

# The Group Circle

Winter 2015

The Newsletter of the  
American Group Psychotherapy Association  
and the International Board for Certification of  
Group Psychotherapists

## Towards a More User-Friendly Setting in the AGPA's Large Group: Developing an Internal and Social Dialogue

Robi Friedman, PhD

*Editor's Note: Robi Friedman, PhD, President, Group Analytic Society (GAS), along with Nimer Said, MA, Former GAS Board Member, will conduct The Large Group at AGPA's Annual Meeting, under the consultation of Mary Dluhy, MSW, CGP, FAGPA, Director, Group Initiatives at Georgetown University, Washington, DC. The conductors will convey and apply aspects of conflict resolution, based on their different and conflictual Arab-Palestinian and Jewish-Israeli identities. Their sessions will help attendees explore the influence of the large group on individual experiences, find and place their personal voices amidst the mass tensions, and practice their ability to keep thinking while encountering massive tensions.*

At AGPA's 2014 Annual Meeting in Boston, Nimer Said, MA, and I conducted *The Large Group* (LG). Many participants gave us very interesting and helpful feedback regarding the challenges of coping to find one's voice, the excitement of understanding a larger, communal or social dynamic, and the dread of sharing and the accompanying fear of rejection. I became aware of how much we can learn in the LG, how much we can develop by participating in it and conducting it. I was also aware of how much our limited knowledge of the LG's complicated dynamics inhibits the full range of possibilities this unique group space provides us. We underestimate the LG because of our conscious and unconscious anxieties, our expectation to always find intimacy in groups, and our tendency to avoid difficult feelings, even if it is through them that we might understand and learn to contain conflictual situations. Do we understand what are the unpleasant feelings in the LG?

The LG is unique because there is no other real (as opposed to virtual) possibility to meet so many Others and to hear many differing and different voices. I sometimes call this "faceLOOK." In contrast to Facebook, LG participants can feel, breath, and look at more real faces than in any other human setting. We all have to learn to use the space of the LG effectively,

avoiding long speeches, which prevents engagement with others, and making the effort to listen and transform monologues into dialogues, while finding and retaining our own voice.

I consider the LG unique because it is the one and only space in which you can find your social identity. In this process of individuation, LG participants can move from their conscious and unconscious social identities to their own position and authority. This may be achieved through repeated practice being and speaking in the LG, which increases insights, what British group analyst Patrick de Mare called "outsights" (i.e., learning to understand emotional movements in the group) and resilience in conflicting situations. Participants learn to dialogue and reflect rather than flee; they increasingly find courage to truly reflect on their own matrix (the community one belongs to), and their own social unconscious rather than retreating either in silence or non-communal isolation.

Sometimes, a process of a necessary separation from one's previous fixed and un-thought positions is enabled. These social separations, while difficult and even painful, allow for greater personal growth. Courage, help, learning from others, and some support from the LG's leadership facilitate participants to navigate a fascinating process of acquiring an ability for mature dialogue with the group. The whole LG, and the even larger organization, usually develop hand in hand. While these advances may start in a small group, they can only be accomplished while growing through repeated participation in LGs.

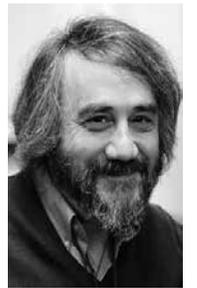
Thus the LG may go beyond being only a diagnostic instrument of the organization: It may be the marketplace of a conference, an institution in which humans learn to dance between identifications. Moving beyond the fear experienced in the mass, through idealizations and de-idealizations to subgroup and personal identities, may be a central human experience in LGs. This kind of transformation is like going from being a war machine to becoming a flock of

*continued on page 3*

## From the President Healthy at 73

Les Greene, PhD, CGP, LFLAGPA

Systems theorists think about the health of an organization—how well defined are its tasks and how well it carries them out—in terms of



the differentiation and integration of its constituent parts. Does form follow function, i.e., is the internal structuring of the system meaningfully and rationally designed to achieve its goals? And how well do its various components communicate with each other so that task-relevant information flows freely across relevant internal boundaries?

Based on my recent presiding over three and a half hours of conference calls with our AGPA Board of Directors, I can declare that we are, indeed, in very good health! I came away from these calls truly struck by the complexity, depth, and vibrancy of our small mental health organization. In Janus-like fashion, we are conscientiously attending both to the professional needs of our members and to the world around us—the public-at-large, other mental health and group psychotherapy organizations, governmental bodies, and since 9/11, communities in need.

The agendas of these recent calls covered many of the facets of AGPA. We began our work by reviewing and approving the current version of our four strategic goals, which I outlined in my last column: **Education/Learning/Research; Membership/Certification; Community Outreach/Visibility; and Organizational Sustainability.** These goals have evolved over time, with input from many components of our organization, as have the set of action priorities associated with each goal. Take, for example, our sustainability goal, referring to what we need to do to remain

*continued on page 3*

### What's Inside

Mental Health Policy	2
Member News	2
From the Editor	3
Power of Social Context	4
Group Assets	Insert
An Exchange with Irv Yalom	5
Distinguished Fellows	6
Consultation, Please	7
Affiliate Society News	8

**The Group Circle** is

published four times a year by the American Group Psychotherapy Association, Inc. and the International Board for Certification of Group Psychotherapists.

**Editor**

Steven Van Wagoner, PhD, CGP, FAGPA

**Editorial Staff**

Michael Hegener, MA, LCP, FAGPA  
Kathy Reedy, MSW, MFT, BCD, CADC, CGP

**Managing Editor**

Marsha Block, CAE, CFRE

**Editorial/Production Managers**

Nicole Millman-Falk, CAE  
Angela Stephens, CAE  
AGPA  
25 East 21st Street, 6th floor  
New York, NY 10010  
phone: 212-477-2677  
toll-free: 877-668-AGPA  
fax: 212-979-6627  
e-mail: info@agpa.org  
www.agpa.org

**Advertising Rates****Display Ad Sizes**

Width/Height	Cost
Full Page	
8 3/4 x 13 3/4	\$ 1,250
Half Page Vertical	
4 1/4 x 13 3/4	\$ 625
Half Page Horizontal	
8 3/4 x 6 3/4	\$ 625
Quarter Page	
4 1/4 x 6 3/4	\$ 325
Sixth Page	
2 3/4 x 6 3/4	\$ 210
Twelfth Page	
2 3/4 x 3 1/8	\$ 110

Call Nicole Millman-Falk  
at 201-652-1687 for further details.

