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Pandemic and Its vicissitudes

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Journal of The American Academy of Psychotherapists

VOICES

THE ART AND SCIENCE OF PSYCHOTHERAPY

Often when you think you're at the end of something, you're at the beginning of something else.

—Fred Rogers

VOICES

THE ART AND SCIENCE OF PSYCHOTHERAPY

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Reset Redux

OUR THEME, *PANDEMIC AND ITS VICISSITUDES*, EXPLORES THE EVOLVING PHASES OF LIFE AND PSYCHOTHERAPY IN PROLONGED PANDEMIC TIMES. In an earlier issue (Winter 2020) we wrote about our initial pandemic experiences: the sudden shutdown, the challenges of transitioning to telehealth, adaptation to prolonged isolation, and the underlying fears and anxieties associated with a rampant virus and social unrest. A turbulent year later, we stand now, finally and hopefully, at the brink of post-pandemic (or at least post-vaccination) re-entry. Or do we? New variants, waning immunity, boosters—more so than ending, the pandemic has evolved into a continuing dance of two steps forward, one step backwards, sometimes one forward, two back. And we stand (dance) here changed by the experience. Even as we seek a return to normal, some things are forever changed. The world has changed. We have changed. Rather than the return initially envisioned, perhaps we enter a new phase of adaptation. This issue explores the continuing vicissitudes of an unexpected global crisis, beyond our control, that continues to bring vast changes—some negative but perhaps others for the better—to both our personal and professional lives.

For this issue, authors were invited to reflect upon their evolving pandemic experience: what they know now that they didn't before—about themselves and their values, about their vulnerabilities and resiliency, about the world and its dynamics. To consider what has arisen from this new phase of clinical work after adapting to the mechanics of telehealth and navigation of a new mutually-lived pandemic experience. To ponder how they have been challenged and how they have perhaps thrived. And to contemplate how their relationships with self and others have changed in these times of isolation and social distancing.

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Contemplating or beginning re-entry, readers are invited to consider along with our authors what that looks like: What pulls us outward or holds us back? What do we take with us, in new habits or values? What of pre-pandemic life have we shed for good? In living and re-emerging from this pandemic experience, what has surprised us? What have we learned about or confronted in ourselves? How have we been changed?

In the Winter 2020 pandemic issue, I wrote about how despite the many horrors of 2020—and they have continued in 2021, from illness and death on an epic scale to even further political and racial turmoil—speaking on a strictly personal scale, it had not been a bad year for me. I recognized how the surreal experience of pandemic isolation had the potential to fulfill, albeit in a previously unimaginable way, my long-held wish that the world would just stop long enough for me to catch up with myself. I marveled then, 10 months in, that it still wasn't enough time! Despite being at home for all this time, most aspects of life went on, though now in virtual modes, at a pace still faster than I could keep up. Juggling multiple jobs had become a non-stop enterprise, no less so with them all now performed from around my dining room table. The vast downtime and cabin fever others complained of continued to elude me. After completing a second year of life in my tight pandemic bubble, I know now that there will never be enough time for full catch-up! Even as I slowly tick things (big and small) off my backlog to-do lists, personal and professional, more take their place. I concede the lessons in there on living in the present, doing now, not letting backlogs build, not waiting for someday! And recognizing the non-sustainable pace I've been on, I'm working at rebalancing.

More important than clearing the backlog though has been the internal journey of having spent so much time with myself over these 2 years. I've always known myself to be independent and self-reliant, but also connection seeking and ever on the go, so never imagining this much time with just myself. I wrote before of the unique peace to the initial isolation of 2020: how knowing that everyone else was hunkered down also—that while I might be missing people or activities, I was not *missing out*—I settled into solitude differently. Leaning in, I embraced the opportunities at hand, both for catching up and for exploring new virtual offerings, and the chance to reconnect with myself and rediscover what refuels my soul—and in turn my practice.

The second pandemic year, post-vaccine 2021, has been more complicated. Easier in some respects, with the telehealth routines down and new rhythms for the changed times, but there are more shades of gray in the increasing pulls outward. Varying degrees of opening up require more decisions about where to draw the lines of my pandemic bubble. I've kept mine tighter than many, partly to minimize the health risk, partly doing what I can to contain pandemic spread so this can end, and partly in pursuit of more of that elusive pandemic downtime and catch-up opportunity before it does. Too busy juggling the work at hand to give sufficient attention to the protocols necessary to safely reopen my office, I missed the initial window for possible re-entry. Just as I came up for air and it seemed time to plan that return, there came the variant dance and waning immunity. I began to realize, too, that returning to the office is going to be far more complicated than the sudden shutdown, as newer clients now Zoom in from distances they aren't going to want to travel in person, and even some continuing pre-pandemic clients have moved or settled into work-from-home modes. Zooming from my office, between in-person clients, would continue all that I don't like about telehealth without the positive benefits of being at home. So, I'm still here, in my bubble, with telehealth,

my to-do lists, and myself.

Though perhaps keeping a tighter bubble than necessary post-vaccine, in doing so I experience less fear or anxiety than I see manifested by many who push the envelope. (Or mine is saved for the increasing existential angst about the alarming political precipice at hand—I wonder what life looks like down the road not taken, where we didn't politicize a global pandemic...) Amidst all the unknowns that come with an unprecedented pandemic, and all the confusion and controversy it generates, I keep to my bubble and focus on what is within my realm of control. (OK, I'm still working on not raging at uncontrollables like the blatant lack of integrity among politicians or the elevation of stupidity and conspiracies over science...) Leaning in, rather than chafing at pandemic isolation and restrictions, preserves my energy and opens me up to the growth opportunities presented by pandemic adaptation and to the possibility of a deeper reset for better balance in a post-pandemic life (someday).

While I do miss people and certain activities, I continue to embrace this time with myself: a time of life review, reckoning, and reset. I've spent many inspiring hours of the pandemic with the poet David Whyte, whose periodic virtual series explore through poetry the restorative dynamics of isolation—the turning inward, into self-reflection, reckoning, and revision, and the moving out again, changed, in re-entry. He speaks, throughout his work, of stopping the conversation you're having (with the world, with work, with a relationship partner, or with self) in order to discover and begin a new one. I hope I'm doing just that in my pandemic bubble. It sounds far more eloquent in his words than in my fantasy of stopping the world so I could catch up...but that's why he is the poet.

I don't know that I've been radically changed by my pandemic experience, so much as come home to self. Among other projects, deep cleaning bookshelves and handling more than 1,500 books (too many never read and so many more I'm eager to re-read, well beyond the scope of any amount of potential pandemic catch-up time), I traveled back through the life journey reflected in that reading history, revisiting the versions of me that read (or intended to) each book. While I continue to evolve in different directions, those earlier versions of me are still within, part of me and of the uniqueness of me. In reclaiming them, getting to know them again, and spending some time indulging their continuing interests, I'm sifting through the impacts of paths taken and not taken, shifting some scripts, and rebalancing my time and energies. This personal renewal in turn re-energizes my practice of psychotherapy, newly poised for growth as I shed the remnants of an earlier career and an exhausting dual profession mode. While not exactly the world-stopping catch-up that I once fantasized, it is a deeper journey—one I hope will continue even beyond pandemic time. Or in whatever replaces a beyond-pandemic time...

Surprisingly, it hasn't been hard to stay home and spend all this time with myself. But I wonder how hard it is going to be to re-emerge: not just the complexities of converting my practice back to in-person (yes, please!) but to adjust to being around people again, resume activities out in the world, while holding on to the groundedness and intentionality of this time. The few occasions I've met friends in person have felt surprisingly normal despite the rarity. But I wonder which friendships and activities will be forever changed or lost, and which will pick up again as if never interrupted. I wonder, too, what it's going to be like to meet in person new clients known only through a screen. Or to

shift the frame again with pre-pandemic clients after this time that has changed us all. I'm pretty sure re-entry will seem almost as surreal as the shutdown.

In this issue, authors offer their reflections on the impacts of this unprecedented experience on their lives and practices. Three start us off with poignant portraits of their self-reflective pandemic journeys. Elizabeth Valera reflects on what a vivid dream taught her about disavowed aspects of herself and how incorporating expressive arts helped her claim and transform these parts. Lauren Gardner muses over what she allowed herself (and her clients) to see and what she sought to deny about herself, the pandemic, climate change, and more. Giuliana Reed looks at her shadow side, revealed in parallel with the growing plagues out in the pandemic environment and in-house.

Cynthia Baum-Baicker writes of grounding herself in the attachments and mentors of her past, then drawing from the clinical wisdom from that professional life review to create a blog of coping skills for navigating pandemic isolation. Jen Sermoneta leverages her long-time interest in salvage and reuse into pandemic connections and an outlet for coping with stress and grief. Sara Mansfield Taber shares a memoir of her mother, a fierce helping force in another time, drawing parallels with present day first responders and in the process reclaiming her own value as a second responder. Melinda Salzman reflects upon the experience of returning to in-person sessions in a new normal.

Two groups of friends share their stories of maintaining connection via email and text threads, drawing support and self-awareness from their shared pandemic reflections. Catherine Grothus, Heather Castro, Mimi Martin, and Sara Shiffman reflect the pandemic experience of parents of young children, and in her commentary, Daryl Ellen Gincherman vicariously joins their conversation with her own reflections. Roberta Caplan narrates the deepened connection and support four psychologists at a later stage of life and career found via ongoing group text.

Several individual authors describe pandemic experiences at various stages of life: Erika Bugaj writes about being a therapist and a single mom to young children in lockdown; Laura Tapscott reflects upon pregnancy and motherhood during the pandemic and her decision to return to in-person practice with infant twins and a toddler at home; Michele Cole recounts how having young adult children return home for the pandemic paralleled her work with emergent adults, highlighting some differences in how this age cohort responds to the pandemic than others; John Gaultieri and Pamela Torracco share their respective experiences of retirement in pandemic, and recently-retired Grover Criswell and Susan Jacobson offer their commentaries stirred by Gaultieri's story. Finally, Nick Bustos relates how his spiritual journey helped him overcome resistance and embrace the changes brought by the pandemic.

Jillian Thomas presents a poem and photo essay capturing the pandemic refuge she found in daily sunrises and sunsets. Eileen Ivey, Hanna Yerushalmi, and Neal Whitman also share original poems reflecting different stages of the pandemic.

Laying out this issue as we move through the winter holiday season and into 2022, we dance between hopes of a post-pandemic re-emergence and renewed anxiety around variant surges. Our Spring 2022 theme, *Hope and Rebirth*, will explore what sustains us through dark times and how we see or await the return of the light.

Meanwhile, if you read something that speaks to you, let the authors know. Keep voices connecting! ▼



Woman with Glass Shards: A Pandemic Dream

IN MY DREAM, I'M IN A CAFE. I am standing at a high counter-like table with my work laid out before me. Across the room, there is a comfy sofa and a few cafe tables. Beyond the sofa and small tables, I see coffee makers and a display case for pastries, though it appears empty. Approaching the sofa, is a very, very large woman. She has shoulder-length light brown hair and is wearing a loose dress. Her arms are stretched wide, holding a cardboard box filled with pieces of glass. All of the pieces are triangular, in various bright colors: red, blue, yellow, green. I can hear her talking about the box of glass from across the room. She is concerned about what she can make out of all this glass. Now seated on the sofa, she rests the box on the coffee table. Another woman in the cafe is seated near her and engages with her about what to do with all this glass. I am watching from across the room with an air of superiority and sense of relief that the other woman is providing support. The "I" of my dream feels physically strong and proud to stand on her own two feet, while the woman with the glass shards appears so large that she needs to be seated. My dream ego worries about being like the woman with the shards, about being too large, too needy, too overwhelmed—or overwhelming to others.

It was late January of 2021, and I felt the weight of the pandemic months dragging behind me as well as those looming in the future. Each day was full of telehealth sessions where I did my best to hold space for what seemed like lots of interrupted dreams, broken hearts, and overwhelming stress, anxiety, and depression. Honestly, I had gained weight from eating comfort foods for the first few months. My knee problem had flared up the month before this dream, and I had been laid up on the sofa for more than a few days. I awoke from the dream with a positive feeling that my knee was strong enough and I could stand on my own. This was a nice, reassuring feeling. I didn't want to look too closely at my attitude of

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superiority toward the woman with the shards. Yet, she stuck with me. I felt the pain and frustration of my clients, as well as my own sense of helplessness, accumulating like the shards of glass. I knew that I needed to explore the images of this dream further.

Because I work with glass in my home studio, I had an immediate association with the triangular bits of glass. For me, they represented bad cuts—mistakes—or, following the play on words, even injuries. There were times, especially when I first started working with glass, that I hadn't scored the glass properly. I didn't yet know how to use the tools well. Where there should have been a clean cut, instead was a jagged triangular piece of glass. Since sheets of glass are costly, I hold onto these jagged triangular pieces. I hope that I may be able to create something from them one day—add them to another piece of glass or fuse them together with other shards.

As the pandemic days wore on, it sometimes felt that my interventions were sloppy and imprecise. There was uncertainty about how to use my tools, myself, over the video screen. Although I had worked over video prior to the pandemic, this was a whole new level. Yet, my dream ego was so proud of standing on her own, looking down at the woman with the shards. Was there really a part of me that felt such judgment toward those reaching out for help—toward the part of myself that needed help? I wondered if I was feeling more overwhelmed in work—and in life—than I was letting on. With assistance from a dream group and my own therapy sessions, my process continued to unfold. I took on a stance of openness to the woman with the shards and the messages she was bringing me.

I decided to participate in an open studio series through the Portland Institute for Loss and Transition. Participants were invited to explore various forms of expressive arts that may be helpful in grief. One week, we learned about making dolls. I had never had any interest in doll making—it hadn't even occurred to me—but as I heard stories of how others had used the doll making process to face painful aspects of the past, I opened myself up to the possibility of making one. I realized that I wanted to make a doll of the woman with the glass shards. I experimented with the materials I had on hand, plus armature wire I acquired on an early morning masked trip to the craft store.

Using a Jungian lens (Estes, 2003; Hall, 1983; Mellick, 2001), I began to see more clearly that she was a shadow figure, holding some parts of myself that had been cut off—or rejected. Her presence could be an invitation to integrate these shadow aspects of myself. As a lifelong helper, I didn't like the idea of needing help, of depending on others. I noticed how much I missed social interactions with other practitioners, even brief moments of encouragement as I was starting out in private practice. During the pandemic, I was on my own, with none of these interactions to boost my ego. Each day, I attempted to ground myself and remain centered and open to the feelings of helplessness, grief, anger, and confusion expressed by my clients. Ultimately, the woman in the dream was challenging me to see that the very same feelings were present within me. Two life-long friends had lost their fathers, one of whom was like an uncle to me. I hadn't been able to attend services—or even see my friend for months. Exhaustion with the ongoing housework was wearing me down. Even after vaccination, it didn't feel right to resume activities.

As I began to create my doll, I imagined this woman, this part of me, this “bigger than me” woman, as an aspect of the divine feminine. I crafted her body out of bubble wrap and played with ideas of how I protect myself against painful emotions. Digging deeper,

I wondered how my upbringing within Western cultural norms might contribute to my dream ego's pride in being strong, and standing on my own two feet. During the pandemic, I learned more about how communities can show up for each other through mutual aid. I started volunteering to clean the community fridges, contributing to the Atlanta Jail Support, and learning more about our collective racial complex. I considered ways I might turn to my community for support.

Going a step further, I tried the "I am" technique to place myself within each aspect of the dream. These are some of the associations that arose:

I am a woman holding a box of glass shards.

I am collecting these broken bits.

I am doing my best to hold them all.

I have a box full of mistakes.

I want to make something out of all these broken pieces.

I need help from other parts of myself to figure out what to do.

My box is big enough to hold even more.

I am a stranger in a cafe.

I am a companion.

I want you to know that I have time to talk with you.

I see the broken shards can be overwhelming.

I see that you're able to hold a lot, but you don't have to.

I am not worried about the shards.

I am practical.

I am curious.

I am calm.

I am a cafe.

I am a meeting place.

I am a space where people relax.

I am a place with Wi-Fi connections.

I am a creative workspace.

I am a place where ideas are exchanged.

I am a place where new connections happen

And old connections are renewed.

I am a place of nourishment and refreshment.

I am a shard of glass.

I am a triangle

I am sharp.

I am shattered.

I am a mistake.

I am unsure of my worth.

I am a symbol of change.

I am a symbol of female power.

I believe there is still value in me.

My colors are beautiful.

I shine in the light.

Look through me and hidden spells become visible.

What are the old spells that need to be broken? The spells of worry and regret, of illusory control, of my cultural assumptions, of self-doubt, and of self-sufficiency and independence. I quickly realized that the connections I had nurtured for years prior to the pandemic sustained me now. Buildings where we once gathered each week were now empty, but the human connections held together like an invisible net across the physical distance. Before, I thought that my attendance at the Atlanta Friends Meeting or at my Dream Group were good things to do. Now, they are my lifeline. Unknowingly, they always had been. These communities provided a link to familiar people and to the wider world. These were also the places where we collectively searched for meaning together. The pandemic dispelled the myth that I was okay on my own—or within my tiny family bubble.

I didn't have control over the pandemic or others' choices, but I could choose how I would piece together my feelings of grief. How would these tiny, sharp, triangular bits of glass come together? The process was difficult, requiring imagination, patience, and a willingness to be vulnerable. Instead of letting worries and regrets plague my mind, I started to trust my creative process and was less afraid to share my work with others. I felt stronger—not because I was doing everything on my own, but because I was engaged with others (both locally and across various time zones) in creative work.

Having completed the doll, she is now a visible reminder of these parts of myself and the ongoing pandemic journey. With her little box of brokenness, she invites me into a ritual of holding, relinquishing, and transforming. Each day I acknowledge the shards I carry and know that I can release them into the box. I am reassured that there is a companion who is waiting and listening as I stumble through the process of creating a new way of being. That companion urges me to reach out to colleagues, friends, and family when I am unsure, rather than stumbling through on my own. To be available to others with less fear of being overburdened by their needs. To dispel the myth that I, as the therapist, must have the struggles of life figured out. To share my inner process more readily with friends, make my vulnerabilities visible, and thus strengthen those points of connection.

I recognize and honor the much bigger part of me who knows how to connect with others. I have started following her lead and asking for help. I am thankful for this chance meeting in a dream cafe with the part of myself that is patient and kind, the part that is proud and strong, and the part that is hurt and holding the broken pieces. As pandemic reality continues, I feel more ready to reach out to others when it's overwhelming and to give thanks for the work accomplished each day as a therapist: holding space for uncertainty, intense emotions, and brokenness, and nurturing hope through the creative process. ▼

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Materials: Avocado pit, polymer clay, cheesecloth, twine, bubble wrap, yarn, armature wire, cardboard, and glass shards.

Springtime 1349, Springtime 2020
Eileen Ivey

The earth still goes about her business.
The cherry blossoms still shed
their viral load of ephemeral elegance. The magnolias
still release the sweet scent of cyclical eternity.

The squirrels, who have not heard
of social distancing,
still make the thin dogwood branches dance
as they practice their springtime Olympics.

Inside: an abundance of caution.
Outside: an explosion of reckless abundance.

The oblivious beauty of the world
mocks us, comforts us.



Ruminations on Fruit Flies and Denial

ONE RANDOM WEEKDAY IN THE SUMMER OF THE 2021 PANDEMIC, I MADE A DISTINCT AND ENTIRELY UNCONSCIOUS DECISION. I chose to believe that a fruit fly is small enough to disappear on my webcam. (The truth, of course, I don't know, and have chosen not to investigate.) Nevertheless, I choose very firmly to believe that only I am able to see them, that somehow their reality is mine alone, and that they can stay on my side of the invisible wall that separates me and the clients I spend my days now virtually sitting with. It seemed reasonable to decide that the little flies would just be dismissed as a speck of dust or gunk on the screen. Because it seemed that the air on my side of the screen was mine alone, it also seemed reasonable that the tiny-yet-visible living things in it were also mine alone.

The flies arrived in the apartment early on in the pandemic. I associated them with my boyfriend moving in and taking over most of the cooking, and he happens to be an incredible chef, so I didn't mind one bit. Whether or not there's a correlation, I can't know for sure. The kitchen became an obvious new locus for our shared life, differing habits, daily lockdown meals, and gradually converging food preferences. We greeted the most ignorable of all household pests with nothing at all. Nevertheless, they greeted us.

Like the little demons they are, move in they did, and most days they made migratory progress into my work nook in the afternoons, seeking nostrils and eyes with puzzling regularity. My partner successfully ignored them too, and I had no idea they menaced his daily Zoom calls until I mentioned it and got his nonchalant "oh yeah, that" response. Yet ruthlessly in my own workday,

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I adhered to a fierce division of personal-professional space, pretending the kitchen was the kitchen and the corner of the bedroom was the office and the wall behind me was a real wall, with no other rooms. Professionalism demanded that the flies were, and are, and can only ever be, invisible. Nonexistent, even.

Probably my ferocity had something to do with working in a corner of my bedroom, with a new level of personal-professional closeness I'd never encountered previously and wasn't prepared for. If I was distracted by wildlife out the window in my unseen field of view, I felt I'd need to be prepared to explain. Would I be judged because I had the privilege of a window looking out on a tree-filled yard? Would I be judged for my own household infestations? It felt better to avoid both possibilities.

I eventually made traps based on online instructions, using dish soap floating over cider vinegar. Those didn't work. We ordered little apple-shaped traps with the highest star reviews we could find. They didn't work either. We poured bleach down the drain. And yet no matter what, at least a few times each week, those harmless little motes of life arrived to check out the openings on my face. They made me hyper-conscious of otherwise involuntary waves of hands—and hyper-unconscious of my resolute conviction that they were invisible on my webcam. They had to be. They just had to be. I can't have anyone seeing the frizziness of my hair in the humidity, or my zit, or the shirt that's just a little too see-through but unnoticeable on the webcam. And I can't have anyone seeing these damned flies.

That was around the time that, persistently hyper-unconscious of any connection to my own (literally in-my-face-and-nostrils) lived experience, a handful of clients independently started confessing their extreme reactions to a variety of household pests. These had been taking up residence in their quarter-life starter apartments: often in need of remodeling, usually cheap, frequently soulless segments of high-turnover student-oriented complexes. I had no idea how to respond. Talk of calling landlords or of the virtues of diatomaceous earth felt pointless and anti-relational but perhaps weirdly necessary for those without life experience or older adults to ask about such things. Put simply, mere mentions of the insect anxieties aggravated and bugged me in a way that nothing else really did. (I wouldn't quite say that, because I can choose to believe that nothing bugs me. Not even bad puns.) But this topic was different.

Nevertheless, the dumb-sounding anxiety and the inability to tolerate occasional roaches, sugar ants, camel crickets, and all the rest left me with a philosophical dilemma that my partner (also a therapist) was similarly stumped by. Can we call this a real anxiety? A guise for something else? Why are they telling me this? I couldn't tell. I let them vent, validated their concerns, then felt pathetic about my attempts to problem-solve, and finally logged off and went on to the kitchen.

