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## THEMATIC REVIEW OF FAMILY THERAPY JOURNALS 2013

Alan Carr

Clanwilliam Institute and University College Dublin

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**Correspondence address:** Alan Carr, Professor of Clinical Psychology, School of Psychology, Newman Building, University College Dublin, Belfield, Dublin 4, Ireland. E. alan.carr@ucd.ie. P. +353-1-716-8740

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## **ABSTRACT**

In this paper the contents of the principal English-language family therapy journals, and key family therapy papers published in other journals in 2013 are reviewed under these headings: models of family therapy, developments in family therapy practice, couple therapy, training, diversity, international developments, research and DSM-5.

## **PRACTITIONER POINTS**

- Evidence-based models with recent adaptations may be helpful for an increasing range of populations.
- Developments in research and practice support the value of father involvement in systemic therapy, conducting family therapy in medical settings and using family therapy to treat adolescent eating disorders.
- The integration of mindfulness into couple therapy, and new approaches to addressing infidelity are important developments to consider in treating couples.

## INTRODUCTION

In 2013 many developments in a range of areas were covered in family therapy journals. In this review, reference will be made to particularly significant papers and special issues of journals in the areas of models of family therapy, developments in family therapy practice, couple therapy, training, diversity, International developments, research and DSM-5. A small number of key papers on systemic practice from non-family therapy journals will also be considered.

## MODELS OF FAMILY THERAPY

There were a number of significant papers on models of family therapy, notably 'second generation' empirically supported models of family therapy, as well as those without a well developed evidence-base. Papers on ecosystemic structural family therapy, functional family therapy, multisystemic therapy, multidimensional family therapy, and narrative and solution-focused therapies deserve specific mention. Some reviewed past achievements and others were concerned with recent developments. There was also a paper in a non-family therapy journal - *Behavioural Sciences and the Law* – in which Zagar et al. (2013) highlighted the effectiveness of functional family therapy, multi-systemic therapy, and multi-dimensional foster care in the treatment of delinquency. They argued that these empirically-supported family therapy models are effective because they ameliorate risk factors for conduct problems and so should be used to prevent as well as treat delinquency.

### **Ecosystemic structural family therapy**

Ecosystemic structural family therapy was developed at the Philadelphia Child Guidance Clinic. It is one of a range of second generation family therapy models based on Minuchin's (1974) structural family therapy. Other second generation models include multisystemic

therapy (Henggeler et al., 2009), multidimensional family therapy (Liddle et al., 2010), brief strategic family therapy (Robbins et al., 2010), attachment based family therapy (Diamond et al., 2014) and the biobehavioural family model. In *Contemporary Family Therapy* Lindblad-Goldberg and Northey (2013) presented an overview of ecosystemic structural family therapy which was developed to help families of children with emotional and behavioural problems at the risk of out-of-home placement. A distinctive feature of this approach is that it includes attachment theory as a central organizing principle. Ecosystemic structural family therapy is based on the fundamental assumption that child, parental, and marital functioning are inextricably linked to their relational environment. Five interrelated constructs guide therapists in their understanding of clinical problems: family structure; family and individual emotional regulation; individual differences in historical, biological, cultural, and developmental factors; affective proximity; and family development. A practice-based evaluation dating back to the 1980s involving over 4,000 families at 39 different sites showed that ecosystemic structural family therapy reduced out-of-home placement from 80 to 20%.

### **Functional family therapy**

In a study evaluating the effectiveness of functional family therapy for adult offenders, Datchi and Sexton (2013) found that compared with routine probation services, functional family therapy led to significant improvements in individual and relational functioning and fewer symptoms of distress, less family conflict, and higher levels of family cohesion and organization. For example, mean distress scores dropped from 55 to 47 and mean family cohesion scores increased from 45 to 56. This study, the first of its kind, showed that functional family therapy, which was originally developed to treat juvenile delinquents, may also be adapted to treat adult offenders and reduce risk factors associated with reoffending. Families attended an average of 8 sessions in Datchi and Sexton's (2013) study and

progressed through the stages of engagement, behaviour change, and generalization. Whereas with juvenile delinquency the focus in functional family therapy is on improving parental supervision and age-appropriate discipline, in the treatment of adult offenders the emphasis was on aspects of the familial environment which have been linked to the risk of re-offending, especially marital discord, familial conflict, poor communication and ineffective problem-solving. It was expected that better family adjustment would increase the likelihood of adult offenders' participation in the family's prosocial activities as well as prosocial involvement in the community.

### **Multisystemic therapy**

Letourneau et al., (2013) evaluated the effectiveness of multisystemic therapy in treating adolescents who had sexually offended. Most participants were from ethnic minorities. This was an effectiveness study where therapy was offered by therapists in a community setting. In contrast, many previous evaluations of multisystemic therapy have been efficacy studies where therapy was offered by graduate students in university settings. Letourneau et al., (2013) found that two years after treatment multisystemic therapy was more effective than group-based cognitive behaviour therapy in terms of reducing out-of-home placement, problematic sexual behaviours and self-reported delinquency. For example, parental ratings of adolescents' deviant sexual interests at two years were significantly lower in cases treated with multisystemic therapy compared with treatment as usual (1.7 v. 2.3). In this trial four therapists with caseloads of four to six families and a supervisor comprised the multisystemic therapy team. Therapy spanned about 7 months, was conducted primarily in families' homes, and families had 24-hr/7 days-a-week access to their therapist or another team member. Treatment plans were based on assessment of adolescents' families and social networks and incorporated well-validated treatment strategies to address factors associated with

deviant sexual behaviour and other problems. Treatment addressed denial of the offense, safety planning to minimize risk of reoffending, and promotion of age-appropriate social relationships and activities. Caregiver participation was a critical component of all treatment plans, and improvement in parenting was found to mediate favourable outcomes for adolescents. In contrast, cognitive-behaviour therapy was delivered to groups of eight to 10 adolescents during weekly one-hour treatment sessions for a about a year. Treatment targeted deviant sexual interests, victim empathy, cognitive distortions, and relapse prevention. It was augmented with treatment for comorbid problems such as substance use and family or individual sessions as required. This study highlighted the value of an evidence-based approach to family therapy in the treatment of adolescent sexual offending.

Schaeffer et al. (2013) described a pilot study comparing an adaptation of multisystemic therapy and routine community treatment of families in the child welfare system with co-occurring problems of child abuse and parental substance misuse. In the two-year period following referral, compared with routine treatment, multisystemic therapy was far more effective in ameliorating both of these problems. For children, multisystemic therapy also led to fewer days in out-of-home placements and better psychological adjustment. This adaptation of multisystemic therapy, which was called Building Stronger Families, integrated standard multisystemic therapy with modules that focused on the assessment and disruption of family behaviour patterns which maintain child abuse, and a behavioural approach to the treatment of substance misuse.

