The Script

INTERNATIONAL TRANSACTIONAL ANALYSIS ASSOCIATION

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Disaster Mental Health Workers on Front Lines in New York

In the months following the September 11 terrorist attacks in the United States, we have been asked many times how and what our members in New York are doing. As a result, we invited a number of them to write articles and letters about their professional and personal experiences following 9/11 for this issue of The Script. *We recognize that the events of last fall have particular significance for our US members, but in light of the inquiries and expressions of concern that we have received from throughout the worldwide transactional analysis community, we trust that all of our readers will find these contributions both informative and moving.*

In the following interview, Script *Editor Bill Cornell talks with long-time ITAA member Gerry Wallman about her work with the Red Cross in New York City following the terrorist attacks there on September 11.*

Bill Cornell: Hi, Gerry. I know you've read some of the pieces your colleagues in New York have sent us for this issue of *The Script,* most of them written from a very personal perspective. I would like to focus our interview initially on the Red Cross disaster mental health training you've received and then go on to talk about your experience following the September 11 disaster. What first led you to become involved in the Red Cross training?

Gerry Wallman: I was enrolled in a certificate program in international trauma studies at New York University. Other students there had done the Red Cross training, and I was impressed with what they had learned. I had been asking around for information on disaster training, and people kept suggesting the American Red Cross, so Ilka Peck and I signed up for it.

Bill: How did you personally become interested in this whole subject?

Gerry: I have been a volunteer for Amnesty International for a long time. I am a country expert for Slovenia, Croatia, and Bosnia and did field research with the Kosovar refugees. In Albania I interviewed refugees who had escaped over the mountains from Kosovo, researching human rights violations. I was so taken by their stories, so many stories. But I wanted to do more than verify human rights violations. I wanted to help them find some way of not having to carry such severe stress and tension. I thought more training in trauma work would be helpful and would combine my interest in human rights and my work as a psychotherapist.

"We as mental health workers are charged with noticing the factors that contribute to the tension and helping people step back or even step out when necessary."

Bill: So in the Red Cross training, what did you learn that was different from your training as a psychotherapist?

Gerry: The American Red Cross disaster mental health training really isn't about psychotherapy. It has to do with providing immediate and short-term interventions, often in informal settings.

Bill: Informal settings?

Gerry: Yes, on site, in the midst of everything, being prepared for anything. You're not off in an office. It is very much like my previous community organization training.

Bill: I know what you mean; it involves working where it's happening as it's happening.

Gerry: Right. They even train you in the art of schmoozing—how to wander around, talking to people, listening, watching, trying to pick up any signals of building stress so that you can find a way to reduce it. You are trained to provide opportunities for things to go well, for healthy emotional responses in the midst of disaster.

Bill: Say some more about that.

Gerry: Well, it could be a whole variety of things. About a third of what we do is educational in some way—helping people understand how they are reacting, what they are feeling, what they might anticipate, and letting them know how normal most of these reactions to extreme stress are. Some of it is direct service, as simple as giving toys and coloring books to kids waiting for emergency services. A lot of what the Red Cross disaster mental health worker is expected to do is to make sure the Red Cross workers, as well as the survivors, are doing as well as possible. That may mean holding a meeting to address problems among workers or direct and practical problem solving to make the work environment better. For example, making sure that people take breaks is simple and practical, but also very important.

Bill: In other words, part of the job of the

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Strengthened for Service

by Laurie Hamilton

Following the terrorist attacks on September 11, one of my first responses was to go to sleep. I knew I was going to have a lot of work to do. I have been a national disaster mental health instructor for the Red Cross since 1995 and have trained over 300 therapists to respond to these sorts of situations. My strong physical response also prompted intense spiritual experience, and I felt strengthened for service.

When the Red Cross asked me to go to New York City to train mental health professionals, I did not know they were going to station me at Ground Zero. The Marriot Hotel, one block from where the World Trade Center towers had stood, was being used as a respite center for recovery efforts on "the pile." Despite heavy damage, three floors of the hotel were somewhat available for recovery workers, including firefighters, police officers, Occupational Safety and Health Administration (OSHA) inspectors,



phone workers, Department of Public Works employees, and members of the Army and National Guard. There they could find first aid, hot meals, showers, a chiropractor, massage therapists, TV, comfortable chairs . . . and mental health. In the short time I was there I debriefed nearly 100 individuals and did multiple mini-trainings. I also taught several large mobilization classes so that 60 more therapists could respond and help.

Getting to Ground Zero, I walked past Trinity Church Wall Street, which was still closed but offering services several blocks away. It was an ugly walk, on gritty sidewalks past piles of ruble and open ditches in streets and sidewalks. The smell was always acrid, punctuated by bursts of the distinctive smells of sewage and aging organic materials. I wore a hard hat, goggles, and an OSHA-issued mask whenever I was outside in the zone. The place was ugly, but the people were beautiful. Their stories were varied and extremely touching. I listened to people who had seen the buildings

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Working with Unconscious Processes: Bollas and Cornell

by Helena Hargaden

On Saturday, 23 February 2002, the first symposium for advanced transactional analysis was held at St. Albans Centre, in London, England. The event was hosted by the clinical practice subcommittee of the Institute for Transactional Analysis (ITA). The first speaker and a guest from the psychoanalytic tradition, Christopher Bollas, shared his thoughts on "Forms of the Unconscious," after which the audience was invited to share their thoughts for the remainder of the morning. In the afternoon, Bill Cornell spoke on "The Therapist's Relationship to the Unconscious," followed by a discussion with the audience and Christopher Bollas.

Everyone in the audience was specifically invited because they were both qualified United Kingdom Council for Psychotherapy (UKCP) psychotherapists and transactional analysts with a clinical speciality. The day began with my introduction of the clinical practice subcommittee and its purpose within the transactional analysis community in the UK. I spoke about how the subcommittee came into being and what we had achieved.

"Perhaps meditating on the unconscious is an evolutionary activity—one that we increasingly need in a world that seems to have lost touch with its unconscious."

To start, I described a trainers' residential meeting I attended about two and a half years ago here in the UK. Perhaps unwittingly, we

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mental health workers is to stay outside of the stress and the direct relief/rescue work to monitor the environment and make sure it is as functional, almost ordinary, as possible?

Gerry: Yes, to make sure both the workers and the survivors are eating well, sleeping, resting, talking, communicating with people, doing *healthy* things. This is really important, because in disaster situations, people often become relentlessly task centered, overreactive, and overwhelmed. So in a very basic way, the mental health workers seek to relieve stress, to help people see and solve problems in a way that is much more like community organization than psychotherapy.

An important assumption in the Red Cross disaster work is that the stress level is really high for everyone involved. We as mental health workers are charged with noticing the factors that contribute to the tension and helping people step back or even step out when necessary.

About 30% of what we as mental health workers do is educational, 25% is direct and practical problem solving, 10% is advocating for services for survivors and workers, and 5% involves referrals. The remaining 30% of our interventions involve very short-term crisis intervention work, such as counseling, defusing, debriefing. It's interesting that other Red Cross workers come to really understand what the Red Cross mental health workers do. I've had other workers grab me saying, "Oh, you're mental health, aren't you? Boy, do I need to talk to you."

Bill: It sounds like there is a terrific focus on the well-being of the relief and rescue workers as well the victims and survivors. But is there anything in place to help take care of the mental health workers themselves?

Gerry: Yes, the Red Cross takes unusually good care of its volunteers. Disaster mental health workers take care of each other. At some point, every Red Cross volunteer is debriefed and given time to talk about what happened, what went well, what problems occurred, what feelings are coming up, and to review how to do good self-care. In many ways, volunteers at national disasters are prepared to return home. I'm very impressed by how the Red Cross does this; it's quite unusual, and they do it better than any other organization I've worked with.

Bill: What would you like to say specifically about the September 11 disaster in New York?

Gerry: Well, there is so much that can be said. One thing is that I've always been interested in secondary traumatization, that is, the effects on people who are not directly affected by the disaster but who are traumatized as a result of their rescue, relief, or aid work. In relation to the 9/11 disaster, I had more than ample opportunity to observe such secondary trauma in victims, rescue workers, and Red Cross volunteers, including myself. It was a humbling experience. I'd work a 12-hour shift all night helping people to recognize their limits and take care of themselves. Then I'd come home, see a couple of clients, eat, sleep an hour or so, and then want to rush right back to the Red Cross work. I had an overwhelming desire to help, to do more. I said more than once that I was in danger of becoming a "serial helper" and that I needed to be stopped before I helped again. It was so powerful, the urge to rush back, to do more. I could feel in my bones what I had known in my head. Another time, when I was nowhere near the World Trade Center site, I started smelling smoke. I thought to myself, "Oh dear, this is it, this is a trauma symptom." I heard this same story over and over again from friends, colleagues, and clients.

