

the newsletter

N S G P

Northeastern Society for Group Psychotherapy

Volume XXIX, Number 1

Spring 2008

Letter from the President



My two year tenure as President is almost up and although I didn't achieve all I'd like peace on earth and an end to world hunger—I am very pleased about what

we have been able to accomplish within NSGP. By the time this newsletter arrives on your doorstep, our new website should be up and running! Please check it out at www.nsgp.com. This was a Herculean effort and I want to thank the Board for its support and Eleanor Counselman and Joe Shay for their participation and unflagging assistance with this project! I am hopeful this new site will make us more visible as an organization. It will also be more userfriendly which will make it easier to locate an appropriate therapy group, both for clinicians and potential clients. For those who have their groups listed, please make sure the information is up to date and, for those who don't, now is the time to upgrade to clinical member so you can list your groups. We may make additional changes to the site as we proceed, such as listing the directory online which would eliminate the need to print a new one every two years. For now, we decided not to provide for online registration or payment since what was required for this was financially prohibitive.

We now also have an NSGP listserv, again thanks to Eleanor Counselman's efforts, and people have already taken up some interesting topics on it. If you're unsure how to sign up, Eleanor has been most gracious in assisting folks with this. Although you can't advertise your groups or clinical practice on the listserv, if someone is seeking a therapist for a particular patient, the listserv offers the opportunity to respond and thereby gain a referral. More importantly, it's a way for us to stay connected!

I am also thrilled to announce that the proposed by-laws changes have passed by an overwhelming margin, so, with the continued screening of the Nominating committee, both Associate and Affiliate members will now be able to serve as members-at-large on the Board. This enables the Board to represent and be served by a larger portion of our membership. We are hoping this may enable the organization to feel more open and inviting while also adding new blood, energy, and ideas to the Board.

The Consultation benefit, new as of last summer, is available to all members, and is slowly becoming more known to folks. (See the article on page 13 in this newsletter). This benefit allows members to receive one free consultation a year from a senior NSGP clinician. If you want to avail yourself of this benefit, please contact the NSGP office at 617-484-4994 for more information.

The Breakfast Club continues to be a popular series and will be offered again next year. The Referral Network put on an intimate event in January that offered an opportunity for great exploration. The NSGP Foundation will hold its annual spring gala on Sunday, May 18th. I hope you can all join us for a fun event. You can see photos elsewhere in this newsletter of two of the auction items, the 2nd Annual Winter Games and the Dinner with Shakespeare event. Both were marvelous experiences!

While NSGP has been making great strides in some areas, the Board is continuing to examine how we envision ourselves in five, ten, or twenty years. This is obviously not a process that will happen quickly, nor should it. We are proceeding thoughtfully. In that vein, we are considering some changes to the annual conference and would welcome any input. We are also doing yet another site search to see if another venue might meet our needs but be more cost effective.

With rising costs, we want to be prudent about the financial stewardship of the organization. As we consider broadening the scope of who we reach out to, we will utilize the Special Event as a bellwether to examine the response and impact of co-sponsoring an event with those who run other types of groups.

The Leadership Task Force, spearheaded by Lise Motherwell, will also be reporting back to the Board shortly. We are planning to offer training to help people feel comfortable moving into leadership positions not just within NSGP, but within other areas of their lives as well. This year's conference will include offerings on developing leadership skills.

(continued on page 4

INSIDE

Page 2... Letter from the Editor

Page 3... Second Annual Winter Games

Page 4... Interview:
Meet David Hawkins

Page 6... AGPA 2008 Conference

page 7... NSGP Retreat

Page 8... Analyze This

Page 9... Breakfast Club

Page 9... An Evening of Shakespeare

Page 10. . Supervising in Groups

Page 10. . Referral Committee Sponsors Networking

Page 12. . A Freedom Rider Looks Back

Page 13.. NSGP Consultation Service

Page 13.. Join the NSGP Listserv

Page 14. . Progress Notes

Page 15. . Cartoon Caption Contest

Back Cover: 2008 Events Calendar

NSGP Newsletter Committee

Chairs Joseph Shay, PhD, CGP, FAGPA Lise Motherwell, PsyD, CGP, FAGPA

Members Catherine Bohn, PsyD Helen Hwang, PhD

Barbara Keezell, LICSW, BCD, CGP Photography Joseph Shay, PhD, CGP, FAGPA

Joyce Shields, APRN, BC, MS, CGP Alan Witkower, EdD Barbara Keezell, LICSW, BCD, CGP

Design Deborah Cake
DaySpring Graphics
dayspring@rcn.com

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.

NSGP Executive Board

President Barbara Keezell, LICSW, BCD, CGP President-Elect Eleanor F. Counselman, EdD,

CGP, FAGPA

Secretary Alan B. Witkower, EdD
Treasurer Eleanor F. Counselman, EdD,
CGP FAGPA

Directors Alan Albert, PsyD, CGP
Debora A. Carmichael, PhD, CGP
Arnold Cohen, PhD, CGP
David W. Griffiths, EdD
Steven Haut, LICSW, BCD,
CGP, FAGPA
Joseph J. Shay, PhD, CGP, FAGPA
Carolyn R. Stone, EdD

Carolyn R. Stone, EdD Marsha Vannicelli, PhD, FAGPA, CGP

NSGP Committee Chairpersons

Audit Steven Haut, LĪCSW, BCD By-Laws Joseph Shay, PhD, CGP, FAGPA

Richard C. Tomb, MD

Conference Katherine Wenger, LICSW Kim McNamara, LICSW

Liaison Donald Wexler, MD, FAGPA

Membership Charles Glazier, LICSW

embership Charles Glazier, Licsw

Karsten Kueppenbender, MD Newsletter Joseph Shay, PhD, CGP, FAGPA

Lise Motherwell, PsyD, CGP, FAGPA

Referral Service Debra Filiurin, LMHC, CGP

Sandy Houde, LICSW, CGP

Training Program Robert Weber, PhD, CGP, FAGPA

Kelley Bothe, LICSW, CGP

NSGP Office 617-484-4994

Office Administrator: Messages can be left at the office anytime, and will be

answered daily. Monday-Friday 9 am to 5 pm

Northeastern Society for Group Psychotherapy, Inc.

PO Box 356 Belmont, MA 02478-3201 (617)484-4994

www.nsqp.com

Letter from the Editor

Freud asserted that the ability to love and work was a sign of psychological health. Lenore Terr, a psychiatrist who specializes in childhood trauma, suggests that the ability to play, in both children and adults, is just as important. Its importance is captured in Winnicott's statement, "It is in playing and only in playing that the individual child or adult is able to be creative and to use the whole personality, and it is only in being creative that the individual discovers the self" (*Playing and Reality*, 1971).

Group therapy is a great venue for serious and not-so-serious play. Clients who come to learn about themselves, to connect with each other, to learn to trust, and to heal from tragedy and pain benefit from humor, metaphor, verbal banter, fantasy, and other forms of play. In fact, researchers have found that play helps develop emotional regulation, social skills, and the brain (especially the limbic system and cerebellum). Play practitioner Fred Donaldson writes that play is a universal training course and language of trust for both humans and animals: "The belief that one is safe with another being or in any situation is formed over time during regular play. Trust is the basis of intimacy, cooperation, creativity, successful work, and more" (Donaldson, www.nifplay.org). All these skills are crucial to emotional well-being.

Our groups are a place where our clients can play and take risks. Through interactions, playful and serious, and within a safe playground, clients learn to trust each other, develop intimacy, and open possibilities for themselves. I am always impressed at my clients' abilities to laugh, banter, and connect in the midst of deep pain.

