

F O R U M

T H E A L L I A N C E

THE NEWSLETTER OF THE NORTHWEST ALLIANCE FOR PSYCHOANALYTIC STUDY

SEPTEMBER 2008

... so long as there are new purposes
for rope, there will always be new
knots to discover.

— The Ashley Book of Knots



knots

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Alliance Newsletter

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FROM THE EDITORS

Knots and bolts

KRIS WHEELER

O Time, thou must untangle this, not I; It is too hard a knot for me t'untie.

— William Shakespeare

The most famous knot in history, the Gordian knot, wasn't untied. It was cut apart in one bold stroke by Alexander the Great. His seemingly impulsive move leaves me with the sense that he cheated, and indeed, although he went on to conquer most of Asia as was prophesied, his fame and power were fleeting. I see the story as a symbolization of experience with knots and knotty situations that contributes to our capacity to think about them.

In the creative process of dance improvisation, I am familiar with coming upon moments of being knotted up, arriving at a cul-de-sac, stuck in what feels to be a problem with no solution. I was drawn to dance because of the joy I found in movement, but dance is about stillness as well. One of the benefits of seasoning in the field of dance has been learning to not solve these creative problems with a bold stroke of change. Gradually I found more interest in an alternative method I named *not advancing the action*. By slowing down and taking time to investigate the nuances of the situation—an awkward angle of the legs, a weird tipping of the shoulders, I found knots untying themselves in ways that take the dance into unimagined territory.

Speaking of dancing into new territories, the Alliance is in a phase of much change and evolution. This issue of the *Forum* offers reflections on this movement. Additionally, you'll find a variety of voices from the community of the Alliance membership.

- Over the past year we have welcomed five new board members—nearly a third of the group. You'll find an interview by Marcia Robbins of our new secretary Kim Brotherton, and Janice Hickey

introduces Carol Poole as cochair of membership. In future issues of the *Forum*, we will be in touch about our new community relations chair, Scott Leiter, and we will introduce Barbara Walkover, who begins her term as president-elect.

- ACPC's Postgraduate Internship Program has ended at the end of last month. This closure was discussed in former issues of the *Forum*. In this issue you'll find a retrospective from the viewpoint of the Operations Committee.
- We have inaugurated the Dorpat lecture which is a series designed to both honor Dr. Dorpat and allow us to pursue a vision of extending the usefulness of psychoanalytic principles into issues and settings beyond clinical work. You'll find a report on the first lecture: Lord Alderdice's profound and stimulating presentation given on June 20, 2008.
- Another first for us at the Alliance is the publishing of a book. Bob Bergman has presented a paper nearly every year at the annual conference, the (other) *Forum*. These and other papers have been compiled into a book that will be released in November. You'll find information about the book release party and one chapter from this book in this issue of the *Forum*.

Articles from individual members of the Alliance include submissions on the topic of *knots*, a book review and a reflection on personal resonance with Jungian perspective. I hope you'll find this to be an enticing issue of the Alliance's *Forum*.

The topic for our January *Forum* is *hope*. We appreciate receiving your experience and thoughts on this topic. Email them to Ginger or myself by November 1, 2008.

— Kris (and Ginger)

Letters to our community

Help for women in need

I am writing to make Alliance clinicians aware of Washington Women in Need, a wonderful nonprofit organization based in Bellevue that provides a variety of forms of assistance to low-income women who are residents of Washington and meet the organization's age (at least 18) and income guidelines (according to the WWIN website, their definition of low income is based on the federal poverty guidelines and eligibility is based on gross [pre-tax] income.)

Of particular interest to us is their counseling assistance grants, which provide for up to 24 sessions of counseling with a licensed mental health professional, to be used during one calendar year. The sessions are free to the client, and the clinician is reim-

bursed up to \$70/ session (which the organization pays very efficiently).

Of course this is not a high fee, but it's more than I have sometimes found myself charging low-income women patients. Nor is 24 sessions very many, but in my experience working with several clients through WWIN, I have found it useful for the clients (who I should also note have been extremely responsible about appointments), and I have referred them to ACPC for possible continuation of therapy. I can also envision the grant being used to help provide some relief to a low-income patient who is continuing in therapy, or perhaps to make a second weekly session possible.

WWIN's phone number is 425-451-8838 or toll-free 888-440-WWIN and their website is www.wawomeninneed.org.

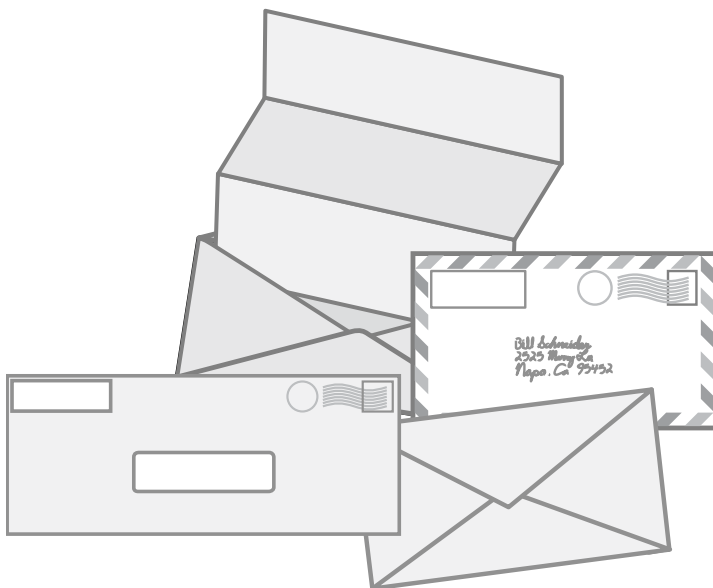
— *Shierry Nicholzen*

Dance therapy

We in the dance/movement therapy community took pleasure in seeing dance as the focus of the April issue of the *Forum*. As psychotherapists who use dance and movement in our work, we see the benefits of the healing power of dance on a daily basis. It seems timely to let readers know about the existence of the Washington State Chapter of the American Dance Therapy Association (WSCADTA) in Seattle as well as our national organization. Dance/movement therapists work in hospitals, community mental health centers, assisted living facilities, schools, private practice, and other settings.

As was made so beautifully evident in the last issue of the *Forum*, dance is communication and therefore fulfills a basic human need. In psychotherapeutic relationships, dance can be applied both metaphorically and directly as a therapeutic intervention. So, for anyone wanting more information about this or any of the other creative arts therapies either go to the ADTA website or the National Coalition of Creative Arts Therapies Associations website where you can find articles, bibliographies, public relations, and more.

— *Nancy Goldov, Leif Tellman*
(WSCADTA president),
Lindsey Rosen



FROM THE PRESIDENT'S DESK

Focus and fluidity



I am thinking about the topic of this newsletter, *knots*, and musing on the value of bringing ends together in a knot that holds and the frustration of a knot that is so tight that it can't be undone. In this uncertain world I feel the tension between holding on and letting go, and the constant challenge to find the right tension that allows for focus and fluidity simultaneously.

In June the Alliance sponsored the first annual Dorpat Lecture in Psychoanalysis and Society with John Lord Alderdice as the recipient of the 2008 prize. Lord Alderdice spoke of the slow process of bringing together warring factions in Northern Ireland to broker the peace accord. The knots of hatred, retribution, and fear stubbornly resisted untying into the shared goal of ending the killings for the next generations. He described eloquently the gentle workings with those obstacles to bring just enough slackening to allow for individuals eventually to come together at a table and talk. Trained as a psychoanalyst as well as a politician, he brought his awareness of the human desire to retreat into the known even when it is destructive. Creating the space to allow for the unknown and the unfamiliar is required for any growth or change. And yet this space also has to be held with enough focus to keep the process moving, step by step.

The lecture was the culmination of a wonderful experience for the Alliance, and for me personally. One member came to us as a generous donor with the desire to honor Ted. A small group of us joined together to play with the idea, coming up with the annual lecture structure and then the wild dream of bringing Lord Alderdice. In the early stages, it seemed too large a task, too wild a dream; but holding each other together with the excitement of the possibility, we slowly worked step by step until the reality of the evening. Many of us stepped outside our comfort zones and became public relations specialists inviting an extensive group of the community to join us, as they did. The event felt like a wonderful example of what can start with one person with an idea. Focus and fluidity.

And this September issue comes at the end of the ACPC Postgraduate Internship Program, another example of people coming together to focus and to play with a mission until it becomes a reality. This remarkable program that has provided so many patients with treatment and many clinicians with training required continuous focus. The dream, mission, and goal of providing low-fee psychoanalytic psychotherapy while training clinicians brought together a group of dedicated individuals to develop it into a reality. The terrain was filled with obstacles and difficulties, and yet

the momentum continued. Another wonderful example of what is possible.

The Alliance itself is of course another example of the creative space of people coming together, like the space we experience in our offices each day. When two or more people come together with a willingness to hear themselves and hear another, the knots of fear and isolation loosen and new connections are made that hopefully hold firmly but not tightly. I hope that this can be a time in which the world moves more in the direction of together than apart, while allowing room for flexibility and change. I am grateful to be part of this Alliance community of exploration.



FROM THE BOARD

Introducing our new secretary: Kim Brotherton

MARCIA ROBBINS

Kim Brotherton has joined our board as its secretary, having been unanimously elected by the board membership. The position of secretary has traditionally been one that does not interface extensively with the membership, focusing instead on recording board minutes and participating on the executive committee. But as part of her new role with the Alliance, Kim has also agreed to take on administration of the website. Whenever you use the website, you will see Kim's handiwork. In this capacity, she wants to invite feedback about how the website is, or is not, working for individual members. The board is excited to have her technical expertise coupled with her enthusiasm to help make the site a more complete vehicle for sharing and accessing information about all aspects of the Alliance community.



