Dear List members!
Welcome to our first issue for 2012! We hope you enjoy what we've collected for you. Special thanks to the authors of our two feature articles as well as to others who have sent in news of events.

Best wishes, Ilene and Heather

In this issue:
News from Ilene and Heather
Welcome to new members/introductions
News from: Kenneth Gergen
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- Sally Gelardin, Nader Robert Shabahangi, Marilyn Harryman
Upcoming Conferences/Calls for Papers
AgeSong – the Poetics of Aging Conference
Workshops
Article: Link to "Dance is a Radical Act"
Film Review: Link to Ilene Serlin review of “A Dangerous Method”

Attachments: article on dance family
John Fox – de Chelly poetry retreat flyer

NEWS FROM ILENE:
It's now live. See http://union-street-health-associates.com/
The news from Union Street Health Associates is that we have 2 new psychology assistants and 1 new MFT intern. One is an artist and trained in expressive therapy, the other is a research assistant who is interested in dance therapy, and the third is a dance/movement therapist who is getting her MFT license. I find it exciting that more and more young people are merging the arts and psychology, and getting good training in both.
At Union Street we have a group for Quarter Life Crisis, through MedFit in Five Point Fitness lead a group called "Moving Toward Health" for people with chronic illness, and will be doing trainings in expressive therapies and dance/movement therapy.

On March 31, I was on a panel on Women in Humanistic Psychology at the mid-year Division 32 conference in Pittsburgh. I published a review of the film "A Dangerous Method" in the spring edition of the San Francisco Psychological Association Newsletter. From May 17 I will do an intensive dance/movement therapy training at the Institute of Psychology in Beijing, present at the second conference on Existential Therapy: East and West and do an intensive dance/movement therapy training in Shanghai.

During July 5-20 I will teach at Lesley University in Netanya (Israel) and in October lead a group of American psychologists to visit and have collegial exchanges at trauma and academic centers in Israel.

NEWS FROM HEATHER:
My news is short and sweet this time. Just two weeks ago, I received an unexpected invitation to present on dance and dementia – in Japan! This is part of a program of exchange between Japan and Australia and will be about sharing the Australian experience in aged care provision. I will be leaving on April 23rd and stay for two weeks. This is my first trip to Japan and I'm looking forward to visiting some aged care and also dance therapy programs, as well as fitting in a little bit of sightseeing!

WELCOME TO NEW MEMBERS/INTRODUCTIONS
Joy Gottlieb, Sharon Chaiklin, Barbara Busse, Patrice Fortune, Carrie May Ezell, Sanela Marusic, Allison Tuzo.

Sharon Chaiklin
I began my life in dance therapy by showing up at St. Elizabeth's Hospital to ask Marian Chace* if she would accept me as an apprentice to her. Happily, she agreed and so it changed my life. Over the years I continued to study with others, worked in psychiatric hospitals and later also added a private practice. As an early arrival to the idea of dance as therapy, I was involved with others who believed we needed an association in order to become professional. I served as the first Vice-President with Marian Chace as President, and then President of the American Dance Therapy Association. I remained involved with the ADTA through the years and currently am serving as a trustee of the Marian Chace Foundation which is non-profit and sponsors an annual lecture, offers grants and other means of support to the profession.
Teaching had been part of my experiences. I was on faculty at Goucher College in Maryland, University of Haifa in Israel and have offered workshops and conference presentations internationally. I am co-editor of Foundations of Dance/Movement Therapy: The Life and Work of Marian Chace and more recently The Art and Science of Dance/Movement Therapy: Life is Dance.
**Barbara Busse**, who has recently joined the mailing list, resides in Durham, NC. She is a recently retired from a career as a reference assistant in the Duke Medical Library History of Medicine Collections and general collection. She has danced since childhood - having first been given dance lessons to help her deal with the neurological issues (mild spasticity etc.) from having been born without a thyroid gland. She studied dance in NY in the 1960's and was exposed to the work of Rudolph Laban and Irmgard Bartenieff. Though she eventually turned to work as a medical library paraprofessional, she remained active in the dance world. Barbara was the local coordinator for an American Dance Guild and CORD joint conference in 1973, started a local dance organization, served on the board of a Creative Arts in the School program and later volunteered for the American Dance Festival in Durham. She has been an active associate member of both the national and chapter activities of the American Dance Therapy Association - including having served on the National Research Subcommittee and as an active contributor to the listserv and the Forum which replaced it.