## What's Ahead in Mental Health Policy

Eleanor Counselman, EdD, CGP, LFAGPA, Co-Chair, Public Affairs Committee

**O**n November 20 and 21, 2014, Marsha Block, CAE, CFRE, AGPA's CEO and I attended the Rosalynn Carter Symposium on Mental Health Policy held at the Carter Center in Atlanta, Georgia. This annual invitation-only conference is attended by mental health advocates, providers, pharmaceutical and insurance executives, and policymakers from federal and state agencies. Begun in 1985 by the former First Lady (now 87 but present at this year's conference!), it was the first annual meeting to focus on mental health policy. This year's conference celebrated 30 years of bringing people together to discuss and create improvements in care for those suffering from mental illness and addiction.

The three main topics for this year's conference were building healthy communities, creating integrated services, and developing leaders for the future. King Davis, PhD, LMSW-ACP, who spoke at the 2007 AGPA Annual Meeting, gave a powerful opening keynote address. He noted that in 1985 about 25% of the US population had mental illness and that current estimates indicate this figure has not significantly changed in the past three decades. As noted in *Better But Not Well* (©2006), a book on US mental health policy by Richard Frank, MD, cited by Dr. Davis, things are better but there is much more to be accomplished. His wish for the next 30 years is that there will be great progress in earlier identification and effective treatment of mental disorders—and no DSM-10!

David Shern, PhD, the Interim President of Mental Health America, cited similarly discouraging statistics, noting that the US has one of the highest rates of mental illness and addictions in the developed world. His dream

is of a “resiliency vaccination,” meaning that communities would be encouraged to develop preventative programs that promote resiliency in individuals and families. Since there is now some beginning use of Medicaid funds for prevention, e.g., smoking cessation, he hopes that mental health programs stressing prevention will be funded.

The impact of the Affordable Care Act is obviously a work in progress, but estimates are that 13 million newly insured Americans have behavioral health needs. The value of integrated care was stressed throughout the conference, along with the need for more behavioral health specialists. One physician said that his dream would be to have a behavior health specialist in the office next door! Two potential future models of integrated behavioral health care were presented: inside medical homes and accountable care organizations, or as separate behavioral health specialty centers.

Another topic of interest to group therapists is greater integration of mental health services and addiction treatment. Historically, these have functioned separately, and at present, 80% of addiction treatment services do not have dual diagnosis capability.

The benefits of the conference extended beyond the lectures with opportunities for informal discussion. I had a long conversation with an insurance executive, whom I asked why group therapy continues to be so under-valued and under-paid. His answer was that while he knows there is research about the efficacy of group therapy in general, his company would want to see individual provider data that showed progress in that provider's group therapy patients. Then his company would be convinced. ●

## Member News

In the last issue of *The Group Circle*, we erred in reporting that **Steven Van Wagoner, PhD, CGP, FAGPA**, was appointed Chair of the National Group Psychotherapy Institute (NGPI) in Washington, DC. In fact, he was appointed Dean of the program, and **Molly Donovan, PhD, CGP, FAGPA**, was appointed Chair. Dr. Donovan, a faculty member for the NGPI since 2006, served as Dean from 2012-2014, and took over responsibilities of NGPI Chair in the fall with the beginning of the program's new two-year training cycle. She and her co-presenter, **Barry Wepman, PhD, CGP, FAGPA**, launched the cycle with *Into the Abyss: Forming and Beginning the Therapeutic Group*, an intensive weekend of didactic and experiential learning focused on establishing and maintaining a psychotherapy group, and combining it with individual psychotherapy. Dr. Donovan is also an Assistant Clinical Professor of Psychology at The George Washington University.



Van Wagoner



Donovan



Wepman

*Let's All Hold Hands And Drop Dead: Three Generations—One Story*, authored by **Elaine Cooper, MSW, PhD, CGP, DFGAPA**, will be published in 2015 by Morgan James Publishing.

**Susan Lieberman, MSW, LCSW**, is heeding the call to answer the needs of our aging society, specifically those of the caregivers in her neighborhood as a member of the Northwest Neighbors Village in Washington, DC, an organization that helps people who wish to stay in their homes by providing multiple services other than those that are medical. Lieberman volunteers as a leader of a support group for family members burdened with the care of loved ones. The group meets for 90 minutes every other week.

**Robert Pepper, LCSW, PhD, CGP**, is the author of a new book—*Emotional Incest in Group Psychotherapy—A Conspiracy of Silence*—©2014 Rowman & Littlefield.

## Large Group

*continued from page 1*

butterflies. The LG is also like a choir, where harmonious and disharmonious voices can be transformed into a more differentiated social music. Those representing the norm, as well as the deviants, can learn through LG encounters to talk to each other. Meeting differences can enhance freedom and social learning, transforming fear of the Other into more understanding and increasing tolerance. We often see in LGs movements of whole segments; subgroups develop, which can challenge oppressive or non-thinking authorities and educate them about democracy.

Understanding the deeper, LG dynamics may lead us to universal insights. The small group (SG) often provides us with a familiar illusion of never being subjected to rejection or to scapegoating. The fear of ejection from a community is a latent universal fear, which combines with annihilation anxieties. LGs seldom give a sense of protection from these fears. The SG unconsciously reminds us of family, while the LG reminds us of the community and the larger society. The SG is often the place we long to belong to, while the elusive attempt at inclusion in the LG is felt as a need or can be a defense against the fears and anxieties inherent in being a member of the LG. Thus, the social unconscious is best reflected while participating in LG processes, while being exposed to the excitement and threats of the relations between subgroups, individuals, and the masses. Recurring annual conferences or other institutional LGs, allow for encounters between conflicting parties, subgroups, or affiliated organizations in distress, and hopefully over time, lead to greater appreciation of how dialogue can lead to greater understanding and toleration of conflicting positions and differences. These are some of the applications of the LG that can benefit an organization.

