care, the emotional regulation and the creation of a sense of proximity to our fellow people, however far apart we may be these days.

https://www.ibrt.gr/edu/node/719

Exams during the pandemic

Athanasia Makri, MSc
IBRT

The pandemic we are now facing was an unprecedented situation for the global community and there have been many speculations regarding its consequences. The last pandemic was over a century ago and for this reason there are no scientific studies available on the subject. The greatest consequence of the COVID - 19 pandemic is the increased number of deaths, until recently mainly of elderly people. According to the latest data, people under 50 years of age are also getting sick and dying. These people apart from being cases in a coronavirus statistics report, are our beloved family members and friends and their loss has led to grieving both individually and collectively.

https://www.ibrt.gr/edu/node/728
Immediately after the quarantine, members of the Children and Adolescents Section of the Institute of Behaviour Research and Therapy, started e-publishing stories in series for children, concerning the pandemic and the lockdown. The heroes of the stories are Iolina and Koronakos, two school aged children.

We believe that peer counselling is a very effective therapeutic approach especially for young children and adolescents. It gives therapists an opportunity for good clinical practice in any type of crisis intervention. In our stories we are trying to make the most of this ascertainment. We created two siblings, our heroes, Iolina and Koronakos, aged 11 and 7 respectively. Our readers, are able to identify with our heroes in a symbolic way. Accordingly, Iolina and Koronakos are being role models for emotional regulation, anger management, problem solving skills, etc. Through our stories we tried to address to children's personal resources of self-help in order to strengthen their self-efficacy.

We tried to share our stories with as many children as possible—since we weren’t able to communicate with them in another way—by publishing them in social media and IBRTs website twice a week (https://ibrt.gr/edu/IK). We wrote the episodes in a plain and humorous language and accompanied them with funny and child-like sketches. Their content concerned typical difficulties that children and adults may have experienced due to the quarantine period at first as well as during the transition period afterwards. We also created two different guidelines, one for the families and ideas on ways to use the stories at home, and one for teachers for the use of Iolina and Koronakos stories in the classroom.

Covid-19 is a threat for all of us. The way children are processing this kind of threat depends on their developmental psychoemotional level and on other environmental factors such as parents' perceptions. Children perceive Covid–19
as a flu that can get people sick. They are aware that they have to keep a safe
distance from others and to wash their hands carefully in order to stay safe.
They also know that Covid – 19 can be a threatening disease for some people,
mostly for the elderly. However, they don’t seem to have a distorted view of
reality.

Most of them were happy to skip school and stay home. They felt that they had
the time to play around, to relax and to get a short break from school studying.
But a number of children complained of having a lot of homework assigned to
them during this period. As time passed, some children felt that they were
missing their friends and schoolmates and wished the lockdown would come to
an end so they could meet with their friends again.

It seems that most of the children have adapted to this new way of life. For
instance, they don’t look surprised when they see their teachers wearing a
mask. They also seem to accept that different settings have different safety
guidelines. Of course some of them may forget to follow these instructions.

Although many children seem to show an adaptation in this pandemic, Covid -
19 can be threatening on a child’s developing personality. Covid-19 has an
emotional impact on all of us. Children especially, may feel alone and helpless
or they may even perceive the world and physical interaction as threatening and
dangerous. Information from media and social media as well as the behaviors of
parents and significant others (such as teachers, family members, mental health
professionals etc.) can define the level of children’s negative reactions to this
global pandemic. We should keep in mind the fact that many children in the
world have already had a family member that got sick or even lost a family
member due to COVID-19. So it is very important to address not only to those
children who experience loss, but also to all those children who fear that they
will experience some kind of loss in their lives due to this pandemic.

Even though it was practically impossible to design the right effectiveness
research for our intervention with the stories of Iolina and Koronakos (we had to
react immediately after the quarantine period started), we have enough
indications of positive reactions from children, parents, teachers and mental
health professionals.

We wanted our stories to take the form of an interactive intervention in order to
make the most of the concept of peer counselling. We created the “friends
email”: iolinakoronakos@gmail.com and we let children know that they could
share their feelings and thoughts with our heroes. Children shared drawings,
poems, ideas and personal experiences via email. According to the testimonies
of parents, teachers and mental health professionals our stories had a positive
impact on those children who read them. Children seem to enjoy the story of
Iolina and Koronakos even though it’s not an action story. One of them
proposed to make a tv series out of this story while another one noticed that it’s
not nice to see that bad things happen to our heroes all the time.

