Australian Association of Family Therapy

NEWSLETTER

Australia Voted YES!
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**Office Holders and Committee**

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VACANT

**ETHICS PANEL**
Livia Jackson

**TRAINING AND ACCREDITATION DEVELOPMENT COMMITTEE**
Lawrie Moloney

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*The AAFT newsletter (AAFTNews) is published by the Australian Association of Family Therapy Inc*
AAFT Committee of Management – Flow Chart

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Branches Convenor - Catherine Sanders

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PACFA Rep - Ian Goldsmith, Lyndal Power, Peter Cantwell

Newsletter Editor - Ian Goldsmith

Newsletter Editor - Tim Giles

Newsletter Editor - Hugh Martin

Financial Committee - Danielle Anderson and Saward Dawson

Innovation Award - VACANT

Book Award Chair - Margaret Hodge and Subcommittee members

State Branch Reps/PD - Lyndal Power NSW, Anne Holloway WA, Tonia Keating SA, VACANT VIC, Raymond Ho QLD, VACANT TAS, David Jones ACT.

Journal Committee

ANZJFT Award
Welcome to
New Members

NEW AAFT ACCREDITED SUPERVISORS:

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NSW

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VIC
Nina Levin
VIC
Ruth Tisher
VIC

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NSW
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NSW
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Mel Cooke
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Azar Mirzaee
VIC
Niki Gelekis
SA
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Jo River
NSW
Jamie Lee
SA
Gazi Fauzia Yeasmin
NT
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SA
The past four months provided the opportunity, following our very successful conference in October, for CoM members to take some well earned breaks, annual leave and to spend time with their families over the Christmas and New Year Period. I wish all of our members a very Happy New Year and look forward to another busy and enriching year of Professional Development opportunities, workshops and our Annual Conference for all of you to share as you can.

- As I mentioned in my last report in the September, 2017 Newsletter, a number of our CoM members were attending the Asian Academy of Family Therapy’s 4th Conference in Tsukuba, Japan in early November, 2017. A report back complimented our Vice President, Ian Goldsmith on his workshop presentation and the feedback from our attendees overall was that the conference had been a very positive experience.

As a result of our attendance, our Western Australian Branch representative, Anne Holloway was able to negotiate Dr. Takeshi Tamura, Consultant Psychiatrist and a founding member of the Asian Academy of Family Therapy, to present two workshops in Australia in February, 2018. His presentation is entitled “Culture and Family Therapy”, the first was presented in early February, 2018 in W.A. and the second in the second week of February in Victoria.

- The Committee met again in Melbourne in October following the Conference for a one day Committee of Management meeting to wrap up the year. These are always very productive meetings with this one being no exception. I want to thank all of the CoM members for their tireless effort in working toward the growth and further development of AAFT.

- We also welcome Nina Levin to the CoM who will take up the position of Victorian Branch representative as at the commencement of 2018.

Ian’s attendance at the Asian Academy of Family Therapy’s 4th Conference, along with Anne Hollaway (WA) and David Jones (ACT) is part of our gradual progress in aligning with larger Family Therapy communities Internationally.

As part of this strategy, I will be attending the 26th IFTA Congress to be held in Bangkok in March, 2018. I proposed to present on my work in Family Violence with the workshop title “Is it possible to work with the whole family when Family Violence has been identified?” This 45 minute workshop presentation has just been accepted.

Our Journal Editor Glen Larner will also attend this Conference.

Our first CoM meeting for 2018 will take place just as you receive this Newsletter (17th & 18th February) at which time we will re-visit our Strategic three year Plan, along with the usual agenda of the group.

Our other important news is that due to unforeseen circumstances we were unable to progress with our intended 39th Annual Conference being held in Broome in August this year. Due to a number of people working collectively and quickly we have managed to re-locate and to re-schedule to the Eastern States. The conference will now be held in Sydney on the 11th & 12th October, 2018 the theme is entitled “Family Therapy: Building Community Networks”. A venue has been found, and abstracts for workshops will be sought soon. It is hoped that we will return to Western Australia at another opportunity.

Finally I would encourage you all to check into the AAFT website and follow our fortnightly Bulletin, “What’s News at AAFT”. Our two office employees, Dani and Mia do a wonderful job in keeping the Bulletin up-to-date and relevant. We thank them for getting the Bulletin out regularly and with good content. So please spend some time to peruse.

I thank you again for the support that we get from so many of you and wish you well as you commence a new year of Family Therapeutic work.

Margaret Hodge
AAFT President
Editorial
Welcome to AAFT’s first Newsletter for 2018

I trust the festive season had whatever elements of peace you desired, and that, by now, the more embarrassing and wildly optimistic new year’s resolutions you made have quietly slipped into oblivion.

In this issue we celebrate the passing of the same sex marriage legislation following the inevitable result of the plebiscite. We hope this brings joy and relief to many.

We also, however, mourn the passing of Family Therapy stalwart, Salvador Minuchin. Thanks to Brian Stagoll for his personal reflections.

I have included some photos from the 2017 Adelaide Conference. Reminders for those who attended and hopefully, prompts for those of you who could not make it, to come to Sydney.

On the Conference front, importantly, please note the date claimer for the 2018 AAFT Conference, now to be held in Sydney. The Conference theme “Family Therapy: Building Community and Networks” offers scope for the convenor of the Tokyo Conference, is visiting as this Newsletter is being prepared. I would hope, in time, that others from the region will become a regular visitors and presenters.

Speaking of Conferences, I attended the 4th Asian Academy Family Therapy Conference in Tokyo in November 2017 and presented a paper on Family Therapy in Australia. Anne Holloway (WA) and David Jones (ACT) also attended. I will contribute more on this in the next Newsletter.

I have included an Editorial from the Journal of Systemic Therapies Vol 36 (3) September 2017, entitled “Galvanizing Family Therapy: Reclaiming and Revitalising Collaborative Practice”, and the accompanying “Declaration”. (These articles and a couple of others are all open access.)

The “Declaration” is intended as a statement of values shared by family therapists and the broader community of collaborative practitioners.

Suffice it to say there is a growing interest in Family Therapy ideas in the Asian region. Dr Takeshi Tamura, the convenor of the Tokyo Conference, is visiting as this Newsletter is being prepared. I would hope, in time, that others from the region will become a regular visitors and presenters.

In the current climate, when broader systems (eg. Medicare Better Access) stipulate “that a professional service must be personally performed by a single practitioner on not more than one patient on one occasion” and the ‘patient’ must have a “diagnosed mental disorder”, a statement of values of collaborative practice seems timely.

In contrast to the APS, which seems to endorse this narrow view of therapy, or at least is not actively challenging it, PACFA does embrace and promote collaborative ways of practice. PACFA has and continues to lobby, for instance, to have relationship counselling, recognised as a legitimate evidence based practice within the Better Access system.

1APS InPsych. August 2015

The 39th Australian Family Therapy Conference

The Australian Association of Family Therapy (AAFT) invites you to claim the date for the 2018 Conference in SYDNEY.

Thursday 11th October and Friday 12th October 2018

Aerial UTS Function Centre
235 Jones Street, Ultimo, Sydney NSW

The theme for this year’s Conference is:

Family Therapy: Building Community and Networks

“At no time in the history of our profession has it been more important that we become accountable to our communities. We have a responsibility to promote the welfare of our clients and ourselves by becoming personally involved in political processes.”