Bill: Could you say more about your understanding of the compulsion to keep going?

Gerry: It's very complex. Part of it, of course, is what we understand from the drama triangle. I also think probably a lot of it is the fight/flight or survival response. You know what I mean, you're a body therapist, after all. It's a physiological reaction, the urge to *fight,* to do. It is about how people can dig bodies out of the rubble with their bare hands or lift cars off people. I experienced it at that level. It didn't really feel emotional, but more basic than emotions. It was like a physiological imperative. I knew there were other people on site to help, that I wasn't the only one, but I felt like I had to go back, to keep going. You could see people who didn't stop, couldn't stop, for many reasons—the rescue workers, even the mental health workers. Clearly, there was a lot going on physiologically, a kind of energizing to deal with a crisis that just takes you over.

Bill: And what happens to those who don't stop?

Gerry: People collapse: They make mistakes, they get hurt, they become incredibly irritable. I saw workers who were so exhausted they literally couldn't walk or talk straight. It was my job to intervene and work with people so this wouldn't happen. Sometimes people would be incredibly resistant to resting, to taking a day off, and I would have to go to their supervisor to insist.

Bill: I'm curious how your Red Cross disaster work affects your ongoing clinical practice, for example, having to leave on short notice.

Gerry: The Red Cross does local, national, and international work. There are Red Cross and Red Crescent Societies in most of the countries in the world. Before 9/11 I had done only local work with the Red Cross. Local work doesn't disrupt my practice very much. The way the Red Cross works is that from time to time I'm on call. So this Friday, for example, I'll tell my clients that I am on call for the Red Cross next Friday, and there's a small chance I'll have to leave or miss a session. With few exceptions, clients are fine with this and very generous about it. It would be more difficult for mental health volunteers who work on national disasters and have to be away from their practices suddenly for up to two weeks. It was harder for my clients when I went on a long mission for Amnesty International to Albania and went to Bosnia. With those I was gone a long time and was more at risk. Some clients were scared and/or angry that I was taking those risks, but it was all grist for the mill like everything else. That was something Mary Boulton taught me: "It's all grist for the mill," and I provide my clients with a lot of grist.

"Our way of working in transactional analysis—its clarity, emphasis on direct communication, way of looking at things—is very compatible with the Red Cross training."

Bill: Is there anything you would like to say to the transactional analysis community?

Gerry: I would encourage transactional analysis people to consider doing the Red Cross training and becoming local volunteers. There is also a continuing need for volunteers who can come to New York City. Hopefully, nothing like the magnitude of the World Trade Center will happen again, but all over the world Red Cross volunteers do interesting and vital work. The need is great. And transactional analysis people have a lot to offer in disaster situations. Our way of working in transactional analysis—its clarity, emphasis on direct communication, way of looking at things—is very compatible with the Red Cross training. People will gain a great deal by being a part of their communities. It's very satisfying to step up and help other people during a disaster.

Bill: And people can find out about this training through their local Red Cross chapters?

Gerry: That's right. I hope many *Script* readers will take the training. I think they'll find they will have a lot to contribute and that it is very rewarding and vital work.

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fall, who were covered in dust, and even one firefighter who was buried and later rescued.

Amid all the profound and intense experiences there are two that really stand out for me. One was that for many people this was not the first extraordinarily daunting experience they had had. I talked at length with a Vietnamese man who in the early 1970s had been one of the children fleeing Vietnam. His boat sank, and he was in the water for nearly two weeks before being rescued and brought to the United States (he now works for the government). I also debriefed a psychiatrist who wanted to know more about helping people with trauma. Several years ago he was on a plane that was hijacked from Yugoslavia and was rescued by Israeli soldiers. For others, the events since September 11 have been the backdrop for intense experiences in their own lives: children with life-threatening illnesses, jobs that have evaporated, wanting to get back to business as normal when "normal" is hard to find.

I was also deeply moved by the spiritual confusion that many people expressed, much of it centered on the dead and their souls. A Vietnamese man said that he had reservations about working on "the pile" because in his belief system the soul stays near the body for three months and six days. Many of the iron workers cutting the massive fallen beams were Chippewa Indians, and they began wearing their medicine bags because they felt that they were on a sacred burial mound. Several Jewish building inspectors worried that their friends could not have memorial services because their bodies had not been found. Because dirt had been brought in to stabilize the cranes while they worked on the ruble, the belief that the ground "needed to be sanctified" was expressed to the police chaplains.

There has been more than the usual amount of partisanship in the responses I have seen. Many therapists resented having to go through the Red Cross system to have access to certain sites. The Red Cross itself bungled several situations, not the least of which was failing to put out clear messages concerning what was actually being done. The degree of disruption from the terrorist attacks was replicated in our responses. There has also been an unfortunate tendency, due to the media focus, to think that the only area affected was New York City. In reality, there are many people suffering directly due to the ripple effect of such dramatic violence.

I have also been profoundly moved by the loveliness of compassion in people I have met. It has also been helpful, as the months have gone along, to find out bits of information and explanation about events which, at the time, were a mystery as to people's feelings, motivations, and actions.

I have a rather odd, haunting image that has remained with me and sums up my experiences. One night, taking a break at the respite center at Ground Zero, I was standing on the roof watching the crew work on the pile. It was profoundly dark except for the eerily and brightly lit area where the World Trade Center towers once stood. Suddenly, electrical connections were repaired and the lights went on in some buildings nearby. Across the way, the lights came on in a parking structure where abandoned cars, neatly parked, were covered in a foot-high blanket of dusty debris. I wondered who the cars belonged to and what it would be like when they were finally brought home.

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The Script ITAA

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On the Streets of New York



by Richard G. Erskine

These days when I leave my office each afternoon on the way to the gym, Hector gives me a warm "Hi, Doc. How are you?" He often calls to the other vendors, "Yo, here's the Doc." We chat for a few minutes and he catches me up on the street news. He tells me how the street vendors are doing, who is acting "crazy" on the street that day, about the happenings at the World Trade Center site, or about the war in Afghanistan.

Hector is a barrel-chested Puerto Rican who sells socks on Third Avenue between 85th and 86th Streets. His neighboring vendors along Third Avenue sell all sorts of seasonal items: umbrellas when it rains, gloves and woolen hats when it's cold, New York Jets and Rangers sweatshirts, knock-off Gucci handbags for $25.00, or imitation Rolex watches for $10.00. But Hector sticks to selling the same product because he has loyal customers; he enjoys seeing the same people return over and over for his bargain-priced socks. For years Hector's favorite customers were the firefighters of Ladder 13 and Pumper 22. The fire station is just around the corner from Hector's place of business, a folding table piled high with various brands of athletic socks.

Although I had seen Hector many times over the past few years and had even bought socks from him, we had never had a conversation. Hector and I met at about midnight on Saturday, September 15, a few days after the terrorist attack on the World Trade Center. Since September 11, I had been going to the local fire station on East 85th Street to talk to people and do whatever grief or trauma counseling was even possible. Nine of the firemen, including the captain that I had known, died in the collapse of the World Trade Center towers. The fire station had become a shrine of mourning: Each evening 85th Street was closed to traffic as mourners gathered by the hundreds with candles and bunches of flowers. They prayed silently or sang a few songs like "Amazing Grace" or "America." Signs of tribute to the dead firemen covered the front and sidewall at the fire station. Amid our collective grief there was still some hope on that Saturday—the rescue workers had found some people still alive.

The fire station no longer served its original function; the two fire trucks were crushed in the rubble of the collapsed buildings. The firemen that had been off duty on Tuesday morning were now pressed into around-the-clock rescue service. Several firemen had been called out of retirement to attend the station house and to receive mourners' condolences. The retired firefighters were functioning more like chaplains than firemen.

That Saturday night, near midnight, I was inside the fire station talking to one of the retired firemen when Hector began to call out the names of the lost firemen. Hector was drunk. He had been at the station earlier and the fireman-come-chaplain was weary of him. Hector was loud and demanding of people's attention. His form of grieving was so different from that of most of the quiet mourners who came with tissues and candles in their hands.

I went to Hector and asked him how he knew the names of the dead firemen. He told me how they all bought socks from him. They were his friends. He kept shouting, "God bless the firemen" and "God bless America." Together we began to sing "God bless America." Hector with his loud Spanish accent bellowed out the song. Tears began to well up in his eyes. As we looked at each other, each with tear-filled eyes, he began to sob. I reached out and put my arms around him. He collapsed into my lap as I sat on the floor of the fire station. I held this large man as he wailed out his grief over the dead firemen and then continued to cry over his buddies who died in Vietnam. Hector's pain was intense.

