

Spring 2014

From the President Homeward Bound

Les Greene, PhD, CGP, LFAGPA

y first column and I don't know what to write, or rather, I have too much to write, too many ideas, associations, images of our AGPA, and this



exciting role as President. I'm feeling like the leader of a large group session, bombarded by all sorts of stimuli, coming from all directions, including my own internal world. So I want to get this inaugural piece right because, after all, this organization is ours yours and mine, our collective professional home.

Indeed, I was musing about the idea of home as I boarded the train from Boston to New Haven following our highly successful Annual Meeting in March. The phrase "AGPA as our professional home" is now such a familiar refrain at our meetings. So what does it mean, this term of endearment? Why do we say it so lovingly? After all, we all have left home and rarely, if ever, do we go back. I like what Bart Giamatti—you know, the former President of Yale, the former Commissioner of baseball, and, most important to me, the former owner and resident of my personal home in Hamden, Connecticut—said: "Home is an English word virtually impossible to translate into other tongues. No translation catches the associations, the mixture of memory and longing, the sense of security and autonomy and accessibility, the aroma of inclusiveness, of freedom from wariness, that cling to the word home....Home is a concept, not a place; it is a state of mind where self-definition starts; it is origins—the mix of time and place and smell and weather wherein one first realizes one is an original, perhaps like others, especially those one loves, but discrete, distinct, not to be copied. Home is where one first learned to be separate and it remains in the mind as the place where reunion, if it were ever to occur, would happen."

I believe we all long for home (cf. Seiden, 20), and AGPA represents that to many of us, perhaps all of us. It is the home of great scholar-clinicians

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

Different Shades of Self: On Culture's Undeniable Impact Kavita Avula, PsyD

Editor's Note: Kavita Avula, PsyD, is a licensed clinical psychologist who specializes in international and crosscultural psychology, trauma and resilience, and crisis and critical incident response. Dr. Avula currently serves as a consultant for The World Bank Group Counseling Unit, an associate with the KonTerra Group, and practitioner for Greenleaf Integrative Strategies, LLC, firms that provide organizational and individual support to international aid organizations that have projects in conflict-affected areas. She is completing Harvard University's Global Mental Health Trauma & Recovery Certificate Program. Her first book chapter on acculturation will be published this year in the book Multicultural Approaches to Health and Wellness in America.

t was the end of the day and I was relaxing at an African bush camp having enjoyed my first safari. I found myself chatting with a one-year-old Kenyan girl. The dialogue was quite entertaining given that I don't speak Swahili, and she didn't speak any English. We had a good rapport, nonetheless, evidenced by the smiles and coos that characterized the chat. At one point, she pointed at me and declared to her father, *Muxungu*. He laughed and averted his eyes, amused and not quite sure what to do with it.

Having had my share of cross-cultural encounters as an international psychologist, I was certain I knew what she had said. I asked her father what *Muxungu* meant, and he confirmed my hypothesis: "It means white person." He was surprised at my response: "I thought so."

This was different from my initial response to a similar interaction 15 years ago. I almost fell over when a group of three-year-old girls at an all African-American Head Start Center asked me what it felt like to be white, after running their fingers through my hair. I checked my skin and was stunned with their response to my question, "Who's white?" "You are."

The very early age at which socialization occurs, and with it the internalization of socio-historical-political constructs of privilege and power, still astounds me. Whether the most accurate terms are used or not, difference is clearly registered for those groups of people who have been routinely marginalized, colonized, and demeaned by the world's societies. I am reminded of Janice Gump's, PhD, discussion of the automaticity of race-based stereotyping in her article *Reality Matters:* The Shadow of Trauma on African American Subjectivity (2010). The research that sought to assess the effect of Afrocentric features on assignment of descriptions found that it was not just race, but physical features associated with marginalized groups that yielded a higher likelihood of stereotypes with a negative valence. The broader the nose and the fuller the lips, the more likely the continued on page 7

AGPA received the New York Society of Association Executives' (NYSAE) 2014 Synergy Award for Website Excellence. The award recognized AGPA's website for immediacy of overview; ease of navigation; aesthetics; consistency; timeliness of content; internal search capabilities: usefulness: interactability: originality and internet vision. NYSAE noted that links to AGPA's presence on social media also extended its ability to engage members beyond its core website. AGPA staff members accepting the Website Excellence Award (from left to right) were: Helen Li, Executive Assistant; Diane Feirman, CAE, Public Affairs Director; Marsha Block, CAE, CFRE, Chief Executive Officer; Angela Stephens, CAE, **Professional Development Director; and Leah** Penny, MBA, Membership and Credentials Director.



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President

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who once lived here but no longer, personal heroes of mine such as K. Roy MacKenzie, Anne Alonso, Harold Bernard, Mark Ettin, group therapists who we remember through their writings and through our annual memorial service; it is the home of our colleagues, who we reunite with year after year, sharing laughs and tears, successes and disappointments of the past year; and it is the home that will remain after us as we welcome new generations of group therapists to the fold, a home whose permanence we strive to ensure through our gifts, our



t has been an exciting period

following the Annual Meeting, with a lot of people sharing very productive ideas for articles. In this issue, we are treated to a retrospective of the fascinating work being done by the Red Well Theater Group, formally organized by its Founding Director, Robert Schulte, MSW, CGP, FAGPA. Some of you might remember its debut at the 2006 AGPA Annual Meeting, when it presented a dramatic reading of Yasmina Reza's play *Art*, which it viewed through the lens of Lacanian desire. Since that time, it has traveled all over the world using plays to evoke affective experiences that can be used to examine small group dynamics through experiential learning and post play processing.