**Allison Tuzo** has been the Collection Editor at the Archive for Research in Archetypal Symbolism (ARAS) for the past 10 years. She also works with the Art and Psyche Working Group and the Jungian Psychoanalytic Association. When not working, she can be found playing music in New York City with her band, Bel Air.

**News from Members:**

**Kenneth Gergen on the Society for Qualitative Inquiry in Psychology**
The newly forming Society for Qualitative Inquiry in Psychology has now become an official section of Division 5 of the American Psychological Association. This move essentially establishes qualitative research as an essential and significant form of inquiry in psychology. We welcome any and all into the Society, and at least for the foreseeable future, there are no dues required for membership in the Society alone. Inquiries can be directed to Kim Carlin at taosinstitute@comcast.net.

**Henry Gates:**
I just finished a trial website; providing housing for visiting artists to MassMOCA: the largest contemporary art museum, along with the CLARK and Williams College. It is [http://tenminor.yolasite.com](http://tenminor.yolasite.com).

**FEATURE ARTICLES**

*We are delighted to be able to present two articles written by list members for our newsletter. We are grateful to the authors for the taking the time to do so.*
Writing to Heal

by Abby Caplin, MD

I want to lift
my face, smile
against gravity
find wholeness in
life’s marathon.

B.D., “Writing to Heal” class, 5/13/11

(Words chosen from word grab bag to create the poem: facelift, marathon, gravity, wholeness, smile.)

The six participants living with chronic illness cross the threshold of the bookstore, find their way past the shelves of books to the small room located in the back, and take seat around a wooden table. Usually women, they bring their pens and journals as instructed. They fill out nametags and check out the other group members, but the healing has already begun---they are relieved to find that everyone else seems remarkably normal. Unconsciously, they begin to understand that they are normal, too.

They have come to a class called “Writing to Heal,” a guided five session group for people dealing with illness. Their relationships to writing vary—some see themselves as writers, while others are terrified of a blank page. But they have read, or intuit, that writing about their experiences may help them feel better. In a safe environment, they are willing to risk potential embarrassment to find healing.

They don’t know it yet, but by reflecting on their experiences, writing them down and sharing their writing with the group, they will begin to change their relationship to what has happened and see themselves with new eyes. They will listen to one another, and find themselves in stories that are not their own. They will nurture their inner artists and be made aware of their inner critics, which, like dogs yapping at their heels, have pursued them. They will discover that these inner critics have been well-fed by society's negative projections about ill people---unwittingly promulgated by healthcare workers, family, friends and strangers. Writing, sharing, witnessing and developing insight reduce the terrible stress of living with chronic illness in a health conscious culture, and help shift the body's biochemistry towards healing.

Expressive and narrative writing are one of the many tools used for mind-body healing. The common intent in the use of any artistic modality or psychotherapeutic intervention with regard to chronic illness should be to reduce the level of chronic stress as experienced by the patient. While acute (short-term) stress often enhances a person’s immune response, chronic (long-term) stress can suppress immunity by decreasing the number and function of immune cells. It can also dysregulate immune function. Immune dysregulation, determined by the presence of proinflammatory cytokine-driven immune responses, are often associated with allergic conditions or autoimmune illnesses, such as Crohn’s disease, ulcerative colitis, diabetes mellitus type 1, eczema, Hashimoto’s thyroiditis, systemic lupus erythematosus, multiple sclerosis, rheumatoid arthritis and psoriasis.
This is not to categorically assert that all chronic illness is caused by chronic stress; genetic and environmental factors must also be strongly acknowledged. But it is safe to say that chronic stress exacerbates many types of chronic illness. Although scientific studies that attempt to evaluate the effect of stress reduction on chronic illness are fraught with pitfalls, partly due to the subjective and varied experience of stress, many patients self-report that stress reduction improves symptomatology and overall wellbeing.