“From the start we think of all people involved, connected or affected by the problem as participants in a joint project and potential members of the referred person’s resource-full community. ….. we plan for large network meetings to create a context that welcomes, hears and values all voices….”


Claim this date in your diary and visit the AAFT website (http://www.aaff.asn.au) as details are progressively added about this important event.
SSM Wins Through!

Australian Journal of Family Therapy

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Relationship Education and Therapy for Same-Sex Couples

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The gay and lesbian community suffers higher rates of discrimination, mental health problems, and relationship break-up than their heterosexual counterparts. In this paper we analyse the challenges confronting same-sex couples, and the implications for couple education and therapy with same-sex couples. We describe some similarities in the challenges confronting heterosexual and same-sex couples (e.g., negotiation of shared realistic relationship expectations, effective communication). These similarities suggest existing evidence-based approaches to couple therapy and relationship education are likely to assist same-sex couple relationships. We also describe distinctive challenges for same-sex couples (e.g., homophobic discrimination, internalized homophobia, and low support from many families for same-sex relationships). These distinctive challenges suggest some adaptation of existing approaches to couple education and therapy could enhance their relevance and effectiveness to same-sex couples.

Keywords: Gay and lesbian, same-sex couples, couple therapy, relationship education

Key Points
1 Gay and lesbian individuals suffer higher rates of psychological problems and relationship break-up than heterosexual individuals, and these problems are closely related to homophobic discrimination.
2 Relationship education and couple therapy have considerable potential to enhance same-sex relationships and individual adjustment of gay and lesbian people.
3 Existing evidence-based relationship education and therapy is likely to be helpful to same-sex couples, but some modification to address specific challenges for same-sex couples is needed.

Remember – The ANZJFT is available online for all AAFT Members – log on to https://www.aaf.org.au
2017 AFFT Conference – Adelaide

AAFT President Margaret Hodge addresses the 2017 Conference.

Participants chatting before the start of another plenary session.

Registration Desk with Event Organiser Mandy helping participants.

Danni and Mia - AAFT Office Manager and Administration Assistant keeping the paperwork in order.

AAFT Secretary and Conference Coordinator Tonia Keating describing what it is like to organise a Conference!

No Lectures here – group room prepared for … discussion.

Sarah Decrea presented Working Better with Nunga Kids.

Participants chat over lunch.
VALE Salvador Minuchin

Brian Stagoll

Salvador Minuchin died on November 3 in Boca Raton, Florida. He was 96.

A foundational figure in the history of family therapy, and an inspirational force in the development of family therapy in Australia.

He visited us in 1976, as the Bouverie Clinic was establishing training programs, and he set us on the way to starting the VAFT, the Journal and our first conference. He generously left behind a set of videotapes from his work at Philadelphia Child Guidance Clinic which we all studied in great detail. His 1974 book “Families and Family Therapy” was a key text in our learning.

Then in September 2001 he graciously agreed to be interviewed via satellite for our inaugural Pan Pacific Conference in Melbourne. He gave an elegant account of “the quilt” that family therapy was made from. It is a historical review very worth re-reading.

The interview was a dramatic occasion. The conference room filled with smoke during the interview: a basement laundry bag had been set on fire by a stray cigarette, soon fortunately extinguished. Nobody panicked. It was four days before the World Trade Centre was blown up. Our world was changing.

Sal handed our local incident with characteristic humour – “sorry for setting things on fire”. Later he wrote to us: “I really had a great sense of immediacy during the conference. There are some things in the world that man has made difficult, that are nonetheless wonderful. Regards, Sal”.

We remember him fondly. A great man.
A lifetime contribution to Family Therapy by Salvador Minuchin


http://www.minuchincenter.org/publications
Salvador Minuchin, a Pioneer of Family Therapy, Dies at 96

By SAM ROBERTS

Salvador Minuchin in 1987 at his Manhattan office.

Salvador Minuchin, a provocative psychotherapist whose pioneering work with teenagers shifted the focus from their individual symptoms to their family relationships, died on Monday in Boca Raton, Fla. He was 96.

The cause was heart disease, his son, Daniel, said.

Conducting his research and practice in Philadelphia and New York City, Dr. Minuchin (pronounced meh-NOO-chin) helped redefine the role of a therapist.

Moving away from traditional methods, which focused on plumbing the individual psyche, he took a broader perspective, considering the role of the family and other social environments in shaping a patient’s behavior.

And rather than adhering to the therapist’s traditional role as passive listener, he became an inquisitive interventionist who challenged his patients’ preconceptions.

“He teases, cajoles, flatters, confronts, scorns, praises, argues, apologizes — turning himself into a rabbi, a magician, a kindly uncle or a bullying authority, to help a family get out of some rigid pattern that causes its members pain,” Sophie Freud, a professor of social work and a granddaughter of Sigmund Freud, wrote in The New York Times Book Review in 1993 in critiquing Dr. Minuchin’s book “Family Healing: Tales of Hope and Renewal From Family Therapy,” written with Michael P. Nichols.

“We are dazzled by Dr. Minuchin’s instant understanding of the deeper dynamics of every case and by his imaginative interventions,” Professor Freud wrote.

Paul L. Wachtel, of the City College of New York, called Dr. Minuchin “one of the founders of family therapy.” Discussing that branch of psychiatry in his review, also in The Times Book Review, of “Institutionalizing Madness: Families, Therapy and Society” (1989, with Joel Elizur), Professor Wachtel invoked the “no man is an island” metaphor.

“Family therapists,” he wrote, “are disciples not so much of Freud as of John Donne.”

Dr. Minuchin explored what he called psychosomatic families, finding that their common characteristics included avoidance of conflict and an ostensible civility that masked submerged anger.

A child may become anorexic as a result of rifts between her parents, he said in 1974. “So the child doesn’t fight; she doesn’t say, ‘No, I won’t,’ ” he explained. “She just doesn’t eat.”
He added: “We work with the family to get their conflicts out into the open, so that everybody can see that their problem isn’t that they have a little girl who won’t eat, but that the family is enmeshed — they are all into each other’s lives so much that the system simply can’t work. The children have no rights as children; the parents have no rights as parents.”

Dr. Minuchin said it made no sense to blame parents for their children’s psychosomatic disorders.

“There’s no perfect family; it’s a myth,” he said. “One set of circumstances might lead to an anorexic child, another to a depressive. Perfect parenting is an impossible thing, like being a perfect president or something like that. It’s trying to do good through a series of mistakes. It’s part of the human condition.

“No one,” he added, “knows how to do it right.”

Dr. Minuchin, a son of Jewish immigrants from Russia, was born on Oct. 13, 1921, in San Salvador, Argentina, north of Buenos Aires. His father, Mauricio, owned a small store and, after it failed during the Depression, herded horses. His mother was the former Clara Tolachier.

Salvador Minuchin was inspired to help young delinquents after a high school teacher, quoting the philosopher Jean-Jacques Rousseau, described them as victims of society. He later became active in leftist protests opposing the military government’s seizure of Argentine universities and was jailed for several months.

After earning a medical degree from the National University of Córdoba in Argentina, he enlisted in the Israeli Army during the 1948 war for independence.

Dr. Minuchin studied child psychiatry in the United States with Dr. Nathan Ackerman, who later established what is now the Ackerman Institute for the Family in Manhattan. He returned to Israel to treat Holocaust orphans and children displaced by wars, then came back to New York to train in psychoanalysis at the William Alanson White Institute.