Combining SGs and LGs is another innovative experiment, which holds promise for the inevitable encounters between conflicting partners. The so-called sandwich model lets participants experience the SG-LG-SG sequence. This model was applied recently with a whole village and a high school in Israel, as well as with a pro-

fessional community in Kiev, Ukraine. These experiences included a short introduction explaining the LG's purpose, how best to participate, and used a working contract agreed and adhered to by participants. Surprisingly, participants understood the special role of the LG in bringing out the conflict in the community and agreed to work both with personal anxieties and their anger. The LG was preceded by a SG and again followed by a very short, small group. We wrapped up the whole experience in a short summary about what took place. While using this model, I witnessed an increasing ability by participants to conceptualize and articulate the conflict and accompanying difficult feelings and perceptions in words, rather than translate them into destructive action. We hope to employ this model in other places throughout the world where conflicts seem impossible to tolerate, let alone resolve, as it allows people to appreciate it as a tool for articulating difficult feelings and beliefs, while striving to listen to and understand the difficult feelings and beliefs of the Other. Applying the sandwich model to areas of interracial conflict in the US, as well as in Northern Ireland have also been discussed.

The LG at the AGPA Annual Meeting could be regarded as the place where professionals become better equipped to deal with society's restraints and unconscious processes. "Ego-training-in-action" is the group analytic term for in-the-group practice. Participants learn to both understand themselves and their relations with others, and have the opportunity to practice alternative attitudes, e.g., communication conducive to dialogue rather than conflict. The effort to find one's right voice and awareness of inhibitions and over-identifications can be understood and dealt with. It's a place to grow—for participants and for the conductors. Much of what will happen in the LG will depend on participants' attitudes: Are they afraid of the LG? Do they seek to tame it, to overcome it, or strive to understand its impact as a microcosm of the larger organization (i.e., AGPA) and society? The organization's attitude towards the LG is also significant, which is why I appreciate the change in the next LG's timetable into a more user-friendly setting. The openness of an organization to the LG suggests a developing appreciation of its potential uses. ●

## President

*continued from page 1*

**viable, much like the individual needs a good diet and exercise but also good relationships to stay healthy. As we have become more savvy and sophisticated about the art of fundraising, we have re-conceptualized our work, viewing it less about merely asking for donations and more about developing mutually rewarding relationships with those who value the training, education, scientific endeavors, and community outreach activities for which we are known.**

**Drilling down from these overarching goals, the Board deliberated on the many specific tasks subsumed by each of our strategic goals. Again with regard to organizational sustainability, we reviewed overall fundraising goals for 2015: specific plans to enhance donations to the Group Foundation through our annual raffle (how many raffle tickets would you like to buy?); plans for local events to honor pioneering individuals or celebrate special occasions; the status of scholarship applications to our Annual Meeting (we have the greatest number of scholarship recipients this year in San Francisco!);**

**and the status of research proposals that have been submitted. Of this latter task, I'm delighted to report that we have over a dozen proposals that our Research SIG will be reviewing for quality, feasibility and importance; the grants given by our Foundation serve the important function of adding to the empirical evidence that documents the effectiveness of our work.**

**In similar fashion, the Board scrutinized efforts directed at accomplishing the other three strategic goals. Some highlights that I particularly enjoyed included our voting on candidates recommended by our Fellowship and Awards Committee to be conferred with Fellow or Distinguished Fellow status (see these honors presented live! in San Francisco); reviewing the heartwarming work of our Community Outreach Task Force (such as holding our annual Camp Galaxy Day for children of military personnel); and reviewing the exciting plans being developed by the Annual Meeting Committee for 2016.**

**In my first year as President, I have come to grasp and appreciate, more than ever, the depth, breadth, and integrity of our organization. AGPA is, indeed, healthy at the age of 73. ●**

## From the Editor

Steven Van Wagoner, PhD, CGP, FAGPA

**I**t's been a busy fall, even more for our interviewers Hank Fallon, PhD, CGP, FAGPA, Martha Gilmore, PhD, CGP, FAGPA, and Katie Steele, PhD, CGP, who conducted thoughtful interviews of our plenary speakers and Special Institute presenters. It's exciting to have Irvin Yalom, MD, DLFAGPA, open the AGPA Annual Meeting with some advice for all of us, experienced and new group therapists, about our group practices. Phillip Zimbardo, PhD, will share with us his research on the path to evil, but more hopefully, to heroism in the Mitchell Hochberg Memorial Public Education Event, supported by contributions to the Group Foundation for Advancing Mental Health. Both offer us a peek in their interviews of what is to come in their presentations.

In a case of serendipitous timing, Robi Friedman, PhD, the Co-Conductor of the AGPA Large Group in 2014 and again in 2015 with Nimer Said, MA, presents his thoughts about applications of the large group, both in general and at AGPA. My hope is that after reading Robi's article, more people will be curious enough about *The Large Group* to attend, starting Thursday and continuing Friday and Saturday (see Annual Meeting Program online). Given recent articles and letters to the editor around difference, *The Large Group* is the perfect venue to explore difference as we encounter "the other" in each other and within ourselves.

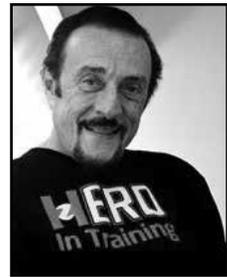
Looking forward to 2015, I hope that we can introduce some new semi-regular columns in *The Group Circle*, one addressing practice-related issues that many of our members struggle with daily, an idea presented to me by President-Elect Eleanor Counselman, EdD, CGP, L FAGPA, and another that might distill some of the recent group therapy research highlights for our readers, which was discussed in an interview I did with Gary Burlingame, PhD, CGP, FAGPA, Scott Rutan, PhD, CGP, DFAGPA, and Melyn Leszcz, MD, FRCPC, CGP, DFAGPA.

Given that the fall and winter issues are chock full of articles and interviews related to the Annual Meeting, I am anticipating a slow down in submissions following the meeting in San Francisco, and strongly encourage anyone wanting to write about an idea related to group psychotherapy or a unique application of principles of group work in which you are involved, to talk to me about your idea and whether you would like to share it with our readers.