Kim comes to the board with much experience in mental health. She speaks of an early interest in psychology, starting in junior high school, and leading to her major at the University of Washington. Following this research-focused program, Kim wanted to work more directly with people, and so after a few years of environmental consulting she completed a master's in social work at the University of Denver.

Kim describes watching her "career path unfold" as she split herself between administrative and clinical services at the Stevens Hospital psychiatric unit, enjoying both. The clinical work led her to understand the limitations of cognitive behavioral therapy, and she moved towards learning more about psychodynamic psychotherapy. After completing Roberta Myers' Certificate in Psychodynamic Theory and Practice, she enrolled in the SPSI CAPP (certificate in advanced psychoanalytic psychotherapy) program, which she has just completed.

Kim left Stevens in 2002 to join the Family Services Redmond branch, where she spent more than five years working with individuals and couples psychodynamically. In January 2008, she transitioned into full-time private practice, opening an office in Seattle's Wallingford neighborhood.

When Kim talks about her work she is animated and clear. This unfolding of her career has brought her to a place that feels like a good fit, although she is aware that there will be many more lessons and professional

developments ahead. She describes herself as "addicted to learning," though she is currently focusing her non-clinical hours on less formal educational offerings, such as the meetings and classes that the Alliance offers. She is looking forward to her greater involvement with the Alliance by being on the board. She is also continuing as a Clinic without Walls therapist, which she sought out as an opportunity to learn through a supervised case while connecting with new colleagues as she moved into private practice.

Her website articulates the way she sees herself in this work: "often ... my role is to help you explore and better understand the complexities and dynamics behind your troubles, so that you have greater freedom and capability in how you respond."

Kim enjoys the creative art form of psychotherapy, seeing herself as a contributor rather than an engineer. Channeling the organizing/directing part of herself into the business of her practice (doing billings, setting goals, organizing statistics) pleases her.

We are delighted to have Kim's diverse talents and interests available to the Alliance board. Her flexibility with the website structure and willingness to experiment with its development will enable us to think creatively about how the Alliance can be better represented on the web.

Evolving and expanding Education Committee

Looking forward

STACEY MCFARLAND

I hope all of you had a wonderful summer. I am writing this from the cool crosswinds of my front porch the last weekend of June — a weekend of temperatures in the 90s. Whew! After the cool spring, however, it is agreeable to have some true summer weather.

A number of changes have taken place in our committee. Obviously, the first change involves our name. To better reflect what our committee does for the Alliance, we have chosen to change the name from the “Professional Meetings Committee” to the “Education Committee.” Professional meetings sounded a bit formal, not to mention that our purpose has always been to provide useful and stimulating educational programs in multiple formats. Rest assured, we will continue to do our best to offer enriching, psychoanalytically oriented learning opportunities to the Alliance membership and the wider community.

Another change to our committee is that Terry Hanson, past president of the Alliance, has come on board as a cochair, specifically to focus on expanding the number of classes and seminars we offer. We are excited about the ideas and enthusiasm Terry brings to developing this wing of the Education Committee. We also remain committed to offering the

Thursday Night Professional Meetings series, and we welcome hearing about topics that interest members for future meetings.

Finally, we are pleased to welcome Erica Rubin to the committee. Erica, a psychologist in private practice, comes to us with a desire to get connected with the greater psychoanalytic community through service with the Alliance.

At present, we have the following programs scheduled:

- On October 2, we will begin the three-evening series, “Nuts and Bolts of a Psychotherapy Practice.” This first evening will address choosing and furnishing an office, describe a range of financial policies and practices, and review legal and insurance requirements. We look forward to learning about the variety of approaches we all have to these tasks and to sharing ideas about them. The remaining sessions, to take place in 2009, will address consultation, confidentiality, marketing, practice management software, and professional wills (provisions for death and disability). The first session will be led by committee members Doug Hansen, Jenny Gardon, and Erica Rubin.
- On November 13, Stan Case will discuss working with adolescents.
- The annual book study will take place on February 12, 2009. We have not yet chosen the title for the study, so we welcome all ideas.

We wish to extend a warm thank you to all of our presenters from the last year. They include Jacqui Metzger, Tony Hacker, Shierry Nicholson, Robert Berley, and Jeff Eaton. We also wish to thank all of you who came as attendees to join us in learning and discussion. We hope to see you at our programs this coming year and we encourage everyone to bring a friend!

New course offerings

TERRY HANSON

The Alliance is working to increase our offerings of courses beginning this next year, and a new work group is forming to undertake this task: Jeanne Castle, Ann DeMaris Davids, Patrick Nalbone, and myself. We will be trying to look at the possible gaps in course offerings in the community—where there are needs for training and development that aren’t being addressed.

We will continue with two kinds of courses: seminars, which are offered to Alliance members for no fee as facilitators volunteer their time; and classes, where a more traditional fee is charged. I think there is an important place for both kinds of learning environments. Seminars offer a more group-centered experience, while classes recognize the particular expertise and training a teacher brings.

We are happy to be offering two classes in the fall. Jeffery Eaton and Karol Marshall will be teaching “Antonino Ferro’s *In the Analyst’s Consulting Room*,” and Rebecca Stoller will teach “How to Use Control Mastery Theory in Session.”

We are very interested in identifying those of you who might be willing to lead a class and seminar and those of you looking for particular subjects to be covered. Please call any of us with your ideas.

Antonio Ferro’s *In the Analyst’s Consulting Room*

- Instructors: Jeffrey Eaton (206-548-9293) and Karol Marshall (206-464-1955)
- Tuesdays: September 9, 23, October 7, 21, November 4, 28, December 2; 7:30 – 9 pm
- \$200
- Contact instructors to enroll

This course focuses on the work of Antonino Ferro as it applies to work with adults. Ideas developed in his first book on child analysis, *The Bi-personal Field*, are elaborated in terms of the “analytic field” created between patient and analyst. Issues regarding listening, working with impasse, how theory informs or obstructs, and many other clinically relevant ideas are explored with ample clinical material. The class atmosphere is one of discussion, exploration, and learning together with instructors sharing their own clinical thinking and inviting participants to describe their clinical work in light of the impact of Ferro’s ideas.

How to use Control Mastery Theory in Session

- Instructor: Rebecca Stoller (206-505-9474)
- Mondays, October 13, 20, 27; 7:30 – 9:15 pm
- \$50
- 3216 NE 45th Place, Suite 100, Seattle
- Contact instructor to enroll

This course will be for beginners as well as people familiar with the theory. We will learn to formulate cases by looking at patients’ plans for treatment. We will identify transference tests and look at how to pass them. We will also define and explore the role of interpersonal guilt in psychopathology and how to use that to understand symptomology. We will ground our exploration in case material provided by members of the research group as well as by students in the course.



Alderdice inaugurates first Dorpat lecture

BILL ETNYRE, JACQUI METZGER, KRIS WHEELER

Armed only with non-analytic explanations of violence, our world community will not make sense of terrorist attacks like those of September 11, 2001.

— Lord Alderdice

Lord John Alderdice—psychoanalyst, member of UK House of Lords, a key negotiator of the Belfast Agreement in Northern Ireland, and leader of the Alliance Party of Northern Ireland—was the perfect speaker to inaugurate the first lecture in honor of Ted Dorpat (1925–2006), which was made possible by the generosity of an anonymous donor. In her heartfelt introduction, President Marcia Robbins read a piece written by Michael Miller about why people of our analytic community revered Dr. Dorpat. We learned that following active duty in the armed forces during WWII, he was an ardent member of the peace community, participated in anti-war demonstrations and offered support to men who resisted the draft during the Vietnam War.

Nearly 300 people were riveted by Lord Alderdice during his talk entitled, “Terrorism, Fundamentalism and Road Maps to Peace,” and we could have kept him until the wee hours in the lively discussion that followed. He touched us with heartbreaking stories of suffering, and inspiring moments of

redemption as people who had hated each other for centuries came to share common ground and a commitment to peace. He also spoke with humor—certainly helpful during tense negotiations.

While psychoanalytic understanding served as bedrock for his years of work facilitating the peace accord, his presentation was free of professional lingo, characteristic of the straightforward speaking that he emphasized was essential in his work. He spoke to global issues, linking his experiences to psychoanalytic principles.

For years in Northern Ireland, moderates had been brought together to hash out cease-fire agreements which lasted only months or even days. People were afraid to bring radicals together in the same room, knowing the high probability that they or people close to them had committed horrible acts of violence. Yet it was only when the leaders of those radical factions were brought together that a true and lasting peace could begin to be forged.

Alderdice was among those moderates who resisted bringing terrorists to the negotiating table. A colleague requested initiation of talks with the violent factions, presenting to them the question: If there were an alternative way to achieve your political goal, would you be willing to consider it? The essence of the question was, Are you more committed to your goal, or to your method? Surprisingly, this generation of both parties’ radical factions was clear about the wish that their children and grandchildren not

live with what they had gone through. Gradually, cautiously and with much difficulty, the talks began.

Among the insights Alderdice shared with us was the discovery that even parties not willing to be present at the negotiating table were anxious to receive minutes of the meetings. Their wish to be kept abreast of the proceedings showed him the importance of maintaining a seat for all parties, regardless of whether or not they showed up. Alderdice also emphasized how the people of Northern Ireland could not have achieved lasting peace without the significant help of others—representatives of many nations participated in supporting the negotiations, with tremendous investments of time. Additionally, the opening question of whether each party was willing to consider an alternative approach to their impasse was a long way from an actual settlement. He contrasted his experience with the more contemporary expectations of quick solutions to the problems of the Middle East.

In closing, Lord Alderdice responded to the question, “What can we do to work for peace in troubled areas of the world?” He said that people can contribute money or go to these trouble spots, but that it is just as important to participate at home as active citizens. “You have elections right here . . . get involved.” We bade him farewell with a standing ovation.

