

# The Group Circle

Winter 2016

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

## Clinical and Social Aspects of the Mental Pain of Minorities

Martha Gilmore, PhD, CGP, FAGPA, Annual Meeting Committee Co-Chair

*Editor's Note: Salman Akhtar, MD, is Professor of Psychiatry and Human Behavior at Thomas Jefferson Medical College, a psychiatrist at the Jefferson University Hospital, and Training and Supervising Analyst at the Psychoanalytic Center of Philadelphia. He has served on the editorial boards of the International Journal of Psychoanalysis and the Journal of the American Psychoanalytic Association. His more than 300 publications include 13 books. He also has published seven collections of poetry and serves as a Scholar-in-Residence at the Inter-Act Theatre Company in Philadelphia, Pennsylvania. Dr. Akhtar will deliver the Opening Plenary at AGPA's Annual Institute and Conference.*

**MG: You have written several books of poetry in addition to your academic writing. What is the interplay between these two modes of expression?**

**SA:** There is, indeed, some overlap between poetry and psychoanalysis. Both have a certain kind of formality and structure, yet both permit remarkable freedom of expression. Both focus upon psychological experience, yet remain deeply anchored in the body. Both are interested in language—especially symbolism and metaphor—and its various expressive and concealing activities. Every utterance of the patient should be listened to as both prose and poetry. Attuning oneself to these two forms of discourse within the patient's association leads to different, though complementary, sets of data, which in unison provide a deeper grasp of the patient's psychic reality.

**MG: How has your view of the human psyche changed over your lifetime?**

**SA:** Translating the word "lifetime" to "psychoanalytic lifetime," I would say that I have become less classical (in today's terminology, less ego-psychological) and more object-relational and developmental. In essence, I have become kinder and more accepting of people's idiosyncrasies, whims, and psychopathological limitations.

**MG: Can you share some reflections on how your own multicultural background has influenced**

**your practice and your writing?**

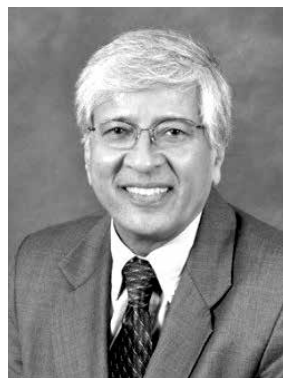
**SA:** This is a question needing a rather long response. Here, it would suffice to say that the impact of my cultural background is discernible (to a subtle degree) in my office décor, in the somewhat greater than usual extent of responsibility I take for my patients, in my attitude towards fees, and in the countertransference experiences mediated by Urdu poetry and Bollywood music, and so on. Readers interested in knowing more about this might want to look up my paper, *Where is India in my psychoanalytic work?*, which appeared in the December 2015 issue of *The Psychoanalytic Review*.

**MG: You have said that psychoanalysis is not the talking cure but really the listening cure. How does this apply to your work today?**

**SA:** Over the three decades that I have practiced psychoanalysis, I have become more convinced that listening carefully and in many different ways, to the patient, as well as to oneself, is as important as speaking to the patient. Even what comes under the purview of listening has enlarged in my vocabulary. Thus, actions, silences, pauses, postural and behavioral expressions, and countertransference experiences all need to be listened to.

**MG: In these troubled times, where the divisions between religions, ethnic groups, and the privileged and non-privileged are extremely conflictual, what can we do, as group therapists, to have an impact?**

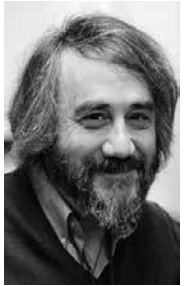
**SA:** We can certainly contribute to socially ameliorative processes. However, any such effort has to be interdisciplinary. An important thing to remember is that models of individual psychology cannot be transposed upon the psychology of masses. Large group psychology has features of its own. The contributions of Vamik Volkan are truly outstanding, and I suggest that readers take a look at his work.



## From the President Dues and Adieu

Les Greene, PhD, CGP, LFAGPA

I'm filled with gratitude as I experience my remaining time as President of our AGPA. These past two years have been deeply rewarding, both personally and professionally, as I have witnessed and participated in the many facets of the work of our beloved organization, the many synergistic efforts all aimed at advancing the field of group psychotherapy. I truly appreciate the opportunities granted to me to have worked with so many of you in achieving this overarching and cherished goal. For these collaborations, I thank:



All of those in governance for keeping the vision, including: Phyllis Cohen, PhD, PsyD, CGP, LFAGPA, and Tony Sheppard, PsyD, CGP, FAGPA, Chairs, respectively, of the Group Foundation for Advancing Mental Health and the International Board for Certification of Group Psychotherapists; AGPA President-Elect Eleanor Counselman, EdD, ABPP, CGP, LFAGPA; Affiliates Society Assembly Chair Sara Emerson, LICSW, CGP, FAGPA; AGPA Treasurer Lise Motherwell, PhD, PsyD, CGP, FAGPA; Secretary Anne McEaney, PhD, ABPP, CGP, FAGPA; and CEO Marsha Block, CAE, CFRE, who along with Phyllis and Tony constitute the Executive Committee of AGPA; and, indeed, all the members of the three Boards of Directors. I'm especially gratified by all the further articulation and fine tuning of our four strategic goals: Education, Learning and Research; Membership and Certification; Community Outreach and Visibility; and Organizational Sustainability.

Martha Gilmore, PhD, CGP, FAGPA, and Hank Fallon, PhD, CGP, FAGPA, for the amazing work you and your committee accomplished in assembling the finest group therapy leaders, instructors, and researchers who made our Annual Meetings in Boston and San Francisco so very successful. You give me complete confidence

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# Research Matters

Steve Van Wagoner, PhD, CGP, FAGPA

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This is the second time that *Research Matters* appears in *The Group Circle*. The hope is that this new column can present findings, issues, challenges, controversies, and directions in the group psychotherapy research, and communicate the relevance of those findings to clinicians. I will leave those tasks to my esteemed colleagues for whom research is a daily passion and occupation, and instead attempt to set the stage for what I think could be an opportunity to continue a dialogue I began with my first issue of *The Group Circle* in Spring 2010.