Psychotherapy is serious work, but we, as clinicians, should not forget to play. Erik Erikson wrote, "[Plato] sees the model of true playfulness in the need of all young creatures, animal and human, to leap. To truly leap, you must learn how to use the ground as a springboard, and how to land resiliently and safely. It means to test the leeway allowed by given limits; to outdo and yet not escape gravity. Thus, wherever playfulness prevails, there is always a surprising element, suggesting some virgin chance conquered, some divine leeway shared. Where this 'happens,' it is easily perceived and acknowledged" (Toys and Reasons, 1977). Let us continue to leap together and discover the unexpected.

> Lise Motherwell, PsyD, CGP, FAGPA Co-editor, Newsletter

Co-editors Joe and Lise will alternate the Letter from the Editor in this space.



Wild things ... we'll make your heart sing ... You'll make every group GROOOVY

Come and get groovy at

the 27th Annual Regional Conference Northeastern Society for Group Psychotherapy June 13, 14 & 15, 2008 Wellesley College, Wellesley, MA

EXCELLENCE IN LEADERSHIP Understanding Ourselves & Others in Groups

Special Presentation

GROUPS GONE WILD: THERAPISTS GONE MISSING?

Joseph Shay
Eleanor F. Counselman
Scott Rutan

Demonstration Group	THE JOHARI WINDOW
A VIEW OF THE GROUP AND THE SELF	Group leader David Hawkins

and many more engaging workshops

CE credits, CGP Certificate Program, partial scholarships & discounts

Come for a half day, full day, or all three days

www.NSGP.com

Include a photo copy of this ad in lieu of administration fee

The Second Annual Winter Games



Barbara Keezell and Pamela Enders



NSGP group leaders celebrate



Arnie Cohen, Alan Witkower, and Karsten Kueppenbender

The President's Letter (continued from page 1)

On a sadder note, you have probably heard that Pamela Dunkle, our business administrator for the past nine years, left at the end of March for another position closer to home. We are very distressed to have her leave since she's been such an integral part of this organization. It's hard to imagine NSGP without her at its center. I know I am not alone when I express my enormous gratitude and appreciation for all she has done for us in every sphere of NSGP, and all with warmth, wisdom, and aplomb. She has truly been the "right hand woman" of this organization! I also know I'm not alone when I wish her well in her new endeavor.

Looking back at my first President's letter, when I talked about pushing ourselves outside our comfort zones (and had thought of going into the witness protection program rather than having to write this column), I see, once again, how tackling some of these difficult topics helps us grow. NSGP continues to evolve (and me with it!) and I am proud to be a member of this organization. I know I will leave the Board and the organization in terrific and highly competent hands when I step down and Eleanor Counselman becomes the new President. It has truly been an honor to serve as your President and I have been privileged to have such a wonderful, supportive, and active Board. I'd like to thank them and all of you for having given me this extraordinary opportunity.

Barbara Keezell, LICSW, BCD, CGP President, NSGP

Johari Window model known unknown by self by self 1 2 known open/free blind by others area area tell celf-disclosure/evoos unknown hidden unknown by others area area 4 3 sign alan chapman 2001-4 based on Ingham and Luft's Johari Wi

Interview

Meet David Hawkins

Demonstration Group Leader "The Johari Window: A View of the Group and the Self"

Interviewed by Marsha Vannicelli, PhD, CGP, FAGPA

Dr. David Hawkins' Demonstration Group, "The Johari Window: A View of the Group and the Self," promises to be a wonderful learning opportunity presented by a highly distinguished member of the group therapy community, with commentary by two senior colleagues, Suzanne Cohen, EdD and Peter Taylor, PhD.

In Hawkins' own words, "the Johari window (see figure) is a useful tool for orienting new members to the work of a therapy group. It suggests from the outset that knowing and being known are central to the therapeutic task, that revealing information about oneself and giving and receiving feedback will be important tasks, and that one can expect to have unconscious material perturbed into awareness by the process of the group."

Intrigued after reading his abstract, I interviewed Dr. Hawkins.

Marsha: As a psychodynamically trained therapist, how and when did you come to incorporate this model into your way of working clinically?

Dr. Hawkins: I was exposed to the concept of the Johari Window in a group course given by Martin Lakin during my residency. Last year, as I was writing my plenary address for the AGPA institute, I thought of it again as a useful tool for people to use.

Marsha: So it has always been in the background and is recently a more self-conscious part of what you do?

Dr. Hawkins: Yes. I use it in pre-group interviews where I often draw the diagram for patients. It's something concrete to look at while I talk about exchange of information as an important part of being in the group.

Marsha: I like the idea of your making it so interactional.

Dr. Hawkins: Sometimes I even ask patients if they want me to sign it — "in

case I ever become famous"—and sometimes they do! Clearly it can function as a transitional object for an anxious new member.

Marsha: In what ways does your approach add to a more traditional interpersonal/ psychodynamic therapy model in terms of what you do in the group itself and in terms of understanding transference and countertransference?

Dr. Hawkins: This model doesn't necessarily alter my way of working, but if it seems useful, I might bring it into the group. When I do, it may tend to shift my interventions away from the countertransference-transference field and more towards the interpersonal.

Like most psychodynamic therapists, however, I definitely feel that we need to pay attention to both transference and countertransference. And I think this model can help sensitize us. Regarding transference, we all have a basic need to really know our parents. In keeping with this, our patients want to know and to be close to us (their therapists), but also defend against it. So I try to be alert to whether or not patients are trying to get information about me. In terms of countertransference, the model helps to highlight my awareness about what I am and am not revealing about myself. I think of Jerry Gans' writing about patients' efforts to avoid knowing about the therapist's shame. I wonder at times if I am trying to keep a part of myself hidden; and how that may limit the group members.

Marsha: Perhaps also related to shame?

Dr. Hawkins: Yes. Recently, for example, my cell phone uncharacteristically went off during a group. I realized I was very embarrassed and was more conscious—perhaps because of the model—about whether I was trying to hide something from the group. The member who had been talking when the phone rang began a very agitated story that took the heat off me. I made the interpretation that I had interrupted his process when my phone went off, just as his parents had often interrupted him.

Marsha: Did you also suggest that he might be covering for you?

Dr. Hawkins: Yes. He said "No." But a few minutes later his affect changed, and he was able to take in part of this idea.

Marsha: So he was also hiding a part of himself in relationship to you—that is, hiding something to help you hide something that he didn't want to know?

Dr. Hawkins: Yes, about me and/or about himself. His parents are extremely sensitive to the negative reactions that they frequently cause, and he is very attuned to their reactions. Thus, I imagine he got anxious about the prospect of my getting upset and also about realizing his own feelings of anger, loneliness, and sadness.

Marsha: Back to the transference aspect?

Dr. Hawkins: Yes.

Marsha: In what ways do you see this model as usefully incorporated within other group therapy models and other kinds of groups?

Dr. Hawkins: The idea of information exchange is essential to any group that will have an interactional aspect—which means almost anything other than a lecture to a large group. The model was originally used, mainly in business training, as a way of helping people to become team members. Trainees were given adjectives to choose from, to reflect "how you see yourself, and each of the others, and how you think each of the others sees you." People who worked with this model found that it helped them enlarge the open/free area (the upper left quadrant). Once that happens and information is perturbed, data moves into one's own and other's awareness that wasn't there before. We see this in groups where, not infrequently, members become sensitized to the music of fellow members' voices and can give feedback such as "Your voice has changed, it seems like something's going on with you."