Franco Scabbiolo

Stimulating our thinking

TERRY HANSON

Franco Scabbiolo, an analyst from Oxford, England, spoke this past February on “Thinking Through the Psychoanalytic Process” and returns next February to present on “The Psychoanalytic Method for Exploration of Clinical Material.” Last February was more about clinical theory, outlining the major therapeutic issues that arise from the first session with a patient through to the complexities of an ending. Next February will be more about clinical practice, moving into the issues of how we work, how we think about how we work, what we are actually doing as we sit with our patients.

I am always challenged when I sit listening to Franco. I have the impression that he works with a group in a way that is somewhat parallel to how he describes his work with patients, where the main goal is always, as he says, “to stimulate thinking.” He will

pause when I want him to talk, detour when I want him to explain, open up possibilities when I want him to tell me the answer, present a patient’s dream and leave the meaning open when I want him to tell me the meaning. I get aggravated. I feel uncomfortable. I want him to be more clear. But, in fact, I do find myself thinking.

Next February we will be experimenting with the format of Franco’s meetings to help facilitate this stimulation of thinking. We will have more clearly structured discussion times, and Jeff Eaton will be serving as a discussant to help promote the group’s conversation and interaction. On Saturday we will include two times for work in small groups to give people more of a chance to explore comments and questions. We will be offering classes before Franco comes, in order to outline some of the basic object relations language that he uses. And we will begin Tuesday and Wednesday evenings with interactions with clinical material to help anchor the whole process in the reality of our experience with patients.

Sitting with Franco

ANN DEMARIS DAVIDS

I can still remember what it was like sitting with Franco when he came in 2007 to the Postgraduate Internship Program at ACPC. It was during my first year as an intern and I was struggling to learn psychoanalytic theory and to find ways of applying it to my work with clients. I hoped only to learn some tangible techniques from Franco. Instead I experienced what it was like to sit with Franco and to think with him about the psychoanalytic process. He was remarkably approachable to all who were present.

During a break I asked him about my idea that adults and children, by using their imaginations, are playing in different arenas. He not only discussed this idea with me, but asked me to present it to the larger group.

My experiences sitting with Franco at various seminars have influenced how I sit and think with my own clients, and have helped me to integrate and embody the theory I have been learning during my internship at ACPC. When Franco returned this year I felt like I was getting to visit with a family friend. Somehow Franco had become included into my training on how to think psychoanalytically and his return to Seattle was an invitation to continue that process.

I look forward to Franco returning to Seattle in February 2009.

Franco Scabbiolo: The Psychoanalytic Method for Exploration of Clinical Material

- Tuesday and Wednesday evenings, February 17 and 18, 2009 — Interaction with case material from local clinicians.
- Friday, Saturday, and Sunday, February 20, 21, 22, 2009 — Presentation of an object relations method of working founded in the work of Bion and Meltzer, with discussion and small groups. Jeff Eaton will be discussant.

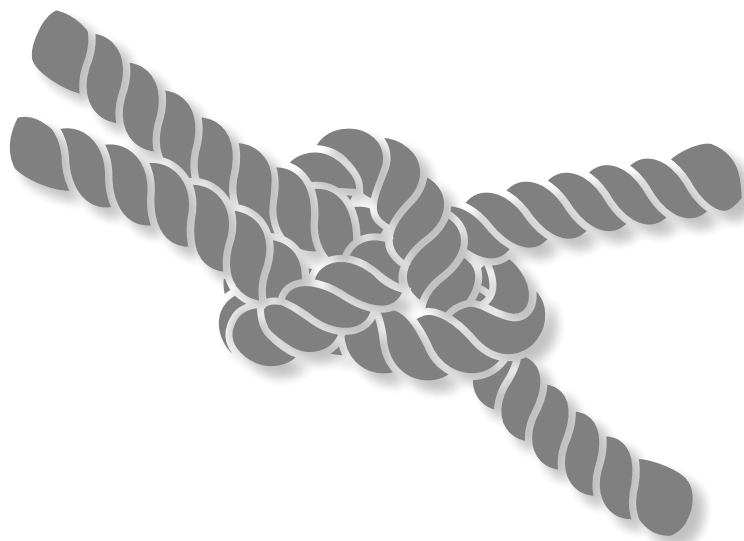
Two courses in preparation for Franco Scabbiolo

Object Relations Basics

- This class will cover the fundamentals of object relations language beginning with Freud and evolving through Klein, Bion, and Meltzer and emphasize concepts that form the basic structure for meetings with Franco Scabbiolo in February. The same course will be offered on two different dates.
- Thursday, January 29, 7:30–9 pm
- Monday February 2, 7:30–9 pm
- Kris Wheeler's office, 5809 43rd Ave NE, Seattle
- Instructors: Kris Wheeler, 206-269-9160, and Terry Hanson, 206-517-4198
- Fee: \$10
- Cosponsored by the Northwest Alliance and COR NWFDC

Object Relations Basics/Resonances:

- This class will explore how selections from literature (poetry and prose excerpts) resonate with concepts Franco Scabbiolo will discuss in February. Students can enroll in this class without having taken Object Relations Basics or can take them both.
- Wednesday, February 11, 7:30–9 pm
- COR NWFDC, 1711 12th Avenue
- Instructor: Joan Fiset, 206-525-4605
- Fee: \$10
- Cosponsored by the Northwest Alliance and COR NWFDC



REMINDER:

Opportunities for reduced-fee psychoanalysis

Sometimes psychoanalysis can be had at a reduced fee by analytic candidates in training. If you are interested in having an analysis but are concerned about finances, consider inquiring at one or more of the four analytic training institutes in town to see whether there is a candidate who can meet your treatment needs with a fee that matches your financial situation.

- Seattle Psychoanalytic Society and Institute (SPSI)
- Northwestern Psychoanalytic Society (NPS)
- Northwest Center for Psychoanalysis (NCP)
- North Pacific Institute for Analytical Psychology (NPIAP)

Arts and psychoanalysis events

Offerings

SHIERRY NICHOLSEN

Looking ahead to this 2008–09 year, events initiated in previous years are continuing or evolving into new forms. We will hold our fourth annual (so far) Potential Space a bit earlier this year, on Saturday, October 4. Carol Poole is now in charge and writes about Potential Space in this issue. And after the pleasure of Jeanne Castle's series of movement workshops last year, we are now having an extended salon series, with workshops featuring and combining movement and writing. The salon series is Jeanne's inspiration, and she is coordinating it. (See her announcement below.) The poetry discussion series begun last year continues on the second Sunday of the month at Sally Parks' home. And we hope to see a

full production of Elizabeth Clark-Stern's *Nana Sofia's Oasis* in spring 2009. See the calendar for details and contact information for these events.

Discussants' Choice: Films that Light the Analytic Mind, the Alliance/COR film series will continue this year with the same format as last year. We have invited clinicians of various theoretical persuasions to choose a film that they would like to have shown. They will then lead the discussions following the films. This year's film series will begin on October 10 with *Lars and the Real Girl* with Rebecca Meredith leading the discussion, followed by *No Country for Old Men* with Stephen Shehorn on November 21, and *Sophie Schol*, with Bev Osband on January 15. On March 20 and April 17 we will show episodes from the very popular and controversial (among clinicians) TV series *In Treatment* with Charles Mangham leading the March discussion and Margaret Crastnopol leading the April discussion. The series is held on the third Friday, with the exception of the October screening which is on the second Friday. There will be no films shown in December or February.

The Arts and Psychoanalysis Committee's mission is to provide guidance and assistance to projects by and for Alliance members linking the arts and psychoanalysis. If you have an idea for such a project and would like to discuss it with us, please feel free to contact any of the committee's members: Shierry NicholSEN, Jeanne Castle, Kris Wheeler, Terry Hanson, Carol Poole, and Joseph Canarelli.

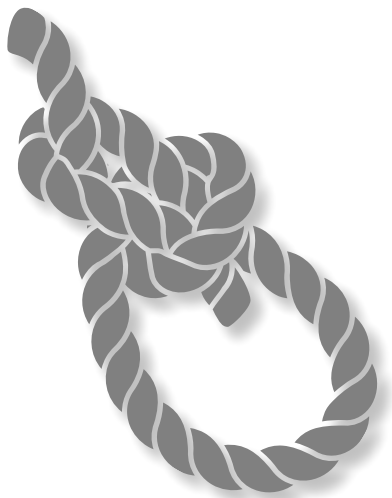
Potential Space

CAROL POOLE

In the June 23, 2008, *New Yorker*, Judith Thurman wrote a fascinating article about paleolithic cave paintings in southern France. The article's opening paragraph sketches out the reason that these cave paintings have inspired contemporary artists including Pablo Picasso:

What those first artists invented was a language of signs for which there will never be a Rosetta stone; perspective, a technique that was not rediscovered until the Athenian Golden Age; and a bestiary of such vitality and finesse that, by the flicker of torchlight, the animals seem to surge from the walls, and move across them like figures in a magic-lantern show. (p. 59)

Who knows whether anyone today can hope to understand this art or the people who made it? But looking at paintings from the Chauvet cave in Ardèche, the oldest known, one thing seems clear: the animals shown in them are *images* of animals, consciously created as images, used as symbols. And this way of painting lasted, unchanged, for over twenty thousand years, four times longer than recorded history. It is pretty irresistible to try to imagine what it means for us now that some of our ancestors



spent such a long time practicing an art form in which they went below ground, into the dark, to summon up those images which were and also were not like literal animals found in the aboveground world. Maybe this is when *the underworld* became such a rich and enduring metaphor for the unknown edges of the human imagination.