In that issue, Mandy Blott, PhD, wrote an article, *Closing the Research-Practice Gap: New Directions for Group Therapy Research*, describing the challenge inherent in group therapy research and the need to employ newer paradigms rooted in qualitative and naturalistic research. I asked Rebecca MacNair Semands, PhD, CGP, FAGPA, to respond; she described ways in which clinicians and researchers have begun to collaborate, introducing process and change measures into their clinical work to help with the pre-group assessment, selection and composition, detecting potential therapy failures, and assessing the strength of the working alliance. The tone of the articles was respectful and thoughtful, yet there was to my mind a tension, probably reflecting each writer's experience of the gap and the challenges inherent in bridging it. This is a challenge that I hope *Research Matters* will also address in its task to report and translate recent research findings for practitioners.

In 2013, I reviewed the excellent book by Conyne (2010), *The Oxford Handbook of Group Counseling*, for the *International Journal of Group Psychotherapy*. I remember feeling some trepidation before taking it on. Was I up to the task? Am I the right person to review the book, given that I have not engaged in formal research since graduate school? Would my eyes glaze over reading more than 500 pages of group research? It turned out that I was up to the task, that as a non-researcher I could write a fair, and in this case laudatory review, and that the overall experience was anything but boring. What struck me most, however, and I said as much in my review, is that in looking at the body of research on group therapy one finds many results very compelling and useful, but that precision continues to elude even the most accomplished researchers. Yet it is that lack of precision, and the inconsistent findings, and the challenges in measurement, design, and operationalization that

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## AGPA Adds New Web Resource Page On Evidence-Based Practice

AGPA has added a new resource page, *Evidence-Based Practice in Group Psychotherapy*, which provides an overview of the effectiveness of group psychotherapy for a range of problems and disorders.

Developed under the auspices of the Science to Service Task Force, chaired by Philip Flores, PhD, ABPP, CGP, L FAGPA, Robert Klein, PhD, ABPP, CGP, D L FAGPA, and Rebecca MacNair-Semands, PhD, CGP, FAGPA, the site provides concise information on areas of group practice that have indisputably strong, and current, supporting evidence. The inclusion of highlights, narrative summaries and supporting references in each section, along with an organization by disorder, provide a thorough yet highly accessible set of resources for professionals and the public.

Among the areas covered are: anxiety disorders; bulimia/eating disorders; medical and health issues, cancer/weight loss/coronary care; mood disorders, including depression and complicated grief; personality disorders; schizophrenia and psychosis; stress and anger management; substance use disorders; and trauma and PTSD.

"This web section is another example of the valuable resources provided to clinicians and the public by AGPA," said Les Greene, PhD, CGP, L FAGPA, AGPA President. "It clearly communicates the value of group psychotherapy in general and for various diagnostic categories and populations."

If you want to explore its many resources, follow the link: <http://www.agpa.org/home/practice-resources/evidence-based-practice-in-group-psychotherapy>.

## From the Editor

Steven Van Wagoner, PhD, CGP, FAGPA

As I write this column, I am up to my ears in thoughts about this issue, the fact the Chanukah ended a few days ago, and Christmas and Kwanzaa are around the corner. Washington, DC has been bustling with the usual throng of daily commuters, but also with hordes of tourists and shoppers readying themselves for the myriad holiday festivities and events. As a result, one can occasionally forget the recent horrifying events of Paris and San Bernadino.

While these events don't occupy my every waking moment, I do think about them with respect to the upcoming Annual Meeting and the

messages to be learned from our keynote speakers, especially with respect to how we become aware of and understand diverse groups, both in the U.S. and abroad.

The Mitchell Hochberg Memorial Speaker, documentary filmmaker Lee Mun Wah, gives us a preview of his talk on how we fail to understand the role of difference in education, therapy, governance, and business, and what it means to be a truly multicultural society. He offers us strategies for bridging the gap between our separate and divided communities. Salman Akhtar, MD, the AGPA Conference Opening Plenary Speaker, expounds on the pain of minorities living in the U.S. and how we as therapists can strive to adopt a cultural neutrality, which doesn't mean erasing cultural difference, but rather adopting a stance where no culture is idealized or given lesser value than that which

we might unwittingly idealize. Finally, Stewart Aledort, MD, CGP, FAGPA, returns to our pages as the Institute Opening Plenary Speaker. He presents some thoughts about how we can get the most out of the Institute experience, while at the same time summarizing his theory of the bad fit as a template for adult relationships, the role of the omnipotent child in keeping the bad fit alive, and how shame keeps us heroically wedded to the earliest bad fit.

I feel like I took a huge risk in writing this issue's *Research Matters*. I worried that my fellow clinicians/practitioners might feel betrayed. "What? Van Wagoner has gone over to the dark side and embraced evidenced-based practice?" Well, no, that doesn't capture my reality of the situation. Van Wagoner is simply remaining open to what our research colleagues have to offer us, just as

they have been open to what our cherished theorists have offered, as evidenced by what they chose to study. But as I point out in the column, the selective attention to some theoretical models over others remains a challenge and needs to be addressed by the research community. It's all about dialogue, and as group therapists, we should be experts in opening, not closing, dialogue.

The next two issues of *The Group Circle* are your best opportunities to have articles published. The Annual Meeting is over, and we have more flexibility in considering articles about new ideas, treatment programs/centers/initiatives, and other pieces of interest to the group psychotherapy community. If you wish to be considered for publication in the Spring 2016 issue, please alert me before the last Friday of March, and for the Summer issue, the last Friday of May. ●

# The Art of Creating Community and Connection: An Interview with Lee Mun Wah

Martha Gilmore, PhD, CGP, FAGPA, Annual Meeting Committee Co-Chair



*Editor's Note: Lee Mun Wah is an internationally renowned Chinese American documentary filmmaker, author, educator, community therapist, and master diversity trainer. He is the Executive Director of StirFry Seminars & Consulting, a diversity training company that provides educational tools and workshops on cross-cultural communication and awareness, mindful facilitation, and conflict mediation techniques. In 1995, Oprah Winfrey did a one-hour special on Lee Mun Wah's life and his most famous documentary about racism, The Color of Fear. In 2014, he released his latest film, If These Halls Could Talk, which focuses on college students speaking to diversity issues within higher education. He will deliver the Mitchell Hochberg Memorial Public Education Event at AGPA's Annual Meeting on Walking Each Other Home: The Art of Creating Community and Connection.*

**MG:** What do you see as the costs of ignoring the differences between different communities? You've said that we celebrate our differences rather than practice them. Could you explain what you mean?