*The Group Circle* is certainly a place for the organization to share news about its activities and events, but it also a place for members to do the same. ●

# The Power of Social Context for Evil and for Good: Fostering Heroism One Step at a Time

Katie Steele, PhD, CGP



*Editor's Note: Philip Zimbardo, PhD, Past President of the American Psychological Association, has designed and narrated the award winning 26-part PBS series, Discovering Psychology, and has published more than 50 books and 400 professional and popular articles and chapters, among them, Shyness, The Lucifer Effect, The Time Cure, and The Time Paradox. A Professor Emeritus at Stanford University, he has spent 50 years teaching and studying psychology. He is best-known for his controversial Stanford Prison Experiment that highlighted the ease with which ordinary intelligent college students could cross the line between good and evil when caught up in the matrix of situational and systemic forces. Dr. Zimbardo is currently lecturing worldwide and promoting his nonprofit organization, The Heroic Imagination Project. Dr. Zimbardo will present the Mitchell Hochberg Memorial Public Education Event on My Journey from Evil to Heroism at the AGPA Annual Meeting. The session is supported by contributions to the Group Foundation for Advancing Mental Health.*

## **KS: What is your lecture about?**

**PZ:** I will talk about my journey from evil to heroism, which has grown out of the Stanford Prison Experiment where we put good people in a group, and the group norms perverted them so they ended up—if they were guards—doing really bad things. My Heroic Imagination Project is trying to turn that around by getting ordinary people to do really good things as Heroes-in-Training. I'm looking at how to reverse evil to focus only on the goodness in people.

## **KS: What would you like people to know that will pique their interest?**

**PZ:** Virtually anyone can be seduced into behaving in evil ways. You are not vulnerable because of a personality weakness or personality differences; it's being trapped in situational contexts, where you're unaware of the power of that situation on your behavior. Evil behavior can be caused by being in a context with other people, where you are given a role to play, a certain uniform to wear, and certain rules and social norms to follow. Especially if that context is novel for you, you are suddenly and incrementally led toward doing more and more evil deeds. It is like the famous experiments carried out by Stanley Milgram, where he gets good people to harm other people, but he does it in 15-volt increments. My argument is: "All evil begins with 15 volts." Once you press the first button, then you're on the slippery slope toward committing an evil act.

## **KS: So once you open the door to committing a harmful act, it is no longer a stretch to commit even worse acts, so long as the worsening is in subtle increments.**

**PZ:** Yes, once you open the door and press that first button, it's easier to press the second one. In many situations, we're unaware that there are people with power who are orchestrating that situation; those are the systemic forces over which we have no control. All they really want is for you to take that first little step. Once you do that, it is easier to repeat that behavior, because the next thing you do along the same line is now consonant with what you just did, even though those actions are dissonant with your core values. Your behavior is gradually disengaged from your values.

My research created situations where I could observe the process by which ordinarily good people gradually engaged in increasingly evil behavior. The Prison Study went for almost a whole week, so people in the study lived the situation day and night. What I observed was the gradual transformation of 1971 hippies, cool kids, anti-war activists into cruel brutal sadistic guards who did things to prisoners that were unimaginable—things that were as evil as prison guards did at Abu Ghraib prison. Even though it was an artificial group, very quickly people became like prison guards. Each day, we videotaped as the

group came in, put uniforms on, and did worse and worse things. They went from 15 volts to 100 volts to 150 and so forth. My conclusion is that you have to be aware of how situational power affects behavior.

## **KS: Can you talk about the Heroism Imagination Project?**

**PZ:** We've seen how easy it is to get good people to do bad things. An interesting question is, Can you flip it 180 degrees? Can you take an ordinary person and make him or her into a hero? My definition of a hero here is: an ordinary person who's willing to take risks to help someone else in need or defend a moral cause or principle, even when aware of risk to life, limb, or career, in the case of a whistle-blower. Heroes take the action despite those potentially negative consequences. My belief is that on the path to the big heroic act, you're a "hero-in-training." You do something every day—make someone feel special, give somebody a compliment, make someone smile—which makes it gradually easier for you to be a hero when the big occasion presents itself.

How do you change passive bystanders into active heroes? To answer that question, I developed a foundation in San Francisco called The Heroic Imagination Project (HIP). We have social fitness exercises—things you can do every day on the social path to heroism. I have also developed a new educational program, which provides an intellectual foundation for heroism, and we're taking it into high schools with at-risk students.

We show them a video of a woman lying on the steps of a railroad station in London; 45 people pass by in four minutes, and nobody stops. Then we discuss what they watched. "What would you do if you were there?" And everyone says, "I would help." What's the difference between being in a situation and looking in on a situation?

The difference is called social norms. If you're in that situation and you look around and nobody's helping, the norm is to do nothing. When you look at a situation, your good values emerge, and you say, "I would help." Most likely, however, you would not help. But in a second video, where somebody does help, within six seconds a second person comes in and suddenly a whole crowd is there. What happened? The norm changed. The norm now is to help, and that norm strengthened with each additional helper. We blend interesting provocative videos that engage the kids and then we give them the background information.

Then we ask them to make a commitment: "The next time when I'm in a situation like that, I will not be a passive bystander, I will be an active hero." Finally we ask, "What's the most interesting thing you've learned today that you'd like to share with somebody else?" Now we're creating a spread of knowledge. We encourage hero ensembles—when you see something wrong, wherever possible, you try to recruit other people on your side. Because, if you're challenging a system, the way the system deals with your challenge is to simply make you into a fanatic. Well if you have three or four people who share your point of view, it's a "point of view" and you can't be as easily dismissed. In this exercise, every student becomes a teacher.