### **Multidimensional family therapy**

Rigter et al (2013) presented the results of the INternational CAnnabis Need for Treatment (INCANT) European trial of multidimensional family therapy for adolescent cannabis use. The trial involved the treatment of 450 cases in Belgium, France, Germany, the Netherlands,

and Switzerland. Compared to individual psychotherapy, multidimensional family therapy led to greater treatment retention (90% v 40%), a greater reduction in cannabis dependence (38% v. 52%) and a greater reduction in cannabis use among adolescents with more severe substance use problems a year following intake. This was the first European trial of multidimensional family therapy, a programme which was developed in the US. Despite the different cultural context of the INCANT trial, and the need to translate the model into multiple languages, Rowe et al. (2013) found that multidimensional family therapy was implemented with an acceptable degree of fidelity.

### **Narrative and solution-focused therapies**

There was a special section which included four papers in the *Journal of Systemic Therapies* (volume 32, Issue 2) on developments in narrative therapy and solution focused therapy since the first Therapeutic Conversations Conference in Tusla, 20 years ago (Chang, 2013; Chang & Nylund, 2013; Chang et al., 2013; Strong & Gale, 2013; Thomas, 2013). While there was a recognition in these papers of the refinement and increased differentiation of narrative and solution-focused approaches, an emerging hybrid of narrative and solution-focused therapy was also identified. These hybrid practices are grounded in social-constructionism. Hybrid models capitalize upon the overlaps between the solution-focused practice of identifying and working with exceptions and the narrative practice of externalizing problems and elaborating narratives about non-problem episodes with unique outcomes. The solution-focused practices of using miracle and scaling questions to identify therapeutic goals and movement towards these fit well with the narrative practice of re-authoring lives. The development of a hybrid of narrative and solution-focused therapy is situated within the current climate of evidence-based practice, the recovery model of mental health, positive psychology, strength-based approaches, and the recent emphasis within the psychotherapy

field generally on resilience.

## **DEVELOPMENTS IN FAMILY THERAPY PRACTICE**

Strengthening families, father involvement, family therapy in medical settings and the family therapy for adolescent eating disorders were among the more salient developments in family therapy practice considered in family therapy journals in 2013.

### **Strengthening families**

There was a special section in *Family Process* on strengthening families with papers on a family therapy programme for families of depressed Latino mothers (Valdez, Abegglen et al., 2013; Valdez, Padilla et al., 2013), the Stepping Stones Triple P parenting programme for families of children with disabilities (Roux et al. 2013), a review of the Nurtured Heart Approach to parenting children with behaviour problems (Hektner et al., 2013), a study of predictors of fathers' enrolment in family interventions (Wong et al., 2013), an evaluation of an intensive couple relationship education program for fragile families (Wilde and Doherty, 2013), a study of group cohesion in relationship education programmes (Owen et al., 2013), and a marriage enhancement programme for families affected by imprisonment (Shamblen et al., 2013). From these papers is clear that innovative systemic interventions have an important role to play in strengthening vulnerable families.

### **Father involvement**

The importance of the involvement of fathers in family life and therapy was addressed in a range of papers. There were two studies of father involvement of interest to family therapists in the *Journal of Family Psychology*. In meta-analytic review of 52 studies, Adamsons et al. (2013) found that in families of separated couples, children showed better social and emotional well-being, academic achievement, and behavioural adjustment where non-resident fathers had positive relationships with their children and were more involved in child-related activities. However, the amount of father-child contact and financial provision were

not associated with child well-being.

Bagner (2014) evaluated the effects of Parent–Child Interaction Therapy, a family-based parent training programme, in a study of 44 families of young children with externalizing behaviour problems and developmental delay. He found that two-parent families were less likely to drop out of Parent–Child Interaction Therapy than single-mother families. Among families who completed treatment, the best outcome occurred where fathers participated in therapy. In these families children had lower levels of parent-reported externalizing behaviour problems than children from single-mother families and children from two-parent families in which the father did not participate in treatment. These findings highlight the importance of involving fathers in family-based parent training, particularly when working with children with developmental delays.

There was a special section on fathers in family therapy in the *Australian and New Zealand Journal of Family Therapy* (Larner, 2013) with papers on engaging fathers of violent adolescents in therapy (Andolfi, 2013) and wraparound services (Shailer et al., 2013). Andolfi (2013) outlined an experiential approach for working with violent adolescents in family therapy influenced by the pioneer work of Satir and Whitaker. In this approach the therapist explores adolescent development in the family and social context; establishes a therapeutic alliance through understanding the interpersonal context for violent behaviour, and re-directs negative actions into positive connections with family members. Shailer et al.'s (2013) described wraparound services in New Zealand. Wraparound is an intensive individualised coordination and care planning process for young people with mental health problems and their families. Father involvement is central to this approach.

### **Family therapy in medical settings**

There was a special issue of the *Journal of Family Therapy* on family therapy in medical

contexts with papers on medical family therapy (Marlowe, 2013), the possible contributions that the understanding of reflexivity in systemic thinking can make to medical practice (Ingrassia, 2013), family therapy and inpatient psychiatry (Haun et al., 2013; Stanbridge et al., 2013), and a social relational critique of the biomedical definition and treatment of ADHD (Wilson, 2013) with a commentary (Thapar et al., 2013).

In the *American Journal of Family Therapy* there was a paper on systemic intervention for medically unexplained symptoms in children and adolescents (Kozłowska et al., 2013).

In the *Journal of Family Psychology* Van Ryzin and Nowicka (2013) described a long-term follow-up study of the effects of the family check-up on obesity in late adolescence. The family check-up includes an initial family interview, a family assessment, and a feedback session that emphasizes motivation to improve parenting so as to prevent behavioural problems. The focus is on parenting behaviours such as knowledge of children's whereabouts and activities, involvement in children's activities, and effective parent-child communication. Van Ryzin and Nowicka (2013) found that the family check-up conducted in early adolescence led to reductions in obesity in later adolescence, and these benefits occurred because the family check-up improved parent-adolescent relationships and eating attitudes. This was noteworthy because the family check-up was developed to address adolescent behavioural problems, not unhealthy eating habits.

In *Family Systems and Health* there was a paper by Kichler et al. (2013) on the Kicking in Diabetes Support (KIDS) project which is a family intervention programme for adolescents with type 1 diabetes. KIDS involves a series of 6 group sessions for adolescents and parents. Separate group meetings for parents and adolescents are conducted for the first part of each session. In the second part of each session a multifamily conjoint meeting involving parents and adolescents is convened. Sessions address developmental aspects of diabetes management during adolescence, parent involvement and communication, goal

setting, problem solving, behavioural contingency contracting, and school and peer issues. In a study of 30 families, Kichler et al. (2013) found significant improvements in adolescents' diabetes-specific quality of life four months after the KIDS programme.

There were two papers on adult diabetes in *Contemporary Family Therapy*. In a survey of over 800 disadvantaged primary care patients, Lynch et al. (2013) found that individuals with higher rates of childhood trauma were more likely to be diagnosed with type 2 diabetes in adulthood. In a comprehensive review, Lister & Wilson (2013) found that the adverse effect of diabetes on well-being, sexual functioning and relationship satisfaction, was moderated by disease severity, quality of disease management, and the level of support available to couples from each other and their social networks. Couple-based treatment improved adherence to illness management regimes.

