



### Letter from the President



**“There is no use trying,” said Alice. “One can’t believe impossible things.” “I daresay you haven’t had much practice,” said the**

**Queen. “When I was your age, I always did it for half an hour a day. Why, sometimes I’ve believed as many as six impossible things before breakfast.” Lewis Carroll**

Like the Queen in Alice in Wonderland, I believe in believing in the impossible. To believe in the impossible we must use our imagination and allow ourselves to play. Like the child who sees a block as a car, or a house, or a bridge, our organization can be anything we want it to become. And one of the best things about being President of NSGP is the talented and creative people I get to meet and work with. Our members are an extraordinary bunch who dedicate hours of their time so that we can offer events that are intellectually stimulating, emotionally engaging, and fun.

We are fortunate that NSGP is doing well—we have more members than we did last year, a high percentage of our members are actively involved in governance, and we are financially sound. Given the strength of our organization, we now have an opportunity to imagine further possibilities. I encourage each of you to think about what you would like us to be or to become over the next five years. What do we do that you like? What is missing? How can we improve what we are and who we serve?

We already have some members who are using their imagination to create exciting events for us this year. Bob Weber has invited Richard Billow to present “Passion in Group Therapy: Loving, Hating, and Knowing,” to us in a half-day or full-day event on October 30.

Sandy Houde and Deb Filiurin have organized a networking event sponsored by the Referral Service so that members can meet each other and share information about the groups they run. It will be held from 6-8 PM at the home of Scott Rutan on October 24th. Pam Enders has imagined a listserve that will be a “virtual living room” for our members to visit when they please. She says, “Just like a ‘real’ living room, we hope it will become a place for you to chat, to inquire, to network, to provide information, and to share ideas.” I thank them for their creative efforts and encourage others to imagine other possibilities. Write to me at:

*[motherwell@post.harvard.edu](mailto:motherwell@post.harvard.edu)*  
or call me at my office at 617-738-7660 x2 with your suggestions.

I also want to thank Joyce Shields for her tremendous leadership over the past two years. She served with grace, style, and great warmth. Scott Rutan, Oona Metz, and Pamela Enders rotated off the Board in June. I will miss their humor, good spirit, and creativity (especially the braided wig! *You guess who wore it!*). I welcome Suze Prudent, Polly Francisco, and Marsha Vannicelli to the Board. Also, thank you to Barbara Keezell who acted as the liason between the Board and the Executive Committee for the past year; to Eva Harris, who rotated off the Training Committee and to Bob Weber, who rotated on as co-chair with Deb Carmichael; to Kelley Bothe for her fourth year as co-chair of the Conference Committee and to Katherine Wenger for stepping up to the plate; to Kathy Hubert who co-chaired Membership; and to all of you who work hard on our committees to make sure that the organization works smoothly, to those who present at the Breakfast Club, who teach our students in the Training Program, who run the Conference, who act as Discussants for the Demo group, who work on our Task

Forces and who otherwise are the backbone of this organization. I am deeply grateful for your time and energy, and hope I can serve you equally well.

*Lise Motherwell, President, NSGP*



Jim Leone, Scott Reinhardt, Sara Emerson & Barbara Keezell

### Spring Retreat: A continuing tradition

*...see more on Page 12*

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**The goals of this newsletter are two-fold:**

- To promote the objectives of the Northeastern Society for Group Psychotherapy, an affiliate of the American Group Psychotherapy Association.
- To be a forum for the exchange of ideas and information among members.

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Messages can be left at the office anytime, and will be answered daily.

Monday-Friday 9 am to 5 pm

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**Letter from the Editor****Joe Shay, Ph.D., CGP**

I hate the Yankees—or at least I say that a lot. More about this later.

The national election is upon us and, if you will allow me some oversimplification, the country seems to be divided into two groups of almost exactly equal size. Except for the rare undecided, readers of this column are in one of these two groups. And some members of each of these groups hate. “I hate George Bush.” “I hate John Kerry.” “I can’t stand people who are so uninformed that they believe [fill in the blank].”

Don’t most of you believe that what you believe is not just a belief but actually correct? That’s often how I feel.

The problem with how I feel, however, and perhaps you as well, is that my conviction derives from the sense that I actually know *better* than the other, that members of the other group have been misled by either propaganda or prejudice or personal predilections rather than guided by wisdom—like me.

While I’m pretty sure I’m right in my views, I have to accept that the other side is *equally sure*. And some of those folks actually seem like thinking folks. Not that this shakes my views. But, as a group therapist, it does give me pause.

As a group therapist, I am supposed to understand that certain affects, attitudes, beliefs, and self-perceptions are so uncomfortable for me to recognize in myself that I can conveniently—if unconsciously—recognize, or even recruit, them in others and then attack the others for possessing them. We even have a fancy name for this, as you know. And when I allow myself, in the quiet of my mind, to consider some of the what the *other* is saying, it worries me a little that some of it either makes sense to me, or I really get why it makes sense to the other even if it is genuinely not what I think or feel.

It’s not just the election I’m thinking about here. More globally, I have certain beliefs about *other* groups out there: Israel

and Palestine are great locations for triggering polarized feelings and beliefs; so are Iraq and Iran; so are Fox and CNN, for that matter.

Remember that question of several years ago, “why do they hate us?” They may have been wondering why I have hated them.

While I like to think of myself as thoughtful, informed, compassionate, and the like, don’t they as well?

And could I really, if pressed to do so, defend the position that I am simply correct, even in the face of half the country disagreeing with me, at times vehemently? Wait a minute. But I am correct. I have been thinking about this for a long time. This is not just a philosophical difference between well-meaning groups. If the other side wins, there are real-world effects that can harm people.

What is hard to incorporate into my thinking, however, is that if I prevail, the other side genuinely expects that harm will be done as well. Where did my compassion for them go?

I hate the Yankees. I like hating the Yankees. It gives me a sense of kinship with others like me, a sense of superiority over the inferior *other* different from me, an energy and excitement fueled by the righteousness of my view, and an absolute conviction that the Yankees deserve to be hated. Let me count the ways.

But, I’m sorry to admit, had I been born and raised in New York, I might actually hate the Red Sox, my beloved, long-suffering, Red Sox. Or, given just a slight tweak in my psychological location as I grew up, I might hate that other TV channel, or group, or ideology. I loved the movie “Run, Lola, Run” for just this reason. If answering or not answering a phone can change an entire life path, we may want to reconsider our attachment to the truth, our elevation of our tribe.

Sometimes, I even admire the Yankees.



The New Yorker August 2, 2004

## What Soldiers Remember

With the kind permission of The New Yorker, we are reprinting a Letter to the Editor written by our very own Don Wexler, in response to a Dan Baum piece in the magazine (July 12th & 19) entitled "The Price of Valor."

The purpose of Basic training is to make the recruit dissociate from his civilian identity—his sense of self—to become part of an effective fighting force. The enemy is killed to protect one's comrades. Baum emphasizes the psychological damage that results from killing enemy soldiers and civilians. At the V.A. hospital in Bedford, where I consult, our experience with veterans from past wars indicates that most of those suffering from post-traumatic stress are ashamed of having survived when their comrades were killed. Many are conscious of a wish to have died instead of someone who, perhaps, had a wife and child and thus better deserved to live. In nightmares, veterans return to a particular battle, awakening in a state of panic. We encourage them to acknowledge, through therapy, their feelings of shame, helplessness and rage. The goal is to recognize that one cannot undo the death of others and that the dead will never entirely be left behind, and to grieve. And, with that, to go on with their lives in the here and now.

