Empowering relationships...

FEBRUARY 2017



The Redwood Empire

Therapist

OUR FEBRUARY MEETING

On Working in the Transference with Individuals and Couples Dr. Peter Hobson



Psychoanalytically inspired clinical work pivots on the notion of transference. To 'work in the transference'

means that, whether conducting psychotherapy with individuals or couples, a therapist focuses on the details of the current patienttherapist engagement, as well as issues of attachment. However, different therapists attend to, and interpret, the transference in very different ways. This talk will explore a particular way of understanding, exploring and interpreting transference, combining clinical evidence from examples with research on both individual and marital therapy.

Peter Hobson is a psychoanalyst (License from California Medical Board) trained at the British February 3rd - RECAMFT Meeting
10:30 - 11:00 social & sign in

11:00 – 1:00 meeting On Working in the Transference with Individuals and Couples Dr. Peter Hobson

ODDFELLOWS TEMPLE/MERCER HALL, 545 PACIFIC AVENUE, SANTA ROSA

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March 3, 2017

Collaborative Couple Therapy: Turning Fights into Conversations and Problems into Opportunities for Intimacy Dan Wile, Ph.D.

April 7, 2017 Healing Shame in Couples Bret Lyon, Ph.D. and Sheila Rubin, LMFT

1.5 CEUS AVAILABLE - RECAMFT CEU PROVIDER IMIS 57173
MEETINGS ARE OPEN TO ALL ~ NON-MEMBERS FREE (\$15 FOR CEUS)

Psychoanalytic Society and also on Faculty of the San Francisco Center for Psychoanalysis, a psychiatrist with the UK equivalent of a US MD degree, and a psychologist with a PhD from the University of Cambridge, UK. He is Emeritus Professor of Developmental Psychopathology University College London, and Lifetime Hon. Consultant Psychiatrist in Psychotherapy at the Tavistock Clinic, London. He led a research unit at University College, and worked as a psychotherapist in the UK National Health Service in the Adult Dept of the Tavistock Clinic.

What Else Is In Here This Month? Check It Out

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President's Message L. Reyna Seminara, LMFT



There has been recent welcomed talk about diversity and white privilege in therapy within RECAMFT. Given the current political climate, as therapists, I believe we need to open discussions and be aware of our behaviors with people who we perceive to be different

than ourselves.

In addition to clinical classes, cross cultural counseling was my favorite class in graduate school. We did research and listened to presentations about many cultures, religions, and ethnicities. There was discussion and enlightenment. It was a great class. For those of us who had traveled to other countries or lived in culturally different or immigrant families, or were LGBT, it was a breath of fresh air. Every encounter in therapy is a cross cultural experience and an opportunity to learn about someone's experience and support them the best way we know. I also gently learned to self-disclose my own lack of understanding or knowledge.

Even though I hold an awareness of gender, class and culture in every session, I have to work at not making assumptions. Instead, I have to ask questions about the impact of these "isms" in my clients' lives.

Being able to ask about the impacts of gender, class and culture came naturally to me from my own experiences. In my high school, most of the Southern Italian girls were in secretarial classes or beauty culture. My counselor recognized something in me and made me take college prep classes. This separated me from my cousins and friends. I didn't have a group to sit with in the cafeteria, although I was friends with all the groups. The girls in my classes were all from the north side of town, while I lived on the south side of the railroad tracks with the other

working class families. I was raised by my immigrant Southern Italian grandmother while my mother and father went to work. I was the first woman in my working class family to graduate college.

Today, my family is multicultural. My spouse is Jewish from an upper middle class family. Our daughter is Chinese. The differences that we navigate sometimes evoke frustration, and sometimes lead to hilarity, often reinforcing our love. We talk about the differences and the similarities, especially when it comes to emotional expression. One of the benefits...we get to celebrate a multitude of holidays!

Yet, with all this experience, my cross cultural perspectives continue to deepen. Last fall, I had a knee surgery that put me on crutches for about 3 or 4 weeks, which was a fascinating and cross-cultural experience for me as a person with a temporary disability. After about a week of only going from bed to bathroom on crutches, I began venturing out and about, mostly to the pharmacy. I was surprised by the reactions of my fellow shoppers. Men practically fell over themselves holding doors for me, even when the doors were automatic. Many women looked away, avoiding eye contact. Mothers with young children warned their charges not to get too close to me. I felt horrible and more disabled than I temporarily was. Some knew to offer help in a kind way, asking if I needed it, or offering an extra chair so I could put my leg up. I liked being asked. It was empowering.

My friend, Joan, a smart and engaging woman, who has been in a wheel chair most of her life, described to me some of her experiences navigating her life in a wheel chair. She now has a constant companion and caretaker. Joan's language is sometimes difficult to understand, but when I pay attention, I realize it's like listening to anyone

with an accent. My desire to understand, helps and allows me to understand. Joan finds people do not engage with her when she goes into a store with her caretaker. She is often ignored and feels treated like she is helpless or worse, stupid. Both reactions hurt her and lead to her feeling disempowered. I shared my recent "disabled" experience with her. She just nodded and smiled at me and told me it was good for me to understand a little bit about her life. She was glad this was only a temporary experience for me. We laughed about how it would be a good exercise for many people to live a day in her chair or on crutches, all of us deepening our cross-cultural understanding with the disabled community.