Psychotherapy and art are two ways I know of making creative journeys between levels of reality. It's easy for me to imagine cave painting as a kind of ancestor of these two practices, in which we explore the dark, hoping not to get lost there, but to stay long enough to find and create new images, new ways to communicate what has been wordless or unknown.

So it's in honor of the cave painters that I want to invite everyone to participate in this year's Potential Space, an arts event for members and friends of the Alliance. At this annual gathering artists in the Alliance share their painting and sculpture, poems, songs, and dances, and everyone gets to enjoy the benefit of their labors. In the torchlight of the kind of space-between which Donald Winnicott called *potential space*, new dimensions of our community come into view, and creative energy is exchanged. I hope to see you there!

Reference

Thurman, J. (June 23, 2008). "First impressions: What does the world oldest art say about us?" *The New Yorker Magazine*.

Sensing the muse: Six Saturday morning salons

JEANNE CASTLE

A salon suggests a participatory, co-creative group who become both artist and audience with and for each other. In a warm and welcome atmosphere—indoors and out—each of these women hope you will come and join them to share a Saturday morning of creativity with one or more of these facilitators, where the muse will be invited in each participant through word, movement, or both.

Conversations between Sensation and Imagination: Exploring the envelope of self

- October 25, 9:30 – noon
- Call Kris Wheeler at 206-269-0160 to join

Guidance will be offered to direct attention to the *felt* experience, the somatic background within which we reside, and to our imaginative translation of these sensations, as well as the undoing of these translations. This conversation, an entrance into creative process, can offer discoveries beyond our familiar sense of self.

Movement and Writing Salon

- November 15, 9:30 – noon
- Call Kris at 206-269-0160 to join

Writing What You See: Inner and outer landscapes found at the Nisqually National Wildlife Refuge

- January 24, 2009
- Carol Poole

The Gift of Words

- February 28, 2009
- Bev Osband

Sensing the Bones of What Matters: A movement exploration

- March 21, 2009
- Jeanne Castle

Words from Bones: A movement and writing collaboration

- April 18, 2009
- Jeanne Castle

Single salon:

- Members – \$25
- Nonmembers – \$30

Two salons:

- Members – \$40
- Nonmembers – \$50

The series:

- Members – \$100
- Nonmembers – \$130

For questions or if you wish to join the salons as a series, please contact Jeanne Castle at 206-528-0245.



ALLIANCE COMMUNITY PSYCHOANALYSIS CLINIC

ACPC news

JANICE HICKEY

More than twelve years ago Jeff Eaton had a vision about a psychotherapy clinic that could serve the therapy needs of an underserved population while at the same time providing training in psychoanalytically informed psychotherapy and offering an opportunity for senior clinicians to give back to their professional community. Many years later that vision is alive and well as the Clinic Without Walls (CWW). I took over the program management of the CWW two years ago. I feel like Jeff graciously handed over to me this very precious concept and initial project of his. It is now my turn to report to you on the CWW and all that is happening. It is now my turn to steer this ship that I have always considered to be a very valuable part of the Alliance professional community.

Fortunately this is not a solo endeavor. I could not possibly do this on my own. I continue to have the wise guidance of the steering committee (Marcia Robbins, Kris Wheeler, Ginger Harstad Glawe, Jeff Eaton, and Donna James). This committee, given its long history with the clinic, can help me look at

and consider some of the larger issues that inevitably come up when running such a program.

I also have an enthusiastic and growing CWW committee (Maria Minkova, Robin Westby, Lindsey Rosen, Lynn Garvey, and Bob Berley). This is the group of clinicians who volunteer their time to help me run the day-to-day operations of the clinic as well as think about where we want the CWW to go and how we want it to grow. I so appreciate their extended involvement with the CWW (each of them is either a therapist or a consultant as well as being on the committee) and the fresh energy and creativity they bring to each committee meeting. And of course Janet Allen, our program administrator, has been and continues to be key to the operation running smoothly. I feel incredibly held by all of these people.

I didn't realize just what I was signing up for until well into my position as chair of the Clinic Without Walls. The actual logistics of running this program are not terribly difficult. Meeting with the therapists and consultants is always interesting, and a delight. But the sense of responsibility that comes with this position is quite daunting at times. I appreci-

ate even more the astounding efforts by Jeff, Tom Saunders, Donna James, David Allen, and Susan DeMattos in keeping the CWW afloat while they were also running the internship program. By this fall, with the transfer of some of the interns and some of their clients to the CWW, we will be serving 30 patients by 24 therapists and 30 consultants—the largest number of patients being served to date.

The CWW committee continues to work very hard to develop various training opportunities for those who are involved in the project. There is a consult group led by Stan Mandell that has been meeting every other week for almost two years, and we hope to add another daytime consult group in the fall. We offer case consults for the entire ACPC community (past and present) three times a year (September 27, January 10, and April 25) in which a CWW therapist presents case material to a consultant with whom he or she has not worked before. These meetings have been very rich in the breadth and depth of discussion about the complex work we do when working with many of the clinic patients. We are also

continuing to offer meetings for the consultants to discuss their very unique role in the therapeutic process. For many of us there has been no formal training in consultation or supervision so the opportunity to come together and discuss the work is an exciting tonic. There was such an enthusiastic response in the last meeting that we have decided to meet every other month (September 20, November 15, January 24, March 28, and May 16) to keep that conversation alive and growing. Bob Berley again will be facilitating the next group to capitalize on the group's energy and security.

The CWW committee is hoping to present three seminars to

current CWW therapists during the academic year. Last year we offered seminars on working with schizoid, borderline, and narcissist clients. The committee is still in the process of developing the new seminars and contacting possible facilitators. We will be sending all therapists a flyer announcing these offerings later this summer.

And finally, the CWW will continue the ACPC tradition of hosting the annual conference on "How Does Psychotherapy Work?" Karen Maroda, Ph.D., will be coming June 6, 2009, for the next year's conference. ACPC will also be co-sponsoring a Friday evening lecture with Dr. Maroda this fall (October 10) with Mars Hill Graduate School. To find out more about

this event and Dr. Maroda's work, see the article by Robin Westby and Roy Barsness below.

All of these training opportunities are offered free by the clinic, except the "How Does Psychotherapy Work?" conference which we try to make affordable.

It is a very exciting time in the clinic. It is growing—in its own breadth and depth. With the guidance of both the steering committee and the operations committee, I hope we can shepherd this growth mindfully. It is my hope that this project continues to be the "win, win, win" project in generosity for the community that Jeff had first envisioned.

A great way to develop your clinical skills

ACPC has openings for therapists to participate in the Clinic Without Walls. Therapists interested in deepening their skills with psychodynamic psychotherapy can volunteer to see a patient and, in turn, receive free consultation from a senior clinician.

For information, contact Janice Hickey at 206-633-1018 or jhickeymsw@gmail.com. Information on line is available at www.alliancecommunityclinic.org.



ALLIANCE COMMUNITY PSYCHOANALYSIS CLINIC

Alliance Postgraduate Internship Program: A retrospective

KATHY KNOWLTON AND GINGER HARSTAD GLAWE

Note from the Steering Committee: It is with much sadness that the board of the Alliance and Operations and Steering Committees decided to discontinue the ACPC Two-Year Postgraduate Internship Program. More than half of the Alliance members have contributed financially to the success of this program, something unheard of in most fundraisers' experience. Dozens of therapists have served as mentors, consultants, teachers, and therapists. The core group, Operations Committee, dedicated themselves to the day-to-day holding and administration of this very successful training and service project. Because of the tremendous investment and the pain of this decision, ACPC Steering Committee decided to interview everyone who had an active role in this project in order to help process the experience, as well as to create documentation. Ginger Harstad Glawe and Kathy Knowlton offered to undertake the debriefing process—their compassionate approach to each person involved and even-handed perspective in documenting the program is an invaluable gift. What follows is the first of two articles offering the membership a view into the process and impacts of the Postgraduate Internship Program.

In the fall of 2004 the Alliance Community Psychotherapy Clinic Two-Year Postgraduate Internship Program (PIP) took its first class. This August the third and final group of interns will have graduated, and a total of thirteen therapists will have completed the program. This rich learning experience existed for four years, and was discontinued at the end of August this year.

This article will provide a report to the community on the course of the PIP. It is based on interviews with staff and founders of the program. A few quotations have been lifted from editions of the *Forum* and appear with dates. Most quotations are from our interviews and appear undated. The ending of this program is met with complex feelings, and while we do not propose in this article to resolve leftover questions or contradictions, we will try to address them sufficiently to make them more understandable.

An acquaintance with the people we spoke to, their roles and the sequence of events they set in motion may help readers of this more issue-oriented discussion. An inevitably incomplete timeline and sketches of the people interviewed are provided alongside this article.

For this article we spoke with David Allen, Jeff Eaton, Donna James, Tom Saunders, Susan DeMattos, and Janet Allen. The first five were members of the operations committee for the internship, the sixth is a part-time administrator who helped to run the internship. Others, including the interns, supervisors, consultants, mentors, and graduates may have spoken with us by the time this article appears. Because of publication deadlines, their contributions will be integrated at a later date.

The chief tension present at the close of the program is that it ended at a point when it was not in apparent decline. Thanks in part to donations, it broke even financially in this past year. Even without organized marketing the internship's reputation had grown, attracting inquiries from potential applicants as far away as New York and inspiring ever larger numbers of local clinicians to volunteer as consultants and mentors. The single greatest source of new patient referrals was former patients.