### **Family therapy for adolescent eating disorders**

There was a special issue of the *Journal of Family Therapy* (volume 35, issue supplement 1) on adolescent eating disorders with a review of the evidence-base (Downs & Blow, 2013) and papers on the therapeutic alliance (LoTempio et al., 2013), multiple family therapy (Hollesen et al., 2013; Mehl et al., 2013), a family admission programme (Wallis et al., 2013) and a day hospital programme (Girz et al., 2013). These papers highlight the value of family therapy in the treatment of adolescent eating disorders.

## **COUPLE THERAPY**

A range of issues relevant to the practice of couple therapy was covered in systemic therapy journals in 2013 including developments in research and practice, the application of emotionally focused couple therapy in a range of contexts, mindfulness and couple therapy, sex in later life and infidelity.

There were special issues of the *Journal of Family Therapy* (volume 35, issue 3) and *Family Process* (volume 52, issue 1) on couple therapy. The special issues of the *Journal of Family Therapy* presented new developments in evidence-based couple therapy. In a study of systemic couple therapy for depression in the Finnish public health system, Seikkula et al. (2013) found that at two years follow-up, systemic couple therapy led to greater improvement in depressive symptoms and adjustment than routine individually based multidisciplinary mental health treatment. In a trial of behavioural couple therapy for alcohol problems, Walitzer et al. (2013) found that both behavioural couple therapy and regular alcohol counselling with partner involvement ameliorated communication problems more than individual therapy. Babcock et al., (2013) conducted a component analysis study of Gottman's Art and Science of Love two-day workshop for distressed couples, and concluded that the combination of friendship enhancement and conflict management components of this intervention led to greater increases in marital satisfaction, friendship and conflict management than either component alone, especially for males. McKinnon and Greenberg (2013) found that expressing vulnerable emotions in emotionally focused led to greater relationship improvements.

In the special issue of *Family Process* on couple therapy there were papers on power (Knudson-Martin, 2013), disrupting pursuer-distancer cycle in distressed couples (Wile, 2013), sculpting impasses in couple therapy (Papp et al., 2013), process research in EFCT (Goldman & Greenberg, 2013; Greenman and Johnson, 2013), couple therapy where a partner has a chronic illness (Weingarten, 2013), narrative couple therapy (Dickerson, 2013), behavioural couple therapy (Gurman, 2013) and web-based integrative behavioural couple therapy (Doss et al., 2013). Of these, the late Alan Gurman's (2013) paper is particularly informative. It traces the emergence of modern integrative behavioural couple therapy, from early simplistic behavioural approaches, and shows how this modern approach (which

integrates useful insights from almost all other approaches to couple therapy) developed in response to the results of empirical research, clinical practice, and theoretical developments in broad field of couple therapy. Couple therapy also featured in a number of other journals, with contributions on emotionally focused couple therapy, mindfulness, sex in later life, and infidelity.

### **Emotionally focused couple therapy**

There were many papers in a range of journals on emotionally focused couple therapy on issues such as its use in the treatment of survivors of sexual abuse (Dalton, 2013), generalized anxiety disorder (Priest, 2013), distress associated with terminal illness (Tie & Poulsen, 2013), and self-harm (Schade, 2013). There were also papers on processes within emotionally focused couple therapy such as forgiveness and reconciliation (Zuccarini et al., 2013) and enactments (Tilley and Palmer, 2013). A very useful overview of attachment theory and research relevant to couple and family therapy was provided by Seedall and Wampler (2013).

### **Mindfulness in couple therapy**

In *Couple and Family Psychology* there was a paper by Atkinson (2013) on the integration of mindfulness training into couple therapy, and in particular into Atkinson's pragmatic / experiential therapy for couples. This model integrates empirical findings about factors that are predictive of relationship success with mindfulness and other methods for increasing emotional and social intelligence. Clients regularly practice compassion and loving-kindness meditation to help them cultivate intimacy-related feelings. They also learn to skilfully navigate conflicts by postponing deliberating about these until they have calmed upset feelings through the process of mindful attention to physical sensations. As a stepping stone

to increasing tolerance for negative affect through mindful awareness, clients are invited to practice vivid re-experiencing of couple conflict and listening to prerecorded criticisms from their partner. This intervention is particularly helpful for clients unable to give mindful attention to strong negative emotions without becoming distracted by distress-maintaining thoughts during couple conflict.

### **Sex in later life**

In the *Journal of Family Psychotherapy* McCarthy et al. (2013) presented a psychobiosocial model for understanding couple sexuality later life. They highlighted the importance of positive, realistic expectations in facilitating desire, pleasure, eroticism, and satisfaction in older couples. As couples age, levels of sexual satisfaction may remain high as long as the focus is on being an intimate, erotic team and abandoning the need for perfect sexual performance. The principal positive features of aging sexuality is that partners' relationship involves a longstanding attachment; they need each other deeply; and so sexuality tends to be more congruent and genuine.

### **Infidelity**

There were a number of papers on couple therapy in cases of infidelity, two of which are particularly noteworthy (McCarthy and Wald, 2013; Williams and Knudson-Martin, 2013). In the *Journal of Marital and Family Therapy* Williams and Knudson-Martin (2013) reviewed gender and power in the systemic treatment of infidelity. They identified five conditions that limit attention to gender and power: (1) assuming partners are equal, (2) reframing infidelity as a relationship problem, (3) limiting discussion of societal context of infidelity, (4) not considering how societal gender and power patterns affect couples' relationships, and (5) limiting discussion of ethics on how to position around infidelity.

In the *Journal of Sex and Marital Therapy* McCarthy and Wald (2013) provided a clinically detailed guide for assessing and treating couples in which one partner has had an extramarital affair. The assessment process consists of a conjoint first session, individual sessions with each spouse, and a couple feedback session. Therapy itself combines both individual and couple sessions. The emphasis is placed on dealing with affair-related issues as a challenge for the couple, with a dual focus on developing a shared understanding of the affair so it does not control the relationship and rebuilding a trusting, intimate and sexual bond. There are three phases to therapy, the first of which is to help partners process the meaning of the affair in a serious, congruent manner while engaging in self-care so their lives are not destabilized. The second phase is to help each partner make sense of the affair. The majority of marriages survive an affair, and for those that do the third phase is to solidify emotional, relational, and sexual gains and develop an individualized relapse prevention plan.

## TRAINING

In the *Journal of Marital and Family Therapy* there was an important paper on core competencies of social constructionist supervisors (Sutherland, Fine and Ashbourne, 2013). These competencies include reflexivity and attention to power, fostering polyphony and generativity, collaborative stance, and focus on client resourcefulness. There were also two papers on how therapists informed by social constructionist and postmodern ideas enact persistence and use their power and influence in family therapy (Sutherland, Turner and Dienhart, 2013; Sutherland, Dienhart and Turner, 2013). Sessions by Karl Tomm (systemic therapy), Michael White (narrative therapy), Harlene Anderson (collaborative language systems approach), and Bill O'Hanlon (solution-oriented therapy) were examined for persistence practices.