How ironic it is then that, aside from genetic inheritance and the original stressors that may have triggered disease expression, the experience of being a patient in today’s society often adds to one’s chronic stress levels, thereby decreasing the chances of the immune system’s recalibration and healing. Patients are bombarded with cultural assumptions about the meaning of illness, and negative stereotypes permeate the psyche, feeding the appetite of a most potent stressor—the inner critic. Patients know that healthy others often wonder about what the patient might have done wrong to trigger the illness. They know this because they've wondered the same thing about other people who are ill. Group participants report worrying others will see them as hypochondriacs, whiners, attention seekers, invalids, and fakers. They fear being thought of as weak, needy or controlling. They fear this because their inner critics have drunk the Kool-Aid of these societal beliefs. People with illness are told that they haven’t tried hard enough to get well, that they don’t know how to think positively enough, and, most unhelpful, that they are too “stressed out.” This is like telling someone in a deep depression to just snap out of it.

Writing about and processing the illness experience through journaling and guided writing exercises, whether in individual or group sessions, are some of the most important ways to help stop the upward spiral of stress that can only serve to worsen disease. When the patient experience is clarified and normalized, leading to understanding and reduction of self-blame and stigma, then work can begin in addressing individual longstanding sources of chronic stress—the stress that may have been instrumental in triggering the illness in the first place.

Writing allows for both expression of feeling and simultaneous reflection, as words are formulated and the authentic story unfolds. The self-witnessing of one’s story, along with sharing of the story in a safe place, helps create a shift in consciousness. The shift in consciousness creates changes in the body, as cells release neurotransmitters, hormones and immune cytokines that alter dialogue, and allows the body to become a different story. We may not yet have the complete alphabet, and we see only fragments of the body’s conversation through scientific research, but no one can deny that the biological language exists.

As the class ends, group members are often surprised at how much they have learned about themselves—their courage, inner strength and innate creativity. They have acquired insight, perspective and the tools of health writing. They can continue to move forward, with the potential of shifting the conversation and trajectory of their wellbeing.

Abby Caplin, MD is a doctor who practices Mind-body Medicine and Counseling in San Francisco, California, helping people with chronic illness lead meaningful and empowered lives. Abby also created and conducts a popular healing workshop called “Writing to Heal,” for people living with chronic illness. She has published poems and short stories, and is in the process of writing a memoir about her own healing journey through chronic illness.
"Dr. Caplin's next 'Writing to Heal' workshop series will be on April 22nd, 29th and May 6th, 20th and 27th, 2012 at BookShop West Portal in San Francisco.

See [http://www.abbycaplinmd.com/events.html](http://www.abbycaplinmd.com/events.html)

If you have clients who would like to participate, they should contact Dr. Caplin at 415-255-9981 or send an email to abby@abbycaplinmd.com.

For your clients who are dealing with illness, you can also invite them to visit Dr. Caplin’s blog: [http://permissiontoheal.wordpress.com](http://permissiontoheal.wordpress.com).

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*Ed. Note: Given recent discussions on the DSM, the following article is very a propos.*

**Moving beyond the DSM:**

*From Hoarding to Foraging for Memories*

By Sally Gelardin, Nader Robert Shabahangi, and Marilyn Harryman

**OVERVIEW**

The American Counseling Association, the world's largest counseling organization, opposes some revisions to the main diagnostic tool used in mental health. According to Rebecca Daniel-Burke, staff liaison on the ACA DSM task force, “in general, counselors are against pathologizing or ‘medicalizing’ clients with diagnoses as we prefer to view clients from a strength-based approach and avoid the stigma that is often associated with mental health diagnoses.” ([Bass, November 28, 2011](http://www.americancounselingassociation.org/NewsRoom/PressReleases/2011/11/28-BASS-DSM-Task-Force-Report-Counselors-Against-Pathologizing)).

