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IAFP publishes a newsletter which is mailed out by e-mail about every six months. Sample issues can be downloaded from the IAPF homepage or may be obtained from your national representative (www.iafpsy.org) and the editors: Thomas M. Gehring, Ph.D. (tmgehring@bluewin.ch) and Peter K. Smith, Ph.D. (P.Smith@gold.ac.uk).
Editorial

This issue of the IAFP Newsletter focuses on two main topics, namely Families in War, and the use of Movies in Therapy. In addition, recent publications from the field of family psychology as well as forthcoming conferences are listed.

Although the war in Iraq has officially finished, our world is still not peaceful. Devastating modern warfare and global terrorism are widespread and thus increasingly affecting a great number of children and their families. Gregory Jurkovic and Brian Isakson briefly review data of Bosnian preadolescents on “family traumatology”. They conclude that the impact of armed conflict on families and children deserves our urgent and professional attention. Furthermore, we include the APA Guidelines for Building Resilience in a time of War.

The second article focuses on the modality of cinematherapy, a method which is based on widely used therapeutic principles and on bibliotherapy. The author, Birgit Wolz, shows that this innovative approach includes theoretical elements from psychoanalytic, cognitive-behavioral and systemic treatment concepts. She presents two case examples and provides basic guidelines on how to use the transformational power of film in clinical practice.

We are sure that the present Newsletter contributes to increased communication between IAFP members all over the world. We look forward to contributions from different professional perspectives which can be submitted to us. We welcome various forms of contribution such as news of member’s interests, new research activities, reports from relevant conferences, reviews of family psychology in particular countries, reviews of books, letters and debates on important issues.

Zurich and London

Thomas M. Gehring, Peter K. Smith
Children and Families in War

Gregory J. Jurkovic, Ph.D. and Brian Isakson, B.S.
Department of Psychology, Georgia State University
Atlanta, GA, U.S.A.

War and global terrorism reached an unprecedented level in the 20th century. Unfortunately, the start of the 21st century does not permit us to be sanguine about a decline in this trend. Even more disturbing is the changing nature of war causalities. At the beginning of the 20th century, 15% of all war casualties were civilians. In World War II, 50% of those killed were civilians. Today, 90% of those killed or wounded are civilians, mostly women and children (Raymond & Raymond, 2000). Indeed, a recent U.N. report (Machel, 1996) revealed that between 1985 and 1995 alone, two million children were killed in war, four-five million were disabled, 12 million were left homeless, one million were orphaned or separated from parents, and 10 million were psychologically traumatized.

These statistics assume added significance in light of the trans-generational effects of war exposure, such as secondary traumatization and family distress. Peter Coleman and Andrej Podolskij (2002) richly illustrated some of these effects in research that they presented at the last conference of the International Academy of Family Psychology (IAFP) in Heidelberg.

Clearly, the devastating impact of war and terrorism are widespread affecting a rapidly growing number of children and families around the world. Family psychology can make an invaluable contribution to our understanding, treatment, and prevention of war trauma. Research in the trauma field has been long dominated by an individually oriented perspective. In recent years community-level variables have also received increasing attention. It is unclear why the family context of trauma has been ignored given the fact that it represents a pivotal setting which affects and is affected by intrapersonal (e.g., posttraumatic stress) and socio-community (e.g., social support) processes.

In this article, we briefly review a portion of a data set (some of which we presented at the last IAFP conference) collected by us a few years ago in Bosnia, and illustrating the interdigitating relation of individual and familial processes in children and families exposed to war (Jurkovic, Sarac, Kuperminc, & Morrell, 2002). We also consider questions raised by the study concerning (a) the role of culture in collecting and interpreting family psychological data, (b) how to intervene from a humanitarian
perspective into war exposed families, and (c) future research directions in this area.

War, Family Fairness, Filial Responsibility, and Posttraumatic Stress in Children

We formed a research team several years ago to define and investigate a new area of study, which we refer to as “family traumatology.” Our primary goal is to examine psychological trauma, particularly in war-exposed indigenous and refugee populations, from an ecosystemic perspective. We had an opportunity to test a causal model explaining 6th-7th grade Bosnian children’s posttraumatic stress symptoms in terms of war-related events that they had experienced earlier in their lives and putative intervening family factors.