**LMW:** There is a serious cost to this nation when it celebrates differences primarily through foods, dances, costumes, and holidays, but seldom, if ever, makes use of the myriad cultural perspectives and traditions related to how we educate, practice therapy, govern, or conduct business. We have become proficient in honoring our differences, but seldom putting them into practice in our daily lives. Perhaps the cost is in not noticing the tremendous loss of the rich resources that each culture brings, which could enrich and contribute to the emotional health and sense of community so sadly missing today in this country.

We lack the needed curiosity and valuing of those who are different from the dominant culture. As someone once pointed out, "It is not our differences that separate us, but rather the value we place on those differences." We need to notice what is not being seen, talked about, or acknowledged, and find ways to bring that into the dialogue. For example, we need to notice that racism is not in the DSM, or that not one single candidate for President of the United States is asked any question about diversity, nor about their racial and ethnic identity or the importance of diversity in their lives. On a more personal level, do we notice how many birthday, father's day or mother's day cards don't have people of color portrayed? Until 1989, there was no person of color in a shampoo commercial. All of these reflect our culturally selective blindness—how we ignore diversity—in every segment of our society. As Martin Luther King, Jr. once said, "The only time we are one, is during times of war, taxes, and election time."

As a Chinese American and a man of color, assimilation demanded accommodation to a primarily white, male, heterosexual, Christian, wealthy, North American culture and perspective. Not once in all my years have I ever been asked how I would educate, facilitate, or practice therapy differently as a Chinese American. I am reminded daily of who I am and who I am not. I remember after my keynote address for the American Psychological Association, a white therapist came up to me and congratulated me on delivering such a moving and enlightening talk. He then said, "I wanted you to know that I don't see you as a Chinese therapist, I see you as a white therapist."

That is why I have often shared that I believe this country is actually multiracial and not multicultural. To be truly multicultural means that we have made good use of everyone's cultural contributions in every facet of our society, be it in business, in education, or in our government policies and practices.

**MG:** How can group therapists encourage dialogue regarding differences among group members?

**LMW:** Cultural competency requires many facets of understanding. For many, awareness is just the first level of cultural competency. Becoming more aware of the complex social issues and contexts surrounding another's cultural history and upbringing is also needed. For example, we might ask, "What's good about

being Latino and what's hard about being Latino?" or "When did you first learn you were different? How did it affect you as a child? How does it affect you today?" Though these may seem like very simple questions, they are seldom asked and inherently have many layers of emotions and experiences that can have a profound affect on one's self-esteem and perception of the world.

Here are some important ways to become more culturally competent:

- Begin where people are, not where you want them to be.
- Learn to correctly pronounce the name of someone from another culture. Don't abbreviate or change their names. Their names are an important link to their past and family history. When you honor their names, you honor their ancestors and their heritage.
- To understand culture more deeply, learn about important people in someone's place of origin, such as artists, musicians, dancers, philosophers, and writers, not just about their foods or holidays.
- Share your own culture, so people don't think they are the only ones who are different. If you don't know much about your culture, ask your relatives, go to the library or Internet and discover more about yourself and your people. Many have a culture that they've abandoned or had erased because of historical events, such as racism or genocide.
- Invite people who don't look like they belong to your culture into your home for dinner or other occasions. In other words, culturally widen your circle of friends. If your area has few cultures represented, view films, books, pictures, television programs, music, and artwork depicting other cultures.
- Notice and appreciate the colors, rhythms, and spirituality of other cultures.
- Let people know that you see their color and acknowledge yours. Colorblindness is just another form of denial and marginalization.
- Talk openly about racism, sexism, and classism. Even though you may not believe it exists doesn't mean that it isn't present. Be curious, empathetic, and open to another reality outside of your own.
- Be prepared when someone brings up your ethnicity and what it means to them. Try not to take it personally if they say something negative, rather listen and ask a lot of questions. Be open to how they are feeling, even if they express anger or hurt. They need to talk and trust that you will listen and be understanding without judgment or defensiveness.
- When someone talks about racism or any of the other isms, be curious, and be supportive, rather than part of the problem.
- Avoid making fun of other cultures or telling ethnic jokes. All stereotypes, whether negative or positive, are simply generalizations and marginalizing.
- Try to understand how someone's past affects who they are now and relationship with you.
- Emotionally relate to how they are feeling and nurture the relationship.
- While communicating, notice the impact of your words and not just your good intentions.
- When someone is angry, try asking, "What angered you about what happened? What hurt you about what happened? What's familiar about this? What do you need or want?" Listen without interrupting. Reflect back what you hear. Stay neutral and be empathetic.

Many people are afraid of discussing diversity issues for fear of saying something wrong that might hurt or offend someone, but this is unavoidable. This country has had over 500 years of a don't ask, don't tell policy when it comes to diversity issues, so more than likely you will say something that will hurt or be painful to someone else. The important thing is to listen and take responsibility for your mistakes and be open to talking about them. Sincerity is far more forgiving when it comes out of love and caring.