Donald Wexler  
Associate professor of Psychiatry  
Boston University School of Medicine  
Cambridge, Mass.

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# NSGP Special Event

## Passion in Group Therapy: Loving, Hating, and Knowing

with Richard M. Billow, Ph.D.

Saturday, October 30, 2004

Joining us on Saturday, October 30, 2004 for a special event entitled "Passion in Group Therapy: Loving, Hating and Knowing," will be Richard M. Billow, Ph.D., whose recent book, *Relational Group Psychotherapy: From Basic Assumptions to Passion* (2003), has been welcomed as a major contribution to the group literature.

In this work Dr. Billow:

- integrates cutting edge **relational theory** with group leadership technique
- reveals the deeply personal nature of the **intersubjective process** of group therapy as it affects the group therapist and the other group members
- locates the **group therapist's experience** in the center of the action, thereby, moving away from traditional approaches in group psychotherapy
- places emphasis on the **effect of the therapist' own evolving psychology** on what occurs and what does not occur in group psychotherapy
- builds on **Wilfred Bion's** early theory of group and his later formulations regarding the structure of thought and the role of affect

Dr Billow is a clinical psychologist and psychoanalyst, and an active contributor to the psychoanalytic and group literature. He has been associated with the Gordon Derner Institute of Advanced

Psychological Studies, Adelphi University, New York, since 1968, where he achieved doctorate and postdoctoral certificates in psychoanalysis and individual and group psychotherapy. He is Clinical Professor and Director of the Institute's Postdoctoral Program in Group Psychotherapy as well as running his own private practice in Great Neck, NY.

Dr. Billow's presentation is the fifth such special event sponsored by NSGP, a tradition that began with Patrick B. de Mare's presentation on "The Large Group." This format, a day or two spent focusing on a group-related topic with a renowned author-expert, set the stage for the following events: Jerrold M. Post, M.D., "The Psychology of Political Leader's and Followers" (1996); Edgar H. Schein, Ph.D., "The Application of Group Dynamics in Clinical, Organizational, and Business Settings" (1998); and Rosamund and Benjamin Zander, "The Art of Possibility: A Group Model for Personal and Professional Transformation" (2003).

Robert Weber, Ph.D., CGP, FAGPA

**If you want more information  
about this event contact  
Dr. Robert Weber by phone  
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[robert\\_weber@hms.harvard.edu](mailto:robert_weber@hms.harvard.edu)**



### Honoring Thy Fathers

by Joel Eichler, Ph.D.

It was on May 23rd, 2004, the eve of the first anniversary of my father's death that I was at the NSGP meetings sitting in front of three venerable leaders in the field, musing about the Fifth Commandment given on Mt. Sinai: "Honor thy Father and Mother."

What is the relational ethic of "honor"? My father had been very interested in "ethical" issues and talked with me about them long before I understood what he was talking about. How wonderful it would be to honor our group therapy leaders "in his memory," I thought to myself.

The session began with Scott Rutan's warm and thoughtful introduction. It was obvious that he felt honored and proud to introduce the triumvirate of leaders: Max Day, Norman Neiberg, and Donald Wexler. Their contributions as thinkers and trainers in the group therapy movement made a huge splash in our sea of knowledge about group therapy.

Max Day led off with a compelling story of his life and work. His scholarly style and dignified presence, made his talk very precise and contextually focused. Norman Neiberg, in a spontaneous, emotional narrative similarly told the saga from which his early roots and career derived. In the third position, Donald Wexler shared his biographical narrative with great clarity and focus. Each gave a summary of early family life, the influences of family history, the impact of parents and what influenced the directions that each had pursued.

One of the great rewards for the audience at this wonderful presentation was to experience the stories of these three great men from the "inside-out." The authenticity and candor of each speaker's statements were remarkable. Such honesty is exemplary of the kind of conversation which is so instructive for the growth of the next generations. A warmth and integrity poured out from each presentation. It felt so refreshing and nourishing to bask in the life wisdom of these prestigious men. The "soulful visibility" of these stories seeped into my heart.

I felt that it could not get better than this to witness the openness and integrity of lives lived well in the service of work and family.

It was quite remarkable that the theme of Jewish ethnic, cultural, and intellectual roots was a shared stream in the development of these men. Also there was a shared expression of admiration and awe about the importance of Elvin Semrad in their lives.

This NSGP conference was my first. The encounter with these impressive men at a time of personal reflection on generational honor was a satisfying treat. Oh, to have leaders whose integrity, authenticity, and brilliance can be made so personal and visible to the audience, an inspiration for the future. Max, Norm, and Donald, thanks and long life and health to all of you. While honoring the memory of my father, I was blessed with your stories.



### The Music of the Heart 2004 NSGP Conference Demonstration Group

by Alan Albert, Psy.D., CGP

Mindfulness meditation, in conjunction with psychotherapy, is a graceful combination of eastern and western approaches to psychological well being. It offers techniques for clients to observe and interrupt the cycle of thought patterns that negatively impact their health.

At the recent NSGP Conference at Wellesley College, Dr. Anne Mahoney, from Alberta, Canada, offered a vivid glimpse at what working with mindfulness might look like in working with groups,

Dr. Mahoney began with a brief introduction to mindful reflection including the following questions related to *suffering*, a concept central to Buddhism:

What are the benefits of feeling a particular feeling? What are the disadvantages of feeling it? What is the immediate impact in your body of feeling it? What are the long-term consequences of feeling it? What are the advantages of letting go of feeling it?

Dr. Mahoney then reflected that "the longer we hold on to it [our particular feeling], the likelier it is to recur." Following this, she led the demonstration group of eight volunteers who agreed to join her in the effort to be mindful of their thoughts and experiences as they engaged the group process.

Taking an active role in helping group members listen to the music as well as the words in other members' voices, Dr. Mahoney invited members into a brief meditational space, with eyes closed. She asked members to think of what it was like for them to be in front of the observing audience, and to observe what they think, see, and feel. Then she invited members to return to the group space by opening their eyes. And then, Dr. Mahoney asked members to "speak from the place of that awareness," e.g., "I feel like I'm in a fishbowl" Where are you feeling this? "In my chest." From here, the group process



Donald Wexler, Norman Neiburg, Max Day & Scott Rutan

proceeded, with continued active direction from Dr. Mahoney.

Soon after the group began, there was an important moment in the group when a male member expressed his joy at the sound of a particular female member's voice. He wished she would "keep on talking." This was indeed a great deal of fun, as we then heard these two lovebirds coo and sing to one another, which quickly stimulated other associations in various notes played by other group members throughout the rest of the group. As this observer saw it, most of the group was taken up with this passion between this "king" and "queen" at the center of the group (literally seated in the center of an open semicircle facing the audience) and associated links and connections to other group members' passions and lives.

Arnold Cohen, Ph.D., CGP and Suzanne Cohen, Ed.D., CGP, FAGPA (no relation) serving as group discussants, offered useful and insightful comments about the group process. Arnie Cohen raised the question of how this material could be understood in the context of psychoanalytic work, whether the leader could be less involved yet still effective, and how group-as-a-whole interventions might be better used in contrast to individually-focused work.