## **KS: This ties in with group psychotherapy, where there are influential norms, a focus on healing, and the power of the setting and the group to exert a healing force for each member.**

**PZ:** These are some of the things we teach. Realize that the good and bad is the whole, for kids, superhero model. We say, "Superheroes are great to have as idealized models. The only problem with superheroes is that, despite their super strength—the ability to fly or their x-ray vision—they're missing one thing that you have: a brain. They are the creation of a cartoonist who does have a brain. That is the real power behind the cartoon that influences the superhero's behavior. You have this incredible brain, and we want you to use that brain in order to create a better world." The website where these ideas and their applications are further explained is [www.heroicimagination.org](http://www.heroicimagination.org). ●

## An Exchange with Irv Yalom, MD, DLFAGPA: Here and Now and Other Thoughts on Group Therapy

Hank Fallon, PhD, CGP, FAGPA, Annual Meeting Co-Chair



*Editor's Note: Irvin Yalom, MD, DLFAGPA, is Professor Emeritus of Psychiatry at Stanford University and the author of several highly acclaimed textbooks, including Existential Psychotherapy and The Theory and Practice of Group Psychotherapy. He is also the author of stories and novels related to psychotherapy, including Love's Executioner; When Nietzsche Wept; Lying on the Couch; Momma and the Meaning of Life; and The Schopenhauer Cure. His latest non-fiction book is Staring at the Sun: Overcoming the Terror of Death. He will be delivering the AGPA Opening Plenary at the AGPA Annual Meeting on My Advice for Early Career Group Therapists and Reminders for Those with More Experience on How Learning Never Ends.*

**HF: Do you think cultural/social attitudes toward group therapy have changed since you first started working with groups?**

**IY:** I'm finding there are far fewer therapy groups operating now than in the past. If I want to refer one of my individual therapy patients to a group in the Bay Area, I have a difficult time finding one. I know approximately 10 groups in San Francisco, and it's somewhat easier there. The reasons? One can't be sure. There are a huge number of counselors and psychologists graduating from nearby universities and beginning practice, and the great majority have a lot of free hours and may be somewhat reluctant to refer to a therapy group for fear of losing their individual patients. And of course, there is an economic factor in that so many insurance plans will only pay for very brief therapy. In addition, fewer schools offer group therapy training.

**HF: What key things do novice group therapists need to focus on in their leadership?**

**IY:** Novice group therapists generally need a lot of instruction in methods to help the group focus on the here-and-now. They need to keep in mind that the therapy group is a microcosm of one's interpersonal world; if they can focus deeply upon the problems each patient has relating to the other members of the group, they may have less and less need to focus on outside or past material.

**HF: Are there any issues that experienced group therapists need to be reminded about?**

**IY:** I would give the same answer: Therapists need to be constantly reminded that the best work is done in the here-and-now. Each patient's major task is to understand as much as possible about the way he or she relates to each of the members of the group and to the therapist.

**HF: Is there anything you recently learned or re-learned as a therapist that surprised you?**

**IY:** I keep learning and relearning the importance of patients taking a risk each session. I orientate them to that behavior in the first session by telling them the importance of taking a risk in every therapy session. Later in therapy, if resistance arises, I remind patients of my suggestion and wonder aloud when they might have come closest to taking a risk in the current session and what feelings arose to prevent it.

**HF: What influenced you to shift your focus from academic writing to literature?**

**IY:** I've always been a lover of literature and a voracious reader, and the shift occurred very gradually. One of the reasons my group therapy textbook has been successful, I believe, is that it is studded with stories—some of only a paragraph or two. I was struck many times when students said to me that it almost seemed to read like a novel. Others said to me that they could put up

with reading a lot of dry theory because they knew the story might be coming around the bend on the next page. Then I decided to put the story first and teach primarily through narrative. All my books of stories and my novels are meant to be teaching tales; my secret audience for all my writing has always been the young therapist.

**HF: Can you tell us about your soon-to-be-published book and what motivated you to write it?**

**IY:** *Creatures of a Day* is a book of 10 psychotherapy tales—all of them meant to be teaching tales illustrating aspects of an existential approach in therapy.

**HF: What are your thoughts about the recent movie about your life, *Yalom's Cure*?**

**IY:** I have mixed feelings about the movie: some embarrassment about the amount of exposure; gratitude to the filmmaker for paying so much attention to me and for making such a beautiful film; regret that the filmmaker did not include more about my writing; pleasure at the way the film portrayed my deep connection to my wife and children. While I had no editorial control over the film and there were other things I would've liked to have been included, all in all, I'm extremely pleased with it. It's been playing in Europe for the last month, drawing big crowds and getting fine reviews, but I'm not certain that it's a movie that will get into theaters in the United States. ●



**American Society of  
Group Psychotherapy  
and Psychodrama**

---

**73<sup>RD</sup> ANNUAL  
CONFERENCE**

---

**April 9 - 12, 2015**  
Sonesta Hotel Philadelphia, Philadelphia, PA

---

**SATURDAY KEYNOTE SPEAKER:**  
*Sociometry and Congress: Creating change in the conserve one word at a time*  
**DOUG WALTER, JD**

Doug Walter is the Associate Executive Director for Government Relations for the American Psychological Association Practice Organization and a leading mental health advocate in Washington, DC. He was a principle negotiator in discussions leading to Congressional passage of the Mental Health Parity and Addiction Equity Act and the Affordable Care Act. A principal privacy advocate, he helped formulate patient privacy protections in the HIPAA Privacy Rule and HITECH Act.

---

**FRIDAY PLENARY SPEAKER:**  
*The Art of Connecting*  
**ANN E. HALE, MSLIS, MA, TEP**

Ann E. Hale graduated a Director of Psychodrama with trainers J.L. and Zerka Moreno in 1973. In 1975 she founded the Toronto Centre for Psychodrama and Sociometry, and in 2005 the International Sociometry Training Network. Ann is a former ASGPP President, recipient of the Zerka T. Moreno Award and more.

---

**Pre-Conference Training Institutes / Over 20 Daily Workshops**  
In Group Psychotherapy, Psychodrama, Sociometry, Sociodrama and Creative Arts Therapies; the use of action methods in a wide variety of applications.

---

**Credit Hours / CEs**  
CEs for Psychologists (APA); Social Workers (ASWB); Counselors (NBCC); Addiction Professionals (NAADAC); Florida, California, Ohio and Texas Board Approvals; International Board of Certification of Group Psychotherapists.