The first part of our “journey” with Iolina and Koronakos, was completed at the
end of June. The 23d episode was the last one for the time being. Our heroes
and also ourselves said goodbye to children for the summertime. We also
expressed our gratitude for sharing with us their thoughts and feelings. Our
intention is to continue our stories in order to meet children’s current needs by
publishing one episode per week.

One of our Skype meetings
for “Iolina and Koronakos”
Before quarantine

At the beginning of 2020 the prospect of a pandemic in Greece was like watching a film or tv series. You could relate to it but only as a viewer of something happening in the Far East. Although the rationale mind was speaking about spreading of diseases through air travel and merchant ships the emotional mind kept repeating that either WHO would do something to stop the spread of COVID-19. The rational mind kept arguing that a virus that is spreading through droplets of saliva before a person develops any king of symptom is quite difficult to contain or that the development of a cure would take years if not decades. The emotional mind refused to hear any more of this “rubbish”

In Greece a person that refuses to see the truth is paralleled to an ostrich that put her head inside a hole to avoid facing the real danger. So, we kept doing our job, treating our clients and when we got stressed by the news on the pandemic then we just put our heads inside our noise cancelling holes and after a few minutes everything was great again.

This kind of denial seemed to worked unit the videos and images from Italy started coming through. No opportunities for the “ostrich strategy” here. Suddenly the pandemic was real. The emotional mind argued that the Greek government has started taking measures and although the pandemic was hitting Italy hard it did not necessarily meant that the same would happen to Greece because... you know ... Greece is different.....

Then we had the first positive cases inside Greece. The emotional mind was still arguing that these cases were imported and that no spread of the disease was observed in Greece yet. And as you already know…well… Greece is not the same as the rest of the world. But the emotional mind was losing ground in the face of the reality. At the end of the winter 2020 it was obvious that more and more measures regarding isolation would be taken by the government to minimise the spread of the virus.

Wise mind started to make plans. What steps the DBT teams would have to take in order to retain their coherency and keep on proving therapy to our clients? On the other hand the emotional mind started panicking: “We are doomed. The apocalypse is coming. The everyday life as we have known it for decades is over!”

The lesson learned during those days was that trying to find your wise mind was an essential quest on a daily basis. You needed to worry in order to be focused on the difficult task that laid ahead of you but also you had to find ways to regulate your worry in order to push you to act instead of melting down surrendering to emotions of panic and thoughts of hopelessness. You also needed to be optimistic to keep on with the daily routine and all the necessary adjustments that the cumulative governmental measures were requiring. You had to regulate optimism to avoid throwing yourself to delusional denial or fantasies of miraculous therapies.
The quarantine
When the locked down was imposed by the Greek government as the positive cases and the deaths caused by COVID-19 infection started to accumulate the mindful skills of being effective and performing one think at a time came in handy. So if you have to stay inside your house for months what do you do if you are a DBT therapist?

**Step 1. Taking care of ourselves**

Each of the four DBT skills group proved to be extremely helpful. We needed radical acceptance to help us get into action instead of letting ourselves sink into despair or complain constantly about the unfairness of the pandemic. PLEASE MASTER to take care of our body, retain a daily routine and focus on little thinks that we could do inside our houses in order to build our mastery. We also needed to stay connected with all the people that mattered to us. Calling, texting, posting in social media, video calling, whatever preference we had in order to keep the feeling of connectedness that could help us retain our emotion balance. And finally we had to continue our mindfulness practice and remember to stay in the moment even in the long hours of solitude.

**Step 2. Taking care of our team**

Being a member of a DBT team meant that we had to take care of our team. Find a way to continue the consultation meetings online. Keep the coherence of the team. Support the members that experienced intense anxiety, despair or even an exacerbation of their OCD symptomatology related to the possibility of infection. The most important task a team member had though was to reinforce the notion that in times of need we have to stand steady and remain loyal to our value of taking care of our community of colleagues and clients.

**Step 3. Taking care of our clients**

The most troubling issue with implementing DBT online was how to organise an online DBT skill training group. When all skills training groups went online a number of adversities emerged. Some of the members of the group did not have a fast internet connection. A lot were staying with family and there was no private space for them to isolate during the hours of skills training. Checking homework was transformed from a simple task to a complicating procedure. And most importantly if a member of a group experienced intense emotions during skills training and disconnected the second trainer often could not reach her/him to offer support and guidance.

Returning from quarantine
At the end of spring the locked down restrictions were gradually lifted. We are still struggling to adjust to the new reality with the everyday announcement of COVID-19 new cases and deaths, wearing masks, continuously disinfecting our hands and struggling to move on with our lives. Returning to face to face therapy after three months proved to be more difficult than expected but that is probably another story.
At the beginning of lockdown the majority of our DBT clients were not feeling stressed, on the contrary some of them felt relieved thinking that it was something like a holiday from obligations. Especially those suffering from social anxiety felt that it was a good chance not to go out of the house, meet friends, go to work or search and start new activities. But after a few weeks these feelings changed and personal, professional and finance insecurity grew.