Kavita Avula, PsyD, wrote a poignant and powerful essay about the impact of race and culture on the development of the self, which she had recently presented at the Washington School of **Psychiatry National Group Psychotherapy** Institute's January conference Context and Multiculturalism: Power and Privilege in Groups and Organizations Explorations through the Large Group Experience. Karen Travis, MSW, CGP, FAGPA, offers us an intimate look at her process (internal and external) running as a candidate for AGPA President, showing courage and vulnerability in allowing us a glimpse of her experience "on not winning" and her resilience in vowing to continue the work she has tirelessly engaged in for so many years. In the

vein of tireless promotion of group work, Donna Markham, OP, PhD, ABPP, CGP, a frequent contributor to *The Group Circle*, was deservedly awarded the Harold S. Bernard Group Psychotherapy Training Award by the International Board for Certification of Group Psychotherapists and recognized here by Judith Coché, PhD, ABPP, CGP, LFAGPA.

It is with sadness and deep respect that Howard Kibel, MD, CGP, DFAGPA wrote the In Memoriam for Fern Cramer Azima, PhD, CGP, DLFAGPA, who passed away in December, the same month that saw the passing of Irene Harwood, MSW, PhD, PsyD, CGP, FAGPA, who was remembered in this issue by Marvin Kaphan, MSW, CGP, LFAGPA.

I continue to encourage AGPA members to submit articles on issues related to group therapy, consultation, theory, or research. Please feel free to contact me to discuss your ideas.

Harold S. Bernard Group Psychotherapy Training Award Presented to Donna Markham, OP, PhD, ABPP, CGP Judith Coché, PhD, ABPP, CGP, LFAGPA

The International Board for Certification of Group Psychotherapists (IBCGP) presented the 2014 Harold S. Bernard Group Psychotherapy Training Award to Donna Markham, OP, PhD, ABPP, CGP, at the 2014 AGPA Annual Meeting in Boston.

In a variety of healthcare settings, Dr. Markham redesigned the treatment delivery model and initiated a structured treatment program that had psychodynamic group psychotherapy as the central component. At Catholic Health Partners, she led the transformation of the delivery of psychiatric services across seven geographic regions by designing and implementing a system-wide, consolidated organization, The Behavioral Health Clinical Institute, with a structured training component. The Institute reports that its quality metrics and treatment outcome measures indicate a marked improvement in patient and staff satisfaction across the system. As part of the training program, Dr. Markham also introduced an innovative supervision method via video conferencing and streaming to allow for live supervision. This model has increased communication among geographically separate sites, creating an enriched and connected learning environment. She also extended group therapy training to chaplains and spiritual care staff.

In addition to spearheading innovative and effective training methods in group psychotherapy, Dr. Markham is an international presence in peace work. She has conducted group work in Iraq to assist in the reconciliation and forgiveness efforts of religious leaders from the Christian minority communities and continues this work through the use of Skype. "Dr. Markham has created a system in which group psychotherapy is an integral component and structured training a cornerstone of a quality delivery system," said Sherrie

Smith, CSW-R, CGP, FAGPA, IBCGP Chairwoman. "This combination captures the essence of the Harold S. Bernard Group Psychotherapy Training Award."

Dr. Markham has been visionary in her ability to plan high-level training for hundreds of colleagues, as well as for thousands of people worldwide. In an informal conversation with Dr. Markham, I observed that the level of recognition received from her colleagues genuinely humbled her. She thanked us repeatedly for the award, but her interest was clearly in doing fine work for those she serves worldwide. She has operationalized the very standards for group therapy training programs that we are promoting through the International Board for Certification of Group Psychotherapists.

This award was established in 2001 and is given annually to an individual or organization whose work in group training and/or education contributes to excellence in the practice of group psychotherapy. It was recently renamed through a legacy gift provided to the Group Foundation for Advancing Mental Health by Dr. Bernard's estate for the purpose of endowing the award. Throughout his lifetime, training in group psychotherapy was near and dear to Dr. Bernard's heart. His legacy bequest and this award ensure that individuals and programs meeting a high standard of training quality are identified and honored for their contributions to the field in developing the next generation of clinicians who use group psychotherapy to help people.

legacies. It is a home that is restorative, revitalizing: I always leave an Annual Meeting filled with new projects in mind, new energies to build our work, to advance the cause of group psychotherapy.

As I write these words, I am energized by recent achievements and current projects. Take our new and awardwinning 21st century website: intuitive, multifaceted, comprehensive. Many of us have already discovered how easy it is to find who and what we need. And it's continuing to evolve. For example, a community bulletin board dedicated to newly appointed committee and task force chairs has been established; members can find the new appointments for the next two-year period on the website in the About Us section. New content is being added all the time, including updated references on the empirical evidence of group therapy effectiveness, pre-publication articles in IJGP (coming shortly), and a host of other educational and professional offerings. Already the Annual Meeting Committee is well underway in designing what promises to be another exciting Institute and Conference next year, in San Francisco. Brainstorming for our 75th anniversary celebration in 2017 has begun! And to ensure that we stay on task as an organization, our vision of AGPA "to be the catalyst for promoting the use of groups as the method

of choice for healthy living" and our four core goals (education/learning/ research; community outreach/visibility; membership and organizational sustainability) are being revisited and, importantly, re-defined in terms that will facilitate the assessment of their achievement.

So, welcome to those who are joining us, and welcome back to returning friends and colleagues. Welcome home.

References

- Giamatti, A.B. (1998). A great and glorious game. Chapel Hill, NC: Algonquin Books.
- Seiden, H. (2009). On the longing for home. Psychoanalytic Psychology, 26, 191-205.

Red Well Theater Group: Combining Play Reading with Group Process

Robert Schulte, MSW, CGP, FAGPA

Editor's Note: Robert Schulte, MSW, CGP, FAGPA, is the Founding Director of the Red Well Theater Group. He is a faculty member of the Washington School of Psychiatry Group Psychotherapy Training Program and maintains a private practice in Alexandria, Virginia. Members of the RWTG include: Maryetta Andrews-Sachs, MA, LICSW, CGP, FAGPA; John Dluhy, MD, FAGPA; Mary Dluhy, MSW, CGP, FAGPA; Molly Donovan, PhD, CGP, FAGPA; Hallie Lovett, PhD, CGP; Rosemary Segalla, PhD, CGP, FAGPA; Paul Timin, MSW; Barry Wepman, PhD, CGP, LFAGPA; and Rob Williams, MSW, CGP. Active guest artists include: Kavita Avula, PsyD; Connor Dale; Barbara Keezell, MSW, CGP, FAGPA; Elizabeth Marsh, MSW; Yavar Moghimi, MD; and Tom Teasley.