Stay in the moment. Developing a trusting and understanding relationship

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# Affiliate Society News

The **Eastern Group Psychotherapy Society's (EGPS)** Board of Directors appointed Robin Good, PhD, CGP, FAGPA, and Ellen Rubin, PsyD, as Co-Directors of the award-winning EGPS One Year Training Program in Group Psychotherapy. Arlene Neuman, LCSW, CGP, and Libby O'Connor, LCSW, will become the Co-Deans of Admission. Adam Frankel, PhD, CGP, will be Coordinator of Promotion. They will be joining current Deans, Phyllis Wright, LCSW, CGP, and Alan Shanel, LCSW, CGP. The 26-year-old EGPS Training Program has also expanded its supervision offerings, further helping to prepare students for the Certified Group Psychotherapist (CGP) credential. To learn more about the EGPS Training Program, go to the *Training* link at [www.egps.org](http://www.egps.org). EGPS Conference Co-Chairs, Michael Altshuler, LCSW, CGP, and Eva Fyer, LCSW, along with Program Subcommittee Co-Chairs Lynn Pearl, PhD, CGP, and Marie Rothschild, LCSW-R, CGP, have announced a Call for Proposals for the EGPS 2016 Annual Conference, to be held on November 18–19 in New York City. The theme is *Meet the World in Group: The Power of Acceptance and Belonging*. In a society that tragically divides along lines of race, ethnicity, gender, orientation, class and age, next year's Conference considers the idea of group cohesion—the binding sense of acceptance and belonging—at the heart of any effective group. EGPS invites you to explore how you affirm the many voices seeking room in your groups and how you transform the wilderness of the therapeutic space into a receptive setting that inspires acceptance and belonging. All proposals must be submitted by April 25 as Word documents and should be emailed to [info@egps.org](mailto:info@egps.org). Additional submission information can be found at [www.egps.org](http://www.egps.org). EGPS will also be the Host Society for the 2016 AGPA Annual Meeting in New York City, to be held February 22–27. Please come by the Hospitality Booth to say hi and see what exciting information EGPS has about the greatest city on earth!

The **Group Psychotherapy Association of Los Angeles (GPALA)** begins 2016 with its foundational course *Principles of Group Psychotherapy* on January 30–31. Faculty for this course includes: Nancy Fawcett, LMFT, CGP; Michael Frank LMFT, CGP, FAGPA; Elinor Dunn Grayer MSW, PhD, BCG, CGP; Keith Rand LMFT, CGP, FAGPA; and Andrew Susskind LSCW, SEP, CGP. This course is suitable for graduate students and mental health practitioners at any experience level who wish to expand their knowledge and skills in the practice of group therapy. The course will include didactic presentations, discussions, and experiential group demonstrations. GPALA will continue to offer Group Institutes, including two 12-hour group therapy weekend experiences led by seasoned local group clinicians. Evelyn Pechter, PsyD, and Vanessa Spooner, PsyD, will lead the first of these on April 2–3. GPALA's Annual Two-Day Conference, to be held May 13-14, will feature Stewart Aledort, MD, CGP, FAGPA, presenting on *SHAME! The Evolution, Practice and Focus on the Passionate Bad Fit*.

The **Illinois Group Psychotherapy Society's (IGPS)** Annual Spring Conference will be held April 15–16. Marcia Nickow, PsyD, CADC, CGP, will present on *Screams, Scars, Secrets, Shame: Treating Addiction and Underlying Trauma*. The Institute will illuminate how group therapy provides a healing community to counter the unspeakability of trauma and the invisibility of sufferers. The presentation also will address the benefits of a group context for clinicians to explore countertransference themes. James O'Keefe, MS, JD, LCPC, CGP, NBCCH, and Sarah Kallick, PsyD, CGP, will present on *Mindfulness-Based Group Psychotherapy*, focusing on the application of mindfulness to the group process. Participants will learn about recent findings in interpersonal neurobiology that support the efficacy of both group psychotherapy and mindfulness-based interventions. Darryl Pure, PhD, ABPP, CGP, FAGPA, will facilitate a process group using *Attachment Theory* to help participants work in the here-and-now. In addition to experiencing a group as it goes through all of its stages, attendees will be encouraged to take risks in expressing primary emotions while learning how they block them from their awareness. Barney Straus, LCSW, CGP, will present on *Team-Building and Group Therapy*. This institute will combine problem-solving and trust-building challenges with process group sessions. The activities come from a tradition of experiential education; they are often referred to as team-building activities when used with work groups, and adventure therapy when used with therapeutic populations. Hylene Dublin, LCSW, ACSW, BCD, CGP, LFAGPA, and Larry Viers,

PhD, CGP, will facilitate *The Core Course on Group Psychotherapy*, a 12-hour two-day training meeting the didactic requirement for the Certified Group Psychotherapist (CGP) credential. The course focuses on the fundamentals of group psychotherapy including screening and preparation of members, stages of group development, group dynamics and group process, the role of the leader(s), ethics, history, and research issues, and encompasses experiential, as well as didactic components.

The **Mid-Atlantic Group Psychotherapy Society (MAGPS)** will hold its Spring Conference April 9-10. Guest presenter Haim Weinberg, PhD, CGP, FAGPA, will speak on *Impossible Groups*. A pre-Conference session on *Exploring Process Group Leadership* will provide didactic and experiential learning to individuals who lead process groups.

The **Puget Sound Group Psychotherapy Network (PSGPN)** presented a Quarterly Professional Meeting on November 13 entitled *Co-Leadership vs. Solo Leadership*. This lively panel discussion featured members Cyndee Baldwin, MA, LMHC, with her co-leader Jason Goldstein, MA, LMHC, and the couples therapy team of Agnes Forras, AM, LMHC, and John McDonald, AM, LMHC. The panel included solo leaders and members Ellen Rugg, MSW, LICSW, and Danielle Debray, MA, LMHC. Areas of discussion included blending styles, handling mistakes and challenging countertransference manifestations. In April, Marin Bullard, MSW, and Robin Brownstein, MA, LMHC, will present *Adolescents in Group Therapy*. May 13-14 will feature Mary Sussillo, LCSW, CGP, FAGPA, Director of the Center of Bereavement in New York, who will facilitate a process group for the PSGPN Board of Directors and present *Coming Alive With Your Tribe: The Transformative Power of Mourning in Group*.

The **Rochester Area Group Psychotherapy Society (RAGPS)** welcomed master teacher and group therapist, Sally Henry, LCSW, CGP, to its Fall Conference. She discussed *Stories: Their Symbolic and Collaborative Function in Psychotherapy*, which was an experiential and evocative presentation about the unique co-narration that occurs in the process of psychotherapy between therapist and patients as the story of one's life unfolds and is brought into deeper consciousness. RAGPS aided AGPA's Group Foundation Board members Chris Fitzstevens, LCSW-R, CGP, and Aaron Black, PhD, CGP, in hosting a fundraising concert to benefit the Group Foundation for Advancing Mental Health. Attendees were treated to the dulcet tones of the Maria Gillard Trio, a local Finger Lakes artist. RAGPS's January Winter Conference featured Aaron Black, PhD, CGP, who presented *Creating Secure Bonds: Attachment in Psychotherapy*. Starting in 2016, RAGPS will be able to offer CE credits for social workers in New York State.

