IFTA Spotlight:
Carlos Sluzki, M.D.

Carlos E. Sluzki was born and raised in Buenos Aires, Argentina, where he completed his M.D. training at the University of Buenos Aires School of Medicine, and his psychoanalytic training at the Argentine Psychoanalytic Association Institute of Psychoanalysis. He was also trained in couple and family therapy at the Mental Research Institute (MRI), Palo Alto, California.

Dr. Sluzki migrated to the United States in December 1971. Since then he has been Director of Training and later Director of the above-mentioned MRI (1976-83), Professor of Psychiatry at the University of California San Francisco (1976-83), Professor of Psychiatry at the University of Massachusetts Medical School (1984-94) and at University of California Los Angeles (1995-2001). He is currently Clinical Professor of Psychiatry at George Washington University School of Medicine as well as Professor Emeritus of Global and Community Health and of Conflict Analysis and Resolution at George Mason University.

Dr. Sluzki has been Editor-in-Chief of the journals Acta Psiquiatrica y Psicologica de America Latina, Family Process, and the American Journal of Orthopsychiatry, and Vice-President of the American Family Therapy Academy. He has published extensively, and has delivered countless keynote and panel presentations and conducted workshops worldwide, with special emphasis on couple and family therapy, social networks, violence and victimization, refugees and human rights.

This coming March, at the 25th World Family Therapy Congree is Malaga, Spain, Dr. Sluzki will serve once again as a keynote speaker. His presentation is entitled “Aux armes, Citoyens” (“To arms, Citizens”), taken from “The Marseilles,” the French national anthem.
On Second Thought…. with Kelsey Abiera, BS

As the title of their article suggests, Vaillancourt-Morel, Godbout, Sabourin, Briere, Lussier, and Runtz (2016) aim to examine how relational status may partially explain various sexual behavior outcomes experienced by childhood sexual abuse victims. Existing literature has shown high variability in reactions to childhood sexual abuse and that survivors may exhibit both compulsive and avoidant behaviors (Noli, Trickett, & Putnam, 2003; Vaillancourt-Morel et al., 2015). The researchers behind the present study hypothesized that survivors would show higher compulsivity than non-survivors if single, both higher compulsivity and avoidance if cohabiting, and higher levels of avoidance if married.

Adult participants were recruited through social media posts, emails, and posters in the community. Voluntary participants were directed to complete an online survey. Of the 1,033 individuals who were included in the data analysis, the majority were students (63.2%) (Vaillancourt-Morel et al., 2016). Four variables were measured: (1) relationship status, (2) child sexual abuse severity, (3) sexual compulsivity, and (4) sexual avoidance. Relationship status was coded as either married, cohabiting, or single. Sexual abuse severity was measured by examining the frequency and intrusiveness of the abuse as well as the relationship between the child and perpetrator. All variables were measured using self-report questionnaires.

Data was analyzed using path and moderation analyses. Results showed that victims displayed both higher sexual compulsivity and higher sexual avoidance than non-victims, with female survivors showing higher levels of both compulsivity and avoidance and males showing higher levels of compulsivity. When broken down by relationship status, single and cohabiting survivors reported more compulsivity, while married and cohabiting survivors reported higher levels of avoidance, aligning with the researchers’ hypothesis.

The authors state that these findings are consistent with Rellini’s (2014) life course perspective, which posits that some effects of child sexual abuse become more apparent when victims assume the role of a romantic partner. The researchers write that there may be different interpretations of their findings. It could be that sexual avoidance replaces sexual compulsivity when an individual is in a more committed relationship such as cohabiting or marriage. While a survivor may initially use sexual compulsivity to deal with intimacy difficulties or abandonment anxiety, later stressors associated with committed relationships may lead to emotional reactivity and ultimately sexual avoidance. An additional interpretation could be that sexual behaviors determine what type of relationship an individual chooses to engage in; if a survivor is sexually avoidant, they may prefer a steady relationship where lower levels of sexuality are accepted by the partner in exchange for intimacy and commitment. Survivors who are more sexually compulsive may prefer to remain in relationships that require lower emotional intimacy and can be ended easily. The authors refer to a “hierarchy of commitment hypothesis,” which proposes that sexual outcomes of child sexual abuse survivors are partially explained by their marital status, or that survivors may be more likely to remain unmarried.