Suzanne Cohen suggested that while the past was clearly important in conceptualizing person's problems, "change can only happen in the present." It was a "bottom-up" approach, she suggested, in that feelings in the body had to be noticed and felt before real change could occur in the person. She suggested that the correct order of change occurred in the direction of body then emotion then cognition—rather than the other way around, i.e., cognition then emotion then body. From Dr. Cohen's vantage point, Dr. Mahoney's approach was quite valuable, emphasizing that feelings in the body had to be experienced before a person could truly change.

Dr. Mahoney concluded that "speaking from the heart's center" was the goal of the work for members in this group. She emphasized, as well, that like the members in her groups, "I am a person, too!" and for all of us, growth is about "choice and change."



## Contagion and Containment

by Kim McNamara, LICSW

Although adolescence is a place most of us would rather not re-visit, several of us did so in Oona Metz's workshop on adolescent groups at the NSGP conference last June. Although instructions for the workshop had included asking us to bring a picture of ourselves from adolescence, not only did no one follow this instruction, but the majority of us had not even seen it in the description of the workshop. Picture? What picture? Anxiety about returning to this developmental period was evident early on—as was adolescent acting out! Oona, an experienced adolescent group leader, was completely unfazed by this and presented us with a lot of useful information about contagion and containment in adolescent groups.

The most compelling aspect of the workshop was the experiential component. Oona asked us to recall a difficult time from our own adolescence and then to think about what we had needed at that time, what would have helped. Although the workshop had begun with laughter (and some groaning) at the memories of adolescence, the mood quickly shifted to confusion, shame, and feeling lost, alone, and misunderstood by adults. By the break, the group was clearly feeling depressed—the contagion was evident. Yet, the containment, which started in the sharing of the stories, and which continued as the group discussed what was needed in those times, was also evident. Being listened to, responded to, and understood was as containing in the room as it surely would have been years ago, and as it surely must be for our adolescent group clients. Indeed, for all of our clients, for all of us.

An additional theme was the wish to have had an adult to talk with about the many feelings and confusions of adolescence. It was clear that many of us felt that an adult mentor would have made a great difference in those difficult moments. A comparison could be made to the importance of being mentored in this

organization and how helpful that has been for those of us who are early career group therapists. Being a group therapist is challenging on many levels – from gathering enough clients to start a group to understanding complex situations involving multiple transferences and countertransferences and so much in between. For many of us "adolescent" group therapists the support, teaching and mentorship of senior group colleagues has been invaluable.

Oona reminded us of the basic necessity of containment as people struggle with the anxieties of different aspects of personal and professional development. The potential for containment in a group is considerable and reverberated on many levels for me as a participant in this workshop. Who knows? Maybe next time I'll bring a picture!



### Save the Dates!

#### 24th Annual Northeastern Society for Group Psychotherapy Conference

\* June 17, 18, 19, 2005 \*  
Wellesley College, Wellesley, MA

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# Peer Supervision Groups:

## Members in Search of a Leader, or Leaders in Search of a Member?

By Eleanor Counselman, Ed.D., CGP, FAGPA

On Sunday, March 28, 2004, I had the pleasure of giving a Breakfast Club presentation on peer supervision groups. This topic combines two longstanding interests of mine: psychotherapy supervision and the dynamics of leaderless groups. I based the talk on an article I recently published with Robert Weber, PhD, CGP, FAGPA.\*

I define a Peer Supervision Group (PSG) as a group of four to six psychotherapists who meet regularly to discuss cases and other professional matters. Technically it is a consultation group because members do not have direct supervisory responsibility for each other's cases.

Peer supervision groups offer many advantages, including case consultation, an antidote to the loneliness of private practice, networking and marketing opportunities, and avoidance of burnout. They avoid the authority issues of a hierarchical supervision. For new therapists out of training, a PSG can be a time to “test their wings” without formal supervision. And they don't cost anything!

There may be more opportunities for self-care in a supervision group than individual supervision because of the experience of hearing about others' difficult cases (universality). The therapeutic benefits of peer interactions include continued opportunities for self-appraisal and negotiation of competition and aggression. Important friendships may develop. Also the dynamics of a case may be seen in the group interaction and multiple perspectives during the presentation. However, the issues of power, competition, and exposure (shame) can be negative aspects of a supervision group, and if they are not

managed appropriately, they can lead to member dropout or even failure of the whole group.

The literature on PSG's is sparse but offers several interesting examples. A leaderless group of psychiatrists formed to talk about patients but by the end of the second year had shifted to talking only about the group process and their personal lives. The group became increasingly stuck and adrift and ultimately disbanded. Another group of psychotherapists met to deal with members' feelings of isolation. Despite their wish to connect, members found it hard to talk about competition, affection, or closeness. Then three of the seven members decided to leave and the group disbanded rather than taking in new members. Another PSG had functioned for 14 years, when two members died suddenly. The group did not process the emotional impact of these deaths and subsequently disbanded.

The most positive account was of a PSG that began as peer consultation but deepened over time to include personal sharing and interpersonal processing. Much of the group's development had to do with managing resistance and shame. Three stages of development occurred. First, members experienced discomfort and uncertainty about the group's function. Then they became more willing to risk dropping the “competent therapist” façade but were still unwilling to criticize each other. The third stage was greater intimacy including sharing a wide range of reactions. They stayed with their task and did not become a therapy group, nor did they allow a de facto leader to emerge.

Based on these reports and my own experiences, I have concluded that there are three “signals” of PSG problems:

A permanent shift toward therapy instead of consultation (a “task drift”)

A group's refusal (or inability) to discuss its process

A group's unwillingness to admit new members

I propose the following model for Peer Supervision Groups:

1. Since PSG's are leaderless groups, the tasks of leadership must be shared: adherence to the contract, gatekeeping, boundary management, staying on task, and working with resistance.

*Contract*—like any good group, a successful PSG should have a clear contract, understood by all. Contract violations should not be swept under the rug but talked about (not always easy).

*Gatekeeping*—Most PSG's have four to six members. PSG's must deal with terminations and bringing in new members. The departure of one or two members can jeopardize the survival of the group, and that can create pressure on members to stay, even in they don't want to. Sometimes people need to move on, and it is not necessarily a sign of health if no one ever leaves.

*Staying on task*—The primary task of a PSG is case consultation. Groups that end up being peer therapy groups have lost sight of their task. On the other hand, it is unwise not to spend some time on process, particularly if significant group events arise.

*Resistance*—PSG's can have same spectrum of resistance as therapy groups: lateness, absences, silence, subgrouping, monopolizing, etc. Nondestructive resistances, e.g. presenting only one's most successful cases, are not as serious as destructive resistances, e.g. those which threaten the viability of the group. However, a culture of resistance can ultimately deaden a PSG.

It is particularly hard to explore resistance in a group without a leader to push the issue. Members need to be curious about contract violations such as lateness and absences (even for patient emergencies), and deviation from task. When is peer-



**At A Glance**

# The NSGP Album

## *NSGP Spring Gala May 2004*

senting personal material relevant; when is it task drift?

2. Attention to the group's process must be balanced with the primary task of case consultation. While the stated task of a PSG is case presentation and discussion, most people join a PSG in part because of the longing for connection. It is important to find a way to socialize and honor that wish for connection without compromising the primary task of the group. Some groups build in a "schmooze time" at the beginning of each meeting, thus acknowledging the need for connection and providing a warm-up time for the harder work of case consultation. (This might be analogous to the waiting room time of therapy groups.)