When Hector finally finished crying, one of the retired firemen helped me to my feet and while putting his arm around my shoulder said, "God bless you." At that moment, I burst into tears. I cried from my whole body. I had not realized how deeply I had been affected by both the traumatic events and the grief of all the people with whom I had been talking. Afterward, I assumed that this was the end of my traumatic reaction.

The following Wednesday night I took my men's group to the fire station. Three of the men had been unable to grieve; they were mesmerized by the repeated scenes of the tragedy on television. Their disavowal of affect took the form of fascination with how the buildings collapsed or a loss of reality in the form of "I've seen this film before." Two of the men reported quietly weeping every time they saw a missing person sign on a tree or lamppost. Two others had escaped the fire and collapsed buildings.

We worked as a group in a circle on the floor of the fire station where the destroyed fire trucks were once parked. The retired firemen showed us photographs of the dead firemen holding their babies and young children. The reality of the tragedy was right in our faces. The whole group wept. Some expressed their outrage. Perhaps a hundred people stood around and watched our group process as we talked about our feelings and held each other. Hector was again in the crowd of mourners, but this time he was sober and no longer boisterous.

On the way back we stopped to look at a car that had been parked in front of my office for a week. The car was covered in white ash and on the front window it bore a firefighter's parking permit. Someone had written in the white ash with his or her finger, "You gave us your life. You are our Hero." Piled in the backseat were the uniforms, skates, and hockey sticks of a boy's team. Some boy's father and a team's coach died a hero for all of us.

Every tree and lamppost had signs and photographs that asked, "Have you seen my daddy?" or "Do you recognize my wife? She was last seen leaving the 73rd floor. She must have amnesia." The reality of this traumatic event continues for all New Yorkers.

This was not the end of the grief and trauma therapy for the men's group. Six months later we are still dealing with traumatic stress reactions. My patients' dreams are of falling buildings, smoke-filled rooms, or being paralyzed in the face of danger. A tension still exists when people are going up an elevator in high buildings or when an airplane flies low over the city.

For the past few months, I had been feeling guilty that I had not done more than I did at the time of the World Trade Center attack. I did not work at the site removing rubble, as one of my patients did. I did not work for the Red Cross in their disaster relief shelters as some of our transactional analysis colleagues had done. I did, however, immediately register to work as a therapist at Lenox Hill Hospital. But after the second day there were very few people seeking therapy at the hospital. I was disappointed in my efforts to help so I went and volunteered at the fire station next door to my office. I wanted to do some serious psychotherapy with the many people who came to the station, but there were few openings and no such contract. All I could do was to encourage people to "just talk" and to tell their stories: "Where were you when it happened?" "Who do you know that escaped?" "Do you know anyone missing?" "How are you managing?" Inquiry and attunement were the only things I could provide.

"I wanted to do some serious psychotherapy with the many people who came to the fire station, but there were few openings and no such contract."

All my life I've been a busy, industrious person, particularly if I am interested in the task or it furthers some personal goal. Since the weeks after September 11, I have been psychologically running in circles, doing multiple tasks at the same time, feeling under pressure, and making many mistakes. I have been what I had always been, but more intensely so. I had a feeling of urgency that would not subside.

This past week I finally had the opportunity to be a part of a group of psychologists who were involved in direct services to the families of the victims, the police department, and the Red Cross shelters. My lingering sense of guilt began to subside as they revealed their stories of how they were involved in the tragedy. All described how they were not able to do any serious psychotherapy; people were just not emotionally available for that. The policemen, firemen, and rescue workers did not want to talk about their feelings; they just wanted to get the rescues completed. The members with missing families wanted information, not therapy. These psychologists described how they passed out tissue, listened to countless stories, and got people to tell of their escapes. They did the same thing downtown that I was doing uptown.

One therapist described her past traumatic stress reaction as an attempt to do many things at once. Another described the unending task of consoling the many family members of those who had died. Another pointedly described how in spite of all she had done, that she had a constant sense that she could not do enough. Then I realized that my sense of urgency, multiplicity, and chronicity was my posttraumatic stress reaction. Although I cried with Hector and the other mourners at the fire station, I was carrying the grief of countless numbers of people for whom I did not have the energy or time to be fully involved.

Now I am back to a more natural pace; the urgency has subsided and I am able to be fully contactful with the task at hand. And although there are many more people still suffering with posttraumatic stress reactions to September 11, I can only be involved with one person at any given moment.

On the streets of New York City, Hector and the other vendors appear to be doing business as usual. It is early spring in New York and the vendors now have Yankee and Mets t-shirts and baseball caps, light raincoats, and other spring items. Hector has a sale on lightweight socks. On the surface, life seems normal, but I know that internally this tragedy has affected us all. New Yorkers will never be the same; we have shared a tragedy and a profound intimacy. My hope is that we can learn and grow from the experience.

Richard Erskine, PhD, is the director of the Institute for Integrative Psychotherapy in New York. He can be reached at 500 E. 85th St., New York, New York 10028, USA, or at Integpsych@cs.com .

EXAM CALENDAR

Exam	Exam Adm.	Exam Date	Location	App. Deadline
CTA Oral	COC BOC	July 4, 2002 Nov. 12, 2002	Utrecht, The Netherlands Perth, Australia	April 4, 2002 Aug. 12, 2002
TSTA Oral	COC	July 4, 2002	Utrecht, The Netherlands	April 4, 2002
CTA Written	All Regions (Non-Europe)	Your choice	To be submitted to Regional Exam Coordinator after payment of $50 recording fee to T & C Council	Your choice
TEWs	PTSC	July 1-3, 2002	Utrecht, The Netherlands	March 1, 2002

* If COC CTA exam candidates are also doing the COC written case study, this must be submitted no later than six months ahead of the oral exam date. Full details and application papers can be obtained from the COC Language Group Coordinators.

Please Note: Exams are subject to availability of examiners and exam supervisors. BOC will not be responsible for expenses incurred where the unavailability of examiners or exam supervisors causes examinations to be canceled or postponed. To be an examiner for an ITAA/BOC exam, examiners must be at least a CTA for a CTA exam or a TSTA for a TSTA exam.

To make arrangements to take a BOC exam, contact the T&C Council, 436 14th Street, Suite 1301, Oakland, CA 94612-2710, USA. **To arrange to take a COC exam,** contact your EATA Language Coordinator. Check with the EATA office or the *EATA Newsletter* for the name of the appropriate Language Group Coordinator. **TSC Training Endorsement Workshop fee:** $395 payable in US dollars to T&C Council, c/o the T & C Council office, 436 14th Street, Suite 1301, Oakland, CA 94612-2710, USA. **COC Training Endorsement Workshop:** to take a COC TEW, contact the European TEW Coordinator, c/o the EATA office.

Members' Forum

OWNING THE VIOLENCE WITHIN

Dear Bill:

Shortly after the Berlin Wall came down, Hannah Siegel, the Kleinian analyst in London, wrote a short article called "The Need for an Enemy." In it she wondered who would become the "evil object" that Western countries would use to replace the Soviet Union/communism now that the wall was down. It seems that we have found the enemy in "Muslim fanatics." I put this in quotes because I do not really believe that the war in Afghanistan is about terrorism at all. Rather, I think it is about the "need for an enemy" on a psychological level and a disguise for finding ways to get the oil in Uzbekistan out for industrial use on an economic level. I don't think it is by chance that US State Department officials were conducting talks with the Uzbekistan government about oil development while the United States and Britain were the leading forces in attacking Afghanistan in the name of eliminating terrorism.

Wilfred Bion, in *Experience in Groups,* described how when a group is in distress and authority is questioned, the group can be made cohesive by finding an external enemy against which to unite. This is a different way to describe the need to disown the conflicts within a society rather than dealing with them. So rather than deal with the vast gulfs that have developed between the haves and have nots in most Western countries, we can make the external have nots the enemies. Rather than explore the growth of religious fundamentalism and extreme political conservatism in Western Europe and the United States, we can make the "Islamic fundamentalists" the bad guys. Sometimes I think that if Osama bin Laden hadn't existed, we would have had to invent him.

Like you, I hope that the Utrecht conference will lead to dialogue and debate that acknowledges the violence within all of us—that it is a part of human nature—and helps us find some ways to own the violence, contain it, and use the energy constructively.