## DIVERSITY

In the *Journal of Feminist Family Therapy* there were a number of papers relevant to diversity. These included a position paper arguing that American Association for Marital and Family Therapy should advocate for same sex marriage (Bordoloi et al., 2013), a study of transgender client experiences of mental health services which highlighted the need for couple and family therapists to receive training in this area (Benson, 2013), and a study of family therapy students' experiences of lesbian, gay and bisexual affirmative training which found that students who received such training showed lower levels of biphobia. (Nova et al., 2013).

## INTERNATIONAL DEVELOPMENTS

There was a special issue of *Contemporary Family Therapy* on international developments with papers tracing the growth of family therapy in Europe (Borcsa et al., 2013), the UK (Stratton & Lask, 2013), Ireland (Carr, 2013), Germany (Retzlaff, 2013), Greece (Tseliou, 2013), Turkey (Arduman, 2013), Italy (Manfrida et al., 2013), Norway (Jensen, 2013), Portugal (Relvas et al., 2013), the Czech Republic (Skorunka & Hajna, 2013), Romania (Konya & Lonya, 2013), Poland (Jozefink et al., 2013), Australia (Moloney, 2013), South America (Herscovici et al., 2013), Canada (McLuckie et al., 2013), Taiwan (Chao & Huang, 2013), South Korea (Lee et al., 2013), Hong Kong (Wong & Ma, 2013) and China (Deng et al., 2013). This special issue of *Contemporary Family Therapy* highlights the international scope of the family therapy movement.

## RESEARCH

With regard to research, in 2013 there were noteworthy reviews of the evidence-base for family therapy, studies of the cost-effectiveness of systemic interventions, papers on family

assessment, and papers on a wide variety of research methods that may be useful in studying family therapy.

### **Reviews of the evidence-base**

There were two systematic review papers in *Family Process* supporting the effectiveness of systemic interventions for childhood internalizing and externalizing behaviour problems (von Sydow, 2013, Retzlaff et al., 2013). These two very important reviews (and a previous review of the effectiveness of systemic therapy for adult-focused problems (von Sydow et al., 2010)) were written by a group of German psychologists who have been championing the recognition of systemic therapy within the German mental health system.

### **Cost-effectiveness**

The cost-effectiveness of systemic interventions is a central concern of Russell Crane's research team who published two particularly significant studies in 2013. These showed that systemic interventions were more cost-effective than individual therapy in the treatment of substance use disorders (Morgan et al., 2013) and depression (Crane et al., 2013). Also the relapse rate was lower when depression was treated with systemic therapy.

### **Assessment**

The Systemic Clinical Outcome and Routine Evaluation (SCORE) is a self-report instrument for assessing outcome in family therapy, which has been championed by the UK Association for Family Therapy and the European Family Therapy Association. In 2013, there were two papers on the SCORE. One of these described the development of Irish norms for 15 and 28-item versions of the SCORE based on a national telephone survey (Fay et al., 2013). The other outlined the development of a children's version of the SCORE-15 (Jewell et al., 2013).

These two papers add to the growing literature on this very user-friendly and psychometrically robust index of family functioning.

## **Methodology**

In a number of journals there were useful papers on a range of research methods that may fruitfully throw light on therapeutic processes, and offer alternatives to the randomized controlled trial as way of investigating treatment effectiveness. In the *Journal of Systemic Therapies* Strong and Gale (2013) reflected on the gap between postmodern therapeutic practice and research, and proposed approaches which may narrow this gap. These include qualitative research methods, process-oriented research, action research projects and the generation of practiced-based evidence for therapy effectiveness through the incorporation of routine process and outcome data collection into clinical practice. In the *Journal of Marital and Family Therapy* there was a review paper on the use of process research, dyadic data analysis, and sequential analysis in family therapy research (Oka and Whiting, 2013) and a review of mixed-methods family therapy research, in which quantitative and qualitative methods are combined (Gambrel and Butler, 2013). In *Family Process* there was a critical methodological review of discourse and conversation analysis studies of family therapy. Tseliou (2013) concluded that both offer unique ways for investigating therapeutic dialog in systemic practice, although increased rigour is required in studies using these research methods. There was a special section in the *Journal of Systemic Therapies* (volume 32 Issue 2) on microanalysis of communication as method for conducting psychotherapy research. Microanalysis is a method for investigating hypotheses by analysing videotaped interactions. There were papers on using microanalysis to observe co-construction in psychotherapy (De Jong et al., 2013), microanalysis of formulations in solution-focused brief therapy, cognitive behavioural therapy, and motivational interviewing (Korman et al., 2013), microanalysis of

positive and negative content in solution-focused brief therapy and cognitive behavioural therapy expert sessions (Smock-Jordan et al., 2013) and identifying solution-building formulations through microanalysis (Froerer & Smock-Jordan, 2013).

### DSM-5

DSM-5, the latest edition of the American Psychiatric Association's diagnostic classification system was published in May 2013. There were two editorials in the *Journal of Marital and Family Therapy* on DSM-5 (Lebow, 2013a; Wamboldt, 2013). There was also a special issue of *Australian and New Zealand Journal of Family Therapy* on DSM-5 (Volume 34 issue 2) (Larner et al., 2013), with papers on DSM-5 and evidence based family therapy (Strong & Busch), medical family therapy (Nobbs, 2013), narrative informed practice (Simblett, 2013), emotional processes (Chambers et al., 2013), first order change (Denton & Bell, 2013), and self and society (Epstein et al., 2013). Two emerging themes from these papers were an acknowledgement of the centrality of the DSM to discourse within the international mental health field, and a continuing dissatisfaction among systemic therapists with the DSM classification system which conceptualizes problems within an individual rather than a systemic framework.

### DEATHS

In the final months of 2012 and in 2013, two exceptional member of the family therapy community passed away.

**Betty Carter** (1929 -2012) died on September 11<sup>th</sup> 2012, aged 83 years (McGoldrick, 2013).

She is best known internationally for her bestselling book with Monica McGoldrick *The Family Life Cycle* (Carter & McGoldrick, 1980, 1989, 1999; McGoldrick, Carter and Garcia-

Preto, 2011) which is now in its fourth edition. A Bowen family therapist and feminist, she was founding director of the Family Institute of Westchester, New York and co-founder of the Women's Project in Family Therapy which challenged traditional patriarchal thinking within the systemic therapy movement. With this group she published *The Invisible Web: Gender Patterns in Family Relationships* (Walters, Carter, Papp and Silverstein, 1988) She made her views on equitable gender roles within marriage available to a wider audience in her book *Love, Honour, and Negotiate: Building Partnerships That Last a Lifetime* (Carter & Peters, 1996). Betty Carter was a remarkable teacher and family therapist who will be sadly missed.