And that's where we made the most decadent and involved pandemic dinners. There was a whole cookbook of Thai recipes with flavors I'd never before tasted, Spanish tapas on Spanish dishes, Tiki drinks modern and classic, fondue, fresh-baked bread he somehow prepared between his sessions. We lived our wonderful foodie lives. Meanwhile, the fruit flies bred, and I continued to resolutely ignore their daytime invasions into my airspace and headspace.

One client spoke about the lasting impact of having seen roaches. She was terrified to go into the kitchen at night. She told me that she saw one in the drawer with the silverware, so from then on she enlisted her boyfriend to open the kitchen drawers for

her, with no trace of sarcasm. I listened as an entirely different person recounted a roach falling on her face at night, resulting in screaming and pounding on a roommate's door, at 3 a.m., pleading her to kill it. Soon after, I learned the difference between a roach and a palmetto bug, but resisted the urge to lecture any of them on entomology. Instead, I unfortunately lectured them on self-talk, coping skills, and affect regulation. Whatever those are. I ended up lecturing on denial because I didn't have anything to help with this subject, and didn't want to admit that either. As they were powerless to eliminate the infestations, so was I powerless to help with advice or strategies. My fruit flies, I realize in retrospect, could have helped me, but I denied their very existence.

Another young adult told me of his dread of camel crickets, a weird beige creature that haunts southern basements with its spindly legs and Olympic jumps. Then I remembered my college friend Brie, who once had a summer sublet in someone's house and endured these same critters infesting the basement. That summer, she would scream in her hatred of the merest mention of them. I didn't have any empathy then, really. I found it hilarious how they'd harmlessly jump on her in the middle of the night and how the simple mention of them would send her into fits. I felt smug in my harmony with nature, something that my friends almost always seemed to lack. It made me special and different somehow.

Since early childhood, I've weirdly prided myself on my tolerance for all manner of creepy crawlies. I grew up in the woods, lived and moved and breathed among bugs like kids these days (ha!) live and move and breathe among pixels, likes, and notifications. I took fierce joy in being the kid who'd scoop up the spider with a piece of paper and take it outside, while other girls in the class screamed and hid. I liked being able to see a snake in the yard and pronounce, with perfect confidence, that it isn't venomous, that it's actually cute. I liked being able to get my space from others by doing such things, the way the other kids would leave me to the snake or the strange insect or whatever it was. One major factor has probably been my disdain for norms of stereotypically feminine behavior.

I thought deeply about it and discussed with my peer group one Friday night, which is when the various parts came together. Synchronistical enough, that evening was when one of the fruit flies literally went up my nose and stayed there. But for once, I didn't pretend like it wasn't there. My awe, my displeasure, my own fear and dread long-suppressed of such a moment was open for all to see.

That moment finally put me in touch with my own disgust and discomfort, a ripple above something deeper and more disturbing that the insects pointed to and suggested, but did not embody directly. Decay. Disintegration of the world around us. Things living in our world and eating it away from the inside, until there's nothing left. This was a particular revelation of entropy in the very walls we sit surrounded by: how in our dwellings the wood rots over time, the paint chips, and even the concrete crumbles, with insect life finding homes in the tiny lacunae. And then the obvious corollary, our bodies sag and soften, teeth chip and loosen, narratives lose their freshness and originality. Who wouldn't want to be in denial of that as long as they're able to? It's simple enough to appreciate a rotting log in the forest. What's harder to appreciate is living in a sealed, unbalanced terrarium.

It was a few ensuing confessions from similarly-aged individuals about climate change dread that changed my view, finally. I remembered my childhood, and it dawned on

me—I grew up in a world where I could trust nature, to the full extent that Nature was the only God I knew, a real-life sanctuary surrounding my home, and one into which I could retreat at any time and place. Nature was a person who held me, felt me, and revealed mysteries to me. I could feel the living presence rising and falling with the days and the seasons, a breath against my body, literally carrying me with perfect constancy through whatever ordeal my childhood or adult years would throw at me.

The perfect constancy is what was missing, and the climate change piece put these in perspective. I realized that I'm likely the last generation to have this sort of a deep, untroubled, and trusting relationship with Nature and with all the living things that comprise Her. There was something about the world crumbling around us, something about discomfort with the natural world and living things and the weird unhygienic unpredictability of life itself. At first, I'd written it off to a childhood in the suburbs and to soccer games with soccer moms and Astroturf and that whole set of clichés. But diseases are part of Nature, too, and the question of the naturalness (or otherwise) of diseases is an open question.

Perhaps the real dread looks something like this: Nature can't be trusted because there is no external Nature to hold us anymore, and the pests and germs (and even viruses) that we thought we were equipped to fight off, to survive, and to protect against are equally well equipped. They fight back, evolve, and live their own lives and evolve faster than we can. So if there are bugs, then there are mega-bugs, and you can't have the modern world without modern bugs—and once-in-a-lifetime storms every few years.

I thought I'd accepted that. But was I capable of it, really, given the naivete of my relationship to nature? The superficiality of my responses to these young adults and their bug issues haunts me. I sensed there was something existential in the bug thing, but I didn't know how to articulate it. My simple hope is that the fruit flies literally entering into my nose won't actually make me sick, so long as I acknowledge them and promptly blow them out. But they survived the traps, and maybe they'll survive my nose, and I'll survive too. There's surviving and thriving, and I suppose that thriving is something that happens, even among members of the insect kingdom. To me, as long as we can think about the bigger questions and the existential angles, then there's space for thriving. I imagine the exterminator services probably are thriving, too. ▼

We long to return to normal, but normal led to this.

—Ed Yong



My Orchids, the Pandemic, and My Encounter with Evil

INSIGNIFICANT. THAT'S WHAT I THOUGHT OF A MOTE OF WHITE POWDER ON MY BELOVED ORCHIDS. I easily wiped it off with a swipe of my finger. The COVID-19 quarantine, with a complete, months-long national shut-down, didn't seem so insignificant or easy. But in the early days there was optimism that it would be over in a few months, certainly by summer. We spoke of returning to work in June, allowing ourselves to relish the imposed novelty of working from home, a privilege psychotherapists enjoyed when our work proved transportable to a virtual platform. In the meantime, I didn't pay too much attention to that speck of white powder on the orchid. I didn't want to think about it. Days later, however, I noticed that several plants were covered with the white spots. I developed an uneasy feeling in my stomach. And then, the dates for re-opening from the quarantine, for getting back to normal, kept shifting. Each week became an emotional roller coaster of hope and disappointments.

Meanwhile, in the never-ceasing media circus, daily counts of COVID-19 deaths, along with reports of overwhelmed emergency rooms and the lack of life-saving supplies, filled the airwaves. A small, rectangular box permanently affixed on the lower right side of my TV screen ticked off dramatic numbers of the daily dead like a ticker tape on the stock exchange. I developed a dark fascination with the rising numbers in the morning's count, becoming a rubbernecker at the daily crash site on the treacherous COVID-19 highway. It was ever clearer to me that what was happening was not only a defining historical event but likely a life-changing one as well. For each of us. With the orchids, meanwhile, the white pow-

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der multiplied, migrating until one after the other, almost all the plants were infected. Threats felt very real. Both out in the world and inside my own home. And my stomach tightened.

As I looked through plant books and the internet, I had a sickening feeling that the spots on the orchids were not as innocuous as they initially seemed. Similarly, the virus and its new and more virulent strains stalked all of us across the globe with the stealth of an unmanned drone, unexpected and lethal. But unlike COVID-19 I thought, surely, I would be able to control the white powder on my plants. Powdery Mildew—the name sounded insipid, powerless. It’s just a soft looking powder that’s brilliant white. How bad could it really be? Well honed in my childhood, denial and its usual companion for me, paralysis, gained ascendance.

Just because denial is identified does not mean it automatically goes away. Like the powdery mildew, it is powerful and primitive, and at times, critical for survival. One online orchid grower recommended discarding all the plants and starting anew. This fueled a hot rage: I would not. I would be able to control it. Damn it! And COVID-19 would eventually subside, with the American public coming together for the common good with vaccinations, masks, and precautions. Or would it?

I had nursed my orchids with care, locating the perfect spot for them to receive sun filtered through the summer leaves of outdoor trees and shrubs. For several years they produced beautiful, sturdy green leaves. But no flowers. I didn’t give up on them, however. Then, after years of patient waiting, blooms of deep magenta, pale orange, soft lavender, and creamy white appeared that would have made the original orchidist in my life, my father, proud. Like me, he had started his collection with one plant, charmed I think by their exotic and highly erotic appearance, as well as his love for the surprising, the magical, and the beautiful encountered on life’s path. As a child I learned this sense of magic from him. Sometimes he invited us to go see the night lights in town as the afternoon fell into the evening’s encroaching darkness. Seeing the world through his eyes, I learned to find delight in the humblest of places. In twinkling lights or starry heavens on a clear night. In the dance of fireflies in the garden on a warm summer’s evening. Or in the crow of a rooster as dawn made its way over our tropical horizon. He and I loved visiting plant nurseries together, marveling at the remarkable and endless variety of life’s expression in the silent plant world. Eventually, my dad tended hundreds of orchids, winning ribbons and trophies at shows. The blooms on my plants, particularly in this dark year, brought his presence to me as my protector. I felt grateful for this subtle but powerful connection with him.

As he had so often, he again inspired me with the determination and courage to face the difficult year ahead. “Nothing is irrevocable except death and taxes,” he often said when I despaired over something as a teenager. Back then I had no idea what he was talking about, not knowing anything about taxes, and death seeming so far away as to be inconceivable. But those were times so different from now that I wonder if he would say the same to me today. Sadly, my father died prematurely from a cancer whose origins were likely linked to a strong pesticide that was widely available at the time. He sprayed malathion, purchased at the local hardware store, on his orchids. Its toxicity was underestimated then. Or perhaps misrepresented, as are so many of the chemicals used to control weeds in crops and backyards that poison us, our pets, and our environment. I lost him way too soon, as now thousands of Americans lose cherished family members

to the uncontrolled virus.

I looked up non-toxic remedies (water, rubbing alcohol, a few drops of dish soap) and sprayed and repotted my orchids, thinking that I had successfully eradicated the insipid looking invader. Sadly, when I checked again, half the plants were dying, their leaves shriveled, yellow, gooey, and languid. And speckled white. Like a sore throat. I sprayed them again, more abundantly this time, looking deep into the folds of each leaf, a process that felt intimate and private. Powdery mildew, it turns out, is not innocuous. It's cunning and tenacious. Like COVID-19. Doing this delicate work, I thought of the growing number of states restricting women's access to private and autonomous control of our own bodies, much like this powdery mildew that settled into the deepest recesses not only of the leaves but of the plants' sensuous flowers as well, their most delicate parts. Georgia O'Keeffe in her time had scandalized the nation with her extraordinary, provocative, and unusually large paintings of unmistakably vagina-like flowers, a celebration of femininity and its undeniable power. Now, instead, the nation's politicians (mostly White men) and the religious right were intent on stamping out their perceived threat of the feminine once and for all by legislating over women's bodies. All the while, these same politicians continued arguments against mask mandates to curtail COVID-19 because of its purported infringement to First Amendment rights. Their hypocrisy was brazen and staggering. It was impossible to bear. Like the powdery mildew on my orchids.

As the quarantine year progressed into a second one, my anxiety deepened. I became despondent. Rage eventually felt rational. So did violence. Everything seemed menacing. Homicidal thoughts toward certain political figures became a daily occurrence. Consciously and unconsciously, I searched for places where I could experience some control. Clinging to vestiges of my own agency late on a Sunday morning, I grabbed the ailing plants, one by one, and tossed them into a trash bag, my love and caring for them swept up in bitter feelings of incompetence and impotence. I tied the bags shut as thoughts surfaced of those thirteen men, boys really, who were the last soldiers to die in our much needed but too hasty withdrawal from Afghanistan, grieving their lives cut short by a country that repeatedly refuses to learn from its mistakes. My father's inspiration after all, hadn't been enough to help me with my orchids. Yet I missed him more and more as the days, weeks, and months passed, and the possibility of a third pandemic began its inexorable creep into our sights.

I turned 70 on the first day businesses shut down in March 2020. I refused to consider that this might be an inauspicious beginning to life in my eighth decade. Besides, at the time, the virus didn't seem that threatening. We were all in shock and denial. Initially the novelty of staying home made me giddy. Between Zoom calls with clients, I would be able to write, research, do the laundry, get dinner started, and sit in the garden with my sweet dogs. I decided I would make the best of this surprise break until things went back to normal. I began to learn how to watercolor from YouTube videos, mustering the courage to hang through a first wave, the second, and then a third wave of beginner's frustration. Surely this all would be over with soon. That was what the experts kept promising. Repeatedly. The rhythms and intensity of face-to-face Zoom sessions tired me more than anticipated, and at the end of my workday the creative pursuits I had imagined hardly materialized. I felt unusually busy and was accomplishing nothing.

Powerlessness and hopelessness became all too frequent states of mind. I doom-

scrolled the internet in the dark of night. I was scared, and this activity weirdly created an illusion of control. I took in the news at my own pace, stopped when it became too upsetting. My normal sleep rhythms were disrupted. No amount of meditation, yoga, or forest bathing helped. Nothing seemed real anymore. I could no longer discern what moral principles guided our government's decisions. Who was really in charge? Who could be trusted? Lies were touted as truths. Truth was trampled on like garbage. A sense of order unraveled nightly with the evening news. The idea that good could prevail became an ephemeral respite amidst daily assaults on life as we had known it.

One day, driving through town, I noticed an impulse to not stop at a crosswalk. I wanted to ignore the laws and rules imposed on me, no matter that a pedestrian was crossing the street in front of me. I was becoming a dark "not me." Later that week, I had an impulse to flagrantly shoplift in sight of the checkout people and shoppers at the grocery store. I didn't want or need anything in particular—not a bag of chips, or Cheetos, or Swedish fish. What I really wanted was to have an experience that was consonant with the circumstances in which we were living. In those alarming moments and with what I like to think of as courageous curiosity, a small crack in my consciousness opened to illuminate the frustrations that can carry so many disaffected Americans—each of us really—to violence, in an attempt to gain some control over our lives. While these actions and reactions repulsed me, understanding this helped me look at the other, the ones not like me, with the beginnings of empathy, perhaps compassion even. As the Jungian analyst Dr. James Hollis once said in a lecture I attended several years ago at the Jung Society of Washington, "If you analyze deeply enough, you will come face to face with pure evil." Or as Pogo, the beloved cartoon character, once pronounced, "We have met the enemy, and he is us" (Kelly, 1970). But today, 19 months into the pandemic and its consequential devastation, with the ever-increasing threat of climate catastrophe as ecosystems begin to collapse the world over, I am humbled by my encounter with evil, with the homicidal, the destructive, the violent, even dishonest aspects of myself. I experience the disintegration that is born from despair. I understand how disenfranchisement can lead to violence, that marginalization creates hopelessness, and that privilege isolates us. Perhaps all of this has made me a better person. Perhaps. I know it's made me a better therapist and has given me a deeper, broader container with which to hold my clients' otherness. ▼

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No person is safe until all—everyone, everywhere—are safe, and no country is safe until all countries are safe.

—Amina Mohammed, Deputy Secretary-General of the United Nations



Processing the Pandemic by Blogging a Bridge of Attachment

There is a small non-space-time in the very heart of time for moving forward and backward, with the slow, ordered movements which are proper motions for trains of thought.

—Hannah Arendt

TIME WAS A NEW COMMODITY DURING THE UNRELENTING MONTHS OF THE PRE-VACCINE PANDEMIC. We all had lots of it. What we no longer had, however, were the very activities and persons with which we typically filled that time. What we had instead were unending days of inexorable stress without the attachments and activities that typically relieve it. We had time to think but couldn't quite inhabit that internal place of generative thought. We found ourselves with "COVID-brain," somewhat checked out of ourselves because it was too overwhelming to check in.

Attachment is the best elixir I know for anxiety. A gift of life, we attach in all sorts of ways when scared: with the self, with others, and with nature. Like many, I found my usual means of attachment impacted during COVID's dark days of lockdown. In some cases, adaptation was possible and even quite lovely: a number of old friendships were revived and comfort was found on frequent Zoom calls, high school and elementary school friends supported each other on Facebook, and colleagues and I texted throughout our days sharing joys, sorrows, and patient concerns. One of the most crucial attachments of my life, however, disappeared.

I believe that we're all born with gifts, and when we don't express those gifts, they back up like plumbing. Some of us are artistic, others athletic or musical; some are poets, others humorists, and so on. These natural

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gifts function in what self-psychologists call the *selfobject*: gifts that provide a mirroring function that affirms a sense of self. I'm no Jascha Heifetz, but I am a violinist, a rather serious amateur chamber musician. When COVID-19 hit and we moved inside our cocoons, my weekly chamber music-making session was stopped on a dime, as were rehearsals with my chamber orchestra. To join as a musician is to join in the most glorious nonverbal mutual expression of affect and dialogue. COVID had upended life, and one of my prime sources of attachment was no longer available.

Without it, I needed a new source of attachment amidst pandemic isolation and found my grounding by revisiting and bringing forward some previous work I had done on the concept of clinical wisdom (I wrote about this at length in an earlier piece in *Voices*, Baum-Baicker, 2017). In that work, I had spent 6 years interviewing wise clinical elders. I found their remembered wisdom returning to me, offering guidance and comfort in these difficult times.

When, in April of 2020, I was asked to appear on a local radio show/podcast to discuss couples in quarantine, I found myself spontaneously referring to what I'd learned from these senior seasoned psychoanalysts. The story of clinical wisdom interviewee Hedda Bolgar and how she mourned her husband came to mind:

[Bolgar's] husband had had a sudden fatal heart attack while they were away on vacation having an intimate room-service dinner. 'After my husband died, I had incredible grief,' she told me. 'When I came out of it, I went on my first trip without him. I wanted somewhere very cold and very white—this was how it felt after he died, like '2001 A Space Odyssey,' you are nowhere. I went to the Arctic. I forced myself to be alone.... After that, I was OK.' Bolgar shored herself up through the creative mirroring of her barren frozen affective state. (Baum-Baicker, 2017, p. 12)

Similarly, Hannah Arendt (1968, 1977) noted that in states of trauma we find refuge in our own psyches, in "the soundless dialogue between me and myself," which could well describe the experience of pandemic isolation. In those many pandemic months prior to the vaccination, previously safe attachments with friends, family, and patients had become potentially lethal. I was terribly anxious about the uncertainty ahead and the invisible enemy of COVID-19. Many of us had a comforting new internalized object: Dr. Fauci. *WWDFD*: What would Dr. Fauci Do? I also found myself re-invoking earlier internalized secure attachments. I reconnected to the internalized objects of the wise clinical elders I'd interviewed and of other colleagues and therapists/analysts from my past. A number of the paradoxes of clinical wisdom came to mind: Relationships have permanence and impermanence; when the therapeutic relationship ends it continues; we're separate and we're attached (Baum-Baicker & Sisti, 2012).

We were all, therapist and patient alike, helpless in the face of COVID. Interviewee Johanna Tabin (personal communication) once told me that we are helpless in the face of death and that is why people will always feel guilty after the death of a loved one. Embedded in guilt is the fantasy that there could have been control, something one could have done to change the outcome. The passivity that COVID had wrought had me constrict more and more inside of myself. I remembered interviewee Marvin Hurvich (personal communication) saying that "the ego grows on selective identification and its own activity." One means of gaining some mastery over what had come upon me was to do something! Thus, I decided to start a *Psychology Today* blog to share some of the wisdom I'd found helpful for coping through the pandemic.

As COVID spread and the deaths piled up, there was little escape from the terrifying reality that I, one of my loved ones, or a patient might die. Death was omnipresent; COVID was always lurking. It seemed as though one wrong inhale or drop of virus on a touched surface might lead to infection and potential death. I believe now that it was that taste of my own mortality that functioned as the underpinning of the blog posts. In retrospect, I see that the blog functioned as a sort of professional life review, what one does at life's end. The blog content spanned the 40-plus years of my career. In addition to the wise analytic elders I'd interviewed for my clinical wisdom research (Baum-Baicker & Sisti, 2012), I found myself reaching back in time to earlier training experiences, remembering coping skills that could serve me and others in dealing with pandemic stress. I pulled from the neuro-linguistic programming (NLP) training I'd done in the early '80s with Leslie Bandler, the behavior therapy I'd learned from Joseph Wolpe in the mid-'70s, the psychological impact of the physical environment I'd learned from gerontologist Powell Lawton in the mid-'70s, the systems thinking I'd learned when working with Tavistock Clinic's Fred Emery and University of Pennsylvania's Russ Ackoff in the early '80s, my years of analytic training that spanned the mid-'80s through the '90s, and my personal analysis (a second analysis), which took place the first decade of the 2000s. The internalized objects of these former attachments and the skills they taught me bolstered me anew, and each step along the way seemed to find a voice in one or more of the blog posts.

In deciding to take what I'd said in that radio interview and the internalized lessons from my own history and begin a blog series on pandemic coping, I was mirroring the lockdown in the "soundless dialogue between me and myself" (Arendt, 1968, 1977) as I wrote, shoring myself up much as Bolgar had done, and hoping as an extension to have it serve others and act as a bridge of attachment for myself. While not my prime selfobject of music making, writing had always served a selfobject function.

My patients reported similar efforts at grounding themselves. One patient described her pandemic experience as follows:

I developed a new rigidity—everything was unknown, there was nothing to hang your hat on. I needed something—someone to hang my hat on. My husband wanted to rent an Airbnb in another state for a sense of novelty during the months we could go nowhere and do nothing—I couldn't do it! It was the thought of working in a kitchen that wasn't mine. I needed to hold on to what I knew and what was familiar. In addition, I found comfort in Zoom calls with friends who I thought of as smarter than I and of course my therapy! I figured if you and they were calm and believed we'd all get through this, I would, too. (personal communication)

And so, I sent the blog posts to those patients for whom I thought they might be helpful. My hope was that the short pieces might subtly function as a transition object between sessions, a ballast during the unrelenting shaky months. In a few of the pieces, I asked for patient input, hoping that people might feel a sense of contributing to something larger than the self that might help others.

Looking at the blog posts now—some 18 months after the first was published—I notice an interesting evolution: an unconscious expression of what was happening. The first blog, written in April 2020, reflects the cocoon of quarantine. The blog posts that followed stayed with the very contained content of the self or couple. Then, as vaccines became more readily available, the blog posts shifted more to the external environment

and finally to reengaging with the social world.

I called the blog, “Clinical Wisdom for a New World” (Baum-Baicker, 2020-21). The seven posts can be accessed here: <https://www.psychologytoday.com/blog/clinical-wisdom-new-world?eml>.