Frances Bonds-White, Philadelphia, Pennsylvania, USA

THE AFTERMATH OF SEPTEMBER 11

Dear Editor:

In response to your request for articles and letters about what people in New York City have been doing to help since the tragedy of September 11, I thought you might be interested in the following, which I wrote to friends overseas in October.

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These past few weeks have been difficult for almost everyone, and I've been wanting to write something to the people I care about who are not living in the United States to give some kind of first-hand report—a little more personal in nature than the news—on the situation here in New York.

Generally, the population in and around New York is stunned. It's hard to put it any other way. People have trouble concentrating on their jobs. They "force" themselves to do what the mayor and governor have been asking: to get back to normal by going out to eat in restaurants, seeing movies, plays, concerts—stuff that New Yorkers do. However, loud sounds startle people, nightmares have entered virtually everyone's dream repertoire, and people are having trouble sleeping in general. For the most part there is a lovely spirit of cooperation and generosity in the city, but it is sometimes replaced with the irritability that constant worry brings. And I'm only speaking now of the New Yorkers who have no personal connection to the disaster. The grand majority of people actually don't know anyone who was directly affected by the World Trade Center attacks. But almost everyone knows "someone who knows someone"—one or two degrees of separation.

The city has ad hoc "shrines" by the dozens. Even now, there are places where people can put photographs and notes about people who were lost. Often, on these big bulletin boards, are notes back to the survivors, some anonymous, some not, with a surprising and total lack of graffiti, the American hobby.

The firemen are the clearest heroes in the disaster, particularly because they lost more then 300 of their own men in the collapse of the buildings. I dare say there is not a fire house in New York that doesn't have a shrine made by neighbors and passersby: candles, flowers, food, signs of thanks from the people of New York. People as a matter of course walk into firehouses off the street to say hello or to deliver chocolate chip cookies that neighborhood kids have made. The firemen continue to be very touched by each contact. New Yorkers also talk spontaneously to policemen and emergency medical service personnel on the street, thanking them. There is a particular pleasure in watching black and Latino New Yorkers and policemen chat and celebrate one another, as their relationship over the years has been so tenuous.

The people who have been directly affected by the disaster are in various states of pain and distress. The state, the Red Cross, the city, and others have set up innumerable programs of all kinds to give the help that is needed. For the first two weeks, many families were reluctant to acknowledge that their "missing" person had died. At this point, however, death is being acknowledged in almost every case. Families and other survivors are being given emergency assistance for immediate bill payments, such as rent, food, and so on, and plans are being made for longer term help. People at every socioeconomic level need economic assistance since so many of the victims were the breadwinners for their families. In addition, people who lost their jobs as a result of the disaster are also being given assistance. Perhaps the saddest group is the illegal aliens—their dead were not reported/counted, they were already living hand-to-mouth, they are reluctant to come to service centers for fear of "being caught," and few of them have enough money to return home to their own countries.

For some reason I didn't understand at the time and still don't, I finished the advanced disaster mental health courses for the Red Cross in April. So my "credentials" have given me the extraordinary opportunity of being active in the aftermath, for which I'm most thankful. For everyone here, being able to *do something,* anything, makes life a little easier to live. So I've worked with the rescue workers at what they call "Ground Zero," that is, the actual site of the collapsed buildings, which is a breathtaking sight that no photograph or television coverage can capture. The workers tend not to want to stop working for any reason (especially the firemen), and my job has been to beg, cajole, or talk them into drinking water, eating, or even changing their socks, which get dusty and full of asbestos very quickly.

Among my other jobs has been taking extended families of the dead to the site to see where their loved ones died. This past week I spent time working with the illegal aliens, trying to find them to give them services. But my overriding job has been to be available to talk to rescue workers, firemen, cops, families and even Red Cross workers themselves. As you can imagine, the pain of those people who are this close to the tragedy is enormous. On Sunday we will be taking the extended families and friends to the disaster site, where President Bush, Mayor Giuliani, and other officials will hold a memorial service. Ashes from the building will be given to each of the families, who will then at least have something tangible to bury.

Some amusing things have also happened. At one point I was called over to translate, but when I introduced myself in Spanish, the gentleman said he was Russian. Another time, by default, I was put "in charge" of Elizabeth Taylor, who arrived at a family service center at about 1 am wondering what she could do. Nothing. But she did need to talk!

New York Red Cross workers have been suffering from a kind of "imperialism" that people in the rest of the world have long known. The National Red Cross Team came into New York from all over the country within a few days after the disaster, and though they brought tremendous technical knowledge (setting up complicated computer systems in hours, putting together shelters for displaced people quickly and efficiently), they simply did not understand "our people," the subway system, and things like that. The ensuing cross-cultural conflict was sometimes quite funny.

I hope this letter gives you a sense of what's up here. I send it with my love.

Ilka Peck, New York, New York, USA

Dear Editor,

September 11, 2001, Chicago, Illinois, my in-laws' house. A call from my sister-in-law: "Turn on the television, a plane's crashed into the World Trade Center." So began my encounter with the terror.

My son goes to school four blocks north of the WTC, Borough of Manhattan Community College. He had class that morning and heard on his walkman as he walked to the subway that a small plane had crashed into one of the towers. Emerging from the subway in Manhattan, he saw the fiery scene and stood watching with other stunned and upset students while the tragedy unfolded. He was most impacted by the sight of people jumping or falling from the burning towers. Then the first building started collapsing and he ran, first to the subway line to our home. It had been stopped. Then he ran toward the Brooklyn Bridge but was stopped by a policeman and told to go north toward Canal Street. Ash was falling like snow, but he was far enough away that he was not enveloped in the tidal wave of smoke, dust, and debris that we all viewed on television. Thankfully, he got to another train route, and when he got to Brooklyn he walked home because the busses were filled to capacity.

We couldn't get ahold of him until three in the afternoon, over six hours after the first plane hit. We were worried but not crazed . . . yet. We were relieved to find out he was OK. We called often to get him to talk about the experience. He did and was fine.

I sat watching the news coverage, aware that one of my clients worked in the upper floors of the WTC. It was very difficult to be away from the city, from my son, our friends, my clients. We were visiting my mother-in-law, who was recently moved to a convalescent center, and we didn't feel we could abort the visit. I was scheduled to fly to London a few weeks later to do a conference presentation. It was a great opportunity for me, and I had been looking forward to it, but I decided to cancel my trip because it didn't seem right for me to be away from family and clients in the few weeks after the disaster. I also didn't want to give my family and some of my clients that kind of worry.

My client didn't make it out of the WTC. Neither did a former client, the ex-wife of a current client. And our upstairs neighbors lost a family member. We found out a week later that he had gotten out and then went back in to help rescue others—one of the many civilian heroes.

In the coming weeks, even though I was certain that my client had perished, I kept his appointment time open and stayed in my office the entire hour, even though I could have gone home. I was doing what many of the family members were doing. "Maybe he got out and went to his house in the Catskills and is in shock and so that's why he hasn't contacted me." This person was super responsible. He would have contacted me. But knowing that didn't quell my hope that he was still alive and would just turn up. I finally went to the family assistance center. His name *was* on the list of the missing. It hit me really hard to have it confirmed. I started crying. Several volunteers at the center came up to ask if I was OK, did I need some water. Their attentiveness was intrusive but, I understood, well intentioned. I spent time looking at the wall of posters hoping I would see his face. It was surreal to have this person and the other two whom I knew just snatched from my life, without a trace. It still is. And it still hurts to think about them and the tragic, horrifying way they died. And even as I write the word "died" here, the little bit of doubt is still there.

I came back from Chicago fully intending to volunteer my services somewhere. I didn't. Looking back, as this letter is forcing me to do, I just wasn't prepared to face the deaths of these three people, and so I wouldn't get myself up in the middle of it all.

In January, I started working in a Federal Emergency Management Administration-sponsored project designed to counsel people who were suffering residual effects of stress from the WTC disaster. I worked in an elementary school. I designed a "stress check-up" that I took into the classrooms; it focused on having the kids talk about, draw, and write about their 9/11 stories. The objective was to help kids identify if they still had some problems dealing with the tragedy. This particular school had done a great deal right after the event to help the kids work the whole thing through. By the time I worked with them, they had a lot to say about it, but only a few still needed individual counseling.

Because I live in Brooklyn, I often drive near the WTC site on my way home. I think about the name given to this site, Ground Zero. It rankles me—the social narcissism that leads us to think that this kind of tragedy only happened here. I and we have been touched personally by this horror. But the same magnitude and worse have been going on year after year all over the world and even here in the United States. We are very complacent until our vulnerability is exposed. The hundreds of thousands of starvation deaths, including those in the United States, have not been horrifying enough to cause us to launch a war. Rwanda is another horrifying example of complacency from all quarters until it was too late.