Marsha: I'm intrigued with the word "perturbed" which I also saw in your abstract. Could you define it?

Dr. Hawkins: "Stirred up" or "activated."

Marsha: Three hours is a short time to demonstrate and discuss what is unique in one's way of working, but within these time constraints, what is it that you hope the audience will have an opportunity to experience (and in what ways do you anticipate that the discussants will help with this)?

Dr. Hawkins: After a brief introduction of the model and the ideas behind it, I will lead a 45 minute demonstration group. Later I will also check in with group members about their experience of having this template in their heads, and what they may have learned that they hadn't expected.

Marsha: And the role of the discussants?

Dr. Hawkins: Suzanne Cohen and Peter Taylor both understand a psychodynamic model as well as other theoretical perspectives. I hope they will share what they saw through the lens of their own models as they observed the demo group.

Marsha: What do you anticipate that the audience will see you demonstrate?

Dr. Hawkins: I may make some interventions differently than I might on an average day, because the topic/model/situation is sensitizing me, but I am most interested in what the group members may demonstrate because they have been sensitized to this way of thinking. I'd love it if the audience could witness how information exchange enables parts of hidden stories to emerge into the group.

Marsha: Because the audience is also sensitized?

Dr. Hawkins: Yes. I think this is more likely than my demonstrating some particular technique.

Marsha: In a sense you are setting the stage, in this event as well as in your groups,for all of us to watch the play unfold?

Dr. Hawkins: Yes. And hopefully this will help both the group and the audience to stay curious.

Most of us work by ourselves and long to see our colleagues at work. One of the attractive things about a demo group is that it provides this opportunity. Some say "a demonstration group can never be anything other than a first group session." However, in a "first session" of an ongoing group (e.g., the first session with a new member), I am frequently astounded that old members will often tell a whole new part of their story, or an old part in a very different way. Because the group has changed, new information is elicited as people see and show different parts of themselves. I am hoping

that members of the demonstration group, because they are in a new situation with one another, will have a similar opportunity.

Marsha: You mean, even though many of your demo group members may already know one another?

Dr. Hawkins: Yes. In this new learning situation, and with a different model in their heads, they may see one another, and themselves, in very different ways.

Marsha: Which is a nice way of encapsulating what this model is all about —helping people to more clearly see themselves and others, as well as to learn more about the parts that are hard to show and hard to see. I am looking forward to the opportunity to watch this unfold.



Demonstration group participants:

Suzanne L. Cohen, EdD, CGP, Past President of NSGP, is currently Vice President of the NSGP Foundation and a Member of the Board of the Registry of Certified Group Psychotherapists. For nine years, Suzanne has been an Instructor of The Nia Technique, a sensory based movement practice that integrates the body with the mind, emotions, and spirit. Bringing the principles of Nia together with group therapy, Suzanne helps group members to develop awareness of body experiences so that the whole self is brought into the group process.

David M. Hawkins, MD, CGP, is a psychiatrist in private practice in Chapel Hill, NC. He is a Past President and Distinguished Life Fellow of AGPA, retiring Vice-chair of the Group Psychotherapy Foundation, Past President and Fellow of the American Academy of Psychotherapists, and a Life Fellow of APA. Since 1986, he has offered experiential training in psychodynamic group psychotherapy to mental health professionals in Chapel Hill and Atlanta.

Peter J. Taylor, PhD, CGP, SEP, is President of the Eastern Group Psychotherapy Society and a clinical psychologist, Certified Group Psychotherapist, and Somatic Experiencing Practitioner in New York City and Westchester County, NY. His interests include the application of trauma therapies to deepening relationships with self and others; the effective use of self and self-disclosure by therapists; and how what is known in the body can facilitate the psychotherapeutic process.

Gerardine Curtin, Christine Christie, & Sara Emerson



Kathy Ulman, Alicia Powell, & Vicky Pareja



Siobhan O'Neill, Karsten Kueppenbender, & Julieta Holman



Nina Fieldsteel, Priscilla Kauff, & Ramon Alonso

A Woman too Ambitious?

AGPA Conference 2008 by Sharan L. Schwartzberg, EdD. FAOT

by Sharan L. Schwartzberg, EdD, FAOTA, OTR/L

January 17

begin this article exactly one month in advance of the conference—a mixture of pre-conference jitters, loose associations, and references. After hours sorting my program preferences with competing obligations to present and serve on committees, my schedule nears completion. Not really. Ahead lay opportunities to meet with friends, colleagues, and new acquaintances. I can barely contain my excitement about the possibilities to learn and connect with people I dearly care about. I write this article as a narrative of my experience. I hope you will find my report of subjective experiences meaningful. Thank you Barbara Keezell for the invitation to write this article!

This year's conference will be very different. Anne Alonso will not be there to greet me in slow and crowded elevators. She will not be there to hold my hand as we pass in the hallways, making a few brief comments to me. Never would she let me get away with asking about her and not telling her about me. I miss Anne very much. I am feeling very grateful to be a member of NSGP and to have known her and for my colleagues and the opportunities we have to envelop practice, education, and research on group therapy. How many can say they have studied with the best? Are there feelings of envy, attraction, and fear? Yes—but what is the point if we don't seize these moments?

Anticipation—the conference raises issues of boundary regulation, invasion of

privacy, conflicting agendas, loss, opportunity, creativity, rejuvenation, mourning, closure, renewal...the list goes on. Being an AGPA and NSGP member has been safe footing for me.

February 2

My responsibilities to AGPA have deepened. I am now co-chairing the SIG Task Force with Steven Van Wagoner. Group psychotherapy has such a broad market it will be a challenge to focus on the priorities and facilitate meaningful programs. There are 18 SIGs and we are aiming to have the ranks filled by conference. I am eager, yet fear lack of sleep, being overcommitted.

February 17-23

Now at the conference.

In the basement of the hotel in a Preconference Institute with Yvonne M. Agazarian, "The Impact of 'Thinking Systems' Rather than 'Thinking People' on Group Psychotherapy." No cell phone access, no fresh air, and no windows. I question my survival in this atmosphere. The energy sustains me and I survive enlightened.

The Institute Opening Plenary featured NSGP's own Jerry Gans, "If Not Now When? Take Some Risks." I can tell you for certain I did. Siobhan O'Neill and Karsten Kueppenbender's Open Session "Surviving the Suicide of a Group Member" was, ironically, one of my best role-play experiences at AGPA. I learned, laughed, cried, and thoroughly enjoyed this with Eleanor Counselman, Cecil Rice, and other NSGPers there to support our learning. Later, I feel proud of those in NSGP who won something, including Joe Shay and Shoshana Ben-Noam who became AGPA fellows, and Eleanor Counselman who won not only the 2008 Affiliate Assemblies Award but also the



Jennifer Narvaez & Davin Quinn



Scott Rutan, Alicia Powell, & Chris Fry

NSGP Board Retreat, October 2007

election to be on the AGPA Nominating Committee.