3. A group culture of respect, openness, and curiosity is important. Confidentiality is important if members are to take risks. While competition is probably inevitable, friendship and generosity towards each other help mitigate rivalry. Feeling known and accepted by one's peers and seeing other colleagues' mistakes can be a can be a powerful antidote to perfectionistic expectations and shame. A member silence can be a shame-based withdrawal, with fantasies about being judged and found wanting.

4. Use of parallel process can greatly enrich the consultation. The group setting can often amplify the emotional aspects of the case as members experience such reactions as boredom, anxiety, irritation, or even excessive helpfulness. A PSG needs to be in agreement about the value of talking about the feelings in the room. Members need to feel safe enough with each other to handle aggression and injuries should they come up.

5. A PSG that gets into trouble and can't find its way out should consider engaging a consultant to help them understand the dynamics.

6. Avoid idealized expectations of a peer group. Strive for a "good enough group." Oh yes, and remember to have fun!



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



Anne Alonso & Walker Shields



Kelley Bothe & Pat Doherty



Siobhan O'Neill, Kiril & Karsten Kueppenbender



Cecil Rice & Katherine Wenger



Oona Metz & Gretchen Schmelzer

## *Sharing the Wealth!*

# ANalyze This

This question and answer column appears regularly in the Newsletter and addresses complex dilemmas in group therapy. Featured are case vignettes presented by NSGP members, with responses by senior clinicians. If you have a question you would like considered for this column, please submit a case vignette of 400 words or less to Joe Shay, Ph.D. through the NSGP office, or via email to [newsletter@nsgp.com](mailto:newsletter@nsgp.com). (Please remember to preserve the confidentiality of any group members described.)

## Dear Analyze This:

*I have been running a psychodynamically oriented psychotherapy group for women in their twenties and thirties for six years. Most members stay in the group for two to three years before terminating. My contract specifies that group members refrain from intentional contact outside the group and that any outside contact between group members is discussed in the group. The group members have sometimes complained about this rule, which has brought up useful discussion, but have generally followed the contract.*

*Last year, Nancy terminated from the group, and during the last session she asked if she could have the phone numbers of the other group members. She stated that she wanted to keep in contact and felt that because she was no longer in the group, she no longer had to abide by the contract. We discussed whether or not the other members felt comfortable with the number exchange and they all agreed that they felt comfortable with it. However, since it was the last session, there was not a lot of time to process it. I agreed to the request and numbers were exchanged. Since then, Marie and Janice have left the group and again,*

*numbers have been exchanged. Marie stayed in contact with Alison who remained in the group, and the two of them spent time together at each other's houses. Their friendship ended in a big fight and they no longer speak to each other.*

*I have become concerned that members may feel pressured to give out their numbers as members terminate, and may feel uncomfortable about refusing to join in. I recently brought up the topic when we were not in the midst of a termination and the group members admitted some potential discomfort with the idea of exchanging numbers. Paula suggested that exchanging email addresses seemed more comfortable to her than phone numbers, but most of the other members expressed a wish to exchange numbers upon termination. However, they all admitted that it could be difficult to refuse to give out numbers in certain situations. When I pressed them for potential solutions, they asked that I make the rule, with Alison the loudest proponent of this. So, my questions are: should I be explicit in my contract about post-group contact, and if so, how? Is this about the desire for healthy connections—which has been an ongoing theme in the group—or are the members avoiding termination, or is it something else? Is there any way to encourage those members who really do seem connected to stay in touch without it feeling like all members feel pressured to stay in touch?*

## Confused about Ending

## Dear Confused About Endings,

What a wonderful set of questions—and an opportunity to rethink our traditional boundaries. Endings bring the theme of boundaries to the forefront. The boundary at the end of the group should bear some important relationship to the boundaries at the start as well as to how they shift throughout. So, here are some questions to consider in this regard.

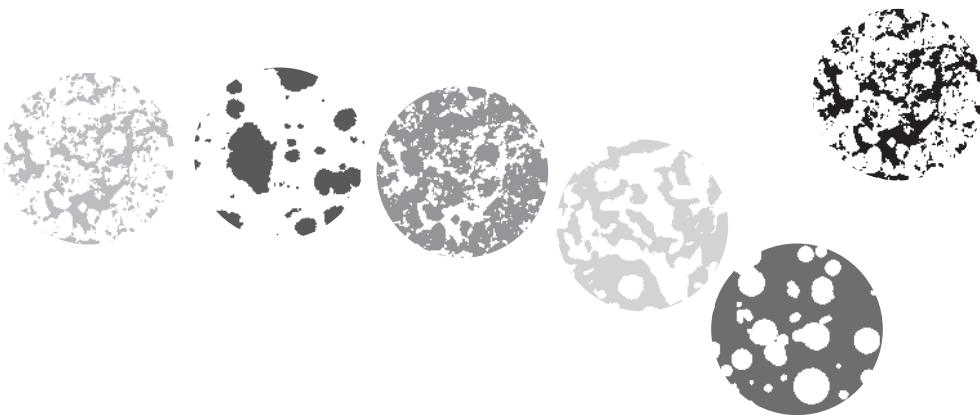
What is the purpose of the group? Support and short-term single focus group leaders may encourage contact outside the group. This is a long-term psychodynamically-oriented group. Starting with the traditional contract makes sense.

What are the ages of the group members? A younger aged group may need more traditional boundaries. Sometime between 28-32 one begins to think about taking life on one's own terms. A lively discussion of these issues may be central to helping members move along in their thinking about personal boundaries.

What led people to this group in the first place? Most people come to group seeking to learn more about their own requests for connection. They come fearfully or hopefully or a mixture of both. Many of the members of my groups were raised in family and social circumstances where there were few useful models for how to put thoughts and words and feelings together. They often don't even recognize feelings, much less talk about them in conflicted situations. They come to group not knowing how to respond and what could be said. The politeness quotient is probably high at the group/non-group moment of leaving.

What is the experience (in professional training and in life experiences) of the

*“Endings bring the theme of boundaries to the forefront. The boundary at the end of the group should bear some important relationship to the boundaries at the start as well as to how they shift throughout.”*



group leader? I needed those “rules” and clear boundaries 22 years ago. My comfort dealing with ambiguity and complexity has grown. Can the leader feel comfortable and effective dealing with the messiness with regard to the “rule”?

I think the complexity of the questions you ask suggests a healthy respect for the messiness and most likely a capacity for helping group members learn the language of the messiness.

You already have some shift in the boundary. It would not be respectful to bring on the rule again in a dictatorial way. Tell the group that you know the dilemma. You might invite the anger and sadness that you couldn't protect them from these messy conflicts. You may want to tell them that you made a mistake by supporting the original request for sharing phone numbers. You could return to the simpler rule and that would free up energy to do other things in the group. It might also feel protective and helpful to some group members. But you always lose something by not trusting the group to grapple with the issue.

This group is working very well in that talk about termination seems to be ongoing. In every group session, you are wise to have in mind such questions as: Why are you here? What are you getting –or not? When are you thinking about leaving?

But, it is a central obligation to maintain overt focus on the issue of actually saying goodbye. You can share a phone number, or email, but it's still important to say goodbye to the experience of each other in the context of the group's life.

And, we still must protect the group members who do not wish for any further contact. We help them with language and respect for their mixed feelings. And then, ultimately, trust them to learn from the experience.