**Alan Gurman** (1945-2013) died on May 26<sup>th</sup> 2013, aged 68 (Lebow, 2013b). His contribution to couple and family therapy is inestimable. He co-edited the first two editions of the *Handbook of Family Therapy* (Gurman and Kniskern, 1981, 1991) and four editions of the *Clinical Handbook of Couple Therapy* (Gurman, 2008; Gurman and Jacobson, 2002; Jacobson and Gurman, 1986, 1995). These volumes were central to establishing couple and family therapy as a clinical and academic discipline. He was one of the earliest advocates for theoretical integration in the field of couple and family therapy, and for developing a scientific evidence-base for systemic therapy. He was Professor of Psychiatry at the University of Wisconsin for 40 years and held visiting positions at the Family Institute of Northwestern University and Cambridge Hospital of Harvard University. He was the recipient of numerous honours and awards, an outstanding mentor and a visionary systemic therapist.

## CONCLUSIONS

In 2013 there were significant developments in functional family therapy, multisystemic therapy, multidimensional family therapy. There were important reviews of the development of ecosystemic structural family therapy and narrative and solution-focused therapies.

Strengthening families, father involvement, family therapy in medical settings and the family therapy for adolescent eating disorders were among the more salient developments in family therapy practice considered in family therapy journals. There were papers on many aspects and models of couple therapy. There were also significant developments in assessment, training, and diversity. There were useful accounts of the growth of family therapy in a wide range of countries and a discussion of DSM-5 from a family therapy perspective. We also lost two of our most outstanding pioneers.

## REFERENCES

- Adamsons, K. and Johnson, S. (2013) An updated and expanded meta-analysis of nonresident fathering and child well-being. *Journal of Family Psychology*, **27**: 589-599.
- Andolfi, M. (2013) Engaging fathers in family therapy with violent adolescents. *Australian and New Zealand Journal of Family Therapy*, **34**: 172-185.
- Arduman, E. (2013) A perspective on evolving family therapy in Turkey. *Contemporary Family Therapy: An International Journal*, **35**: 364-375.
- Atkinson, B. (2013) Mindfulness training and the cultivation of secure, satisfying couple relationships. *Couple and Family Psychology: Research and Practice*, **2**: 73-94.
- Babcock, J., Gottman, J., Ryan, K. and Gottman, J. (2013). A component analysis of a brief psycho-educational couples' workshop: One-year follow-up results. *Journal of Family Therapy*, **35**: 252-280.
- Bagner, D. (2013) Father's role in parent training for children with developmental delay. *Journal of Family Psychology*, *27*(4), 650-657.
- Benson, K. (2013) Seeking support: Transgender client experiences with mental health services. *Journal of Feminist Family Therapy: An International Forum*, **25**: 17-40.
- Borcsa, M., Hanks, H. and Vetere, A. (2013) The development of family therapy and systemic practice in Europe: Some reflections and concerns. *Contemporary Family Therapy: An International Journal*, **35**: 342-348.
- Bordoloi, S., O'Brien, N., Edwards, L. and Preli, R. (2013) Creating an inclusive and thriving profession: Why the American Association of Marriage and Family Therapy (AAMFT) needs to advocate for same-sex marriage. *Journal of Feminist Family Therapy: An International Forum*, **25**: 41-55.
- Carr, A. (2013) Development of family therapy in Ireland. *Contemporary Family Therapy: An*

*International Journal*, **35**: 179-199.

Carter, B. and McGoldrick, M. (1980) *The Changing Family Lifecycle. A Framework for Family Therapy*. New York: Gardner Press.

Carter, B. and McGoldrick, M. (1989) *The Changing Family Lifecycle. A Framework for Family Therapy* (Second Edition). New York: Gardner Press.

Carter, B. and McGoldrick, M. (1999) *The Expanded Family Lifecycle. Individual, Family and Social Perspectives* (Third Edition). Boston: Allyn and Bacon.

Carter, B. and Peters, J. (1996) *Love, Honour and Negotiate: Building Partnerships That Last a Lifetime*. New York: Pocket Books.

Chambers, M., MacDonald, C. and Mikes-Liu, K. (2013) Dialogues from the 'coalface': DSM-5 and emotional process in a clinical setting. *Australian and New Zealand Journal of Family Therapy*, **34**: 129-146

Chang, J. (2013) Therapeutic conversations 1: A twentieth anniversary reflection—Introduction to the special section. *Journal of Systemic Therapies*, **32**: 30-34.

Chang, J., Combs, G., Dolan, Y., Freedman, J., Mitchell, T. and Trepper, T. S. (2013) From Ericksonian roots to postmodern futures. Part II: Shaping the future. *Journal of Systemic Therapies*, **32**: 35-45.

Chang, J. and Nylund, D. (2013) Narrative and solution-focused therapies: A twenty-year retrospective. *Journal of Systemic Therapies*, **32**: 72-88.

Chao, W. and Huang, W. (2013) The development of family therapy practice and training in Taiwan: A review and prospects for the future. *Contemporary Family Therapy: An International Journal*, **35**: 319-328.

Crane, D., Christenson, J., Dobbs, S., Schaalje, G., Moore, A., Chiang-Pedal, F., Ballard, J. and Marshall, E. (2013) Costs of treating depression with individual versus family therapy. *Journal of Marital and Family Therapy*, **39**: 457-469.

- Dalton, E., Greenman, P. S., Classen, C. and Johnson, S. (2013) Nurturing connections in the aftermath of childhood trauma: A randomized controlled trial of emotionally focused couple therapy for female survivors of childhood abuse. *Couple and Family Psychology: Research and Practice*, **2**: 209-221.
- Datchi, C. and Sexton, T. (2013) Can family therapy have an effect on adult criminal conduct? initial evaluation of functional family therapy. *Couple and Family Psychology: Research and Practice*, **2**: 278-293.
- De Jong, P. Beavin-Bavelas, J. and Korman, H. (2013) An introduction to using microanalysis to observe co-construction in psychotherapy. *Journal of Systemic Therapies* **32**: 17-30.
- Deng, L., Lin, X., Lan, J. and Fang, X. (2013) Family therapy in China. *Contemporary Family Therapy: An International Journal*, **35**: 420-436.
- Denton, W. and Bell, C. (2013) DSM-5 and the family therapist: first-order change in a new millennium. *Australian and New Zealand Journal of Family Therapy*, **34**: 147-155
- Diamond, G.S., Diamond, G. M. and Levy, S. (2014) *Attachment-Based Family Therapy for Depressed Adolescents*. Washington, DC: APA.
- Dickerson, V. (2013) Patriarchy, power and privilege: A narrative/poststructural view of work with couples. *Family Process*, **52**: 102-114.
- Doss, B., Benson, L., Georgia, E. J. and Christensen, A. (2013) Translation of integrative behavioural couple therapy to a web-based intervention. *Family Process*, **52**: 139-153.
- Downs, K. and Blow, A. (2013) A substantive and methodological review of family-based treatment for eating disorders: The last 25 years of research. *Journal of Family Therapy*, **35**: 3-28.

