



the newsletter

NSGP

Northeastern Society for Group Psychotherapy

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Fall 2003

## Letter from the President



### Harvest from the Fields of New England

With this newly redesigned issue we once again are treated to the abundant harvest

generated by our colleagues working together to offer our members enriching events throughout the year. The new concept of the Newsletter is the work of Joe Shay and Lise Motherwell, your President-elect, working with designer Deborah Cake. Launching this issue is very exciting. Special thanks go to Joe and Lise for their excellent project management.

Thanks also to our committee chairs and members for their remarkable contributions of time, energy, and creativity to the new columns and to the events they have produced over this past year. It is extremely gratifying as President to enter my second year feeling the strength of the commitment among members and the Board to the growth and development of this extraordinary organization.

Our organizational goals for the year include a continued focus on recruitment of new members, with a special emphasis on the needs of our almost 300 current members. Toward that end, the Professional Development Task Force chaired by Scott Rutan will be reporting back to the Board in June 2004 about how to enhance opportunities for peer consultation and supervision, seminars for beginning and senior therapists, and a variety of other learning opportunities within the group therapy community.

NSGP also will consider the question of community service in Boston with a report

due to the Board in June 2004 by the Disaster Outreach Task force chaired by Kathy Ulman.

Following September 11, 2001, the AGPA Disaster Outreach Task Force in New York ran over 400 groups funded by the New York Times and the AOL Times Warner Foundation. Our colleagues in the Eastern Group Psychotherapy Association were also present assisting families at Ground Zero Commemorative Ceremonies on September 11, 2003. We salute their remarkable contribution to their New York community.

I am excited about the continuation of our newly redesigned two-year Training Program in psychodynamic group psychotherapy that begins again in Fall 2003. It runs on five weekends throughout the year allowing clinicians to participate while they also maintain their private practices or continue to work in organizational settings. Both didactic and experiential components are included. The opportunities the program provides are remarkable, including not only group training but also building an excellent network of peers.

Remember, as a clinical member you are empowered to vote in NSGP elections, serve on the Board, and list your groups on the NSGP web site at [www.nsgp.com](http://www.nsgp.com).

In addition, our Referral Service can help you and your colleagues find groups for your clients. Call us at (617) 484-4994 to access information on these and many other programs.

On behalf of the Board of NSGP we look forward to seeing you at many of the events outlined in our Newsletter and at our June 2004 Annual Conference at Wellesley College.

*Joyce Shields*

Joyce D. Shields RN, MS, CS, CGP  
President

## Spring Conference Review

### Joy and Aliveness

by Jerome S. Gans, M.D.

In Suzanne Cohen's energizing and creative workshop, we were encouraged to use expressive movement and body awareness to explore our countertransference dilemmas as group therapists. Many of the principles that Suzanne taught us come from her involvement in NIA (Neuromuscular Integrative Action), an organization she has been studying with for the past five years.

Suzanne shared with us an intervention based on body awareness that enabled her to deepen her connection with a grieving patient. As she sat with this patient, she became conscious of a warm feeling on her forehead. Processing this awareness led her to the realization that she had the impulse to put her hand on the patient's forehead and to stroke his head as ways of offering soothing and comfort. Fitting this heightened consciousness of her bodily feelings into a traditional psychodynamic framework, she was able to put these impulses into words and share them with the group. Participants then presented

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**The goals of this newsletter are two-fold:**

- To promote the objectives of the Northeastern Society for Group Psychotherapy, an affiliate of the American Group Psychotherapy Association.
- To be a forum for the exchange of ideas and information among members.

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Messages can be left at the office anytime, and will be answered daily.

Monday-Friday 9 am to 5 pm

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**www.nsgp.com****Letter from the Editor****Joe Shay, Ph.D., CGP**

NSGP is in progress. With this edition of the Newsletter, we are introducing a new design, new features, and even a new editor. That's me. But I have a surprise to announce at the end of this column.

I love NSGP. There was a time though when I was intimidated by it, when I hovered at the periphery wondering if I would ever be seen. Then I was invited by Mark Fanger to offer a presentation at the annual conference but virtually no one signed up so we cancelled it. I was invited to persevere and I did. Year by year, I inched closer to the "inner circle." Then, Joyce Shields asked me to join her in planning the conference, and suddenly I felt in. All of this from being invited in.

Now we're inviting you. Truly. We want every member of NSGP to feel in. The underlying message of our Newsletter is "we are one group"—many voices, many perspectives, but allied in the desire to belong to a community. So, when you get a phone call or email inviting you in,

please say "yes," or call Joyce or President-elect Lise Motherwell and say you'd like to move in from the periphery. Or email me (nsgp@bitwise.net) with thoughts for the Newsletter, or an idea for an article.

**Community is our goal**

Transition is in the service of that goal—to be a community that is welcoming, relevant, and stimulating for all its members. In these pages, you'll see how the "inner circle" has room for Don Wexler, our oldest active member, and for newer colleague Ben Weinstein as well; how Jerry Gans learned body awareness from Suzanne Cohen; how Barbara Keezell spoke to ghosts with Bruce Bernstein; and how Tom Schweitzer channeled the spirit of George Kelly. Many familiar features of the Newsletter remain as well.