We were very happy to see that DBT skills were helping them to tolerate the sudden changes in their lives and the intense emotions that emerged in this unprecedented situation. But that was not true for all of them and for the entire duration of the lockdown period. Isolation, lost opportunities for new activities, inability to invigorate their relationships or meet new people, job interviews that were postponed for an unknown time in the future or worst cancelled. Also, a lot of time that they had to spend at home with their families with whom the relationship was difficult or even dysfunctional created a need to do something more for these people than online individual therapy and skills training groups.

A colleague had a great idea: Let's meet every Thursday morning for a couple of hours therapists and clients online and chat about what is going on in our lives, share ideas about how to spend free time at home and tolerate the new situation or even see it as an opportunity. We all needed to talk about what was going on in our personal and professional lives, about our feelings and thoughts and share all the indoor activities. At the beginning the situation was-you are the therapists- we are the clients. But after a few weeks this prejudicial obstacle was overcome and all of a sudden we were all people who met, drunk coffee online and chat. We all needed to connect with others, feel that we belong and see that we are not the only ones who felt all these emotions.

Of course we couldn't lose our dialectical nature. If someone was observing us he/she could see that we were talking with dialectical terms. During the discussion for instance we were changing the
judgmental expressions with non-judgmental ones, trying to find wise mind in a situation in which emotional mind was often taking control, add positive experiences, use PLEASE to decrease emotional vulnerability, self-soothing and distraction skills to tolerate intense emotions and interpersonal skills to communicate effectively with family members. And the best observation: it was not the therapists who were proposing all these, but clients. Sometimes we were arguing and other times we were laughing, so thankful for this opportunity to communicate, think and have fun.

As a DBT group we also had mindfulness practice during these meetings, apart from using and referring to mindfulness skills during our discussions. So, the same colleague had another great idea. Let’s have an online mindfulness group and meet every Saturday morning at 09:30-10:00 and have mindfulness practice. The first Saturday only 3 people showed up. The feedback was that many people were interested in participating but 09:30 was too early for most of them. So, we changed the time and next Saturday at 12:00 am more than twenty people participated. This group was not only for DBT therapists and clients but for everyone who would like to have mindfulness practice at Saturday morning. So family, friends and colleagues were invited. We had the same observation in this group too. Who were DBT therapists? You are the ones who will lead a practice and we will participate. That was ok at the beginning as many people never had in the past a mindfulness practice and many of them were feeling ashamed to lead a practice, even express themselves. This group was a very good opportunity to feel that they belong and feel connected with other people and not totally lose touch with people, something that would make it more difficult to return to everyday life after the end of quarantine. We had our practice, talked, laughed and again felt thankful for this opportunity to come in touch with ourselves and others. So we wanted more and half an hour many times became 1 hour. And as time was passing by, not only therapists but also other people too led mindfulness practice.

During the difficult and unprecedented time of quarantine we had the opportunity to participate in these two groups and have a very interesting and soothing experience with people we didn’t know before but became our Thursday DBT and Saturday Mindfulness pals. We liked it so much so even after the quarantine we continued to meet every Saturday morning for Mindfulness practice. But that is definitely another story.
Our colleague, Katerina Aggeli, trainer and supervisor in CBT, member of the Children and Adolescents Section of IBRT sent us some marvellous sketches which were designed by herself:
Feeling powerless, incapable, worthless? Is there a monster holding you down...

I cannot fight...
I am weak...
...terrorising, threatening and bullying you?

What kind of monster holds the key of your “prison”, undermining you and preventing you from being happy?

There is no way out
What does your internal terrorising monster look like?

I cannot fight...

Let's open the bag of fears, worries and anger and find out what's in there.

I have to carry it on my own.

1.000 kg
What keeps your own internal monster fit?

Do you sometimes think that everything will go wrong? That a disaster is looming?

I will go crazy
What does the little devil in your head tell you and how does that make you feel?

Others will make fun of you!
You are an idiot!
You are not able to do it!
If you are not perfect, you are crap!
A disaster is on its way

Have you ever tried to stop your inner critic?

STOP! You are just an old broken tape! I don’t want to hear you anymore!

You should do that! You are worthless! It’s all your fault!
Have you ever felt like being into a maze, but still wanting to fight and find the way out?

I will take one step at a time.

You can learn how to STOP the internal monster from terrifying you.
To beat the internal monster, you have to get to know it first.