The first post, “5 Ways Clinical Wisdom Can Guide Couples’ COVID Resilience” (April 2020), evolved from what I’d spontaneously said during the initial radio interview, as well as my own experience. My husband and I—who have known each other since I was 18 years old and he 19—have a good rhythm and cohabit with relative ease. However, during the quarantine months we were charged, as were other couples, with learning how not to allow minor irritations to get under our skin. A number of former couples I’d treated called to come back to treatment. In a few cases, a couple had to sit in their car during the therapy hour because their small children were in the house, at “Zoom-school.” There they were, bundled up in coats with the car heater on, trying to find their way back to a comfort they’d previously known. And there I was, with my husband on the other side of the wall in our kitchen doing his work. This 24/7 interaction with partners during the quarantine months resulted in a unique form of cabin fever, when combined with the stressors brought on by COVID. The post briefly discussed five factors that constitute clinical wisdom and how each one could be a stake in a guidepost, helping couples to cope. By practicing pragmatism, balanced paradox, cognitive-affective differentiation, affect optimization, and emotional generosity, couples could build tolerance for the irritations heightened by such constant close quarters.

As the months wore on, we went from isolating in our homes to marching out in the streets. Our lives had been upended by the invisible enemy of the coronavirus. The political landscape was a country torn apart and the stakes for the upcoming 2020 presidential election felt so very high. Many reported the impact of the “Trump Stress Effect” (Baum-Baicker, 2020) which showed that we were in a worn-down state as we began our battle with COVID. And in the midst of all this, we watched in horror the footage of George Floyd’s murder. In the Philadelphia area, as across the country, people marched, spewing droplets in the streets for social justice and a reversal of the Trumpian agenda. One day I went back to my office in Center City, Philadelphia. My heart sank when I walked by many of the shops I’d once frequented and found them closed, their glass windows smashed and boarded up. The streets were ablaze with fury. People were traumatized and in sore need of a path forward. As I watched the specter of destruction, I wished for growth and meaning. This led to the penning of the next piece about post-traumatic growth and the development of personal wisdom. “Developing Wisdom Can Be an Antidote to Today’s Trauma” (June 2020) explored how the trauma of the pandemic experience might prove transformative, both individually and for society at large.

I am lucky enough to live in the bucolic countryside, an hour and change from Philadelphia. Prior to the pandemic, because the lion’s share of my practice was an hour-plus car ride away, I stayed in the city mid-week; in the 30 years we’d lived in the exurbs, I’d never spent a full week at home except during the holidays. With the advent of COVID, I found myself solely living at home for the first time! While I’d previously preferred the energy and culture of the city, I felt blessed to be living where it felt safer and was so very beautiful. My daily walks in nature became an essential part of my coping toolbox. I took walks with my dog, a black lab named Walker, every day at lunch time, and I’d

greet neighbors in the village when we'd pass—each of us staying on different sides of the road to ensure that we didn't infect each other. At day's end, I'd go out—once again with Walker—to get rid of the static in my brain from the intense hours of online work. I knew what a difference being in nature made for me. Because we were living in the most stressful, ugly times, I thought about the law of opposites and how that would suggest gravitation to beauty. It sure was helping me. So in the next post, "Beauty Can Be a Natural Stress Reducer" (September 2020), I gave the reader an exercise to reexperience beauty and reported on some of the research connecting sensory experience with stress reduction.

By the fall of 2020, almost everyone I knew was talking about how every day felt like Groundhog Day. Suspended as it moved, the present moment seemed isolated from the continuity of time. I remember often writing the wrong date in my session notes, not really sure what month it was! Time just didn't have a felt sense. In "Why 2020 is Warping Your Perception of Time" (October 2020), I discussed altered time perception (*temporal disintegration/discontinuity*) and its relationship to mood states and stress.

The sense of time slipping was uncomfortable. Some of my older patients complained of losing time when there was limited time left in life. Younger patients stressed about making arrangements for the summer: Would there be camp? Could the wedding be planned? Once again, I thought of my elder interviewee, Hedda Bolgar, who said, "I have a thing about time, which is that things take time and today isn't tomorrow and today also isn't yesterday. And so, we are where we are, and let's see what happens" (Bolgar, 2002). In the piece that followed, "7 Skills to Help Cope with Today's Warped Perception of Time" (November 2020), I leaned on the branch of Aristotelian wisdom called *phronesis*, or practical wisdom, and expounded on seven skills that, if developed, might help people cope with the stress of time distortion: patience, pragmatism, meditation, perspective, stimulation, awe, and wisdom.

When the bitter cold dark days of winter 2020 swallowed us up and the vaccines were not yet available, isolation became intensified. I'd read that England issued a report suggesting that to tackle depression the country should aim to build an "antidepressant society," which would be one that addressed large societal ills (British Psychological Society, 2020). I realized that part of how I and a number of my patients had kept depression at bay was by making small changes in our physical, psychological, and/or relational environments. This seemed to me to be aligned, albeit in a micro way, with what the British psychologists had suggested. In "How to Create an Antidepressant Home" (February 2021), I discussed the patient who painted her white walls peach and the couple who used their session to discuss how each could create an antidepressant home for the other. I felt really good when they came in (on Zoom of course) the next week and reported that they'd engaged their two kids in the exercise as well.

Come spring, the vaccines became available and people were feeling confident in gathering once again. While joy abounded, for many this also meant a return to anxiety-producing situations. I was facing my 50th high school reunion and felt a lot of ambivalence and some anticipatory anxiety about attending. I remember, in a felt way, the young person I was. In the multiplicity of self-states that we all have, I wondered who would show up that night, half a century later? Would the teen of my youth be most present? Or the mature woman? In the next blog post I wondered with readers, who is it that walks into a revived past? I titled it "FOE, FOI, FOMO: Strategies for School and

Family Reunions” (July 2021) and discussed the common fears of exclusion, insufficiency, and missing out if one avoids.

As mask mandates were lifted in the spring of 2021, many rejoiced, “Ah! Now we can breathe!” It was then that I believed my COVID-19 *Psychology Today* series was complete. Within several months, however, the exhilaration of exhalation was replaced by the invasion of the Delta variant. There is now some concern that Delta may be followed by a series of more virulent strains.

The pandemic is fast-moving and ever-changing, with surges and declines. If I do write another blog piece, it will be on the balance of fixity and fluidity, change and steadfastness. The breath is the perfect symbol for our lives these past 18 months. It captures both COVID-19’s action, which invades the lungs and restricts breathing, and the final words choked out by George Floyd, “I can’t breathe.”

We, like the breath, must be able to constrict after we expand only to constrict once again. I learned years ago that flexibility is the hallmark of mental health. I’ve always believed there’s more to this world than we know about. And in that vein, I think how prescient it was that prior to ever hearing the name “COVID-19,” so many of us developed meditation practices in which we learned to pay attention to and join with our own most precious commodity, the breath. “Time expands, then contracts, all in tune with the stirrings of the heart,” said Murakami (2002). It can also be said that time, like attachment and so much else, expands and then contracts with the realities of our zeitgeist. ▼

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Life imposes things on you that you can’t control, but you still have the choice of how you’re going to live through this.

—Celine Dion

The Calendar Refuses to Perform its Function

Eileen Ivey

That yammering magpie on the kitchen wall
has fallen silent. No more bossy,
official black scribbles in overflowing

boxes. Suddenly she has
nothing to tell us about next Friday,
or even the third week in April.

Nothing to light the way.

No “dinner with Linda and Norm,”
no “usher at Arena Stage.”
Only a succession of empty, waiting boxes.



WHEN THE PANDEMIC FIRST HIT, MY PATIENTS PROJECTED THEIR CORE CONCERNS ONTO IT LIKE A HUGE INKBLOT. A patient who sees herself as damaged and harmful to her loved ones worried, “What if I infect others?” A woman with neglectful attachment experiences was certain, “Nobody will check on me; I’ll be sick and alone.” The once-parentified child, now herself a mother of youngsters, feared, “What if I can’t care for my children?”

I, too, brought concerns: mainly about staying sturdy and available for others. Luckily, that meant granting myself license to self-care. But it may also have meant that I postponed some important grief work.

Like so many others, I looked for new ways to connect with community and contribute however I could. Sometimes that was straightforward, like making more donations. Other times it meant maximizing quality time with my nuclear family.

Near-nightly cooking with my older kid kept us well-fed and united. Crafting together, or sometimes alongside her as she did homework or applied to colleges, kept us connected amidst the stress and isolation of quarantine. Daily walks with my younger kid similarly kept us connected and got me out into nature. Since this whole pandemic began, I’ve come to treasure nature in new ways. I think a lot of us have. The peace of just noticing plants, the sky, the birds, all just going on being brings some counterbalance to pandemic disruptions. I reflect upon the chronicity of growing things: getting bigger, showing flowers, withering back, disappearing under snow, sprouting again... Pandemic-time seemed so unreal, but plants show that time actually moves forward.

Salvage, upcycling, and reuse also got me through. My finding beauty and utility where others don’t see it traces back to my grandfather, whose first business relied on salvaging, restoring, and reselling furniture to millworkers in a steel town. As a kid I was always picking up treasures. In my 20s I had a job in architectural salvage. I’ve always loved seeking the value where others might not and saving stuff from the landfill—giving it new life.

When COVID started, a patient mentioned Buy Nothing groups on Facebook, a platform for giving and getting stuff. I was hooked. Buy Nothing groups extend the fun of reuse by linking it with community: Members

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connect with each other as part of the exchange process. There is joy in finding someone excited to adopt my box of wine glasses or ride-on firetruck, or eager to share their stamp collection that I then make into jewelry and re-gift to the community. Seeing everyone's messages to each other is such a demonstration of positive human connection: Watching people exchange offers tiny bursts of joy.

Especially when our clinical work is so intangible, it's satisfying to see concrete markers of change. A plant blooms, or a tree leafs out. I pull weeds. Someone posts, "Wish: lampshade," and I respond, "Yes! I can help with that!" When so much of therapy work is about just sitting with emotions, and so much of the last 2 years has involved sitting with grief, it's such a relief to say, "Yes, there's something I can fix!"

I also have to admit that I appreciate having an outlet where I don't feel so responsible. If someone says they need a lampshade and I'm already maxed out, it's OK; someone else will help. Being able to dip in and out, doing what I can but not carrying a burden, is wonderful. And having virtual community spaces where I know that the topic is just plants or household objects—no discussion of politics, COVID, or mental health—is such a respite.

But not everything has been about seeking escape: Since George Floyd's murder, four of us, friends and colleagues, have met twice-monthly to explore how race and privilege affect the world, our work with patients, and our own lives. We've processed incredibly painful and scary realities. Sharing experiences of the pandemic and civil rights has been vital and bonding. Again, community and connection are the crucial ingredients, especially with a committed and caring group. This group is not one I dip into and out of, but sharing the burdens makes it manageable.

Now, as the pandemic changes shape, I have renewed gratitude for freedom of movement and in-person school but also continued fears about the impact of the virus. So many people died in this pandemic it's unfathomable. And, maybe because the medical system was overtaxed or people were so stressed, a bizarrely high number of people I'm connected to died or became very ill—not from COVID but from cancers and heart problems. I'm thinking of some: A friend who helped the last time I wrote for *Voices*. A friend I sat with at the last conference I attended before lockdown. A friend I worked with closely for years. My husband's first cousin, our same age. Our vet, who I tried to persuade to get help. A friend from high school who sang at my commitment ceremony. Other friends have been in danger but are now stable, thankfully. And now I'm writing this from my mom's apartment, keeping her company while she does chemo. Her prognosis is excellent, and she's strong and independent and ready to take on this challenge, but still...

At this point in the pandemic and civil rights, I feel far more attuned to patients in their struggles with loved ones' illnesses and deaths, and it seems like grief will be a bigger presence than it was before. Both patients and I are starting to have more space for our own feelings, rather than always putting out fires, and the grief that had been delayed is starting to feel more acute. I sure hope I can be sturdy enough to hold it all. ▼



The Thumb My First First-Responder

-in honor of the love-fighters out there-

ONE DAY IN THE NETHERLANDS, WHEN I WAS 11 AND MY BROTHER ANDY 9, MY MOTHER DROVE THE TWO OF US TO THE AFFLUENT OUTSKIRTS OF THE HAGUE TO VISIT SOME KIDS FROM SCHOOL. In the other family there was a girl my brother's age and a boy a little younger, and when we arrived at the other family's rambling, low-eaved, brick house, the mothers sent us upstairs to play. What occurred then is both sharp and vague for me now, and I will invent names for the family members as I have blocked out the real ones.

While the mothers, in their wool skirts, were downstairs chatting, we kids, dispatched to our second floor exile, came up with that classic, unifying game of children who don't much know each other—Boys Against Girls.

The game started up in the spacious square hall between the four large bedrooms.

Cathy and I tossed the first gauntlet. "No boys allowed!" we said as we gleefully headed into her airy, girl-flooned bedroom. "Girls are better than boys."

This, immediately and effectively of course, roused the boys' dander. In instant mutual understanding, the two boys—Tommy, skinny and platinum like his sister, and Andy, honey-brown-mopped like me—rushed into the room, saying, "We can come in if we want to!"

"Can not!" sassed Cathy.

"Can too!" said Tommy, the pink rising in his face.

"Can not!" "Can too!" went on for several rounds, ever more heatedly, with me and Andy joining in, our faces steaming up to tomato red like the others.

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With each rousing repetition of the taunts I could feel my body expanding ever fuller like a helium balloon. Oh the exhilaration of annoyance and a good battle!

Finally, Cathy and I, with much windmilling of arms, managed to usher the boys out of her room and close the door.

“Go play army or something,” I said as we bid them adieu.

Cathy and I happily sat atop her high, canopied bed, whispering about nail polish and hair dos and how dumb boys were, and got a good round of girl-talk underway. I assumed the boys had calmed down and were, indeed, contentedly tucked away in Tommy’s room playing with plastic soldiers or something, like my brother always did. There were no sounds from Tommy’s room. After a while I’d almost forgotten about them.

Then, suddenly, the two boys did a sneak attack and rushed into our secret chamber.

“Gotcha!” they said, holding the wooden swords Tommy had made in carpentry class.

Startled, Cathy and I shot up from our bed-top commiseration. Pumped with righteous outrage, we lunged at the boys, and proceeded to flurry and shove them out of the room. (At some point, for me, the playful boy-girl rivalry had transformed into something fiercer.) As the boys were evicted, I felt a glorious spurt of triumph. But then, as I gave the door a push to shut it, there suddenly burst from the other side a scream of pain.

At the sound, my bright exhilaration instantly evaporated, and I jerked open the door. There I found Tommy sitting on the floor, holding one hand with the other. Blood was pouring down from the hand he was cradling.

The two mothers rushed upstairs to Tommy’s wails. Mrs. White hurried to her son in a panic and wrapped her arms around him.

My mother took one look at the little boy and his hand and gently said to Mrs. White, “Take him downstairs, cover him with a blanket, and call the ambulance.”

She instructed Cathy, Andy, and me to go down to the kitchen and wait, telling us, “It’ll be okay. The doctor will help Tommy.” The other two kids obediently descended, but I was in too much shock to move.

I then watched, cowering in the hall with my heart clamoring, as my mother began hunting around the doorframe. She soon spied what she was looking for, went into the bathroom to fetch a tissue, returned, and calmly picked up what she had found. I could see in the little nest of tissue that what it cradled was the top third of Tommy’s thumb.

When the ambulance arrived, just a few minutes later, my mother calmly handed the emergency technician the little package.

It was that day in Holland that it came clear to me what my mother was made of. And what I was not. She was a fixer, a first responder—decades before I’d heard the term. At 5-foot-4, with strong arms and a warm bosom, she was a person who couldn’t but dash in to any call for help. Whatever human problem arose, she was there in its hazardous, messy, bloody midst. Her creed was “If at the end of the day someone’s life was made easier by my presence, then I’ve had a good day. I’ve served my purpose on this earth.” How her urge to help came about and how her life of helping unfolded in all its committed beauty and ultimate, searing catastrophe, is, to me, a crux of the unfathomable puzzle of life.

As things turned out that day in The Netherlands, the emergency doctor, in quick order, stitched the end back on Tommy's thumb, and he was okay, luckily for Tommy and for me. Nevertheless, the incident left me shaken, shamed, inspired, and daunted, for my mother's way of living was un-matchable. So often an act on my mother's part would elicit in me fraternal twin responses: awe and a kind of shrinking. As perhaps with most mothers, her example was impossible to live up to. I, made of other stuff, loved her but was ever in the shadow of her earthy, pus-and-blood heroic grandeur. She was a practical, international physical therapist and I something along the lines of a poet. People are composed so differently. The conflicts between my mother and me were torrential and legion, and she was a devil as well as a saint, but that is not the subject here.

It was only years later, when I had an emotional breakdown and experienced my first psychotherapy that I discovered a calling that might come anywhere near my mother's vocation in worth; I became a kind of second-responder. I earned degrees in social work and human development, worked as a psychotherapist with adults and children in settings from university emergency rooms and community centers to private practice. Later, returning to my artistic inclinations, I became a writer of creative nonfiction and began to lead writing workshops that, by instinct, blended my psychotherapeutic training with my literary inclinations—both kinds of work aimed at deeper understanding of human experience. I discovered I had some grit in me too—as my 11-year-old self evinced for better and worse—which I harnessed in my own sort of full-stakes, life-long battle, one for the emotional truth. Though my vocation never felt as noble as my mother's, this career I had cobbled for myself seemed what I could do.

When the pandemic set upon the world in early 2020, I, like so many, found myself moved and awed by the courageous medical professionals on the front lines who tend to our bodies and save our lives. As their travails have at last deservedly hit the headlines, I have sought to fully comprehend their blazing proclivities and talents so different from mine and to honor the gift they give us all. In this quest, I've recalled my own first first-responder, my complicated but courageous mother, and the way she was. Along the way, by happenstance, I've come to an unexpected new sense of myself and my own calling.

Some reflections on the nature of my mother and by way of her, other first responders:

It is by now a given that, in the face of fear, there are three primary human reflexes: freeze, flight, and fight. As I suspect is typical of many front-line health care workers, my mother was all fight.

My mother's life, as it unfolded, offered her many opportunities for fear—and for pluck, since she married a covert operative for the Central Intelligence Agency (CIA) and was not infrequently caught up in dicey situations overseas as part of his espionage against the Chinese communists. About these activities I know little, but my mother's bravery in their face was a given. In reference to a circumstance he didn't specify, my

father would sometimes comment with admiration, “Your mother is indomitable.”

I did see my mother freeze on occasion. She had an ever-lurking fear of my brother and I being kidnapped and held for ransom in exchange for CIA secrets, and this prospect would clutch her at times. With some perilous vision darting dark in her eyes, she’d sometimes prohibit us from walking down a street at dusk, or she’d clutch us desperately at the door when we were simply headed off to visit a friend. She also became petrified on precipitous mountain roads, and when she dashed to the clinic when I was 6 and saw my broken arm, she threw up. But my mother did not often freeze in the face of fear. And she categorically rejected flight. As I say, she was all fight.

One family story of my mother’s spunk relates to an instance before I was born. During my parents’ first overseas assignment to Hong Kong, my father’s office one day received a warning that acid would be thrown in the face of an American spy when he crossed on the Star Ferry. At the news, my mother immediately sprang into action. She announced to my father, “Well, from now on, whenever you’re going out to meet with one of your contacts, or to drop something somewhere, or all those other things you do, I’m going with you. I can trail you from way behind, or whatever is best. But I’m going with you.”

She was declaring an absolute truth: that she would fling her body at the enemy, surrender herself for violation, or do whatever it took to save her handsome husband. She insisted on accompanying him on his next ferry trip, but he, of course, never more told her when he was off on such a mission.

I personally experienced her maternal protective fight instinct many times in my childhood. One such instance stands out for me in scarlet.

When I was about 4 and we were living in Taiwan, my mother was lying in the tropical heat beside my father when she heard a noise deep in the night. She lay stock-still, listening, on rigid high alert like a forest creature. Fear shot through her. Her heart banged wildly. Someone was riffling around the house. Then, in a split-second, the fear shrank back. Thought evaporated. An iron-hot, protective fury slashed through her. And then a calm.

She rose from the bed, her body both sweating and cold. Careful, silent as a trained operative, she crept into the living room. She looked around. She noticed a strange motion in the living room curtains. She marched over, swept open the drapes, and found in front of her a strange, perspiring man—a thief.

Instantly, the man tore out the front door of the house. Just as instantly, my mother tore off after him. Streaked, actually, for my mother was stark naked.

Without a single thought of clothing, my mother chased the man around the compound until the guards finally wrested her quarry from her.

The next morning at the breakfast table while I nibbled my toast, my father shook his head in wonder, saying, “Lois, why on earth didn’t you call me?”

My mother replied saucily and with a toss of her bob, “I wasn’t going to let anyone hurt you or my babies!”

This was the bald fact: At any smelt threat to her loved ones, my mother became a bare-naked, one-woman security service. Her hackles rose, her eyes flashed dark. She became ferocity.

The truth is, my mother simply loved bodies. She was raised in an Indiana forest by a mother who grew all the family's food and repaired her nine children's broken noses with scotch tape and their bruises with meat poultices. Rapt, she watched cows and sheep give birth, and when she was under 5, she and her siblings once rescued the family dog. Shep had badly injured his leg in the mower, and their father had pronounced a mercy killing necessary. My small mother and her siblings rejected this treatment, however, and hid Shep in the barn, and in a secret, weeks-long clandestine operation, healed their canine friend—to their father's ultimate delight. This transmitted to my mother the sense that a person, no matter how young, could take command and heal the bodies of broken beings.

My mother would have been a doctor had her father not disabused her of the notion, by informing her, "No one will ever go to a lady doctor." She had become a physical therapist as the next best thing she could think of.

Oh, how she loved any bodily process.

"Come here Sara, let me feel your glands," said my mother on an almost daily basis when I was small. Taipei in the late 1950s and early 1960s was a city of open sewers and little sanitation, and children, including my brother and I, were often sick. Andy and I had sties, infections, boils, and every childhood disease, as well as every sort of insect bite and parasite. I had terrible tonsillitis and went stone deaf due to it before they finally extracted the pesky organ. Thus, my mother, pre-set to be fascinated by the body's machinations, was hyper-vigilant.

Upon her summons to a gland-check, I went and stood before her and watched her concerned eyes as they focused on my body. The routine felt holy, like a sort of communion. A runnel of love trickled through me as she gently palpated my neck and behind my ears with her competent fingers that knew just the signs they were searching for.

"Yep. Swollen glands again," she would often pronounce with a kind of victory in her voice.

All through her working years, my helper mother devoted herself to the most beleaguered and suffering people she could find. As an undergraduate physical therapist trainee at the Washington University Hospital in St. Louis in the late 1940s, she worked with amputees from the Second World War and was assigned to administer ice baths to veterans with syphilis, a grueling ordeal later de-bunked. From this early work, she went on to set up a polio clinic and to treat orphans with congenital difficulties in Taipei, to work with disabled children and victims of leprosy in Borneo, to treat more veterans and lots of older people with all variety of ailments in Washington, DC, nursing homes—and on to Vietnam, where she did the work that blasted her nervous system forever.

My mother was in her element when she and my father were assigned to Saigon in 1973. While my father worked with the CIA propaganda force to try to demoralize the

North Vietnamese, my mother became the American embassy wives' social service coordinator. She, with the other industrious women, occupied herself with helping the street girls who had had to prostitute themselves for survival during the war and the orphans who were the result of those girls' liaisons. Street girls and orphans. It was always, for my mother, one end or the other of procreation, of life itself.

And then disaster shot out of the air.