In short, we found that families’ exposure to war stressors (witnessing and/or experiencing life-threatening events, separation from and loss of loved ones, and loss of home and belongings), as reported by one of the parents, was significantly related to the posttraumatic stress symptoms in the children. We also discovered that this relationship was mediated by children’s perceptions of family fairness or reciprocity. It appeared that exposure to war and attendant violations of rights and justice had understandably disrupted the justice structure of many of the families in our study leaving the children without the support and acknowledgment that they needed to cope with posttraumatic stress. Interestingly, we also found that filial caretaking moderated this dynamic. That is, perceived unfairness was intensified for those children who had extensive instrumental and emotional filial responsibilities (e.g., cooking, caring for a depressed parent).

Of course, because of the correlational nature of the investigation conducted at one point in time, firm conclusions about causality cannot be assumed. However, qualitative data that we collected in focus groups with the children and families provided converging evidence for our quantitative data and offered additional insights. In particular, they suggested that parents were not addressing their children’s distress, but also that the children were actively protecting their parents whom they perceived as vulnerable. Consider the following discussion in one of the child focus groups:

Interviewer: Do you talk to your parents about the war?
Child 1: No! I don’t want to upset my parents.
Interviewer: So you don’t talk to anyone about the war?
Child 1: I remember when the tanks first came by my home. I was so scarred. I’ve never told anyone this.
Interviewer: Not anyone?
Child 2 (interrupting): I’ve talked some to friends but never my parents.
Interviewer: Would you like to talk to your parents?
Child 2: Yes, I’d rather talk to them but I don’t want to bother them if they’re having a good day. It’s best to forget about it. (The rest of the group agreed.)

On the other hand, many of the parents told us that they would like to discuss their children’s concerns but were emotionally unable to. As one of the parents said, “How can we talk with our children about their fears and memories if we can’t even deal with our own?”

The Globalization of Eurocentric Trauma Discourse
On the surface, our findings suggest that parents in war zones need help coping with their war-related distress so that they, in turn, can support their children and restore the balance of give-and-take in their families. The Bosnian parents in our study, however, helped us to appreciate that Western-based models of intervention for war-exposed groups emphasizing the stigmatizing diagnosis of posttraumatic stress disorder and its treatment via processing of memories with professional helpers may not be appropriate in their culture. Rather, to the extent that processing is needed, they prefer that it occur in multi-family groups with a focus on current stressors and on their children’s attitudes toward and performance in school. They worry that because of the high unemployment and devastation of the economy in Bosnia following the war, their children regularly question the relevance of schooling. It became apparent that if unprocessed war memories emerged in the kind of multi-family support groups that the parents requested, then perhaps they should be addressed but not as a priority over other more immediate pressing issues.

Indeed, Derek Summerfield (1999) with the London-based Medical Foundation for the Care of Victims of Torture has recently critiqued assumptions of psychological trauma programs in war-affected regions, especially in Bosnia and Rwanda. Sponsored by UNICEF, WHO, European Community Humanitarian Office, U.S. Agency for International Development and other nongovernmental organizations, these Eurocentric and unevaluated programs often ignore the traditions, meaning systems, priorities, and capabilities of indigenous war survivors. Rather, as Summerfield argues, posttraumatic stress disorder is vastly over-diagnosed reflecting a “reframing of the understandable suffering of war as a technical problem to which short-term technical solutions like counseling are applicable (p. 1449).” War populations would be better served in Summerfield’s opinion if their self-defined needs, devastated communities, and pressing concerns about rights and justice were the cornerstone of humanitarian efforts.
Directions for Future Research

An important implication of Summerfield’s compelling critique for family psychologists interested in scholarship and research in the area of war trauma and traumatology generally is that we must consider not only family context but also the indigenous psychology of the cultural groups in which families reside. Such a perspective promises to help us better develop and investigate both etic (generalizable) and emic (culturally specific) aspects of our family psychologies (Berry, Poortinga, Segall, & Dasen, 1992; Summerfield, 1999).

We also recommend that family psychological research in this area focus not only on the *pathogenesis* but also the *salutogenesis* of traumatic stress and other sequelae of war exposure. The limited research on the family psychology of trauma has focused largely on the former, that is, the development and course of posttraumatic stress and other conditions beginning premorbidly. Salutogenesis—a term coined by Antonovsky (1984)—refers to the natural healing or recovery process. What are naturally occurring family processes that help children recover and possibly even grow psychologically from traumatic experiences?