The results call clinicians who are working with sexually distressed couples to conduct thorough assessments of sexual abuse history and severity in order to more fully understand the emotional processes related to the current sexual dysfunction. In addition, interventions that address the underlying trauma related to sexual compulsive and avoidant behaviors should be explored for sexual abuse survivors. Furthermore, while this study challenges the idea of gender differences in sexual outcomes, there is need for more conclusive research to be conducted regarding the impact of gender on outcomes of sexual abuse.

Citation:
How did you become interested in this study?
We wanted to better understand the heterogeneity in sexual outcomes of childhood sexual abuse. Even if an important number of studies has documented sexual abuse-related sexual symptoms, we do not fully understand why sexual reactions to sexual abuse are so highly variable. Our clinical experiences have led us to notice important changes in the sexual behaviors of childhood sexual abuse survivors as an intimate relationship develops. This observation fueled our determination to examine how relationship commitment processes may help identify subgroups of adults evidencing different sexual outcomes of childhood sexual abuse.

Was anything surprising to you in the course of your data collection and analysis?
It was most interesting to see how our measurement strategy may have facilitated greater disclosure of CSA in male survivors: prevalence rates of child sexual abuse were around 20% in both women and men. The use of an anonymous Internet-based survey, a broader definition of CSA, and above all a neutral inquiry that did not specifically label reported sexual experiences as “sexual abuse” or the participants as “victims”, may have helped to identify more male CSA survivors. The high prevalence rate emphasizes the need for comprehensive child sexual abuse screening practices, using both neutral objective inquiry as well as subjective self-identification, in clinical and research contexts.

We also first thought that relationship “duration” would be the key variable to operationalize our commitment hypothesis and to predict related sexual avoidance and compulsivity, until Dr. Stéphane Sabourin proposed that “relationship status” might better reflect relational commitment and lead to differential sexual outcomes. It was fascinating to see that status, and especially marriage, was indeed related to sexual outcomes above and beyond relationship duration. It is plausible that in married survivors, commitment intensifies, along with intimacy and feelings of vulnerability, which can trigger unresolved past traumatic issues and associated feelings, and that the strategy to use sex ...
25th World Family Therapy Congress and 30th Anniversary of IFTA
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PRE-Congress Workshop

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Wednesday, March 15, 2017
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- $120 (not attending the congress)

Cansu Alözkan Sever

FEATURED PRESENTERS

The Evolution of Family Therapy in Russia, Hungary and Turkey over the Past 30 Years

Chair: Tatiana Gébrova
Other Presenters:
- Emoke Tatin
- Fatma Arıcı-Sahin
Discussants: Monica McGoldrick & Myria Garcia-Peñas

This presentation will explore the development of family therapy in Russia, Hungary and Turkey over the past 30 years, discussing the unique social, political and cultural contexts that influenced the evolution of the field in each country and comparing it to the development of family therapy in the U.S.

Prescribing Rituals, Humor, and Metaphor in Systemic Therapy

Joel S. Bergman, PhD is a former Senior Faculty Member of the Ackerman Institute for Family Therapy in New York City, where he is also in private practice. He is a Supervisor of Psychotherapy in the psychology doctoral programs at Yeshiva University and CUNY. He is author of Fishing for Bananas: Psychodynamics of Brief Systemic Therapy (WW Norton), an Approved Supervisor and Fellow of AAMFT and a frequent workshop leader well-known for his lively, humorous, and creative approaches to individual, couples, and family therapy.
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to keep the partner and gain approval becomes more difficult to apply from an emotional viewpoint.

Does your team have plans to further your research on this topic?

The collaborative work of our team (i.e., Drs. Briere, Lussier, Sarourin, Runtz and us) opened the door to new studies on the complex effects of interpersonal traumas on psycho-relational functioning. We are deepening our understanding through ongoing studies, including the role of symptom complexity in the effect of cumulative childhood trauma on sexo-relational outcomes. In this study, we specifically suggested that the intensification of relationship commitment is the developmental process that triggers specific sexual abuse-related sexual symptoms. The postdoctoral research of Marie-Pier, with Dr. Sophie Bergeron, will extend these results by examining theoretically-driven couple processes that may explain the development of sexual well-being within survivors’ relationships, using a dyadic, prospective methodology. For example, she will examine if other couple processes may act as a buffer against the emergence of negative sexual cognitions, affects or behaviors and help child sexual abuse survivors overcome abuse-related trust and intimacy issues while engaging in a dynamic sexual healing process.