On April 4th, 1975, my mother and a cadre of devoted, long-toiling Embassy women and non-governmental organization (NGO) workers gathered at Saigon's Tan Son Nhut airport. They were there to load the first flight of Operation Babylift: a last-ditch push to get the orphans of the endless war delivered across the seas to their adoptive homes before the Americans fled the decimated country. Before her country engaged in flight—my mother's anathema—she would fight.

There 243 orphaned babies and toddlers, the flight crew, and a number of American volunteer care-takers, including Embassy wives and young people, were gathered to board a U.S. Air Force C-5A Galaxy.

My mother went out to the plane with the voyagers and helped the adults strap the children into their seats. She did her best to help settle the scores of anxious children before the pilot said it was time to shut the doors. Then she went back to the terminal to watch the plane take off.

Once the plane finally began to taxi, my mother's body soared at the thought that she and the other women had yanked some goodness from the maw of defeat. All those lovely babies would finally, finally, after all the trials they'd been through in their tiny lives, get to meet their new families, would get to receive the love they deserved.

Then, 12 minutes after take-off, just as the plane was rising over the South China Sea, there was an explosion. The rear fuselage of the plane ripped apart, and the back loading door broke away from the aircraft's body. The desperate pilots tried for a return landing at Tan Son Nhut, but the plane crashed in a paddy just off the end of the airport runway.

Of the 138 people who died, over half were children. Instead of celebrating a triumph, my mother spent the rest of her day providing emergency treatment and weeping for the small, limp bodies, those dead and those injured, arriving by the scores into the terminal.

Vietnam delivered my mother her match, the one thing she couldn't fight. Fate? The gods? Chaos? What force brings such things to pass? How is it that sometimes the stars line up—or nothing lines up? How can whatever it is obliterate all the good you've tried to nourish in an instant? How often these questions must flood first responders' minds.

In many ways, that C-5A Galaxy Flight re-arranged my mother's particles. My family didn't realize it at the time. My mother's being was now tinged with depression and bitterness, but you couldn't really tell because she was so stubborn and vital and active. The PTSD hid out, and the anger, born of sorrow from the crash, distilled in her like liquor, and she became fiercer than ever. She was brave. Her fight drove her. My mother was a first responder, she was responsible for the babies of the world, so she fought on. She did the only thing she could do—the only thing we can do in the face of vast, inexplicable trauma. She went on. Doing what she always did.

All through her remaining years, my mother ignored her shatteredness. She roared ahead. After Vietnam, while my father trained spies to track and conceal themselves in the chiggers-infested and deer-spirited Virginia woods, she treated children with autism at a Virginia State Hospital. She helped small children with cancer, the death of one of whom nearly un-did her. Later, she rehabilitated so many stroke and heart attack victims in nursing homes that she was chosen the Washington area's home health care provider of the year.

I know, in the face of the rampaging pandemic of these last 2 years, my mother, like the other countless first responders around us, would have donned her personal protective equipment, clipped herself in harness, and rushed off to offer physical therapy in imperiled nursing homes and rehabilitation to COVID patients. She'd be tending every suffering body she could find.

Many of us felt an urgent desire to do something to help when COVID hit. As for myself, as soon as I got myself and my computer organized, I began seeing clients and leading writing workshops on Zoom. Members of my writing groups have reported that the workshops have helped to keep the wolves of boredom, depression, loneliness, and desperation at bay. The groups have done this for me, too. Giving truly is receiving. As part of The Things They Carry Project, I also designed and began teaching other therapists and writers to lead Writing for Resilience workshops for first responders, to help our front-line workers give expression to and gain some relief from the traumas and emotional challenges inherent to their work. Indefatigable and stoic as she was, my mother never fully recuperated from her experience in Vietnam. Perhaps via this work I was unconsciously recollecting her un-met need for help in dealing with the traumas of her own health care work.

These have been my small offerings during the pandemic, but as I have looked around I have been stunned by the compassion and dedication of my psychotherapist colleagues. I've watched them take stock of the mental health crisis accompanying the bodily one, plunge into the breach, and shoulder staggering case-loads. My friends have saved lives. They've been every bit as heroic and devoted as my mother was and have been today's body-tending front-line workers.

There are two kinds of duress—of body and of soul. The two are intricately interwoven and have been glaringly so during the pandemic. Similarly, both sorts of responders have been called to duty over the last 2 years: body-tenders and psyche-tenders, the skills of both sorts of people complementary and indispensable. Neither better than the other, just particular and proper to the individuals involved. All hands have been needed on deck in this stormy pandemic sea. This truth—that all sorts have been required, has given me a new sense of the value of my own skills, despite the fact that they are not my mother's.

Aristotle wrote in his 4th century B.C.E., male parlance:

Each animal is thought to have its own proper pleasure, just as each has its own function... But regards to men, there is considerable variation. The same things that give delight to some and pain to others, are painful and hateful to some and pleasant and agreeable to others....But in all matters of this sort we consider that to be real and true which appears so to a good man. (*Nicomachean Ethics*, Book X, 5)

This perspective, and taking a survey of all the helpers in the world, has given me heart.

* * *

My mother said to me one day late in her life, looking at her beautiful, old drooping breasts after a bath, “Why don’t these old things go away now? I don’t need them anymore,” but she couldn’t and the world couldn’t have lived without them. Like we can’t live without all the other feisty, body-defending first responders out there.

My mother’s example and that of all the other health care professionals doing their sacred work still strike me with awe every day, and memories of my mother’s bosomy fighting love, on behalf of thumbs and every other part of the human anatomy, keep me weeping and plugging. Lois Taber was a love-fighter.

I’d intended to dedicate these musings solely to first-responders, but I see now that my psychotherapist colleagues—the second-responders who minister to the souls within the bodies those first-responders so warmly attend—are love-fighters too. Maybe we all are, when it comes down to it. ▼

The pandemic has pierced our illusion of safety.

—Matthew Burgess Leary



We're All in This Together

ON JUNE 14, 2021, I SAT DOWN WITH A PATIENT IN MY OFFICE—LIVE, IN THE FLESH—FOR THE FIRST TIME IN 15 MONTHS, SINCE THE SHUT-DOWN FOR COVID-19. Knowing that all my patients had been vaccinated and that most were living cautious, circumscribed lives, in late May I invited all but one to come in person to continue our work. A handful of patients enthusiastically agreed. For most, it was to resume meeting in person; for a few it would mean our meeting each other for the first time. Having adjusted to telehealth, now I wondered how meeting in person would be different. I wondered, too, how long it would continue to be safe. Didn't viruses of this sort typically get more active in the fall? Would this one? I thought about the role uncertainty has been playing in our lives. As I write now, in early September, uncertainty is once again rising.

When I reached out in May, I received a variety of responses. These responses highlighted clinical and logistical aspects in my patients' lives and of our relationships. Some had told me weeks earlier that they were eager to meet in person, as soon as I was ready. Of those who declined, most based their decision on logistics. A few said they would like to come once they could work the travel time into their schedule: for example, when their children were back in school. Some were meeting with me now during work hours and could not take off more time for the travel involved. A few desired the convenience of seeing me from their home.

The response of one patient brought to light some clinical implications of in-person therapy versus telehealth. Faced with the opportunity to meet in person, this patient realized that she feels she can speak more openly

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with me from the security of her own home. A medical problem and feelings about her body and physical intimacy are important themes in our work. She experiences deep shame and approaches these themes with dread. From week to week, she moves toward and away from addressing them. At home, she has objects which comfort and protect her as she talks to me. This virtual mode feels safer and more productive to her. This relationship expands my thinking about ways telehealth can enhance our work together.

Only one patient declined on the basis of a fear of infection. I had expected more to opt out due to COVID caution and was surprised it wasn't the main reason people preferred to continue on telehealth. Those who opted to come in were eager to resume human contact. Certainly, we were optimistic at the time that our vaccines would likely keep us safe.

I had carefully weighed my decision to start meeting in person. I considered vaccine status, patient health and life style, and the infection rates in our communities. I also considered who I had to protect in my own life. Was I subjecting myself and my family to undue risk? Was I subjecting my patients to undue risk? What precautions would I take? Would vaccines continue to keep us safe? I informed all my patients that the format could change at any time, if infection rates began to rise.

I had become accustomed to telehealth, mastered the necessary skills, and even seen some advantages to it. Much to my surprise, I now wondered, "What will it be like to sit together?" How paradoxical it seemed to now view what had previously been normal as novel. During these many months, I had searched to articulate how telehealth is different. Now I was wondering how meeting in person would be different.

I was surprised to discover that returning to "normal" required adjustments. All along I had been going to my office to conduct telehealth sessions, rather than work from home. Even so, to see people in person I had to reorganize. Since no one else was coming into the suite, I had spread out. I'd moved furniture around to accommodate video sessions. Sometimes I settled in other offices in the suite (offices for general use) in order to have a change of scene. During telephone sessions, I occasionally took walks around the suite. I had to remember how to do in-person sessions!

It turns out I do remember, and returning to in-person sessions has been rewarding. I am grateful to have this opportunity, and so are my patients. That is not to say there aren't some inconveniences—for example, I have to wear shoes!

I continue to find it difficult to articulate the differences between telehealth and in-person therapy. Over these months, I've used a variety of platforms, depending on which worked best for my patient or which technology proved more reliable. They've included Doxy.me, FaceTime, Zoom, and the telephone. I believe I have done effective therapy in each of these media. My patients have applied themselves to changing and have felt my support. All the same, I prefer to work in person. Being in one another's presence enhances our communication. Facial expressions are more nuanced when seen live. Seeing the whole body gives me access to more non-verbal communication. Sitting together, we experience a greater exchange of energy. I believe I can convey warmth more effectively in person. We can more comfortably be silent with each other, when appropriate.

As we move forward into new phases of the pandemic, I bring with me an increased appreciation of the impact uncertainty has on us. COVID-19 has taught me to pay better attention to this dynamic, which reverberates in our daily lives. No longer are we able

to linger in denial; we can't pretend to have control over this virus. We must make decisions every day about what risks we are willing to take. Danger lurks, invisible. Where will we go, and who will we go with? Not only that, we must base these decisions on insufficient information, on not knowing. Uncertainty absorbs a portion of our thinking and emotions, our time and energy. Perhaps we even burn calories on it. We are learning how to live with it. We are recognizing the fatigue it causes and the residue of anxiety it leaves. Conversation about this dynamic appears regularly now in every therapy. We explore how to massage uncertainty in order to go forward in life. I believe this awareness has deepened the work I do with my patients.

Similarly, the pandemic has deepened my sense that we are all in this together. I approach my patients now with an expanded awareness of our commonality and an even stronger sense of togetherness. We all struggle with new demands on our resourcefulness. We all experience fear, a heightened awareness of our mortality, the challenges of confinement, isolation, and boredom. We all are humbled by not knowing. Trained to reveal very little about myself, I have acknowledged to my patients that I, too, am affected by this pandemic. I have done so to normalize these reactions and to offer a model of resilience. I hope to model curiosity about our situation, because curiosity enhances growth. I hope to encourage optimism, and to help them—and myself—develop creative coping mechanisms. I believe my openness has helped my patients feel understood and to develop their own resources.

We are learning a great deal from this pandemic. I know that two things I have learned will remain part of my approach to this work, regardless of the presence or absence of this virus in the future. First, I will continue to appreciate the impact uncertainty has on us. Second, I will retain an increased sense that we are all in this together. Sadly, with the current spread of the Delta variant and knowing now vaccines will not fully protect us, we enter another phase of increased anxiety and uncertainty. It looks very possible that safety precautions will cause me to again stop in-person treatment. I hope it isn't so. I will again miss sitting with my patients. ▼

We've changed because it's time to change. With COVID, we reinvented ourselves, for us it is a time of opportunity.

—Mohammad Abdullah Al Gergawi,
Minister of Cabinet Affairs of the United Arab Emirates

Catherine Grothus



Pandemic Parents in Conversation

CATHERINE GROTHUS, LPC, CAC-I, received her master's degree from The George Washington University in clinical mental health counseling and has been practicing for over 10 years. Her primary focuses in her private practice are addiction, trauma, and sexual health. Currently, she is living in a rural Pennsylvania town with her husband and two-year-old daughter to wait out the pandemic. She hopes to move back to Washington, DC, in 2022.

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IN THE PAST YEAR AND A HALF, I HAVE FELT SO PROFOUNDLY ALONE. ALONE IN WAYS THAT I NEVER KNEW WERE ALREADY WITHIN ME.

I want to be in community. I love the feeling of being with others. I also want to be an agent of change. I can only do that if I show up. And where showing up is scary, I don't need to do it alone.

I know how to bring people together—ask others to join. So, when writing about my experience in pandemic life, I knew I needed to do it in conversation with others.

So, I sent out an email, stating my intentions and asking others if they wanted to participate:

Would you engage in an email conversation amongst several therapists/parents who have navigated life/family/practices during the pandemic while also having young children (some of them just recently born)?

Would you engage in an email conversation amongst several therapists/parents who have navigated life/family/practices during the pandemic while also having young children (some of them just recently born)?

The goal would be to create a dialogue amongst each other (a group process of sorts), and ultimately for that dialogue to serve as the basis for an article for Voices.

This is intended to be a supportive, safe, honest, and unassuming exchange, with the deep understanding that no one knows it all. You also get to decide if anything you write / share is off limits for an article (even if it is everything you share). Truly, there is zero pressure.

Three amazing individuals—each a friend, mother, therapist, and so much more—took me up on my ask. Below are excerpts from our dialogue, woven together to create what I hope is an honest portrayal of our experiences in the past year and a half.

Prompt: What do you know now that you didn't before—about yourself (as a parent, partner, therapist, friend...) and your values, about your vulnerabilities and your resiliency, about the world and its dynamics, about your clients or the practice of therapy under new modalities and circumstances?

Heather Castro



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Helena "Mimi" Martin



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Sara Shiffman



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CG: I am so excited about this dialogue and have been thinking a lot about what I was going to write for this first email exchange. Part of me wanted to get it right and make it so thought provoking that the three of you and the readers of *Voices* would be blown away. But honestly, one of the things I have learned about myself is that I can be OK in the messiness and undone aspects of life. I don't know if that is motherhood or the pandemic, maybe a little bit of both. Edith was born November 12, 2019. My husband and I had 4 months of being new parents before lockdown.

SS: Catherine, I know what you mean about wanting to blow everyone away by my strength, and there's a way I tell my pandemic story where I am the hero. That story goes like this: 5 months into the pandemic, I left my urban life, uprooted 10 years of living in Washington, DC, and moved back to my small hometown in middle Connecticut to help my elderly parents, my father with Parkinson's and my mother, his caretaker.

The truth, of course, is the opposite: After going the longest period in my life without hugging my parents, I couldn't bear the distance. I'm 3 years into my motherhood journey and very much a novice. I need my mom; I need my dad. I need help.

HC: My response to this post was much more challenging to write than I anticipated. This pandemic has certainly changed the way I interact with my family and patients more than I ever thought possible.

At first, I didn't feel a huge impact of the pandemic. My family and I moved across the country about 6 months before the pandemic began. I became a full-time stay-at-home mom and found it difficult to connect with people or find friends. I also had a very difficult pregnancy that ended in miscarriage. I was isolated because of the physical toll the pregnancy took and alone with my emotions of sadness and anxiety.

MM: Pre-September (pre-childcare) life was incredibly hard. As a very full-time therapist I was locked away in a confidential space while my partner took on the majority of childcare and juggled his full-time job. This created a natural tension in our relationship and a sense that every minute I wasn't working I needed to be relieving him. This meant moving my morning hours to the weekend, prolonging my work week to include 6 days instead of 5. No no-shows or cancellations also meant no time to do administrative work, so that got pushed to after kid bedtime. A usually sacred space where I can do life tasks, connect with my partner briefly, or maybe even snag a show or read a section of a book. That hour was so precious, and now it was gone. Filled up with more work.

The grueling 6:30 a.m.–9:30 p.m. schedule was back breaking and left me feeling raw, tired, and desperate. It felt unsustainable, in addition to bearing my clients' stress and the fear and unknowns of the virus as well as the lack of connection I had to friends and family. Honestly, it was an awful time. But there were some bright lights in it. I didn't miss my commute time. And I began to cherish the morning time with my daughter.

CG: As I reflect, I feel so much sadness and grief from the reality that life is never going back to the way it was. There are dear friends and even many family members I may never see again in the flesh. My practice isn't going to look the same ever again. I don't know if I will see some of my clients again. And while my stomach turns and my heart aches, I know that if all that proves to be true, I will be OK.

HC: I had already been isolated when the pandemic hit so the restrictions didn't feel new. I selfishly felt relief and no longer alone because the entire world was quarantined. I felt connected with others' disconnection. This was short lived as the terrible fear-based reality set in. The devastation of seeing others' loved ones passing away and livelihoods being lost amplified my emotions of sadness and anxiety.

SS: A quick note to say that after reading your entries, I wish I could scoop you up into the deepest longest hug.

In the beginning, patients struggled to fill the prescriptions I wrote for various reasons: fear about virus exposure inside the pharmacy; mail order prescriptions were frequently lost or late due to USPS complications; pharmacies were closed—literally boarded and locked with fencing—due to potential for unrest; and raw materials for medicine were not guaranteed.

I struggled, too—how would I cope amid all the suffering in my patients? The uncertainty was suffocating—who would fall sick? Die?

HC: My understanding of the impact of the pandemic has been further solidified as I started co-facilitating a weekly virtual group therapy session. I can no longer get as good of a sense for how patients are really doing beyond their words. Their body language is

difficult to decipher because now I can only see part of them through a screen. I also feel so challenged with getting the group to open up because each session feels so distant. The power of the group no longer feels as powerful.

SS: Working by video for 16 months now, the work is different. I've begun to listen so much harder than I ever remember listening before. I know I can no longer offer a sacred spot on a couch, a reliably full box of tissues, a body posture of comfort and acceptance. For a time, I could not even guarantee a prescription for Prozac. But I can offer my listening and my words, and I've come to understand that these most basic and elementary tools that I've quite frankly taken for granted, are the most fundamental.

MM: I did like the challenge of telehealth. I had to focus more and get more creative. I had to ask and do more imagining around what people were feeling rather than intuit it through body language. It made me a better therapist, in a lot of ways. I enjoyed the challenge of it and still do. I REALLLLLY like not having a commute. That freed-up 1 hour and 15 minutes is A LOT of time I didn't have before. I now spend it with my daughter, and that makes life better.

I resonate with the idea of the good and the bad of this experience. I will also offer that I feel very grateful to have more support than most through this time. My daughter has been in a full-time daycare setting since September and that has made a vast difference. But of course, that came with a decision to take on more risks for her and for our family. I am generally more of a risk taker than most of the therapists I know. I am also more of an extrovert. I see my differences more clearly these days, and it results in feeling more in myself but a bit less of the sense of belonging I used to have within my community.

CG: Through it all I am still me—kind, loving, smart, and funny. I will still be a wife, mother, and friend, and I will always be a therapist. That last part is one of the biggest struggles I am having as we move into post-pandemic, as we will likely not return to Washington, DC, full time. We likely won't even live in the city we live in now—a very rural, small town in northern Pennsylvania. My practice will likely be virtual for a lot longer than I would have thought and the potential of that being more permanent grows by the day. I will continue to be 254 miles from the home I have grown to love and the family I have created in my personal and professional worlds in DC. I don't know if I will be OK through it all. But for right now, that is OK.

SS: The strongest lessons of the pandemic for me have been how interconnected we all are and the incredible appreciation I have for finding gratitude in the smallest places. From January to April as people became vaccinated, I relished the post-vaccination stories my patients shared. They all spoke with marvel and joy as if they were telling me about a trip to Fiji, recounting stories that pre-pandemic wouldn't have registered: a hug with a friend, a coffee with a parent, a meal with a colleague, a touch on the shoulder.

HC: Although my difficult emotions feel overwhelming, I have also gained a stronger sense of gratitude. I have realized how lucky I am to have my health back and a steady family income. I have learned to appreciate my family and life more. I have even come to

appreciate technology more for the ability to still connect with those I love and provide therapy.

MM: There's more for me to say about deeper learning I did during this time, but I will leave that for later. I am more conscious of how I overtax myself these days than I used to be. The pandemic helped deepen this insight. I appreciate all that you have shared, and I look forward to hearing and sharing more.

* * *

Prompt: As you contemplate or begin re-entry, what does that look like? What pulls you outward or holds you back? What do you take with you, in new habits or values?

CG: This past week was a perfect example of how I am contemplating re-entry. I am scared. Fearful that we will have been so isolated for so long only to get COVID or Edith to get it. I want to hide away for as long as we possibly can.

My husband's good friend died on July 7, 2021. He had a heart attack at 40. His memorial service was this past weekend. We were all going to go. My husband and I would attend the service, and a friend would watch Edith. Then Delta became more of a concern. We reconsidered, and my husband went alone. So now I am more alone. All to minimize risk.

MM: Very sorry for your loss, Catherine. And I get your choice to not take the risk despite losing something in the process of staying safe. These choices just suck. And there are often not clearly right ones.

I tend to live life taking a bit more risks. How can I take risks that are less likely to negatively affect others but still give me something I need? Hell—life is short, either way you cut it. I have always had an existential push to live it well no matter how short it is and no matter what the confines. But I also want to question the confines I put myself in. I don't always live that, and it needs to be countered with good common sense and a care for the general population, but I like how the philosophy feels. I think watching my parents' lives has informed me of how important it is to make wise decisions that aren't fear based and that also don't deny fear. But it is very hard to know the line. I think courage is important. Putting anxiety in place is important. But foolishness and denying fear are dangerous. These choices are just so hard.

So, I must be getting anxious because I am going more conceptual! My tried-and-true defense. I am anxious. I am anxious about re-entering and anxious about the possibility of re-exiting, both. But I think I am more comfortable questioning my anxiety than living within it. With that said, I just told my good friend from college that I wasn't going to her in-person wedding and my partner did not attend an outdoor concert he had been looking forward to. So, I am more likely to make cuts to recreational (but life giving!) activities rather than what feels essential (family time, school time). Can you tell the push and pull within? I am very tired of that push and pull but here we are. Yet again.

CG: I love these emails so much.

My father-in-law is going to start a daycare with my daughter and her friend that lives

down the street one to two times a week. He used to work in early childhood development and wants to give them regular times to play, learn, and socialize with each other. I am floored at this gift. To know that every week she will see this little boy and be able to interact—I feel so blessed and overjoyed.

MM: I am beginning to emotionally understand that this is going to be an even longer haul than I expected. We had an outbreak in my daughter's camp. Six of 40 kids got infected; 5 were in the same pod (4 pods of 10 kids each). Luckily, there were no cases in Alice's pod, but it was still scary. And it brought me back to the days in which we had Alice full time while trying to juggle two jobs, one of which (mine) is not a multitasking sort of endeavor.

It was hard, and the days were very long. No time for anything but childcare and work. No rest, no time for other life/organization tasks, no time to work out, no time to connect with my partner, less sleep. These are all issues normally, but taking away that precious hour at the end of the night or 10 minutes between clients felt like such a loss. First world problems, I know.