Everyone interviewed agrees on the need for a program such as the internship and on its success as an embodiment of the ACPC's mission. "ACPC exists: to make psychoanalytic consultation available to the

Postgraduate Internship Program Operations Committee

David Allen: Joined ACPC very near to its beginning and was on the clinic steering committee since 1998. He supervised Donna James for her creatively-formed internship, and enjoyed that experience, so it was “not a stretch” to move to the PIP. He was committed to being involved with the new program. David helped to plan the program and the structure of the PIP, and served on operations as training director. He negotiated the rental agreement for PIP’s clinical offices and kept track of all the service statistics. He was also a group and individual supervisor for the interns.

Janet Allen: Brought more than twenty years experience as a manager and program administrator for several clinical organizations to the Alliance Community Psychotherapy Clinic. Jeff Eaton recruited her to help when the ACPC had grown in complexity and required more systematic business practices. She has always shared the commitment to the service model realized

community; to make affordable psychoanalytic psychotherapy available; to make psychoanalytic knowledge available and useful” (Eaton, September 2006). David Allen’s early reference to the latent demand for such a program was validated by experience: “If you build it, they will come.”

While people agree that what they built was good, they also agree that how they built it was hard, especially after the program began. Planning discussions went on for a couple of years before the first class began in 2004. Before and overlapping those discussions, Donna James had given interning a “test flight” by designing her pre-doctoral internship within the ACPC. Universally credited with having the original vision for the program, Tom Saunders had dreamt of generating “an opportunity to learn psychoanalytic psychotherapy in a group of like-minded people” (James, September 2004) since he so valued his own such experience.

The skills and methods that go into creating a vision, no matter how deeply loved that vision might be, are not the same ones used to accomplish the day-to-day tasks that make the vision reality. The people who ran the PIP say that they began the program unaware of the demands they would face. Allen: “We were making it up as we went along, so we were putting out fires or making policy when the need arose.” Eaton: “The first idea of the internship was naïve. You don’t just respond to problems, you antici-

pate them, develop policies, procedures, and structures that deepen over time. I’ve learned how much growth was needed to support this.” James: “Roy Barsness had run an internship program and he came and talked to [operations] about the sleepless nights. I thought what’s the big deal? I get it now.”

Running the program meant everything from having forms for the clinic offices where the interns saw patients, to establishing policies and procedures clear enough to communicate to recent initiates. Psychoanalytic ideas are so universally applicable, so deeply illuminating and powerful, one can be tempted to think they will be useful for purposes that are not therapeutic or explanatory, purposes that are, essentially, not analytic. Even when what is being created is meant to embody an idea of maturity informed by psychoanalytic insights, the administrative, legal, accounting, and business requirements of running a program like the PIP do not get done with therapeutic or supervisory skills. The group that began as a creative community of peers needed to become an efficient work-party, to divide tasks and to communicate concretely. Distinctions in approach that might have enriched more abstract conversations now led to consequential differences. Without practice in this kind of daily decision-making as a group, they discovered new differences and disagreements as they went.





Though wrenching, the transition did provide challenges from which people learned.

Allen: "I enjoyed, surprisingly, the business aspects of the program, dealing with the budget, systems." Eaton: "I've learned the importance of context, the context of doing treatment is one, the context of doing supervision, the context of teaching in a group ... the context of dealing with a board. All of those contexts have their own tasks, [and] do not translate well to each other." James: "I have learned a ton. I don't even know where to start. Working with amazingly bright people, I have learned so much about clinical practice, supervision, theory."

Meanwhile the internship was underway and the first class was coping with a fledgling program and the intellectual, emotional and, clinical demands it made. The staff would discover that the beginning of each class was tumultuous in its own way. DeMattos: "There was a mistaken idea that the internship could make up for the traumas of training." Eaton: "Nobody anticipated the emotional turbulence for the [interns]. They do direct service, the didactic, individual supervision, and group supervision. It's the only place in town that does all that at once and so much." James: "Even if you came into the program pretty well [functioning] as a clinician, the patients are severely disturbed. They [interns] take on a fair number at once. They get a

lot of supervision, which can be wonderful and confusing."

The staff realized as they went that the internship was too much for people who were trying to support themselves with paid jobs as well. It also overwhelmed people with compromised health. As a consequence, it ended up being appropriate for a narrow demographic range of the people who applied. Eaton: "Those with established partners fared better ... To make it viable you need a stipend for people. There are not that many people who can take two years off."

While each class year would have its own struggles, two things remained consistent: the emotional turbulence of undertaking psychoanalytic study and practice and the bumpy course of administration by committee in such a setting. In fact, these are two areas where people expressed the clearest sense that change had occurred or needed to occur. Allen: "We learned a lot about the interns' process, their difficulties, how to support them." James: "We got better at utilizing feedback from interns about what needed to be done. We got more sophisticated and smooth at getting the class in and in how to get them going." J. Allen: "It's always highly emotional the first year. I always felt that with stronger administrative structure, it would be easier." Saunders: "[In future] I would want to know who I'm answering to, who's in charge."

The lines of authority for this program never did come into sharp focus. What started

by the CWW and furthered by the PIP. She has been the first contact and the welcoming voice of the PIP for patients, referral sources, volunteers, and prospective interns. In essence she has functioned as a liaison to the community.

Susan DeMattos: Having watched Donna James' internship develop into a rich and enviable training, Susan saw that the internship provided similar rigor and abundance to the new interns. She had been a supervisor in the CWW since 2000 and responded to that experience with gratitude and loyalty. She loved Jeff's notion of "an experiment in generosity." She became a mentor during the second class, and then joined operations as "Mentor Mom," or head of the mentors. While her title indicated that she was a resource person for the mentors, she also brought to committee meetings her experience with group process.

Jeff Eaton: Originated the Alliance Community Psychotherapy Clinic (ACPC), the "experiment in generosity" in which members give hours as treatment providers

and consultants to provide low fee open-ended treatment. The ACPC has run the CWW, which will continue, and the PIP. Jeff chaired the ad hoc committee that developed ACPC, and has served as a therapist and consultant in the CWW. After helping develop the PIP, he served on operations, chaired the steering committee, and taught the didactic course for the interns for four years.

Donna James: After fifteen-plus years of clinical experience, she put together a pre-doctoral internship in psychoanalytic psychotherapy with patients from the CWW and supervision from David Allen. Her success showed that the ACPC could provide internship functions and helped convince people such a project could work. In her own internship she served on the committee that ran the ACPC, then stayed on the steering committee as it began to oversee the creation of the internship program. For PIP she led and co-led group supervision, served on operations, and was one of the primary supervisors. She organized each year's graduation ceremonies.

as basically a committee of the whole needed to be differentiated along the way. In the end the Alliance board presided over the steering committee, which oversaw the operations committees for the PIP and the Clinic Without Walls (CWW). This final form took a couple of years to gel and still had distinct limitations. The steering committee members functioned "collectively as a volunteer executive director" (Eaton, September 2006), however steering did not have the proximity to the staff to evaluate performance. It was unclear whether having responsibility for something equated to having the authority to change or implement it. Communication, ownership of the power to accomplish things, and assessment of progress can be complicated when authority and responsibility do not converge. Decisions can feel surprising or hard to come by or both. The clarity of a mutually agreed upon organizational hierarchy could have been a great help when those in charge of day to day operations disagreed with one another.

With more experience the staff began to recognize what would be required to keep the PIP running and improving. It is only when things are going well enough that you can contemplate the future and realize what will need to change to make that future work. At a minimum the PIP needed donations from the greater Alliance community. And, of course, from the beginning people had donated time,

effort and commitment. Eaton: "This has required enormous good will and sacrifice by a lot of people ... We did not anticipate the degree of challenge for everybody, the interns and the staff." The vision with which they began was sustaining. James: "There has always been good will for the interns. No one has flagged in that."

This may be the place to acknowledge the many, many unpaid hours, late nights and long meetings put in by everyone to whom we spoke. Even people paid for hours of supervision or other work gave many more than were compensated because they so believed in the project. James: "It is a miraculous thing to bring ideas into the world." And sometimes those miracles require a great deal of work.

Such a miracle did happen. However, much more than money would need to be in place to make the internship secure. Several founders mentioned the desirability of a separate legal and administrative structure that would allow the PIP to function more as a business than the Alliance does now. Allen: "It needs a different kind of board with therapists and community people. It should have its own separate 501(c)(3)." Eaton: "It needs a board with accountants, lawyers and so forth, not just clinicians, to make the next step. It is enormously important, but not viable as an all-volunteer effort





... For a paid executive director, someone who was a clinician or an administrator and fundraiser, it would have taken another \$150 thousand.”

The tension between the developing needs of the PIP and the culture of the Alliance has been generally acknowledged. James: “The Alliance is not a money organization. It’s a volunteer organization.” Allen: “It would need stronger leadership ... an executive director.” Eaton: “The Alliance atmosphere is very open to innovative ideas. The drawback to that is that since they want to be open, they don’t want to be tied down to large, multi-year commitments...If someone presented [the PIP] to me as a board member today, I’d say no. The board would have to hire an administrative director...and be interested in evaluating staff. We still do not have ways to assess staff.” J. Allen: “The Alliance culture is a culture of volunteer therapists. [The PIP] has to be a business where you know who’s in charge. That doesn’t exist for the PIP.”

The PIP faced an increasing need to differentiate from its parent organization. Its staff members were depleted by the rigors and upheavals of the program’s startup. There were neither new master clinicians coming forward eager to share the large burden of volunteer work, nor donors able to secure the internship’s financial future. In June of 2007 a letter to all its members went out on ACPC

stationary announcing the decision not to take another class and to close the internship when the third graduated in 2008. It was signed by then Alliance President Terry Hanson, President-Elect Marcia Robbins, and Steering Committee Chair Jeffrey Eaton. Many more, board members, consultants, and others had had a part in reaching that difficult decision.