In support of this strength-based approach, we - Drs Sally Gelardin and Nader Shabahangi, joined by Marilyn Harryman, NCC, DCC – conducted an educational session on **Sunday, March 25 at the American Counseling Association's Annual Conference, held this year in San Francisco.** At this session, we challenged the mainstream understanding of aging as decline and/or disease and the focus on diagnoses of mental illnesses, represented by the DSM Code. Instead, we focused on a more expansive, humanistic, and creative vision and approach through the use of metaphors. This paper arose out of that presentation.

The three main subjects addressed in the paper are the following: (a) Define and demystify the DSM code; (b) Examine positive ways counselors can reframe diagnoses through metaphors; (c) Provide a toolbox of life-affirming wellness activities that counselors can use with clients to move beyond medical diagnoses.

**Who And/Or What Defines An Individual? Is It Simply Illness Diagnoses?**

Individuals over 80 are the fastest growing population. How do we relate to our elders – note each sign of decay? failing eyesight or hearing? slower pace? each memory slip? every time the phone is left off the hook? In our youth-oriented culture, it is difficult to find anything to look
forward to as we age. Once an individual has been diagnosed by the medical profession, is that the whole person, or does that individual have other "evolving" abilities?

Labels are for jars, not people.
Labeling through medical diagnoses continues throughout our lives, but most of us start to notice it more as we pass 50. For example, over 8% of the U.S. population (children and adults) have diabetes. Over 25% of U.S. citizens over 65 have diabetes. Adults with diabetes have heart disease death rates 2 to 4 times as much as those without diabetes, plus develop other serious health challenges.

In some cases, a diagnosed illness can be reversed – the individual can be “cured”. In other cases, the diagnosis may remain throughout the rest of one's life, but the symptoms can be moderated. Sometimes, a person who has been diagnosed with an illness, as well as those with whom the diagnosed individual is in contact, can lead a fuller, more rewarding life than before becoming aware of the diagnosis.

EXPLORATION AND GOALS
To challenge the mainstream understanding of aging as decline and disease, we ask questions, such as the following: What really gives us joy and celebrates our existence? How can we experience endings as new beginnings, losses as opportunities for new gains? What are the opportunities to create our lives as we age? How do we cultivate what is latent and wants to come to the fore? How do we care for others and for ourselves as we age, taking into consideration and moving beyond medical diagnosis?

Goal 1: Define and Demystify the DSM Code
In the United States, a medical diagnosis is used to explain why an individual's behavior deviates from the norm. Individuals are labeled by the diagnosis. Here are some examples: compulsive hoarder, paraplegic, Asperger's, diabetes, Alzheimer's. However, it is possible to “reframe” how we view individuals with different abilities. For example, a compulsive hoarder may become an individual in her later years who forages for memories in creative ways. The quality of our lives depends upon how we perceive ourselves and how others perceive us. If we can approach each individual as unique, with his/her own set of strengths and challenges, then we can move beyond labeling to more constructive ways of perceiving others and viewing ourselves.

The expanding number of DSM categories demonstrates an increasing focus on disease by psychiatrists and pharmaceutical companies (Cosgrove, Krimsky, Vijayaraghavan, Schneider). There is a big war currently going on regarding how many criteria a person needs to be diagnosed as having Asperger's syndrome and whether Asperger's should be consolidated with Autism Spectrum Disorder or Pervasive Developmental Disorder. Dementia of the Alzheimer’s Type, has eight sub-classifications (http://psychcentral.com/disorders/dsmcodes.htm).

There is more to people than diagnoses of illnesses!