I am in touch with several of the mothers whose kids were infected, and they are all fine now. Back to their normal selves and heading to school. I know you can't predict which 10% of kids will be hit with the long-haul symptoms and that there is sometimes a delay in onset, but it does give me solace to know so many kids/adults who have been infected and are fine. That helps when I think of all the risks we are taking to send Alice back to school.

My daughter is 5 and thus is not of the age where I can justify keeping her away from the world. Her inner world is growing, and I'd like for that to happen in conjunction with her outer world. She's now old enough to start incurring academic losses which could affect her way down the line. And that is scary and does affect the choices my partner and I make in terms of risk and exposure.

CG: Mimi, I know my anxieties would be so much higher if my daughter was school age. Even preschool age. That seems like not a choice. She needs to be part of the world. She needs to keep growing. I see that starting with Edith. She has one playmate, and we are striving to have her play with him as often as possible.

Prompt: After adapting to the mechanics of telehealth and navigation of a new mutually-lived pandemic experience, what has arisen from this new phase of clinical work?

CG: One last thought about being a therapist and working in the virtual space. I don't have as many emotions about it. I don't feel moved or compelled many days. I still feel a sense of connection, but it feels less real, weakened by the screen between me and my clients.

I have learned that I can't divorce myself from the fact that I, too, am adjusting and re-adjusting to the ever-changing pandemic. And that virtual therapy is hard. Sometimes it feels less connective. Clients or I can misinterpret—there is so much less information translating through the screen because body language and nonverbals are flat.

And where all that sounds like a negative and a reason to stop virtual therapy, I also think it has forced me to be more real with my clients. Maybe even more authentic?

MM: I find myself less aware of what is being induced in me and what is mine to own. There's so much cross-over in the lives of my clients, and I feel the danger of over-relating and then missing the important differences that provide clues to the more unique parts of my clients and what's contributing to their experience. I feel more of a danger in the relating of missing what is truly them. But I also let myself relate a lot more. I find myself nodding my head more vigorously and using my experience as a perch from which to feel their experience more fully.

I am not sure I have figured out when I let myself relate and when I know my relating to them might be an overidentification. I think it's by feeling. Sometimes I catch myself saying something to a client that feels more like I am talking to myself. I look for their reaction and often sense less connection in that moment. I then readjust to focusing in on the differences and listening more intently. But it's imperfect and requires me to take risks, see how it feels, and readjust.

This is not a new process, but it's a lot more frequent. And I know that I am not always going to know if I am overidentifying without trying it out first. Without speaking my honest thoughts. It's like being blind and feeling my way through something rather than seeing my way through it to avoid the obstacles and stumbles. I like a part of this and am glad to have this experience. But it's also hard. And feels like a lot of emotional work.

CG: So, what if I emerged from this phase of life being more me? Being more patient for those things I cannot control? Being more intentional with my words but also more open with myself and with others. Is this something that just comes from living life and being a therapist? A growth moment that happens whether there is a pandemic or not?

I was thinking today how some of my relationships have stalled, even died. Other relationships have grown at lightning speed. I wonder if that is also true with the relationship, I have with myself? I have so many questions. So many things that I wonder about. Having a space to put it out there. To share and receive with other moms, therapists, and friends. Thank you, Heather, Mimi, and Sara, for taking space and allowing me to take space with you three.

MM: Catherine, I am recognizing an envy of the growth you have had in this time. I feel a strange difference between my personal growth and my clinical growth. I think the clinical growth will take some time to catch up, maybe.

In the beginning, I really liked the challenge of telehealth. I liked that I could see my clients faces more clearly as they were actually closer to mine. I liked the creativity of asking new sorts of questions to access their feelings and trying new ways of doing that. It unleashed a more creative side. Somehow, I have lost some of that. I think part of that is pandemic related and part of that is the ebb and flow of long-term work. I stay stuck for a while and am in a place of not knowing—if I can hang in there long enough, I find the knowing. And I have been there enough times to have faith in this process, however frustrating it is.

I am consistently 2 minutes late to most sessions. That is new. In person, I am a timely

therapist. But not virtually. A generous interpretation is that I am more myself with my clients now. My natural rhythm (or resistance?) is to be a couple or a few minutes late to most things. Not very late, just a little. So, they now know this about me. And I know this about myself more fully. Which I like, even if I don't quite have a hold on why it exists. So maybe that's the theme. I am more myself, even if I don't quite have a hold of who that is at any given moment. As I type this, I feel a welling up of emotion. It's hard for me to feel less confident in knowing myself. Scary. But maybe the pandemic has helped me to be more comfortable with the parts of myself that I don't fully understand and my clients to be more comfortable with their unknowing. That feels like a gift, at times. And like a hard truth at other times.

Thanks for creating this space, Catherine. It is nice to think of you all holding it with me, and I like holding your experiences as well. Maybe I don't need to do as much predicting of my feelings in the future. Maybe I can just feel it and respond. :) ▼

Commentary

AS I READ THROUGH THIS ARTICLE, I FELT DRAWN TO THE SENSE OF CONNECTION BETWEEN THE PARTICIPANTS IN THE CONVERSATION. I want that, too. To be able to engage in real deep dialogue about my lived experience through this time with others who wanted the same. I used this as an impetus to insert myself into their conversation and to reflect in a meaningful way about my own lived experience. It didn't feel as connecting as I am sure it did for them, but I did enjoy and appreciate my own personal reflection. I send my appreciation to the authors for the spark that got me thinking and writing.

What have you learned about yourself (as a parent, partner, therapist, friend....) and your values, your vulnerabilities and your resiliency, about the world and its dynamics, about your clients or the practice of therapy under new modalities and circumstances?

I sense a growth in myself that I'm still making sense of. The world feels different, and I feel different in it. I'm still settling into this shift, but it feels very real and fundamental to my identity. As a mom of two teenage daughters, the past 2 years have presented all sorts of new and unexpected challenges, as well as gifts. We grew closer, but I also had to hold the safe space of our home in much bigger ways in order to support their growth and stability. As the partner of a first responder I had to manage the very real threats and stress that came with that job, while trying to be supportive and not too reactive. I remember describing to a friend this image of me as a life raft barely holding my head above water with everyone sitting on top of me. I guess I've learned that I'm stronger and more resilient than I ever expected—and I've never been more emotionally exhausted in my life! I did find solace in my close friendships, which helped keep me afloat.

I have a really hard time putting into words my experience as a therapist. I'm struggling to remember the before times, when I saw clients in the office. I know that I am working harder than ever to support my clients and ensure that they feel my presence and my caring, even over the distance that now separates us. It's gotten more seamless and easier over time, but it is still a strain. I also feel really good about the work I am doing supporting people during this collective trauma. My sense of purpose in my work has never been stronger.

As you contemplate or begin re-entry, what does that look like? What pulls you outward or holds you back? What do you take with you, in new habits or values?

I am struggling with the idea of returning to in-person work. I'm surprised by the degree to which I am not looking forward to it. I look forward to the idea of seeing clients in person, but logistically, maybe I've gotten too comfortable?!? Having to get fully dressed (including pants) and drive to the office seems like a huge hurdle. I am taking the leap very soon, but I am anxious and have this inexplicable sense of dread. I'm thinking there is more to it than just wearing pants and driving to the office, but I'm not sure what exactly it is. Maybe facing the world again?

After adapting to the mechanics of telehealth and navigation of a new mutually lived pandemic experience, what has arisen from this new phase of clinical work?

I have learned to appreciate my need for balance, in work and in life, in a new way. As the work/life boundary began to bleed, both logistically (working from home) and intrapsychically (through our collective trauma), I felt an even more intense need to find myself and ground myself. As an introvert, I do that by turning inward and, at times, shutting down. I gave myself permission to do this (mostly!) without judgment, which took a lot of self-compassion. I also found deep solace in the relationships that stuck and even blossomed during this time. Those people kept me afloat while I tried to help keep others afloat. I am eternally connected and grateful to "my people" in a deep and profound way. What I am recognizing while writing this is that my relationship with myself and with others has shifted in a way that is profound and permanent.

—Daryl Ellen Gincheran, LCPC

If you're going through hell, keep going.

—Winston Churchill

Sunrise...Sunset

Jillian M. Thomas



This year of chaos
So hard to catch a break
Breathe in...
There's still sunrise and sunset.

Treading water, biking fast
Trying to regain balance
Pandemic, inequality, fear
How many masks!?

Working remotely
All the while
Teaching 4th grade
To my child.

Breathe in...
There's still sunrise and sunset...
Breathe out...
There's still sunrise and sunset...



Missing family, friends...
Zoom fatigue and weight gain
Relax, breathe in...
Plant a tree, learn piano...

Virtually, virtually!
You can learn anything!
It's so annoying
Life goes on...for some.

Onslaught of so much
And so little
Guilt, grief, laughter and love
Caught your breath, friend?

Take the time
To breathe in...
To breathe out...
Sunrise and sunset.

Sunrise...Sunset



Sunrise...Sunset



I see you toss treats to the agitated puppy,
use the computer's reflection to smooth out your bed hair,
you point to the picture of Dolly Parton behind your desk,
there's the cat with the clipped ear blocking the camera.
I meet your sleepy toddler up early from his nap,
hear the buzzer on your dryer, the doorbell, the toilet flush,
see your eyes drop down to secretly put on your nail polish,
catch your eyes shifting to the right, to the TV on mute.

Today you're slouched on your couch, or sitting up in bed,
you are in your car finding privacy during lunch,
in your basement because of the leak in your den,
in Florida helping grandma recover from Covid.

I don't see your girth or your height or the curve of your ankle
I don't see that you're wearing the same yoga pants from last week
I don't hear you sigh with weariness, with frustration, with dread
I don't see your hands tremble when you share your diagnosis
I don't see you caress your belly a week after your miscarriage
I don't see his hand on your knee to give comfort when the tears come
I don't sense the safety in the room when you finally feel heard.

I don't...
I don't...
I don't...



The Sisterhood of the Traveling Angst: Pandemic Adaptation and Compensation via iMessage

[Texting] discourages thoughtful discussion or any level of detail.

—Daniel J. Levitin

Sweet is the voice of a sister in the season of sorrow.

—Benjamin Disraeli

IN EARLY 2020, CONFINED MOSTLY TO OUR HOMES AND EXILED FROM OUR WORKPLACES NEAR BOSTON AND PHILADELPHIA, WE FOUR PSYCHOLOGIST COLLEAGUES AND FRIENDS HAD HOPED THAT THE PANDEMIC RESTRICTIONS WERE TEMPORARY. But as the year moved forward, the weight of a significant increase in work demand and increased isolation from family, friends, colleagues, and patients grew dark and overwhelming. In the midst of fear and uncertainty, a daily text message thread between us took shape spontaneously. Unintentionally, we found an adaptation and opportunity in the circumstance that my son described, “In the pandemic, everyone is now the same distance apart.” As psychotherapy evolves from crisis management to deeper layers of exploration and change, so our daily text group grew from keeping each other afloat to a chosen family connection that we see as lasting into life beyond the COVID emergency. Over 19+ months we have grown from fond of each other to sisters of the heart. The jokingly named “Sisterhood of the Traveling Angst” has brought us to this season with gifts we intend to keep.

We came together several years ago as members of the Couple/Family Section of American Psychological Association (APA) Division 39. But we are not only psychologists; we are a musician, an artist, a part-time apple farmer, and the enthusiastic, now thwarted, dinner party

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hostess who writes these words for the group. We are not of the electronically connected generation. Indeed, we all qualify for Medicare. We were given to the documented skepticism about the Internet's negative effects on meaningful relationships. The pandemic only seemed to promise loss, especially of the sense of safety that our privilege and places in the world afford us. (Perhaps that last is an illusion, but to paraphrase the movie *The Big Chill*, don't knock illusions; where would we be without them?)

Throughout this paper, I will quote from our texts. But examples can't adequately represent what the ongoing dialogue has done for us. Reviewing old exchanges, I was reminded of Yalom's group psychotherapy curative factors.¹ I saw our group cohesion, the identifications personal and professional, the safe and accepted expression of our difficult feelings about our lives and the world events that brought grief and joy, the intimate connections of ups and downs, our ad lib clinical consultations and check-ins, and our simultaneous senses both of belonging to each other and feeling alone. All of these have been, in a word, therapeutic.

We retreat to our tribes in times of danger. It is likely that our natural affinities and pre-existing acquaintance set us up to get so much benefit from this limited medium. We share race, stage of life, ethnicity, gender identity and sexual orientation, profession, socioeconomic privilege, stable long-term marital status, motherhood, and pet ownership. We are all avid readers, travelers, and music lovers. Still, we have also delighted in discovering our differences. Jewish childhoods on Long Island, in the Philadelphia suburbs, in the South, and in Boston suburbs mean different things. Our resting blood pressures, circadian rhythms, phobias, cocktail preferences, talents, exercise choices, health and employment histories, and work stamina all vary.

Early 2020: Containment, Stabilization

Our earliest memories of our text thread were of sharing anxiety—and then efforts to adapt and cope. None of us remembers when it became daily contact, but we quickly recognized our mutual need. In the winter of 2020, we shared the how-to video for disinfecting groceries. We made good meals with those groceries, and, yes, like so much of America, we baked bread. Not only bread, but bagels, matzah, pita, croissants, and pizza dough. All of our food was virtual comfort food for each other, as we sent pictures of the meals we could not share but vicariously smelled, tasted, and enjoyed.

From P: Cookies, lasagna, chicken salad, matzah balls—you name it sisters!

We sent cartoons and music videos, violin serenades, and sketches. And as text amateurs, we worked to master emojis, hoping not to be sending obscenities.

From C:  It's the closest thing I could find that would represent I just finished my mammogram. (It's ski glasses, I think, but doesn't it also look like a bra? 😊) Hope you're all having a good work day.

¹ Yalom's 12 therapeutic factors: altruism, cohesion, universality, interpersonal learning input and output, guidance, catharsis, identification, family re-enactment, self-understanding, instillation of hope, and existential factors. They are widely accepted as corresponding to relevant and potent mechanisms that bring about changes through group psychotherapy. (Hauber, K., Boon, A.E., & Vermeiren, R., 2019)

Deepening Connection: Getting to Know Me

Over months, our exchanges became more open and revealing. While we longed to feel close to others in person, we wrote to each other about our hopes and fears, our family histories, our earlier lives and relationships. (Every one of us had dated a boyfriend named Bob.) As psychodynamically trained psychotherapists, dreams inevitably became part of our ongoing conversation.

I remember clearly a dream that I had early in the shutdown. It involved hearing singing or music as a way of knowing you all had my back. It was so bittersweet I can still feel it.



The thread at times took on the feel of a virtual campfire—each feeling the warmth as we shared our stories.

Another aspect of this group is that you each have helped make me a better version of myself. That I can bear to be vulnerable... not true of the family I grew up in...and learn about myself. Like the best therapy.

We don't know when we first called each other sisters. But we named our thread because of the feeling of comfort and safety that our bond has inspired in all of us. In this chosen family, we seem to have eschewed the competitiveness of siblings-of-origin. We enact the better part of siblinghood. Perhaps our age and our mutual identifications, perhaps facing the same deprivation, have allowed us to stay appreciative and generous with each other.

There is no resource to compete for, as we all have each other's admiration and affection. And like a family we created rituals. We say good morning and goodnight. Three always collaborate to send the 4th birthday flowers, music, and handmade cards.

We share a heart-to-heart sisterly bond as mothers and as daughters whose mothers have died. All of us were restricted from seeing adult children: one moved even farther away during the pandemic; another was deployed to Africa. We helped each other adult-parent and negotiate the developmentally appropriate space from an artificial distance as our children faced their own lives, relationships, careers, health, and pandemic challenges. We worried, kvelled, and mothered each other. Then there was the day that the serviceman returned and surprised his mother. We all felt the unbridled joy.

P: OMGOMGOMG my son just surprised us at the door! Did you hear my screaming? [His sister] had said be home for a delivery. I just hugged too many young men without masks!

R: *I JUST LOVE THIS*

C: *JUST LOVE LOVE LOVE this too!!! It's the kind of feel-good story you see on the news, but it's you!*

D: *Yes! ...Your sisters are feeling the vicarious love vibes!!* ❤️

Throughout 2020 and into the winter of 2021, we coped together with helplessness and frustration about our government and its inadequate response to the pandemic, witnessed George Floyd's murder in horror and then the growing national awareness of the assault on Black lives, and lived guiltily with the safe choice to not participate in demonstrations or door to door canvassing. We traded information and resources to do what we could from our safe distances. We worried in anticipation and then sweated out election day and its aftermath together.

Professional Identity: Support and Development

We all had avoided much online practice pre-pandemic. Who were we now that we were confined to Zoom and Doxy?

C: *In my other life as a therapist, you know the old 3-dimensional way, I never took notes and I remembered sessions because I was there, open, and listening. In this new 2-dimensional way of practicing, I take notes throughout the session because remembering session content is almost like trying to hold onto water!*

P: *I just saw a mother my age and grown son (so in 3 different locations) and had the worst connection issues so far! It's so funny, but I want to both be in charge of resolving the issue like I know what I'm doing and want the son to take over and JUST FIX IT. None of my backup plans worked, and we kind of muddled through with a lot of "Can you hear me?" and "Unmute yourself!"*

I was grateful to be tutored in the ways of Venmo, as I sought to catch up with the 21st Century. I named my Venmo handle as an homage to our group.

More seriously, we sought each other's counsel about our clinical dilemmas, ethical quandaries, and countertransference complications. We contained each other's higher than usual emotions and offered sound clinical and practical advice. Our pandemic-damaged professional confidence was shorn up by almost instant availability to each other—a virtual water cooler conversation that we could tap anytime. In the absence of office colleagues and professional interactions, we could express the fatigue of a day on Zoom, the frustration of not being in person with patients, how our lives and functioning were being affected by the very stressor that plagued our patients. There was always a swift response from at least one of us to any SOS text.

D: *Ok, here is a pandemic uber mistake—I just sent a longish text intended to B. but to a young adult patient by mistake.* 😞 😞 *Crap!*

P: I don't actually think this is an uber mistake. It certainly depends on the patient and how they read it. I've done this myself and don't remember it being a big deal but a mistake that patients are sometimes glad to see us make! Certainly a hazard of anyone who texts (as I do).

R: I've done this myself. Like some message saying, "See you at 5 PM," or "I mailed the package." I don't think yours is so revealing that it matters much. But I know that feeling when I realize I've done it.

C: I agree—not an uber mistake.

D: I feel reassured. Thank you!

As the months dragged on, we realized that we were not just maintaining with patients. We were effective in helping them meet their own life challenges. We could take new patients and feel that we were serving them well. We found ourselves feeling more relaxed in our role, as our own dogs barked or cats jumped on the keyboard. We joined in the inevitable adaptation to our online reality that caused our patients to sit in closets or their cars because their children were home. We grew more experienced in the wisdom of what Gerald Stechler called rubber band boundaries in psychotherapy: stretching, while not breaking a therapy frame (personal communication).

And we used online learning from our homes to attend Zoom workshops together. Signing in and searching for each other on-screen, we devolved into the Zoom Keystone Cops.

D: Hi, C. !!!

P: You two aren't sitting near me. 🙄 You're not putting on the video? They added a down thumb!

C: Hi, D!!

P: Hi, C, even though I can't find you! I forgot this wasn't a [local Boston professional group] event!!

C: Where's R?

D: R, try restarting your computer and trying again.

P: C, you are now a row below me and one seat over, HI!

C: I don't see her!

D: You are "sitting on the aisle"! She's there, no video.

R: I AM SO MAD. NOTHING IS WORKING!!!!

The Hope of Spring

D: P and I both get our 2nd vaccine tomorrow!!

R: Don't know yet, but I'm so happy for you all!

C: We are investigating where/when to get ours.

Was this the beginning of the end or just the end of the beginning?

As we individually ventured out more into carefully chosen safe places, we lived the other's experience: the sounds of the sea, views from a mountain hike, identification of flora and fauna, and sunsets. When any one of us was freed from work and home restriction, we gave the others moments of beauty and peace—even Zen—and laughter.

C went to a favorite winter vacation spot to live and work for a month where R had also regularly stayed. C's pictures made the place come alive in imagination. We gave names to the alligator (Walter) and the great Blue Heron (Arlene) in the canal outside her rented dwelling. When C's Wi-Fi failed, we all smiled and commiserated as she connected with her patients while sitting under a palm tree to catch the library Wi-Fi.

We also could share survivor guilt and gratitude for our safety. So far, none of us have caught COVID. Our children and patients who did recovered without long term effects. Even in the worst times, we could work, have groceries delivered, even safely travel, while some of our patients and hundreds of thousands of others could not.

We shared the hope and the possibility of real change and a cautious, gradual re-entry to the wider world. Throughout spring and early summer, our messages reflected a new normal: visits with children in different cities, outdoor concerts, indoor dinner parties with fully-vaccinated friends.

Reunion

On August 31 of this year, P and C each had rented houses by the sea near each other and just a 2-hour drive for D and me. We realized that, fully vaccinated and practicing compatible levels of caution, all four could be physically together for the first time in 2 years.

The feeling of at last being in each other's presence was almost indescribable. As I got out of the car, I experienced one of the most glorious (and longest) hugs of my life, flooded by happiness and relief.

As Tara Brach (2021) said in a recent interview, "When you get to be with someone in person these days, you feel an open heartedness and remember and feel fully why you love someone."

We walked the beach, four abreast, then in pairs, changing configurations as the ongoing conversations flowed. We reveled in the full experience of seeing, hearing, and moving together, soothed by the sight and sound of the waves. We ate a meal together at one table, drinking in each other's laughter. Of course, being ourselves, we masked up and went shopping at the spice and cooking store, absorbing the aromas, exchanging



cooking ideas. The day went by so quickly, but we parted relieved and refueled, squirreling away the sustenance of this physical time together. The telegraphic farewell messages represent but can't adequately convey how much we took with us.

C: Bye Bye! What a FABULOUS day worth cherishing!! ❤️

D: I TOTALLY agree!! So much fun.

P: Thank to each of you for lots and lots. 😊

R: It was the BEST day.

Our Takeaway

As I write, pandemic uncertainty continues. What do variants and vaccination refusals mean for the winter? We write to each other about our boosters. We note places we feel free to go where people inexplicably don't mask. We see carefully selected patients in person and wonder what our practices will look like going forward. Our patients have new expectations, and we have new skills to match them.

We all listen to the Aria Code opera podcast, delighting in a newly found mutual interest. We look for movies that we could watch in parallel. We worry about health challenges besides COVID, for ourselves and our loved ones. One of us now looks forward to the birth of a grandchild; we joke that the baby will have three maternal great-aunties. We tentatively plan joint vacations and outings, hoping to meet up at the Met or at the APA Division 39 meeting next spring in Chicago as we calculate and recalculate the risk level. It is the way things are. We work to meet the circumstances and to find the opportunities.