He went on to work as a child psychiatrist at the Wiltwyck School for delinquent boys in the Hudson Valley, where he developed his theory of what became known as structural family therapy. He recounted his experiences with several co-authors in “Families of the Slums” (1967).

In the mid-1960s, Dr. Minuchin was the director of psychiatry at Children’s Hospital in Philadelphia, director of the Philadelphia Child Guidance Clinic and a professor at the University of Pennsylvania Medical School.

He retired as the clinic’s director in 1975 and served as director emeritus and head of training until 1983. He then returned to New York to establish the Family Studies Institute (now the Minuchin Center for the Family), a nonprofit training center for therapists. He also joined the faculty of the New York University School of Medicine as a research professor.

Dr. Minuchin retired in 1996, moving first to Boston and then to Florida, but continued to teach and write.

His wife, who died in 2015, was the former Patricia Pittluck, a psychologist and author. In addition to their son, he is survived by a daughter, Jean Minuchin; a granddaughter; and a sister, Sara Itzigsohn.
ANZJFT Editorial

Special Issue: Relational Trauma and Family Therapy

Biopsychosocial responses to adverse and traumatic events such as intimate partner violence and child abuse and neglect, impact an individual’s or family system’s ability to adapt to stress, having long-term consequences for overall health and wellbeing. In this, couple and family therapists have a unique perspective – they have long understood that both symptoms and individual functioning are maintained in the interaction between family members. These interactions can undermine or enhance more adaptive responses to these overwhelming stressors, given the reciprocity inherent in the mutually regulatory mechanisms of primary relationships that “shape vulnerability to future emotional and behavioural problems” (Ha & Granger, 2016, p. 10).

Nevertheless, it is challenging for family therapists to assess where to focus attention as any association between traumatic sequelae, current or recent family stressors, and the relational isomorphic may not be immediately obvious (James & MacKinnon, 2012). What is clear is that the ability to self-regulate in response to any stressor, is inextricably related to the experience of coregulation, which is the ability of a caregiver to sensitively respond to an infant who is either stressed, agitated, playful or content (Feldman, 2007). These care system relationships, including those of non-human primates, not only function to increase emotional regulation, but also elicit care and an “intersubjective perspective-taking” that is bidirectional (de Waal, 2007, p. 49; Laurent, 2014). What this means is that coregulation functions to mutually direct physiological stress responses in both the infant and the caregiver (Feldman, 2007).

This bidirectionality has consequences for caregivers who are responsible for providing care to children and young people, particularly those exposed to significant child maltreatment including children in out-of-home (OOHC) care. These children often fail to achieve stable and long term OOHC placements due to the challenges they present to their non-kinship carers. In turn, non-kinship parents fail to engage in more nurturing and appropriately responsive engagement in the presence of this extremely challenging behaviour, which triggers a heightened dysregulated state that compromises a carer’s capacity to act in a more “cohesive rather than disruptive” way in the face of a child’s externalising behaviours.

For clinicians who work with these and similarly challenged families, this special issue brings together some of the most outstanding figures in the field of child development and relational trauma who have generously shared their research efforts to provide theoretical and practice models of intervention. In many respects, all the papers in this edition are practice papers, as they outline the constitution of this relational trauma work with family members, although the first three do not specifically use case studies to demonstrate their clinical application.

The first article, *The Caregiver-Infant Dyad as a Buffer or Transducer of Resource Enhancing or Depleting Factors that Shape Psychobiological Development* is by Ed Tronick who is well-known for his ground-breaking Still-Face Paradigm experiment (Tronick, Als, Adamson, Wise, & Brazelton, 1978). Fifty years on, Professor Tronick outlines how the mutual coregulation capacities of the infant
and caregiver are indicative of a “messiness” or “dyssynchrony” that does not necessarily indicate a failure of the coregulatory capacities of either participant or impaired biopsychosocial development even in the face of challenging and even traumatic stimuli. Tronick challenges family therapists to tolerate this mismatch without premature intervention, to be curious about how other family members contribute to the coregulatory capacities of either the child or the parent, and to allow for reparative attempts to emerge, being mindful that self-regulatory capacities are evoked in tolerating the messiness of human interaction well as in the achievement of harmony or synchrony.

Next, in *Somatic Resources: Sensorimotor Psychotherapy Approach to Stabilizing Arousal in Child and Family Treatment*, Rochelle Sharpe Lohrasbe and Pat Ogden illustrate how Ogden’s Modulation Model, with its focus on privileging embodied experiences, provides a scaffolded approach to increasing emotional regulation in abused and neglected children and their caregivers, who due to dysregulated nervous systems, also struggle to respond appropriately to safety and developmental requirements of traumatised children. The authors describe how concentrating on the child and carer’s somatic resources such as their breath or movement of the upper body, defuses symptoms associated with a hyper aroused state (for example, accelerated heart rate, sense of foreboding), increasing mastery of otherwise frightening and intolerable physical and emotional states and their associated cognitions.

The third paper is by Dan Papero, who for decades has been a leading proponent of Bowen family systems theory. His paper, *Trauma and the Family: A Systems-Oriented Approach* focuses on understanding how chronic anxiety (Bowen, 1978), can function to mediate a family system’s response to adverse life events, and mediate the chronicity of symptoms in the more challenged and traumatised family member. Dr Papero describes how the clinician’s systems lens can reduce both the family’s sense of helplessness and their associated outsourcing of responsibility for improvement to outside professionals, thereby promoting patterns of responsiveness that enhance a family’s resiliency in the face of crisis.

The fourth paper is by Dan Hughes, *Dyadic Developmental Psychotherapy (DDP): An Attachment-Focused Family Treatment for Developmental Trauma*. This outlines the stages by which caregivers can facilitate increased coregulatory capacity of the emotional states of traumatised children, increasing attachment security and creating a shame-free and coherent narrative through the therapeutic intersubjective stance of PACE: playfulness, acceptance, curiosity, and empathy. Hughes takes the reader on a poignant journey of healing and recovery with Jenny, a child in OOHC who eventually is able to experience meaningful connection with her foster parents as well as a heightened capacity for affective coregulation.

The next paper is by Jonathan Baylin, *Social Buffering and Compassionate Stories: The Neuroscience of Trust Building with Children in Care*. It utilises neuroscientific research to facilitate the caregiver’s ability to build a trusting relationship with a child whose experience of maltreatment and mistrust of others would otherwise sustain a barrier to care and empathic connection. Through a case vignette Baylin discusses assisting carers to embrace the child’s embodiment of trust and mistrust and the wish for acceptance and unconscious moves to invite rejection. This demonstrates how work with Carol and her adoptive mother can successfully restory earlier damaging experiences to reciprocally enhance the social buffering that is integral to creating a safe, secure, joyful and mutually rewarding parent/child relationship.
The sixth paper by Arianna Struik is, *The Trauma Healing Story: Healing chronically traumatised children through their families/whanau*. Struik describes the way in which her unique Sleeping Dogs method works to create connections between chronically traumatised and often difficult to engage children and their birth and foster families. In this intervention, the child’s narrative of their maltreatment history and reason for removal is illustrated through drawings and the creation of a new Trauma Healing Story, which is actively cocreated step by step, with birth and foster parents to remove responsibility for the abuse or neglect from the child and maintain long-term healing connection with family members over time.