"I regard the theater as the greatest of all art forms, the most immediate way in which a human being can share with another the sense of what it is to be human."—*Oscar Wilde*

heater and group therapy share a common bond. Both are collaborative endeavors designed to provide intimate, interactive, small group experiences for the purpose of healing, growth, and meaning-making. Bearing witness to the empathic other is central to their success. I have been positively influenced by the power and genius of both these kindred traditions. The theater formally introduced me to my psychic life. Group psychotherapy gives my professional identity depth and purpose. I have incorporated many of its principles and practices in a project that began as an associative flight of fancy in 2002. Since then, it has developed into an avocation that nourishes my professional life.

The Red Well Theater Group offers experiential learning for the therapistas-actor through dramatic play readings and for the therapist-as-audience through bearing witness and shared reflection. Our goals are to illuminate themes of recognition and wellbeing in and beyond the therapy group, to deepen the therapist's empathy for the challenge of being in a group, and to provide a vitalizing experience in support of the therapist's self care.

After a few years of presenting play readings at group therapy conferences, the Red Well Theater Group was formally organized in 2008. The founding members are colleagues from Washington, D.C. who share a love of theater and a commitment to group therapy training. Their empathy and affinity for improvisation is a natural outgrowth of their group therapy practices. A guest artist program invites young professionals and other colleagues to participate on a per project basis. Working with diverse, multi-generational acting ensembles has enhanced the range of our theater presentations and enriched our group process. Mentoring the next generation of group therapists has become a highly valued experience for the members and our guest artist colleagues.

Presentation Format

My careers as a stage director and group therapist helped me devise a performance format and rehearsal process that reflects the group member's acting talents, educational goals, and therapeutic sensibilities. The simplicity of a reading bypasses the need to memorize lines or to move about the stage. Performing in the round mirrors the physical arrangement of a therapy group. These adjustments allow the therapists-as-actors to become more deeply immersed in the here-and-now of dramatic, interpersonal exchange. Scripts are selected for their resonance with the group therapy experience. As the director, I simultaneously approach the play as a drama, a process recording, and a dream. This gives the ensemble greater latitude in the process of interpreting the play and linking its relevance to the group therapy enterprise.

Art historian and educator Terry Barrett has been instructive in our efforts to develop a dialogical framework for the discussion segment. Mr. Barrett (1999) observes, "Works of art are mere things until we begin to carefully perceive and interpret them—then they become alive and enliven us as we reflect upon, wonder about, and respond to them. When we choose to interpret out loud to others who want to hear us, we become active participants in public life rather than passive observers, moving toward community and away from isolation." Our post-performance discussion has evolved from a free associative exchange to a more intentional process that begins with a two-person 'talk to your neighbor' segment, followed by a formal discussant response, and concludes with a facilitated audience conversation. This sequence emphasizes emotional safety while preparing everyone to participate openly in the communal dialogue.

Preparing our 2014 Open Session

For nearly a decade, the AGPA Annual Meeting has been a meaningful opportunity for us to develop our model. Our first presentation in 2006 featured the play *Art* by Yasmina Reza. The play is about a white painting and Lacanian desire. On our third outing in 2008, we presented *Off the Map*, by Joan Ackermann, an allegory about the wounded healer in us all. Our Plenary presentation of *Off the Map* at the 2010 Northern Ireland Group Psychotherapy Conference in Belfast was our first opportunity to experience the power of a play reverberating throughout an entire conference (Dluhy & Schulte, 2013).

This year at AGPA's Annual Meeting in Boston, we presented *The Great God Pan*, by Amy Herzog. Unsettling and yet deeply compassionate, the play provides an intimate account of what is lost and won when a long hidden truth is revealed. The central character Jamie has a seemingly idyllic life in Brooklyn, New York—a beautiful girlfriend, a budding journalism career, and parents who live just far enough away. When Jamie discovers he may have been the victim of a childhood sexual trauma, his life is thrown into a tailspin. The Great God Pan explores the influence of traumatic experience on memory processes, the impact of childhood sexual abuse on adult intimate relationships, the destabilizing effects of family secrets, and the healing power of truth seeking within a group context.

Preparing an ensemble of group therapists-as-actors to present a play reading of such potent dramatic material is a complex process. The interplay of artistic sensibilities, small group dynamics, trauma histories, and performance anxieties calls for a highly collaborative approach with special attention to the containing function. With this in mind, we assembled a group that included both regular members and guest artists, two of whom were participating for the first time. The leadership team included a play director, consultant, and discussant, with shared responsibility for direction, containment, and emotional support.

A unique feature of the rehearsal process is the inevitability that the drama will get under our skin, inside our hearts and minds, and even into our souls. We unconsciously feel, think, and relate to each other in ways that resemble the characters and their torment. Having seen this process unfold many times in previous projects, I was concerned about the play's traumatogenic potential to overwhelm us. To help neutralize this possibility, I engaged professional musician and sound healer Tom Teasley to use his skills to facilitate emotional regulation within the acting ensemble and eventually the audience. Tom and I selected three harmonically resonant instruments often used in healing rituals around the world: an African flute; a Scandavian hang drum; and the ancient frame drum. Rather than aspiring to theatrically accentuate the horrific dimensions of the play, Tom directed his attention to the vulnerable, emotional experience of the characters. He used the instruments to connect, join, and tonally empathize. We scored the music to be played only between the scenes, rather than underscoring the dialogue itself. The conceptual shift to focusing on the vulnerable and the unspoken was transformative. Additionally, the leadership team was vigilant throughout to manage boundaries with sensitivity and clarity. We also devised an extended, two-phase approach to the rehearsal process to better insulate the members of the ensemble.