---

**FOR ADDITIONAL INFORMATION, CONTACT:**  
ASGPP / 301 N. Harrison Street, Suite 508, Princeton, NJ 08540  
(609) 737-8500 / Fax: (609) 737-8510 / Email: asgpp@ASGPP.org  
**www.ASGPP.org**



## AGPA Confers Distinguished Fellowship on Elaine Cooper, Susan Gantt and Jeffrey Kleinberg

Jerome Gans, MD, CGP, LDFAGPA, and Carol Vaughan, LCSW, CGP, LFAGPA, Co-Chairs, Fellowship and Awards Committee

*In recognition of outstanding professional competence and leadership in the field of group psychotherapy, AGPA has awarded Distinguished Fellowship to Elaine Cooper, MSW, PhD, CGP, DFAGPA, Susan Gantt, PhD, ABPP, CGP, DFAGPA, and Jeffrey Kleinberg, PhD, CGP, DFAGPA. Cooper and Gantt will receive their Distinguished Fellowships at the 2015 Annual Meeting. Kleinberg has deferred receipt until the 2016 Annual Meeting in New York City.*

**Elaine Cooper, MSW, PhD, CGP, DFAGPA** (Berkeley, California), an AGPA member since 1969, was awarded AGPA Fellowship in 1987. In private practice since 1981, she received her PhD in counseling psychology from Columbia Pacific University in 1986. Dr. Cooper was awarded the Psychiatric Residents' Excellence in Teaching Award, UCSF School of Medicine, eight times between 1992-2008, where she has served either as an Assistant Clinical Professor, Associate Clinical Professor, or Clinical Professor since 1981. Since 1983, she has been a consultant for 15 different Bay Area mental health agencies. She has been a Guest Lecturer, Workshop Leader, or Keynote Speaker for the Mid-Atlantic Group Psychotherapy Society, Group Psychotherapy Association of Los Angeles, Marin County Employees, and the Psychiatric Institute, Berkeley, as well as others.



Wrote one of her references: "Elaine has endless energy, which she so generously channeled into our AGPA organization. To my knowledge, she has never turned down a request to serve AGPA in any way possible." Some of Dr. Cooper's contributions to AGPA include: Keynote Plenary Speaker, 2006 AGPA Annual Meeting; AGPA Board of Directors; Editorial Board, *International Journal of Group Psychotherapy*; Fellowship and Awards Committee Member, and Co-Chair, Nominating Committee; Annual Meeting Workshop Sub-Committee; Co-Chair Annual Meeting Conference and Institute; Co-Chair Institute Committee, Institute Committee Member; Open Session Chair, Panelist, Workshop Leader or Institute Leader. Dr. Cooper is the Chair of the Local Hosting Committee for the 2015 AGPA Annual Meeting in San Francisco.

Dr. Cooper has been a member of the Northern California Group Psychotherapy Society, where she served as President, Executive Committee Member, Institute Committee Co-Chair, Workshop and Institute Leader, Council Member, and Faculty for the Training Program.

Dr. Cooper has published 19 articles, six book chapters and three books, all on group psychotherapy. Her latest book, still in press, is titled *Let's All Hold Hands and Drop Dead: Three Generations—One Story*.

**Susan Gantt, PhD, ABPP, CGP, DFAGPA** (Atlanta, Georgia), an AGPA Clinical Member since 1995, was awarded AGPA Fellowship in 2007. She received a PhD in Clinical Psychology from Georgia State University in 1984. With Yvonne Agazarian, EdD, CGP, DLFAGPA, she helped integrate the theory of living human systems. As the Director of the Systems-Centered Training and Research Institute (SCTRI), she has been instrumental in offering and expanding SCT in seven states and in the United Kingdom, Sweden, and Holland. She leads more than 20 SCT training workshops per year. She is also an Assistant Professor of Psychiatry at the Emory University School of Medicine, where she coordinates group psychotherapy training, while maintaining a private practice in Atlanta.



Her contributions to AGPA include serving as: a member of the Hospitality and Conference Committee; Co-Chair of the Annual Meeting Workshop Committee; Co-Chair of the International SIG; and member of the Editorial Committee. She is a regular presenter at the AGPA Annual Meeting, leading Institutes, participating in Open Sessions, and co-leading an AGPA Distance Learning series on functional subgrouping. Dr. Gantt has served

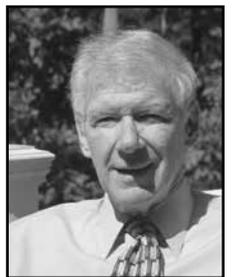
twice as a Board Member for the Atlanta Group Psychotherapy Society. She was also a Nominating Committee member of the International Association for Group Psychotherapy and Group Processes and was Workshop Chair for their Rome International Congress.

As one of her references wrote, her "quietly, competent, graceful, and unassuming style...shines outside of the limelight and goes unheralded. Her focus is on getting the job done, not gaining personal recognition."

The author or co-author of more than 30 publications, her book, *The Interpersonal Neurobiology of Group Therapy and Group Process*, co-authored with Bonnie Badenoch, PhD, LMFT, is on the cutting edge of our understanding how interpersonal neurobiology can illuminate the unique ways that group processes collaborate with and enhance the brain's natural developmental and repairing processes.

Among her many awards, she was recognized for Excellence in Teaching by the Psychology Division of the Emory University School of Medicine. The Group Foundation presented her with the Alonso Award for Excellence in Psychodynamic Group Psychotherapy for co-editing the Special Issue of the *IJGP* on *Neurobiology and Building Interpersonal Systems: Groups, Couples, and Beyond*.

**Jeffrey Kleinberg, PhD, CGP, DFAGPA** (New York, New York), a Clinical Member since 1996, was awarded AGPA Fellowship in 2002. He received a PhD in counseling psychology from Columbia University in 1975. He also has training certificates in Psychoanalysis and Psychotherapy, Analytic Group Therapy and Supervision and Specialty Board Certification for Group Psychology from the American Psychological Association, ABPP. He has an MPH in global health from Mt. Sinai School of Medicine, and holds academic appointments at Mt. Sinai School of Medicine, LaGuardia Community College and DeVry University.



Dr. Kleinberg served AGPA in multiple ways: President; Board of Directors Member; Board Member for the Group Foundation for Advancing Mental Health; Certification Board Member; Nominating Committee Chair; and Co-Chair of Community Outreach Task Force. He has also been President of the Eastern Group Psychotherapy Society and its Treasurer, as well as, Editor of *Group*. He was also a Board Member of the International Association of Group Psychotherapy and Group Processes.