Goal 2: Examine Ways We Can Reframe Diagnoses through Metaphors
Norman Amundson, who experienced a heart attack in May, 2011, realized retrospectively that he had not been practicing what he was preaching. He re-read his early writings on metaphors and created metaphor cards to move us beyond the stories that we tell ourselves and the diagnoses with which we have been labeled. "We [counselors] can enrich our speech and practice through the use of metaphors, raise people's spirits, and point to new futures
A metaphor is a figure of speech in which two unrelated ideas are used together in such a way that the meaning of one of the ideas is superimposed and lends definition to the other.

One of the most difficult tasks for most older (and many younger) individuals is to let go of material possessions, downsize, and adjust to a new environment. When the need to collect gets out of control, leading to a chaotic physical environment or even taking things that one does not own, the medical profession diagnoses individuals who demonstrate these characteristics as “compulsive hoarders.” Compulsive hoarding is one of 365 mental disorders listed in the Diagnostic and Statistical Manual of Mental Disorders (DSM), published by the American Psychiatric Association. Hoarding is the excessive acquisition and inability or unwillingness to discard large quantities of objects that would seemingly qualify as useless or without value.

When Mahatma Gandhi died, he had five things: glasses, bowl, diary, prayer book spoon, and loincloth. The average person had 20 to 30,000 items. Who is hoarding? Shabahangi notes, “We do the diagnosis because we are diagnosing ourselves. We are scared of psychosis because we see that in another that is wrong. We are scared of being different or wrong. We need to go beyond diagnoses, to see ourselves as other than labels” (phone conversation between authors, March, 2011). Let’s see how we can incorporate metaphors to help people who hoard live safer, more enjoyable lives. Consider replacing the DSM phrase “compulsive hoarders” with the metaphor “foraging for memories.” We can develop ways to help our clients forage for memories, such as creating aprons with numerous pockets and giving such a client a little metaphorical gift, symbolizing love, from a pocket. Residents can design and wear their own aprons to collect little trinkets. The give and take is a multi-sensory interaction, so much needed by those who may be in need of human contact (foraging for love).

Goal 3: Provide a Toolbox of Life-affirming Wellness Activities that Can Be Used with Clients To Move beyond Medical Diagnoses

To move beyond the DSM, we focus on wellness. The term “wellness” is used frequently, but do we really know what it means both in our own lives and in the lives of others? Being “well” used to refer merely to the absence of illness. Wellness today refers to a state of well-being, even if we have a diagnosed “illness.” According to Best-Martini wellness includes our physical, social, cognitive, emotional and spiritual health. She notes that everybody can participate in and benefit from a focus on wellness, including young and old, physically and emotionally fit, or physically and emotionally challenged individuals. The “Wellness Tree of Life” (Best-Martini, 2011) is a metaphor that can be transformed into an activity and applied by elderly care providers and individuals in transition.

Another wellness metaphor Best-Martini created is the “Iceberg Model.” She says, “Illness and health are only the tip of an iceberg. To understand their causes, you must look below the surface.” The Iceberg Model places “State of Health” at the tip of the iceberg and the most visible. But under the water’s surface are the Lifestyle / Behavioral Level, Cultural / Psychological / Motivational Level and the Spiritual / Being / Meaning Realm.

To determine our state of health, we need to look at all of these aspects of our lifestyle and decide what needs to be changed, altered or added to. There will always be areas that we cannot change, such as a pre-existing genetic disorder, but we can manage our lives in a more balanced way and with more awareness by focusing on wellness. According to Best-Martini, we need to practice what we preach, to be aware of and understand the concepts and consequences of our own lifestyles, and also to role model wellness. Best-Martini, who is an occupational therapist and exercise teacher, says, “With regular exercise, participants will experience” better
Initial Questions To Ask Client

1. In what areas of wellness (physical, social, cognitive, emotional and spiritual health) are you strong?
2. What areas of your life can you improve?
3. What is one metaphor that can help you improve the quality of your life? For example, “foraging for memories apron” to replace the DSM diagnosis of “compulsive hoarding.”
4. How might you apply this metaphor to improve one wellness area in your life? Consider the following: (a) your strengths, (b) behavior that you want to change, (c) your goal, (d) action/s you will take to meet your goal. Keep it simple!