I attend the last of three large group meetings, perhaps waiting until the last day of conference for an easy escape. Felix de Mendelssohn, from Vienna, was the Large Group leader. This was my first—needless to say, I had some fear. Group issues abound—boundary regulation, safety, inclusion-exclusion, insider-outsider, death, annihilation, suicide, being valued or rejected, racism, privilege, scapegoating, envy, subgrouping, birth, attachment, competition, challenging authority and leader, to name a few. I was drawn to examine my attitude toward authority, detect my specific drives and defenses in a situation such as this, and express my own spontaneous free associations. Resistance yields, objectives realized. Sitting next to Martha Gilmore and Haim Weinberg, friends and former Large Group leaders, I felt safe. I looked to longtime AGPA friend Jeannie Little, to ask, "What is it we are supposed to be doing here?" I looked to Martha who spoke of loss. Martha as mirror--I felt special, held. So many around us, yet they barely existed. I looked at Sarah Emerson and Deborah Cross, heard their voices express my concerns, felt safe. My anxieties diminished. For the men it seemed about competing for leadership. For me, it was more primitive. The women were there for me as mothers, the men aggressive, yet not dangerous, figures. For me, Felix was a superb father and the large group a safe mother. In the didactic portion I asked Felix, "What was it you were thinking and feeling when you decided to talk or not talk?" He explained, "I am for inclusion and it was based on my own experience and how it fit."

My experience at AGPA, being a member of NSGP, I feel included—it fits.



Karin Hodges & Walker Shields



Alan Witkower & Steffen Fuller



David Griffiths



Laura Crain, Alan Albert, & Arnie Cohen



Steve Haut, Steffen Fuller, & Carol Crosby



Annual Fundraising Gala

Hat Party & Silent Auction

FOOD, MUSIC, DRINK, AND CONVERSATION
— PLUS A CHANCE TO WIN A DOOR PRIZE!

Sunday, May 18, 2008 5:00 — 7:30 pm

Call the NSGP office at 617-484-4994 for details and tickets.

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, PhD through the NSGP office, or via email to newsletter@nsgp.com. (Please remember to preserve the confidentiality of any group members described.)

Dear Analyze This

At the beginning of a recent therapy group, June told us that just prior to delivering a major presentation at a large corporate event, she received a phone call from her beloved four year old nephew which, as always, pleased her enormously. Boosted by her nephew's call, she delivered a stellar presentation. I commented that June lit up when she described the call, as she does whenever she speaks to her nephew.

When I thought more about this, there were more "psychodynamic" ways I could have responded. For example, I might have wondered how this reflected her masked grief about not having children. We might have explored the connection to her difficulties in establishing a more permanent relationship within which she might have had a child. Or, we might have thought about her ambivalent relationship with her own mother that might have interfered with a maternal identification with her. All these and more were possible, yet I chose to say what I did.

Later in the group Bill recalled this interaction, saying that, for a long time he could never believe me when I would comment on June's lighting up or when he made other positive comments in the group. He had attributed such remarks to a kind of textbook "therapist-speak" and called them an effort to reassure patients that was unconvincing. June followed his remarks by saying that it is difficult for her to be positive about herself and her life because, in her family, such statements were perceived to be "bragging." I wondered if at such times, people were also worried about others'

envy of them, so they avoided being positive. In a later session, Bill said that over time he had come to accept what I say as authentic and genuine and this has made a difference in the way he lives his own life because of similar "positive" feedback he received from me and other group members.

This vignette got me to thinking about the place of the "positive" in group therapy. Should we welcome such material into our groups? As I write this I recall another male group member who would say, "Isn't the only reason we are in group is to talk about our problems and issues?" Freud seemed to suggest that the best for which we could hope after the resolution of "neurotic suffering" is "ordinary human suffering." Is there no hope for happiness or room for it in our groups?

Lately, I have become more acquainted with another movement within our field, that of "positive psychology" which speaks about phenomena like happiness, gratitude, forgiveness, and human strengths. How might we (or should we) incorporate such topics in our psychodynamic groups? What might the balance be between exploring and welcoming positive stories and the traditional emphasis on diagnosing, exploring, and treating psychopathology? If we should emphasize such experiences what is the best way to do it? Any ideas?

Accentuate the Positive? Eliminate the Negative?

Dear Accentuate the Positive

You raise an interesting though somewhat perplexing dilemma. As I understand your question, you are wondering whether there is a role for "positive psychology" within the psychodynamic framework of a therapy group. It seems to me that implicit in your question is the role of the leader: how and what to emphasize in a given group session and over time in the group. The term "positive psychology" has particular meaning today, and I am not sure how you are using it. However, it seems to me that recognizing the positive is one of the crucial components of any therapy or group. One of Yalom's therapeutic factors is "instillation of hope," which I believe can only occur

when people observe and experience their own and others' positive life experiences.

I believe that the focus of the leader's attention moves along a continuum of the patient's past (genetic material), the present, and the future. It is important that patients experience moments of success and are able to share them in the group. As was suggested, does that then subject them to the envy of others? Maybe, but it may "One of Yalom's therapeutic factors is 'instillation of hope,' which I believe can only occur when people observe and experience their own and others' positive life experiences."

also create hope in others that they too might experience successful, pleasurable moments in their own lives. Our group members are too often burdened by the of their histories, weight opportunities, unfulfilled potential. In finding some joy, pleasure, and success in their lives and with one another, I believe people develop a stronger platform from which to reach back into the past and mourn what wasn't and possibly what can't be. We hope to help people find joy and satisfaction in their lives. A therapy group is a perfect audience for applauding achievement, joy, pleasure, passion.

That said, what are the down sides of this approach? It is not uncommon to hear group members lament that their problems aren't as great as others, and therefore they will be silent and listen. Or they don't want to share a pleasurable moment or a success because others are struggling more. These are important perspectives and should be taken seriously, but explored in terms of the group member's family history and defensive structure. It is here that the leader needs to turn the group's attention to the affect, the past, and defenses, as well as to group-as-a-whole dynamics.

In recognizing the positive, I would like to caution you against a one-sided approach. It is important, in my view, not only to accentuate the positive but also to help to facilitate a process by which group members can locate and experience the negative as well. Sometimes it is difficult for people to allow for their "negative" feelings. In group, we hope to facilitate the capacity for our members to experience, express, and accept a range of feelings in themselves and others, including the darkest feelings.

In terms of your specific example, you model being in the here-and-now with the group and June by noting her affect when she relates the story about her nephew. To draw attention to what June does not have in her moment of delight would be to rob her and the group of an important affective moment. Associations to the past, and empty moments in the present will emerge naturally within the group's process.

Sara Emerson, LICSW, CGP, FAGPA

"Is there a way that

June's exuberance

carries with it an

implicit demand for

pure mirroring that

temporarily disables

your capacity to

make links to the

darker themes of

her life? "

Dear Accentuate the Positive

You raise an important question relevant to any group therapist: what is the place of the "positive" in our groups? For reasons we probably deserve, therapists have a reputation for being killjoys, forever pointing out the dark cloud within every silver lining, poking holes in manic defenses, and otherwise steering perfectly pleasant conversations into troubled waters.

Unfortunately, some of our most grievous failures of empathy come when we analyze rather than appreciate our patients' finer moments, for example the offering of a small gift to the therapist as an expression of gratitude. While such a gift may well carry multiple meanings, tact would dictate leading with a recognition of good intentions and maybe even saying "thank you."

In your vignette, June begins by sharing her exuberant love for her nephew, whose phone call seemed almost magically to awaken in her certain otherwise elusive self-states, including joy and enhanced professional competency. June "lights up" as she tells her story and you respond warmly by noting her brightened affect. Given that June's early development appears to have been troubled by a thwarting of normal childhood grandiosity (i.e., positivity about self = bragging), it must be healing for her to have her expansiveness welcomed rather than shamed.

That said, it is intriguing to me that later—and only later—you begin to muse about how June's kvelling might relate to her grief about childlessness, her lack of a romantic attachment, her ambivalent relationship with her mother, and so forth. Is there a way that June's exuberance carries with it an implicit demand for pure mirroring that

temporarily disables your capacity to make links to the darker themes of her life? When Bill raises the question of "therapist-speak," is he perhaps responding not so much to inauthenticity on your part as to a subtly coerced narrowing of your reflectivity?