And, as we all face the challenges of age, we know that uncertainty will be the name of the game, COVID or no COVID. Our group is now in place both as our water cooler and our virtual campfire, to use as needed.² Despite misgivings about Internet communication, we have turned it to our advantage. More profoundly, we have established that we can help each other whether we are near or far and not to take inevitable losses as narcissistic injuries (Stechler, 2007). Despite our wishes to be in person, our thread has given us a tool for addressing isolation and fear. As decreased mobility or more pandemics may come, we are better equipped. We know that we can lose much, but we don't have to lose everything. Together, we are better able to face upcoming times, "when solitude is no bliss" (Sylvia Woods, 2021, p. 13). ▼

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2 Even as I was writing this sentence, P reached out about a difficult patient hour. And soon after, C wrote to us about a nightmare. Three responses came to each within minutes, offering empathy, humor, clinical advice, and the promise of more as needed after the workday.



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Therapist's Life in Lockdown

GREETINGS FROM FLORIDA! NOT MANY PEOPLE KNOW THAT I'M HERE FOR A WEEK. SHHH! It's a solo vacation, acquired from my kids' school auction: a stay at a condo for a week by the beach. The theme I have established for the week is Eat, Sleep, Beach. I'm here while the kids are with their dad. We are divorced. I bid on the vacation at the school fundraising auction this past spring, when I found out he would take them for 2 weeks in August and was hopeful things would improve enough for travel. Fully vaccinated, I was prepared to fly again. However, just days and weeks before the trip, Florida was surging with new COVID cases. I decided to take my chances. Yesterday I sat on the beach reflecting on how for over a year I had longed for a beach escape from the harrowing routine of family and work life during a pandemic lockdown.

Mom in Lockdown

My kids were with me on alternating days, and on the opposite days, I sat in front of my iPad on video calls with my clients. On kid days, we took car rides around the city, picking up Oreo McFlurries at McDonald's, or spending afternoons three-sardines-in-a-can under the comforter in my queen bed watching TV, each of us entertaining ourselves on a phone, or napping. Sometimes we were flanked by the 90 lb dog at the foot of the bed, also dozing. I set up a tent in the living room, and we rented *Trolls World Tour* twice, eventually buying the whole Trolls movie bundle. The kids watched the movie through the tent's screen window, from sleeping bags. We made indoor s'mores in the oven. I ordered decorations and Chinese food when Chinese New Year came around. (A client gave me this idea.) I gave them little red envelopes with chocolate gold coins.

In December, 9 months into lockdown, I had decided to adopt two kittens as a Christmas-during-a-pandemic present for my then 5- and 8-year-old kids. I was also getting tired of single-handedly fighting the mouse family living in my old house. The mice were more up-close-and-personal cohabitants now that I was in the house all-day, every day. I picked up the kittens one Saturday and put them into a carrier I'd found in the basement, hid them in my bedroom, and when my kids returned from their dad's that evening, I surprised them. It warmed my heart to see the kids lying in bed on many winter afternoons, each holding a kitten tightly to their chest. I taught them about cats, as I'd owned cats for most of my life, and they learned about care and feeding. We slowly introduced the cats to the dog, who was mostly oblivious and only occasionally annoyed.

By December, I'd decided that virtual school was pretty much in vain for my son, a kindergartener who hated his virtual classes. He voiced his dissent daily. My daughter attended her classes and did her lessons, but it was not very stimulating for her, social butterfly that she is. So even as a former teacher and educator, I had to make the call to de-prioritize school because the battle just wasn't worth it.

For a moment, this giving up made me tense up and question my ideals, values, and worth as a mother. It appeared that I was giving up on something I believed was the key to success in life: education. Soon though, my shoulders relaxed, as I became more confident that the key to success in this time period was not education but basic survival.

During this time, we loved our pets, took care of the house, played games, and cooked and baked together. My son wanted lasagna because it's what Garfield eats. So we made lasagna. We played UNO. We made slime, with some degree of success. They learned to play Roblox and to call their grandparents on Facebook Kids Messenger. We went on walking scavenger hunts, taking pictures of objects around themes, an idea from a friend on social media. My son learned a TikTok dance, and I recorded it. Writing this reminds me of my favorite show as a kid, *Little House on the Prairie*, but redux for 2021.

I bought and consumed more boxed wine than I'd care to admit, but at that witching hour when I used to rock colicky babies in my mom's antique rocking chair, I sometimes needed to escape to the glider on the front porch and have a glass—or two.

Over this period of time, my kids got more of me than they'd had in a while. And I certainly learned a lot more of them.

A couple of mornings per week, I drove them out to Maryland, outside the beltway where their dad moved after our divorce. This added considerable time to my day, but then again, I wasn't commuting to my office. I just commuted back home to my make-shift office in the dining room.

Therapist in Lockdown

For about 4 years pre-COVID I worked on a text-based messaging platform, seeing clients via text and video sessions as a side hustle. Suddenly, all of my therapy clients became virtual, even the ones from my therapy practice. First, I sat in a chair in the corner of my bedroom. Then, I bought a desk and made a corner of my dining room my home office. This worked better, except that I could see my messy kitchen in my peripheral vision.

I liked that I could get up between client sessions and wash a dish or make a snack. I didn't like the background noise that the neighborhood offered: the barking dogs,

lawnmowers, garbage trucks, the sound of children playing in the backyard at the home daycare on the next block. It provided evidence that life carried on, but it also disrupted my sessions. I didn't ever think to bring home a white noise machine. I did bring home my printer/scanner/copier, some files, and a small clock. I bought a giant blue Alpaca poncho at the DC Christmas market, which became my winter therapist uniform, covering up a multitude of wardrobe malfunctions. Yes, I washed my face daily (mostly). No, I didn't always change out of my pajamas.

I quickly became weary of the relentless video sessions. My neck was stiff, and my shoulders were sore. I had trouble with my attention and staying focused on a screen. My dog provided comfort. Diesel is a 90 lb rescue pit bull mix. He could never be a true therapy dog due to his size and enthusiasm for jumping on humans to say hello, but he was a smiling and friendly virtual-therapy dog. Clients liked it when he came into the frame for attention, to remind me to take him out for a walk or to feed him dinner. Making coffee in the afternoon at home felt wrong to me and even self-sabotaging. I knew it would keep me up at night. I tried brewing some decaf, but it didn't offer the same reward a midafternoon caffeination at the office would. Still, I occasionally indulged.

After months in lockdown, I made a plan to return to the office. I knew some of the therapists in my practice would be remaining virtual, so I decided to try to sublet some space. One day after virtual school was over for the day, I took my kids to my vacant office suite to show it to a couple of interested subletters. We ordered from Panera (across the street) and ate their new flatbread pizzas from the carpeted floor, picnic-style. At first being there in the office was novel to the kids. They found art supplies and some of their old toys placed in the waiting room. Soon, my son (then 5 years old) became restless. He found some purple glue sticks and put streaks on the walls. He located the dry-erase marker for the unused In/Out Board and added some lines above the faint stripes of glue. One potential subletter came by and stayed only 5 minutes...later she emailed, "This must have been a hard time for you." Um, yes? Then another potential subletter showed up just as my son was reaching the end of his tolerance for time in the office. One by one, he took each tissue box he found and emptied every tissue, one by one, until the entire floor was a billowing white cloud of tissues. At this point, his shirt was off due to the pizza or a water spill on his shirt? I can't remember. The potential subletter said, "They've gone tribal (or some such word)," and I laughed hardily. "Let me introduce you to your first two clients," I retorted with a snort. She was a school counselor, so she got my joke. Later, she signed a lease, defraying my rent a little each month. I am still grateful.

Woman in Lockdown

During this period of more than a year that I mostly spent at home, I'd like to say that I practiced what I preached to my clients: all self-care, finding inspiration, and making meaning during this time. The truth is, I wrote in my journal less than once a month. I paid for live TV so I could watch CNN every night. My best friend and I admired Chris Cuomo from our living rooms. I drank wine and ate takeout from my favorite dive bar, Jackie Lee's. They delivered chicken and waffles, and now due to changes in DC law they also delivered Old-Fashioneds! I found some shows to binge on streaming services. I found refuge in my bed. I took a break from my own virtual therapy. I didn't try to date

on the apps. I surrendered again to the possibility of being solo for the rest of my life. I crushed on a handsome neighbor, and when he seemed to go missing for a few months, I worried he was in the hospital, in the ICU, on a ventilator. During this time period, it seemed anything was possible.

The only similar experience I'd lived through in parallel real time with my clients was the election of Donald Trump, with all of its related traumas, which I felt I was living through alongside my clients. In my former life, trauma dotted my past but had been worked through and made meaning of, so I could offer wisdom and experience to my clients from the distance of a theoretical lens. Now, I was ad-libbing a lot and looking for articles that held wisdom for me/us. I accumulated a short bibliography of pandemic-related mental health articles in the notepad of my phone. I found it easier to welcome my clients' empathy for me. They had a recognition of the number of people I was helping and the toll the job may have been taking. They seemed more attuned to my humanity and genuinely grateful for my efforts.

Now, I am seeing a hybrid model of virtual and in-person clients back in my office. I am hoping to have more and more come back in person, as time goes on. However, in the time I began this article and am now finishing it on my front porch—with a glass of wine—the mask mandate is back. So now I pivot from masked in my therapist chair to unmasked at my desk where my iPad sits on a crate to save my neck. Literally and figuratively. ▼

[On the exhaustion of video calls] ...Our minds are tricked into the idea of being together when our bodies feel we're not. Dissonance is exhausting. It's easier being in each other's presence, or each other's absence, than in the constant presence of each other's absence.

—Gianpiero Petriglieri (2020)



Motherhood and the Therapeutic Relationship During the Time of the Delta Variant

QUICK: LET ME TAKE THIS EVENING, THIS MOMENT IN TIME TO REFLECT. My twin toddlers and 4-year-old are asleep. Free time to reflect is scarce during this time of the Delta variant of COVID-19 in the United States, but it has been even scarcer; after all, our daycare is open again. My therapy notes are done. I don't have a Zoom friend get-together, the way my friends and I connect because though we are all vaccinated, our young children are not, and we want to protect them. None of my children are sick with any type of colds or viruses so everyone can go to school or daycare tomorrow as per the No Runny Nose policy put in place for the Delta variant, and none of my therapy sessions need rescheduling. My treatment plans are not complete or updated, but whatever, let me take a moment to reflect on being a therapist and a mom through this pandemic.

In October of 2020, I made the decision to continue to work in person as a therapist at a residential treatment program for kids and adolescents during a global pandemic. The pandemic has made the stakes in this decision feel extreme, with potentially deadly repercussions. All the while, daycare, school, public health recommendations, and the ethical dilemmas facing me as a therapist, and even my role as therapist, were and still are rapidly changing. It was a decision that felt impossible due to the high stakes and due to continuing change remaining so constant. And yet, as difficult as it was to stick with a decision in a rapidly changing world, my job has also been a constant, a way to structure a time of relentless flux, a way to connect with others during a time of social distancing, and a way to hold onto my identity as a therapist and a mother of young children during the time of the

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COVID pandemic.

I made this decision as a new mom to baby twins and a three-year-old. I made this decision while grappling with post-partum depression for the first time. (Clinically, I think we therapists can all agree that I was at risk for post-partum depression, having had multiples in July, amidst the stressful life event of a global pandemic.) The decision to return to work didn't add up. Most people would have quit a job that barely paid for daycare for three; I was on my husband's health insurance anyway. I was independently licensed and could open up my own practice rather than returning to a residential treatment program. Nor did the decision make medical sense: By returning to work and sending our kids back to daycare, I was significantly increasing our family's exposure to COVID-19. Some might argue that according to the definition of attachment, I was sending my babies out to attach to other caregivers at a young age. After all, many parents quit working in order to devote time to building a bond with their infant children.

How did I come to this decision? Earlier, in March 2020, when COVID first started affecting people in the United States, I was pregnant with twins, with a toddler in daycare. My work as a therapist at a residential program is centered on staff collaboration and teamwork: rounds, behavioral plans that use contingencies like going to the dining hall or getting rewarded by family members for effective behaviors on therapeutic passes, and collaboration with medical providers, direct care staff, and other therapists. At that time, my daughter was 2. Her daycare sent the kids home early one Friday, shutting down for a period of time for the pandemic. We said goodbye to the teachers and her friends, each moment suddenly weighted and heavy. The clouds hung low that weekend. We took a walk past the playground, which was surrounded with a new fence, now empty and closed. I worked evenings that first week she was home, going into work after spending special yet stressful days with my daughter walking in our neighborhood, doing makeshift crafts, and checking my email on my phone. I went into work after my husband finished his day at work, seeing the clients during dinner, the sun setting and dark descending on the campus.

The next week, the OBGYN on call at the practice monitoring my pregnancy told me, after I called in about a slight fever my daughter and I had gotten, that I should stay home from work, "If you can," because I was pregnant with twins, of advanced maternal age (35), and at risk for complications if I were to contract COVID-19. Technically, I am an essential worker, but my supervisors were able to make accommodations so that I and their other pregnant therapists could work from home. They hired several interns to hold the devices for Zoom sessions at the facility, as our clients cannot be trusted alone in a room with a computer that can access the Internet.

My job description changed though my role was not supposed to: I went from walking to pick up kids from cottages, standing in the corner of cottage offices to check in with direct care staff, waving to other therapists, nurses, or psychiatrists walking up and down the hills on the campus, lunch in the cafeteria, and greetings to lines of kids walking to recreational therapy, to Zoom sessions at home. I carried out Zoom sessions in a creaky wooden chair at a makeshift table desk in my bedroom, frantically scheduling and rescheduling sessions to accommodate my husband's job, clients' parents' jobs, cottage schedules, direct care staff's schedules, and my daughter's naptime, as her daycare was still closed.

The ethical dilemmas facing my clients and me were also rapidly changing. For ther-

apists in our residential program, the decision tree of ethical dilemmas was primarily to make this single determination: When is this child ready for discharge from our program in terms of safety from self in the community? During the pandemic, this question became so many other questions. What to do in a Zoom session when a teenager in our partial hospitalization program (PHP) told me she had a razor for self-harm hidden in her room, then disconnected the computer? When to discharge a child home when he is at risk to kill himself at home yet also at risk to contract a new disease at the treatment program that could put him and his family at risk? Do parents increase school avoidance by keeping their children home during the pandemic? Soon, families did not have a choice about school at all, as virtual school was the only option. Then, how best to support children with learning disabilities who fell behind and then felt guilty and worthless? How to support the perfectionists who were normally good students but struggling now with virtual school and unable to tolerate their mistakes? How to support the kids who were engaging in addictive, unsafe sexual behaviors online while completing virtual school? Without natural or formal supports due to social distancing, how can we effect change within a family system? How can our clients change their perception and management of the stress of these situations if the world is throwing them into constant crisis?

My social supports changed. My colleagues became a virtual social network, my fellow therapists commiserating in the stress of working in a program that had rapidly changed, sharing the weight of new ethical dilemmas combined with the stress of just trying to schedule with staff virtually. I began to feel a poignancy and sense of impending doom, as if each phone call with my colleagues still working in person was possibly the last, as the virus circled closer and infected more people in our community. All this as twins grew in utero.

In July 2020, my twin daughters were born. I was now a mom to newborn twins and an almost three-year-old toddler, during a pandemic. I was told by their pediatrician to distance as much as possible from anyone who could potentially expose my newborns to COVID. We kept our toddler home from daycare due to this potential exposure. My mom, who had been socially isolating, came and helped us for 3 months. I was experiencing postpartum depression, which I did not know until a few months after their birth. I was anxious and hopeless: concerned about nursing, about not nursing, about their health, about the wellbeing of my older daughter whose life and play had now become centered on caring for babies, and about the world. I was never alone and always felt alone. None of us were sleeping at night. Helping client families weigh the pros and cons of ongoing life choices during a pandemic did not prepare me for my own dilemmas after my twins were born. Could I continue to be at home in this situation?

Prior to having twins, I had loved my job. As a working mom, I felt like a better mom: My daughter and I both had a support system and social network at the daycare. I was raised by a working mom, my supervisor was also a mom to young kids, and I strongly identify as a social worker. In many ways, I felt my work gave me stability and routine. Exposure to other families taught me to be a more playful and grateful mom. So even if, financially, a social worker's salary didn't reconcile completely with the costs of daycare for three, there were benefits for me from emotional structural, and personal identity perspectives.

But on top of the financial challenges, I now had to try to decide whether my job

was worth the risk of exposing three children under age 4 to a rapidly changing illness, COVID-19. I spent sleepless nights, on top of the sleepless nights of feeding newborn twins, wrangling a lonely toddler with two new little sisters and no possibility to see friends her age, and wondering which risks were worth it. I worried that my toddler would feel like she was a nuisance compared to her newborn sisters if she didn't get to be around friends her age. On the other hand, I worried that my parents would die from COVID when exposed to the daycare germs. I worried about my infant twins seeing masked faces all day long at daycare: How would they develop language skills and connections with caregivers or learn emotion recognition? And yet, I could not imagine becoming a stay-at-home mother to newborn twins and a toddler at any time, much less during a time without any playdates, story times, playgrounds, or mother's morning outs. While I was grateful that I had a choice to make, the choice was paralyzing.

Impossible choices, for families, for mothers, and for professionals. Some have no choice but to drop out of the workforce due to lack of childcare, exposure to illness, or job loss. And even for those with choices, does the mom with a newborn ask her own parents to risk COVID exposure to help out with her newborn child, who could have contracted the virus while being born in the hospital? Does a stay-at-home mom who has a teaching degree homeschool her school-age kids even though she has always hated the dual role of teacher and mom? Who quits working simply to lessen COVID exposure to the family? At what point do children re-enter school and daycare: How low do case counts have to be? How high is too high?

And, are all of these impossible choices now even more impossible with the highly contagious Delta variant? Or does the risk/benefit analysis even change with a new variant?

With all these decisions to weigh, I went back to work. In November 2020, I returned to work in person. Our children went to daycare, my toddler returning to a school that she only vaguely remembered from 8 months before. The twins were cared for by masked caregivers. The morning I dropped them off, parents were restricted from going inside the building, and it was 30 degrees outside. We cleaned our freezing hands from a gallon jug of sanitizer, white clouds of our breath dampening our masks. At work that day, all the office doors for my fellow therapists were closed. I squinted into the eyes of the masked children in front of me and reminded them to keep their masks over their nose. Parents had to try to hear their children share sensitive information through a mask and on a Zoom call and try to validate them despite being unable to see their faces. I pumped milk for my twins during breaks between clients and worried about contaminating the milk with COVID droplets, somehow. Illogical, but these are the anxieties one has after 11 months at home.

What is community when you cannot get together with people, even family? Thanksgiving dinners on Zoom, Christmas on Zoom. Christmas afternoon huddled around a smoky fire in the yard with grandparents and babies and a toddler. Connecting with extended family and friends on Zoom. Co-workers on Zoom. Connection with my supervisor, also risking her young children's exposure at work. The daycare teachers became part of our pod; they were the only people outside my home that saw and held my children (until their grandparents were vaccinated). I still keep in touch with them all, even though my children have moved up a class. I cried more than my daughters when we said our goodbyes at the end of the school year.

And then, vaccinations opened up the possibility of once more hugging and spending time together indoors. Children played on playgrounds, masked but joyful, together. I resolve to never take those connections for granted. Some have given these up again due to the Delta variant. Our family has chosen to consider the benefits of certain connections over the risks to our physical health. I don't think our schools will close this year, and for that, I am so grateful, as my daughter is now in public school. Now we wait for the vaccine to be approved for toddlers to resume other indoor activities.

And, I am grateful for my job, for my privilege as a cisgender White woman in a dual income household. Now more than ever it is a privilege to work.

Ultimately, as a therapist and mother who returned to work in person at a psychiatric hospital with other children and families, I did give up a certain amount of time with my own children. And ultimately, that is the way I can best attach to them right now. In a time when public health rules, COVID death statistics, politics, social mores, and family and professional roles are constantly changing, I find myself anchored by my job. In a time of isolation from so many of my informal supports, I find myself supported by colleagues and daycare teachers. The perspective gained from helping others who were more depressed than I was helped me feel less depressed. Indeed, I am no longer depressed. I feel gratitude. I feel energy. I feel alive enough to be playful again. My work gives structure to days; in turn, it helps me structure our days, weeks, and weekends as a family. My daughter has her playmates again. My twins have some place besides the grandparents' house to wear their cute outfits. And yes, I dress them up for daycare. Life is short: Don't save those outfits!

Caring for others as a therapist during a pandemic helped me learn to care for myself (imperfectly, but I'm still learning) But no, I am not my pre-COVID self. I am stronger, more nurturing to my children, and more grateful. I have learned that attachment is a dynamic relationship and forms not only between caregivers and children but within a space, time, and environment.

As does the therapeutic relationship.

In some ways, being a working parent in a pandemic has made me more vulnerable, given me more empathy, and brought me closer to my clients, even while I see with more clarity the privilege I have that sets me apart from so many. We all grieve and find gratitude in our rapidly changing world and wonder what it means for the futures of our children. We must learn new ways to parent ourselves in a new environment, and in turn, new ways to parent our children. I hope that someday, my daughters, however they identify, if they even choose to become caregivers, can recognize and honor their selfhood in the time in which they are living as a crucial part of their relationship to their own children. ▼

Watching

After Terrance Hayes

Eileen Ivey

Here we are—still and always—two Americas. While others drive the screaming ambulances, deliver your groceries, sleep in their cars to better protect their kids from their exposed and worried selves,

you sit before Netflix recovering from a day of Zoom or watch new episodes of Black History programming from PBS and think about replacing the earrings you dropped last year under the bleachers.



Redefining Life's Merry-Go-Round

ONE OF MY BIGGEST STRENGTHS IS MY ETERNAL OPTIMISM IN THE FACE OF ADVERSITY. On March 17, 2020, my world as I knew it, as a person and as a therapist, changed forever.

It was St. Patrick's Day, and I found myself running home from a dinner party down the street at my neighbor's house to call my daughter in Denver to plead for her to fly home immediately. A Secret Service officer at the dinner party had told me that state lines across the country were going to start to shut down and we should get our kids home or they may not be able to get home for a long time.

I have three emerging young adult children; two thankfully live close by. As I ran home to call my daughter Mary to come home from Denver – explaining to her that I had no one there to help her—there was no way I could even start to understand how our world would change forever. On March 19, 2020, I closed my office in Alexandria, Virginia, and asked the therapists who work with me as contractors to move to a virtual platform.

My suggestion to the therapists who have been in the practice I began in 2007 was that this would probably carry on for a couple weeks, but we needed to be ready with a virtual platform that was HIPAA compliant to ensure confidentiality to get through this. We went fully virtual on Google Meet. Then we began to meet as therapists on Google Meet every Wednesday to support each other as we worked through the pandemic, and we continue to do so today. Never in my wildest dreams did I think we would still be struggling with COVID-19 more than 18 months later.

Two of my daughters (23-year-old twins) came home

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and lived and worked virtually with me for 6 months. I cherish that time living with and working with my twins and watching them as they have become successful emerging young adults. Mary, the twin from Denver, decided to quit her job, applied to get her Masters in Social Work, and will be done in December. The other twin, Maggie, decided to go to law school and has been working through the pandemic as a paralegal.

Playing a part in their lives in this way was a wonderful time for me. In addition, they saw me finish my PhD virtually, move the class I was teaching at The Catholic University of America to a virtual platform, and work with clients and therapists totally virtually for several months. My hope is that watching me helped in their decisions to go to graduate school and their desires to help others.