*If you need help in identifying those areas in which you are strong, or which you could improve, take a wellness survey, such as the following:

- "Renew-O-Meter" (Dr. Linda Clever, MD, http://www.renewnow.org/RenewOmeter.html)
- Broken Plate: Putting the Pieces Together in New Ways (Dr. Sally Gelardin, https://campus.digication.com/integralaging/Broken_Plate)
- Integrative Life Planning Inventory (Dr. Sunny Hanson, https://campus.digication.com/careerwell/5_13_10_Sunny_Hanson)
- Piece of Personal Identity, Dr. Sunny Hanson, https://campus.digication.com/careerwell/5_13_10_Sunny_Hanson)
- Career AIM Assessment Inventory of Personal Identity, Dr. David Reile, https://campus.digication.com/careerwell/5_13_10_Sunny_Hanson)
- My 3D Living Drawing (Dr. Norman Amundson, https://campus.digication.com/careerwell/2_3_11_Norman_Amundson)

SUMMARY

The view that each individual is unique, with his/her own set of strengths and challenges inspires us to move beyond labeling to more constructive ways of perceiving others and viewing ourselves.

REFERENCES


_Sally Gelardin, Ed.D. (International and Multicultural Education), NCC, DCC,_ is a counselor, educator, and author of three books, including Career and Caregiving: Empowering the Shadow Workforce of Family Caregivers, published by the National Career Development Association. She has conducted over 150 live and recorded interviews with industry experts, over 50 of which are devoted to aging and later life issues. In her current position as media specialist for AgeSong Elder

**Nader Robert Shabahangi, PhD**, is a licensed psychotherapist, businessman, author, publisher, and advocate for marginalized groups of society. He has led anticipatory bereavements groups for Coming Home Hospice; founded the Pacific Institute to train psychotherapists in a multicultural, humanistic approach to counseling and to provide affordable therapy services to the many diverse groups in San Francisco; and developed an innovative Gerontological Wellness Program to provide emotional and mental health care services for the elderly. In 1995, he started AgeSong to develop and operate assisted living communities. nader@agesong.com, www.agesong.com and www.pacificinstitute.org.

**Marilyn Harryman, M.S., GCDF, DCC**, is Counselor Educator/Supervisor, University of LaVerne; former Counseling Services Coordinator and Secondary School Counselor, Oakland Schools; co-author, High School Success Guide - a tool to help students plan and make informed choices; and producer/host of “CCC Live!” “The Counselor Community Connection”, KDOL TV 27. She is a counselor association representative to the Pupil Services Coalition for legislative issues; a Distance Credentialed Counselor; a Global Career Development Facilitator; and a Career Counselor with the Bay Area Career Center, San Francisco. Contact: Marilynhar@aol.com, http://www.bayareacareercenter.com.

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**CONFERENCES**

**CALL FOR PAPERS**

**DEADLINE EXTENDED THROUGH APRIL 17**

Announcement from Barry M. Cohen, ATR-BC
Executive Director, Expressive Media Inc.:

The third annual **Expressive Therapies Summit** will be held in **New York City**, November 8-11, 2012. This exciting continuing education opportunity offers creative arts therapists and educators, arts professionals, and interested healthcare colleagues the chance to come together to learn, collaborate, and network.
Attendance at this event has already grown to over 600 people from 7 countries in only two years. In 2011, a distinguished faculty of over 100 clinicians, educators, researchers, and others presented papers, panels, workshops, and full-day classes on art, music, drama, dance/movement, and poetry therapies as well as psychodrama, sandtray and play therapy for populations of all ages and abilities.

*If you have already submitted a proposal, you should have received an automated email from our system acknowledging your submission. If you did not receive that email, please let us know immediately.* Thanks to all who have already submitted proposals.