The staff and founders agree that the internship’s four years and thirteen graduates have provided deep satisfactions. J. Allen: “The program itself was wonderful, valuable ... It was beginning to be something strong, valuable and connected.” Saunders: “What we have done, despite the problems, is remarkable.” James: “The patients, we’ve been able to serve them well. We served thirteen people [the interns] well.” DeMattos: “Working with people with different psychoanalytic sensibilities, when we were talking and connecting, it was wonderful.” Eaton: “The clinical story is uncontroversial—it’s a win/win/win [for patients/interns/supervisors].” Allen: “It’s career-capping, the best thing I’ve ever done professionally.”

A sports analogy may be apropos. When an athlete retires before a season of diminished performance, people lament and wonder if the person went too soon, and the player must mourn the unplayed future games. The PIP has ended before true exhaustion of its staff, before consequential clinical or training missteps, and while

Tom Saunders: Served as clinical director of ACPC from its beginning in 1996, and when the time demands expanded in 2001, continued as part-time paid clinical director. The idea for the PIP grew out of Tom’s experiences with the child study group and his own internship at Mt. Zion Hospital. He wanted to provide in the Northwest a structure of didactics and supervision similar to that which he had valued in his training. He helped to plan the PIP and was clinical director until restructuring in 2006. He continued on operations as group and individual supervisor, and keeper of the vision.

those who loved it felt it still had life. By its end it had provided some ten thousand hours of low cost therapy to people in the community who would not otherwise have gotten such service. One way to consider that would be to give it a standard value. At one hundred dollars an hour, the PIP has provided a million dollars worth of treatment. The final contradiction is that we both feel loss and have much to celebrate.

Postgraduate Internship Program timeline

- 2000 – Donna James approached the ACPC as a potential site for her pre-doctoral internship. David Allen became her official supervisor.
- Spring 2003 – A subcommittee formed to explore the feasibility of creating a postgraduate internship. Janet Allen was hired part-time to help with clinic administration and other projects.
- Winter 2004 – Jeff Eaton reported in the *Forum* that the ACPC was “actively developing” the program that will be the internship.
- Fall 2004 – Donna James reported in the *Forum* that the internship began with its first class.
- Fall 2005 – Donna James reported that with year one completed, the second group of interns had been accepted. Jeff Eaton documented the differentiation of day-to-day oversight (operations) from longer term planning (steering) and announcing a fund drive to raise revenue so that some positions could be paid.
- Spring 2006 – Eaton reported progress in fundraising, called for applicants to the next class of interns.
- Summer 2006 – PIP was restructured to do away with clinical director and insert steering committee as executive director.
- Fall 2006 – The third year of interns began training.
- Winter 2007 – A committee consisting of Eaton, President Terry Hanson, President-Elect Marcia Robbins, and Past President Ginger Harstad Glawe met with organizational consultant Cecil Bell to address some emergent issues.
- June 1, 2007 – Terry Hanson, Alliance president; Marcia Robbins, president-elect; and Jeffrey Eaton, steering committee chair, announced the decision to close the PIP in a letter.
- August 2008 – The third and final class of interns graduated.

An evening lecture by Karen Maroda

“Mutuality and Collaboration: Repeating and Changing the Past”

Karen Maroda, author of *The Power of Countertransference and Seduction, Surrender and Transformation: Emotional Engagement in the Analytic Process*, will be speaking on October 10 from 7 to 9 p.m. at Mars Hill College. In this presentation, taken from her forthcoming book on interactive psychotherapy, she continues to extend the notion of mutuality across the therapeutic process. She focuses not only on identifying longstanding patterns of client behavior, both positive and negative, but also those of the therapist. Seeing the therapeutic relationship as an ever-changing, organic system of mutual influence, Dr. Maroda challenges therapists to be more self-aware regarding the ongoing influence of their own pre-established ways of being. Although she does not deny the inevitable unique aspects of every therapeutic relationship, she illustrates how clients long for both recognition and help with their own maladaptive patterns of responding. And she explains how therapists need to be willing and able to acknowledge the same in themselves.

Dr. Maroda is a psychologist and psychoanalyst in private practice in Milwaukee, Wisconsin. She is also assistant professor of psychiatry, Medical College of Wisconsin. She is internationally known for her work in relational psychoanalysis and has written numerous journal articles, book chapters, and book reviews. Her third book, *Interactive Psychodynamic Techniques*, will be published by Guilford Press in 2009.

Dr. Maroda’s presentation is sponsored jointly by Mars Hill College and the Alliance. Preregistration cost for attending is \$35; \$40 at the door. For more information, please contact Robin Westby at 206-467-2611.



Panksepp to speak on the neuroscience of primary emotionality

Jaak Panksepp

"The Neuroscience of Primary-
Process Emotionality: Implications for
Psychiatry and Affective Well-Being"

Saturday, October 11, 2008,
8:30 a.m. – 4:00 p.m.

Swedish Hospital Providence Campus
Auditorium, Seattle

\$130/120 Alliance members; \$65
students (after October 1: \$140/130
members; \$75 students)

Lunch vouchers provided with
registration

Jaak Panksepp is a leading researcher in the recently emerging field of affective neuroscience. His work on the neuroanatomical and neurochemical mechanisms of emotional behaviors contributes to the exciting developments of somatic psychotherapy which has proven to be especially helpful to trauma related issues.

Affective neuroscience provides a new vision for psychiatry and psychotherapy and potential new ways to conceptualize and treat emotional problems and psychiatric disorders, with the focus being on lived symptoms as opposed to conceptual syndromes.

There are a limited number of genes in the mammalian genome — 22,000 as contrasted with the 100,000 estimated only a decade ago. These genes program a few basic evolutionary tools into mammalian brains for the construction of higher social brains. The various basic emotional tools include:

- The desire to engage with the world (*seeking*).
- Anger at being thwarted (*rage*).
- Trepidation toward the scary things of the world (*fear*).
- Eventually blossoming sexuality (*lust*).
- The desire to nurture the young (*care*).
- The awful feeling of being alone, without social support (*panic*).

- And most importantly for the active construction of the social brain is joyous enthusiasm to engage *playfully* with others.

The italicized words highlight that these are core feelings that emerge from primitive but complex sub-neocortical brain networks.

Subcortical *play* dramatically controls gene-expressions in the cortex and is the basis for the possibility of change through psychotherapy. An understanding of these systems can enhance and develop techniques for the practicing psychiatrist and psychotherapist.

Morning program

- "Archaeology of Mind: The Evolutionary Foundations of Basic Mammalian Emotions, and Implications for Clinical Work and Human Understanding."
- "The Social Emotional Brain: Separation Distress, Social Bonding, Autism and Addictive Urges"

Afternoon program

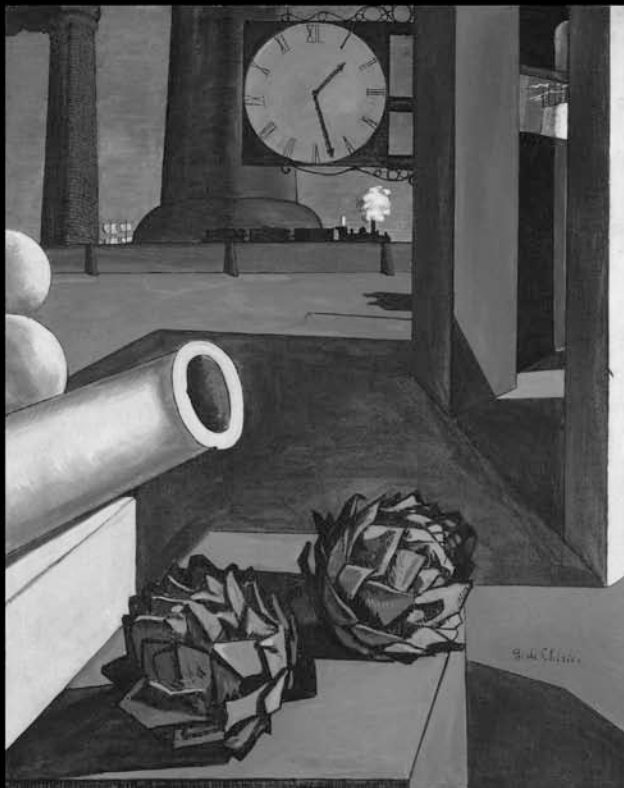
- "The *Playful* Brain: How Better Developmental Construction of the Social Brain May Reduce ADHD and Future Depression"
- "The Neuroscience of the *Self* and Self-related Information Processing: Toward a Psychobiology of the Soul"

FROM THE PUBLICATIONS COMMITTEE

Come celebrate with Bob Bergman

EDITORS: REBECCA MEREDITH, BEV OSBAND, AND CAROL POOLE

Mindless Psychoanalysis, Selfless Self Psychology *and Further Explorations*



Robert L. Bergman

Save the date!

Book release party

Robert Bergman's

Mindless Psychoanalysis, Selfless

Self Psychology and Further Explorations

Thursday, November 20, 2008

7 – 9 pm

Richard Hugo House

1634 Eleventh Avenue

Seattle

See page 43 for an excerpt
from *Mindless Psychoanalysis,*
Selfless Self Psychology
and Further Explorations

When the Northwest Alliance for Psychoanalytic Study decided to venture into book publishing as a way of introducing some of our community's distinctive thinkers to a larger readership, we didn't have to look far for our first title. Robert Bergman's essays have been a vibrant and thought-provoking part of the Alliance's annual conference for many years. His yearly presentations are deceptively simple and jargon-free, but theoretically sophisticated explorations of topics that matter to students of the human psyche and the healing arts. This collection of essays will, we hope, please those who are familiar with Bergman's work but have not yet had an opportunity to collect it in written form, and will allow others to experience a new perspective on complex psychoanalytic topics, such as the interplay of subjective and interpersonal worlds in everyday life.