The surprise? In the last issue, Lise Motherwell announced her departure as Newsletter chair. I'm thrilled to announce that she has agreed to stay on as my co-chair. May Lise's example of service to NSGP inspire you. We hope this redesigned Newsletter will inspire you as well.

**Free Colloquium Series****NSGP Breakfast Club**

Learn about group therapy and socialize with other NSGP members at a FREE colloquium series. Each POT LUCK event is limited to 15, on a first come, first serve basis, and takes place on Sunday from 11 AM to 1:30 PM. Participants may bring guests.

Please contribute a breakfast item (quiche, fruit, pastries, cheese, etc.) or bottle of wine. The host will provide bagels, coffee, and tea.

**First Fall Meeting: October 26, 2003****Wellness Groups****by Gretchen Schmelzer****To sign up:****Please call Pamela Dunkle at the NSGP office, 617-484-4994.****For additional meetings, see Calendar dates on back cover.**

# Half a Century in NSGP

## An Interview with

Donald Wexler, M.D., CGP, FAGPA



By Eleanor F. Counselman, Ed.D., CGP, FAGPA

Donald Wexler turned 80 on April 27, 2003. He is NSGP's oldest actively involved member, regularly attending NSGP events and continuing to serve on committees (currently the

Membership Committee). He has been active in NSGP for nearly half a century, serving as President from 1972-74. His interest in people has led to many different activities over his long career, all characterized by his intellectual curiosity, his willingness to work hard, and the value he places on human connection.

Here Don talks with Eleanor Counselman, about his love of NSGP and group therapy and his various professional activities.

**Eleanor Counselman:** *First of all, Happy Birthday! I guess you qualify as NSGP's oldest actively involved member.*

**Donald Wexler:** Thanks. I'm surprised to find myself in this position. Of all the associations I've been involved in, the most important one has been NSGP. I first came to Boston in 1955 for a year of psychiatric residency. After that I opened a part-time private practice and affiliated with Mt. Auburn Hospital, which at that time had an exciting project funded by NIH—an experiment in which all intake patients were offered group psychotherapy. There were some exciting people there—Frank Carter, for example—and I discovered group psychotherapy. I learned that if you believed in group therapy when you did an intake, and if you did group therapy yourself, then you could persuade patients to join a group.

**EC:** *You had to be a believer.*

**DW:** That's right. And I became a believer. And for many years I did work in that setting. That led me to meeting with many people active in NSGP such as Jacob Christ, Henry Grunebaum, John Arsenian, Max Day, and Norman Neiberg.

I took courses in the NSGP training program. It was an extraordinarily rewarding experience that went on for a

number of years. These were evening courses, held in homes or at Mt. Auburn.

I think I was also drawn to it because I came into medicine partly as a result of having been raised in a medical environment. My father was a pediatrician and my mother was a dentist. My parents were very conscious of politics and what was going on in the world, e.g., Germany in the 1930s. Getting into group therapy seemed to be a natural evolution from the social sciences.

**EC:** *Was there any one person who mentored you in your early years in NSGP?*

**DW:** I really admired Jacob Christ, the late Harold Boris—he was really a genius for understanding people in their situations—and Norman Neiberg. I think the work Anne Alonso and Scott Rutan have done is seminal, and I greatly admire Cecil Rice for his dedication to NSGP and group therapy.

What really drew me to the concept of NSGP and AGPA was the qualification for being a member—a person's interest in doing group therapy, not one's specific training. I've always thought that was at the heart of our organization.

**EC:** *So people connect around a common love.*

**DW:** That's right. Without being unfair to other doctors, I think group therapists have a larger measure of altruism than other people and are hopefully less narcissistic. I haven't seen much back-biting in NSGP. People differ but they seem to get along with each other.

**EC:** *I agree. I also think there has been a commitment to work things out.*

**DW:** The biggest problem I had was with the voting issue. I felt it was indefensible that we didn't have universal suffrage. That is the only way the organization is going to survive. As Charlie Glazier pointed out in the June 2003 business meeting, you don't have people come into a group and tell them they have to sit in silence for the first six months. That's really what we have unintentionally done in NSGP, and that's what AGPA did too. The national organization still does that, and I hope we can be a model for them and help

them see the value of having every person who is a member participate fully.

**EC:** *Tell me about some of the roles you have held in NSGP.*

**DW:** I served as President from 1972-74, an inconspicuous tenure. I went on in other roles until 1989 when Suzanne Cohen asked me to become Chair of the Liaison Committee, which I saw as an opportunity to spread group therapy locally and, as it turned out, nationally. The Liaison Committee started by going into Dorchester and Mattapan and giving group therapy courses. I'm a city boy, and I loved that! And that work led to the Task Force on Diversity. Also, I would call people I knew and nag them to start local group therapy societies, for example in Maine, New Hampshire, Idaho, and Puget Bay in Washington.