To Confused About Endings I would say, three cheers! We all should be more confused about endings and take our own good advice: Sit with it.

**Judy Osborne, LMHC, LMFT, CGP**



### **Dear Confused About Ending**

The boundary dilemma occurring in your group is one every group therapist has faced or will face at some time. It points to a paradox in the group experience: we provide members a safe place to connect in the here-and-now and to relate honestly with one another. Then we ask them to say good-bye. No wonder your group is showing some resistance to dealing with endings and wishes to soften the experience by attempting to rewrite the agreement. My response will revolve around the “rules” of the group agreement and the reality of termination.

The group contract or agreement is the “glue” that holds the group together since it is the one thing that all members share in common. Much of the work of group therapy lies in confronting the limits or boundaries established by the agreement. The task of the group leader is to be the “boundary sweeper.” This does not mean to renegotiate the contract but to continually clarify the boundaries so that members can talk about their feelings instead of putting them into action (e.g., by exchanging phone numbers). I would not encourage you to change the contract but to work creatively within it. One way to do this would be to use as metaphors the technological images of the telephone and email that the members themselves have provided in framing this present dilemma.

It seems to me that in their attempt to manipulate the boundaries of the group agreement your members have introduced metaphorical language with which you/they could “play” in order to help them bring their feelings into the room. This would permit the group safely and spontaneously to explore their ambivalence about being connected and their pain at losing that connection. It would also minimize their power struggle with you, the authority figure, and allow them to examine the newly emerging group norm more objectively. Their use of the images of telephone or email suggests

that they have some-thing more to say to each other and to you, more work to do in the here and now. By exchanging phone numbers or email addresses they are postponing that work to an indefinite future, the there-and-then. Would it not be more productive for you to encourage the members to say what they need to say in the present rather than facilitating their communication in the future? Explore

what sharing phone numbers represents to the members. What, for one member anyway, makes email a preferable means of communication?

Termination unleashes some of the most powerful feelings in human experience. The members' wish to exchange phone numbers is certainly not unusual. Emily Dickinson, a woman who thought a great deal about endings, captures the dynamic of your group in

this short poem (1996): “We'll pass without the parting/ So to spare/ Certificate of Absence—/ Deeming where/ I left Her I could find Her/ If I tried—/ This way I keep from missing/ Those who died.” The group's wish is to “pass without parting” in order to spare themselves the certifiable reality of Absence, the fact that things change. However, to avoid the work of termination is to deprive oneself of some of the most important lessons that group therapy has to offer: the chance to revisit earlier unexamined endings; the liberating experience of a “healthy good-bye”; or, in Dickinson's words, the grace of finally “missing/ Those who died.” It is important for members to see that they can successfully end and feel stronger for it.

Termination is also hard for the therapist. As I'm sure you realize, there is always the possibility that you yourself may have some ambivalence about this “rule” in your agreement or about termination itself. You can avail yourself of supervision or consultation to sort out your countertransference. I have appreciated the opportunity to think “out loud” about this group dilemma.

**Karen Wischmeyer, LICSW, CGP**



# Groups for Eating Disorders: Choices and Timing

by Helen Riess, M.D.

As the incidence of eating disorders, estimated to affect 5 million Americans each year, continues to rise, with increasing numbers of young girls as well as older women joining the ranks of those afflicted, group therapy has emerged as a highly effective treatment. Decisions about which type of group to recommend are difficult because many different forms are touted to be effective. Time-limited cognitive-behavioral, psycho-educational, interpersonal, as well as support and self-help groups have all been reported to be helpful for patients with symptoms of bulimia nervosa (BN). Open-ended psychodynamic groups are reported to repair gaps in ego structure necessary for long-lasting recovery. In addition to building support and external structure, psychodynamic groups are important in building internal structures such as self-soothing, self-regulation, and affect modulation in individuals with known affect dysregulation.

Although the literature is replete with reports of success using time limited CBT, psycho-educational, and interpersonal groups for BN, the lack of long-term follow-up studies makes it difficult to determine how lasting the reported decreases in symptomatology will be. The chronic nature of BN, with frequent relapses during times of stress, points to the underpinnings of the disorder, which often include unresolved grief, histories of trauma from abusive, controlling, or enmeshed relationships, physical injuries, learning disabilities, and other disorders.

While we know that longer-term, open-ended groups allow patients to resolve and repair deeper defects in ego structure underlying the symptoms, many patients are still referred to time-limited treatments for symptom management. This may be due in part to the large number of reports of success with short-term treatments, the paucity of studies of open-ended eating disorder groups (which are much more difficult to control in research settings), and the fact that open-ended groups for

eating disordered patients are notoriously very difficult to form.

Years ago I recognized a serious gap in treatment offered to bulimic patients that accounted for many patients dropping out of open-ended therapies, both individual and group. Many patients referred for open-ended therapies were disappointed that the treatments did not focus on their symptoms of binge-eating and purging and were not yet ready to explore the deeper dynamics of their disorder, so they dropped out of treatment. Meanwhile, patients receiving time-limited treatments were leaving therapies (CBT, interpersonal therapy, psycho-educational groups) with symptom control but then faced repeated relapses because the underlying issues of their eating disorder had not been addressed. An important bridge spanning symptom control and full working through of psychodynamic issues was missing.

To fill this gap between short-term symptom-control treatments and longer-term lasting recovery models, while remaining sensitive to the difficulty in forming open-ended groups for eating disorders, I designed an integrative, time limited treatment for bulimia nervosa. This model strives for symptom control with CBT and psycho-educational techniques, and also prepares group members for subsequent open-ended treatment by introducing them to psychodynamic, interpersonal, and relational group processes. At the end of a 12 week group, members are able to make informed decisions as to which type of follow-up treatment they will choose having been exposed to psychodynamic, ITP, and relational group processes. In 2002, Mary Dockray-Miller and I wrote a step-by step-guide, (*Integrative Group Treatment for Bulimia Nervosa*, 2002, Columbia University Press: NY) to close this treatment gap.

Integrative group treatment is a twelve-week structured group program with three overlapping phases. The first phase is a psycho-educational phase which begins with an introduction to the cultural milieu which promotes eating disorders. Members learn about the physical and medical consequences of their eating disorder. Nutritional information is given

by a nutritionist or the group leaders. Members begin to keep detailed food records from the first session on, and the leaders collect them weekly.

In the cognitive-behavioral phase members review their food records and suggestions made by leaders, and also set realistic goals to make changes. In each remaining week, goals are set and reported to the group. The leaders utilize CBT exercises and strategies to challenge myths and irrational thoughts about food and eating.

In the interpersonal/relational/experiential phase, the leaders introduce common relationship difficulties found in patients with BN. Through exercises and examples from their lives, the group members then work on changing these relational patterns. Binge eating is often a response to interpersonal disturbances. This phase of the group is particularly helpful in highlighting Fedele and Harrington's (1990) four healing factors: validation, self-empathy, mutuality, and empowerment. As group members come to see the paucity of these factors in their lives and the powerful opportunity for these experiences to be learned in and shared in the group, a palpable shift occurs in the group. Members move from symptom focus to reflection on what has happened in their lives which led to using food to meet their emotional needs rather than relationships with caring, empathic others. In this phase the earliest psychodynamic work is often begun.