In view of the family-oriented trauma work of Charles Figley (1989, 1998) in the U.S. and others (e.g., Barnes, 1998), it appears that one way that families help is simply by detecting children’s trauma-related behavioral changes (e.g., an increase in violent play themes, stomachaches, clingingness, nightmares, daydreaming, unusual behaviors, hypervigilance, eating or sleeping disturbances). Relatedly, family members help children address the cause of their stress in a manner congruous with the individual needs, culture, developmental level, and style of the child.

At a structural level, families who help their children cope with trauma appear to create a safe, trustworthy, and cohesive environment which is conducive to the sharing of private and distressing thoughts and feelings. Some children may take months or even years to process fully their traumatic experiences. Knowing that their families will be available to them when they are ready to process issues may be healing in itself. Another facet of a safe family environment are the routines, rituals, and traditions that the family continues to practice in spite of the trauma. These practices assist traumatized children in regaining a sense of control.

Family members also help each other make sense of what happened and develop alternative ways of viewing the traumatic event—by developing a “healing theory” as Charles Figley characterizes this process. For example, the family might conclude that the trauma “made us more aware of how other victims feel.” In addition, the crisis is often used by parents as an opportunity to teach their children lifelong coping skills and new
perspectives, such as learning to cope with worries and fears by writing or talking about them.

Many of these observations about salutogenic family processes were derived via clinical work and merit further empirical study. In keeping with considerations discussed earlier, their generalizability to different families within and across cultures also must be investigated. Further research along these lines will hopefully contribute to our developing better and more comprehensive models for understanding, treating, and preventing psychosocial problems in children and families exposed to war and other traumas.

Conclusions
As family psychologists and world citizens, it is clear that the implications of modern warfare and global terrorism for family process and child development deserve our urgent and systematic attention. We must also ask ourselves how we can protect children’s right to peace. Graca Machel, who authored the U.N. report, “The Impact of Armed Conflict on Children,” observes that the “unregulated terror and violence” to which children around the world are now regularly exposed “speaks of deliberate victimization.” She concludes, “There are few further depths to which humanity can sink.”

References
Families and personal development in times of war. Symposium conducted at the meeting of the International Academy of Family Psychology, Heidelberg, Germany.


APA Guidelines for Building Resilience in a Time of War

Washington, D.C.
March 19, 2003

The American Psychological Association (APA) announced recently that it is offering materials free to the public that can help people build resilience in time of war. The resilience materials are an outgrowth of APA’s successful Road to Resilience campaign that was launched in response to September 11, 2001. More than 78,000 Road to Resilience brochures have been requested since that time, along with more than 1,300 “toolkits” that practicing psychologists who are members of APA use to help their clients and communities build resilience skills.

Unlike one-time traumas, war requires its own kind of resilience because we don’t know when a war will end, and – especially in this war when terrorism has brought war closer to home than ever before. The materials include brochures aimed at consumers, parents and teachers of very young children, of elementary school children, of middle school children, and of high-schoolers.

Some of the tips include:

• Maintain a daily routine.
• Keeping up your daily routine of work, errands, household chores and hobbies provides you with a feeling of stability when the world around you seems chaotic.
• Take care of yourself.
• Make time to eat properly, exercise, and rest. Schedule time to do things you enjoy such as hobbies and social activities. Caring for yourself and even having fun will help you stay balanced and enable you to better deal with stressful times.
• Make connections. Keep in touch with family, friends and others. Connecting with people provides social support and strengthens resilience.
• Give yourself a “news break”. Be sure to control the amount of time you and your family spend watching and reading war-related news coverage. Perhaps limit your news intake to no more than one hour a day. It’s all right to turn off the TV or radio and allow yourself to focus on non-war-related things.
• Have a plan. Having an emergency plan in place will make you feel in control and prepared for the unexpected. Establish a clear plan for how you, your family and friends will respond and connect in the event of a crisis.
• Have a family or neighborhood meeting to talk about who to call in emergencies, or designate a place to meet if you can’t reach someone by phone. Make a plan for your pets and a list of items you will need to take in an emergency.
• We’ve been hearing about the items we need to stockpile in our emergency kit. The skills of resilience should be in your psychological toolkit to help you bounce back in a time of war.