What I'm suggesting is that June's history of having her exuberance quashed may have required her to dissociate such experiences from other parts of her mind in order to maintain her attachment to parents. If this is so, her story about her

nephew is not problematic because it is positive, but because it is isolated from the totality of who she is as a person. Her feelings about her nephew are not inauthentic, nor are they simply a defense against grief, but like an audio recording of a saxophone digitally deprived of its harmonic overtones, there is something missing.

Philip Bromberg, who writes about developmental trauma and dissociation, believes that it is the work of therapy to restore links between dissociated parts

of the mind. The first step in this process, however, is for the therapist to engage "all of a patient's self-states in relationships that are affectively responsive to each in its own terms" (2006, p. 39). Only when the patient's various self-states have been sufficiently recognized and validated will they be robust enough to tolerate the difficult and painful work of building such bridges.

To your more general question about the place of the positive in group psychotherapy, I believe it should be welcomed like any other affect or selfstate. It should not be forbidden, but neither should it be required. I love Johnny Mercer, but my problem with his famous refrain is that to "accentuate the positive" and "eliminate the negative" runs the risk of similarly communicating to our patients that certain affects and self-states are not inherently valid. This potentially reinforces dissociative "fissures" in patients whose parents demanded that they be 24 hour/day rays of sunshine rather than the complex chiaroscuros all children naturally are.

David Goldfinger, PhD, CGP

Bromberg, P. (2006). *Awakening the dreamer: Clinical journeys*. Mahwah, NJ: Analytic Press.

FREE Colloquium Series

NSGP Breakfast Club

Sunday, April 6, 2008 11 am to 1:30 pm

What you don't know could hurt you: Secrets and lies in group psychotherapy

Oona Metz Presenting

Hosted by Larry Kron and Marsha Vannicelli

For directions or to sign up, please contact the office at 617-484-4994 or groups@nsqp.com.

• The Northeastern Society for Group Psychotherapy, Inc. (NSGP) designates these educational activities for a maximum of 1.5 AMA PRA Category 1 Credit(s)TM each. Physicians should only claim credit commensurate with the extent of their participation in the activity. NSGP, Inc. is accredited by the Massachusetts Medical Society to provide continuing medical education for physicians. • NSGP is approved by the American Psychological Association (APA) to sponsor continuing education for psychologists. NSGP maintains responsibility for this program and its content. These programs provide a maximum of 1.5 credits each. Each psychologist should claim only those credits that he/she actually spent in the educational activity. • NSGP, Inc. is an approved provider of continuing nursing education by the Massachusetts Association of Registered Nurses, Inc., an accredited approver by the American Nurses Credentialing Center's Commission on Accreditation. These programs carry a maximum of 1.8 contact hours each. • NSGP is recognized by the National Board for Certified Counselors to offer continuing education for National Certified Counselors. We adhere to NBCC Continuing Education Guidelines. These activities have been approved for a maximum of 1.5 Category 1 Continuing Education hours each for relicensure for Licensed Mental Health Counselors. Each LMHC should claim only those credits that he/she actually spent in the educational activity. • For information regarding the status of Continuing Education Credits for social workers and to find out if an authorization has been issued, please call the NSGP office at 617-484-4994. For all disciplines, continuing education credit awarded is dependent on participation.



Jim Leone — Evening of Shakespeare



Susan Leone — Evening of Shakespeare

Supervising in Groups: A Powerful Medium

By Eleanor F. Counselman, EdD, CGP, FAGPA

upervising or being supervised in a group is a powerful educational experience. Group supervision is useful for any form of psychotherapy but especially for group therapy as it replicates the form of therapy being presented. There are many advantages to this form of supervision – but also certain dangers. In this article I will describe the benefits and risks of group supervision and offer some ideas for maximizing benefit while offering safety. I will focus on the group dynamics of group supervision; for greater exploration of the content of supervision and the supervisory relationship, I recommend the AGPA Training in Group Psychotherapy Supervision manual (Bernard and Spitz, 2006).

The frame

When setting up a supervision group, it is important to address many of the same questions as when setting up a therapy group. Who will be in the group? How will you define the goals of the group? What is your contract or working agreement, including the role of the leader?

Leadership: Supervision groups need a leader because of the responsibility for the patients being supervised. Consultation groups can be either leaderled or leaderless. (Such groups are usually called "peer supervision groups" but in fact are peer consultation groups.) They are often appealing to new professionals who are eager to be independent of the authority (and the cost) of a supervisor but are popular at all stages of professional development (Counselman and Weber, 2004).

Membership: How big do you want the group to be? A size range of three to six members is ideal, although this is smaller than the typical therapy group. If there are co-leader pairs, both co-leaders should be in the group to strengthen their relationship and to avoid splitting. The members should be at similar levels of experience so that they work with equal sophistication.

Contract: Just as in a therapy group, a good contract creates the frame. Clear boundaries, including confidentiality, promote safety. Expectations about regular and timely attendance need to be spelled out and discussed if they become an issue. Nothing can take the life out of a supervision group faster than irregular attendance.

Will the group be weekly, biweekly, or monthly? Will it be open-ended or time-limited? How will new members be admitted?

The process

How will the group work? Good supervision addresses both content and process. Beginning group therapists need to discuss such basics as gatekeeping, contract issues, and member participation. Senior therapists are more able to focus on unconscious processes within the group. Therapists at all levels face countertransference dilemmas and participate in enactments for which consultation is useful.

In traditional supervision groups, one member presents and the other members consult on the presented material. This process can leave the presenting member feeling exposed while the others look smart. An alternative method is for all members to agree to share their emotional response, including associations, to the presented material. This method, described by David Altfeld (1999), promotes greater access to the affective, often unconscious, material in the presentation.

The positive power of group

The factors that are so healing in therapy groups (see Yalom, 1995) are present in supervision groups as well. Hearing that other clinicians struggle with difficult patients can be relieving (universality, installation of hope), seeing that your input is helpful (altruism and imparting information), and learning about yourself in group (interpersonal learning) are examples.

Furthermore, therapy is hard work and clinicians frequently feel isolated in it. Coming together on a weekly or biweekly basis is good clinician self-care. Many consultation groups include some "schmooze time" for just this reason, and it may be wise to schedule this at the beginning for a defined time period. Thus it is part of the contract, and does not get confused with resistance to doing the work.

The Danger of Shame

The potential for shame exists in any group situation and is one of the risks in a supervision group. Presenting one's work to colleagues stirs up anxiety about exposure and fears of being judged. In addition, shame in the patient can be transmitted into the consultation group via parallel process. The supervision group needs to guard against any member feeling overly shamed. Altfeld's model can

help level the shame playing field, as members expose their less rational, more emotional reactions to the material.

It is probably impossible to present one's work entirely without shame or at least some shame-related anxiety. People don't generally bring their successes to consultation; they bring the cases they worry about, the ones that create strong therapist reactions. Sometimes it is helpful for the consultation group leader to remind the group of this fact.

Parallel process

Parallel process refers to the phenomenon in which the affective elements of the therapy are unconsciously transmitted into the supervision (Ekstein and Wallerstein, 1963). When understood, parallel process can be a valuable supervision tool. Work with parallel process occurs not only in the cognitive realm, creating better understanding of the dynamics, but in the emotional realm as well. In that respect, working through an instance of parallel process in supervision parallels the therapy work but contains and metabolizes the affect so that it can be taken back to the therapy in a more manageable form. It is the equivalent of what Winnicott has described as the maternal function of containing and metabolizing affects too powerful for the child, which are returned to the child in more tolerable forms. I find that supervision groups amplify parallel process more than dyadic supervision, The good news is that the affect is more accessible; the bad news is that dynamics such as scapegoating or acting out can occur in the group.