- Epstein, E., Wiesner, M. and Duda, L. (2013) DSM and the diagnosis-MacGuffin: Implications for the self and society. *Australian and New Zealand Journal of Family Therapy*, **34**: 156-167
- Fay, D., Carr, A., O'Reilly, K., Cahill, P., Dooley, B., Guerin, S. and Stratton, P. (2013) Irish norms for the SCORE-15 and 28 from a national telephone survey. *Journal of Family Therapy*, **35**: 24-42.
- Froerer, A. and Smock-Jordan, S. (2013) Identifying solution-building formulations through microanalysis. *Journal of Systemic Therapies* **32**: 60-73.
- Gambrel, L. and Butler, J. (2013) Mixed methods research in marriage and family therapy: A content analysis. *Journal of Marital and Family Therapy*, **39**: 163-181.
- Girz, L., Robinson, A., Foroughe, M., Jasper, K. and Boachie, A. (2013) Adapting family-based therapy to a day hospital programme for adolescents with eating disorders: Preliminary outcomes and trajectories of change. *Journal of Family Therapy*, **35**: 102-120.
- Goldman, R. and Greenberg, L. (2013) Working with identity and self-soothing in emotion-focused therapy for couples. *Family Process*, **52**: 62-82.
- Greenman, P. and Johnson, S. (2013) Process research on emotionally focused therapy (EFT) for couples: Linking theory to practice. *Family Process*, **52**: 46-61.
- Gurman, A. (2008) *Clinical Handbook of Couple Therapy* (Fourth Edition). New York: Guilford.
- Gurman, A. (2013) Behavioural couple therapy: Building a secure base for therapeutic integration. *Family Process*, **52**: 115-138.
- Gurman, A. and Jacobson, N. (2002) *Clinical Handbook of Couple Therapy* (Third Edition). New York: Guilford.
- Gurman, A. and Kniskern, D. (1981) *Handbook of Family Therapy*. New York: Brunner

Mazel.

Gurman, A. and Kniskern, D. (1991) *Handbook of Family Therapy. Volume II*. New York: Brunner Mazel.

Haun, M. W., Kordy, H., Ochs, M., Zwack, J. and Schweitzer, J. (2013) Family systems psychiatry in an acute in-patient setting: The implementation and sustainability 5 years after its introduction. *Journal of Family Therapy*, **35**: 159-175.

Hektner, J., Brennan, A. and Brotherson, S. (2013) A review of the nurtured heart approach to parenting: Evaluation of its theoretical and empirical foundations. *Family Process*, **52**: 425-439.

Henggeler, S., Schoenwald, S., Bordin, C., Rowland, M. and Cunningham, P. (2009) *Multisystemic Therapy for Antisocial Behaviour in Children and Adolescents* (Second Edition). New York: Guilford.

Herscovici, C., Campos González, S., Label, H., Zevallos Vega, R. and Chong García, N. (2013) Development and practice of the systems paradigm in Argentina, Chile and Peru. *Contemporary Family Therapy: An International Journal*, **35**: 200-211.

Hollesen, A., Clausen, L. and Rokkedal, K. (2013) Multiple family therapy for adolescents with anorexia nervosa: A pilot study of eating disorder symptoms and interpersonal functioning. *Journal of Family Therapy*, **35**: 53-67.

Ingrassia, A. (2013) Reflexivity in the medical encounter: Contributions from post-modern systemic practice. *Journal of Family Therapy*, **35**: 139-158.

Jacobson, N. and Gurman, A. (1986) *Clinical Handbook of Marital Therapy*. New York: Guilford.

Jacobson, N. and Gurman, A. (1995) *Clinical Handbook of Couple Therapy* (Second Edition). New York: Guilford.

Jensen, P. (2013) Family therapy in Norway: Past and present. *Contemporary Family*

*Therapy: An International Journal*, **35**: 288-295.

- Jewell, T., Carr, A., Stratton, P., Lask, J. and Eisler, I. (2013) Development of a children's version of the SCORE index of family function and change. *Family Process*, **52**: 673-684.
- Jozefik, B., de Barbaro, B., Iniewicz, G. and Namyslowska, I. (2013) Family therapy in Poland: Development and current perspectives. *Contemporary Family Therapy: An International Journal*, **35**: 308-318.
- Kichler, J., Kaugars, A., Marik, P., Nabors, L. and Alemzadeh, R. (2013) Effectiveness of groups for adolescents with type 1 diabetes mellitus and their parents. *Families, Systems and Health*, **31**: 280-293.
- Knudson-Martin, C. (2013) Why power matters: Creating a foundation of mutual support in couple relationships. *Family Process*, **52**: 5-18.
- Kónya, Z., & Kónya, Á. (2013) Family therapy in Romania. *Contemporary Family Therapy: An International Journal*, **35**: 275-287.
- Korman, H., Beavin Bavelas, J. and De Jong, P. (2013) Microanalysis of formulations in solution-focused brief therapy, cognitive behavioural therapy and motivational interviewing. *Journal of Systemic Therapies* **32**: 31-45.
- Kozłowska, K., English, M., Savage, B., Chudleigh, C., Davies, F., Paull, M. and Jenkins, A. (2013) Multimodal rehabilitation: A mind-body family-based intervention for children and adolescents impaired by medically unexplained symptoms. Part 2: Case studies and outcomes. *American Journal of Family Therapy*, **41**: 212-231.
- Larner, G. (2013) Working with fathers, youth and violence in families. *Australian and New Zealand Journal of Family Therapy*, **34**: 169-171.
- Larner, G., Strong, T. and Busch, R. (2013) Family therapy and the spectre of DSM-5. *Australian and New Zealand Journal of Family Therapy*, **34**: 87-89.

- Lebow, J. L. (2013a) Editorial: DSM-V and family therapy. *Family Process*, **52**: 155-160.
- Lebow, J. L. (2013b). Editorial: Evidence in couple and family therapy—The legacy of Alan Gurman. *Family Process*, **52**: 571-575.
- Lee, S., Chun, Y., Chung, H., Shin, S., Lee, I., Lee, D. and Choi, Y. (2013) The profession of family therapy in South Korea: Current status and future directions. *Contemporary Family Therapy: An International Journal*, **35**: 388-399.
- Letourneau, E., Henggeler, S., McCart, M., Borduin, C., Schewe, P. and Armstrong, K. (2013) Two-year follow-up of a randomized effectiveness trial evaluating MST for juveniles who sexually offend. *Journal of Family Psychology*, **27**: 978-985.
- Liddle, H. A. (2010) Treating adolescent substance abuse using multidimensional family therapy. In J. Weisz and A. Kazdin (eds.), *Evidence-based psychotherapies for children and adolescents* (Second Edition, pp. 416-432). New York: Guilford Press.
- Lindblad-Goldberg, M. and Northey, W. (2013) Ecosystemic structural family therapy: Theoretical and clinical foundations. *Contemporary Family Therapy: An International Journal*, **35**: 147-160.
- Lister, Z., Fox, C. and Wilson, C. (2013) Couples and diabetes: A 30-year narrative review of dyadic relational research. *Contemporary Family Therapy: An International Journal*, **35**: 613-638.
- LoTempio, E., Forsberg, S., Bryson, S., Fitzpatrick, K., Grange, D. and Lock, J. (2013) Patients' characteristics and the quality of the therapeutic alliance in family-based treatment and individual therapy for adolescents with anorexia nervosa. *Journal of Family Therapy*, **35**: 29-52.
- Lynch, L., Waite, R. and Davey, M. (2013) Adverse childhood experiences and diabetes in adulthood: Support for a collaborative approach to primary care. *Contemporary Family Therapy: An International Journal*, **35**: 639-655.