In creating these essays, Bergman is informed by his career as a psychiatrist and professor at the Universities of Washington and New Mexico, his years as the chief of Mental Health Programs in the Indian Health Services, and his long and ongoing career as a supervising and training analyst at Seattle Psychoanalytic Society and Institute. He also draws on his poet's heart, creating lyrical, and moving reflections on his connection to his profession and to those whom he credits with having taught him not simply theory, but its human underpinnings.

Often deeply personal, these essays reflect a life of hard work and stringent study with a remarkable cadre of teachers. Bergman's mentors include such notable and diverse figures as Heinz Kohut, Bruno Bettelheim, and the Navajo medicine men who adopted him as a brother and fellow healer. He also credits, with gratitude and respect, his "customers," those who have come to him for help over the years and who, he reminds us, give as well as receive in the therapeutic relationship.

Bergman writes the way he speaks, plainly and with questions whose answers sometimes go unknown, but are nonetheless approached with curiosity and, to use a word he favors, enthusiasm. In this volume, Bergman offers a brief introductory note for each paper on how he came to write it.

We at the Alliance hope that this collection of essays gives its readers what Bergman's writings have given us: the pleasure of encountering a truly original and down-to-earth synthesis of psychoanalytic thought and practice.

From Dan Jacobs:

Written with humor and grace, *Mindless Psychoanalysis, Selfless Self Psychology and Further Explorations*, takes us on a remarkable exploration of the author's own psyche as well as our own. Using the tools of psychoanalysis, Bergman skillfully dissects his clinical experiences and relates them to the history of psychoanalysis as well as to its current state. Dr. Bergman's book is a gift, a deep meditation about our field and, more importantly, about the mysteries of being human.

From Alexandra M. Harrison:

Although much of what Bergman says sounds radical, this book is essentially an integration of old and new, and it is in this integration—as well as in its masterful writing and compelling clinical and autobiographical illustrations—that it derives its strength. *Mindless Psychoanalysis, Selfless Self Psychology and Further Explorations* will be inspiring and illuminating to the experienced psychoanalyst as well as to the beginning clinician.

From Margaret Crastnopol:

Robert Bergman has given us a highly engaging, lucid, and erudite account of that endlessly complex phenomenon, psychoanalytic process. The author's matter-of-fact, highly accessible manner belies the sophistication of his thinking and encourages the reader of whatever level of experience to delve more deeply into the mysteries of the field. This book does not shy away from the thorniest of issues, including the analyst's own subjective experience of his or her anxieties, questions, and limitations. This contemporary perspective on psychoanalysis comes through as eminently fair and humane, self-questioning, and above all, scrupulously reflective about psychoanalysis' theories, values, and practice.

Tough customers

BOB BERGMAN

We include this excerpt from Bob Bergman's new book to whet your appetite. To purchase your own copy, join us at the book release party on November 20, 7 – 9pm, at the Hugo House, 1634 11th Ave, in Seattle.

Tough customers, unpleasant people who are impossible to please, make angry scenes and are dangerous sometimes, turn up almost everywhere. Any business that offers products or services has its share, and people who have to wait on them understandably resent them. A few years ago, most garages and service stations seemed to have posted a copy of a cartoon showing a service manager asking if having all the mechanics shot would be an adequate solution to a client's problem.

Most of us in the psychoanalysis/psychotherapy business have even more reason to resent tough customers than do people in other lines of work. For one thing, we ourselves have generally been easy customers. Those of us who have had training analyses, especially those of us who had them a long time ago when training analysts used to report on our suitability to continue our candidacy, had powerful reasons to be agreeable. So it hardly seems fair when we have to work for ingrates and complainers. Most of us have war stories about people who were particularly hard to get along with, who yelled at us, wouldn't leave the office, called all the time or defamed us publicly. A friend had a patient who, more than once, made harmless but spectacular leaps into the Chicago River after announcing his name and her dissatisfaction with him to the crowds that were present.

Opinions differ about how best to work with such people. A popular answer to the question is "don't." That solution becomes possible only with

time and success. Most of us at the beginning of our careers can't be that choosy. The result is a bit like the old joke about the dude and the sadistic cowboy: "Never rode before? This horse will be just right; he's never been rid before."

But in my opinion tough customers can be good ones. Not only do they spend lots of time and money in our business establishments, but in the long run they are often rewarding to work with because they are interesting, teach us a lot, and make big favorable changes in the way they live. It seems to me that emotional expressiveness is a favorable prognostic sign. People who seem to be exploding all over the place are much more accessible, even if they seem more angry and forbidding, than those who are invariably quiet and agreeable. Even determinedly mute people can be quite dramatic and communicative in their silence and, in the long run, much easier to be with than one of my early analysands was. He was so agreeable that on several occasions he apologized for being compliant again.

It's easy for me to look on the bright side in the abstract, but not so easy to put up with the real thing. About twenty years ago, when I was psychiatry residency director at the University of New Mexico, I did a therapy demonstration seminar in which I saw a patient weekly in the presence of the residents. Before beginning, I asked the chief resident to find me a nice, verbal, mildly neurotic person. For his own reasons he provided an exceedingly angry, impulsive young woman who was

living a chaotic and self-destructive life. Many of the hours were devoted to her addressing the residents on the subject of my horrible failures as her therapist. Often she demanded to know how they could just sit there and allow me to be so terrible to her, and several times at the ends of hours she pulled the fire alarm on her way out of the building.

Putting up with all the bitter complaints is one of the biggest problems for one of us involved in such a relationship. I think that some of the most natural, and therefore usual, means of coping with the other person's dissatisfaction are mistakes that do immediate harm and generate vicious circles that perpetuate and intensify the trouble. The simplest method is labeling. People who are making us anxious, ashamed and guilty can be explained away by diagnosis. They are doing objectionable things because they are the kind of people that do those things. They are borderline, narcissistic, entitled and so on. That would seem to explain it, and it also can rally the support—real or imagined—of our colleagues. Too bad we have to put up with this bad behavior, but it isn't our fault because all people of this category act like this.

A somewhat more sophisticated and individualized method is to employ the concept of negative transference. Almost all difficult people had difficult childhoods. If, in a first hour, we hear a history that includes mistreatment by one or both parents, most of us will predict that sooner or later the person will be angry with us, and usually the prediction will come true. The success of the prediction may encourage us to explain the anger

as originating in the past and not, as the other person believes, in our present behavior. If the other person is provided with that explanation, he or she is likely to become even angrier, which may lead to further explanation based on transference. The person will probably get even madder, leading to more interpretation that blames the figures of the past and exonerates the therapist, which leads to further increases in anger, and so on.

I am oversimplifying. Skillful therapists may seldom trigger the vicious circle or may escape from it by acknowledging their contribution to the situation even as they are thinking that the real cause is in the past. It seems to me that the critical variable is the therapist's defensiveness. To whatever extent an interpretation is made defensively, or for that matter to whatever extent we do anything defensively, we are asking for trouble. When I was a counselor at the Orthogenic School, Bruno Bettelheim often said, "I only know three things, and one of them is that the customer is always right. If I saw things the way he does, I'd act exactly the same way. I forget the other two things." He claimed that this was the central lesson of the work of Sigmund Freud.

When put upon by unreasonable people we are all too likely to think that psychoanalysis teaches that the customer is always wrong. Unconscious frustration, anger and fantasies from early life are causing her or him to distort our helpfulness and the necessary rules of our method so as to see them as sadistic. I believe that it is common for therapists to dismiss complaints by saying that they are a result of the negative transference, and to put the dismissal as crudely and as simply as that. Even if we recognize that we may indeed have

done something hurtful, there are still a number of ways that we can prove that the customer is wrong; for example, projective identification: you made me do it.

Unfortunately, I am an unusually sleepy person and have considerable experience with hurting people by drifting off while they are speaking to me (I rarely fall asleep while I am speaking). Early in my career I tried to claim that I wasn't really asleep. That claim got me into more trouble than ever. I don't think I ever blamed the other person, but more than a handful of times I have heard accounts of colleagues who did, and it never seems to have gone over very well.

Another common form of defensiveness depends on talking about the other person's view of things as though it weren't true. I think therapists often say something like "you feel that I wasn't understanding you" when they know perfectly well that they weren't. Frank acknowledgement always works best, but what makes it so hard is that some people are unreasonable and their reactions extreme. Since I am claiming that explaining their unreasonableness as negative transference is a mistake, I need to suggest a less defensive, more helpful explanation.

I think that the basic shift needed is from thinking of them as recreating the past to thinking of them as unusually vulnerable to re-experiencing the past; that is, some action of ours is damaging them in the same way that they have been damaged often before. A good-enough inherited temperament and a good-enough childhood equip one with some resilience in responding to shame, but many people not only are undone by shame

but are made ashamed by almost any interpersonal event. I think that this proneness to disastrous shame can be understood better in intersubjective and constructivist terms than from older points of view. In addition, the mindless point of view I prefer is somewhat protective against making the mistakes that cause one's customers horrible shame.

According to my mindless version of life, each time people encounter each other they negotiate a version of reality that they can more or less agree on. People start with their own ideas of what their relationship is to particular others, and, if people are well-acquainted and attached to each other, the negotiations will be easy and pleasing. For example, this evening (from my standpoint as I am writing this) I intend to visit my daughter's family. It is a part of my reality I don't usually think about, that she, her husband and her little daughter are people I like to be with, and vice versa. When I get there, a profusion of small signs will—I expect—be exchanged as confirmation of our pleasure in seeing each other. The negotiation of shared reality will be easy with the adults but may be a little trickier with my 19-month-old grandchild. If something should go wrong; for example if it's the wrong night, and they're not expecting us to come to supper and are surprised and dismayed by our showing up hungry, I will be embarrassed. It won't be a big problem for me or any of us, I think. We will reassure each other verbally, and especially nonverbally, that we do like to be together and that we'll figure out something to get us all fed. It would be a much bigger problem if I were planning to visit people I didn't know so well and mistakenly believed

liked me enough that they would be glad to see me appear on their doorstep. The pain of that situation leads to the custom of telephoning first.