**EC:** *But now you consult in a wider area than New England.*

**DW:** I would call it nagging, not consultation. I just help people get started. The Rochester, NY affiliate got started because Sherrie Smith and her husband were in an experience group that I led. As they were getting ready to leave, I said, "What would you think about starting a group therapy society in Rochester?" And they're still going strong. (EC note: Sherrie Smith is now the chair of the AGPA Affiliate Assembly.)

**EC:** *What else are you doing professionally?*

**DW:** I am Medical Director for the Northeastern University Physician Assistant training program which has been a wonderful and stimulating experience for many years. Also for the past five years I have been consulting on PTSD for the VA. I have seen over 500 veterans in my office, evaluating them for PTSD. I was gratified to see the recent issue of JAMA had five articles plus an editorial on trauma. Shame is a central issue in trauma. It is shame that makes us want to go back to the trauma, that keeps us attached to it. You see the attempts to undo the shame in the symptoms—the flashbacks and the nightmares.

At the recent International Association of Group Psychotherapy meeting in Istanbul,

*continued on next page*



I presented a paper on this theme which I co-wrote with Reverend William Mark. I hope to present it again at AGPA and APA next year.

**EC:** *Do you do trauma work in groups?*

**DW:** No, I'm not going to start a new group at 80!

**EC:** *What advice would you give younger group therapists who feel discouraged about starting groups and keeping them running?*

**DW:** I can understand their frustration because so much of health care is managed. I wish I had an easy answer. It's colleagues that refer patients to us. People at NSGP should be our best referral sources, although that also makes us competitors. If you believe in group therapy, you can set up a system where you work for patients to be referred for group. We saw that at Mt. Auburn.

**EC:** *So many young professionals nowadays are in private practice and are all alone.*

**DW:** It's being alone that is the hardest part. When I think back, it was being with people in the educational process that was so precious to my developing sense of self as a therapist.

**EC:** *What's next for you? What irons do you have in the fire?*

**DW:** I'm just trying to keep my irons from getting too rusty! I think I've been very fortunate in my professional life in having several areas of interest that overlap and bring me in contact with all kinds of people. And I am very fortunate to have NSGP.

**EC:** *NSGP is very fortunate to have you. Thanks so much!*



## The Inner Circle



By Ben Weinstein, Ph.D.

We didn't know, when we opened the door to Eleanor Counselman's office and stood silently together for the first time in September 2001, what we were getting into. We couldn't have known. We were seven students in various stages of the NSGP Training Program. The program, like some strange academic phoenix, was in the process of being reborn, rising from the ashes of what people around us called "the old training program" with strained smiles. But we didn't know about all that then.

We only knew that we wanted to learn about group therapy and, to do so, we were participating in an experience group, the storied "T group." And that was almost all the seven of us had in common. Or so we thought. There is simply no way I can describe, in 500 or even 5000 words, what happened to us in Eleanor's office over those 32 weeks. Suffice it to say that we became a group.

One of many themes we kept coming back to was "who are we in this organization?" There was, we knew in our hearts, an inner circle in NSGP. The inner circle, we felt, was the space occupied by the luminaries and leading lights of the organization. What was the point of being in NSGP if we couldn't also gain access to the inner circle and bask in their glow? We felt exiled on the periphery, outside the circle.

In addition to the experience group, we also attended weekend seminars and preceptor meetings, which gave us the opportunity, in different frames, to learn about group, about NSGP, and more about each other. We also met many of those we considered to be members of NSGP's

### Reflections of A Departing NSGP Graduate

inner circle. And we kept wondering: how do we get into the inner circle?

To us, the preceptors, Oona and Helene, were NSGP's face and voice. We asked them about the inner circle and we tried to find out, in a number of different ways, if they were listening to us, if the inner circle heard our plaintive voices from outside the door.

And so the year rolled along. The experience group ended. Our helpful and responsive preceptors encouraged us to become more involved in the life of the organization, to join committees. Some of us did (those who did are still involved in NSGP; the others have fallen away to a more distant orbit). At the same time, feeling freed of some constraints imposed by the group contract, we started to become friends, and to get together on our own.

We met for lunches and dinners. We spoke about what we saw in the organization and things we wanted to enhance, to improve. There was a memorable discussion about the necessity of changing the color and appearance of the conference brochure. One of us joined the brochure committee. On the membership



Trainees 2003

committee, two of us initiated and engaged other members in a wide ranging discussion of how to make NSGP's valuable resources more open and available to newcomers. And we started to see fruits of our labor, the product of collaboration and engagement, ripe on the vine, picked and enjoyed.

We went to NSGP functions, lingering at the sides, wallflowers, wondering yet when the door would open and we would be ushered into the inner circle.

Then, we received an email telling us that as students in the training program, we were invited, free of charge, to the Garden Party and auction. None of us had planned to go. In fact, we had planned our own

*continued on next page*

barbecue, coincidentally, at that very time. And the emails flowed back and forth. What should we do? Garden party? Or our own private barbecue? Of course, the idea of the inner circle surfaced. Would there be a place for us there? Or should we stay to ourselves, without having to worry about feeling like outsiders? And then one of us sent this email: "Forget the inner circle. WE are the inner circle. Let's go."