Gloria Batkin Kahn, EdD, ABPP, CGP, FAGPA, facilitated a session on *Utilizing Relationship-Focused Group Therapy to Aid in Working with Difficult Couples* for the **Westchester Group Psychotherapy Society (WGPS)**. She discussed and demonstrated how current innovations from interpersonal neurobiology and imago theory can be integrated into group therapy, creating transformational energy in couples and in groups. In January, WGPS and the Westchester Center for Psychological Education co-sponsored a special session on *Process Group Experience*, facilitated by Margaret Postlewaite, PhD, CGP, FAGPA, and Leo Leiderman, PsyD, ABPP, CGP, FAGPA. On March 25, WGPS will offer a workshop on *The Impact of Utilizing Group Therapy When Working Through PTSD and Developmental Trauma*. To be facilitated by Kenneth Reinhard, PhD, ABPP, CGP, and Leo Leiderman, PsyD, ABPP, CGP, FAGPA, this program will focus on identifying, addressing, and working through trauma symptoms using a group therapy modality and presenters will co-facilitate an experiential demonstration group. On April 15, Christine Schmidt, LCSW, will present *Racial Identity Development and Implications for Group Work*. This workshop will blend didactic presentation about racial identity development with an experiential approach that explores the impact of racism in our lives and in our world.

Please note: Affiliate Societies may submit news and updates on their activities to Vanessa Pawlowski, PsyD, Editor of the Affiliate Society News column, by e-mail to: [vanessapawlowskip Syd@icloud.com](mailto:vanessapawlowskip Syd@icloud.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*.

# Coming in from the Cold: Conversation with a Stone

## An Interview with Plenary Speaker Stewart Aledort, MD, CGP, FAGPA

Arnold Cohen, PhD, CGP, FAGPA, Institute Co-Chair

*Editor's Note: Stewart Aledort, MD, CGP, FAGPA, a founding member of the National Group Psychotherapy Institute at the Washington School of Psychiatry, is a faculty member of the Washington Psychoanalytic Institute and a Clinical Associate Professor of Psychiatry at the George Washington School of Medicine. He is also in private practice in Washington, DC. He will present the Opening Plenary Session at AGPA's Annual Institute and Conference.*

**AC: How did you become interested in our unique theory of group psychotherapy and why does it continue to hold your interest?**

**SA:** When I saw the theme of this year's Institute and Conference, *Transformation in Group: From Isolation to Connection*, I immediately thought of one of my favorite poems, *Conversation with A Stone*,\* by the Polish Pulitzer Prize winner Wislawa Szymborska. The poem captures, in concise and beautiful language, the universal human desire to connect and the difficulty we experience in trying to do just that.

My work has focused on the early laying down of neuronal templates of intimacy that emerge from the bad fits between an infant and mother. The bad fit has become my calling card in my lectures, groups, workshops, and writings. Over time, I have refined this theory by including the concept of the omnipotent child (OC) to explain how the OC keeps the bad fit alive throughout our lifetime, which in turn keeps us lonely and out in the cold.

**AC: What do you hope people will learn from your talk?**

**SA:** Therapists attending will appreciate how stuck some of our patients are despite their yearning to be different. They will learn to understand how our patients need to passionately recreate their earliest bad fits. Empathy and attunement are crucial factors in helping our groups mature, but one also needs to work with the more difficult position of the hidden excitement in the bad fit. They will understand the different lens you must wear if you assume that the therapist is the most important person in the group. Following that assumption, patients are seen as newborns, and you are the mother of symbiosis with a lap available to the babies as they need it. The group members come to your groups for you. They will expect you to be big enough to take on this mother role, particularly at the beginning of the group.

Attendees will also learn how heroically wedded our patients are to their pre-verbal somatic misattunements that formed their earliest identity. It is this heroic loyalty that makes change so difficult. If they decide to move to a different relationship, or give up this loyalty, they will feel as if they betrayed their old identity and will be at a loss until a new identity, based on a good fit, takes hold. It will be as if they are in a foreign country and have lost their passports. I also hope all of the attendees will appreciate the healing power of the Institute groups that they attend, and I hope they will feel courageous and excited to be in that setting.

**AC: How do you feel that the presentation will be relevant for Institute participants? Will it be useful to people at all levels of experience?**

**SA:** My presentation highlights the need for all of us—beginners and more mature attendees—to be open to relating to one another. We can all benefit from different experiences to enhance and deepen the understanding we have of our own ways of relating. We need to identify how we are in conversations with our group members. In fact, without identifying our own OC and how it keeps our own bad fits alive, we will have more difficulty helping our patients. Each group member needs to tell his own story, and we need to hear that story as the pre-verbal, symbiotic period in that member's life. We, as therapists, have to look at our own "empty great halls"

(a reference to the poem) and, instead of rescuing, be able to identify with and attune to our patients' loneliness and being stuck out in the cold.

**AC: How has your thinking on this topic evolved over time?**

**SA:** I began with the construct of the omnipotent child. I saw the OC as the reservoir of all the early misattunements located in the body ego of the newborn and the mother. My thinking grew from Margaret Mahler's study and writing about the relationship the symbiotic mother had with the newborn. As I applied my thinking to my clinical work, I saw the leader as the central, all-important mother and the group members as newborn babies. As I used my techniques, wonderful things began to happen to me and to the group members. This positive experience reinforced my theory. I explored the early relationship further, thinking that there was more. I began to observe that there is passion in the bad fit between the symbiotic mother and the newborn; I searched for how that passion kept the old OC alive and what we needed to do to change the old identity, which was an obstacle to healthy relating. This new construct took into account the hidden excitement in the re-creation of the earliest somatic experiences. Even with this understanding, the re-creations still persist, and at times the loyalty to the bad fit becomes even more powerful.