You may have heard or read in the list serve that RECAMFT is hoping to present a half day workshop about working with an issue of cross-cultural understanding this spring. It promises to be an experiential workshop on white privilege in therapy and working with non-white clients. Please keep an eye out for it. And please join us. I am sure it will be enriching and rewarding.



REYNA WITH BOB DALZELL

L. Reyna Seminara, LMFT RECAMFT 2017 President

Reyna has a private practice in Santa Rosa. It is best to reach her by email. <u>LRS-MFT@att.net</u>

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REcamft Team Potluck Dinner and White Elephant Gift Fun







What You Missed By Tara D'Orazio

"Once upon a time..." Jan Ögren delighted us with a story. She told a tale of adventure about how therapists can help their clients transform the narratives that keep them stuck in painful cycles. Through stories, experiential exercises, and demos she showed us the power of narratives to improve or hinder our lives.

She opened the session by inviting our inner children to come out and play – to listen to her presentation with the part of our minds that learns through experience and metaphor and open ourselves to being playful. Our first experience was to watch a partner make an expression and imagine the worst thing they could be thinking about us. Then we did the reverse: with the same expression, we told ourselves a neutral or positive story of what it meant. Jan's point in guiding us through this experience

was to demonstrate that we have the ability to decide which story to tell. The story we told ourselves was unrelated to what the other was thinking, as we found out when our partners shared what thought actually inspired the expression. This point, too, was important: the story we told ourselves had a greater impact on us than the actual event of the expression. As we wander through life we are constantly writing the story of our experience, but whether our story is tinged with negative or positive interpretation impacts our mental health and happiness.



JAN AND ANGELA DEMONSTRATION

In perhaps the most moving portion of the session, Jan invited a volunteer to participate in a live demo of how she works with clients on identifying and exploring their narratives. Angela shared a personal story of caring for an unstable parent and daring to hope things will be different this time. Jan invited Angela to write alternative narratives to the worried and doubtful one she often visited. They explored the impact each version of the story had on Angela's sense of hope and happiness as well as how the stories shaped her behavior.

Jan highlighted 8 techniques she uses to help people change their stories from harmful to constructive. First and foremost is labeling the narrative as a story. Putting it in this framework allows the narrative to change. Second, she encourages clients to actively participate in the storytelling framework by using phrases like "the story I am telling myself about this is..." which also lets them loosen hold on the entrenched story and try on others. Third, she wants us to get curious about how the stories developed and how they are received. Explore not just the details of the story but the context in which it was written and how the audience reacts. The fourth step is about asking for alternative stories and reflecting on how a different narrative may affect the conflict. Fifth, guide them through the exercise we tried at the beginning of the talk to demonstrate the impact of a negative and positive story on their health and

happiness. Sixth, explore the rules around their storytelling patterns. Clients may have rules such as not being allowed to be a positive figure in stories or not being the protagonist. Beyond the actual stories we tell, we have rules for writing them that can also keep us stuck in the same sort of storytelling over and over. Seventh, she warns us that the inner critic is the best storyteller of them all, inventive and clever. The critic is adept at convincing us of the truth in what it says. But it is not a truthteller and is just another narrator. By labeling the inner critic as a storyteller we can begin to take it less seriously and even let go if what it says is unhelpful. Lastly, eighth, she uses the incredible power children have of healing themselves by engaging them in creating healing endings for the stories told about them.

Just as clients have their stories, therapists have theirs, too. At times, the temptation to share our own stories enters the therapy room and Jan had some advice for when that happens. She broke down self-disclosure into several categories including stories about ourselves, feelings we have about the client, and advice we develop from our personal opinions. Her overarching maxim was that all uses of self-disclosure should serve the client.

We broke into three-person groups for a discussion on self-disclosure. Over ten minutes we discussed what types of self-disclosure we're comfortable with and not, how we decide when and what to disclose, how we react to clients asking personal questions, and how we might evaluate the effect of self-disclosure on the client.

She ended the session with a presentation of three types of story: a folktale about searching for fulfillment, a short story about managing energy, and a poem about relationships to food. Stories have the power to slip under our shame and affect us at our core, opening us up to new experiences and change. Her story 'The Hungry Ghost' can be read in full on her website and her other works can be found in her published books.

Jan Ögren, LMFT has a private practice on Cherry Street in Santa Rosa. For more information about her psychotherapy, shamanic practice, or publications , please visit her website at www.janogren.net or call (707) 544-7756

Tara D'Orazio, LMFT is the sole practitioner and owner of Athena Counseling in Santa Rosa. She is a Beacon Medi-Cal provider and works with Victims of Crime and the VA Choice program. Athena Counseling helps teens (14+) and adults heal trauma wounds and manage anxiety through Cognitive Behavioral Therapy. For more information go to www.athenacounseling.com or call 707-992-5008

Pictures from our Holiday Party













How Do I Do That???