I consider Ground Zero to be a continuation of the passive behaviors that do not solve the real problems of the planet. And from that point of view, it is certainly more disturbing than my own personal losses.

Damon Wadsworth, New York, New York, USA

Conference News

Utrecht Conference Plans Continue to Unfold

by Marijke Wusten

Special Day Highlights Transactional Analysis in Education

Among the many workshops planned for the Utrecht Conference, one day will be devoted to applications of transactional analysis in the educational field. Regardless of what country you come from, I'll bet being a teacher there is not an easy job. Difficulties in society are well reflected in the culture of schools: individualism, materialism, immigrants who do not speak the language, cultural differences, loneliness, drugs, criminal activities, conflicts, violence, and more. To address some of these challenges, the conference committee has put together a special educational track for Friday 5 July. The presentations will include:



Miriam Toth on "How to Deal with Violence in Schools"

Richard and Deborah Stapleton on "Using Transactional Analysis to Reduce the Probability of Students Resorting to Violence"

Caleb and Bill Cornell on "Why Kids Kill Kids: The Root of the Problem"

Thomas Pohorely on "Paulinchen war allein zu Haus, die Eltern waren beide aus"

Laura Bolardi Shiel on "Reparenting the Inner Child in South America"

One of our members, an experienced teacher, will introduce the presenters and help pull together the outcome of the different workshops. It promises to be a fascinating day for everyone who is interested in the field of education.

Conference Wrap-Up to Honor Founders

For the last day of the Utrecht conference, we have created a special program to celebrate several of the founding mothers and fathers of transactional analysis who will be in Utrecht. This is a unique opportunity not only to benefit from their vast experience and from seeing them work, but also to honor them for their pioneering work. So, right after Richard Erskine's keynote speech, Fanita English, Mary Goulding, and Claude Steiner will take the stage and share with the full audience how transactional analysis has influenced them and changed their lives, particularly in relation to the conference theme of "Violence, Let's TAlk." Afterward, the audience will be divided into three groups, each one focusing on a different theme and each one led by either Fanita, Mary, or Claude. In the end, we will all meet again in the auditorium for sharing, wrapping up, valedictory comments, and some short flashes of the videotape that we will make during the conference.

Transactional Analysis in Many Languages

The official language of the Utrecht conference is English, but that does not mean that *all* workshops will be in English (although most of them will be) or that *all* audience members will be fluent in English (although most will be). You may find yourself in a presentation being given in Spanish or Italian, or you may find yourself lecturing in English to an audience that is primarily French or Russian. That's where the EATA interpreters pool comes in. During years of international conferences in Europe, we have regularly used volunteers as interpreters, and by now there is a pool with more than 30 people who are willing to translate simultaneously from or into English, German, French, Italian, Serbian, Croatian, Swedish, Dutch, Spanish, Macedonian, and Russian. Many of them are fluent in three or even four languages. We are pleased that so many people are willing to support the conference in this way, especially since simultaneous translation is an intense and energy consuming activity. Isn't it great—so many nationalities, so many languages, but with transactional analysis as our common vocabulary!

Advertisement Table

Where better to let your colleagues from around the world know of your activities than at an international transactional analysis conference? In Utrecht we will have an "advertisement table" on which participants may display brochures, leaflets, workshop announcements, visiting cards, books, and so on. The table will be located in a central place where conference participants will pass by regularly and can pick up whatever they want to take with them. If you want to display something on the table, send an email to the conference office at nvta2002@planet.nl letting us know what you want to advertise. Please keep in mind that this table is meant for free advertising. If you want to *sell* your books or other materials, you must find yourself a place in the bookshop, for which there are different rules. We can help you with that, too, if you contact us. We hope many of you will use the opportunity afforded by the advertisement table to share what you are doing.



Muriel James, we are delighted to announce, will be joining us in Utrecht after all. Due to personal reasons, she had cancelled plans to attend and is, therefore, not listed in either the *Script* publicity or the program. Although she will not be able to join us for the Sunday program honoring founding members, she has graciously offered to step in wherever else we need her in case of program cancellations. We are so pleased she will be with us and look forward to her contributions, whatever form they take.

Grants Available for Conference Registration

The scholarship grant fund (SGF) is offering grants to cover the cost of registration for ITAA members who wish to attend the ITAA/EATA/NVTA-sponsored conference in Utrecht, Netherlands, 4-7 July 2002.

Conference registrations fees will be granted under the following conditions:

1. The applicant is an ITAA member in good standing.
2. The applicant has not previously received a conference fees grant.
3. Applicants for conference registration fee grants normally must apply at least three (3) months prior to the conference. However, since this notice is being published so late, the deadline for application has been extended to 4 May.
4. Applicants need to demonstrate economic need.

Since there are limited funds available for conference fees, the fund distribution committee invites applicants to apply as soon as possible. Please send your application via air mail to Rosa Krausz, Chair, Rua Vicente Leporace, 42 04619-030 Sao Paulo, SP Brazil; email address: rokra@terra.com.br . Also send a copy of your application to Ken Fogleman at ken@itaa-net.org or fax to him at 510-625-7725 or mail him at ITAA, 436 14th St., Suite 1301, Oakland, CA 94612-2710, USA.

The SGF looks forward to hearing from members who need and will benefit from these grants and who, at the same time, will contribute to the growth and development of transactional analysis and the ITAA so that we can continue offering conference registration grants to other members in the future.

WORLD TA CONFERENCE
4 – 7 JULY 2002
UTRECHT,
NETHERLANDS



Violence, let's TAlk

Sponsored by
Nederlandse Vereniging voor Transactionele Analyse
International Transactional Analysis Association and
European Association for Transactional Analysis

The theme **"Violence, Let's TAlk"** was chosen because of the many ways in which violence has an impact on our society. Violence seems an inevitable part of our life. It can be a positive force, a drive for change, a struggle to set limits, or a powerful call for attention. Violence can be a negative force that destroys, separates, isolates, and kills people. What answers can transactional analysis offer to questions such as: How do we create peace? How do we develop tolerance and mutual respect? How do we maintain violence? At this conference, the many sides of violence will be analyzed within the four fields of transactional analysis: clinical, counseling, organizational, and educational. We hope this conference will offer some answers to these questions.

- Let's meet at the Beatrix Conference Centre, Utrecht
- modern, well-equiped facilities
- in the picturesque, old city center of Utrecht
- in the best season of the year 2002
- 55 workshops
- superb keynote speeches
- fine side programs for children and partners

Registration: Euro €375 or US $345. Students' fee: Euro €138 or US $128.

Conference office: Ahoevah van Praag, PO Box 1197, NL-3800 BD Amersfoort, The Netherlands; phone 31-33-4721764; fax 31-33-4759129; email: nvta2002@planet.nl; website: www.nvta.nl .

New York After 9/11:

Personal Experiences and Clinical Observations

by Marian Weisberg

On 10 September 2001, I relished attending a conference at the United Nations, full of idealism about building a better world. During a reception that evening held on the roof of the UN, I looked out over the pristine, splendidly peaceful city below. Representatives of nongovernmental organizations working to heal the planet encircled me.

The next morning, I joined with my regularly scheduled 8 am treatment group at my office on upper Central Park West in Manhattan. One woman had to leave early for a meeting at the World Trade Center (WTC). At 9:50 am, suddenly we heard a desperate banging on the door. She burst upon the room in tears, hysterically saying that the cab driver refused to take her downtown because a plane had flown into one of the World Trade Center towers! The group stopped. The UN was closed and the rest of the conference canceled.

Several of the group members tried to call their loved ones, but none of the phones worked. The group decided to stay together at my workplace throughout the day. Several could not go home. Tunnels and bridges were closed. One member lived a block away from the WTC. She could not return to her residence for a week. We could not be sure that day whether anyone we knew had died, but it turned out that all those closest to us remained alive.

I stayed with the group for parts of the day. I was aware of being in a new situation, unlike anything I had previously experienced. I realized I was in shock. I looked out the window as thousands of people crowded the street, trudging north away from downtown. Many appeared disheveled, stunned, and frightened. A number of my colleagues soon volunteered for the Red Cross, trying somehow to find a way to help. I too wished to do something, but I saw clearly that my first responsibility was to my practice. I wanted to remain balanced and sane, while grappling with my feelings.

A few days later, an opportunity arose to start processing from a therapeutic standpoint the impact of the calamity. Members of the International Society for Traumatic Stress Studies (ISTSS), New York chapter, held a meeting with a group of students at Fordham University. The organizer summarized her knowledge of the parameters and treatment of mass trauma, offering a forum to discuss our reflections about what had happened. We shared information in order to normalize reactions. Many of the students had stories to tell, as did everyone living in New York during those fateful days following the disaster.