And it was, of course, true. We are the inner circle. We sit on committees and on the NSGP board; our voices are heard and respected. We matter in the organization and more importantly, to each other. Our longing, our sense of something we weren't part of prevented us from seeing. From seeing that we are in the circle and we are our own circle. I think that learning about the power of longing and belonging is just one of many gifts I'll be taking away from my experience in NSGP. The best gift is the circle we made, our inner circle. We made it, we are it, and now I can see it.



## The Rhode Island Column

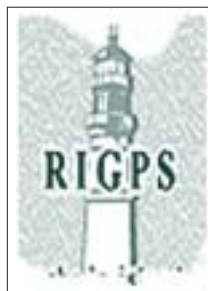
Daniel Even, MDiv, MSW

### Ormont Presentation

By the time the newsletter reaches you, we hope that a number of NSGP members will have joined us in Providence for Louis and Joan Ormont's presentation on "Recent Advances in Group Therapy" on October 17. Details about the event should have reached members on the list serve prior to October 3.

We recognize that the timing of the newsletter and our conference schedule often result in getting the word to NSGP members after the fact. Consideration is being given to planning our presentations with a sharper eye to this publication.

Members who are interested in receiving information about RIGPS events but are not getting either a



brochure or e-mail may use the contact information below to get on the RIGPS contact list.

### First President's Scholarship

Please keep in mind that the First President's Scholarship

pass allows a NSGP member to attend RIGPS conferences without charge. Other NSGP attendees receive RIGPS member rates. For more information about the scholarship passes, give me a call (401-454-2890) or e-mail me at [daniel@groupbydesign.com](mailto:daniel@groupbydesign.com)

### Affiliation Status

A year ago it was reported in this column that a disaffiliation with AGPA was under consideration by the RIGPS board. No such change is now on the table. Continued strengthening of the links with NSGP remains a priority.



## Why We Do What We Do: Understanding Group Therapists' Choices In the Clinical Moment

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# ANalyze This

This question and answer column appears regularly in the Newsletter and addresses complex dilemmas in group therapy. Featured are case vignettes presented by NSGP members, with responses by senior clinicians. If you have a question you would like considered for this column, please submit a case vignette of 400 words or less to Joe Shay, Ph.D. through the NSGP office, or via email to [nsgp@bitwise.net](mailto:nsgp@bitwise.net). (Please remember to preserve the confidentiality of any group members described.)

## Dear Analyze This:

*My female co-therapist and I had been leading an outpatient process group for two years when we faced a complicated dilemma. Soon after a new member, John, was admitted to the group, another group member, Jane, who had been in the group for about a year, had a strong reaction to him. She said that John reminded her of a sexual perpetrator, and that she was unsure whether she could remain in the group if John remained.*

*How can a therapist balance the need to fill a group against the responsibility to form a group that will work?*

*John was a 40 year old man who worked as a mental health professional for an agency in a neighboring state. He had recently been divorced for the second time, was moderately depressed, anxious about work conflicts, and tended to isolate himself. His relational skills were somewhat underdeveloped. John's group persona (even after his "trial by fire" with Jane) was that of an interested, humored Buddha, with hands folded over large belly, smiling at whatever interaction was taking place in the group. He had good insights, although his somewhat zealous attachment to psychological theory at certain times prevented him from the kind of empathy that he was able to exhibit at other times.*

*Jane, a married women with children, had been referred by a colleague who had been treating her for several years for PTSD symptoms resulting from an*

*early history of sexual abuse. She was bright, articulate and interacted readily with others. She had noted her traumatic childhood to the other group members, without articulating details. In group, Jane tended to be controlling of group interactions. She had previously worked in a process group facilitated by my co-therapist and another male therapist. During that group Jane had also singled out a male participant, fearing that he was a sexual perpetrator. She had successfully chased him from that group.*

*In the weeks following John's entry, Jane reported increased PTSD symptoms, among them hyperarousal, intrusive thoughts, and troubled sleep which she attributed directly to John's presence. Not wanting to have the outcome of the previous group repeated, not willing to have John be "killed off" and shamed, but concerned about her ability to tolerate her increased symptoms, we arranged for supervision with a trusted, senior clinician who encouraged us to take up the dilemma with Jane. We then met with Jane separately from the group. Although, on the one hand she could appreciate the dilemma, on the other she wanted us to remove John immediately. We gently but firmly held the position that this was a conflict to be worked out in the group sessions (and with her individual therapist) unless the symptoms that she described became overwhelming to her, in which case she might consider leaving the group.*

*We also met with Jane's individual therapist which felt like a delicate process. While we briefly mentioned group-destructive dynamics, we stayed focused on Jane's increasingly troubling symptoms, and not on characterological issues. We leaned toward having Jane terminate with the least possible shame. Jane did terminate.*

*This was a real balancing act for us. We wanted to preserve the safety of the group, protect John, prevent Jane from controlling the entry gate, and maintain a good relationship with the*

*individual therapist who had made the referral initially. We welcome any thoughts.*

## Balancing on the High Wire

### Dear Balancing:

First, congratulations on an impressive balancing act. I think you succeeded in your goal of addressing the needs of all the individuals involved as well as those of the group. You also showed keen clinical wisdom when you decided to seek consultation around this sensitive issue. I think meeting with Jane was necessary and containing for her and for the group. It gave you an opportunity to respond to Jane's concern, which is validating, while gently insisting that the dilemma remain with her (although the impact did and will raise issues for the group). Jane reached a crossroad in group therapy: to work through a rigidly held projection or to stay at an impasse. As group leaders, you responded to this issue thoughtfully and thoroughly in an effort to guide Jane and the group toward new and healthier directions.