So, Beacon MediCal informed me that since I am a provider, I have to put an extended message on my phone greeting about how to contact Beacon's emergency services. Sometimes I hear greetings that say "press #

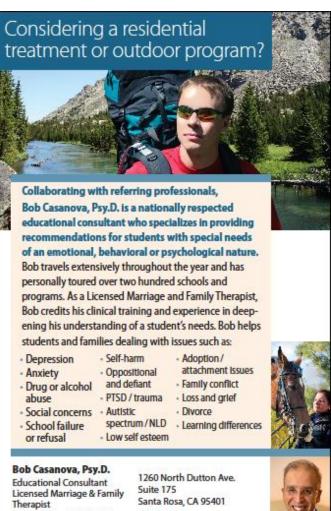
to skip this message" and wanted to do that on my greeting message.

After asking several people I know how to do that as well on an online support group with no success, my inquiry finally ended at a Verizon store. I learned a great little factoid! There is no trick to it! You can push the # key during any voice mail message and skip to the end of it!

I can just tell callers in my message to push the # key at any time to skip the rest of the message, if they are already familiar with it.

I am so glad to learn this little factoid. Now I can skip to the end of my friends' familiar messages any time I want to! From the number of folks I asked before I found out about this trick, I thought it would be good to share it with you all. =)

From your Editor, Gail Van Buuren



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A COMMENT FROM THE LATE LEONARD COHEN.

"[America] is really where the experiment is unfolding. This is really where the races confront one another, where the classes, where the genders, where even the sexual orientations confront one another. This is the real laboratory democracy.

Disaster Response Team Notes and News

So what's the latest on the disaster response team?

Several of our members have recently begun the volunteer process with the local Red Cross chapter in Santa Rosa, which is great news. Red Cross has lots of training, much of which can be done online at your own pace. While this is not all about the Red Cross, that is an important component, which will allow our team members to be as versatile as possible at the time a disaster strikes.

What are some of the challenges of building the team?

Our schedules are often already busy and full, and asking us to spend any number of hours preparing for this volunteer role is pretty ambitious. There aren't even necessarily those highly prized CEUs available to incentivize the time-trade. And the day-to-day fires we have to tend or put out are *a lot* more real than that ephemeral Fire-in the Future, and need trumps want. What's your experience of the process?

On the one hand, it's been a lot slower than I had hoped for. Because I just moved here a little over a year ago, I've been quite busy building my own practice, finding a place to live, and continuing to fly down to SoCal about every 6 weeks to look in on my 89-year old mom, manage my .333 acre bamboo garden and home, and spend time with several very dear friends. I've had several computer breakdowns that truly tested my patience. On the other hand, I'm encouraged by the fact that people are hanging in there with me. I love doing Crisis Response work, and am absolutely passionate about passing that love on. The American Red Cross people have been nothing short of amazing in their welcome. There has been such a dearth of mental health people available to them locally, so they are quite excited about new prospects.

Tell us some more about your passion for this work.

Time and again, it is my experience that most people are *genuinely grateful* for the emotional comfort and practical suggestions I bring. Much of my experience has been on the corporate side of debriefing, but even so, those that are impacted by some type of a disruptive event often need some momentary hand-holding. The work is very much in the moment, attuning to the immediate needs of the individuals or group in the room, acknowledging what has happened, and bringing a safe, expert presence to de-escalate the intense arousal of emotion.

Any concluding thoughts?

The recent rains caused flooding for a number of people in local and adjacent counties, so that Red Cross opened several shelters, and deployed volunteers to the "field" to hand out clean-up kits, shovels, dust masks, bleach, work gloves, paper towels and tarps and a flyer if instructions on how to get further assistance if needed. This past Sunday, I rode along with a nurse and a case worker, as we dispensed supplies along with compassion and empathy. Disaster is truly never far away, and **preparation** is the key to a successful response and a resilient outcome.

Doreen Van Leeuwen Crisis Response Chair

Doreen Van Leeuwen has a private practice in Santa Rosa and can be reached at 951-3471837

RECAMFT Mentorship

A no-cost benefit for RECAMFT interns

Volunteer licensed therapists are available to interns for up to two hours a month to discuss a variety of things. This is not a supervisory relationship. Interns are encouraged to contact different mentors.

Learn more about the RECAMFT Mentorship program on our website at www.recamft.org under Intern Support.

RECAMFT Meetings 2017

May 5, 2017
<u>Flashes, Gut Feelings and Hunches:</u>
<u>Listening to the Healer Within</u>
Julie Stass PhD, LCSW

June 2, 2017
<u>When Eros Enters the Room: Erotic</u>
<u>Transference and its Healing Nature</u>
Felicia Matto-Shepard, MFT, Jungian
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Empowering relationships...



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