He was an Assistant to the University Dean, CUNY, Dean of Students and Associate Dean, La Guardia Community College, as well as Executive Associate to the President. He was Assistant Dean of the Training Institute, Postgraduate Center of Mental Health and Co-Director of the Adult Psychoanalytic Training Program.

Dr. Kleinberg served as visiting faculty for Group Psychotherapy Training, Chengdu, China, and the Shanghai Mental Health Center, Shanghai, China. He has been Co-Leader of Trauma Training via Skype for Chinese and Indian therapists sponsored by AGPA. He was Co-Director with Priscilla Kauff, PhD, CGP, DLFAGPA, of NASDAQ's trauma relief after the 9/11 terror attacks, and was instrumental as President of EGPS in joining with AGPA for their joint effort in trauma recovery following the attacks. More recently he was a consultant with Nina Thomas, PhD, ABPP, CGP, for the Arab-American Community Service Agency.

Dr. Kleinberg has over 20 publications predominantly about group psychotherapy, individual psychotherapy and training and trauma and disaster related work and over 34 national presentations on these same topics. His most recent contribution, as Editor, *The Handbook of Group Psychotherapy*, is a comprehensive resource to the field of group therapy.

As one reference wrote: "Anyone who knows Dr. Jeff Kleinberg has little doubt of the intelligence, scholarship, integrity, commitment, creativity and compassion that he has brought to each of these areas in his many years of AGPA membership." ●

Dear Consultant:

**S**everal months ago, a relatively new member of my group asked me about scheduling an individual session. Per our group agreement, I asked him to bring it up in group, which he delayed until late in the session three weeks ago. There was not enough time to fully address the issue, so I asked him to bring it up the following week, which he did not do. At a later session, another member brought it up, at which point he stated that he got a referral from his psychiatrist, who wanted him in individual therapy, in part because she has negative attitudes toward group therapy, and so she referred him to one of her staff therapists. This seems unprofessional, since it was done without consulting me. My client thought I didn't want him in individual therapy (I just wanted to explore in the group why he wanted an individual session at this time), and asked if he should cancel the appointment. I said he might as well keep it on the books until he has a chance to talk the whole thing over with group next time. I am torn about talking with his psychiatrist, and concerned that some kind of splitting may be going on. Can you advise?

Signed,  
Torn

Dear Torn:

**Y**ou have certainly interested me in your dilemma. In considering the idea of parallel process, I see that your client is also of great interest to you, as he has you and all of us thinking about him over all these weeks. It is interesting how long it's taking to deal with the whole situation, leaving his request unattended.

What is it about him and his story that makes everyone hesitant to get involved and make decisions? There is a resistance to moving ahead, to talking, to having deeper contact with the self and others. What kind of contact was experienced in the family he grew up in? In what ways did others not mobilize on his behalf? How is it he was dropped and set aside until later, maybe until he himself found resources to make his needs known and satisfied? What feelings do group members have toward him and his request?

I am impressed by your group member's desire for time alone with you and by your desire for help by consulting with the team here. I wonder what your feeling is toward the group member and what the hesitation is in saying yes to individual meetings. Do you want to work with him individually? Does it feel easy or difficult to be with him? Do you have a relationship with the providing psychiatrist? What is your experience in your family with being excluded or left out of the consultation? What is there to understand about your group member and about you with regard to relationships with authority figures?

In your practice, is group a point of entry for treatment? Other settings begin with individual treatment and then move in to group when a level of insulation has developed in the individual to tolerate all the stimulation that group participation can generate. You reference the group agreement. What is the understanding about individual treatment as it relates to group? Does the contract suggest that major decisions be discussed in group?

You might further explore your feelings and thoughts toward the member in question, the other members, and the psychiatrist with trusted colleagues, your therapist, and in supervision, which always help me move beyond such impasses in my work and hopefully will do the same for you.

*Christine Fitzstevens, LCSW-R  
Rochester, New York*

Dear Torn:

**Y**our concerns regarding potential splitting and resistance are entirely understandable, and your desire to work hard to facilitate a deep-working, healthy group is clear. One challenge is to find a way to fully

uphold and honor the group agreements, while meeting his need to reach out for more direct contact with you. Keep in mind that the agreements are there in large part to learn more about the client when those boundaries are challenged. They are not there just to be enforced, but to enhance the sense of safety and enable curiosity and exploration within the therapeutic frame.

When he did not bring up his request in group I wondered why you didn't lend him a hand by talking about it in the group after he approached you? For example, why not wonder aloud what made it hard for him to talk in the group about his post-group request the previous week. This would give you and the group the opportunity to study the resistance, or to help him engage successfully in the group norms.

Clearly the goal is to stimulate his curiosity about his resistance to explore whatever thoughts and feelings were behind his request to meet individually, why the group might not be enough, and why he heard your desire to explore it further in subsequent groups a rejection of his request. He is denying his own agency. He reports that he is only responding to his psychiatrist's referral, not expressing a desire to get closer to you or seek deeper help, and is willing to comply with you about canceling the prematurely scheduled individual appointment, but not with your request that he fully explore his thoughts and feelings in group.

I wonder if he's having trouble finding you and you are having trouble being found. In short, you both appear to me to be caught up in doing it technically correctly and reacting to the other doing it "wrong," while missing one another all the while. It seems you both are being very careful about doing it "right" and may be losing the flow of the relationship between you.

Regarding the psychiatrist, I wouldn't assume the other professional is anti-group until you've had a conversation with her and heard her out. You might be curious as to why you hadn't already made contact with the psychiatrist as part of your initial treatment plan. She is probably holding important information since she is seeing him individually. The psychiatrist may be legitimately concerned about something, or this client may just be deferring responsibility on to the other professional, but either way, opening up communication is imperative. Rather than focusing on her not contacting you, I would just pick up the phone to hear her perspective and to share your own. It is the best way to diffuse splitting and to engage this clinician into seeing the benefits of group therapy.