If there was a time when you could have tipped the balance differently, it may have been prior to Jane beginning the group. Given that Jane "killed off and shamed" a member of a previous group, and given that the best predictor of future behavior is past behavior, my hunch is that a thorough screening interview would have raised red flags. It is imperative to include an in-depth discussion of scenarios such as these in the screening interview. In screening Jane for a group, I would be interested in assessing the degree of insight she developed with regard to herself and this dynamic since leaving the previous group and in her work in individual psychotherapy. I would be interested in how thoroughly she worked through this projection and how she might better anticipate this relational reenactment and employ healthier interpersonal skills and higher level defenses. Further, even seasoned therapists have difficulty saying "no" or even thinking skeptical thoughts about women with sexual abuse histories in an effort to avoid being put into or experiencing





*“Ultimately, ideally, each member will recognize the existence of these very same intolerable qualities within themselves and arrive at self-acceptance in their universality.”*

oneself in the role of the abuser. It may be that, in an effort to be “healing” instead of “hurtful,” the group leaders decided that Jane could benefit from participating in group when evidence indicated otherwise. With courage reinforced by the therapists, the group members can make use of Jane’s departure. For example, what is it about John that may elicit fear or sadism in others? Is it his secrecy, his ever present yet somewhat disconnected smile, his emotional unavailability? Was there a wish in the group to cast John out, ejecting all aspects of a potential perpetrator with him and avoiding their own capacity for sadism, anger, fantasies of retaliation, and perversions? Do the group members feel relieved (or frightened, or guilty) that Jane is no longer in the group? What are their fantasies about why she left? Is it their fantasy now that the vulnerable member has left, that they will be invulnerable? Or, did they perceive Jane as aggressive or destructive? Ultimately, ideally, each member will recognize the existence of these very same intolerable qualities within themselves and arrive at self-acceptance in their universality.

**Debora Carmichael, Ph.D., CGP**

### **Dear Balancing,**

First, kudos to the group therapists who were willing to go public with their dilemma and thus inform others of how best they coped with it. Oftentimes, fear of being embarrassed and publicly shamed looms large in one’s mind and indeed, this may occur. But we all profit from remembering that that which links us is greater than that which divides us and that that which we fear most in others is frequently, that which we fear most in ourselves.

We all live in glass houses and some of us conduct groups in them.

Having stated that, I have several questions, concerns, and criticisms of how the situations involving Jane have been handled by the group leaders, in light of their stated intent “to preserve the safety of the group, protect John, prevent Jane from controlling the entry gate, and maintain a good relationship with the individual group therapist.”

To begin, Jane “killed off” a group member in a previous group. What was that all about? Why did the other group members not protect that man? Was he a (self) sacrificial victim? How did the leaders deal with this dynamic? How was Jane perceived/experienced?

I imagine that whatever the contributions were, on whatever level, the group leaders defined her as a murderer, and Jane learned she could get away with murder. It seems that the safety and integrity of that group had to have been severely compromised, if not entirely destroyed by that complex death.

The leader’s concern about gate keeping and Jane, in the present group, while extremely important, misses the more significant dynamic: the life and death, figuratively speaking, of individual group members, indeed the life and death of the second group itself are at stake. Another murder is in the offing.

From my vantage point, the leaders’ approach is far too light-handed and non-confrontational—what are their experiences, perceptions, and understandings of Jane? Why are they not dealing with, what appear to me, obvious characterological issues for Jane? If Jane has learned

*“ To eliminate someone who reminds us of an enemy is not a functional defense.”*

that she is (consciously) fragile, weak, sick (her symptoms) and can not deal directly with people who are traumatically evocative for her, yet unconsciously finds ways to destroy such persons, then she has learned that will do her only harm in the long run. To eliminate someone who reminds us of an enemy is not a functional defense.

It does not appear that attempts were made to assist Jane and the other group members to address and deal with the complex group dynamics with which we are presented. Nor does it appear that direction was provided by the leaders to assist group members to learn about their effect on each other (in terms of how one presents oneself, for example). Nor does it appear that efforts were made to provide a culture in which the very difficult characterological work could be approached in the group.

If such is indeed the case, unless Jane made significant headway in appreciating the extent of her destructive defensive operations, I see no way she would be able to remain in the group. My hope would be she would have an opportunity in her individual therapy to address these concerns.

Depending on how and what was openly discussed in group by the group leaders, even if Jane were not able to do more of the character work in the group, an empathically presented and held cognitive frame might have been established for future work by the remaining and, indeed, future group members.

We are all vulnerable and we all have strengths. Perhaps it is particularly true in groups, for both leaders and group members, that while we can learn to appreciate why stones are cast, it is equally important to remember that even friendly fire kills.