Next is Simon Faulkner in *Rhythm 2 Recovery: A Model of Practice combining Rhythmic Music with Cognitive Reflection for Social and Emotional Health within Trauma Recovery*. This paper provides an exciting foray into the power of music and healing traditions such as drumming to engage with clients who are not easily drawn to traditional talk therapy. Power dynamics are made transparent but effectively reduced through the facilitator’s sensitive application of this intervention, which has demonstrated effectiveness with multiple and diverse populations. Applied as a family therapy intervention it enhances respectful connection between family members and increases physical and emotional regulation.

The eighth paper is *Differentiation of Self: Enhancing Therapist Resilience when Working with Relational Trauma* by yours truly, Linda Mackay. It uses a Bowen theory lens to understand the factors that can combat vulnerability to vicarious traumatisation, secondary traumatic stress, and burnout. Using a case vignette, the paper outlines how gaining clarity on the limits of therapeutic responsibility and acting from these limits through accessing more emotional mature responses can enhance therapist resiliency in the complexity of overwhelming and unrelenting trauma-focused work.

To conclude this special issue are two interviews with Pat Odgen and Kathy Steele by Monica Masero and Rebecca Codrington respectively, relationship therapists based in Sydney who attended the 2016 Congress on Attachment, Trauma, Relationships and Compassion in Rome. The first interview is, *The Wisdom of the Body and Couple Therapy – A Sensorimotor Psychotherapy Perspective: An interview with Pat Ogden, PhD* by Monica Masero. This brings to life Ogden’s thinking and application of the bottom-up/top-down components of her sensorimotor approach, and how these can enhance physiological, cognitive, and emotional wellbeing in couple work with clients impacted by trauma. Finally, *Trauma, Dissociation and Chronic Shame - Reflections for Couple and Family Practice: An Interview with Kathy Steele* by Rebecca Codrington highlights the ways in which a relationship therapist can identify and intervene in the ubiquitous dissociative and shame-based features of relational trauma-oriented couple work.

It has been an absolute privilege to collaborate with so many excellent theorists and practitioners committed to ensuring the best possible outcomes in trauma-focused couple and family work. I encourage all readers of this Special Issue to observe, research and contribute their own practice and theoretical knowledges and continue the outstanding contribution by the field of family therapy in facilitating more meaningful relationships and enhanced regulation in people and between people impacted by relational trauma.
References


http://dx.doi.org/10.1075/aicr.68.06waa


Linda MacKay
Guest Editor
University of Notre Dame & The Family Systems Institute,
Sydney, Australia
linda.mackay@nd.edu.au
An opportunity for entering a fast-track program to immerse yourself in advanced systemic practices that will significantly upgrade your therapeutic treatment skills. Limited spaces available for 2nd or 3rd Year entry into a 3-year AAFT accredited Masters of Family & Systemic Therapy program through Williamsroad Family Therapy Centre, in partnership with ACU.

This research informed, evidence-based, leading edge training is for experienced professionals working with families who want to bring the most current research into their growing practice. It is a high-impact learning experience, where Masters students participate in case-based research in a naturalistic, real world environment. Advanced techniques for applying systemic conceptualization are realised via self-reflection in the context of a co-created small learning group.

Situated in Melbourne, the 3-day intensives format makes it especially suitable for those in full-time employment, while the virtual supervision option allows regional, interstate and international participants to be mentored live with their own clients back at home.

Please contact Williamsroad reception for more information on entry requirements: P (03) 9532 9990, E info@williamsroad.vic.edu.au
**Fundamentals of Emotionally Focused Therapy for Couples:**
**A four-day externship**

Presenter: Dr Jennifer Fitzgerald Clinical Psychologist; ICEEFT certified EFT trainer

**Contact** [adminspringhill@aceft.com.au](mailto:adminspringhill@aceft.com.au) for further details and registration

MELBOURNE VICTORIA: February 22-25, 2018. Swinburne University Hawthorn Victoria

CANBERRA ACT: June 1st to 4th, 2018.
Relationships Australia Canberra & Region Office, 15 Napier Close, Deakin

PERTH WEST AUSTRALIA: July 20TH -23RD 2018. Venue TBA

BRISBANE QUEENSLAND: October 5-8, 2018. Hotel Urban Spring Hill


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**RUTH SCHMIDT NEVEN PHD PRESENTS**

**PSYCHOTHERAPEUTIC WORK WITH CHILDREN PARENTS AND YOUNG PEOPLE**

A MODERN TIME-LIMITED PSYCHODYNAMIC APPROACH

**Thursday 15th and Friday 16th March 2018**

University of Melbourne (Hawthorn Campus)
442 Auburn Road Hawthorn 3122

An essential course for all professionals who work with children and families in any setting.

Ruth Schmidt Neven director of the Centre for Child and Family Development is a clinical psychologist and child and adolescent psychotherapist. Ruth’s clinical and professional training is run throughout Australia and oversees. She brings a fresh approach that engages with the capacity for health and growth not solely pathology and of working within a meaning-making framework. Ruth is the author of five books for professionals, the most recent being *Time-limited psychodynamic psychotherapy with children and adolescents: An interactive approach* published by Routledge.

**Further Details:** Tel: 03-9830-0422 or ccfdau@ozemail.com.au
centreforchildandfamily.com
2017 AAFT Conference – Adelaide

Sarah Decrea yarning with participants. “New Way? Let us Reclaim ‘old way’ - Aboriginal and Torres Strait Islander Families.”

Natalie Papps (Vic) and Chris Dixon (Qld) share a coffee and chat.

Lyndal Power (NSW) and Jeff Young (Vic) catch up

The audience listens to the final panel

Kristof Mikes-Liu, Glenise Shelley, Lisa Clement, Jo Rivers chatting before their presentation Thinking about Power in Open Dialogue and Family Therapy

Banu Moloney, Jenny Gray, Anne Prouty & Malcolm Robinson Keynote panel to end the Conference

Margaret Goldfinch and Rebecca Sng (NSW) Present and immediate past Journal Board Chairs

In 2017, there were 19 books for older readers and 54 picture books and books for younger readers submitted for the Award, a total of 73 in all.

The books were reviewed by five Family Therapy practitioners throughout Australia.

THE WINNERS for 2017 were:

The annual prize of $1,500 in the Older Readers category went to

_Saving Jazz_ by Kate McCaffrey

Freemantle Press

A house party spins out of control and Jazz discovers what can happen when your mistakes go viral. Alcohol and peer pressure lead to life changing consequences and family breakdown for Jazz. Extended family provide support to get her life back on track when her parents abandoned her.

The $1500 prize for books for Younger Readers was awarded to

_OUT_.

_Out_ by Angela May George illustrated by Owen Swan

Scholastic

A little girl flees her homeland, making a long and treacherous journey with her mother to seek asylum in Australia. Starting a new life is challenging, but they work hard to create a new home.

Told from the little girl’s point of view, the story is both heartbreaking and triumphant, allowing timely and sensitive discussion of what drives people to become refugees and the challenges they face. The book has a positive depiction of maternal strength and resilience, whilst acknowledging the grief and loss of what was left behind.

Owen Swan telling us of his experiences illustrating _OUT_, with author Angela May George after accepting the Young Readers AAFT Book Award for 2017
AAFT Children’s Book Award

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IN-PRACTICE ASSOCIATE EDITOR

ANZJFT is committed to producing a high-quality Journal, which is also directly relevant to the busy practicing clinician.