We welcome papers, panels, workshops, and classes featuring any creative arts discipline. Of particular interest are sessions that are experiential and/or multimodal. This year, **session formats range from 1.5 to 12 hours (two days)**. The 2012 Summit program will be selected from proposals submitted through our updated Submission site. **The submission deadline has been extended until midnight Tuesday, April 17.**

Proposal submission is open to all interested professionals, and is not limited by theme or creative arts discipline. In fact, if you are a content expert on a particular mental health topic of interest to creative arts/expressive therapists, we welcome your proposal.

**Need some inspiration?** Review last year's (2011) Program by clicking here. Click here to access the 2012 Proposal Submission Site or paste http://www.cvent.com/d/dcq9jl into your browser. Otherwise, visit expressivetherapiessummit.com and click the Submit Proposal tab to access the Submission site. Once there, just use the navigation bar on the left side of the page to find out how to submit a proposal. **Faculty discount and compensation** information, as well as 2011 faculty bios, registration rates, and more are also available on the Submission site. **Notification of proposal acceptance will be sent via email by the end of May, at latest.**

To be placed on our mailing list to receive all of our communications, click Add to Mailing List or use the Mailing List tab at www.expressivetherapiessummit.com.

The full Summit schedule and registration details will be available online on or before July 2. Registration will be open to all interested professionals and students, and can be purchased by the day or in any combination. A limited number of student work/study opportunities are offered via application, which are available when online registration opens. **CEUs will be offered** for creative arts therapists, social workers, counselors, and others.
The Society's 5th annual Arts & Health Film Festival, to take place on Friday, May 4, 2012, as part of the Society for the Arts in Healthcare's annual international conference:
Film segments will be watched and voted on by an audience of nearly 200 attendees. A winning film will be aired on a local Detroit PBS station.

The Art and Psyche Working Group is pleased to announce a conference on the creative collaboration between depth psychology and the arts in the context of a city.

Traditional plenaries, workshops and breakouts will feature presentations by painters, musicians, poets, actors, photographers, psychotherapists, analysts and expressive arts therapists. Ten minute sparks of images and ideas will flash throughout the conference.

The Arts Paths offer designed tours of the National Museum of the American Indian in New York City, the Rubin Museum of Art, the Morgan Library and Museum, the Asia Society Museum, the Whitney Museum of American Art, the Metropolitan Museum of Art and its Watson Library, the Cathedral of St. John the Divine. There will be walking tours of the Masonic temple and the High Line, viewings of subway station murals in The Arts For Transit program, and selected art and psyche videos at NYU. Maps of galleries and subway art will be provided.

The Archive for Research in Archetypal Symbolism (ARAS) and the Kristine Mann Library (KML) will offer open houses for those interested in the arts, symbolism and psychology.
The Thursday night public program with the award-winning poet Mark Doty on Walt Whitman, and Donald Sosin on his score for the film Manhattan, will include a panel with composer Jorge Martin and photographer Deborah O’Grady. A Saturday night Dream-Over, an overnight spent at the Rubin Museum, will be offered.

Program, registration and hotel information can be found at [http://www.cvent.com/d/3cqkt6](http://www.cvent.com/d/3cqkt6) or contact us at artandpsyche@nyu.edu

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**Culture, Health and Wellbeing**

International Conference

June 24th, 25th, 26th 2013

Bristol, UK

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Conference Chair: Professor Richard Parish, Chief Executive of the Royal Society for Public Health

The conference will inform international perspectives on:

- Health and Creative Ageing - how cultural interventions promote healthy ageing
- Global Health Inequalities and culture - how cultural interventions respond to health inequalities in different parts of the world
- Culture and the Social Determinants of Wellbeing - how cultural interventions contribute to wellbeing and a health society

For more information please contact Alex Coulter, Director of Arts & Health South West, by email: alex@ahsw.org.uk
AGESONG – POETICS OF AGING CONFERENCE

In the November 2011 issue, we advertised the Poetics of Ageing Conference. CLICK HERE to view. highlights of the Conference, held on 16-19th November in San Francisco.