**Scott Reinhardt, Ph.D., CGP**



## Joy and Aliveness

*continued from page 1*

clinical situations they wished to explore. As we listened to these clinical accounts, our heightened body awareness enabled us to access all manner of fantasies the processing of which led to the unraveling of clinical impasse.

A warm up session preceded the discussions described above. Suzanne took us on a tour through our bodies with nary a crevice overlooked. It is amazing how much unnoticed tension we carry in our bodies, each of us probably having an organ or body part that holds the greatest strain. My neck seemed to be the winner! Then, before we knew it, with the aid of some unfamiliar and evocative music, we were moving around the room. Sometimes in our own space, sometimes gliding by one another, always feeling the energy in our bodies, we middle-aged folk seemed like characters from either Fantasia or the Joffrey ballet. Seeing each other so free in our bodies, so expressive in our movements, released a generosity of spirit that permeated the room. As Suzanne instructed us to look into each other's eyes as we moved smoothly by one another, a surge of loving feelings passed through my body.

Suffused by these overwhelmingly positive feelings, I suddenly realized in a way that I never had before why psychotherapy requires a framework and agreed upon boundaries. If we were, unrestrainedly, allowed to overcome our inhibitions and judgments and conflicts, we might be so flooded by positive feelings that none of us could really stand it. These positive feelings would catapult over and through our existential aloneness to a passionate connectedness that perhaps we couldn't tolerate for more than a few seconds. It would be like looking too long at the sun.

The workshop exercises produced a wonderful synergy between heightened bodily awareness and innocent childhood playfulness. Suzanne created an expansive, celebratory atmosphere that somehow blocked out the strife and envy and constriction that are also a part of life.

I left the workshop reminded of the blessing of life and determined to find appropriate ways to bring this dimension of life more into my work.



### Spring Conference Review

## The Ghosts and Ancestors in our Lives

by Barbara Keezell, LICSW, CGP

On a drizzly and dreary Saturday morning at NSGP's annual June conference, I gathered with 12 other people to attend Bruce Bernstein's workshop entitled, "Ghosts and Ancestors in the Imaginative Life of the Therapist." Dr. Bernstein led a thoughtful, creative, and emotionally stimulating workshop in which participants struggled with the concept of "ghosts." He became intrigued with this idea after September 11 when his patients in New York who had lost someone continued to talk about feeling haunted by those who had died.

As Dr. Bernstein informed us, ghosts in literature and movies (Shakespeare, Dickens, Ibsen, Hawthorne, children's stories) have generally been portrayed as revenge-seeking (cf. Hamlet) or as guiding a conversion (cf. A Christmas Carol). Ghosts have also been seen not just as figures, but also as dead ideas, as well as symptoms of paths not taken or harbingers of future possibilities. After review of the psychoanalytic literature, there was discussion about whether ghosts were real or imaginary as well as what it means to

be "haunted." I'm not sure there was any clear consensus around the definitions, or how there could be for that matter, but one hypothesis put forward was that mental health is a state in which the past enriches the present rather than the present being haunted by the past. Dr. Bernstein referred to Dr. Steven Mitchell who views ghosts as a piece of the past filled with passionate intensity split off from present experience and that ghosts therefore empty the present of vitality and depth.

After this intriguing discussion, Dr. Bernstein led us in a guided imagery, which I found to be the most emotionally provocative aspect of the morning. He guided us back to an important place or event in our lives and encouraged us to have a significant person (or ghost) in our lives respond differently to us, through words or touch. On the eve of Father's Day, it was not surprising that most of the "ghosts" revisited were fathers. I too returned to interactions with my long - since deceased father, to scenes that took place at the dinner table when I was six and eight. In this guided fantasy, I had a wonderfully altered interchange with my father, where we both in fact responded quite differently to one another. It was quite exhilarating. For me, this is an experience of the workshop that will remain with me, but in an enriching fashion rather than a haunting one!



Debra Filiurin, Rick Tomb, & Charlie Glazier



At A Glance  
The NSGP Album

*22nd Annual NSGP Conference*  
*June 2003*



Geri Reinhardt & Kelley Bothe



Joel Frost & Sara Emerson



Rich Falzone & Sam Gloyd



Tracy McNab & Mrs. McNab, Scott Rutan, Lena Furgeri & Don Wexler



Walter Stone, Macario Giraldo & Jim Leone



Deb Carmichal & Eva Harris



Joyce Shields & Scott Rutan




Lucinda DiDomenico & Naomi Dogan


*Keepin' it together!*


# Progress Notes

**W**ith this issue, we're introducing this Progress Notes feature. In it, we hope to include a variety of items that reflect progress for NSGP members or committees. Indeed, this section itself will show progress as we tinker with it along the way. Please let us know ([nsgp@bitwise.net](mailto:nsgp@bitwise.net)) if there's anything you'd like noted, whether an article you've published, a speech you're giving, a notable change in your life.

 **Lauren Kopans, Ph.D.** and her husband, Dave, have a delightful new daughter, Aliza Goldie Kopans, born on August 11.

 Despina and **George Stavros, Ph.D.** are thrilled to announce the arrival of daughter Kyri, born on September 10th.