It's What We Know How to Do Best

Group therapists are naturals to lead or be members of supervision groups because they know how to create safe, productive groups. Group therapists know that all groups have process as well as content, that boundaries create safety, and that the most effective group is one where everyone has a voice. Whether you decide to be a member or a leader of supervision group, I recommend this experience to you!

References

Altfeld, D. (1999). An experiential group model for psychotherapy supervision. *International Journal of Group Psychotherapy*, 49(2), 237-254.

Bernard, H.S., & Spitz, H.I. (2006). *Training in group psychotherapy supervision*. New York: American Group Psychotherapy Association. Counselman, E.F. & Gumpert. P. (1993). Psychotherapy supervision in small leader-led groups. *Group*, *17*, 25-32.

Counselman, E.F. & Weber, R. L. (2004). Organizing and maintaining peer supervision groups. *International Journal of Group Psychotherapy*, *54*, 125-143.

Ekstein, R., & Wallerstein, R. S. (1963). *The teaching and learning of psychotherapy*. New York: Basic Books.

Yalom, I. (1995) *The theory and practice of group psychotherapy.* New York: Basic Books.

Referral Committee Sponsors Networking Event

By Carolyn Stone, EdD, CGP

ould you like to brainstorm with members of NSGP, including some senior clinicians, about ways to improve your group practice? Ten NSGP members got to do just that at the recent Networking Event held in January at the home of Joyce and Walker Shields. Organized by the co-chairs of the Referral Committee, Debra Filiurin and Sandy Houde, the evening started with a savory potluck dinner and friendly conversation. We were a diverse group. There were many long-time NSGP members, as well as student members. One woman is changing careers from law to psychotherapy. Some are in agency practice planning to start private practice: others have been in private practice for years but plan to try something new or work to keep current groups healthy.

Debra Filiurin led the discussion about our practices, our hopes, and our challenges. Walker Shields described two courses he will offer this spring at the Boston Psychoanalytic Society and Institute Program in Psychoanalytic Studies. One is a new venture for Walker: "Shakespeare, Unconscious, Dreaming, Transformative Processes within Human Relationships." We discussed how he might market this course to people involved in theater. Walker's other course is "Object Relations, Love Relationships, and Transformational Processes from Freud to Winnicott and Bion: A Clinical Approach for the 21st Century."

Judy Ullman talked about the challenge of educating individual therapists about the usefulness of group therapy in order to encourage referrals. Michaela Mendelsohn shared her plans to start a group for trauma survivors in her Newton office. Current NSGP President, Barbara Keezell talked about her groups and shared her experiences. Barbara also let us know that the Group Listing on the NSGP website will soon undergo some exciting changes when NSGP launches its new website. Clients and clinicians will be able to sort the group listing by categories. This should make the listing more useful to NSGP members and the public. Each of us shared our desire to enliven current groups and plans for groups we wish to start, with many participants making helpful suggestions for marketing. Debra encouraged us to set goals and write them down. She will mail these back to us shortly before the next networking event so we can judge our progress. If we choose, we can attend the next event and discuss our progress—what worked and what got in the way.

At the conclusion of the discussion, Debra and Sandy asked for our opinions about the format of the recent Networking Events. While the emphasis on setting goals is useful, many felt it would be helpful to hear from someone who has a successful group practice. The guest speaker for the upcoming Networking Evening will be Roxcy Platte. Roxcy will share strategies she has found effective in developing and maintaining her group therapy practice. She leads five groups in Wakefield and Salem. In addition, we noted that many people with whom we need to network to encourage referrals are outside of NSGP. As a result of this discussion, the next event will focus on professional and practice development.

The NSGP Referral Committee continues to respond to group referral requests received at the NSGP office at (617) 484-4994. The Committee extends its gratitude to those NSGP Clinical Members who have responded to these calls for three-month rotation periods. Recent members who served the organization in this way are Suzanne Cohen, Judith Silverstein, Larry Kron, Anne Weiss, Carolyn Stone, Virginia Reiber, and Karen Wishmeyer. Alan Albert is currently responding to the inquiries for group referrals. The Referral Committee invites any clinical member who is interested in taking a three-month rotation to contact the NSGP office at groups@nsgp.com or Sandy Houde at houdesa@aol.com. The Referral Committee is open to suggestions about other ways we can assist members in nurturing their practices.

In Memoriam Joan Douglas

Joan Douglas passed away unexpectedly in January 2008. Joan was a long-time, active member of the NSGP community. She was a graduate of the NSGP Training Program, served on many NSGP committees, and was a frequent attendee at the NSGP and AGPA conferences. In her private practice, Joan was very passionate about her groups and her individual clients. Those acquainted with her knew how devoted she was to her husband and how proud she was of her children. Joan had a great spirit for adventure and in her 50s decided to take up scuba diving and became certified in the sport. She will be missed by family, clients, and friends. Anyone wishing to offer thoughts or condolences can send them to her husband, Arthur Douglas, at 36 Abbott Lane, Chelmsford, MA 01824.

Steve Haut



NSGP Referral Service

- a professional resource
- · clinical referrals
- networking events
- by telephone or web

NSGP REFERRAL SERVICE Free Web Listing

Listings @ www.nsgp.com

New feature of the Web Group Listing — Now groups will also be sorted by categories

Next Networking Event/Professional Development Evening and Pot Luck Dinner

Guest Speaker Roxcy Platte, LICSW, BCD, CGP

Developing and Maintaining a Group Therapy Practice

October 2008 (day TBA) at the home of Geri and Scott Reinhardt

Pamela, we'll miss you!

We announce with a sense of great sadness that Pamela Dunkle, our talented office manager, will be moving on and leaving NSGP at the end of March. Pamela has been with NSGP for 9 yrs and has been an instrumental part of our organization. She has found a full time job at Clark University in Worcester which will be closer to her home.

The Children's Group Therapy Association Annual Spring Conference

May 2nd, 2008, 8am-5pm

The Theory and Practice of Group Treatment: Children, Adolescents, and Parents

> Holiday Inn Brookline* 1200 Beacon Street, MA 02446

Check CGTA.Net ~ For More Information

Keynote Speaker: Adele Pressman, MD

Building Therapeutic Alliances and Cohesiveness: Adolescent Group Therapy

Activities in Groups

Achieving Integration in Groups: Social/Emotional Learning

Nuts & Bolts of Starting and Maintaining Groups

Groups in Schools: Challenges and Solutions ...and more

Register Early

Partial working scholarships: Sandy Houde, LICSW, CGP, 781-646-2897 or houdesa@aol.com

In Collaboration With NSGP, The Northeastern Society for Group Psychotherapy, Inc.

For more information, regarding CEU's, the CGTA Spring Conference or membership, please contact Pam O'Callaghan at (508) 877-3436 or write to:

CGTA, P.O. BOX 521, Watertown, MA 02472

A Freedom Rider Looks Back: How Groups Mattered

Ellen L. Ziskind, LICSW, CGP

a group lens: how I was contained by and became interdependent with a variety of groups—some fleetingly. I rode a bus from New York to Mississippi with five other Freedom Riders, strangers all. We knew we would be arrested when we entered the "wrong" segregated waiting room at the Jackson bus station, the destination of the Freedom Rides. CORE (Congress of Racial Equality), the sponsoring organization, hoped to fill the jails there in order to dramatize the ongoing, illegal segregation in interstate travel.