The initial phase featured a once-a-month study group conducted for three months, where the actors read the parts of different characters. This helped the actors develop a play-as-a-whole understanding and deepen their empathy for the vulnerabilities and strengths of all the characters, not just the one they played. Each of these early rehearsals also included a group process sescontinued on page 6

On Not Winning The Election

Karen Travis LCSW, CGP, FAGPA

I like to say "not winning" because it sounds better than I lost the election. I recall when the phone call came from AGPA Nominating Committee Chair and Past President Jeffrey Kleinberg, PhD, CGP, DFAGPA, asking me to run for President and my asking for 48 hours to give an answer. I was pretty sure I was going to say "yes," but wanted to make sure of my decision. I thought of all the governance positions I had held on the Board of Directors and Executive Committee, knowing and caring about so many AGPA members, feeling sure I could work well with Marsha Block, CAE, CFRE, our CEO, who is a really a teddy bear (okay, okay, tough as well).

I had been asked to run for President in the past, but I had determined they were not my times. Sitting quietly in the garden one morning listening to the fountain, which is made from my mother's wash pot, I recalled Anne Alonso's reference to the AGPA as a village well. Certainly the AGPA had provided me a professional home over the years, nourishing and accepting me. So after talking to family and friends and after careful consideration, I let Jeff know my answer. Why I wanted to run for President has been discussed in my campaign platform. Instead I want to share my journey and experience of not winning. I have hesitated many times to submit this article. Mary Dluhy's Institute Opening Plenary in New Orleans, titled *What Are We Hiding and Whom Are We Hiding From*, kept coming to my mind. So I take the risk to tell my story and trust my AGPA group.

I recall that as long as I did not give an answer the boat was still at shore. Once I said yes the boat would set sail and there would be no turning back. I was ready for the race/journey and ready to become President. The age thing was lining up (I would be 58 when I became President). Then, I realized maybe I would deliver my presidential talk in Austin, as there was talk they would host the Annual Meeting in 2016. That city holds special meaning for me. The last AGPA Annual Meeting in Austin I brought nine students. Those of you, who know me, know the rest is history. As President-Elect, I would attend the Annual Meeting in San Francisco, the city where I met Etta Martin, MSW, CGP, FAGPA, my AGPA mentor. So you see, it felt as though the stars were lining up for me. Then I started to think about what I might say in the presidential talk ... "wait a minute, Karen, get back here girl." But that kind of magical thinking served its purpose, as it motivated and energized me.

So I set forth and focused on the reality of my voyage and constructed my campaign strategies. I created a support group to see me through the voyage through phone calls and emails. This support group was at my side throughout the year. I ran my campaign as I would a group, setting goals, purpose, guidelines, and so on. You get the picture. From the time I agreed to run until the call telling me I did not win, the campaign stayed with me, sat on my shoulder, and took up space in my mind and my heart. I worked hard to stay in the hereand-now of running for President. I have no regrets about running and feel great about my campaign. My platform still stands, and I will continue to do my work for AGPA as I have always done. I did my last campaigning on December 31 and was relieved when January 3 arrived and the voting closed. I could see the shore. I remained hopeful to be the first AGPA President from the deep South. Then on January 5, then President-Elect Les Greene, PhD, CGP, LFAGPA, called to say I had not won the election. I was very disappointed.

While I have yet to feel hurt or anger, I do not think I am in denial. I really do not see this as a narcissistic injury. When I said yes, I knew someone would win and someone would not win. Did I feel competitive in the campaign? Absolutely. Did I believe I was the best qualified for the job? Absolutely. I would not have said yes otherwise. I wanted to win just as my opponent Eleanor Counselman, EdD CGP, LFAGPA, wanted to win. As long as AGPA runs contested elections, there will be competition. Eleanor and I collaborated about how we would navigate that course with integrity. My time was now, although my friends who believe in the notion "it was meant to be" would say, "no it was not your time." And so it wasn't, which was deeply disappointing.

And yet, I feel like a winner. I am glad I took the risk to run for the highest AGPA office, to put myself out there, to feel vulnerable, to trust an organization and so many members that I am so fond of. In that respect, I did not hide. I have and will continue to hold the organization in my highest regard, by mentoring, presenting, bringing students and new professionals to the fold, and always promoting group as a valuable treatment modality. Wherever I think a need exists in the organization, I will continue to step forward to meet it.

I wondered throughout the campaign and continue to do so, why only a third of the voting members vote. Where are the other 700? What are the thoughts of those who are not voting members? Do members care about governance, or is AGPA only an Annual Meeting, where we see our friends every year, learn the latest best practices for our profession, get our continuing education units, and have fun in the host city. I continue to think about how to get the other 700 members more interested in governance and see the benefit of increased involvement in AGPA.

In conclusion, I want to thank those members who supported me openly, those who supported me silently, and all who voted for me. I want to thank my former students, mentees, and supervisees who all made calls on my behalf. They are not voting members and yet all wanted to help me get elected. It is comforting to know so many were in my camp. I so appreciate my family who backed me fully, knowing the time it would take if elected.

I wish those who were elected into governance the very best, and they have my full support. To those who took the risk to run and did not win, I offer a BIG congratulations. We must not hide, most of all from ourselves.

AGPA Releases New Teaching Manual: A Group Therapist's Guide To Process Addictions

GPA has released a new teaching and participant manual. A Group Therapist's Guide to Process Addictions, by Shelley Korshak, MD, CGP, Marcia Nickow, PsyD, CADC, CGP, and Barney Straus, LCSW, PCGC, CGP, is designed to provide faculty and students with the materials and bibliographical resources necessary for didactic and experiential courses in the specialized skills necessary to understand and treat the full range of process addictions, including rage, self-injury, gambling, money, codependency, relationship, romance, sex, technology, work and religion.