The materials will soon be available in print by calling toll free 1-800-964-2000, and are available now for free download at www.helping.apa.org.

The Transformational Power of Film
Using Movies in Therapy

Birgit Wolz, Ph.D., MFT

Since I have been working with my clients’ responses to movies as a therapeutic modality, they often tell me that they came away from a theater or TV screen filled with emotions, insights and inspiration. In my work with individuals, couples and groups, I’ve found that having clients watch certain films with conscious awareness has helped them reflect on their inner process — their struggles as well as accomplishments.

My own connection with cinematherapy began during a seminar about using metaphors from movies to understand emotional issues. I became inspired to learn more about the impact of films on the psyche and their use to support the therapeutic process.

In cinematherapy, clients are guided to use the psychological effects of film imagery, plot, music, etc. for insight, inspiration, emotional release or
relief and natural change. This therapeutic modality is an innovative method based on traditional therapeutic principles, and on bibliotherapy, which has been practiced since the 1930s. Before I explain this further I want to mention a couple of clinical examples.

**Case Examples**

In one case, a woman I’ll call “Fran” had made much progress in our work. Her depression had lifted and we started discussing terminating her therapy. During that time she arrived at one session very distraught. Unexpectedly she had been laid off from her job, the company was downsizing. Fran didn’t really like her job but was very attached to her co-workers. Leaving her workplace in an upset state of mind, she caused an auto accident in which she was slightly injured. These unfortunate events triggered a lot of self-criticism and grief about disconnecting from her co-workers as well as about her injury.

First we did some cognitive restructuring of Fran’s negative beliefs about herself that were reactivated by these events. When I explained the grief process, Fran could not imagine ever “coming out at the other end”. I suggested she watch the movie *Frida* and gave her specific guidelines (see www.cinematherapy.com). *Frida* shows how the Mexican painter Frida Kahlo faced many big challenges with strength and courage throughout her life. The artist was able to let her pain transform her as it led her to create outstanding art, which in return helped her cope. I encouraged Fran to “step inside Frida’s shoes” when she watched the film at home.

The film touched Fran deeply and allowed her to open up to new possibilities for herself. Aided by the emotional impact of the movie and the “modeling” provided by the character of Frida, I guided Fran through the following four stages of understanding and integration:

1. The seed for strength and hope lies in the acceptance of her limitations;
2. Tiny acts of courage can start to put her back in control of her life;
3. Responding with determination to each element in the struggle nourishes hope;
4. Out of all this grows new strength, a new sense of self, new compassion, and a new sense of a strong purpose in her life.

As a result of this work Fran moved through her grief process, gained her confidence back and rediscovered her passion for photography. She had been trained in this field but was never able to apply it. By the time her emotional and physical wounds were healed she found work that allowed her to integrate her skills in photography.
A second case involves a client I’ll call “Terry”. She came to her first session presenting low self-esteem as her main problem. After we talked about her upbringing in a highly critical environment we started working with her “Inner Critic” and cognitive distortions. Terry was so identified with these internalized messages that it was hard for her to fully see the distortions. She could not imagine a different perspective. At this point I suggested she watch the movie *My Big Fat Greek Wedding*. In this comedy the main character Toula transforms herself from an “ugly duckling” into an attractive, successful woman.

Besides my general guidelines on how to watch a film with conscious awareness, I also provided Terry with the following specific questions to answer after watching the film:

1. Focus on the movie with conscious awareness;  
2. Ask yourself whether the perspective of Toula, who thought negatively about herself, was distorted;  
3. Can you name any of the cognitive distortions?;  
4. How was this character able to let go of self-doubts?  
5. Imagine yourself as Toula when she lets go of her negative beliefs;  
6. What thoughts about yourself are dropping away? How does this feel? How do you see yourself and your environment now?

As Terry followed this process and stayed with the questions during our next sessions she was able to understand and consequently disidentify from her negative self-image.