It has also become clear to me that we need to take a closer look at the role of shame as an organizer and accomplice to this heroic loyalty. We are now working with the role of shame in this process; we are looking at how to ferret out the shame and move beyond it. Can you get rid of shame? Can you give it back to the parents who put their own shame into you? Can your loyalty be understood as the most powerful, heroic feeling that you have gifted to your parents? Shame becomes so magnificent, that healthy relationships, and the passionate good fit, are poor substitutes for the earlier recreated powerful bad fit with the shameful parent. One of the last steps in the group's work is for members to deal with their despair and regret about their life choices.

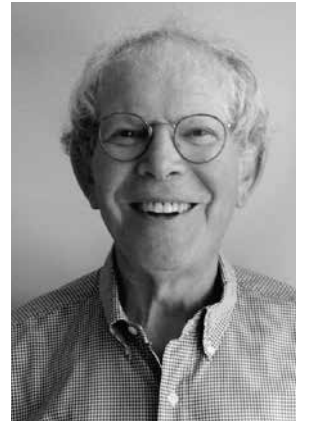
**AC: What advice can you offer participants for getting the most out of their Institute experience?**

**SA:** If you have a moment before the Plenary Opening Session, read the poem. \*\* (see link below). That would be quite helpful in getting the most out of the Institute and my talk.

Try to follow your instincts and desires; try to see where they take you and what that feels like. Notice who appeals to you, who doesn't, and how you would like those relationships to progress and develop over the two days. Pay attention to how the leader works, what you feel about and toward the leader, and what you want from the leader. Notice any shameful thoughts or fantasy moments and examine any reluctance to share them. Consider taking a risk, and try to share them with the group. Report any dreams you had prior to this Institute and any that occur overnight. Play with others and construct scenarios about them. Try to notice when you become wordless, when you get drowsy, when you want to run away and not come back, when you begin to feel childish, and when your body starts giving you a hard time. Let yourself feel the childlike states of both mind and body. Try to locate your passion in the group Institute and check out how you relate to this excitement. Most of all, have a good time. ●

\*Szymborska, W. (1998). *Conversation with a Stone*. In S. Baranczak & C. Cavanagh (Trans.) *Poems New and Collected 1957-1997* (pp. 62-64). New York: Harcourt Brace & Company.

\*\*[www.tweetspeakpoetry.com/2014/04/09/national-poetry-month-poetry-dare-wislawa-szymborskas-conversation-stone](http://www.tweetspeakpoetry.com/2014/04/09/national-poetry-month-poetry-dare-wislawa-szymborskas-conversation-stone)



## Mental Pain of Minorities

*continued from page 1*

**MG:** We have been reading about the migrant crisis in Europe and the terrible situation in Syria and its surrounds that pushes people to leave their countries. What psychological processes do you see at work here and how do you differentiate between an immigrant and an exile or a migrant and a refugee?

**SA:** The situation around the globe is, indeed, terrible. The fact that exoduses of such magnitude have happened frequently in history minimizes the tragic elements of what is going on today. The etiology of the migrant crisis is, of course, multiply determined. The causative factors include destabilization of local regimes, the rise of fundamentalism, economic strife, and the post-colonial idealization of the West. The results are also complex and include cultural dislocation and challenges of acculturation. These migrants are dramatically different from elective immigrants like myself. They are refugees, running away from their war-torn lands where living is no longer safe. Immigrants, on the other hand, have made a more voluntary choice to leave their countries in order to improve their educational or financial situation. The biggest difference is that the refugee has no rite of farewell and no access to emotional refueling, while the immigrant, who carefully planned his move and can visit his country whenever he chooses, possesses these protective features.

**MG:** What special issues do we need to address in working with minorities in our clinical practices?

**SA:** The most important thing to do is to strive towards cultural neutrality. This requires developing an attitude that no religion, race, ethnicity, nationality, language, attire, food, music, or ritual is inherently superior to another. It is not easy to accomplish this since all of us are vulnerable to idealizing (secretly or openly) our own traditions and to regard those of others as somehow peculiar or even inferior rather than just different. One simply has to renounce this tendency; reducing the amount of inner aggression (that can be projected outward) with the help of personal psychotherapy or psychoanalysis goes a long way to achieve this goal. Leading an open life with friendships and familiarity with demographically diverse others also helps. Keeping oneself informed about the global situation and of the ongoing minority-majority frictions (as well as fruitful collaborations) within one's own country is also useful.

Ultimately, it boils down to what Erikson called the development of belief-in-species, which is a firm conviction that all human beings belong to one and only one species, *homo sapiens*, and any attempt to cleave them into fundamentally different groups is wrong. ●

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## President

*continued from page 1*

that our upcoming Annual Meeting in New York City will be as successful (as reflected in registration numbers already far exceeding expectations), if not even more so than years past.

Barbara Dazzo, LCSW, PhD, CGP, FAGPA, Paul Kaye, PhD, CGP, FAGPA, and Esther Stone, MSSW, CGP, DLFAGPA, for your fine efforts in reinvigorating our Distance Learning program by creating exciting and engaging new educational offerings, including such important and timely teleconference explorations on *Neuroscience and Racism*, chaired by Alexis Abernethy and Francis Lee Stevens and *Violence in America*, chaired by Robert Klein, PhD, ABPP, CGP, DLFAGPA, Suzanne Phillips, PsyD, ABPP, CGP, FAGPA, and Victor Schermer, MA, LFAGPA and the development of innovative formats such as conversations between senior therapists and young professionals.

Dominick Grundy, PhD, CGP, Editor of our prestigious *International Journal of Group Psychotherapy*, and Steven Van Wagoner, PhD, CGP, FAGPA, Editor of *The Group Circle*, for keeping us informed with their thought-provoking and stimulating publications. And we should all thank Marsha Block, whose successful efforts to procure a new *Journal* publishing contract has just given rise to a host of new perks for our membership, including more content per issue of the *Journal*, online access to the current issue, as well as an early view of all accepted papers and to the entire series dating back to its inaugural year of 1951, along with free access to selected other mental health journals published by Taylor and Francis.