This comprehensive manual guides the reader through the field of addictions as a whole, presenting clinical assessment of addictions and co-occurring disorders, DSM issues, relevant neuro-scientific findings, ethical and legal considerations, recovery principles and the therapeutic process, plus each of the major process addictions-everything that the clinician needs for diagnosis and treatment. It focuses on group psychotherapy approaches and covers individual, couple, family, twelve step recovery, and psychopharmacology along with other adjuncts to group psychotherapy.

Most of the literature focuses on single addictions, but the reader will see that the different addictions inform each other. This ground-breaking discussion of the field as a whole advances our understanding of addictions and clarifies the therapeutic process.

Tony Sheppard, PsyD, CGP, FAGPA, Chair of the International Board for Certification of Group Psychotherapists, said: "As the standard setting body in the field of group psychotherapy, the Certification Board commends this important and timely publication which provides a bench-



mark of knowledge for therapists working with clients who struggle with these addictions."

To purchase this or other AGPA curricula, visit the AGPA Online Store at www.agpa.org.

Dear Consultant:

was excited to start my first group almost a year ago, with three men and three women. Recently, I have noticed my enthusiasm wane, to be replaced with anger, disappointment, and hopelessness. The group seems to have evolved into an employment seminar, with people bringing in problems from their workplaces, and members alternating helping one another with their work. There is a lot of advice-giving and problem-solving. Members say that the group is helping them, but one member is absent regularly, and two other members are talking of leaving. I'm not sure how to make this a real group. Can you advise?

> Signed, Forlorn

Dear Forlorn:

A unique feature of group therapy is that each group member can enact, discover, and explore his or her unique way of being alone in the group. We all struggle with issues of intimacy and closeness (the distinction I make here is that intimacy is about differences and closeness about communality). In ways that are frequently out of our awareness, each of us does a relational dance with others to maintain the emotional distance with which we are comfortable. But the cost is relational stagnation.

Group leadership entails, among other things, facilitating members discovery and solidification of communality (closeness), so that they can begin to explore differences. Communality provides the rope, metaphorically speaking, that binds them together, but which also serves as a tether that allows members to separate without feeling disconnected. Emotional risk-taking will not likely be undertaken without the group facilitator's help. When the group gets caught in an emotional enactment there is a foreclosure of curiosity. The group stays at the level of the everyday, uninterested in why the group is talking about this or that. They lack curiosity about each other's emotional motivations and what is happening in each other's inner world. For whatever reason(s), the group either has not learned to ask these questions, or doesn't feel safe to do so. It is your job to insert curiosity into the group, in whatever fashion works for you.

From a Lacanian perspective, one could think of your group as being in the Imaginary register, dealing only with those issues that support how one imagines oneself in relation to the other, at the level of the ego (essentially at the level of self-esteem, anxiety maintenance, and social competence.) What is excluded are anxieties about the demands of the big Other (society, parents, work), as well as their unconscious envy towards each other—the feeling that everyone around them has gotten a better deal in life (is richer, smarter, better looking, etc.). Lacan calls this the "jouissance of the other." Competition, envy, greed, and hate have to be explored, expressed, and contained within the group in order for group members to feel safe enough to explore the even more frightening fears associated with love those involving dependency, trust, and thoughtfulness (there is no greater gift of love than knowing that others are thoughtfully and emotionally, rather than nostalgically and sentimentally, evoking you).

No matter where you direct the group, you will enter uncharted territory. If you don't have much experience navigating a group, give yourself the education and support you need by getting regular consultation from someone you can trust and who knows his or her stuff. It will be important, as well, to explore what unconscious fears you have about intimacy and closeness, especially as they relate to this particular group.

Scott Conkright, PsyD, CGP Atlanta, Georgia

Dear Forlorn:

y first reaction to your question was "You could've been reading my group notes!" Your willingness to explore your feelings puts you in a good position to understand what's going on in your group. I wonder if the feelings you're experiencing represent an objective countertransference (Ormont, 1970), induced by the unexpressed feelings of your group members. Your awareness of your initial feelings of excitement followed a year later by anger, disappointment, and hopelessness provides an excellent guide to what might be happening in your group. Perhaps your feelings reflect those of your group members who found themselves excited about the potential for a deeper emotional experience in group but instead are reenacting old avoidant patterns.

The goal of group is to illuminate the forces that prevent free verbal expression of thoughts and feelings. It can be tempting to focus entirely on individual member resistance toward free expression; however, it sounds as though your group is currently expressing a group or shared resistance, perhaps to ward off anxious and fearful feelings. Your group members seem to be using a defense against talking in a progressive way about their thoughts and feelings toward you and each other by collectively engaging in less risky behaviors, like advice-giving and complaining about out of group experiences. Your description of members' cohesiveness and positive feelings about the group, coupled with their avoidance of more difficult emotions suggests a status quo resistance might be operating (Rosenthal, 1987). Expressing anger or disappointment in the moment might represent a frightening change for them in the group and potentially in their own lives!

A group resistance can include all members or a subgroup. Cues to its presence include persistent violation of one or more group agreements (such as immediacy and putting thoughts and feelings into words), universality of group member resistance, and your own objective countertransference reactions. Unacknowledged group resistance can be treatment destructive by threatening the opportunity for insight, reducing the level of trust and safety in the group, and ultimately threatening the viability of your group. The frequent absence of one group member and the thoughts others are having about leaving may be indications that unresolved group resistance is operating.

It's possible that your confusion about what is going on in your group is induced as well; your con-

going on in your group is induced as wen, your confusion and feelings of hopelessness may be in tune with theirs. In studying the resistance, questions that might arise include: "Are my feelings of disappointment, anger, and hopelessness representing members' suppressed feelings about the group and about me as a leader?" "Why are all of the group members avoiding putting their feelings about the group and each other into words?" "How might their complaints about work be symbolic of their complaints about the group experience?" "What is driving their fear of expressing immediate reactions in this group?"