Ilene will be writing something on the conference and her presentation in our next newsletter.

WORKSHOPS

Narrative Expressive Arts Therapy: liberating Clients through Creativity

Facilitators: Shoshana Simons, PhD, RDT
Danielle Burnette, MA, MFTi

A training workshop for therapists, social workers, wellness and life coaches, human service professionals, educators, community leaders, and spiritual guidance counselors

Join us for two colorful, creative, and stimulating days, offering you a rare chance to learn the "nuts and bolts" of Narrative Expressive Arts Therapy. You will be introduced to exciting collaborative arts activities that can deepen your understanding of the relationship between larger social systems and individual, familial, and group distress and how to help alleviate it. You will witness live demonstrations and gain opportunities for applying your newly emerging skills to the needs of your clients.

http://www.livingartcenter.org/Living-Arts-Counseling
Center/Event/Narrative+Expressive+Arts+Therapy%3A+Liberating+Clients+through+Creativity_148.htm

Saturday, April 14th & Sunday, April 15th
10:00am-5:00pm
2149 Byron Street, Berkeley
$250, $200 if you register by March 30th
12 CEUs available for MFTs and LCSWs for additional $25

The Nature of Poetry: Exploring the Beautyway

The Eleventh Camping, Hiking and Poem-Making Experience with John Fox, Tad Gielow and Diné friends Jon and Lupita McClanahan

Canyon de Chelly in Northern Arizona
24-31 May 2012

See attached flyer for further information.
Authentic Movement Retreat for Experienced Practitioners
27 August - 1 September in Tuscany, Italy led in English by Marcia Plevin

An experienced international group of movers/witnesses will meet at Le Capannacce located in the middle of Tuscany halfway between Pisa and Florence. The Center, Le Capannacce, is immersed in nature of the Tuscan hills among olive groves and cypress trees. A large swimming pool is available on the premises. The ample size working studio is bathed in beautiful light through-out the day, the food (Italian of course) and hospitality is optimal. Vegan or vegetarian diets that will be taken into consideration. The Retreat, taught in English, is four and a half days and will explore the individual and collective unconscious, the relationship of moving and being moved with integrative meditative practices based on vipassana meditation.

There will be time in the afternoons dedicated to practice and also to explore in seminar form theoretical implications of the discipline. For those leading Authentic Movement groups there will be time for personal supervision.

Costs:
Room and board 65 euro a night (5 nights).
The retreat 400 euro.
Please contact me personally marcia.plevin@alice.it to sign in and reserve your place.

Marcia Plevin, her Authentic Movement practice is based on many years of study with Janet Adler and with Joan Chodorow, Tina Stromsted. She has taught the discipline for the past 17 years for groups in Italy, Finland, Spain and Turkey, integrating vipassana meditation practice. Dance movement therapist, psychologist and teacher/supervisor for the Institute of Expressive Psychotherapy, Art Therapy Italiana, member and supervisor BC-DMT, American Dance Therapy Association, member and supervisor APID, Italian National DMT Association, she is a former dancer and choreographer both in the United States and Italy. Co-founder of the Association of Movimento Creativo. She lives and works in Rome, Italy.
ARTICLE- “DANCE IS A RADICAL ACT”

Author: Kimerer LaMothe
Published: Psychology Today Online

This interesting article begins:

To dance is a radical act. To think about dance, to study dance, or to practice dance in this 21st century is a radical act.

Why?
Because if dancing matters—if dancing makes a difference to how we humans think and feel and act-then dancing challenges the values that fund modern western cultures.

To read this two part article, go to: http://www.psychologytoday.com/blog/what-body-knows/201111/dance-is-radical-act

FILM REVIEW: “A DANGEROUS METHOD”

Reviewer: Ilene Serlin

Previous issues of the Psychotherapy and the Arts newsletters can now be found at the APA website http://www.apadivisions.org/division-32/sigs/index.aspx (click on Psychotherapy and the Arts SIG)