Philip Flores, PhD, ABPP, CGP, LFAGPA, Robert Klein, and Rebecca MacNair-Semands, PhD, CGP, FAGPA, for chairing our Science to Service Task Force, leading the vital work of disseminating the scientific evidence of group psychotherapy to our

many stakeholders and overseeing the development of our comprehensive and authoritative training manuals, including the recent release of one on process addictions and the upcoming revision of our core principles manual.

Sara Emerson, LICSW, CGP, FAGPA, for chairing the Affiliate Societies Assembly, whose efforts have helped to forge more mutually rewarding and harmonious relationships between AGPA and each Affiliate, as well as helped to create our new Hawaiian Islands Affiliate!

Cindy Hearne, PhD, CGP, and Carol Dallinga, LCSW, CGP, for their tireless efforts as Co-Chairs of the Membership Committee, which has focused on listening carefully to concerns of all our members, new and old, thus filling our ranks and ensuring that we are attending to the needs of our base. This year, we have added complimentary registration for members' participation in the Distance Learning programs, and very recently opened the entire online CE Center library to members, also at no charge.

Carol Vaughan, LCSW, CGP, LFAGPA, and Barbara Ilfeld, MSN, RNCS, CGP, FAGPA, Co-Chairs of the Fellowship Committee, for identifying those whose lifelong work deserves special recognition which, in turn, serve to honor all of us.

Kathleen Ulman, PhD, CGP, FAGPA, for leading the work of our Nominating Committee, thus ensuring a seamless transition of AGPA leadership as we move forward.

Shari Baron, MSN, CGP, FAGPA, and Kathleen Ault, NP, CGP, as Co-Chairs of the SIG Task Force, which has sustained and revitalized our Special Interest Groups, so that members can feel a connection to AGPA-as-a-whole, but also to smaller enclaves of professionals with similar interests.

Eleanor Counselman and Farooq Mohyuddin, MD, CGP, Co-Chairs of our Public Affairs Committee, who represent all of us in the real-world political

issues that impact our viability as group therapy practitioners, including such bread-and-butter issues as national policies that define CPT codes for group therapy and determine reimbursement rates for that work.

Suzanne Phillips and Craig Haen, PhD, RDT, LCAT, CGP, FAGPA, who as Co-Chairs of the Community Outreach Task Force, offer deeply moving services to meet the emotional needs of communities struck by manmade and natural tragedies and collaborate with other organizations, including *Voices of September 11th* and *Camp Galaxy*, thus affirming on a regular basis the healing power of group work.

Patricia Barth, PhD, CGP, DFLAGPA, and Lisa Mahon, PhD, CGP, FAGPA, Co-Chairs of our 75th Anniversary Task Force, for their visions in developing what promises to be a truly memorable year in 2017 as we deservedly celebrate the past, present, and future of AGPA.

Angela Stephens, CAE, Diane Feirman, CAE, Katarina Cook, Helen Li and Charysse Harper, for always being there, and always providing the right answer, when we call the office.

And of course Marsha Block, whose wisdom has instilled the meaningfulness of AGPA in all of us and whose guidance ensures that we will be group-strong for another 75 years.

These have been a good two years. I am indebted to you, our membership, for giving me the opportunity to serve as President. While I will soon be handing over the mantle of this office to Eleanor (although I understand that I can keep my AGPA gavel that I received two years ago!), I plan to keep paying my dues (as I have done over the past 40 years) so that AGPA will remain my professional home for years to come. In one of my last official actions, let me say: Stay with us as a member and take pride and meaning in our shared appreciation of the goodness of group psychotherapy. ●

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## Creating Community *continued from page 3*

takes time, especially when there have been past hurts and hundreds of unfinished conversations that took place long before someone ever met you. Yet all relationships, like good gardens, require time to grow and to blossom, developing at their own pace.

There is an old Buddhist saying, "If you knew someday you were going to

be very happy, would you be in such a rush?" A good and trusting relationship with someone is something to treasure and to nurture. The time you take now to develop a friendship will be the foundation that will be relied on and remembered in the years ahead when there is a misunderstanding or crisis. Enjoy the journey. ●

## Research Matters

continued from page 2

compels the passionate researcher to continue the endeavor, finding new ways to study familiar phenomena, all in the interest of informing the practitioner about what is shown to be effective, what are the key change processes in our craft, and how to translate those findings into useful information for the group therapist.

I have spent several years now as Editor of *The Group Circle*, attempting to support my researcher friends and colleagues, to listen with curiosity and openness, and to allow these pages to be the occasional instrument through which to communicate to the clinical community. In that collaborative effort, I have found these colleagues to be inquisitive, clinically sophisticated, talented scholars and clinicians, not the evil, reductionist, manualized treatment proponents some mistakenly attribute to researchers. So how do we minimize the knee-jerk reaction that some practitioners have when hearing the word research or evidence? It is this question that I briefly address in the rest of the column.

I would like to share what has become some of the most helpful ways of thinking about evidence in the way I practice, which arose from a conversation about evidence-based practice with Gary Burlingame, PhD, CGP, FAGPA, Melyn Leszcz, MD, CGP, DFAGPA, and J. Scott Rutan, PhD, CGP, DFAGPA on these very pages (2013). Their combined views and ways of framing evidence-based practice and practice-based evidence opened me up to possibilities I hadn't considered, without robbing me of my critical view of empirical evidence and research and its potential for reductionist misuse.

The first is overcoming the myth that I have to be research savvy to be an evidenced-based practitioner. I do, however, have to be open to studying the effects of what I do, and this is something most practitioners do anyway. We have been using manuals for 100 years; they are our cherished books on theory and practice. Those theories have been modified over the decades by the careful observance and study of what works and what doesn't work. So in many ways, most of us engage in practice-based evidence—we examine the evidence before us as to whether what we are doing is effective and (hopefully) modify our techniques and interventions accordingly.

Another helpful way I view evidence, is that if I am open to it, there are simple metrics I can use that might add to my examination of my work, myself, and my groups that can tell me if the group is cohesive, if the patient is improving, or if I have a strong working alliance. None of these require statistical analysis, and all of them simply alert me to things that might escape even the most experienced therapist's attention.