The final phase also offers an experiential response-prevention strategy by planning and eating a group meal together. Most members experience the group meal as a profound time to reflect on what the group has meant for them, and to share poignant stories of family meals that help them understand how their eating disorders may have been unconsciously promoted and invented as solutions to family discord. In the termination phase members discuss what their next steps will be on the road to recovery.

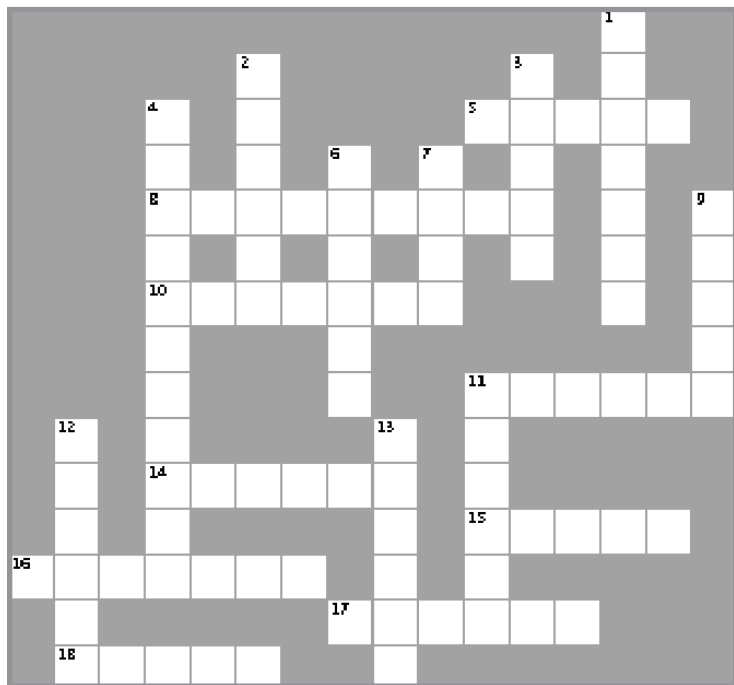
Treating eating disordered patients in a full and comprehensive manner, while at times arduous, can be very rewarding if patients are given techniques to manage their symptoms and at the same time are prepared to undertake the longer-term work of dealing with the underlying causes.



# What's in a Name?

Created by Wont Longz

With this issue, we are introducing a Crossword Puzzle for your enjoyment. Please give it a try and submit your answers to [newsletter@nsgp.com](mailto:newsletter@nsgp.com). You have until the end of October at which time the correct answers will appear on the NSGP website ([www.nsgp.com](http://www.nsgp.com)). All correct entries will be entered into a drawing, and the winner will receive a beautiful NSGP coffee mug or a \$10 credit toward the NSGP annual conference.



**Across**

- 5. Author of Group Psychology and the Analysis of the Ego
- 8. Founded Systems Centered model
- 10. She's wearing the mask; Thoreau's peer?
- 11. Played group Therapist in Color of Night
- 14. Senior author of Don't Just Do Something, Sit There
- 15. Board Secretary
- 16. TV Group of six and sex
- 17. Originated "acknowledge, bear, and put into perspective"
- 18. First of First Lady of Psychodrama

**Down**

- 1. A founder of Group Analysis
- 2. Median group guy
- 3. Group of Yankees aka \_\_\_\_\_ Zoo
- 4. Puzzle title by \_\_\_\_\_
- 6. DBT group founder's first
- 7. Famous for "exclusion of memory and desire"
- 9. Rutan's first name?
- 11. Oldest active NSPG's fella
- 12. Puzzle creator's inspiration?
- 13. He said there's a fourth basic assumption

## NSGP Foundation Offers Scholarships

The Northeastern Society for Group Psychotherapy Foundation, Inc. has established a scholarship fund chaired by Arnie Cohen, Ph.D. and Lise Motherwell, Psy.D. The Foundation gave several scholarships to students this year. The Foundation is offering limited scholarship monies to students and early career group therapists interested in attending the Northeastern Society for Group Psychotherapy conference this June or who are in the NSGP Training Program. Scholarship money is also available to students in other group training programs in the Boston area, although NSGP students receive first consideration. Applicants should send a statement of interest and financial need of not more than 200 words to Arnie Cohen or Lise Motherwell, Co-Chairs, NSGP Foundation Scholarship Committee, c/o NSGP Foundation, Inc., 536 Pleasant Street, Belmont, MA 02478 or email your request to Lise Motherwell, Psy.D. at [motherwell@post.harvard.edu](mailto:motherwell@post.harvard.edu).



10.(across) Thoreau's peer? — at the Spring Retreat

# The NSGP Spring Retreat 2004



Group 1, Act 3



Group 2, Act 1



Together always



The new who?



Seeking prospective member

## Free Colloquium Series **NSGP Breakfast Club**

CEUs NOW AVAILABLE!!!

Learn about group therapy and socialize with other Northeastern Society for Group Psychotherapy members at a FREE colloquium series. Each POT LUCK event is limited to 15 on a first come, first served basis, and will take place on designated Sundays from 11 AM to 1:30 PM. Participants may bring guests. Please contribute a breakfast item (quiche, fruit, pastries, cheese, etc.) or bottle of wine. The host will provide bagels, coffee and tea. CEUs are \$10.

**For directions or to sign up: Please call Pamela Dunkle at the NSGP office, 617-484-4994.**

- Sept. 19**      **Why Do Groups Work Anyhow?**  
 Anne Alonso    WHERE: Anne Alonso's
- Oct. 24**      **Perverse Appetites: Eating Disorders and their Relationships to Groups**  
 Helen Riess, author of *Integrative Group Treatment for Bulimia Nervosa*  
 WHERE: Eleanor Counselman's
- Dec. 5**      **Should the Leader Lead, or Should the Leader Follow?**  
 Sam James    WHERE: Marsha Vannicelli's
- Jan. 23**      **Don't Miss Oscar-Winning Narcissists Appearing Now in a Group Near You!**  
 Joe Shay    WHERE: Alan Witkower's
- Feb. 27**      **Divorce Groups: Recovering from Ruptured Relationships**  
 Kelley Bothe    WHERE: Jim Leone's
- Apr. 10**      **The Therapist's Body: Using Somatic Awareness to Become More Attuned to our Groups**  
 Suzanne Cohen    WHERE: Kelley Bothe's

# Write On!

## Notes to Clinical Writers

by Suzi Naiburg, PhD, LICSW

Have you ever had trouble writing the introduction to a clinical paper or presentation? Good leads and effective introductions are hard to find in our professional literature but may not be as hard to write if we begin to appreciate how they work. A good lead consists of opening sentences that are so engaging and well linked that they pull us right in and excite our interest and curiosity. They are page turners; once hooked, we want to read on. Here's the opening paragraph from Jerome Gans' (1992) article "Money and Psychodynamic Group Psychotherapy" (*International Journal of Group Psychotherapy*, 42 (1), 133-152).

The spotlight of group psychotherapy can have a searing glow. Attention sometimes feels like dissection. Members can feel taken apart rather than loved. These sensations hold true as well for the leader. Money, perhaps more than any topic, mobilizes such negative concerns. Shame and greed are not easy to talk about." (p. 133)

Gans' prose is economical, engaging, and jargon free. His tone, to my ear, is empathic as he briefly yet vividly describes how members and leader alike might feel. Suggestive rather than dogmatic with the respectful inclusion of "perhaps," Gans presents money as a special case, perhaps the quintessential case, that can mobilize the group's negativity.