Everywhere, I walked past buildings posted with missing person signs displaying photographs. Friends and relatives desperately sought information about their lost loved ones. Reading these sad notices every day personalized the scope of the tragedy. Collective grief exacerbated the individual pain that frequently arrived at my door. More often than not, I found myself comforting people. I reminded them of their strength to cope and reinforced their resilience. Some who had experienced prior trauma already had built-in capacities to adapt well.

Like a lot of New Yorkers, most of my clients feared another attack immediately. Many struggled against an instinctive proclivity to want revenge. They often reported characteristic signs of severe stress, such as uncontrollable crying, numbness, intense sadness, and irrational fears. Significantly, in my practice no one had lost anyone close. However, almost everyone had an acquaintance who was killed, including myself. The person I knew died in one of the hijacked planes.

The atmosphere in the city evoked a sense of mass trauma. The "honeymoon period" brought outbreaks of love and help within New York and from the rest of the world. This went on for several weeks and to some extent continues. Nevertheless, many subterranean tensions troubled the ensuing time. The smell of smoke—a combination of burning airline fuel, dust, and human remains—particularly affected those living in Brooklyn and lower Manhattan. Acrid, unbreathable air hung over some areas for months.

The ISTSS asked me to conduct a workshop in response to the disaster. They had quickly put together a conference for professionals to focus on the emotional and spiritual consequences of the September 11 tragedy. One question concerned what the professional community was doing already, and what could it do more effectively in the future. My seminar was about "Using Transactional Analysis Methods Working with Groups during Mass Trauma."

At the workshop, members shared diverse observations and approaches to the treatment of trauma. They agreed that mental health workers could expect to encounter uncertainty, flashbacks, anger at the perpetrators, feelings of helplessness, experiences of being victimized, reactions of guilt at surviving, and participation in collective grieving.

Few participants were familiar with the dynamics I explained of the drama triangle. Helping professionals typically feel they are "not able to DO enough." To counter helplessness, those who wrestle with their own victimization as members of the community are liable to undergo a shift from Victim to Rescuer. But Victims can also switch to Persecutors, and some subsequently escalate to violent feeling and/or action.

I described ways that group participation is unusually helpful in working with mass trauma. Groups provide a context in which to identify with others, tell one's personal story, and bear together what may otherwise feel intolerable alone. Expressing common grief collectively is restorative.

Practitioners shared their experience of compassion fatigue and equally great physical exhaustion. We also explored self-care and the necessity of setting limits on giving, to leave room for self-renewal and acknowledging one's own trauma. Many attendees reported secondary traumatization, especially since few had lived with this degree of concentrated death and destruction in their home space. One minority group member noted that she did not experience the same degree of outrage as most of the public. She described feeling oppressed in America from living as a victim for a long time. So the attack on the Twin Towers and the national psyche moved her less than others.

"All had stories to tell. In helping each other, group members provided enormously effective therapy."

At times, I was aware myself of experiencing secondary traumatization. I found it impossible to get enough sleep. I felt intensely alert and tended to cry easily. I noticed that many of my friends reported physical sickness. About three weeks after the event, I left the city one weekend for the Massachusetts countryside. Energy was different outside the Greater New York Area. It amazed me that people seemed "normal," going about their daily lives absent the constant hypertense vibration of Manhattan.

Over time in my practice, clients manifested and acted out certain noticeable symptoms. Their nerves shattered, some would not leave home. They felt depressed, angry, and bewildered. Others wanted to depart the city immediately. One man spoke of joining the Marines.

In therapy groups, members used the communal experience as a place of sanctity. They sought to maintain emotional equilibrium and often appreciated the honest interaction within a safe environment. Many reported a radical shift in their values from a focus on material aims to the importance of interpersonal relationships and family.

The terror restimulated earlier life traumas of a number of people. Everyone had to deal with grief reactions, either in the present or in revisiting past loss. Often group meetings started with shared fear of the unknown. Members spoke of little else for about four weeks. After that, perhaps 20% expressed mild to serious symptoms of posttraumatic stress disorder.

Those who had witnessed the events



especially reported flashbacks, sleep disorders, and nightmares. In groups, participants needed plenty of opportunity to talk, cry, and express feelings, especially sadness, anger, and frailty in being victimized by an unseen enemy. The intimate cooperative connection brought emotions readily to the surface, allowing many to restabilize individually through the joint experience. All had stories to tell. In helping each other, group members provided enormously effective therapy.

I have worked with second generation Jewish holocaust and Armenian genocide survivors. In each case, a major emotional and spiritual struggle arises as to how to deal with being *innocently* targeted for destruction. The World Trade Center devastation posed the same challenge: How does one handle symptoms of stress from such unfair killings in a healthy way? As logotherapist Viktor Frankel wrote, at a certain point hopefully one can find meaning even in tragic events.

The mental health community has struggled with the new emergency. It was not initially ready for a crisis of this magnitude but has subsequently organized trainings, such as those offered by the Red Cross I attended on critical incident stress management and working with terror and mass disaster. These prepare practitioners for the many psychological problems expected in New York's population. To date, the general mental health consequences of the attack have been neither understood nor assessed.

Two months after the event, I went to the opera to hear Mozart's *The Magic Flute*. At one tender moment, I burst into tears and could not stop crying. The beauty and harmony of the music touched me deeply. The libretto offered hope for a better future. My numbness suddenly cracked. Releasing my pain began an opening to healing. I reconnected with sensibility, vulnerability, and joy.

Marian Weisberg, MSW, is a Teaching and Supervising Transactional Analyst in private practice in New York City. She can be reached at 315 Central Park West, New York, NY 10025, USA, or by email at marweisberg@aol.com .

Nominations Sought for ITAA Officers and Trustees

The ITAA nominating committee is seeking nominations for the following positions:

President-Elect
Vice President of Development
Vice President of Training and Certification
Secretary
One USA Representative
Two non-USA, non-European representatives

The individuals elected to these positions will begin to serve 1 January 2003. All officer and board members are elected at large by the ITAA membership (all members will be invited to cast their votes for all positions).

Nominations require the name and consent signature of the nominee (it may be yourself), the name of the person making the nomination, and the name of the person seconding the nomination. Send nominations to Nominations Committee Chair John Parr, c/o ITAA, 436 14th St., Suite 1301, Oakland, CA 94612-2710, USA; fax: 510-625-7725; email: itaa@itaa-net.org. The deadline for nominations is 31 May 2000.

Election Procedures: As per the ITAA bylaws (revised 1996), if there is not more than one candidate per position, there will be no ballot, and the results of the election will be announced in *The Script* newsletter. If there is more than one nominee for a position, a ballot will be mailed to all voting members within 60 days of the close of nominations. The deadline for return of ballots is 60 days from the date of mailing. The results of the election will be announced to the candidates within 30 days after the election results are determined and to the voting membership as soon as practical thereafter.

Welcome to New Members

December 2001

New Member	*Sponsor*
Alison C. Adams	—
Natasa Martinjak	Zoran Milivojevic
Janet Rittenhouse	—
Pamele Rutledge	—

January 2002

New Member	*Sponsor*
David Anderson	—
Panos Assimakis	—
Colin Brett	—
Nadine Emmerton	—
Willem Knibbeler	—
Martin Knight-Willis	—
Edwin Muniz	—
Yuko Ohmura	Chie Shigeta
Marie Pinto	—
Gudrun Stummer	—
John D. Towell	—

Taking Care of Each Other at Ground Zero

by Edie Bogusky-Beaujon



When asked if there was anything I wanted to share about my professional and personal experiences in New York since the terrorist attacks of September 11, I hesitated because I thought there had already been quite a bit written about that. However, as time went by I realized that I had not shared from my perspective some of the most important things about working at Ground Zero and how the experience has transformed my life.

Beginning on September 12 and for weeks following, I went to Ground Zero—the site of the collapsed World Trade Center towers—almost every day in the capacity of mental health worker and chaplain. For me, and many others with whom I have spoken, it was a wonderful place to be; in fact, most who volunteered did not want to leave. How could this be in the midst of all the destruction and grief? In transactional analysis terms, it was the stroke economy. People from every walk of life were there serving each other, and the mutuality of verbal and nonverbal stroking created a moving, transformational experience. One evening walking out of Ground Zero tired and very weary, I walked by a Verizon utility truck and a man reached out and touched my shoulder; with a look of warmth and true appreciation, he thanked me for being there and helping those in need! I thanked him as well and we hugged. Multiply that transaction many times over in many different ways and you can begin to imagine what the stroke economy was like at Ground Zero.