- Manfrida, G., Giachi, E. and Eisenberg, E. (2013) Steps to a therapy of human relationships: The evolution of family therapy in Italy. *Contemporary Family Therapy: An International Journal*, **35**: 376-387.
- Marlowe, D. (2013) Bridging conversations: Discussing the intra-professional relationship between medical family therapy and family therapy. *Journal of Family Therapy*, **35**: 119-138.
- McCarthy, B. and Wald, L. (2013) New strategies in assessing, treating and relapse prevention of extramarital affairs. *Journal of Sex and Marital Therapy*, **39**: 493-509.
- McCarthy, B., Farr, E. and McDonald, D. (2013) Couple sexuality after 60. *Journal of Family Psychotherapy*, **24**: 38-47.
- McKinnon, J. and Greenberg, L. S. (2013). Revealing underlying vulnerable emotion in couple therapy: Impact on session and final outcome. *Journal of Family Therapy*, **35**: 303-319.
- McGoldrick, M. (2013) The multicultural family institute remembers Betty Carter (May 13, 1929–September 11, 2012). *Journal of Marital and Family Therapy*, **39**: 2-4.
- McGoldrick, M., Carter, B. and Garcia-Preto, N. (2011) *The Expanded Family Lifecycle. Individual, Family and Social Perspectives* (Fourth Edition). Boston: Allyn and Bacon.
- McLuckie, A., Allan, R. and Ungar, M. (2013) Couple and family therapy within the current pan-Canadian context. *Contemporary Family Therapy: An International Journal*, **35**: 329-341.
- Mehl, A., Tomanová, J., Kuběna, A. and Papežová, H. (2013) Adapting multi-family therapy to families who care for a loved one with an eating disorder in the Czech Republic combined with a follow-up pilot study of efficacy. *Journal of Family Therapy*, **35**: 82-101.

- Minuchin, S. (1974) *Families and Family Therapy*. Cambridge, MA: Harvard University Press.
- Moloney, B. (2013) Reflections on family therapy in Australia. *Contemporary Family Therapy: An International Journal*, **35**: 400-419.
- Morgan, T., Crane, D., Moore, A. and Eggett, D. (2013) The cost of treating substance use disorders: Individual versus family therapy. *Journal of Family Therapy*, **35**: 2-23.
- Nobbs, K. (2013) Fictions from a medicalised family therapy practice. *Australian and New Zealand Journal of Family Therapy*, **34**: 104-113.
- Nova, E., McGeorge, C. and Stone Carlson, T. (2013) Bisexuality and lesbian, gay and bisexual affirmative training: An exploration of family therapy students' beliefs and clinical experiences. *Journal of Feminist Family Therapy: An International Forum*, **25**: 212-222. .
- Oka, M. and Whiting, J. (2013) Bridging the clinician/researcher gap with systemic research: The case for process research, dyadic and sequential analysis. *Journal of Marital and Family Therapy*, **39**: 17-27.
- Owen, J., Antle, B. and Barbee, A. (2013) Alliance and group cohesion in relationship education. *Family Process*, **52**: 465-476.
- Papp, P., Scheinkman, M. and Malpas, J. (2013) Breaking the mold: Sculpting impasses in couples' therapy. *Family Process*, **52**: 33-45.
- Priest, J. (2013) Emotionally focused therapy as treatment for couples with generalized anxiety disorder and relationship distress. *Journal of Couple and Relationship Therapy*, **12**: 22-37.
- Relvas, A., Alarcão, M. and Pereira, M. (2013) Family and systems therapy and training in Portugal. *Contemporary Family Therapy: An International Journal*, **35**: 296-307.
- Retzlaff, R. (2013) Development of family therapy and systemic therapy in Germany. *Contemporary Family Therapy: An International Journal*, **35**: 349-363.

- Retzlaff, R., von Sydow, K., Beher, S., Haun, M. and Schweitzer, J. (2013) The efficacy of systemic therapy for internalizing and other disorders of childhood and adolescence: A systematic review of 38 randomized trials. *Family Process*, **52**: 619-652.
- Rigter, H., Henderson, C. E., Pelc, I., Tossmann, P., Phan, O., Hendriks, V., Schaub, M. and Rowe, C. (2013) Multidimensional family therapy lowers the rate of cannabis dependence in adolescents: A randomised controlled trial in western European outpatient settings. *Drug and Alcohol Dependence*, **130**: 85-93.
- Robbins, M., Horigian, V., Szapocznik, J. and Ucha, J. (2010) Treating hispanic youths using brief strategic family therapy. In J. Weisz and A. Kazdin (eds.), *Evidence-based psychotherapies for children and adolescents* (Second Edition, pp. 375-390). New York: Guilford Press.
- Roux, G., Sofronoff, K. and Sanders, M. (2013) A randomized controlled trial of group stepping stones Triple P: A mixed-disability trial. *Family Process*, **52**: 411-424.
- Rowe, C., Rigter, H., Henderson, C., Gantner, A., Mos, K., Nielsen, P. & Phan, O. (2013). Implementation fidelity of multidimensional family therapy in an international trial. *Journal of Substance Abuse Treatment*, **44**: 391-399.
- Schade, L. (2013) Non-suicidal self-injury (NSSI): A case for using emotionally focused family therapy. *Contemporary Family Therapy: An International Journal*, **35**: 568-582.
- Schaeffer, C., Swenson, C., Tuerk, E. and Henggeler, S. (2013) Comprehensive treatment for co-occurring child maltreatment and parental substance abuse: Outcomes from a 24-month pilot study of the MST-building stronger families program. *Child Abuse and Neglect*, **37**: 596-607.
- Seedall, R. Wampler, K. (2013) An attachment primer for couple therapists: research and clinical implications. *Journal of Marital and Family Therapy*, **36**: 427-440.
- Seikkula, J., Aaltonen, J., Kalla, O., Saarinen, P., & Tolvanen, A. (2013). Couple therapy for

depression in a naturalistic setting in Finland: A 2-year randomized trial. *Journal of Family Therapy*, **35**: 281-302.

Shailer, J., Gammon, R. and de Terte, I. (2013) Youth with serious mental health disorders: Wraparound as a promising intervention in New Zealand. *Australian and New Zealand Journal of Family Therapy*, **34**: 186-213.