The next step might be to help the group to recognize, understand, and talk about their fears of expressing riskier feelings and thoughts, with the goal of moving them toward more alive, immediate interactions with one another. Whole-group interventions that are free of anger or criticism may help your group to be curious about their resistances to more progressive communication and encourage a more open expression of their feelings of anger and disappointment in the moment. For example, you might call attention to the group's resistance by stating an observation about their behaviors of concern: "I notice that group members are not expressing thoughts and feelings toward one another in the room." You might also join with their apparent anger and disappointment in order to provide an object for their expression: "How am I failing to help you express your feelings toward one another here?' Or more directly: "I have the idea that this group is not only angry and disappointed with your workplaces, but with me," or "What am I doing to discourage you from talking to one another and to me?" Members might be asked, "What are your objections to saying everything?" and "Is this group feeling hopeless?" Alternately, a particular member might be asked to comment on the resistance, such as, "John, how am I failing to help this group be a more effective working group?" "Mary, what is going on in this group that we are not talking about our feelings in the room?" You might name potential alternatives to the resistance, such as "Perhaps by talking about the disappointment and anger you feel in this group, you will find a way out of the traps you find yourselves in at work." Finally, a prognostic intervention might be used at the beginning of a group session, in which you might ask, "Who will be the focus of our job advice today?"

Group resistance is not an unusual phenomenon but can be challenging for the group therapist. You are doing well to notice and name your experience in the group. Interventions designed to help your members express their thoughts and feelings toward you and one another will help them return to an engaged and actively working group.

> Marie Sergent, PhD Rochester, New York

Ormont, L.R. (1970). The use of the objective countertransference to resolve group resistance. *Group Process*, Winter, 96–111.

Rosenthal, L. (1987). *Resolving resistance in group psychotherapy*. Northvale, NJ: Jason Aronson, Inc.

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.

In Memoriam Fern Cramer-Azima, PhD, CGP, DLFAGPA

n December 18, 2013 Fern Cramer-Azima, PhD, CGP, DLFAGPA, passed away in Montreal. With her passing, AGPA lost a giant, and I lost a good friend. Fern was a Distinguished Fellow of both AGPA and the International Association of Group Psychotherapy. Her contributions to our field are legion.

In AGPA, she was a presenter at every Annual Meeting since 1963. She served in numerous capacities in the organization. Only a few will be mentioned here. She was Editor of the *AGPA Newsletter* (the forerunner of *The Group Circle*), Editor of *Group Assets*, and Chairperson of the Publications Committee. In the latter capacity, she was a Consulting Editor of the American Group Psychotherapy Association Monograph Series and co-edited the edition on *Adolescent Group Psychotherapy*. She and I cochaired the Program Committee for the Annual Conference, a collaboration that forged our friendship. She had been an AGPA Board member for many years and served on the Executive Committee, as well as Treasurer. She was also a Board member of the Group Foundation for Advancing Mental Health (formerly the Group Psychotherapy Foundation). She was also extremely active in the Canadian Group Psychotherapy Association (CGPA), where she was a Founding Member, mentored many CGPA members, edited its newsletter, and ultimately served as CGPA President.



She spent her career at McGill University, where she was Director of the Group Therapy Program for Adolescents of the Child & Adolescent Service at the Allan Memorial Institute. Befitting her dynamic personality, she served on many committees at McGill. We were Co-Associate Editors of Kaplan and Sadock's 3rd Edition of *Comprehensive Group Psychotherapy*. Her publications were numerous and included another book and 21 chapters.

Internationally, she lectured in Japan, India, and numerous European countries. She served on the Board of Directors of the International Association of Group Psychotherapy and became its President. In that capacity, she brought its Triennial Congress to Montreal.

While I will miss her friendship, we all will miss her dynamism, her abilities, and her intellect.

Howard Kibel, MD, CGP, DFAGPA

In Memoriam Irene Harwood, MSW, PhD, PsyD, CGP, FAGPA

Trene Harwood, MSW, PhD, PsyD, CGP, FAGPA passed away in December. She was a Past President and long-time Board member of the Group Psychotherapy Association of Southern California and longtime member of the Los Angeles Group Psychotherapy Society, both now merged as the Group Psychotherapy Association of Los Angeles.

She was an Assistant Clinical Professor at UCLA in the School of Medicine, Department of Psychiatry, where she was the Director of the Prevention of the Insecure Disorganized Attachment Project in conjunction with St. Joseph's Center, a psychoanalyst and faculty member at the New Center for Psychoanalysis, formerly Southern California Psychoanalytic Institute and a Co-Founder of the Society for the Study of the Self.

Dr. Harwood was a contributor and Co-Editor of the first book applying self psychology, intersubjectivity and motivational systems to group psychotherapy: *Self-Experiences in Group: Intersubjective and Self Psychological Pathways to Human Understanding* (1998). She has written multiple articles and book chapters on group psychotherapy, and consulted and trained group therapists nationally and internationally. She was also a regular presenter at AGPA.

I must admit that before I met Irene, I was intimidated by her erudition and accomplishments. It didn't take long after getting to work with her to discover the



warmth and congeniality that she had to offer. We had long talks about the joys of relating to group therapists and about the humanistic qualities that we found in our group practices.

Her generosity and encouragement helped me develop my first AGPA presentation. Not only did she support the proposal, but she offered to add her name as co-presenter and give an introductory statement when I presented. Her encouragement has given me the bravery to deliver a series of presentations since then challenging some of the more accepted traditions of group psychotherapy.

Marvin Kaphan, MSW, CGP, LFAGPA

Red Well Theater Group

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sion where the actors discussed what they read and shared their thoughts and feelings about the characters. In January, we shifted to a traditional theater approach of scene and character study, with the actors exploring their assigned character in weekly rehearsals. The last meeting before traveling to Boston was a dress rehearsal with an audience of friends and colleagues to bear witness and give feedback.