As a volunteer at CORE that summer, I had been inspired by several young southern black men who came north to report on the Freedom Rides. I had felt deeply about equal rights for many years, but there was something about their attitude, spirit, and demeanor that brought my feelings to life. They had a gentleness at the core of their passion; a capacity to not hate though beaten and scarred; humor and patience despite the brutality they'd suffered. It no longer felt like "us" and "them," "up here" and "down there." Being part of that group moved me seamlessly from observer to participant. I sensed this shift as both selfless and central, the way each of us is central to the struggle we join.

On the way to Jackson, we were threatened by hostile crowds. Though we weren't safe (and did have to be rescued) there was a feeling of safety in our group membership. In the county jail, we met prisoners about to be released to whom we entrusted letters to our families. Though few words were exchanged, there was a mutual and palpable sense of connection. The usual lines of affiliation shifted to reflect our actual experiences, not our projections and stereotypes. The boundaries of membership became open and fluid. In the segregated courtroom of our trial, the judge and lawyer affably coached the arresting officer so that he could finally give the answer that would incarcerate us. Many of the boundaries and traditions I had taken for granted vanished or transformed. Though we barely knew each other as individuals, it was the holding function of the group that kept us oriented and intact. In the city jail, where we were moved for mug shots and fingerprinting, we were interrogated separately by an overbearing cop. As he pressured me relentlessly about the origins of my last name and whether I had come south "to sleep with niggers," where did I find the resources to answer him with calmness and authority? Rising to the occasion had much to do with my awareness of the other members awaiting their turn. Having volunteered to go first, mindful of my leadership role, I wanted to establish a tone of strength and resolve for them as well as myself.

We did not pay the fine the court levied against us in order to add our bodies to those already behind bars. We were driven to Parchman State Penitentiary where we joined other Freedom Riders on death row for six weeks. Though we had no basic supplies, never went outside or had the lights off, it didn't seem to matter. It was commitment to a principle that bound us together in a common pursuit. And, like any good working group, this one had developed boundaries and a structure that lovingly and effectively contained us all.

One day, a guard asked "all the Jews" to call out the numbers of their cells. A rabbi from Jackson had come to visit us and send word to our families. Spontaneously, each and every woman called out her number, leaving the guard scratching his head and muttering, "I ain't never seed so many Jews in mah whole life!" We were joined now on another dimension and even though it wasn't true, it strengthened our bond.

When I was released, I was taken in by a black family from Jackson along with two other Freedom Riders. We had to lie on the floor of their car so that we would not be re-arrested and they would not be charged with a crime. It was illegal for blacks and whites to be together. Violating the law in this way had me experience what it was like to be part of a group trying to survive as human beings under inhumane conditions. This was a gift and a burden I had not anticipated.



Ellen Ziskind at the NSGP 50th Gala, 2006

Free, Convenient Help for Group Therapists!

Carolyn Stone, Ed.D., CGP

Duzzled about how to handle some boundary violations in your group? Wondering why you are so sleepy in one group and alert in another? Troubled by your countertransference toward a particular member? Wishing you had some consultation but wondering whom to call? NSGP has an answer!

Last spring the NSGP Board launched a new service for all members in good standing. We are each entitled to one free consultation annually with a senior NSGP member. The Consultation Committee invited consultants from past Board members, past Presidents, and past Training faculty. Twenty-six people generously agreed to offer one or two free one-hour consultations per year.

So how does it work? Start by calling the NSGP office at 617-484-4994. Our new office manager will forward your request to the proper person on the Consultation Committee. One of us will then give you a call and give you the names of three possible consultants. Once you have scheduled the meeting, you notify the committee again so that we know which consultants have completed their obligation for the year. Then comes the best part. You meet in person or on the phone with your consultant and discuss your problem.

In order to learn how it has been working, I contacted people who have used the benefit. One consultee, who chose to remain anonymous, called for consultation because her group was down to a few people, and she could see that she needed to make some changes in her practice in order to have a sufficient referral flow to support the group. She met with Marsha Vannicelli and found a wealth of information about what one needs in a practice in order to support a group. She came away with practical ideas and now she says she has renewed energy to continue this small group.

Barbara McQueen had a question that came up for her in supervision of group therapists. She was pleased to be able to arrange a phone consult with Joe Shay which she said was very helpful. She found the consultation benefit a good arrangement for many reasons: it was free; it was not a favor; she had access to someone good whom she knew would be helpful; it was convenient.

Sharan Schwartzberg found her consultation with Scott Rutan quite helpful. When asked why she used the

benefit, Sharan said that she has great respect for the senior members of NSGP. When she heard about the benefit, she thought, "What a great opportunity. Like a gift!" Given a choice of "premier people" for her consult, she chose Scott. Sharan was thinking of changing her work to do more clinical work and starting two new groups. With Scott she discussed both "Why now?" and the best composition for her groups. Now six months later she has one group going and is putting the second one together.

We encourage members to take advantage of this "gift" from NSGP. There are two qualifications to the offer. First, this consultation is not appropriate for an emergency situation. Second, student members are not eligible as they have consultation available through their training. That leaves a wide range of uses, as the experiences above indicate.

So, give us a call!

Join the NSGP Listserv Sign up with just one email!

NSGP now has its own listserv! (A listserv is an email list that allows its members to communicate with each other via a single email address. An email sent to that address goes to everyone on the list.) The purpose of the listserv is to promote communication among NSGP members on a variety of topics. A popular use of the list so far has been for help with group referrals. Members have also used it for consultation about group therapy topics.

The list may not be used for any commercial purpose. This includes announcing new groups, group vacancies (remember that all Clinical Members may list their groups for free on the NSGP website), or office space. However, you may respond to such requests posted by other members.

Are you worried that you'll get too many emails in your already crowded In box? You can sign up to receive postings in "digest" form so that you only get one email (at most) a day.

All members were sent an initial email inviting them to join. If you missed yours (an over-zealous spam filter perhaps?) and would like sign up, please contact Eleanor Counselman (EleanorF@Counselman.com), the manager of the list.

Progress Notes

Progress Notes features a variety of items that reflect progress for NSGP members or committees. Please let us know (newsletter@nsgp.com) 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.

Shoshana Ben-Noam was elected to the AGPA Board and also became an AGPA Fellow.

Karen Brenner published an article online entitled "Recognizing and Treating Postpartum Depression" on the Expectant Mother's Guide to Boston site.

Tyler Carpenter is the Local Area Arrangements Chair for the 24th Annual Meeting of SEPI, the Society for the Exploration of Psychotherapy Integration, which will be held in Boston. He will also be presenting a workshop entitled, "'I Am As I Am Not' or 'Wherever You Go There You've Been': Paradox and the Psyche-Soma." Tyler also taught "Theories of Psychotherapy" at Harvard University Extension School, "Introduction to Psychology" and "Counseling Skills" at Roger Williams University. He also presented the workshop "Handling Difficult Inmates and Avoiding Institutional Meltdowns" at the Correctional Association of Massachusetts Annual Training Meeting.

Suzanne Cohen presented her workshop "Coming to our Senses: Somatic Psychology and Group Therapy" at the conference of Eastern Group Psychotherapy Society and at the AGPA Annual Meeting. She continues to conduct a Wellness Workshop which applies the principles of The Nia Technique in a small group format and she is offering a new Nia class at the Wellness Community for anyone affected by cancer (including caregivers and family members).

the 2008 Affiliate Assemblies Award at AGPA. She was also the Course Director for the AGPA Supervision Course.