He ends this opening paragraph with what appears to be a straightforward declarative sentence but one that does a good deal of work. Like the end line of a good poem, it settles us in to something at a deeper and often affective level. And here's the implicit rub: if shame and greed aren't easy to talk about, how are we, as group leaders, going to manage under that searing light, feeling dissected and unloved, to deal with our own shame and greed as well as all the feelings group members might have?

In writing that feels effortless because it is so conversational, Gans has grabbed my

attention and created a need to know what he has to say. Having not only identified a problem, he's begun to imply that much is at stake. He's created what is called, at Harvard's Expository Writing Program, "the motive"—that which necessitates his writing project. He's begun to identify a problem that requires solution, creating a particular kind of motivating structure that is called, at the University of Chicago, the "problem/solution structure."

Whether used explicitly or implicitly, the motive and the problem/solution structure are two of the most effective organizing principles you can bring to your writing that are especially important to employ in an introduction. When starting out, ask yourself why this paper needs to be written. Try catching your readers' attention by identifying a problem, pointing to a gap, or presenting a paradox. Create the need to know what it is you have to say.

Gans does this not once, but twice. In the second paragraph, he identifies the scarcity of articles on the subject of money in group psychotherapy literature and notes "a proliferation" of material relating to this issue in individual psychotherapy (p. 133). He then ups the ante while elaborating the various ways money functions by asking, "How can we understand this selective inattention in the group psychotherapy literature to money as a real, symbolic, transactional, psychodynamic, and hence valuable issue?" (p. 133). This second paragraph demonstrates that the problem/solution structure can be used effectively not just to get the ball rolling but also to keep it moving throughout a paper.

The momentum builds in his third paragraph as he lets his readers know why the gap needs filling, the problem, solving. This paragraph begins: "Money is a taboo subject but at the same time a royal road to unconscious material including primitive affect, aspects of personality, and discussions of orality and anality, especially greed, depletion, and withholding" (p. 134).

Here he's addressing what I call "the so-what? factor" and continues to do so throughout this paragraph and the next, adding five more reasons why addressing

issues around money is important and identifying other emotions that get stirred up in the process. "Help, get me out of this mess" is what I'm feeling by now, at which point Gans succinctly (and thankfully) enumerates the three-part purpose of his article, giving me hope that I might survive the breaking of such a powerful taboo if I read on. He writes:

The purpose of this article is:

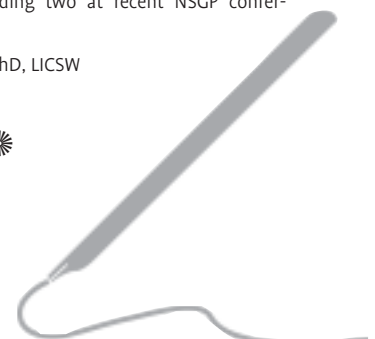
1. To discuss ways to overcome the taboo against talking about money in group and to establish a fee and billing policy.
2. To illuminate the variety of situations that discussions about money create in group once the taboo is lifted; and
3. To suggest ways that the leader can deal more effectively with countertransference and thereby help the group to deal more therapeutically with the newly uncovered material. (p. 134)

What stuff are such effective introductions made of? A good lead that pulls the reader in; an idea (or thesis) worth elaborating; a motive to create the need to know what the writer has to say (possibly in the form of a problem/solution structure); reasons why the idea/thesis is important (and not just because the writer says so), that is, the so-what? factor; a clear sense of the paper's direction; and possibly a context for the thesis, which may involve references to other relevant literature.

Your introduction sets up your readers' expectations, establishes an implicit contract about what you have to deliver, and also sets a tone. A few paragraphs can do a lot of heavy lifting effortlessly when well written, so write on!


Suzi Naiburg is a psychotherapist in Belmont, MA, who also coaches writers and teaches writing workshops, including two at recent NSGP conferences.


© Suzi Naiburg, PhD, LICSW





# Progress Notes

**Progress Notes** features a variety of items that reflect progress for NSGP members or committees. Please let us know ([newsletter@nsgp.com](mailto:newsletter@nsgp.com)) if there's anything you'd like noted, whether an article you've published, a speech you're giving, a notable change in your life.


 **Marvin R. Brams** graduated in December 2003 from the Massachusetts Institute for Psychoanalysis Post-Graduate Fellowship Program in Psychoanalysis. He also received a Fellowship in Psychoanalytic Psychotherapy from the Boston Psychoanalytic Society and Institute.


 **Tyler Carpenter** has published a chapter entitled "Men with Attitude: Essentials and Paradoxes in the Group Therapy of Aggressive and Violent Men" in *Correctional Psychology: Practice, Programming, and Administration* (2003) edited by Barbara Schwartz. Soon to appear as well are two articles, "Back to the Future: F. Alexander's 1963 Paper Reconsidered" in the *Journal of Psychotherapy Integration*, and, a review of Francine Shapiro's new book on EMDR as an Integrative Treatment in the journal *Psychotherapy Research*.


 **Patricia Doherty, Cecil Rice,** and **Kathy Unger**, accompanied by a number of NSGP members serving as faculty, continued their ongoing group training program in Northern Ireland.

 **Nina D. Fieldsteel** delivered the paper, "When the Therapist Says Goodbye" at the March meeting of the Psychoanalytic Psychology Division of APA. This paper will be published next


year in the *International Journal of Group Psychotherapy*.

 **Barbara Kezell** was invited to join the conference committee for AGPA and was accepted to do the AGPA National Designate Training Institute,


 **Barbara McQueen** presented a session at the Massachusetts NASW symposium entitled "Thinking About Race: Reflections from a Professional Group." She also co-taught a course at the Simmons College School of Social Work entitled "Dynamics of Racism and Oppression


 **Oona Metz** and Laura Longworth celebrated their marriage with friends and family on August 28th, 2004 in Woodstock, Vermont. The ceremony was held at a house built by Oona's great-grandparents, with a reception afterwards at The Kedron Valley Inn in South Woodstock, Vermont.


 **Lise Motherwell, Sandy Houde,** and **Scott Rutan** published "Patients who return to Group Therapy" in the March, 2004 *Group*.


 **Suzi Naiburg** presented "The Space Between Fate and Destiny: Oedipus and Tragic Consciousness" at an international psychoanalytic conference in Sicily in June. Last spring, she taught a

clinical writing workshop for the National Association of Social Workers, and also presented "Reclaiming Karen Horney and Becoming Ourselves in the Practice of Psychoanalytic Psychotherapy" at the meeting of the National Membership Committee on Psychoanalysis in Clinical Social Work.

 **Marsha Vannicelli** presented "Countertransference and Systems Issues in Group Psychotherapy for Substance Abusers" at the MGH West End Clinic, as well as "Treatment of Substance Abusers and Family Members: What's New and What's Not" at Two Brattle Center in Cambridge.

 **Tracy Wallach's** article "Transforming Conflict: a Group Relations Perspective." will be published in *Psychological Approaches to Dealing with Conflict and War* (2005), edited by Fitzduff and Stout.

 **Bob Weber** has been honored with the Affiliate Assembly Award for his wonderful contributions to NSGP and AGPA.

 **Donald Wexler** is, we think, the first NSGP member to have a letter published in the *New Yorker!* (Reprinted on page x of this Newsletter.) In his communication, Don addresses the centrality of shame in war veterans suffering from PTSD.