The Open Session Experience

The positive AGPA audience response to our presentation was gratifying on many levels. The actors were well prepared, confident, and focused. The vibrant buzz from the talk-to-your-neighbor pairings was confirmation of the play's impact. I could feel the aliveness of the exchanges, without knowing the content of what the pairs shared. The timing and content of the discussant segment, presented by Eleanor Counselman, EdD, CGP, LFAGPA, effectively linked our shared theatrical experience to the group therapy enterprise. She opened her remarks with this quote from an article by Janice Gump, PhD (2010): "Trauma leaves a void that can be filled only by the revisiting of it, whether through creative productions or through the presence of another: The film, poetry, art and the therapist make possible the registration of horror. To be mastered, the unspeakable feelings evoked by the trauma must find communicable form, and a structure that gives them coherence and meaning."

As with group therapy, our process of making meaning continued beyond the Open Session. The actors have since written blog postings sharing their experiences of preparing *The Great God Pan*. These insightful accounts can be read at www.redwelltheater.blogspot.com. From their work and their writings, I have a fuller appreciation for the talent, clinical sensibilities and courage of the therapists-as-actors. I am indebted to all the RWTG members for their attuned contributions and guidance. A leader finds the group he needs.

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Different Shades of Self

continued from page 1

probability that the face would be assigned a negative valence, whether the face was white or black.

I'll never forget that those young girls, barely out of diapers, were cognizant on some level of the social meaning attributed to the difference in appearance of our hair texture. They continually commented on how soft and shiny my hair was and how much they wished they could look like me. It's disconcerting just how quickly socially constructed ideas about what is attractive and desirable is communicated to the world's young children. An immigrant from India at the age of two, I vividly recall my budding awareness of the social construction of attractiveness when I entered a mostly white preschool when I was four. Prior to this, I had spent most of my time with the Indian kids of my parent's friends, who had also recently migrated to America.

At my preschool, I can assure you that no one mistook me for a Muxungu. My brown skin, the feature that set me apart from the other kids, and the label "Indian" were most noticed by my peers, not my shiny, soft hair. The kids ridiculed me, called me Pocohantas, and ran around me making the rhythmic sound, hands clapping over their mouths, so stereotypically associated with Native Americans. They jeered that my family lived in a teepee and swung from trees.

Like the African-American girls, I also wanted to be "not me." One day, to my poor mother's shock, I sauntered into the kitchen with stark white talcum powder slathered all over my face, apparently convinced this had done the trick. My mother almost fell over, as she tried to understand the Muxunguwannabe in front of her. My mother didn't need a diploma in psychology to see that her preschooler already knew something about race and discrimination. Like Zora Neale Hurston, the American folklorist and anthropologist, who recalls the very day that she became "colored," I remember the day that I became "Indian." How sad that the realization of my cultural self was immediately followed by an attempt to white it out. I quickly came to believe that belonging to the dominant race was better. Being white meant to be liked, to fit in, to be envied, to have someone to play with, to be normal, to be happy.

These examples illustrate just how context-dependent the self is. At an African bush camp, I can be considered white even though I'm brown, and in nursery school, I was considered Native American even though I'm Indian. Today, when I go to India, I'm told I'm not Indian, I'm American, because of the way I look. Meanwhile, in the United States, an Indian woman who looks like me is crowned Miss America, and the social media becomes flooded with outraged messages that she is not American enough, solely because of the color of her skin.

As mental health professionals, it is not enough to know that a person is from a particular culture. We must take the time to find out what it means to that individual. Based on the characteristics that different societies have attributed to Indians, I'm treated differently everywhere I go depending upon how "being Indian" is constructed in that locale. I think my favorite, locally defined self occurred in Spain, where many of the Spaniards I met associated being Indian with being spiritual or mystical and were, therefore, intrigued by me. Talk to my sister, who is a few shades darker than I am, and she will tell you a very different story. She was pushed around in the Madrid metro and called *sucia negra*, which means "dirty black girl." Skin color and race, combined with culturally embedded stereotypes and fears, produces myriad reactions, from micro-aggressions to far more insidious and aggressive reactions.

A lighter shade of brown, I have been afforded a level of privilege that my own sister was not. What we look like matters. With each darkened shade of brown skin, life is that much harder. Considering this, how is it possible for most psychoanalytic theories to omit social and political reality in their approaches?

I agree with Gump: "Reality matters." She makes the invaluable observation that institutional slavery in the United States, which lasted for centuries, has been denied to the extent that its affective, and traumatic aspects remain widely undiscussed and unknown to many. To overcome trauma, we must identify its source, define its impact, and communicate this understanding to avoid acting it out and turning victims into victimizers. Gump says trauma "leaves a void that can be filled only by the revisiting of it." Her description of the silence regarding slavery and its impact reminds me of the silencing I experienced in a visit to the West Bank. I witnessed the subjugation of a group of people systematically deprived of resources and stripped of power. My inability to talk about what I saw there risks perpetuating that subjugation. Many who have visited, including President Jimmy Carter, Nelson Mandela, and Noam Chomsky, have likened it to the apartheid in South Africa. When I attempt to talk about the blatant degradation of the people, there is something that obstructs free dialogue. It is as if talking about the oppression of the Palestinians suggests a form of anti-Semitism. For me, if supporting one group of people precludes taking issue with the inhumane treatment of another group, then we become complicit in perpetuating this injustice.

The words of Archbishop Desmond Tutu captures the way I felt after my visit. He said, "I have visited the Palestinian occupied territories and have witnessed the humiliation of Palestinians at Israeli military checkpoints, and the inhumanity that won't let ambulances reach the injured, farmers tend their land, or children attend their schools. This treatment is familiar to the many black South Africans who were corralled and harassed by the security forces of the apartheid government. I hope for a future where one people need not rule over another engendering suffering, humiliation and retaliation."