Shamblen, S., Arnold, B., Mckiernan, P., Collins, D. and Strader, T. (2013) Applying the creating lasting family connections marriage enhancement program to marriages affected by prison re-entry. *Family Process*, **52**: 477-498.

Simblett, G. (2013) Dancing with the DSM – The reflexive positioning of narrative informed psychiatric practice. *Australian and New Zealand Journal of Family Therapy*, **34**: 114-128.

Skorunka, D. and Hajná, D. (2013) Family therapy in the heart of Europe. *Contemporary Family Therapy: An International Journal*, **35**: 212-222.

Smock-Jordan, S., Froerer, A. and Beavin-Bavelas, J. (2013) Microanalysis of positive and negative content in solution-focused brief therapy and cognitive behavioural therapy expert sessions. *Journal of Systemic Therapies*, **32**: 46-59.

Stanbridge, R., Burbach, F., Rapsey, E., Leftwich, S. and McIver, C. (2013) Improving partnerships with families and carers in in-patient mental health services for older people: A staff training programme and family liaison service. *Journal of Family Therapy*, **35**: 176-197.

Stratton, P. and Lask, J. (2013) The development of systemic family therapy for changing times in the United Kingdom. *Contemporary Family Therapy: An International Journal*, **35**: 257-274.

Strong, T. and Busch, R. (2013) DSM-5 and evidence-based family therapy? *Australian and New Zealand Journal of Family Therapy*, **34**: 90-103.

- Strong, T. and Gale, J. (2013) Postmodern clinical research: In and out of the margins. *Journal of Systemic Therapies*, **32**: 46-57.
- Sutherland, O., Dienhart, A and Turner, J. (2013) Responsive persistence part II: Practices of postmodern therapists. *Journal of Marital and Family Therapy*, **39**: 488-501.
- Sutherland, O., Fine, M. and Ashbourne, L. (2013) Core competencies in social constructionist supervision? *Journal of Marital and Family Therapy*, **39**: 373-387.
- Sutherland, O., Turner, J. and Dienhart, A. (2013) Responsive persistence part I: Therapist influence in postmodern practice. *Journal of Marital and Family Therapy*, **39**: 470-487.
- Thapar, A., Langley, K. and Muñoz-Solomando, A. (2013) The ADHD debate: Being mindful of complexity and wary of reductionist explanations and polarization. *Journal of Family Therapy*, **35**: 219-223.
- Thomas, F. (2013) Shifts happen: A confluence of influence. *Journal of Systemic Therapies*, **32**: 58-71.
- Tie, S. and Poulsen, S. (2013) Emotionally focused couple therapy with couples facing terminal illness. *Contemporary Family Therapy: An International Journal*, **35**: 557-567.
- Tilley, D. and Palmer, G. (2013) Enactments in emotionally focused couple therapy: Shaping moments of contact and change. *Journal of Marital and Family Therapy*, **39**: 299-313.
- Tseliou, E. (2013) A critical methodological review of discourse and conversation analysis studies of family therapy. *Family Process*, **52**: 653-672.
- Tseliou, E. (2013) Systemic family therapy in Greece: Polyphony and diversity. *Contemporary Family Therapy: An International Journal*, **35**: 223-243.
- Valdez, C., Abegglen, J. and Hauser, C. T. (2013) Fortalezas familiares program: Building sociocultural and family strengths in Latina women with depression and their families. *Family Process*, **52**: 378-393.
- Valdez, C., Padilla, B., Moore, S. and Magaña, S. (2013) Feasibility, acceptability and

preliminary outcomes of the fortalezas familiares intervention for Latino families facing maternal depression. *Family Process*, **52**: 394-410.

- Van Ryzin, M. and Nowicka, P. (2013) Direct and indirect effects of a family-based intervention in early adolescence on parent–youth relationship quality, late adolescent health and early adult obesity. *Journal of Family Psychology*, **27**: 106-116.
- von Sydow, K., Beher, S., Schweitzer, J. and Retzlaff, R. (2010). The efficacy of systemic therapy with adult patients: A meta-content analysis of 38 randomized controlled trials. *Family Process*, **49**: 457-485.
- von Sydow, K., Retzlaff, R., Beher, S., Haun, M. and Schweitzer, J. (2013) The efficacy of systemic therapy for childhood and adolescent externalizing disorders: A systematic review of 47 RCTs. *Family Process*, **52**: 576-618.
- Walitzer, K., Dermen, K., Shyhalla, K. and Kubiak, A. (2013). Couple communication among problem drinking males and their spouses: A randomized controlled trial. *Journal of Family Therapy*, **35**: 229-251.
- Wallis, A., Alford, C., Hanson, A., Titterton, J., Madden, S. and Kohn, M. (2013) Innovations in Maudsley family-based treatment for anorexia nervosa at the children's hospital at westmead: A family admission programme. *Journal of Family Therapy*, **35**: 68-81.
- Walters, M., Carter, B., Papp, P. and Silverstein, O. (1988) *The Invisible Web: Gender Patterns in Family Relationships*. New York: Guilford.
- Wamboldt, M. Z. (2013) Editorial: A brief thought about diagnostic systems and relationship patterns. *Family Process*, **52**: 161-162.
- Weingarten, K. (2013) The "cruel radiance of what is": Helping couples live with chronic illness. *Family Process*, **52**: 83-101.
- Wilde, J. and Doherty, W. (2013) Outcomes of an intensive couple relationship education program with fragile families. *Family Process*, **52**: 455-464.

- Wile, D. B. (2013) Opening the circle of pursuit and distance. *Family Process*, **52**: 19-32.
- Williams, K. and Knudson-Martin, C. (2013) Do therapists address gender and power in infidelity? A feminist analysis of the treatment literature. *Journal of Marital and Family Therapy*, **39**: 271-284.
- Wilson, J. (2013) A social relational critique of the biomedical definition and treatment of ADHD; ethical practical and political implications. *Journal of Family Therapy*, **35**: 198-218.
- Wong, J., Roubinov, D., Gonzales, N., Dumka, L. and Millsap, R. (2013) Father enrolment and participation in a parenting intervention: Personal and contextual predictors. *Family Process*, **52**: 440-454.
- Wong, O. and Ma, J. (2013) Development of family therapy in Hong Kong. *Contemporary Family Therapy: An International Journal*, **35**: 244-256.
- Wood, B., Klebba, K. and Miller, B. (2000) Evolving the biobehavioural family model: The fit of attachment. *Family Process*, **39**: 319–344.
- Zagar, R., Grove, W. and Busch, K. (2013) Delinquency best treatments: How to divert youths from violence while saving lives and detention costs. *Behavioural Sciences and the Law*, **31**: 381-396.
- Zuccarini, D., Johnson, S., Dalglish, T. and Makinen, J. (2013) Forgiveness and reconciliation in emotionally focused therapy for couples: The client change process and therapist interventions. *Journal of Marital and Family Therapy*, **39**: 148-162.