> ***"It was the stroke economy. People from every walk of life were there serving each other, and the mutuality of verbal and nonverbal stroking created a moving, transformational experience."***

For the last decades we have been living in a world in which, as Fritz Perls said, "If I do my thing and you do your thing . . . and if we meet . . ." I remember many years ago Claude Steiner holding up a banner that read, "If I do my thing and you do your thing we may survive, but the world won't." At Ground Zero people were not taking care of themselves, they were taking care of each other. I began to realize that this was the way the world should be and perhaps can be, with everyone giving and everyone receiving, with no lack of strokes. Even material strokes were coming from all over the world in the form of donations of everything you can imagine. It reminds me of Claude's fuzzy tale about the way the world was before the wicked witch came and told everyone there were not enough strokes to go around.

When you left Ground Zero at the end of the day, it was with a deep satisfaction at having served, at having done something important, but also with a sense of having been served. Giving was the same as receiving, and it was this mutuality of stroking that was the marvel of Ground Zero.

Another thing I observed over and over were the redecisions people made as a result of the way this experience changed their lives. They came to realize what is important to them: family and friends and letting them know how much they are loved. Real decisions come from the Child ego state, and often spontaneous redecisions occur when an event touches us that deeply at the Child level. That seems to be what September 11 and working at Ground Zero did for many people, including me.

I like what President Bush said about this tragedy being the beginning of a new ethic for America, an ethic of caring for each other, of working together side by side as we did at Ground Zero. Does it take this kind of tragedy to make us realize that, in the end, race doesn't matter, religion doesn't matter, politics don't matter, money doesn't matter? All that matters is being there for each other. Are we our brother's and sister's keepers? I think those who were at Ground Zero would definitely say yes.

Edie Bogusky-Beaujon is ITAA Vice President of Development. She lives and works in New York, where she can be reached at 322 West 57th St., Apt. 41L, New York, New York 10019, USA; ecbb@mindspring.com .

USATAA Jamaica Gathering 2002

by Fanita English

At the January United States Transactional Analysis Association (USATAA) Gathering we were not as numerous as in previous years—partly because some people hesitated to travel and partly because of competition from another meeting in Mexico—but we had three French visitors who became active participants, three Canadians, and Gordon Hewitt from New Zealand, who represented the ITAA. So in spite of missing some of our stalwarts, we ended up with an active and involved group.

We benefitted again from Diane Maki's untiring efforts at making arrangements for rooms and much else (with the help of her husband, Seth Ravi), so we had luxurious accommodations and good food, not to mention the wonderful beach and swimming—all at very low rates, thanks to Grainger Weston, who owns the property.

Nevertheless, each day we had serious, interesting presentations and involved discussions. Of course, Jim Allen's keynote was the highlight, giving us the benefit of a great deal of up-to-date research on brain function and corresponding child development. And, in true transactional analysis tradition, this complex material was presented in an easy-to-understand manner, with charts and various brain images that enabled us to follow and, I believe, to register some of the ideas within our own occasionally befuddled brains. Thank you, Jim!

Jim was also available for discussion and elaboration, so we had real intellectual treats, even on the beach! For those of you who missed out, there is some consolation to come, for I understand that a volume of selected articles by Jim and Barbara Allen—which will contain some of this information—is being published by the ITAA.

We were also treated to a presentation on evolutionary biology by Gordon Hewitt, so this was definitely a time for getting updated on new science and learning how to incorporate new material into our conceptual frame of reference. There were also a number of other exciting presentations and experiential offerings by participants.

Another pleasure of the conference was participating at a "graduation lunch" for Jamaican professionals, each of whom received a certificate of proficiency for attending nine weekend transactional analysis training "modules." These were organized by Valerie Chang over the past year using ITAA tapes and volunteer advanced members for faculty. As described in an earlier *Script*, this is a great model that we might implement in the United States as a way of acquainting new students with what transactional analysis has to offer. The declining membership in the United States and the lack of interest in advanced transactional analysis training here are quite different from the rest of the world, according to Gordon, who indicated that elsewhere certification is the primary incentive for joining the ITAA. This was a major topic of discussion with some of us, including Jim Allen and Lyman Rigby, the new, involved chairman of USATAA. One thought was that it would be so nice to have a center (maybe in Oklahoma?) where people can come for a series of weekends to become proficient in the use of transactional analysis in their own fields. It was so inspiring to see what transactional analysis has done for the Jamaican professionals—made me wonder why we cannot do that in the United States and reminded me of the early days of transactional analysis in California!

Next year's USATAA conference is scheduled for Jamaica again (can't beat those low rates, beaches, and accommodations!) for early February. In addition, the hope is that the summer 2003 conference will be in North America. So perhaps we can all recruit new members to build a new population of people interested in transactional analysis in North America in addition to us old-timers.

To that end, I have agreed to be the next USATAA council member for the West Coast. So if you live on the US West Coast, whether you are a member of the ITAA, USATAA, or just curious, do get in touch with me! My address and email have changed since publication of the ITAA and USATAA directories. You can now reach me as follows: Fanita English, One, Baldwin Ave, #516, San Mateo, CA 94401; 650-685-8418 (phone); email: FanitaE@aol.com .

Integrative Psychotherapy Residential Workshop - Summer 2002

Richard Erskine, Ph.D.

Friday, August 2 to Sunday, August 11, 2002

This residential ten-day workshop will focus on the theory and clinical practice of Integrative Psychotherapy. Topics that may be taught include: shame and self-righteousness; cumulative and acute traumatic reactions; the schizoid process; and the psychotherapy of dissociation, desensitization, and disavowal. Various methods of working within the therapeutic relationship will be demonstrated and may include contact, inquiry, affective attunement, involvement, and modes of empathy in individual and group psychotherapy.

This workshop is for mental health professionals who want to apply theory in clinical practice and to enhance their effectiveness through identifying aspects of contact interruption, life script, and countertransference. There will be opportunities for case consultation. I will teach, demonstrate, and elaborate on the concepts in *Beyond Empathy: A Therapy of Contact-in-Relationship* by Richard Erskine, Janet Moursund, and Rebecca Trautmann (1999, Brunner/Mazel, ISBN 0-87630-963-5).

Cost: $2495 for tuition, room, meals; reservation fee: $695 nonrefundable
Location: Kent, Connecticut (near New York City)
at the Old Chestnut Inn, with spacious grounds, gardens, and swimming

For information and to register, call or write:
Institute for Integrative Psychotherapy, 500 East 85th St,
New York, NY 10028, U.S.A.
212-734-5291 (phone) * 212-879-6618 (fax)
Visit our website at: Integrativetherapy.com

The Institute for Integrative Psychotherapy is approved by the American Psychological Association to offer continuing education for psychologists and by the National Board of Certified Counselors for counselors. Other professional CE credits are also available. The Institute for Integrative Psychotherapy maintains responsibility for the programs.

Reminder: It is no longer necessary to take a TA 101 course or obtain a sponsor's signature to become an ITAA Associate Member or Regular Member.

TRANSACTIONAL ANALYSIS CONFERENCES WORLDWIDE

July 5-7, 2002: Utrecht, Netherlands. ITAA/EATA/NVTA World TA Conference. Contact: Ahoevah Praag: 31 (0) 33.4721764 (phone); 31 (0) 33.4759129 (fax); ypraag@wsx.nl .

November 13-17, 2002: Perth, Australia. Sixteenth Annual Australasian TA Conference. Contact: Kate Meredith, 10a Itea Place, Mindarie, W. Australia 6030; 08-93051160 (phone); 08-93051150 (fax).

WORKING WITH THE UNCONSCIOUS

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could say unconsciously, I made a proposal that to my conscious surprise provoked a rather fierce and controversial debate. My proposal was that transactional analysts with a clinical speciality needed to distinguish themselves from the organizational and educational fields both publicly and for themselves. I suggested that, in particular, we needed to make it clear that the ego state model we would use as clinicians would be a more complex one than that used by other fields. This is simply because we are more likely to work with the Child ego state and complex psychological states (i.e., unconscious processes). At the time I felt frustrated and alarmed that there seemed to be a lack of boundaries between the different fields, which was confusing to both students and non-transactional analysis people. I also wanted some recognition for those of us who worked with unconscious processes that this demanded a complex structural model of ego states. In some ways this debate continues, but it was partially resolved for some of us when several months later Carole Shadbolt suggested that we form a clinical practice subcommittee. There was an implicit irony in this as it became apparent that the organizational and educational transactional analysts had already formed committees several years previously. Thanks to Carole's commitment and determination, a committee was duly formed.