It is pleased to announce that Ms Linda MacKay has been appointed to the position of In-Practice Associate Editor.

Linda is Co-Director of The Family Systems Institute and Lecturer at The University of Notre Dame, Sydney.

She completed her PhD in 2010. Her research thesis was titled ‘Meeting the Spirit in Despair: Exploring Discourses and Practices that Shape Therapeutic Work with Survivors of Trauma’.

She was Guest Editor for the most recent edition of ANZJFT. Her Editorial is reprinted in this Newsletter.

Linda is a Clinical Member and Accredited Supervisor at AAFT and PACFA. She previously served as an Executive Member with ANZJFT from 2003 – 2008.

Congratulations Linda!!

The In-Practice Associate Editor will support the Editor in enhancing and maintaining the practice relevance of the Journal. This will include:

- Developing guidelines for submissions that relate directly to practice
  - Possibilities include developing a model for shorter, descriptive and reflective pieces that describe moments in therapy, clinical and ethical situations, and relate them to clinical, theoretical, ethical, or other relevant principles;

- Developing ways for standard articles to improve their practice relevance:
  - Possibilities include reviewing guidelines for authors, guidelines for nominating five key points in relation to an article, developing methods for incorporating commentary on the practice relevance of an article, supporting the development of the Journal’s on-line presence in a way that complements the Journal’s relevance.

- Canvassing the needs of the readership and of AAFT in terms of practice relevance; developing ways in which key articles of the Journal might contribute to the clinician’s professional development.

- Supporting ANZJFT in engaging with and addressing the needs of both undergraduate and postgraduate students with an interest in working with families.
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Although relational/social constructionist-oriented therapeutic approaches (e.g., McNamee & Gergen, 1992) have been practiced for years by mental health clinicians, these are still living in the margins of our professions (e.g., Hibel et al., 2017). Perhaps evidence of their marginal condition is that these approaches do not seem to have a shared language: Is it social constructionist (McNamee & Gergen, 1992), postmodern/collaborative (Anderson & Gehart, 2007), poststructuralist/narrative (Duvall & Béres, 2011; Duvall & Young 2007; Freedman & Combs, 1996; White, 2007), solution-focused (de Jong & Berg, 2002), Discursive (Lock & Strong, 2012), client-directed (Duncan, Miller, & Sparks, 2004), Bringforthish (Tomm, St. George, Wulff, & Strong, 2014), or rhizomic (Hoffman, 2007)?

On the other hand, therapists from these approaches experience a sense of kinship within their diversity, like relatives separated by distance and time who meet and are excited by their common roots and shared stories—but may disagree vigorously about events or their meaning. When the call came to “galvanize family therapy” in Galveston, Texas, May 4–5, 2016, about 50 of us (therapists, academics, researchers, and advocates) from eight different countries, ranging from Chile to Denmark, were willing to join some caudillos1 in the field (Jim Duvall, Jill Freedman, Gene

1Caudillo is a Spanish term to describe a charismatic leader who guides and inspires others to follow a cause.

Address correspondence to Inés Sametband, Los Castaños 41, Viña del Mar (2530851), 5ta. Región, Chile. E-mail: ines.sametband@gmail.com
Galvanizing Family Therapy: Introduction

Combs, Karen Young, Harlene Anderson, and David Paré) in the Galvanizing Family Therapy event. We were there! We felt more than ready to reclaim and revitalize our practices, and ensure their future in the field of mental health. We had no idea how we were going to do this, but we had no doubt that this was some sort of revolutionary call from the caudillos—a call to become caudillos ourselves, and we wanted to be there.

Usually, mental health practitioners who ascribe to relational, non-pathologizing therapeutic approaches feel pressure to position themselves and their work defensively in the face of what “evidence-based treatment” advocates, despite evidence of the effectiveness of these approaches (e.g., Franklin, Trepper, Gingerich, & McCollum, 2012). Being a collaborative therapist, these days seems to involve justifying (to employers, colleagues, academics, agencies, educational institutions, clients) each and every action or movement, as if to explain and defend the mere existence of this professional identity. Fortunately, as Taylor (1994) aptly put it, identities are “partly shaped by recognition or its absence, often by misrecognition of others” (p. 25, our emphasis). Similar to a case of misrecognition (Taylor, 1994), in which a preferred identity is not acknowledged by a community of “Masters,” collaborative therapists spend a good portion of their time trying to make space for themselves in a community that is persistent in not recognizing them as equals. A perfect recipe for a revolution, one might think.

It is not new for collaborative practitioners to feel the need to respond to misrecognition (see, for example, Chang, 2013; Strong, 2009). Continuing with what seems to be a tradition, during the Galvanizing Family Therapy event we (the authors) participated with others in addressing political and professional trends influencing and stagnating the practice of collaborative, non-pathologizing approaches to working with people. We worked in small groups, and bigger ones. We had intense fervent dialogues, and allowed ourselves to go with the flow. We shared many ideas, sentiments, and stories—the ways in which we worked in our different settings and (international) communities, our different practices, how we dealt with being, for the most part, an “alternative” or non-dominant group within the mental health professions. We were eager to see what came out of our conversations, what we could bring forth together as a group of therapists concerned about the future of our profession(s).

The Galvanizing Family Therapy event was fruitful in many ways. For some of us, it was our first time meeting some who have written history in our field. For others, it was meeting again with old colleagues. It had the flavor of a family reunion. Although we had lived in our silos for a while (Chang & Nylund, 2013), we experienced each other as kin. At times, we were invited into pessimism about the future of our collaborative therapeutic approaches, feeling as Michael White (1996, personal communication) so aptly put it that we are “swimming together in a sea of disrespect”—the world of pathologizing mental health practices. Perhaps “sneaky oppression” found its way into our conversations. Many felt dually marginalized—as collaborative therapists, we are not in the mainstream of mental
health practice, and as family therapists we find ourselves snowed under by the individualizing trends of medicalization (e.g., Strong, 2017; Strong, Gaete Silva, Sametband, French, & Eason, 2012). Other times, conversations were flooded with hope, and we were back on our horses, being led by and ourselves being caudillos. Participants shared precious, unique stories or small acts of resistance (Wade, 1997). Ideas were challenged, and new ones started to form. We connected with each other, we shared academic/professional resources; we learned from each other, shared laughs, tears, and music, all of this while trying to articulate new ways of describing, understanding, and questioning our practice.

From the conversations that took place during the Galvanizing Family Therapy event came the articles we present in this special section, selected from our call for papers to the group. These articles, in our view, represent our joining with the caudillos in a peaceful, bold, slow but persistent revolution we hope to be helping ensue. First, Faye Gosnell, Mark McKergow, Blaine Moore, Tanya Mudry, and Karl Tonn (our banner carriers) present “A Galveston Declaration” (our banner), a bold and tenacious statement inviting readers to take a stand and support the shared values that came out of the Galvanizing event. Next, Jan DeFehehr offers her “Navigating Psychiatric Truth Claims in Collaborative Practice: A Proposal for Radical Critical Mental Health Awareness.” Similar to the philosopher of the 18th-century Enlightenment, she invites readers to critically examine the dominant discourses in psychiatry and how these influence mental health professions. Lastly, Emily Doyle invites us to reflect on our professional involvement with “Proposing an Ethic of Responsiveness,” focusing on the implications of our responses in the work we do. We hope you enjoy reading this special section, and that you join us in making space for our voices to be recognized.