Embracing A Reset

This was some of the upside of COVID-19. I heard similar stories from clients of mine that mirrored the time I had with my grown children in various ways. Clients spoke of the time they have been able to spend with their parents, children, siblings, and families as a whole. The world slowed down, and everyone began to have family dinners together, watch movies, go for long walks, enjoy each other, and find mutual respect for each other going through this uncertain and unprecedented time. I call this a reset and have seen progress, in particular, for adolescents and emerging young adults. I have observed the biggest negative impact of the pandemic on the children and adults.

In June 2020, we hit Phase 3 in Alexandria, my home for 20 years and the place where my private practice would eventually open its doors again. At the time I had no idea that my practice would be one of the first in the area to open back up to see clients in person.

I couldn't wait to get back to the office. Teletherapy was grueling to me; I missed the energy in the room to pick people back up, and performing play therapy virtually was exhausting. The majority of my clients needed me back in the office. I wasn't afraid of COVID-19; I was more afraid for my clients and the deep depression, despair, loneliness, and isolation I was seeing and hearing.

We put precautions in place and everyone came back—in droves. Suddenly, we had a waiting list four pages deep. I couldn't keep up with the need for help. Especially for the children: those who already had depression and anxiety saw it go through the roof, and those who never had those symptoms suddenly did, from fear of getting the germ, as they referred to the virus. I went from seeing 20 clients a week to 37. My heart was breaking for all the children, adolescents, and adults in my practice and especially for those on the deep waiting list.

Interestingly, the population that I feel has really embraced teletherapy are adolescents and emerging young adults. In some ways I was seeing this population in a whole new way. Adolescents and emerging young adults put their phones on their pillows and talked to me, sharing thoughts and insights that I really didn't think would have ever come through in an in-person session. The comfort and ease with which they spoke to me made me think this is how they are used to talking to people. In-person therapy was actually harder for many of them.

The children seemed to need in-person sessions, while adolescents and emerging young adults seemed more comfortable online. Adults seemed to desire in-person ses-

sions as well. Could it be that the children and adults in our population have suffered the most with social isolation, depression, and anxiety in this pandemic time, while the adolescents and emerging young adults were just carrying on in a comfortable and familiar format they were used to—socializing virtually? It's too soon to tell without reliable research. What I can say is that on our Wednesday team calls, the consultant therapists at my practice are seeing the same results. Adolescents and emerging young adults are more engaged in treatment, and they aren't skipping sessions.

The emerging adults, especially the college-aged young adults I see, are for the most part continuing on in life with little regard for COVID-19. As they began college in fall of 2020 most were online and didn't mind; many actually liked it better than in-person learning because it meant they could sleep in and roll out of bed to class. Their biggest complaint was how to sneak around the rules of COVID-19, and most found a way. Even in isolation after contracting COVID-19, many didn't complain to me; it gave them time to catch up on binge-watching their favorite show. Their resilience is quite astonishing, but again, this population has grown up on the Internet and iPhone and talking on FaceTime or through their video games.

It's a very different story for children. For them, going back to school has been very trying. Most children in Alexandria started hybrid learning in the spring of 2021.

I have a common mantra that I use with the children I see: I tell them, "It's not real, it's just a fear." But suddenly I couldn't use this anymore as a technique for children to talk back to the voice inside their head telling them they aren't safe. At school they were now sitting at individual desks surrounded with plexiglass and spaced 6 feet apart. Their teachers were also behind plexiglass, and everyone was masked. Going outside to recess meant they were to find a seat and sit there until recess was over. If they played on playground equipment, they were monitored and spaced out so no one touched. Is this what jail is like? It's what it looks like to me on TV and when I visit adolescents in the Fairfax County Juvenile Detention Center.

One day during the spring of 2021 a 7-year-old child recalled this memory to me and spoke of his fear of getting the germ. When a child approached him on the merry-go-round at the park where his parents took him every afternoon, he ran and hid under the slide, curled up into a ball, and wouldn't move. In therapy he expressed to me that he was afraid of the children coming to the playground and giving him the germ. It was really hard for me to find words for him to use to talk back to the fear inside his head, so instead I processed his fear with him and helped him to work through it. We worked on starfish breathing, an emotional regulation technique to help him when he feels afraid and to tell himself he will be OK.

At the time I worked with this child, few children had contracted COVID-19. Currently, however, children have died from the virus since the Delta variant appeared. Their struggle with fear is real.

Using A New Tool

Virtual therapy has provided access to more people than ever before. It may be at the forefront for how we engage clients going forward by removing treatment barriers such as driving to appointments, finding child care, or transporting resistant adolescents to sessions. While it has been really difficult for me to use a virtual platform for therapy, it

has helped me to grow as a clinician by teaching me how to listen more closely to words and tone since body language is harder to decipher on a virtual platform. This has helped me to find more understanding and insight into my clients' struggles.

I really prefer to see all children in person; the process of play and the nonverbal behavior are essential to me in working with this population. The children I see are not cognitively developed enough to be able to articulate their thoughts and feelings in many regards. They often need me to be present in person to hold their anxiety and depressive symptoms so they can find relief. With relief they are able to play and find more emotional regulation that they can transfer beyond the office.

Working with adolescents and the emerging adult population virtually on an ongoing basis for the last 18 months has helped me to feel confident and less self-conscious in front of a camera. I now feel as much at home in front of a camera as they do. Further, I have found this to really help me when teaching virtually, working with the therapists in my practice on our Wednesday calls, and finding myself more comfortable with technology overall. It's like—I can do this! We can do this collectively as therapists and be flexible to see clients virtually or in person. I faked it 'til I made it, and now I love the flexibility I have with virtual and in-person sessions. This flexibility and confidence have given me the ability to see and help more people. For me, that is the big upside of COVID-19 in psychotherapy. ▼

When the world is running down, you make the best of what's still around.

—Sting



Demolition

AT THE END OF JUNE 2019, ABOUT 6 MONTHS BEFORE COVID-19 BEGAN ITS SURGE THROUGH OUR COUNTRY, I RETIRED. After 4 decades as a clinical psychologist, I moved less. I had gained a lot of weight. It became harder to stand up or walk a longer distance. With free time, I began exercising twice a week with a personal trainer. We ended in mid-March when the governor ordered social isolation. The gyms, schools, restaurants, and stores closed. Social life stopped. Barber-shops and hair cutting salons closed. My trainer moved. I exercised at home, which I found almost dreadful, and I walked.

At the National Gallery of Art, I had seen Rachel Whiteread's sculptures of space: muted-colored resin-filled casts of the emptiness under chairs and beds, photos of the interior of a London East End rowhouse with concrete poured in, walls ripped down. When I retired, I wanted to be confronted by empty space. My mind floated back to early childhood spaces in the world of the backyard, under a table, and on the floor of the living room.

After I saw my last patient, it took me 2 months to clean out my office. Other colleagues I knew sorted through files routinely, trashing unneeded paper. Not I. In the film that accompanied the Rachel Whiteread exhibition, a scene showed her struggle to get rid of paper. I understood. She solved her conflict by shredding paper and incorporating the shreds into her art. I hesitated to rip it up routinely because I feared I would destroy a document I might need for insurance or taxes. Then of course some paper became memento. Retiring, I felt good ridding myself of burdensome paper. For old medical re-

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cords, I hired a company that shredded them. A young man who told me he grew up on a farm in Illinois heaved boxes of files into a large bin as if they were bales of hay. I walked outside with him and watched as he poured the files into the industrial shredder he hauled in his truck. My old notes, assessments, courses of treatment, and histories, each unique, words chosen to convey something that needed to be noted for a person's care, needed to be remembered, now obliterated.

I had rented a suite in a medical building, a small, late 1950's architectural note in the community. In the windowless basement where I worked, a sign hung to designate it as a bomb shelter. A lead wall separated my office from the radiologist next door. I felt secure even as the floor rippled during an earthquake in 2011. I enjoyed the privacy but disliked the confinement it imposed and the disconnection from outdoors. About a month before I moved, as a thoughtful gesture, the building manager stopped by to tell me that in the following spring the building would be torn down.

Friends and fellows told me that I had picked the right time to retire. As the shut-down began, they had faced scheduling patients for telephone then video psychotherapy sessions. I took no glory in the coincidences of my timing. I felt and still feel a tug of shirking responsibility. In 2001, when terrorists crashed a jet into the Pentagon, I'd called a friend who organized psychologists following disasters to help in efforts for relief. That night I went to the Pentagon. A bus brought us, five psychologists, to the west side of the building where the plane had struck. Smoking destruction faced us. The outer wall gaped open as if evaporated. I saw no wreckage of the plane. A hundred, maybe two hundred firefighters depleted, out of their gear, were spaced feet from each other in rows, on their backs on bare ground. They could hardly speak. I could hardly speak.

One retirement idea I had was to volunteer to help students with career planning in the counseling department at a local high school that has a high proportion of low-income pupils. With schools closed, I put those plans aside. I could not have anticipated the abundance of empty months of virus confinement. One day flowed into another. I felt as if time moved faster than before. The seasons changed without clear demarcation, shifting almost outside my notice. I wondered then and wonder now if people experience a similar state when confined in an institution. Like an institution, my work had high boundaries. I had constructed a fortress of dedication.

I had this peculiar experience of transition to retirement intersecting with the isolation forced by a catastrophic virus, an astonishing exchange. In an *At-A-Glance Day-Minder Weekly Appointment Book*, I had kept time by 45-minute and 60-minute increments. Time delimited, seasons noticed by the book. I had worked many hours and made a good living. As I am not a psychoanalyst, I did not sit behind my patients as they lay on a couch. Harry Stack Sullivan (1953), an esteemed psychiatrist and psychoanalyst, developed a theory he called Interpersonal Psychotherapy. After his death in 1949, a colleague published most of his writing. Sullivan recommended that therapist and patient sit in chairs angled toward each other. He wanted the patient to be free to look away or toward the psychotherapist. I followed his counsel. I carefully avoided imposing my personal life into the therapy process. I reviewed cases with a senior clinician for consultation in order to make conscious any unconscious intrusion into the patient's treatment or failure to notice crucial dynamics. I tracked my thoughts and feelings evoked by patients' presentations with the goal of gaining a deeper understanding of their expe-

rience. I felt enriched and I felt isolated in the sitting apart.

I carry a strong imperative to work. My closest uncle, a podiatrist, practiced until he was 90 years old. As a boy I worked for him at his office every Saturday. I cleaned between patients, swept stairs, and ran errands. My barber father stopped working young due to his epilepsy. My secretary mother retired early because she suffered major depression. I felt admiration for my uncle and a determination to follow him and not be overcome by physical or mental illness. I realize that I defended against a conscious acknowledgement of the tragedy of my parents' lives. With a perforated shield, I tried to protect myself from the pain of their losses and guilt over abilities I retain. I often worked long, 12-hour days. People asked, "What will you do when you retire?" The question felt unpleasant, as if they asked about my impending death. When I sometimes said I did not have specific plans, some would look perplexed. No plans resonated well with me; I felt free.

Before I locked the door to my suite for the last time, I took photographs of the empty waiting room and my vacant office, old rooms which would be destroyed. The recessed and florescent lights glared on the patinated walls and paths worn on the carpets. I suppressed my emotions. I had earned, requested the right, and been allowed to join with people to help them understand the events in their lives, their relationships, and themselves, to reach their goals, and to treat themselves with compassion. I cared about and felt affection and responsibility for my patients. I would miss them and my colleagues as our contact diminished. I continue to feel the grasp of tentacles of sadness at the gentle surrender of this business—and also conflicted relief.

Almost a year after I retired, my wife and I risked going to a garden center wearing masks her sister had sewed for us. It was spring. We wanted flowers. We bought begonias, impatiens, and dahlias. I selected 10 packs of seeds including four o'clocks, a favorite of my deceased mother-in-law, to bring her close to us. We wondered if all the seeds would grow. Our yard is shady, beloved by deer who eat most everything but the invading ivy. My wife nonetheless had a plan to transform the back yard into a garden of native plants and trees.

I realized that planting seeds in my early retirement expressed my hope, a metaphor in a transition that felt infused with singularity and powerlessness. My surrender to being alone happened in childhood. I lost my grandmother who nurtured me and then the aunt who took her place. My parents divorced, and my father stopped visiting when I was 9 years old. My mother's work and her deepening depression kept her distanced from me. So alone was a familiar feeling, not new to retirement or the pandemic. I felt sad, anxious, and resigned. I worked alone in my yard with seeds and hope, sincere clichés: A hope that my professional work planted a good in my patients and those in their lives. I could feel my anger, which settled on the phone company that had not disconnected my office phones as I requested and continued to bill me hundreds of dollars, then on an insurance company who wanted return of payment on claims. I worked those things out but not my more elemental, subterranean, ancient, river of anger. A river fed by tributaries of complicated grief and reactions to injustice.

Likewise, that April I remembered May wine, a May Day celebration punch. I had planted in our yard sweet woodruff, a necessary ingredient for May wine. It covers the ground with bright mint green leaves. With inattention over 28 years, the herb had

become a lovely spread. My wife and I picked handfuls of leaves and used them to make the punch. To infuse white wine with its flavor, we stuffed sweet woodruff sprigs into bottles. We poured champagne, the wine, and tablespoons of brandy into a large pot. We ladled the bubbling blend into jars and added strawberries. In our time of rearing children and working many hours, we barely recognized where those around us lived. In the COVID-19 shutdown, we called neighbors with whom we found a new fondness and asked if they would like to try it. A younger couple hesitated, those more senior more willing. We left Ball jars of May wine on doorsteps. People liked it and sent photos. It seemed a brief, small respite, an antidote to our seclusion.

Then on July 4th, a neighbor who is a violinist with the National Symphony gave a concert on her lawn together with several string players in the orchestra. She told us how they missed playing for an audience. Their young children ran around and between their playing parents and drummed their drums. The music wound through the neighborhood. We sat distanced from each other on portable chairs scattered on the streets and two cul-de-sacs. Yet, as a neighborhood, we had never been closer. A wine punch, music, pauses to talk, and small favors connect us to each other.

More than another year has passed. You may know the children's book about the Easter Bunny who overslept and missed Easter (Friedrich & Friedrich, 1957). He tried paying visits on later holidays like the Fourth of July. Disappointed, he found no one wanted Easter eggs at outdoor barbeques. I feel like the sleepy bunny, a little late, sleepy, and sad from wariness and distance. I had missed interludes with friends, time with family, a wedding, and a few funerals. I drive past the empty lot, now a hole which my office building once filled. Years ago, I saw a self-portrait by Lucien Freud. He is naked holding his shield, a full pallet, dropped at his right side. I wish to loosen my guardedness, safely drop my mask. ▼

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Commentary 1

THIS BEAUTIFULLY CRAFTED ESSAY OFFERS US GLIMPSES INTO THE AUTHOR'S PROCESS as he discovers himself in retirement during the pandemic that obviates some of his expectations about his anticipated retirement life. Thrust into daylight from his subterranean office and freed from the burden of the accumulated paper that helped him to feel protected from mishaps, he seems to have emerged from his cloister with curiosity about himself and openness to new experience.

Although I had planned my own retirement before we had even heard of COVID and had announced it in February, I had not imagined, even when life seemed to shut down in March, that I would be saying goodbye to my patients, many of whom I had worked with for decades, through a Zoom screen. That surely flattened my experience of taking so many meaningful leaveings.

I had loved the work and had been enlivened by it, but I was entirely ready to give up a challenging schedule and an ever-present sense of responsibility that I had taken for granted for

43 years. I wonder about former patients and miss many of them even as I delight in waking without an alarm, walking 4-5 miles a day, re-learning Bridge, and having the leisure to read for hours or binge on Netflix.

Like the author, I'd had no specific plans for what I would "do" after I retired beyond traveling to my bucket list places. I'm enjoying, at 80, discovering who I am in this last stage of life and reflecting on the journey.

—Susan Jacobson, MMH

Commentary 2

HAVING JUST RETURNED FROM A 2-WEEK VACATION IN FLORIDA WHEN THE COVID PANDEMIC WAS PUBLICLY ANNOUNCED, we were more than a bit irritated to learn that the virus was known to be around earlier and kept secret. We had gleefully been roaming around the state of Florida visiting various friends, going out to eat, being in crowds of people at the Ringling Brothers circus exhibit and on beach walks, and had numerous close contacts, never suspecting we were in danger, that a contagious disease was floating all around us. Life is full of surprises, but this one was threatening and scary. All of a sudden life seemed much less safe, and our government had lied to us about it.

Besides wondering if we had already been exposed, with the revelation of the pandemic, many important aspects of our lives collapsed or ended abruptly. "Demolition" seems like the right word. We were in immediate isolation, mostly because our world shut down. Almost everything except grocery stores, pharmacies, and gas stations closed. By state order, our gym was sealed, our massage therapist could not practice, and many other services were put on hold. Our church ended all services. Our choir stopped having rehearsals. Many restaurants served only carryout. Our annual subscriptions to the theater and Dayton Philharmonic were postponed. In our small village, the wearing of masks in the downtown region was mandated, and the streets were empty. Almost every single activity that gave meaning to my life was blocked. The most devastating loss was the contact with friends, which went on for months, until we got used to the partial substitute of Zoom. One of our daughters set up a regular Friday evening Zoom session for our family scattered across the country, and that helped. Last summer, the fellow who plays chess with me and I decided we could play on my screened-in porch wearing our masks, he sitting with a board at one end of the picnic table and I with mine 6 feet away. We would move our own pieces as well as the opponent pieces as we would call out the spatial numbers. Awkward, but we learned a thing or two, and it was a step in filling the gap of being with friends.

I officially retired 10 years ago, but had started seeing a few clients some time back. Even though I was subletting my office, I would use it one day a week. Thinking the pandemic wasn't going to last very long, my clients and I decided we would start again when we could meet in person. What a joke! Time eroded the connection, and the complications of virtual didn't seem worth the hassle, for them or me. So this time the retirement drifted into finality, another casualty of the pandemic. My license was to expire in December 2020, but ironically the governor extended all license expiration dates until July 2021. It didn't much matter. I was done, even though the decision carried its ambiguous parts. I have always loved the relational work of being a therapist. I miss that. What I don't miss is the baggage you have to carry to maintain a clinical practice. As I have gotten older the required repetitive tasks have felt increasingly heavier and more boring.

As with the author, the symbol for endings became my empty office. The therapist subletting moved out. In the clearing out process, eventually only two chairs were left. All of our desks went to Goodwill. We gave the bookshelves to the young fellow who mows our lawn at home. My partner was practicing from home since the beginning of COVID, so the office condo that had been our professional home for 33 years was eventually vacant. For 20 months, each week I would drive the half hour to the office to water the plants and get the mail. Each week I would

carry away stuff we wanted to keep. A part of this ritual was sitting for a time in my empty office reflecting on the many memories there contained. I took pictures of the vacated space also. The vacuum in this place that had been so central in my life for so many years echoed the emptiness visited upon the rest of my world by the pandemic. With the resolution of my partner to continue practicing from home and to move toward retirement, we decided to sell our office condo. Clearing out the pictures, furniture, and vast amounts of other material accumulated over the years was a huge project consuming month after month. I identified with the author when he described his experience with shredding. We had bag after bag of client materials and business records that had to be sorted and carried to the shredding location. I also had not been very current about various records for all of the same reasons they give. This whole process had its own set of recollections. The emptiness and daunting silence in our office became more palatable. The only good part is that it became a considerable distraction from the vacuity of the pandemic. As we are finishing that task and vaccines are providing a bit of light in the darkness of the pandemic, the road ahead seems more promising, even though the road map seems rather vague.

—Grover E. Criswell, MDiv

We can succeed only by concert.... The dogmas of the quiet past are inadequate to the stormy present. The occasion is piled high with difficulty, and we must rise with the occasion. As our case is new so we must think anew and act anew. We must disenthrall ourselves....

—President Lincoln's Message to Congress, December 1, 1862.



My Helpful Pandemic

LONELINESS AND I HAVE BEEN FREQUENT COMPANIONS SINCE I WAS A CHILD. I never really liked being an only child. Although my friends thought it was terrific that I didn't have to deal with a bossy older sister or pesky little brother, I envied their having other kids to interact with at home. My parents were fine but they were, after all, parents. And my mother's death when I was 11, at a time when it wasn't customary to speak about dead folks or to utter the word cancer, only added to my loneliness.

So I was scared when the pandemic began. I was scared of COVID, but I was more scared of the episodes of loneliness that I knew the isolation would bring. At the start of the pandemic I was already in therapy, having returned a year or so earlier to a therapist who had been helpful several years prior and who had warmly invited me to return if I ever wanted to. It had become painfully clear to me that a long relationship that had been meaningful and important over many years would have to end, as it had become unhealthy for me, and that I would have to be the one to say goodbye. This difficult decision had triggered painful and frightening memories of earlier losses in my life. I needed help in moving beyond them. Under these circumstances, it was especially reassuring to be able to return to a previously established, safe therapeutic relationship, which has continued, following a temporary disruption early on in the pandemic.

I've lived alone since being widowed over 20 years ago, and once I got beyond the initial adjustment period, I've enjoyed the freedom it provides. Through my experience as an only child I learned to value solitude and self-sufficiency. So in retirement, travel, classes, meetings,

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and meals out or at home with friends and family have provided regular and generally satisfying human contact and relationships. But when COVID entered our lives, my friends and I decided that we might occasionally meet outside but we wouldn't go to restaurants, wouldn't visit each other, and we'd mostly stay in touch by phone, text, and email. I decided early on that I wouldn't travel and that my only outings would be walks, bi-weekly grocery shopping at off-hours, and medical and dental appointments. So I knew that I would often have to face my old nemesis—loneliness.

Art classes, pool classes, and symphony concerts were suddenly cancelled along with manicure and hair salon appointments. Book Club and my twice-weekly Italian classes moved quickly to Zoom, so I set about learning how that marvelous invention works. Links to interesting and not-so-interesting lectures and webinars began to arrive and I attended many, in addition to registering for more classes and joining fascinating virtual tours of Israel and various parts of Europe. A friend arranged weekly dance parties where many adults and a few young grandchildren laughed and gyrated in our Zoom boxes! I wasn't lonely! Maybe this indefinite, forced isolation wouldn't be so bad and I would survive unscathed.

But in my counterphobic flurry of activity I soon had myself busier than I could comfortably handle. So, scared but smiling at myself, I decided I'd better just let myself sink into whatever feelings made themselves known instead of working so hard to avoid them. Off and on for weeks I would suddenly find myself overcome with fatigue or by a sense of hopelessness, cooking too much food or not enough, or waiting for five o'clock so I could have a glass of wine without fearing I was becoming an alcoholic. I slept too much or too little, often felt numb, and wished for a live-in partner one moment only to fear in the next that I'd feel trapped if I had one. Peggy Lee sometimes sang in my head, "Is that all there is?" and I wondered whether there would be any end to this suddenly different life that had been thrust upon me—upon us.