Did you have some time today to take care of yourself?

Did you have some time today to focus on here and now?
Let's be realistic: Our internal monster won't disappear... the goal is to keep it silent and restricted in our "life luggage".

Are you kind to yourself, when you look in the mirror?
Do you hide sometimes, in order to cope?

Do you check and check and try to do everything right, in order to cope?
During your childhood, which of your emotional needs were met?

NO TO HUMILIATION
YES TO APPRECIATION
You deserve love, care, and affection

If you don't express what you need, feel and want, others will accept you

"comme il faut"

In which mood state are you today?

Self-doubt undermines you “pulling the rug out from under your feet”
The JCBR&T publishes:
1. Editorials: Short review articles on current and controversial topics, written with the urge of the editorial board.
2. Reviews: Comprehensive analyses of important issues that underline contemporary opinions.
3. Research papers: from the cognitive behavior therapy area and its related fields.
4. Short reports: a brief report on an innovative technique or intervention.
5. Interesting case studies.
7. Minutes/ Proceedings: Minutes from seminars, roundtables, symposiums, congresses, deriving from all fields of clinical psychology, psychiatry and other related areas.
8. Letters to the editor – Correspondence: The HJCBR&T encourages the submission of analyses and abstracts, current reviews from handbooks, articles and reviews of books, as well as comments and proposals related to Journal’s content, information and experiences from the training centers and generally from the clinical practice of CBT.

The detailed abstracts which are written also in English contribute to the promotion of international acceptance of Greek research in the field of CBT.

The HJCBR&T functions as a forum for the further development of cognitive – behavioral approach in psychotherapy and belongs to the standard literature used by Greek experts who are working in this field. Since 2018 it is published on line (https://ibrt.gr/edu/sites/default/files/Periodiko_T6_T1_compressed.pdf) is a special issue on CBT for Obsessive Compulsive Personality Disorder and includes the following case studies:

- A case study of a young adult male with obsessive-compulsive personality disorder comorbid with prominent traits of avoidant personality disorder.
- A case study of a young adult man with obsessive compulsive personality disorder and social anxiety disorder.
- Case Study: An elderly woman suffering from Obsessive-Compulsive Personality Disorder and Persistent Depressive Disorder (Dysthymia).
- Case study of adult female suffering from obsessive compulsive personality disorder and persistent depressive disorder (dysthymia).

Till today it has published 7 issues covering a range of different thematicas in the cognitive – behavioral theoretical and research field such as anxiety disorders, mood disorders, schizophrenia, therapeutic interventions in children and adolescents, personality disorders, third wave interventions etc.

Authors from all over the world are welcomed and invited to publish their work in English in the JCBR&T (cbrt@ibrt.gr).
During the past six months we have all had to adjust our personal and professional lives in a way that none of us might have expected as a result of the pandemic. No one has been spared having to make significant adjustments and the importance of providing psychological support has never been more important. It is positive that all EABCT member assocaitions have been meeting the challenges they have faced by providing continuing support to the public and to their own members. The challenge that the Greek Association for Behavioural Modification and Research faced with the organisation of the 2020 EABCT Annual Congress was massive. They met this challenge by bringing us the congress on-line and allowing us to continue the EABCT tradition of running a high quality congress. We will all remember this congress forever even though we cannot meet together in person.

At the end of the EABCT2020 congress it will be time to hand over the challenge of running EABCT 2021 to the irish Association and we look forward to better times in 2021 we can once again all meet and welcome you to Belfast.

Invited keynote speakers include:
Eni Becker, the Netherlands; Sam Cartwright-Hatton, UK; David Clark, Oxford; Rob de Rubeis, USA; Michael Duffy, Northern Ireland; Anke Ehlers, Oxford, Mark Freeston, Newcastle; Stefan Hoffman; USA; Emily Holmes, Sweden; Rory O'Connor, Scotland; Lars-Göran Öst, Sweden; Shirley Reynolds, Reading.

The theme of the 2021 EABCT congress programme "CBT: Back to the Future" has been influenced by the fact that the DeLorean, Doc Brown's world famous time-machine, was built in Belfast. While we are not promising time travel our aim is to explore CBT's important role in dealing with past events, current dilemma's and future challenges. As congresses return in 2021 the programme in Belfast will represent the "state of the art" and all that is excellent in contemporary theory, research and practice in CBT across the lifespan and what we have learned from the past to make us more effective in the future.

ICC (International Convention Centre) Belfast, Northern Ireland

Hosted by the Irish Association of Behavioural and Cognitive Psychotherapy

Keep up-to-date with EABCT2021 by visiting the website (www.eabct2021.org).