

Being Authentic, Deeply Accepting and Yet Engaging

At the end of one of our sessions a member smiles and says “That is what I love about you, Art. On the one hand you are like a Buddhist priest, sitting there and holding and being. Yet on the other I have seen you be provocative and shake everything up.” I agree that I am really not one kind of leader but change according to the nature of the cases and what happens inside of me.

When I encounter someone who is deeply paranoid and is guided by a grandiose self, I have no wish to mix it up or to be confronted or provocative. I hold until there is another self that emerges beyond grandiosity. I am present but not intrusive and wait for a self to gradually emerge. On the other hand there are patients who are extremely cut off and my acceptance of this state becomes equivalent to abandonment. When a patient feels very alone and puts a wall up, I try to get behind the loneliness. I play, I provoke, and I do believe that the patient is pleased that I care enough to reach them.

In working with stone, I try to discover the language of the stone. I stumble along, feeling each crevice until it starts talking back to me. I believe this is akin to the process of treatment. Often I do not know where I am going and sometimes end up at a dead end. At times, I take on the role of a provocative intrusive parent. The group responds, often with repulsion or interest. Yet something comes alive by my playful engagement.

I am aware of patients and presenters pulling you in who have a very regressive connection that is governed by confusion and ambivalence. Sometimes I use the element of surprise as I can move from one place to another. Often I get close or pull away depending on what happens at the moment. I offer examples through role playing but encourage people to find their own energy and rhythm. My interventions in the group therefore through roleplaying are more to release therapists to go in their own direction, to listen to themselves, to find out how they differ rather than giving them answers as to how to work with a given patient. The ability to grow inside, accept what you are struggling with, then becomes an important part of the supervisory process. They begin to understand what ground and centering is through our own agency.

I learn by trial and error. At the same time I review the impact of my interventions and often change according to what has happened. Does the interaction become more chaotic

or do I see an even flow of going forward and backward, sharing and then going out. Often I do not know where I am going and will arrive when I arrive. I stumble around but ultimately find the rhythm of what is going on in the interaction.

In many respects, I am describing myself as an artist working with the space in between. Sometimes I will shape, sometimes I will hold. Sometimes I will move back a little but I don't try to be anything more than I am and then change according to what happens.

The biggest confusion is that often people get the idea that what happens in a group is how I would respond to patients. This is far from the truth. I am working with the therapist and hoping to sort of free them of feelings of shame or removal or dissociation. You might call it therapy, I call it intervention. What I do obviously is not what anyone else should do. Each person needs to find their own rhythm of work with people. I also give up my own narcissistic gratification of being seen as wise and thoughtful. Contact comes in many forms and packages. There is no recipe.