Another notion that reduced my defensiveness as a practitioner was that there was agreement between us all that one size does not fit all, that different groups with different purposes require different tasks, interventions, and ways of measuring success. We all employ different models to our group work, many of which are theoretically driven and some of which are empirically driven. Are there *empirically supported treatments* that are to be applied to specific diagnostic categories? Of course! But engaging in evidence-based practice, and using practice-based evidence (i.e., what we observe, measure, and evaluate in our groups, formally and informally), allows for flexibility in deciding purpose, task, patient characteristics, diagnostic heterogeneity that might reflect the real world of many of our group practices, and it gives us some choice in what to measure and how to best accomplish that.

Finally, we all engage in evidence-based practice when we read a book, attend a training session, or review an article that introduces something new or something we had not previously considered, and we apply these ideas to our groups. Most of us observe and study the effect of anything novel we introduce and consider its application, timing, and impact on the group-as-a-whole and the group members. Through that study, we learn more about the technique, when to apply it, with whom or what kind of group, and so on.

How do we continue to reduce the defensiveness and bridge the science to practice gap? This brings me back to the book I reviewed two years ago for one final thought (for now, not for ever). Much of the research in the book was based on the interpersonal model developed by Irvin Yalom, MD, DFAGPA, and refined by him and his colleagues over the decades, most recently in collaboration with Melyn Leszcz, MD, CGP, DFAGPA. I wrote about my observation that nowhere did I see mention of other important theorists and practitioners of our

craft (Van Wagoner, 2014). For example, Louis Ormont, PhD, CGP, DFAGPA, wrote extensively on techniques like bridging, emotional insulation, and immediacy (Furgeri, 2003); Rutan and Stone (1993) on the roles of the group therapist; Billow (2003) on the containing function of the therapist; and Stone (2009) on the role of the therapist's affect in detecting ruptures to the alliance.

I think that practitioners who do not find their cherished writers, mentors, and/or supervisors, and by association their theoretical models in the empirical literature, might struggle to relate to that very literature to which we would prefer they connect. But imagine if they or we did? ●

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## American Society of Group Psychotherapy and Psychodrama

### 74th ANNUAL CONFERENCE

March 31- April 3, 2016  
Sheraton Crescent, Phoenix, AZ

#### SATURDAY KEYNOTE SPEAKER:

*The Spirit Within Psychodrama*

#### DENA BAUMGARTNER, PhD, LMFT, LPC, CGP, TEP

Dena Baumgartner is the director of the Tucson Center for Action Methods and Psychodrama. She is a Board member of the International Association of Group Psychotherapy and Group Processes. She has been instrumental in helping corporations, educators and legal professionals incorporate action methods into their training programs and professional lives.

#### FRIDAY PLENARY SPEAKER:

*Returning to the Heartbeat that Heals*

#### TONY REDHOUSE

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## See Group Assets insert

### Dear Consultant:

**I** have been leading a mixed-gender group comprised of three men and three women for almost a year, and it seems to have settled down after a rather rocky start. I have two women (individual patients) who are ready and eager to enter the group. This would be the first time I have added members to this group, and I'm apprehensive about the process. The present members seem happy with the group as it is, and they quickly change the topic when I mention the possibility of new members. I thought about bringing in the two women at the same time, so they could support each other, in case the group is hostile towards them. What is the best way for the group and for the new members to bring them on board?

*Signed,  
Apprehensive*

### Dear Apprehensive:

**T**he first addition of new members to a relatively young group is an auspicious moment and opportunity to deepen the group process. If the group changes the subject when you discuss adding members, you might share this observation with the group, and ask them to be curious about what they think their reticence to talk about new members may mean for each of them and for the group-as-a-whole.

It seems there is a group collusion to ignore you, but that may have different meanings for each member. Introducing new members often stimulates group members' experiences in their family of origin when new babies came along, raising possible avenues of inquiry. For example, were they previously the youngest and then felt neglected and displaced? Or were they the oldest of the siblings and given more responsibility when the new baby arrived? How do these early experiences affect their predictions about what it will be like to have new members join this family? Perhaps some group members may be angry with you for disrupting their pleasant, cozy group. Often in a young group, members do not feel safe expressing anger or disappointment towards the leader, so be open to opportunities to encourage the members to be interested in, and value all feelings, and for them to practice taking risks with you.

You also mentioned the idea of adding the two new members at the same time, which can help the group get to know the new members and vice versa, without having to disrupt the group process twice. I have some concern, however, about your idea that the two new members could support each other if the group is hostile to them. Supporting the new members is your role, so expecting them to provide each other support might be an unrealistic expectation and burden. I encourage you to not fear the group's anger or resentment towards new members and to support all group members in expressing all their feelings. It is also important to orient the new members to the fact that they may be facing a variety of reactions from the older group members.

It is worthwhile spending time exploring your group's reactions to the imminent arrival of the new members. You want to let them know it is your decision, but that you are very interested in all their feelings about this change.

*Lisa Mersky, LCSW, BCD, CGP  
Austin, Texas*

### Dear Apprehensive:

**Y**ou are understandably apprehensive about adding new members to your mixed-gender group, especially for the first time. Your current members are likely apprehensive and demonstrate their resistance by changing the topic whenever you bring it up. We can imagine fear, anger, resentment, and concern about having enough of you and enough time for themselves, all potentially stirring and a rich emotional mix.

I like the idea of bringing in two members at the same time, both for their own mutual support in having a common experience entering an existing group, and to avoid changing the group composition too often in a short period of time. I would expect and welcome hostility, and work to draw that to you, both before the new members start and once they're part of the group.

Beforehand, let the group know that you're working with two people who you think are a good fit for this group, and you want to understand their thoughts and feelings about this before the new members begin. If there's too much anxiety expressed by group members about bringing in new members, you might consider waiting and allowing more discussion about introducing these new members to the group. If, however, the group expresses anger or irritation towards you, take that as a positive sign that group members are able to identify and express their thoughts and feelings without the risk of their trying to eliminate the new members once they join.

Bringing in people too quickly without paying enough attention to what current members are feeling can lead to someone shutting down and other forms of acting out, including leaving without really processing potential reactions with the group. Prospective members are usually able to understand and appreciate that you are working to have a good outcome for the group and for them, so they are willing to wait for the right time in your judgment.

*Derek Leighton, LMFT, LPC, CGP, CST  
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.*

Consultation,  
Please