REFERENCES


Galvanizing Family Therapy: Introduction


A GALVESTON DECLARATION


FAYE GOSNELL Athabasca University, Alberta, Canada; MARK MCKERGOW University of Hertfordshire, UK; BLAINE MOORE, Moore Counseling and Wellness, Fort Worth, Texas; TANYA MUDRY Our Lady of the Lake University, San Antonio; & KARL TOMM University of Calgary, Alberta, Canada

We present “A Galveston Declaration,” which is intended as a statement of values shared by family therapists and the broader community of collaborative practitioners. In the preface, the authors describe the process by which they created this declaration, as well as its purpose. The authors declare that family therapy is experiencing another significant transformation, not unlike a previous historical shift from first- to second-order family systems therapies. The authors propose a statement of shared values, thematized within four categories: (1) pluralism, (2) flux, (3) opening space, and (4) responsibility. The authors invite colleagues and peers to sign on to support or otherwise respond to the declaration.

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<th>TABLE 1. Declaration of Values</th>
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<td><strong>PLURALISM – differences of view</strong></td>
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<td>1. Acknowledging multiple “truths”</td>
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<td>2. Responsiveness to particularities in context</td>
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<td>4. Exploring multiple cultures, contexts, interactions, and influences</td>
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<td><strong>FLUX – differences of state</strong></td>
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<td>1. Facilitating the emergence of new identities</td>
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<td>2. Regarding “every interaction as mutual influence”</td>
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<td>3. Recognizing people as persons embedded in relationships</td>
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<td>4. Experimenting with transformational restorative justice practices</td>
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<td><strong>OPENING SPACE – expanding choice</strong></td>
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<tr>
<td>1. Living with curiosity</td>
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<td>2. Opening space for enlivened possibilities</td>
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<td>3. Inviting others to entertain change</td>
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<td>4. Proactively including others (while respecting their possible choice to remain apart)</td>
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<td><strong>RESPONSIBILITY – generativity</strong></td>
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<td>1. Noticing resources, competencies, and possibilities</td>
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<td>2. Anticipating potential effects of resource use and developing sustainable ecologies</td>
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<tr>
<td>3. Assuming collective responsibility and accountability</td>
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<td>4. Enacting an ethics of caring and privileging restorative justice</td>
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Each year since 1994, the Board of the Australian and New Zealand Journal of Family Therapy recognises an individual or group who has made a distinguished contribution to the professional life of family therapy in Australia.

Distinguished contributions can take the form of teaching, scholarly publications or prominent roles in the establishment and development of key family therapy organisations and training programs, the development of key services, leadership, research and representation of family therapy concerns in the wider community.

The award recognises either an exceptional contribution in one stream, or prominence across several kinds of activity.

(ANZJFT Editorial, 2007)

Dr Jeff Young (PhD) is the Director of The Bouverie Centre. He is a clinical psychologist and family therapist and has worked, published and presented in the area of Mental Health for over 28 years. Jeff has an interest in responsive and contextually compassionate health services. He has contributed to the development of Single Session Therapy and reflecting teams, understanding blame and conceptualizing change in chronic conditions.

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Banu Moloney and Pam Rycroft having too much fun introducing Jeff Young to Conference.

Jeff addresses Conference after receiving his award.

Jeff is presented with his Award by Margaret Goldfinch, ANZJFT Board Chair.

The Seventh Annual Bouverie Alumni & Friends Celebration

The Bouverie Football League: The Diversity Round
Celebrating the Contribution of Women; Indigenous & LGBTI Communities

FOOTY
Dress Code

Guest Speakers

Susan Alberti
Former Vice President of The Western Bulldogs

And Frances Coughlan Alumna 2008-2009

Game: Thursday 22 February 2018
Venue: The Bouverie Centre - 8 Gardiner St, Brunswick
Warm Up: 6.00PM - Pre-Dinner Drinks
Match Time: 6.30-10.30PM - 3 Course Dinner

Half Time Entertainment

Greg Champion & The Useful Members of Society
(Ex Models, Rockwiz Band, Ex Paul Kelly & The Dots)

Tickets $70: http://tinyurl.com/alumnidinner18
Includes dinner, drinks and entertainment
*Places are limited so register now to avoid disappointment
What might this be an example of?
Flexible Perspective Taking? Reframing? Deconstruction?

Murphy drops some buttered toast on the kitchen floor and it lands butter-side-up. He looks down in astonishment, for he knows that it’s a law of nature of the universe that buttered toast always falls butter-down.

So, he rushes round to the presbytery to fetch Father Flanagan. He tells the priest that a miracle has occurred in his kitchen.

But he won’t say what it is, so he asks Fr. Flanagan to come and see it with his own eyes. He leads Fr. Flanagan into the kitchen and asks him what he sees on the floor.

“Well,” says the priest, “it’s pretty obvious. Someone has dropped some buttered toast on the floor and then, for some reason, they flipped it over so that the butter was on top.”

“No, Father, I dropped it and it landed like that!” exclaimed Murphy.

Oh, my Lord,” says Fr. Flanagan, “dropped toast never falls with the butter side up. It’s a mir....

Wait... it’s not for me to say it’s a miracle. I’ll have to report this matter to the Bishop and he’ll have to deal with it. He’ll send some people round; to interview you, take photos, etc.

“A thorough investigation is conducted, not only by the archdiocese but by scientists sent over from the Curia in Rome. No expense is spared. There is great excitement in the town as everyone knows that a miracle will bring in much need tourism revenue.

Then, after 8 long weeks and with great fanfare, the Bishop announces the final ruling. “It is certain that some kind of an extraordinary event took place in Murphy’s kitchen, quite outside the natural laws of the universe. Yet the Holy See must be very cautious before ruling a miracle. All other explanations must be ruled out.

Unfortunately, in this case, it has been declared ‘No Miracle’ because they think that Murphy may have buttered the toast on the wrong side!”
SPECIAL STUDENT OFFER

Reduced Associate Membership for Students enrolled in an AAFT accredited Family Therapy Course

Current students who apply for Associate Membership may also apply for the reduced rate of $60 per year whilst enrolled in an AAFT accredited Family Therapy course. (this offer is available for a maximum of 2 years).

Simply complete the Associate Membership application form along with the completed Verification of Enrolment form, available from the AAFT website and send them into the AAFT office to apply for your reduced associate membership fee.

For more information please contact the AAFT office: admin@aaft.asn.au phone: 03 9429 9938
PO BOX 2351 Richmond Vic Australia 3121
PACFA launches its new Code of Ethics


PACFA Members and Registrants, including Practitioners, Affiliates, Students, Educators, Trainers and Researchers are required to work to the PACFA Code of Ethics 2017 and all are encouraged to read and reflect on the new Code.


Many people have contributed to the development of the PACFA Code of Ethics 2017. AAFT Vice President Ian Goldsmith became a member of the PACFA Ethics Committee in October 2016 and has contributed ideas in the last year of its development.

In 2018, the Ethics Committee will be developing website resources to help those using the Code to understand, reflect on, and put into practice this important document. PACFA plans to put on professional development events to support the implementation process for the new Code.

PACFA launches NDIS resources

When the NDIS was first launched, PACFA was actively involved in consultation processes about the design of the scheme. We also ran a pilot in Victoria to establish the eligibility of PACFA Registrants to be providers for the NDIS. At that time, PACFA produced a package of resources to help PACFA Registrants apply to be providers.