It slowly began to dawn on me that everyone's life had changed, not just mine: everyone in this state, this country, and in the entire world. We were all in the same boat—and many were in worse boats than I. That the life of everyone in the world had been affected by this wicked virus was both horrifying and reassuring. I began to feel less isolated and alone, less self-absorbed. I began to feel deep sadness for the sick and dying and their families and nearly overwhelming admiration for the exhausted medical personnel who just kept on going. I think they inspired me and reminded me of how important it is to keep moving ahead, even when things are tough. I had done so at other difficult times in my life, but the suddenness and unpredictability of the pandemic had temporarily drained me. It was time to structure my life better than I had so far. I was safe and healthy, had a lovely home, and deserved a more enjoyable and creative life, even while living in semi-isolation.

From the beginning of the pandemic I had made a habit of getting dressed decently every day, and before every Zoom session I added earrings and make-up. Now I started reading more, cooking more creatively, listening to music more often, choosing my webinars more carefully, and slowly I began learning to enjoy my solitude again.

My iPad had become—and has remained—a valued friend. Unlike many of my contemporaries, I hadn't learned much about computers before 2000 or so since I had no need of such devices in my work. Slowly, I learned more from books, classes, grandchildren, and other sources. I began to appreciate the wonders of email and gradually

pushed myself beyond various versions of Solitaire. But, try as I would, I was never able to become truly adept at using a desktop or laptop. Someone suggested I try an iPad, which I immediately found blessedly easy to use. I was hooked, as it does most of what I need. So, during the pandemic, this constant companion was my portal to the world, and together we connected to new experiences. We initially set up shop at the kitchen island but soon moved to more permanent space at one end of the dining room table with more comfortable seating and two large windows. We began regular visits with my too-long-neglected elliptical machine which had a convenient perch for the iPad, which then delivered delightful fare from Netflix, finally making my membership worthwhile. And of course the regular exercise added to my overall improved state of being.

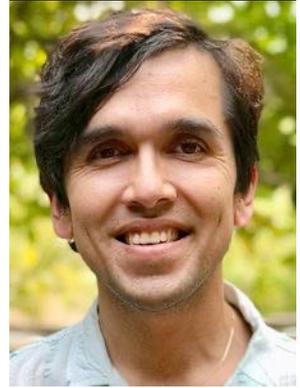
My weekly therapy sessions resumed when my therapist switched to FaceTime. At first it felt quite odd to have her “in” my home, but I began to look forward to finding her welcoming face on my screen. I’m fortunate that that relationship was already in place, or I would truly have been all alone with my loneliness since there was no one else to whom I would have spoken about it. And I think I’ve often been more open in these virtual sessions since I was literally at home in my own space and therefore more relaxed than being in her space in her office. I’ve actually gotten better at free associating than I ever was in any of my prior therapies! Being able to let myself go in a safe space has led to my getting to know myself much better. To my surprise, with her patient assistance I’ve delved deeper into myself than I ever expected to at this age and have worked through things I didn’t know were still stuck in me or could ever get un-stuck. Some of my most remarkable discoveries had to do with my mother. I had stoically managed her death and marched dutifully through adolescence and adulthood like the good soldier I had always been. It had never occurred to me that she ought to have found a way to tell me she would have to leave me and that it wasn’t my fault. So there was no goodbye from her (or, ironically, from my husband who died suddenly or from my longtime friend when I ended our relationship). I was amazed to discover that I’ve been angry at my mother for well over 60 years! Uncovering that anger has helped me see her as a 40-something scared cancer patient who was quite a good mom in the short time she had. I appreciate even more the fine times we had together and the unwavering loyalty of my father, who was left bewildered, at age 48, to raise a struggling teenager.

Once I had made peace with the issues that had brought me back to therapy, I told my therapist that even though I no longer needed her, I’d like to keep her for a while. She’s a sane, dependable, friendly presence in my life in these odd times.

I don’t fully understand it and maybe never will. But something in the combination of forced semi-isolation and a good psychotherapy relationship led me to experience and then move beyond some very dark places deep inside.

It seems strange to say that a global pandemic has improved my life. But it has—and I feel very fortunate. ▼





Dismantling Illusions in the Time of the Pandemic

EVEN AMID THE EXTREME CIRCUMSTANCES OF THE PANDEMIC, I CONSIDER MYSELF FORTUNATE. A little bruised, a little tired, but fortunate.

An Inward Journey

An intolerance and incapacity for suffering and pain spurred me on a spiritual quest in my mid-20s, which continues to this day, providing me a rich, humility-inducing context for approaching challenging times. The path and process are deconstructive in nature, based upon seeing and letting go of all that keeps the unifying presence of Love outside of my awareness. I learned early on that this Love (otherwise known as Oneness, God, Truth, whatever-name-you-want) is always in me, always beckoning me towards it, yet my resistance, borne of fear and trepidation, forms the barrier that keeps this awareness out of sight, or rather, out of mind. Through gently confronting my illusory self-constructs, the ego slowly dissolves, and a richer awareness of Love Beyond Form takes root in my consciousness. Every shift and change in the process requires a death of sorts, and this aspect is what proves most challenging. I have come to understand that the ego, my ego, is terrified, absolutely petrified, of change. Sometimes I would rather be me, in all my delusions and petulance, than to surrender to the truth that lives just beyond my constructed, often petty, boundaries. Yet this truth is not truth in the familiar logical, linear, positivistic sense. It is non-conceptual, non-temporal, independent of form. It is simply an experience of boundaryless, objectless Love.

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This process, thus situated within a nondual philosophical and contemplative tradition, has often revealed to me truths about myself that are shocking, repulsive, or frightening. Yet it is this seeing, however difficult it may be, that is the medicine I need as I continue along. Among the most important insights gained has been recognizing the perpetual war I wage against life itself. It is both a personal and archetypal dynamic, one that says, in essence, *I want it my way; I know what's best!* I howl this war cry to the greater mind of the world, insisting that things should be as I wish, according to my agenda and preferences. This self-energy forms the essence of my identity; it is the foundation of my ego.

And yet life has a way of softening the edges of my stubbornness and wanting. Confronted with forces and circumstances beyond my control, I am reminded of the perennial truth that the I, the little self, is not in control. The pandemic has been such an exercise in humility, and it is within this context that I have been forced into an amplified confrontation with myself. Looking ahead to a new year with the shadow of the pandemic still cast over our lives, the lessons and learning remain as poignant as ever.

Coming Home

The lessons of my spiritual path have not been more clearly manifest than in the relational-familial domain, where my ego's need for building walls against others, and therefore life, play out. I have a conditioned mindset that seeks compartmentalization. I am most comfortable when things are neatly separated, when I can find a clear dividing line between this aspect of my life and that one: safe, comfortable, uncomplicated; no bleed through, no overlap. Forced to work from home in a new pandemic-induced arrangement, my insistence on clear boundaries between work and family life were blown to smithereens. I was at home indefinitely, and my various life-roles in all their colors and tones came together like tie-dye. Questions loomed: Could I successfully integrate working from home, with all its implications? Could I tolerate the demands of family life, being a good husband and father, responding to the needs of my family, while also successfully working with clients, completing reports, attending meetings, and teaching, all from home? It was a lot to take in, and the adjustments to be made, primarily internal and emotional, were enormous. There was resistance and anxiety—the dread of change was at hand.

And then I had a dream. An excerpt from my journal from late March 2020, 2 weeks into lockdown, is presented here:

(My wife) and I were on a vacation, entering a nice, baroque style hotel. We were joyful and light and were graciously welcomed by hotel staff and management. At some point we were notified that something about our trip and hotel stay was changing. The change was unexpected, but important and official. We were ushered into another room that was to be our new surroundings. Our belongings as well were transported. A feeling of excitement and anticipation filled the air. As we awaited our new room, an older woman, a seemingly wild and wise gypsy-looking matriarch approached, bearing gifts. Somehow, we knew they were gifts of God, and that they would reveal to us something of God's nature.

Looking back, I interpret this as a message from my own deeper self that although we were entering a period of genuine and potentially discombobulating transition there were nevertheless gifts to be had. The dream continues, offering a symbolic understand-

ing of just what those gifts were:

The woman said I could open my gift. It was a small, delicately bejeweled mirror of sorts, a type of reflective item. I looked into it and saw my reflection. That ‘something of God’s nature’ was also part of me. Intuitively, I knew that the gift was about seeing my reflection in my experience of the world, that whatever I saw would reflect myself. I was humbled at the grace, simplicity and humor of it all.

The lesson, symbolized through the wise woman’s gift, was clear: Whatever my lived experience was in the pandemic would necessarily reveal to me an aspect of myself—it would be, as *A Course in Miracles* (1992) says, “...an outside picture of an inward condition” (p. 445). I was reminded, as I have been many times before, that my personal world, which of course includes my work and relationships, is a part of me and is not meaningfully separate from what or who I am. How could it be otherwise? My insistence upon a compartmentalized life, against worlds colliding, like *Seinfeld’s* George Costanza (David et al, 1995), was simply an external representation of my own resistance and fear. I was afraid, both literally and figuratively, of coming home—to myself. A new question, framed within the context of my spiritual path, emerged: Could I allow the gentle wisdom of Love Beyond Form to guide my steps, to allow me to develop a new capacity for flow and integration in myself, reflected thus in a deepened willingness to be responsive and attentive, as best as I could, to all aspects of my life—work, family, everything?

I continued, now clearer in my purpose and direction. Over time the ego’s noise faded, and I eventually found a rhythm in which family life situated within the contours of my workday became a source of deep satisfaction. Things seemed to work out; I found a flow. A lovely byproduct was that my relationship and connection with my wife, already deeply intimate, went even further. We took stock of our lives, our choices, and our assumptions and examined fundamental beliefs which had seemed, pre-COVID, sacrosanct. We opened ourselves to new possibilities and made significant, life-altering decisions. Much letting go occurred during this time and continues still, impacting nearly every aspect of our lives. Relationships and priorities shifted, we sold our home, and we consolidated our values into a direction that now feels far more congruent with our authentic desires. Though challenges and uncertainty remain an aspect of our experience (as is the case for so many), my dream, and the woman in particular, was right—there were gifts to be had in all of this.

Consolidating the Lessons to Therapy

Changes in the way I practiced and thought about therapy also occurred. In my work with clients, where I, like almost all of my colleagues, moved to an online platform, I was compelled to apply my learning even further. My training, writing, and research assert the central tenet of non-duality, that *separation is an illusion*, and that through letting go of false concepts—namely, that we are nothing but tiny monads of fleshly experience, separate from others and the world—a unitive awareness might come to the fore. Jean Klein (2008), the great philosopher and mystic, describing this experience applied to egoless listening, writes:

In listening we are not isolated. We are only isolated when we live in objects, but free from objects we live our essence where there is no separation. In listening there is not a you and not another. Call it love. (p. 88)

I have seen and experienced this time and time again with clients, where in the spacious instant of letting go, the therapy encounter is infused with a unitive peace that transcends ordinary experience. Interventions are often inspired and spontaneous, and the session seems to take on a life of its own. This dynamic, though now a familiar occurrence, is never taken for granted; it is the golden moment of peace, where I realize how little I know and yet am immersed in gratitude for the moment, this moment, with my client. Here, the boundaries between self and other fall away, limitations dissolve, and the illusory nature of the ego is seen for what it is. And most importantly, with a clear mind and a light heart, I can best be of service to others, attuned and responsive to my client's needs.

Moving to the online platform snatched away the comfort and security of being physically present with others. Finding presence with clients while in close proximity was natural and at times effortless—what about when interacting online? Would I miss something? Could that ineffable quality of experience still be achieved? I knew that going to the still center within me while working with others was always, always the task of primary importance—would that somehow be compromised when everything went virtual? My fear was that something would be lost or irrevocably changed for the worse.

I was now in position to generalize what I'd learned. I abandoned certain ways of doing things, certain tools I used, certain pleasantries and norms intrinsic to being with others in physical space, and simply allowed myself more and more, through the online venue, to empty myself, and in certain moments to feel as though I had become emptiness itself. There was no other choice; my clients deserved my total presence and my commitment to facilitating a therapy process where even though we were online, nothing was lost.

Ultimately, I found that I could access that same quality of unitive experience through the virtual platform, and that my way of being with others was not changed in any meaningful way. My inner teacher, as it were, could still guide the process just as before; again, nothing was lost. The unlimited nature of Love again revealed its truth to me, and my ego's doubting and chatter was again dismantled. This is not to imply an ongoing state of bliss, devoid of negative feelings, emotions, or countertransference; it is simply that my orientation shifted to allow for the realization that even though the form of therapy changed, its content had not.

As I continue my work amid the pandemic, I have found a decreased capacity for putting on professional airs or leading with anything that resembles conventional approaches. I, even more than before, recoil at the thought that superficial diagnostic labels have anything to do with who my clients really are, what they are capable of, and the ultimate meaning of our work together. This has been a growing edge for me as I get more deeply in touch with the experience that ultimately, our real essence is beyond the body, beyond the brain, and beyond the constructed self. Again describing the experience of egoless listening, Jean Klein (2008) writes:

In listening... there is no outside and no inside. It is silence, presence. In this silence-presence there is a total absence of oneself as being somebody. (p. 88)

In this awareness there is peace, heightened intuition, and a certain impersonal momentum that facilitates a natural rhythm to the process. Resisting this always induces pain, and letting go, however fearful, always ends up well. And each time, with renewed confidence I forge ahead with the conviction that no matter the circumstances, no matter the apparent obstacle, no matter my resistance, peace is possible. And if it's true for me, it's true for my clients.

Now, I cannot allow myself not to share this awareness with my clients. This does not mean I proselytize my views and beliefs, but rather, my attitude toward them is one of recognizing that they, too, share in this essence that I have come to know as my own. That this essence, this space, is enough to contain both of us, and if I can allow the session to unfold within this space beyond separation, then something of this attitude is necessarily shared with them. This has led to more spontaneity, more allowing of pregnant silences, more confidence and trust in my own knowing to offer help and assistance to these lovely beings who have come to me for help.

Concluding Thoughts: Pandemic as Teacher

The pandemic has taken a toll on me and everyone I know. Most people I talk to are tired, so very tired—the perpetual exhaustion of chronic uncertainty that defines this current era. As I ponder how this has forced me to prioritize my life and practice, I see a possible reframe for this exhaustion. We are, perhaps, being called to stop pursuing those things that would distract us from our path. We are being asked to focus only on what matters, on the relationships that matter, on the projects and work that matter, and to leave behind, as much as possible, artifice and superficiality. We are, perhaps, being asked to be more ourselves, not as a juvenile act of egocentricity, but merely because that is what the moment calls for—or risk burning out.

A teacher's ultimate purpose is to dismantle illusions, to help the student relinquish the false in favor of the true. The pandemic has thus served as my teacher par excellence, showing me what lay hidden within myself that was grasping, holding on, or unwilling to let go. And what do I (and others) hold onto? Comfort and security, the pseudo peace that comes from predictability and apparent stability. I have thus been renewed in the understanding that life, and in particular, this era, might be best characterized as a rushing, moving, and at times frightening river, and I am being asked, continually, to surrender to its flow. To do this effectively, resistance must end, which implies a process where I bring the darkness to light, offering my fear and rage to the gentle presence of Love within. Here the pain of the ego is transformed into a song of peace and forgiveness, and here I see that I am not merely this little self, separate and alone, but rather joined with everyone and the world. ▼

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Wasn't that a Mighty Storm!

Neal Whitman

“Not War, but a Hurricane: A Better Analogy for COVID 19 and Pandemics,” June 10, 2020. *Providence Magazine*

after a willful veering
away from our old ways
we were rescued
one year after the storm
today a white dove
perched on the mast
circled the azure sky
and returned with a mate

on the rising tide
the ocean is calm
we check our rigging
turn the windlass
and lift anchor
we rise and fall with each swell
it will now be up to us
how we handle the wind

a beacon flashes
as bright as the sun
we enter a harbor
there on the dock to greet us
a beautiful woman
holds a placard: *Welcome!*
we have arrived, port of call
the Coast of Bohemia

Hope and Rebirth *Voices*, Spring 2022

Call for Papers

OUR THEME, *Hope and Rebirth*, spans two seasons of just that: We write during the winter holiday season of hope and joy, and we publish in spring, nature's time of rebirth. Themes of hope and rebirth are reflected in the multiple religions that celebrate these seasons as well as in nature's return of the light in the winter solstice and its season of growth and fertility in spring.

Just as winter holds both darkness and the season of hope and joy, in celebration of the return of the light, so we stand hopefully in the waning of pandemic darkness, looking toward the return of the light in our lives.

We are tired! Therapists and clients alike—exhausted by isolation, adaptations to telehealth, relentless political and racial unrest, and especially by the prolonged uncertainty of when we will finally escape this pandemic holding pattern and breathe freely again. Feel safe again. Be together again. Therapists and clients alike report increased struggles with anxiety and depression, sometimes fear and despair, as pandemic darkness lingers on. We are eager to look beyond the heaviness that has weighed us down for too long. We turn now toward the light, seeking hope, joy, rejuvenation, and restoration.

For this issue of *Voices*, consider, in pandemic darkness and in times before: Where do you find hope? From what do you draw strength? How do you refuel and rejuvenate? What restores your energy or renews your spirit? What sustains you? Did what brought sustenance and rejuvenation in the past hold up against pandemic distress, or did you have to find it in new ways? How have you embraced play or found joy even amidst the darkness? How have you taken care of your person or the therapist? Perhaps you have found restoration in spirituality or nature. Perhaps in music, poetry, art, or literature. Perhaps humor has sustained you.

Where do you find hope in the winter holiday season, and for what do you hope? What rebirth do you seek in the coming of spring? Where do you find light?

Consider, too: How have you seen hope and rebirth in your consultation rooms (in pandemic or other times)? Where do you see them in the practice of psychotherapy? What rebirth have you witnessed? What keeps hope alive—for you, for your clients, for the world?

Voices welcomes submissions in the form of personal essay, research- and case-based inquiry, poetry, art, cartoons and photography. ▼

Deadline for submission: January 15, 2022

Direct questions and submissions to the editor, Carla Bauer, LCSW
crbauer01@bellsouth.net

See Submission Guidelines on the AAP website:

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Deadline for submission:
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submissions to the editor,
Carla Bauer, LCSW
crbauer01@bellsouth.net

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The great challenge of this century . . . is that of understanding the other.

—Charles Taylor: *Dilemmas and Connections*

Nothing that is human . . . can do without the idea of the alien, to protect itself.

—Adam Phillips: *Terrors and Experts*

IN THIS ISSUE OF *VOICES*, we explore the borders and walls we erect in our minds and with each other—barriers we use to turn ourselves into strangers. Inner and interpersonal forms of estrangement are unavoidably linked. Those we alienate may be our friends, enemies, family, professional colleagues, larger community, people

diverse from us in any number of ways, or strangers that represent disowned parts of ourselves.

From micro level to macro, facing what feels alien can stir up diverse feelings, including fear of loss of identity, power, or pride; helplessness, ignorance, or vulnerability; feelings of superiority or guilt, of failure, shame, or self-loathing. Facing the other can be met with varying forms of resistance: scapegoating, aggression, othering, projecting, sub-grouping, etc.

Consider your own experience and that of your clients: What are our borders and walls for, what are they meant to protect us from, what and who are they designed to exclude? How do we use them to prevent us from understanding the other? How do our inner and interpersonal barriers mirror actual borders and walls between neighborhoods, cities, states, and countries? What are we afraid of in the other? What are we disowning in ourselves when we reject the other?

We are hard-wired to seek connection, and through connection, communion. Yet we repeatedly default to behaviors that distance us from the other. As we examine our cherished borders and walls, our profound attachment to our distortions, and we begin to imagine what it's like being someone else, we are changed. Estrangement, when challenged, may be replaced by feelings of kinship or fellowship we have tried to disown.

For this issue, consider how these dynamics show up in your life and practice. Consider, too, how large and small group process can facilitate facing the other and breaking down walls.

Voices welcomes submissions in the form of personal essay, research- and case-based inquiry, poetry, art, cartoons and photography. ▼

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Each issue has a central theme as described in the call for papers. Manuscripts that fit this theme are given priority. Final decision about acceptance must wait until all articles for a particular issue have been reviewed. Articles that do not fit into any particular theme are reviewed and held for inclusion in future issues on a space available basis.

Articles. See a recent issue of *Voices* for general style. Manuscripts should be double-spaced in 12 point type and no longer than 4,000 words (about 16 to 18 pages). Do not include the author's name in the manuscript, as all submissions receive masked review by two or more members of the Editorial Review Board. Keep references to a minimum and follow the style of the *Publication Manual of the American Psychological Association, 5th ed.*

Submit via email, attaching the manuscript as a Word document file. Send it to Carla Bauer (crbauer01@bellsouth.net). Put "Voices" in the email's subject line, and in the message include the author's name, title and degree, postal address, daytime phone number, manuscript title, and word count. Please indicate for which issue of *Voices* the manuscript is intended.

If a manuscript is accepted, the author will be asked to provide a short autobiographical sketch (75 words or less) and a photograph that complies with technical quality standards outlined in a PDF which will be sent to you.

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Poetry. We welcome poetry of high quality relevant to the theme of a particular issue or the general field of psychotherapy. Short poems are published most often.

Book and Film Reviews. Reviews should be about 500 to 750 words, twice that if you wish to expand the material into a mini-article.

Visual Arts. We welcome submissions of photographs or art related to the central theme for consideration. Electronic submissions in JPEG or TIFF format are required. If you would like to submit images, please request the PDF of quality standards from Mary de Wit at md@in2wit.com or find it on www.aapweb.com. Images are non-returnable and the copyright MUST belong to the submitting artist.

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VISION STATEMENT

Our vision is to be the premier professional organization where therapeutic excellence and the use of self in psychotherapy flourish.

MISSION STATEMENT

The mission of the American Academy of Psychotherapists is to invigorate the psychotherapist's quest for growth and excellence through authentic interpersonal engagement.

CORE VALUES

- Courage to risk and willingness to change
- Balancing confrontation and compassion
- Commitment to authenticity with responsibility
- Honoring the individual and the community

FULL MEMBERSHIP

Full Membership in the Academy requires a doctoral or professional degree in one of the following mental health fields: psychiatry, clinical or counseling psychology, social work, pastoral counseling, marriage and family therapy, counseling, or nursing, and licensure which allows for the independent practice of psychotherapy.

- Specific training in psychotherapy with a minimum of 100 hours of supervision.
- At least one year of full-time post graduate clinical experience (or the equivalent in part-time experience) for doctoral level applicants, at least two years for others.
- A minimum of 100 hours of personal psychotherapy.

A person who does not fulfill the above requirements but who is able to document a reasonable claim for eligibility, such as a distinguished contributor to the field of psychotherapy, may also be considered for full membership.

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In the interest of promoting the development of experienced psychotherapists, one category of associate membership is offered for those with the intent of becoming full members. These members will be working with a mentor as they progress to Full Membership.

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- has completed or is actively engaged in obtaining 100 hours of personal psychotherapy
- agrees to work with an Academy member mentor
- may be an associate for no more than five years

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For information regarding membership requirements or to request an application, contact the Central Office. Membership information and a printable application form are also available on the Academy's Web site, www.aapweb.com.

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