*Theoretical Context*

These case examples show that I draw from multiple theoretical psychotherapeutic orientations as I integrate the use of film in my work. Watching a movie with conscious awareness can be similar to experiencing a guided visualization. The therapeutic effect and the theoretical basis for both modalities are therefore closely related. In fact, the therapeutic effect of films can be explained by different theories.

Since films are metaphors, the depth psychologist can utilize movies in therapy similar to the way in which he might use stories, myths, fables, or dreams. Identifying with a character can help clients develop ego strength as they recall forgotten inner resources. As clients identify with a film character they see their own situation unfold. This brings to life issues they previously wanted to avoid. Understanding reactions to characters that are “different” and unlikable can guide the client to discover in the “shadow” of their own psyche their true self and their potential.

In cognitive therapy movies are used in combination with the established modalities of this field. Films can fulfill the role of a supportive device for
understanding maladaptive core beliefs and for cognitive restructuring. The cognitive effect can be explained through recent theories of learning and creativity. They suggest that we have seven “intelligences”, which can be engaged by watching movies: the logical (plot), the linguistic (dialogs), the visual-spatial (pictures, colors, symbols), the musical (sounds and music), the interpersonal (storytelling), the kinesthetic (moving), and the intrapsychic (inner guidance).

Behavior modification treatment can be supported by watching movies where a character demonstrates courage in face of a challenge. The client becomes motivated to copy the behavior seen on screen and is more open to successfully undergo treatments such as “exposure with response prevention”.

Systems oriented therapists can find support for their approach by choosing movies that communicate unfamiliar concepts of family systems and their dynamics as well as communication patterns.

Guidelines

- Start with a film that your client has already seen and that supports your treatment goal. If no appropriate movie comes to mind use the literature, which offers movie recommendations for specific psychological problems.
- Clarify your intent when assigning a film in which a client might mistake the role identification.
- Discuss positive and negative reactions to film. Use material according to your theoretical orientation. Some evocative questions are:
  - How did the movie touch you, positively or negatively?
  - If the film had a unique message for you, what was it?
  - What new ideas for new behaviors did the movie introduce?
  - Did you experience something that connected you with health and wholeness, your inner wisdom or higher self as you watched the film?
  - What other films can you identify that might take the discussion a step further?

More detailed guidelines and a bibliography can be found on the web at www.cinematherapy.com

Birgit Wolz, Ph.D., MFT has a private practice located in Oakland, CA. where she facilitates cinematherapy groups. Currently, she is writing “The Cinematherapy Workbook: A Self-Help Guide to Using Movies for Healing and Growth”. Dr. Wolz can be reached at phone (510)336-0915 or e-mail bwolz@earthlink.net (see also www.bwolz.com).
International Roving Reporter

Florence W. Kaslow, Ph.D.
Past President - IAFP

We have two exciting developments to report in this issue. First, the next conference of the International Family Therapy Association will be held May 8-10 in Bled, Slovenia, in conjunction with the Slovene Society for Family Therapy. The theme is *Resisting Abuse: From Shame to Empowerment*. The conference will explore abuse in various contexts, including but not limited to: families, therapy, training, research, cultural and social systems.

The conference will feature plenary sessions and workshop presentations on the conference theme from many respected leaders in the field. Panels, poster sessions and papers will also be part of the proceedings, as well as presentations on a variety of other topics. Presenters and workshop leaders from around the world who have already confirmed their participation include: Yvonne Dolan (USA), Jill and David Scharff (USA), and Sjef de Vries (Netherlands).

Bled, nestled in the foothills of the Eastern slopes of the Alps, is considered one of the most beautiful cities in the world, and boasts excellent hotels, restaurants, and great entertainment, all at affordable prices. The hospitality and warmth of the Slovenian people is well-known. With two million people, the Republic of Slovenia is third the size of Switzerland. Because of its unique geographical location, it is a natural gateway between Europe, the Adriatic and the Balkan peninsula. It is a wonderful place to hold an international family therapy congress since the city is close for both Western and Eastern Europeans and is easily accessible to other world cities. It can be reached by road from Trieste, Italy (180 km) or Klagenfurt, Austria (60 km). The international airport is the Ljubljana-Brnik Airport in the capitol and can be reached rather easily on flights from Frankfort and Munich.