The resources have been sent to PACFA Registrants or Registrants can email admin@pacfa.org.au for a copy.

AAFT remains a Member Association (MA) of PACFA. Under PACFA’s restructure, however, many MA’s became Colleges or State Branches, and some smaller modality groups left PACFA. AAFT continues discussions with PACFA Board representatives to explore the best way AAFT can remain in PACFA within its new structure. More as this develops.
PACFA Launches Professional Conduct Procedures 2017

PACFA has launched its new Professional Conduct Procedures 2017 which establishes PACFA’s framework for the management of Grievances, Complaints and Appeals about alleged ethical breaches by PACFA Members or Registrants. The Procedures include a new Alternative Dispute Resolution (ADR) process.

The ADR process to encourages aggrieved persons considering making a complaint about a PACFA Member or Registrant to access an alternative process to making a Formal Complaint. Wherever possible, ADR is the preferred process for seeking resolution of a Grievance or a Complaint. It is less stressful and less time consuming than a Formal Complaint and is more likely to promote positive outcomes that are acceptable to those involved in the process.

ADR, in the context of a Grievance or a Complaint made to PACFA, is a non-legal process, similar to mediation. It is facilitated by a PACFA Clinical Registrant who acts as an Intermediary in the process and who has mediation skills.

To download the new PACFA Professional Conduct Procedures 2017, go to the Ethics Complaints page.
AAFT 2018 Rural Family Therapy Grant
Professional Practice in Rural, Regional and Remote (RRR) Areas of Australia

Want to run a Professional Development Event, and could use some financial help to make it happen?

Do you have peers doing family work who would like to meet up regularly, and you need to hire a hall?

AAFT is committed to supporting qualified practitioners of family and systemic therapy in rural, regional and remote areas of Australia.

We offer Grants of up to $500 each to support ongoing professional development and promotion of family and systemic therapy practice.

Grants were recently awarded for:

Promoting Family Therapy in Bendigo, Victoria; and

A well attended 2-day workshop in Albany, WA by Maurizio Andolfi on How to Intervene in Child Unhappiness and Long Term Family Trauma.

The Rural Grant is open to Members of AAFT. You will need to meet the criteria, provide documentation of your event, and write a small article for other members to read in our Newsletter.

Interested?

Please send through an application to the AAFT office:

PO Box 2351, RICHMOND VIC 3121
admin@aaft.asn.au www.aaft.asn.au
PH: 03 9429 9938 FAX: 03 9429 9948
Mob: 0499 078 211 Mon-Fri 10am-6pm est
**Practitioner Perspectives on Family Therapy Across Rural, Regional and Remote Australia, 2018**

*Thank you for your time and valued contribution.*

**Please return to: admin@aaft.asn.au** or **PO Box 2351, Richmond, Victoria, 3121.**

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### Little About You

Your State/Territory: ............................................................... Would you say you are: Rural / Regional / Remote

Your Name: .......................................................... Your Organisation/Private Practice: ..........................................................

Role/s: ........................................................................................................

Have you ever attended an AAFT Conference? YES/NO When/Where? ............................................................................... How useful did you find it for evolving and supporting your RRR practice? (10=Extremely Useful 1=No Use) .....................

### Contact Details

Would you be happy for AAFT to contact you to discuss your ideas? (Please circle) YES / NO, but thanks.

Preferred mode of contact: (please circle) PHONE / EMAIL

Email: .................................................................................................... PHONE: ........................................... Best time to call ..............

Would you like to be included on the RRR email list (please circle) YES / NO

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1. **What primary Support needs would you like to see addressed for RRR family workers? (Please rank)**

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2. **What ideas do you have on how this might be done effectively and realistically (incl. cost-wise)?**

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**ABN 44 698 290 795**

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**AAFT 2018 Rural Family Therapy Grant**

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PH: 03 9429 9938 FAX: 03 9429 9948

Mob: 0499 078 211 Mon-Fri 10am-6pm est
Specifications for Advertising with AAFT

AAFT offers a variety of advertising options for communicating your event, job vacancy, professional services, etc. to AAFT members Australia wide. Outlined below are the advertising services and prices for your consideration.

**AAFTnews – The Official AAFT E-newsletter**

The AAFTnews is a quarterly newsletter issued to the membership via email broadcast that is a more comprehensive document complete with articles of interest to the AAFT membership – The prices are as follows:

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**FORTNIGHTLY AAFT BULLETIN**

The AAFT office issues a **fortnightly** AAFT Bulletin to the membership which includes AAFT related news items and advertisements as well as advertisements for services that may be of interest to the AAFT membership.

* Prices based on 1 fortnightly advert

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<td>62.5mm</td>
<td>250mm</td>
</tr>
<tr>
<td>Price</td>
<td>$160.00</td>
<td>$130.00</td>
<td>$220.00</td>
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</tbody>
</table>

**AAFT Website Noticeboard**

AAFT offers advertising on the website noticeboard page: ads will be placed for **4 weeks** at which point you may re-advertise on request at half the advertised cost.

* Prices based on 1 Monthly advert

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<thead>
<tr>
<th></th>
<th>Half Page</th>
<th>Quarter Page</th>
<th>Full Page</th>
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<tr>
<td>W:</td>
<td>175mm</td>
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<td>H:</td>
<td>125mm</td>
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<td>250mm</td>
</tr>
<tr>
<td>Price</td>
<td>$50.00</td>
<td>$25.00</td>
<td>$100.00</td>
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**Free service – Post a link**

If you would like post a link that you might think would be relevant to our membership, simply contact the AAFT office and your link will posted via the fortnightly bulletin and on the website noticeboard page.

20% discount on 2 or more advertisements/services. All prices are GST inclusive

A further 20% discount is offered for re-advertising
ADVERTISEMENT BOOKING FORM

CONTACT (for billing)

NAME: .................................................................................................................................
ADDRESS: ............................................................................................................................
.............................................................................................................................................. POSTCODE: .............
PHONE: .................................. EMAIL: ......................................................................................

ADVERTISEMENT
TITLE/DESCRIPTION: ...........................................................................................................

AAFT service (please Highlight/Circle):

AAFT E-Newsletter
AAFT Bulletin (Fortnightly from 20.5.2016)
Web Noticeboard (per Month)

AAFTnews SIZE (Please Highlight/circle):

Half Page  Quarter Page  Quarter Page  Half Page  Full Page
W: 175mm  W: 175mm  W: 87.5mm  W: 87.5mm  W: 175mm
H: 125mm  H: 62.5mm  H: 125mm  H: 250mm  H: 250mm

- If booking for the AAFTnews, please circle/highlight the edition in which you would like to place your advertisement:

<table>
<thead>
<tr>
<th>February Newsletter</th>
<th>May Newsletter</th>
<th>August Newsletter</th>
<th>November Newsletter</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submission Deadlines:</td>
<td>January 26th</td>
<td>April 20th</td>
<td>July 20th</td>
</tr>
<tr>
<td>Anticipated Distribution Dates:</td>
<td>February 9th</td>
<td>May 4th</td>
<td>August 3rd</td>
</tr>
</tbody>
</table>

- Once advertisement is booked, an invoice will be issued with payment options.
Opinions of Contributors and advertisers are not necessarily those of AAFT. AAFT makes no representation or warranty that information contained in articles or advertisements is accurate. AAFT does not accept liability for any action, loss or damage resulting or arising out of information contained in the newsletter. It is the responsibility of contributors to make every effort to protect the confidentiality of persons/clients referred to in their articles.