 **The Conference Committee** is still accepting proposals for the June, 2004 conference. Please call the office (617-484-4994) for details.

 **Keep your eyes open** for several By-laws amendments coming your way for a vote. The Board recommends a **Yes** vote for this group of amendments.

## Training Committee Report

By Debora Carmichael, Ph.D., CGP

The Training Program graduated Annie Weiss, Ben Weinstein, Kim McNamara, and Barbara McQueen from the Year Two Training Program. Also graduating in June were Rich Falzone, Lucinda DiDomenico, Sam Gloyd, and Naomi Dogan from the Year One program. Congratulations on this impressive accomplishment and sincere thanks to Jim Leone for welcoming us into his home for this occasion. The Training Program launched the 2003-2004 year with an elegant Beginning of the Year Dinner and Orientation held at the home of Helene Satz who graciously hosted. We are excited to welcome the new students and are thankful to have so many outstanding faculty return. Our new faculty members are Nina Fieldsteel, David Goldfinger, and Barbara Keezell. Barbara is leading a consultation group to help students launch new psychotherapy groups. Judy Ullman is the newest member of the Training Committee, having joined in July. We're looking forward to another exciting and successful year!

## NSGP Foundation Offers Scholarships

The Northeastern Society for Group Psychotherapy Foundation, Inc. has established a scholarship fund chaired by Arnie Cohen, Ph.D. and Lise Motherwell, Psy.D. The Foundation has given several scholarships to students this fall for the Training Program and will offer partial scholarships to "The Art of Possibility" event with Rosamund and Benjamin Zander to be held in November. The Foundation is offering limited scholarship monies to students and early career group therapists interested in attending the Northeastern Society for Group Psychotherapy conference June 2004 or who are in the NSGP Training Program. Scholarship money is also available to students in other group training programs in the Boston area, although NSGP students receive first consideration. Applicants should send a statement of interest and financial need of not more than 200 words to Arnie Cohen or Lise Motherwell, Co-Chairs, NSGP Foundation Scholarship Committee, c/o NSGP Foundation, Inc., 536 Pleasant Street, Belmont, MA 02478 or email your request to Lise Motherwell, Psy.D. at [motherwell@post.harvard.edu](mailto:motherwell@post.harvard.edu).

## NSGP Foundation Activities

At its annual business meeting in October, the Board will vote in a new slate of officers: Kathy Ulman, Ph.D. as Chair, Suzanne Cohen, Ed.D. as Vice Chair, and Walker Shields, M.D. as Secretary/Treasurer. Lise Motherwell and Anne Alonso will continue as a members-at-large along with Cecil Rice, Rick Tomb, ex officio as Past President of NSGP, and Joyce Shields, ex officio as President of NSGP. They will be joined by Alan Witkower and Sam James who have agreed to become members-at-large. Miguel Leibovich has resigned from the Board to pursue other interests. We thank him for his work on the Board and continued interest in supporting its goals.

The NSGP Foundation raised more than \$5000 at its annual garden party and silent auction in May. More than 50 people attended the event which was held at Anne Alonso's home in Cambridge. Items donated to the auction included cabaret singing by Pamela Enders, a sushi dinner prepared by Naomi Dogan, cooking lessons by Anne Alonso, Scott Rutan's book, Psychodynamic Group Psychotherapy and a NIA Workshop donated and run by Suzanne Cohen. One lucky winner of the door raffle received a dinner for two at the Temple Bar in Cambridge. Those of you who were not able to attend may still contribute to the Foundation. Just send a check to NSGP Foundation, c/o NSGP, PO Box 356, Belmont, MA 02478, or for a brochure and more information contact Pamela Dunkle at 617-484-4994.

The funds raised help NSGP to pay for training scholarships, research, and education in group therapy. This insures that patients who need long-term care at low cost will have well-trained and informed clinicians who can provide them with this service, and that the public can be educated about the efficacy of group therapy. This year we gave scholarships to six students in the NSGP Training Program and to several students who attended the June conference. The next deadline date for tuition scholarships is January 1st, 2004.

Please submit applications to:

Lise Motherwell, Psy.D.,  
email: [motherwell@post.harvard.edu](mailto:motherwell@post.harvard.edu)

# Exploring Core Life Dilemmas

by Thomas Schweitzer, Ph.D.

For three years now, I have been leading a psychotherapy group which I created based on concepts that may be unfamiliar to many readers, but which may have applicability to the groups you routinely facilitate.

This "Life Dilemmas" group is derived from George Kelly's *Psychology of Personal Constructs* (1955). It has been developed at Two Brattle Center within the context of the Evening Program, a comprehensive group psychotherapy program where up to 10 patients participate in three or four groups daily, five days a week, for a three-month cycle. The goal of Life Dilemmas is to help the patients engage in dynamically growing relationships rather than retreating to the ruminative, often corrosive self-absorption and hostile distortions of others' intentions which their presenting constructions confine them to.