*Suzette Marriott, LCSW, CGP  
Austin, Texas*

*Members are invited to contact Michael Hegener, MA, LCP, CGP, FAGPA, the Editor of the Consultation, Please column, about issues and/or questions that arise in your group psychotherapy practices. They will be presented anonymously, as in the question here, and two members of AGPA will be asked to respond to your dilemma. In this way, we all benefit from members' consultation from an objective point of view. SIG members are also encouraged to send cases that pertain to your particular field of interest. Michael can be reached by fax at 512-524-1852 or e-mail at hegener.michael@gmail.com.*



American Group Psychotherapy Association, Inc.  
25 East 21st Street, 6th floor  
New York, NY 10010

See *Group Assets* insert

## Affiliate Society News

The **Group Psychotherapy Association of Los Angeles (GPALA)** continues to seek ways to increase diversity within its membership and to offer support to therapists who work with diverse populations. To that end, GPALA has vastly increased its scholarship program, which is headed by Nancy Fawcett, MFT, CGP, and it has updated its bylaws. In November, Membership Chair Liz Selzer-Lang introduced a new fee schedule designed to give every group therapist in the Los Angeles area greater access to GPALA. A greatly reduced rate is now available to anyone who needs it, such as those at the beginning or end of a career, those working part-time, or those who work at lower paying clinics. Also available are new ways to donate to the organization that will help GPALA afford to offer workshops and conferences on a more diverse range of topics. GPALA's November conference on *Spirituality in Group*, led by Alexis Abernethy, PhD, CGP, addressed spirituality and religion as an often covert diversity issue. GPALA's membership and board remain grief-stricken by the loss of former President Carla Dehry-Snijders, PhD.

**Houston Group Psychotherapy Society (HGPS)** members Helen Chong, LCSW, CGP and Richard Newman, LPC-S, LCSW, CGP, FAGPA, taught the 12-hour *Principles of Group Psychotherapy* course to 16 participants earlier this fall. This AGPA-sponsored course was designed to provide basic understanding of the theory, principles, and application of group psychotherapy. By taking the course, the participants met the educational requirement for the Certified Group Psychotherapist (CGP) designation by the International Board for Certification of Group Psychotherapists.

The **Illinois Group Psychotherapy Society (IGPS)** heralded its 50th Anniversary through a gala celebration honoring its past presidents and two special long-term contributors to the organization: Hylene Dublin, MSW, CGP, L FAGPA, and Barney Straus, MSW, MA, PCGC, CGP, who have been instrumental in maintaining the status of IGPS as a thriving Affiliate Society. Nine past presidents contributed their recollections to an historical document and recounted the many years of dedication to the mission of encouraging research, scholarship, and quality professional practice. On April 17-18, Shelley Korshak, MD, CGP, FAGPA, will conduct *The Magic of Growth and Change: Psychodrama Action Techniques*.

The **Louisiana Group Psychotherapy Society** rounded out the year with a one-day institute in Baton Rouge on Mindfulness, presented by John Pickering, PhD. This followed the two-day institute in New Orleans, featuring Richard Billow, PhD., ABPP, CGP, who presented *It's All About Me (And You): The Therapist's Use of Self*. The experiential institute included concepts from his soon-to-be-published book, *Developing Nuclear Ideas: Relational Group Psychotherapy*. Susanne Jensen, PhD, CGP, FAGPA, presented an institute on *Finding Your Own Style as a Group Psychotherapist*. Dr. Jensen was presented with a student scholarship in her name to honor the many years of distinguished service and invaluable contribution to group psychotherapy.

At the 2014 summer meeting of the Affiliate Societies Assembly in Chicago, **Mid-Atlantic Group Psychotherapy Society (MAGPS)** member Lenore Pomerance, MSW, CGP was chosen to receive this year's Affiliate Assembly's Award. This is given to the member who has made outstanding contributions to his/her society. The award will be presented at the Membership Community Meeting at the 2015 AGPA Meeting in San Francisco. Reginald Nettles, PhD, CGP, former MAGPS President, of the National Group Psychotherapy Institute (NGPI) is chairing a program *Mirrors and Kaleidoscopes: Diversity in Group Psychotherapy*, on January 23-24 at the Washington School of Psychiatry in Washington, DC. MAGPS's Spring 2015 Conference will be held April 18-19. Kimberly Ewing, PhD, and Bridget Rivera, Psy.D will present *Integrating Authentic Cultural Competence into Group Psychotherapy*.

The **Northern California Group Psychotherapy Society** will hold its Annual Dinner at the Berkley Yacht Club on January 24. This is an opportunity for members and colleagues to come together to network and make social connection.

Upcoming programs of the **Puget Sound Group Psychotherapy Network (PSGPN)** include: January 16—Trisha Ready, PhD, on *Using Music to Develop Narrative in Group Therapy* and January 30-31—CGP Training, led by Paul Berkelhammer, MA, LMHC, CGP; Eugene Kidder, MDiv, CGP, FAGPA; Ann Blake; and Yvonne Owen, PhD. PSGPN's Annual Spring Conference will be held April 24-26. Jeffrey Hudson, MEd, LPC, CGP, FAGPA, will speak on *Emotional Availability in Group: Expanding the Capacity for Intimacy in Group Members and Group Leaders*.

The **Westchester Group Psychotherapy Society** held a Special Workshop led by Rebecca Walkley, LMHC, CGP on *Creating Safety in Group: Moving Through Traumatic Bereavement*. The program identified the symptoms of traumatic bereavement resulting from loss by suicide, homicide, and accidental death as complex PTSD; identified three layers of safety necessary for effective group therapy; and described methods of creating safety within each layer. On January 23, *Finding the Fear®: A Couple Therapy Training Workshop* will be presented by Lee Kassan, MA, CGP, and on January 24, Margaret Postlewaite, PhD, CGP, FAGPA, and Leonardo Leiderman, PsyD, ABPP, CGP, will hold a special *Process Group Experience* for their members.

Please note: Affiliate Societies may submit news and updates on their activities to Kathy Reedy, MSW, MFT, BCD, CAD, CGP, Editor of the Affiliate Society News column, by e-mail to: [Kreedy57@gmail.com](mailto:Kreedy57@gmail.com).

Visit AGPA's website at [www.agpa.org](http://www.agpa.org) for updated Affiliate Society meeting information. For space considerations, upcoming events announced in previous issues are included in *Group Connections*.