Please send this form to: AAFT Administration PO Box 2351 Richmond Vic 3121 OR Email: admin@aaft.asn.au
Subscriber Application Form

The AAFT newsletter and other website based resources helpful to working with families.

*SUBSCRIBER LEVEL 1: individuals, institutions and organisations, not otherwise being members, may subscribe to the association to receive the AAFT newsletter

*SUBSCRIBER LEVELS 2 & 3: INDIVIDUALS (only), not otherwise being members, may subscribe to the AAFT newsletter as well as the ANZJFT. Please note that subscriber levels 2 and 3 are not available to institutions or organisations.

*INSTITUTIONS AND ORGANISATIONS can contact Wiley-Blackwell publishing to subscribe to the ANZJFT – http://ordering.onlinelibrary.wiley.com

SUBSCRIBER LEVEL 1:

*INDIVIDUAL AND INSTITUTIONAL
Subscription to the AAFTnews (4 issues annually) – This will come in electronic format
$65.00 Annual Fee (initial application will also incur a once off $14.00 admin fee)

SUBSCRIBER LEVEL 2:

*INDIVIDUAL ONLY
Subscription to the Online Copy of the ANZJFT and complimentary issues of the AAFTnews (This will come in electronic format) (4 issues of each publication annually)
$118.00 Annual Fee (initial application will also incur a once off $14.00 admin fee)
*Subscription Fees cover the period of a calendar year (Jan – Dec) If you subscribed after the first issue of AAFTNews you will receive all previous issues for that calendar year, you will also be able to access all the ANZJFT back issues online.

SUBSCRIBER LEVEL 3:

*INDIVIDUAL ONLY
Subscription to the Hard Copy of the ANZJFT and complimentary issues of the AAFTnews (This will come in electronic format) (4 issues of each publication annually)
$166 Annual Fee (initial application will also incur a once off $14.00 admin fee)
*Subscription Fees cover the period of a calendar year (Jan – Dec) If you subscribed after the first issue of ANZJFT and AAFTNews, you will receive all previous issues for that calendar year.

CONTACT DETAILS
Name of Company or Institute:
Contact Person:
Postal Address:
Phone Number: Mobile:
Email (print clearly):
Purpose of Subscription:

Signed: _____________________________ Date: _____________________________

Please send this application to:
AAFT Office Manager, PO BOX 2351 RICHMOND VIC 3121

Upon receipt of this application, an invoice will be issued to you with internet banking instructions Alternatively, you can attach a cheque or money order made out to AAFT Inc. (Annual Fee + $14 Once-off Admin Fee)

RENEWALS ARE DUE ON THE 1ST JANUARY.
(You will be sent an invoice annually.)
Volume 42 No. 1, February 2018
Australian Assoc. of Family Therapy Inc.

Associate Membership
Associate Membership is open to any person who is actively interested in family therapy and is involved in an appropriate field of study or work, as determined by the Committee.

Annual Fee: $235.00

* Application forms available from the AAFT website www.aafft.asn.au or AAFT administration Ph: 03 9429 9938 Email: admin@aaft.asn.au

Clinical Membership
Clinical Membership is open to Associate Members who are practising family therapists who have demonstrated sufficient commitment to and competence in the practice of family therapy and have satisfied the Committee of their qualifications for membership determined by members from time to time at a General Meeting.

Annual Fee: $430.00

* Application forms available from the AAFT website www.aafft.asn.au or AAFT administration Ph: 03 9429 9938 Email: admin@aaft.asn.au

Life Membership
Life Membership may be granted to a Clinical Member only who has given outstanding service to the Association for an extended period of time. The appointment of a life member shall be by resolution at a General Meeting of Members on the recommendation of the Committee as the Committee sees fit.

Australian Association of Family Therapy Inc.
The Australian Association of Family Therapy Inc. is committed to the development and advancement of leadership and excellence in Family Therapy through fostering professional competency and integrity.

RENEWALS ARE DUE ON THE 31ST OF JANUARY.
(You will be sent an invoice annually)

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<tr>
<th>February</th>
<th>January 26</th>
<th>February 9</th>
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<td>May</td>
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<td>August</td>
<td>July 20</td>
<td>August 3</td>
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<tr>
<td>November</td>
<td>October 26</td>
<td>November 11</td>
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All Correspondence to AAFT Newsletter Editor:
Computer file submission of articles required. Please ensure files are virus scanned by an up to date anti-virus program prior to submission. Articles saved in any popular program format acceptable. Please note: only italic and bold formatting maintained.

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Advertisement Booking Form on page 28

Special Note:
If an advertisement is accepted by the Editor of the AAFT Newsletter, every effort will be made to ensure its inclusion, but no guarantee is given.

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Sales: (03) 9882 4905
sales@inkifingus.com.au
AAFT Resources for members

Go to www.aaft.asn.au/members/ and logon as a member to access these resources

2017 AAFT Conference Presentations

‘Just B’ A Mindful Systemic Approaches to Resilience Construction – Chris Dickson, Louise Fewtrell
Access for Learning – Mel Cooke & John Maratos
Adolescent Violence towards Parents – The Role of Victimisation – Lauren Moulds
Bower Note – Catherine Sanders, Malcolm Robinson
Co Facilitating Men’s Domestic Violence Groups A Feminist’s Paradox – Sonja Bar Am
Empowerment by Degree A Black and White approach to delivering Family Therapy Training – Banu Moloney
Family Therapy and Social Justice Collapsing the Divisions of Inequality – Alison Elliot
Family Therapy in a Cultural Lens of Gender Inequality – Rosetta Silva
Family Therapy Through the Lens of Black Empowerment – Raymond Ho
Forgotten and Incarcerated, I Am Still Their Dad, Serah Jones
FTFLGBTI Australian stats
Gender Inequality keynote References – Dr Anne Prouty
Gender Revolution Guide
Gendered Inequality – Dr Anne Prouty
Headspace, the Bouverie Centre and Single Session Family Consultation – Suzanne Fuzzard
It’s Just Not Fair Making Family Therapy Accessible for Children – Catherine Sanders, Melissa Minney
It’s Made More Sense in Two Hours than it has in 55 Years – Judith de Lang
Just Ageing – Pam Rycroft, Liz Forbat, Catherine Sanders
Mental health and trauma – Michele Banks & Chris Dolman
Old Ways New Time – Sarah Decrea
Social Justice Activation and Application in a Child and Youth Mental Health Setting – Bernadette Dekker
Social Justice and Self-Determination in Aboriginal and Torres Strait Islander Joe Conway and Tamra Bridges
Systemic Interventions for Children in Care – Dr Leonie White
The Ecological Impact of Macro Decision-Making on Families, Who Are Survivors of Torture and Trauma – Gerlinde Bothin
Thinking About Power in Open Dialogue and Family Therapy – Kristof Mikes-Liu, Jo, River, Lisa Clement, Glenise Shelley
Universal Risk Screening as A Tool to Identify Client Vulnerability in Family and Relationship Counselling – Dr Jamie Lee Janet Muirhead, Prof. Jennifer McIntosh
Working Collaboratively to Prevent and Respond to Child Abuse and Neglect – Jenny Gray
Working Well with Customers within the Disability Sector – Leigh Bateman, Victoria Scowcroft