Using Kelly's notion of bi-polar constructs, we attempt to elicit from each patient a succinct representation of the central dysfunctional avenue or structure of experience he or she deploys. Of course, such an undertaking can only hope for a very rough approximation. We begin the group by asking each patient to "imagine a friend (that is, an imaginary friend) who knows you very intimately and very sympathetically, perhaps better than anyone really could know you," and imagine what adjective that friend would use to describe you. Then we ask, "what is the opposite for you of that adjective?" Then, each week, one or sometimes two group members present their bi-polar personal construct for analysis with the group. Someone from the group acts as "scribe" and writes the member's construct pair on a large sheet of paper on an easel. The member then responds to a fixed sequence of questions. Construct labels elicited almost always have an apparent valence and the first question is: what are the advantages of the negative pole? The next question is, what are the disadvantages of the positive pole? The member is then asked what are the disadvantages of the negative pole? And, finally, what are the advantages of the positive pole? These questions are intended to focus on the hypothesized

core dilemma facing the patient and to manifest how neither way of construing works for very long and so leaves the patient "stuck" and retreating to depressed rumination.

An example of the Life Dilemma Procedure is taken from a typical patient (mid-thirties, financially well off). He provided the construct smart versus stupid and later changed it to smart versus nothing. The advantages of being smart were 1) things come easily and 2) it's good to know things. The disadvantages were 1) you can't live up to it, 2) you won't put in an effort when things get harder, 3) accomplishment feels more like something given instead of something done, and 4) there's not a lot of room for praise. The advantages of stupid/nothing were 1) don't know things are bad, 2) low expectations for life, 3) have to work hard, and 4) greater sense of achievement and pride. The disadvantages of stupid /nothing were 1) get left behind, 2) other people get concepts you are left out of, and 3) not living up to own expectations. During the discussion, the patient noted he was identified by family as smart but not as handsome, friendly, or hardworking. This construction complex had significant and contradictory implications for work satisfaction and, more importantly, for establishing a successful relationship with a significant other. In the session, the therapists identified anxious friendship-seeking as well as fear of rejection as possible expressions of the patient's "dilemma" which might be manifest in other groups. Group members were encouraged to explore these possibilities in other groups when the opportunity arose.

The clarity of what is revealed directly or through interpretation is less important than each group member's effort (public or private) to understand the difficulties of his or her presenting colleague. As each member moves through the questions, the remaining group members offer suggestions and feedback. Often these comments begin as suggestions to adopt an adjective from the commentator's own lexicon or from the dictionary rather than an exploration of the meaning of what has been volunteered. Group members are explicitly encouraged to pursue the latter rather than the former. The therapists offer comments as well to model the procedure



and to provide interpretations. As the group proceeds, group members increasingly manage the process themselves.

Judging by patient's comments and behavior, the Life Dilemmas format provides a protected environment in which new ways of construing others and oneself may be tried out without so much fear of defeat that the opportunity is avoided. Typically, most group members' concluding evaluations of Life Dilemma praise the group for the opportunity to see new aspects of experience. However, a substantial minority complains that the point of the group isn't clear. Other staff in the evening program routinely report that patients take the material from Life Dilemmas into other groups and also become progressively more open to their colleagues' experience.

The methods described here are flexible and are supplemented by others depending on the size of the group. For example, in a smaller group we asked each patient to share his or her own personal bi-polar construction of the dilemma of every other member of the group.

Methods such as these might also be used in time-limited free standing groups but would require the patient's capacity to take on small homework assignments. They might also be used early in ongoing groups as an introduction to the crystallized (construed) experience of the effort to understand someone else in his or her own terms.



*"...the Life Dilemmas format provides a protected environment in which new ways of construing others and oneself may be tried out without so much fear of defeat that the opportunity is avoided."*





**Northeastern Society for Group Psychotherapy, Inc.**

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the newsletter fall 2003

N S G P

Northeastern Society for Group Psychotherapy

## 2003-2004 NSGP Events Calendar

Oct. 25, 2003	<b>Board Retreat</b>
Oct. 26, 2003	<b>NSGP Breakfast Club</b> "Wellness Groups" by Gretchen Schmelzer
Nov. 23, 2003	<b>Special Event</b> "The Art of Possibility" with Rosamund and Benjamin Zander (includes a morning workshop with Rosamund, a discussion with Benjamin, and a Mahler concert with the Boston Philharmonic conducted by Benjamin Zander)
Dec. 7, 2003	<b>NSGP Breakfast Club</b> "Personality Disorders go to the Movies" by Joseph Shay
Jan. 25, 2004	<b>NSGP Breakfast Club</b> "A Fresh Approach to Post-Traumatic Stress (PTS) Phenomena" by Don Wexler and William Mark
Feb. 23-28, 2004	<b>AGPA Annual Meeting</b> "The Healing Power of Groups: Generating Hope and Respect"
Mar. 28, 2004	<b>NSGP Breakfast Club</b> "Peer Supervision Groups: Members in Search of a Leader OR Leaders in Search of a Member" by Eleanor Counselman
Apr. 25, 2004	<b>NSGP Breakfast Club</b> "Transitions in the Life and the Work of the Group Psychotherapist" by Alan Albert
June, 2004	<b>NSGP Annual Conference</b>

**For further information or to sign up call Pamela Dunkle at 617-484-4994.**