The IFTA website, [www.ifta-familytherapy.org](http://www.ifta-familytherapy.org), contains the latest information on the International Family Therapy Conference in Bled. We believe this conference would be of interest to many IAFP members. Proposals for presentation will be accepted until 3/15/03. If interested in submitting, check this website regarding proposals, etc.

It also gives me pleasure to announce that I will be presenting, as part of the American Psychological Association’s Division of Family Psychology (#43) convention program in Toronto, an International Panel entitled...
Family Psychology Around the World. Participating with me on the panel will be:

- Dr. Natividad Dayan (Philippines). President-Elect of ICP; Director, Dayan’s Psychological Clinic (and Philippine representative to the IAFP Board.)
- Dr. Solly Dremen (Israel). Professor at Ben Gurion University.
- Dr. Eugenia Scabini (Italy). Dean, Faculty of Psychology, Catholic University in Milan. (Italian representative to the IAFP Board.)
- Dr. Jose Toro-Alfonso (Puerto Rico). Department of Psychology, University of Puerto Rico.

Each of the participants has been carefully selected based on their fine reputation and their contributions to research, theory development, teaching and practice in and about family psychology in their own countries. We hope to have a large turnout for this special presentation, and other family psychology events at the APA Convention.

And don’t forget to plan to be in Wales in 2006 for our next IAFP Conference!

Publications

The International Journal for the Advancement of Counselling publishes articles related to the theory, practice, research, training, supervision and issues in the field of counselling. Information about the journal may be found at: http://www.kluweronline.com/issn/0165-0653. The editor is Arthur M. Horne, and he invites manuscripts be submitted that are relevant to the field of counselling, including marriage, family, and intergenerational topics. The editor, a long-standing member of the International Academy for Family Psychology, welcomes questions and articles at: Ahorne@coe.uga.edu

The Finnish version of the Family System Test (FAST) by Thomas M. Gehring has been recently published by Psykologien Kustannus Oy (www.psykologienkustannus.fi/fast/).

The following FAST studies focus on transcultural issues and the influence of poverty on individual and family outcomes:

Käppler, C., Oswald, S. Teodoro, M., Marti, D. & Gehring, T.M. Family constructs of Brazilian children and adolescents living in different socio-economic environments (under review).


For further information about the FAST please visit www.fast-test.com or contact the test author (tmgehring@bluewin.ch).

Piero De Giacomo and Luciano L’Abate have recently published (Newport, CT, 2003) a new book by Praeger entitled Intimate Relationships and how to Improve them: Integration of Theoretical Models with Prevention and Psychotherapy.


Irena Sobotkova (national representative of Czech Republic) has recently published a book by Portal (Prague, 2001) entitled Family Psychology. The author is a university teacher and therapist. She presents methodological and research topics in the field of family psychology which is quite new in the Czech Republic. The book also focuses on practical problems and applications specific to one-parent and blended families, childless couples, delayed motherhood etc. The list of references includes both Czech and Anglo-American authors.

Dr Sandra Neil mentions 2 books she has published: Neil, S.E.S. & Silverberg, R.L.N. (1995). The Family Chessboard. ISBN 0 9587175 2 4; and
Both are published by the Satir Centre of Australia, Suite 2, 1051 A-B High Street, Armadale, Victoria 3143, Australia. Tel +61 3 9824 7755.
Recent Publications of the Centre for Family Studies and Research, Catholic University of Milan (Italy):


For further information please visit http://62.101.89.76/pls/unicatt/consultazione.mostra_pagina?bread=&id_pagina=8304 (English version!)
# Forthcoming Meetings

## Conference Program for the Third Munich Meeting on Family Psychology

| July 18 – 19 2003 | 9.00 - 10.00 | Opening Lecture  
Klaus A. Schneewind (University of Münich), |
|-----------------|-------------|------------------------------------------------|
| 10.00 - 11.00   |             | Invited Lecture: Young children in day care: consequences for development and family psychology  
(Liselotte Ahnert, Free University Berlin), |
| 11.00 - 11.30   |             | Coffee Break |
| 11.30 – 12.30   |             | Invited Lecture: Communication training with couples as prevention/treatment of relational difficulties  
(Franz Thurmaier, Münich) |
| 14.00 - 15.30   |             | Poster Session |
| 16.00 - 18.30   |             | Symposia |
| 16.00 - 18.00   |             | Symposium: Prevention approaches targeting children (Organizer: Johanna Graf, University of Munich) |
| 16.00 - 18.00   |             | Symposium: Couple relationships in longitudinal perspective  
(Organizer: Georg Felser, Hochschule Harz) |
| 16.00 - 18.30   |             | Lecture Group I: Couple relationships |
| 16.00 - 18.30   |             | Lecture group II: Family with adolescents |
| 16.00 - 18.30   |             | Lecture group III: Intergenerational relationships and kinship |
| 18.00 - 18.30   |             | Martin Schmidt (University of Münich) |
| 20.00           |             | Social Gettogether (Rolandseck, Ecke Viktoria/Unertlstr.) |