## NSGP Foundation Activities and Annual Gala

The NSGP Foundation again held its annual garden party and silent auction May 23rd at Suzanne Cohen's, where we had over 60 attendees. The gala is always a great event, with lots of good food, wine, and fun. This year we had yet another wonderful list of contributions to our silent auction including a print by Tabitha Vevers, a Cambridge artist and annual attendee of our gala, dinners at local area restaurants, group therapy books, and weekend retreats. We raised almost \$6000 at this year's event! Those of you who were unable to attend can still contribute to

the Foundation. Just send a check to NSGP Foundation, c/o NSGP, PO Box 356, Belmont, MA 02478, or for a brochure and more information contact Pamela Dunkle at 617-484-4994.

The Rice Fund, which was created by Cecil and Shirley Rice to fight domestic, national, and international violence, sponsored its first Special Presentation at the NSGP Conference in June. The two-part presentation titled, "Violence and Its Aftermath: The Healing Process," was chaired by Shoshana Ben-Noam. Cecil Rice introduced guest speakers, Steven Marans, Stephen Berkowitz, Martha Bragin, and Anne Alonso.



### **News Alert: Poker party winner is xx.**

Each year, the NSGP Foundation sponsors an auction, and this year 8 people won seats at a poker party hosted by Joe Shay. The competition was fierce and cold-blooded, with fortunes won and lost into the night, but ultimately, xx emerged as the grand winner! Want to play? Bid high next year!



### **The NSGP Referral Service**

thanks Paul Crowley, PhD and Steffen Fuller, PhD for their participation and contributions to the Referral Service. We want to welcome Karen Wischmeyer, LICSW, CGP to the committee.

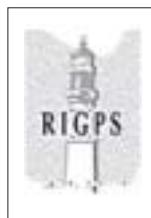
Our web site group listing has been updated and the referral service is humming along. We get between 4-8 calls per month and have learned that our web service is increasingly popular. We have worked to make group listings more accessible to clinicians, patients, and the community.

Finally, we are excited to join the Professional Development Ad Hoc Committee in offering a co-sponsored evening of Networking this October 10th from 5:30pm to 8:00pm. We will have a pot luck dinner at the home of Scott Rutan open to all NSGP members. Please RSVP by October 5, 2004 to Debra Filiurin at 617-492-5980 or dsfil@juno.com. Registration is on a first-come, first-serve basis for up to 40 members.

Debra Filiurin, LMHC, CGP  
Sandy Houde, LICSW, CGP  
Co-chairs, Referral Service

## **The Rhode Island Column**

Daniel Even, MDiv, MSW



### **90853 Motion Adopted**

**A**t its spring meeting, the AGPA Affiliates Assembly passed the motion put forth by RIGPS regarding the national code for group therapy (90853). This was the third attempt in the last ten years by the Rhode Island Affiliate to gain support for a long overdue review of the critical relative value units assigned to the code. These units are increasing used in determining reimbursements for insurance based group treatments.

David Kahn, MD who placed the motion before the Assembly and successfully lobbied for its adoption, reported that support was broad based and enthusiastic. A committee is being formed to undertake the initial phase of what is expected to be a two to three year process.

As RIGPS is continuing to seek the support of NSGP members in this effort, the text of the motion is printed here:

***The Rhode Island Affiliate Society (RIGPS) urgently requests that AGPA form a Relative Values for Work (RVW) Committee. Funding and resources are requested so that the RVW can immediately initiate the process of reviewing the Current Procedural Terminology (CPT) and Resource-Based Relative Value Scale (RBRVS) associated with the 90853 CPT code for group psychotherapy.***

The formal explanation of the motion was as follows:

*Since the Medicare-linked coding system is used by many insurance companies in determining reimbursement for group therapy, it is of key importance in setting national reimbursement rates for group therapy (CPT code 90853).*

*Presently the CPT terminology, and consequently the RBRVS-linked reimbursement rates, make no provision for different types of groups and varying lengths of group sessions. Without a revision of the 90853 CPT terminology and associated RBRVS reimbursements, group therapy compensa-*

*tions will continue to suffer devastating consequences. Already the disincentive to providing group therapy diminishes public access to the most cost-effective therapeutic modality, and erodes professional and academic interest in group therapy. Revising the procedural terminology and codes will require the highest priority response from AGPA.*

*Due to the federal budget crisis, each year the revision process is delayed, the less likely it is that a successful outcome will be achieved*

In a related development, Lois McCartney, MSW and Daniel Even, MDiv, MSW went before the board of the RI chapter of NASW to gain support for the Assembly's attempt to have the formulas reviewed. This effort was also successful.

RIGPS anticipates ongoing discussions with NSGP regarding the effort to gain the support of AGPA's Board.

### **October 1st Conference**

Paul G. Simeone, Ph.D. is scheduled to present on "An Interpersonal Approach to Time-Limited Group Psychotherapy," to be held at Butler Hospital's Ray Hall on the East Side of Providence. The presentation will run from 11:30 to 4:30PM.

NSGP members are more than welcome and receive the RIGPS member rate of \$55 (non-members \$60). Please contact David Kahn, MD at 401-455-0860 for more details including special rates for students and organization groups.

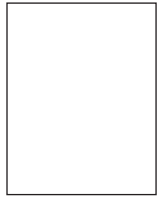
Another benefit that is available is the First President's (Belle Evans) Scholarship pass. The pass allows one NSGP member to attend without charge. Consider putting the savings toward dinner with your RI collegial cousins after the conference. For more information about the scholarship pass, please call Daniel Even at (401-454-2890) or e-mail me at daniel@groupbydesign.com

Realizing that the above information may be published after the fact, RIGPS will attempt to reach as many NSGP members as possible through the listserve.





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



the newsletter

fall 2004

**NSGP Networking Event** October 10

Pot Luck Dinner

**NSGP Special Event** October 30

***Passion in Group Therapy:  
 Loving, Hating, and Knowing***  
 with Richard M. Billow, Ph.D.

**New  
 Breakfast Club Program**

**2004 NSGP Events Calendar**

Sept. 19	<b>Breakfast Club</b> 11 AM (see inside, page 12)—at Anne Alonso's
Oct. 10	<b>NSGP Networking Event: Pot Luck Dinner</b> (see Insert) 5:30 to 8:00 PM—Discussion 7:00-8:00 PM—at J. Scott Rutan's
Oct. 24	<b>Breakfast Club</b> 11 AM (see inside, page 12)—at Eleanor Counselman's
Oct. 30	<b>NSGP Special Event</b> <b><i>Passion in Group Therapy: Loving, Hating, and Knowing</i></b> with Richard M. Billow, Ph.D.—at the Episcopal Divinity School, Sherrill Hall
Dec. 5	<b>Breakfast Club</b> 11 AM (see inside, page 12)—at Marsha Vannicelli's
Jan. 23, 2005	<b>Breakfast Club</b> 11 AM (see inside, page 12)—at Alan Witkower's
Feb. 27, 2005	<b>Breakfast Club</b> 11 AM (see inside, page 12)—at Jim Leone's
Apr. 10, 2005	<b>Breakfast Club</b> 11 AM (see inside, page 12)—at Kelley Bothe's
June 17-19, 2005	<b>Save the Date!</b> NSGP 2005 June Conference, Wellesley College

**For more information or to sign up call Pamela Dunkle at 617-484-4994.**

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