Naomi Dogan and her husband Jim and daughter Gitalia are delighted to introduce the newest member of their family, Carinna Johanna Dogan-West. Carinna was born on her due date, just like her big sister, beating 9 in 1,000 odds, which is remarkable given the fact that the two parents are perpetually late!

Steve Haut, thank you from the NSGP Board for your long service as chair of the Audit Committee. And thanks as well to **Peter Gumpert** who has graciously agreed to fill the role of chair.

Karin Hodges presented an open session entitled "A Safe Place to Be or No Place for Me?" at the recent AGPA conference. She will also be co-presenting a workshop with **Donald** Wexler entitled " A Safe Place to Be or No Place for Me: Uncovering Affects in NSGP" at the NSGP conference in June. In addition, at the Annual Conference the American Psychological Association, Karin will be co-presenting with Lorraine Mangione, Lise Motherwell, Ralph Buonopane, and Gretchen Schmelzer in a symposium entitled, "Therapists' Use of Passion and Aggression in Adolescent Therapy Groups." Karin became co-chair of the NSGP Breakfast Club Committee and joined the Center for the Study of Groups and Social Systems this year. On a personal note, Karin is pregnant! She and her husband Mark are expecting the delivery of their first child in mid July!

Barbara Keezell led a two-day psychodynamic process group for those with 10 years or more of experience at AGPA's annual conference in Washington, DC.

Larry Kron led a discussion on "Caring for the Caregiver" at the NSGP Breakfast Club. The discussion dealt with how we understand and deal with the pressures to which caregivers are subjected when dealing with chronic illness.

Theories of Diversity for Post-Modern Clinical Practice" at the lunchtime series of the Brookline Community Mental Health Center. As a personal challenge, Bet and her Extreme Trail horse, Ciuw's Little Sandy, became the first horse-and-rider pair ever to attempt or complete all 92 miles of the Massachusetts Mid-State Trail! The full distance was traveled in 10 continuous segments over the course of one year.

**Group Therapy Goes to School" at the recent AGPA conference.

Lise Motherwell has two chapters in the recently published book 101 Interventions in Group Therapy by Scott Simon Fehr. At AGPA, she presented "Fear and Loathing in Group Therapy" with Scott Rutan and Joe Shay, and "Through the Rabbit Hole: Creativity and Play in Groups" with Gretchen Schmelzer. She is currently Chair-elect of the Affiliate Assembly of AGPA.

Pan Schact will be teaching a summer course at the BU Graduate School of Social Work on clinical work with adolescents.

Libby Shapiro and Jerry Gans had their paper "The Courage of the Group Therapist" accepted for publication in the International Journal of Group Psychotherapy.

Marian Kaplun Shapiro has published two more books—chapbooks, as they're called—Your Third Wish (Finishing Line Press) and The End Of The World, Announced On Wednesday (Pudding House Press), and as a result is doing more readings and also working with more clients in the creative arts. She and another psychologist are also sharing a workshop at the ASCH meeting in Chicago on the subject of using hypnosis for enhancing creativity.

Joe Shay published two chapters in 101 Interventions in Group Therapy by Scott Simon Fehr. He also was a discussant at the MGH Center for Psychoanalytic Studies Annual Conference, presented at AGPA and at Grand Rounds at HUHS, and led a discussion of the movie Careful, He Might Hear You at the BIP Psychology Goes to the Movies series,

Walker Shields is teaching two courses in the Program for Psychoanalytic Studies at the Boston Psychoanalytic Society and Institute: "Object Relations, Love Relationships, and Transformational Processes from Freud to Winnicott and Bion," and "Shakespeare, the Unconscious, Dreaming, and Transformational Processes in Human Relationships."

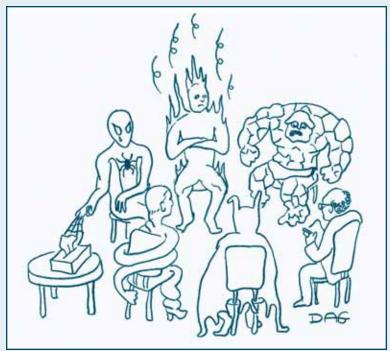
Center for Psychoanalytic Studies at MGH and is preparing to run a psychodynamic group for adult women with a history of eating disorders. She is also teaching a course in culture and psychology at BU. In July, llana will present "Teaching culture and psychology: Personal challenges and other dilemmas" at the International Council of Psychologists conference in St. Petersburg, Russia.

Marsha Vannicelli gave a workshop at AGPA entitled "Ending: When its Hard to Say Goodbye" designed to help participants make meaning of various endings in their lives—including the end of the 6 day AGPA conference.

Bob Weber had two recent publications: a chapter entitled "A Spiritually-Informed Approach for the Group Leader" in Scott Simon Fehr's book, 101 Interventions in Group Therapy, and a review of Richard Billow's book, Relational Group Psychotherapy: From Basic Assumptions to Passion, in The Psychoanalytic Review. Bob also presented "A Religiously-Based and Spiritually-Informed Orientation to Individual and Group Therapy" at the MSPP Conference, and is also leading an 11 week seminar at the MGH Center for Psychoanalytic Studies, "Intersubjectivity Theory and Relational Analysis."

Caption This!

Please submit a caption for this cartoon to newsletter@nsgp.com
The winning entries will be announced in the next issue.



Drawn by David Goldfinger

Cartoon Winners for the Fall, 2007 cartoon

Selected by the Cartoon Committee (Ellen Ziskind, Alan Witkower, & Helen Hwang)



Second runner-up

"They think I'm a quack as a therapist—because nobody ever talks about the duck in the room."

— Susan Polit

First runner-up

"Sometimes a duck is just a duck". — Larry Kron

The winner!

" I said 'duck'! Geez, nobody in this group wants to deal with sex and aggression."

— Kim McNamara



Northeastern Society for Group Psychotherapy, Inc. PO Box 356 Belmont, MA 02478-3201 (617) 484-4994 www.nsgp.com



Excellence in Leadership:

Understanding Ourselves and Others in Groups

NSGP's 27th annual conference!

June 13, 14, & 15, 2008

2008 NSGP Events Calendar

April 6, 2008 Breakfast Club 11 AM — with Oona Metz

What you don't know could hurt you: Secrets and lies in group psychotherapy

hosted by: Larry Kron & Marsha Vannicelli (see ad on page 9)

May 18, 2008 Northeastern Society for Group Psychotherapy Foundation Annual

Spring Fundraising Gala

Hat Party and Silent Auction, 5 pm to 7:30 pm. Call for tickets: 617-484-4994

June 13, 14 & 15, 2008 Register Early!

Excellence in Leadership: Understanding Ourselves and

Others in Groups

27th Annual Northeastern Society for Group Psychotherapy Conference

Wellesley College, Wellesley, MA

Special Presentation: *Groups Gone Wild: Therapist Gone Missing?*

Consultants: Joseph Shay, PhD, Eleanor Counselman, EdD, and Scott Rutan, PhD

Demonstration Group (see David Hawkins interview on page 4)

The JoHari Window: A View of the Group and the Self

Led by: David Hawkins, MD, with Suzanne Cohen, EdD, and Peter Taylor, PhD

Certificate of Group Psychotherapy Program

Institutes and Workshops

October, 2008 NSGP Networking Event: Professional Development meeting and

Potluck Dinner —sponsored by the NSGP Referral Committee

Date to be determined (see Ad and article on page 11)

For more information or to sign up, please contact the office at 617-484-4994 or groups@nsqp.com.