**Saturday, 19.07.2003**

| 09.00 - 11.00   |             | Symposia  
Symposium: Parent targeted prevention for promoting child development (Organizer: Friedrich Lösel, University of Erlangen-Nürnberg) |
<p>| 09.00 - 11.00   |             | Symposium: Families with adolescents in the network of main developmental contexts: Multigenerational linkages, peers, romantic partners, school, and employment (Organizer: Sabine Walper, University of Munich) |
| 09.00 - 10.30   |             | Lecture group IV: Family stress and coping |
| 09.00 - 10.30   |             | Lecture group V: Planning parenthood and support at the entry into parenthood |
| 09.00 - 11.00   |             | Lecture group VI: Family diagnostics |
| 11.00 - 11.30   |             | Coffee Break |</p>
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| 11.30 - 12.30 | Invited Lecture: Couple’s Meaning and Despair: a development approach to partner therapy  
               Gil Noam (Harvard University), Lecture hall 2U01 |
| 12.30 - 14.00 | Lunch break                                                           |
| 14.00 - 16.00 | Symposium: Problem children and adolescence in the family context (Organizer: Christoph Käppler, University of Zürich) |
| 14.00 - 16.00 | Symposium: Prevention in the context of couple relationships (Organizer: Guy Bodenmann, University of Fribourg) |
| 14.00 - 15.30 | Lecture group VII: Entry into parenthood in longitudinal perspective |
| 14.00 - 15.30 | Lecture groups VIII: Family and work                                 |
| 14.00 - 15.00 | Lecture group IX: Demonstration of new prevention approaches: the Munich Group |
| 16.00 - 16.30 | Pause                                                                 |
| 16.30 - 17.30 | Invited Lecture: Methodological aspects in analysing the prevention and treatment of relational difficulties  
               Günter Schiepek (University of Bamberg) Lecture hall 2U01 |
| 17.30 - 18.00 | Awarding the Poster Prize and conference closing                     
               Klaus A. Schneewind Lecture hall 2U01 |

Further information: see http://www.mtfp.de

August 11th – 14th, 2003, Toronto, Canada, 61st Annual Convention of International Council of Psychologists. For information contact President Elect Dr Edith Grotberg (USA) on egrot@erols.com

September 25-26, 2003, University of Fribourg (CH), International Meeting of the Réseau européen des Instituts de Famille REDIF: Divorce: médiation, audition, parentalité (http://www.unifr.ch/iff/redif/).

New national representative for Japan

The IAFP Board is happy to announce that Prof. Kenji Kameguchi accepted to represent IAFP at the national level in Japan. Having previously contributed to IAFP as treasurer and vice-president he belongs to the most experienced members of IAFP.

Last Not Least

IAFP has expanded during the past years by attracting new members from countries which have previously not been involved. Our next conference which is going to be held 2006 will help to build an even closer network. In the meanwhile, we invite you to make use of the options provided by IAFP to communicate with other members. If you are searching for information while planning your research or if you are looking for teaching materials, you may have your questions mailed around to other members. Just contact us by email at info@iafpsy.org and we will try to be as helpful as we can.

Of course, this requires up-to-date information on email-addresses. So please let us know if your Email address changed. You may send your new Email address to secretary@iafpsy.org and/or to your national representative. Addresses of all Board members and national representatives are available at our website: http://www.iafpsy.org If any of your colleagues are interested in IAFP, please invite them to visit us there.

With very best wishes for a most enjoyable summer!

Sabine Walper
(President of IAFP)
IAFP Board Members and National Representatives

IAFP Board

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