Even though I am embarrassed quite often, painfully ashamed occasionally, and once in a while humiliated, I usually am not shattered by the experience. From the beginning of my life, and most importantly then, I have felt welcome most places I've been. It's like having money in the bank. If I'm proved wrong in my belief about my connection to one person or another, I have resources to fall back on. Memories, whether summoned up consciously or not, reassure me that on such occasions I can sometimes win someone over, and that, failing that, there are other people I can think of who are glad to be connected to me.

Since I am someone who fears loss of relationship more than loss of stature (or anatomical parts) I am likely to become a little downcast—tending more to blame my deficiencies for the failure than the other person's malice or other faults. Accordingly, I will try to stay connected and fix things. On the other hand if I am anxious and disoriented, for example, if I am in a foreign country where I don't speak the language, I am likely to become suspicious, ready to believe that people are envious and eager to reduce me in some way. People who fear loss of stature (or organs) more than they do loss of connections to others regularly blame interpersonal failures on others and withdraw. They would rather be alone than reduced.

Many tough customers don't have the kind of resources in their past that I do. In fact, many have been unwelcome in their own families, schools, potential play groups, the army, work and on and on. People who were

able to find a foothold somewhere, especially among other children, are often worse than tough customers—they become delinquents. Banding together, and proving to themselves that the adults whose relationship they long for secretly are actually corrupt, weak and contemptible, they can form gangs, fascist political parties and other menaces that may cause us trouble but rarely do in our professional capacities, though I did once have the interesting experience of treating a Nazi. (He actually wasn't too tough since he surprisingly formed an idealizing transference, which was helpful to his symptoms and was based on his discovery that it wasn't the actual Jews like me who were responsible for all the world's problems, but rather the fake Jews like George Bush Sr.)

Most of the people I am trying to describe have had little social success, and though they can be terrible pains to have around are not criminal or dangerous—except to themselves. Some people were pretty much unwelcome no matter what. I have known someone whose psychotic mother considered the daughter to be a real menace to the mother's well-being or even continued existence, and whose selfish father didn't care to incur the pain and inconvenience of opposing the harridan he was married to. (A friend glancing at a magazine cover read it as being a copy of *Worst Parents*, a publication she points out that most of us therapists could contribute to.)

As miserable as are the lives of people who were purely unwanted, they are usually not terribly hard on us therapists. Tougher customers are often people who were unwelcome

as independent beings but were more or less intensively used by parents or other so-called caregivers.

The uses of children vary but include sexual abuse and less obviously wrongful treatment. Probably all persons have served to some degree as a part of their parents' positive identities. (Millions of Christmas letters with glowing accounts of children's achievements are annual evidence of the sort of thing I mean.) Two dimensions make this parental failure more or less serious: its pervasiveness and its rigidity. If parents respond favorably only to what their idea of their children should be in order to be a prop to their sense of themselves, and especially if they write and direct the dramas in which the children appear, one of the likely outcomes is a false self, a personality, no matter how successful and polished, that nevertheless is desperate and hollow.

I think this type is what Edwin Arlington Robinson had in mind in writing *Richard Cory*. Cory as an analyst would have been challenging, but he probably wouldn't have raised hell with his analyst. That kind of thing is more likely to arise if the false self the parents sponsor is not good enough to succeed out in the world. Often parents who feel the need to dominate their children in this way are pretty hollow and unsuccessful themselves and not with it enough to provide a script that works outside of the family.

The trouble with much false self functioning is its woodenness. It is not centered in the performers' basic impulses or senses of themselves, but in their ideas of what others want or will respond to. Its motive is the wish to belong, to be accepted, to be

socially effective. Within the family where this kind of behavior originates it is often simple and ritualized. Cue and response; e.g., "I love you." "I love you too, Mommy" are unvarying, unvariable and therefore coercive.

As I've said previously, it gives rise to what I like to jokingly call *false-self-objects*: concretely used symbols that are intended to coerce proper reactions. One stands up and salutes the flag. We are abashed if told that our clinical conduct was not analytic. The most satisfying and genuine interactions are the opposite of these stylized ones. We express what spontaneously occurs to us in reaction to each other's real characteristics out of a confidence that we will be understood and accepted.

When life is going that way, social space expands to accommodate multiple meanings and emotions that are both strongly felt and playful. Skilled falsity can mimic this kind of interaction; e.g. conmen and seducers, but many people feel so empty and without real resource that they are stuck in their social behavior with relatively crude models of each participant. "You, a psychotherapist, are here to relieve my suffering. Here it is. Relieve it."

That example is not a real one but a translation into simple and direct words of what is conveyed by a display of crudely manipulated symbols. Lots of people who come to see us have had enough previous clinical experience that they have learned a vocabulary of mental health clichés, and not uncommonly they include some previous experience with a therapist who was highly satisfactory, somehow no longer available and far superior to us. Sometimes we are faced with the choice to respond as we are prompted to or to be regarded as a failure. But I am getting ahead of myself.

The use of false relating is intended to protect people against terrible shame and its shattering effects. They are susceptible to such experiences because of a lack of a reserve of past good experience and an excess of bad. Their lives not only have left them pessimistic about what is likely to happen anytime they meet someone, but often with no coherent version of themselves, real or false.

This incoherence seems to be particularly prevalent among those who were used most abusively as children. Sexual abuse, and especially incestuous sexual abuse, cannot be incorporated into a general scheme of family relations that can be felt or represented as real membership in a good family. To some extent the abuse can be represented between the participants as conferring a special connection, but it is not one that can be made a part of life as a whole.

The results, which cover a big range, include people who use some sexually provocative or merely available persona as a partial false self. Men and women in the sex industry, many of whom have this history, may know how to use sexual contact as a way of producing a semblance of relationship and a livelihood, but I believe they are often quite clear that their performances are feigned and empty except for contempt for the others and/or themselves. Other people with this experience may have no way to incorporate sexuality into any version of themselves, even a false version. That lack of integration leads to their getting into spots in their lives that are baffling. The situation calls for something that is not in any way part of themselves, and they are thrown into despair and panic.

Severe anxiety is the principal moving force in the lives of many angry people. The anxiety itself is generated as a result of the expectation of shame or humiliation, events that are likely because of limited resources. Central or true ambitions and ideals are repressed much of the time for protection. Since toddlerhood, if not infancy, those precious senses of self have had to be protected against the unresponsiveness or attacks of parents or others. Not even the persons themselves are allowed to know of these grandiose fantasies, because they are threatened with destruction merely by the thoughts being thought. Because they have been repressed and therefore not modified by the ordinary wearing down that infantile grandiosity is subjected to in the course of a good-enough growing up, they are unreasonably and unrealizably wonderful. Since thought is trial action, letting them into consciousness exposes them to failing the trial unless the person is psychotic enough to create a pretty much idiosyncratic world.

Completely psychotic people have mostly given up on the process of negotiating shared reality with anyone else. They are therefore protected against further shattering by having someone invalidate their version of who they are and how people relate to them. In actuality the cost of that situation is so horrible that no one would choose it unless it was the only possible way to stave off complete disintegration, but the idea of being immune from invalidation is appealing enough that the fantasy of carefree psychosis is popular except with those of us who happen to have some experience, vicarious or personal, of being psychotic. In our practices we rarely meet completely psychotic

people nowadays, but we see plenty of people who are psychotic enough that they spend an inordinate amount of time and energy on their own versions of themselves and others, and too little time and energy on seeing if they are right. One of the results of this way of life is that they have ideas that are so idiosyncratic as to be not only unlikely to be shared by others, but even unlikely to be understood by others.

People come to us with these brittle expectations, and we fail them. They often have in mind a quite precise idea of what we will do in response to their doing or saying a certain thing. It may be obvious to them that the response they want is what we should do, but it may be quite mysterious to us. If we don't figure it out and do the right thing there will be trouble. At first meeting it may not be too bad, because we may not have become essential players in their dramas. The customers may give us the benefit of the doubt because we don't know each other yet. Often, of course, the result is the customers' taking their business elsewhere. Failures that come later are worse. If the people are still enacting the various parts that make up a false self there is a slight protective effect. Failure is almost invariably experienced as real or threatened abandonment, but what is being rejected is not a truly precious sense of self. Often they have a conviction that they have a right to a correct response, and so they can protect themselves from the full force of shame by being irate.

Under the circumstances we are likely to think or say the words 'narcissistic' or 'entitled.' What we may not realize is that the grandiosity being enacted is not connected to an experience of being grand or at all worthwhile.

Many years ago, and in another state, I had a very tough customer who had many angry complaints about me. She had come to see me in the small town where, one day a week, I was the psychiatrist, but soon she moved to the psychiatric ward at my home base. Occasionally I took her with me on my weekly trips so that she could visit her family. Returning unexpectedly late one evening, she had missed any chance for supper at the hospital. She complained angrily, but when I answered by inviting her to join me and my family for a meal she was speechless for several seconds and then said, "But I'm the bitch of all time."

Before my invitation she had been thoroughly in character as an afflicted patient, whose suffering should automatically command at least the other person's anxiety and guilt, but the idea of being an ordinary guest of my family startled her out of her usual frame of reference and led to her frank statement of how devoid of real social standing she felt. She believed that as her doctor I owed her a lot, but as a person I owed her nothing and could be expected to be repelled by her.

The most disastrous failures are those when something that is part of a genuinely felt part of a person is invalidated. This kind of thing is most likely fairly late in therapy when the false self is occasionally or frequently abandoned.