One of our first discoveries about each other was that we shared the perception that after people qualified as transactional analysts with a clinical speciality they often wandered away from transactional analysis. It was as if they did not have a home unless they wished to become trainers or supervisors, and even those who did still felt that their clinical work was unsupported once they had qualified. We thought that this was a sad state of affairs because we all knew clinicians who worked with unconscious processes and for whom clinical work was a priority.

Other perceptions we shared were that the theory often seemed to get stuck at a certain level of discussion, almost as though it had become cemented. We shared a frustration about this and wanted a forum in which we could move away from the "polished accuracy" of theoretical definitions and in which theory became more of a guide rather than a god—in other words, to move away from fixity and a worshipful attitude toward established explanations and instead to go beyond, not exactly to infinity, but definitely beyond! Our mission statement is along the lines that truth is no longer something out there; it is a way with words that somehow the truth is in the telling of a tale, a move away from literalist interpretation. We are, therefore, committed to advancing transactional analysis from this relational and symbolic perspective as a way of working more deeply with the Child ego state with a view to developing a strong, broader, and deeper Adult ego.

To further these aims, the clinical practice subcommittee of the ITA has started a regular clinical column in the *TAUK* newsletter and organized specific sessions and panels to present varying perspectives and concerns about our evolving clinical theory. The symposium with Bollas and Cornell is our latest achievement and an extension of our efforts at clinical dialogue. Thanks to the graceful negotiating skill of Suzanne Boyd, we were able to put on this event, which is unique in the psychotherapy community because our first guest, Christopher Bollas, now rarely speaks in public.

Bollas began his talk with an intellectual history of psychoanalysis. He spoke eloquently and with passion and enthusiasm for his work with the unconscious. Although clearly a critic of intellectual totalitarianism, he made a congruent and bold case for the practice of psychoanalysis, showing how Freud's intuition and brilliance had been somewhat distorted and ill understood in the years after his death. Bollas returned to primary sources, including two encyclopedia articles written by Freud, to make his case for the use of free association. He argued that Freud, unwittingly, was responding to an evolutionary need: namely, that humankind needed to develop a more overt relationship with its own unconscious to evolve as human beings. Bollas identified the basic psychoanalytic technique of free association (or "free talking," as he has come to call it) as requiring the psychoanalyst to catch the drift of the patient's unconscious process with his or her own unconscious. Bollas argued that this was, and continues to be, a radical process, one that requires the poet and the artist within us to meditate, rather than focus, on the events in the therapy office. He positioned the analyst/therapist as the medium through which the client is able to freely think out loud. Bollas further argued that is it neither the therapist's knowledge of the patient nor his or her relationship with the patient that is the most fundamentally curative, but rather the method itself, which the client gradually learns and internalizes as a means of self-knowing and creative freedom.

One of the most significant features of Bollas's talk was the sense of sheer pleasure in his work that he communicated to the audience. (The full text of this talk will appear in the *TAUK* in the coming year.) When their turn came to respond, there was a high level of audience involvement, with intelligent and absorbing questions and discussion.

> ***"Some difficult issues were raised, such as, how does one contract for unconscious process?"***

When Bill Cornell delivered his talk, the audience continued to be attentive and responsive, despite the hard chairs (the only negative point in the day). Cornell introduced the metaphor of broken containers (in contrast to bad objects), which has stayed with me. So many lives are damaged and impoverished by the lack of emotional and psychological containment within our primary relationships, and clients' unconscious vitality and creativity wither. Often the therapist is sitting with a sense of these broken containers in the room. Picking up on Bion's idea of the therapist as container, Cornell talked about the idea of containing and introduced several vignettes that brought his work vividly to life. He, too, communicated a strong sense of pleasure in his work. There was a lovely paradox in this unlikely but nonetheless recognizable juxtaposition of pleasure in being with those who have suffered brutally and yet for whom we as therapists feel compassion and a willingness and eagerness to stay attuned and attentive as we work together toward transformation.

In his talk, Cornell also outlined a way of understanding primary modes of unconscious experience: the unconscious of repression due to intrapsychic conflict; the unconscious of defense (games, rackets, and character); the relational/transferential unconscious; and the generative unconscious of what Ruth Stein calls our "unsanctioned passions." He discussed the therapist's working relationship to each of these modes of unconscious experience, and drawing on the thinking of Bollas, Eigen, Bion, and Winnicott, he elaborated on the experience of the generative unconscious and the creative, passionate process of psychotherapy. Here the therapist functions as a sort of auxiliary dreamer and container for the unfolding, often disturbing process.

The audience questions for Bill were more connected with transactional analysis, and some difficult issues were raised. For example, how does one contract for unconscious process? In spite of the difficulties presented by such questions, we stayed together to discuss and explore without needing to reach conclusions. All during the event there was a strong collaborative sense between the presenters and the audience. In fact, there was perhaps more of a creative, artistic feel to the day than a scientific one. Most of us left feeling inspired and encouraged to think and feel more meditatively, symbolically, and laterally. There was also a strong feeling of respect and compassion for the human beings who pass through our lives as patients and clients. Perhaps the most exciting element of the experience was to consider that meditating on the unconscious is an evolutionary activity—one that we increasingly need in a world that seems to have lost touch with its unconscious. Reflecting on this, we thought about how frightening it is when archaic and primitive processes are combined with modern technology and acted out in the world arena. Clearly, we need psychotherapists, analysts, and counselors now more than ever to help us as a species to bridge the divide not only between different countries and cultures, but also between our conscious and unconscious worlds.

Helena Hargaden is a Teaching and Supervising Transactional Analyst (clinical) in psychotherapy practice in South East London. She also teaches in the MSc in Transactional Analysis program at the Metanoia Institute in London. She can be reached at 43 Brockley Park, London SE23 1PT, England, or by email at helena@hargaden.freeserve.co.uk .

Notice of a Regular ITAA Membership Meeting

Members are urged to attend the 2002 ITAA Regular Membership Meeting to be held 6 July 2002 from 8-9:30 am at the NVTA/ITAA/EATA conference venue in Utrecht, The Netherlands. The Board of Trustees will be presenting to the membership proposed important bylaw changes that have become necessary as a result of a recent bylaws review of past board decisions. Matters to be discussed include:

1. Office location
2. Deletion of Organizational/ Institutional membership categories
3. Expediting Board meetings
4. Members to vote in regions
5. Executive director change of title
6. Staff compensation authority
7. Term of office for presidents

Further information about each matter will be published in the May-June issue of *The Script*.

As these are important matters, it is essential to establish a quorum for the Utrecht meeting. The ITAA bylaws state that the quorum for the business meeting to act on matters mentioned in the notice of meeting is 50 voting members or 5% of the voting membership, whichever is smaller.



Helena Hargaden

TAJ by Air Mail

Remember, you can get your copy of the *TAJ* faster by sending $25 US for air mail postage to the ITAA office. Make sure we have your current mailing address as well.

Call for Papers for TAJ *Special Theme Issues*

"CASE STUDIES II"

Guest Editor: Bill Cornell
Deadline: 1 June 2002

Following the format of the October 2001 *TAJ*, you are invited to submit a detailed case study of the unfolding of your work with a single client, with particular attention to your thinking process as the therapist—diagnosis, evaluation, hypotheses, fantasies, self-corrections, countertransference, and so on—in contrast to a description primarily of the client and his or her functioning. We are particularly interested in cases that challenged your usual way of thinking and working or that changed your theoretical frame of reference. We also particularly invite case discussions of failed work and your subsequent thinking.

"FOR OUR CLIENTS"

Guest Editor: Carol Solomon
Deadline: 1 July 2002

This journal will contain articles designed to enhance personal growth and change. Topics might include: how to choose a therapist, how therapy works, what is therapeutic success, when is medication helpful, spirituality, humor, money, anxiety, depression, and drug/alcohol use/abuse. For more information, contact Dr. Carol Solomon at drcsol@pacbell.net; phone: 415-929-0500. **We Need Your Help!** Carol Solomon is compiling an article entitled "Advice from Around the World," and is requesting thoughtful statements (50-100 words) from therapists answering the following question: What is the most important piece of therapeutic wisdom you want to convey to your clients? Please let your culture show through and write in your native language as well as in English. Sense of humor appreciated. Send to Carol at drcsol@pacbell.net or to 3610 Sacramento St., San Francisco, CA 94118, USA.

Please follow the instructions to authors on the inside cover of any recent issue of the TAJ *and send manuscripts to Managing Editor Robin Fryer, 1700 Ganges Ave., El Cerrito, CA 94530-1938, USA or email robinfryer@aol.com .*