It seems important to examine the ideas that we unconsciously internalize both on the individual and group levels from the earliest years of our lives. In a recent conference on large groups—*Context and Multiculturalism: Power and Privilege in Groups and Organizations Explorations through the Large Group Experience*—or as I like to think of it, in this conference on society, we had the opportunity to hear, expose, and explore unmetabolized parts or unconscious issues being held in individuals and in subgroups. While there were moments that were chaotic and uncomfortable, there were also moments of finding meaning and purpose. Each large group was an opportunity for understanding powerful social constraints relating to authority, organizational dynamics, culture, race, and personal responsibility. The large group consultants reminded us that while the large group was an opportunity to study society's dynamics, it was also an opportunity for true dialogue.

As mental health professionals, we must continue to create more culturally informed approaches that do not involve categorizing individuals into groups. I believe the path to doing this occurs through deep individual and group exploration. The large group, if lead skillfully, can be an excellent forum for beginning this journey on the community level. True cultural awareness does not come from a course in multiculturalism; rather, it comes from true dialogue that can only happen when we, as individuals and groups, dare to look inside and be honest with ourselves and each other about what is hidden there and then take the risk to state it aloud. In the moment that we can sit with each other amidst the mired intricacies of stereotyping, judgments about skin color, and the undeniable impact of racism, we have taken an important step toward healing.

Out beyond ideas of wrongdoing and rightdoing, there is a field. I'll meet you there.

When the soul lies down in that grass, the world is too full to talk about. Ideas, language, even the phrase "each other" doesn't make any sense. —Rumi

Gump, J.P. (2010). Reality matters: The shadow of trauma on African American subjectivity. *Psychoanalytic Psychology*, 27(1), 42-54.

Member

AGPA President **Les Greene**, **PhD**, **CGP**, **LFAGPA**, has been awarded the 2014 Arthur Teicher Group Psychologist of the Year Award from Division 49 of APA.



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

See Group Assets insert

Affiliate Society

Visit AGPA's website at www.agpa.org for updated Affiliate Society meeting information. For space considerations, events announced in previous issues are included in *Group Connections*.

The **Carolinas Group Psychotherapy Society's** Spring Workshop featured Joseph Shay, PhD, CGP, FAGPA, speaking on *Projective Identification Goes to the Movies*. At its September 12-14 Fall Workshop Russell Hopfenberg, PhD, CGP, FAGPA, will present *The Responsive Leader: Using Martial Arts Principles to Overcome Obstacles to Group Development*. Visit www.carolinasgps.org for information.

The **Eastern Group Psychotherapy Society's** Spring Event, co-chaired by Amanda Michael, PsyD, CGP, and Elizabeth Merrill, PsyD, ABPP, CGP, featured Harville Hendrix, PhD, who presented *IMAGO: Helping Couples Connect.* Dr. Hendrix is a couples therapist with more than 40 years of experience as a therapist, educator, clinical trainer, author, and lecturer. He and his wife, Helen LaKelly Hunt, co-created Imago Relationship Therapy, a therapy for couples now practiced by more than 2,000 certified therapists in 30 countries.

The Houston Group Psychotherapy Society (HGPS) kicked off its Annual Institute in April with a presentation on Ethics and Professional Boundaries in Psychotherapy: In the Office and in Cyberspace, led by Glen Gabbard, MD. The two-day Institute also included a keynote presentation on Interpersonal Neurobiology and Group Therapy: An Attachment Theory Perspective, presented by Phillip Flores, PhD, ABPP, CGP, LFAGPA, and the opportunity to attend either a psychodynamic or special interest process group. HGPS also held the Principles of Group Psychotherapy course, designed to provide basic understanding of the theory, principles, and application of group psychotherapy. This didactic and experiential presentation covers group process and dynamics; foundations of group psychotherapy; the role of the group leader; the change process in group; and some short-term, structured and thematic group approaches. The AGPAsponsored course meets the educational requirement for the Certified Group Psychotherapist (CGP) by the International Board for Certification of Group Psychotherapists.

The **Illinois Group Psychotherapy Society** (IGPS) is now licensed to provide CE hours to psychologists. In June, IGPS will hold a picnic in Millennium Park to coincide with a concert on the lawn.

The **Michigan Group Psychotherapy Society** held its Spring Institute in April with Phyllis Cohen, PhD, CGP, FAGPA, presenting *The Elusive Lover: The Narcissistic Inability to Form Mature Love Relationships.* The difficulty in forming lasting and mature relationships is often the result of narcissistic defenses. These defenses against intimacy and the ability to resolve these obstacles were explored. Through the use of brief lecture, case examples and group demonstrations, attendees gained an understanding of how modern group analysis is able to treat a wide range of difficulties previously thought to be untreatable via traditional psychoanalytic approaches. The afternoon was devoted to the understanding of the Modern Psychoanalytic approach to supervision with time allotted for case presentation.

The **Puget Sound Group Psychotherapy Network** (PSGPN) recently featured Marc Gilmartin, MA, CGP, who presented *Group Therapy in Treatment of Men with Sexual and Erotic Conflicts.* Sara Emerson, LICSW, MSW, CGP, FAGPA, presented *Intersubjectivity in Containing Turbulence in Group* at PSGPN's Annual Conference. Vera Akulov, MA, took over as Treasurer when Paul Berkelhammer, MA, LMHC, CGP, became a Representative to the Affiliate Societies Assembly.

The Ethics of Referrals was the topic at the **San Antonio Group Psychotherapy Society** Annual Al Riester Memorial Ethics Seminar. Tom Stone moderated a panel of four mental health professionals who addressed this sometime prickly topic.

The Westchester Group Psychotherapy Society (WGPS) will present a Special Workshop by Andrew Eig, PhD, ABPP, on *Facebook and Group: Clashing Cultures in the Modern Age*. Many group clinicians are now challenged with the ubiquitous presence of the Internet, which group members may use for extra-group communication. This workshop will discuss a theoretical and technical model for dealing with resistance, sub-grouping, and other dilemmas that may arise from our changing culture. Michelle Maidenberg, PhD, MPH, LCSW-R, CGP, led a workshop on Effective Cognitive-Behavioral Therapy (CBT) and Acceptance & Commitment Therapy (ACT) Group Strategies to Sustain Weight Loss & Weight Management.

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