



UNITED STATES
PBSP
ASSOCIATION

The official
newsletter
of the
USPBSPA



President's Message

I'm aware that it has been a while since we have sent out a newsletter. This reflects a reduction in our activities in this COVID era. However, we have not been dead. Ongoing training programs have kept going via Zoom.

Currently there are two training programs: our cohort (as I like to call it) program based in the southeast USA and a modular (as I like to call it) training program in San Diego, CA.

By cohort training I mean a program where a group – a cohort – of people agree to train together over a 3-year program. Once such a program is started, it's designed to be a closed group where new members cannot join. The cohort program has been meeting for almost 2 years now.

By a modular training program, I mean training sessions where each session is a stand-alone session and is not a closed group. In fact, in the San Diego modular program, which has been meeting three times a year for 3-day training sessions for about 3 years now. During that time there has been a core group that has attended all the weekends, while new people come and go.

Both programs have switched to a Zoom format. Gloriously, both programs had live weekend training session this past fall. Although, with the new Omicron variant, both programs have canceled upcoming live meetings.

In addition to these activities, the Board of Directors have been meeting, via Zoom 4 times a year and the Training and Education Committee has been meeting monthly.

As you will see by the list of announcements that follow, there have indeed been signs of life in the PBSP movement in the USA and the world.

I'm personally beginning to believe that sometime, in the near future, we will be moving from a "just surviving" mode to a thriving movement.

Here's a poem I thought would be appropriate for the new year that I thought was very compatible with a PBSP, embodied spirituality.

The worst thing we ever did
was put God in the sky
out of reach pulling the divinity
from the leaf,
sifting out the holy from our bones,
insisting God isn't bursting dazzlement
through everything we've made
a hard commitment to see as ordinary,
stripping the sacred from everywhere
to put in a cloud man elsewhere,
prying closeness from your heart.

The worst thing we ever did
was take the dance and the song
out of prayer
made it sit up straight
and cross its legs
removed it of rejoicing
wiped clean its hip sway,
its questions,
its ecstatic yowl,
its tears.

The worst thing we ever did is pretend
God isn't the easiest thing
in this Universe
available to every soul
in every breath.

~Chelan Harkin

Happy New Year to you!

Jim Amundsen



Congratulations Maya!

The Membership committee is pleased to announce that Maya Heffernan, Licensed Marriage and Family Therapist of San Diego, CA, is our newest member to attain Certification as a PBSP psychotherapist!

Becoming a USPBSA Certified therapist has been a 9-year commitment for Maya. Having changed careers 9 years ago, returning to school for her Master's degree, licensing as a MFT and training for years in PBSP.

Certification as a PBSP psychotherapist represents years of dedication towards training and personal growth and the entire worldwide PBSP community congratulates Maya for her accomplishment!



Michael Kenyor Scholarship Fund

Thanks to a very generous donation by Michael Kenyor, of Austin, TX (pictured here with Aimee Pearson), we now have in place a scholarship program for psychotherapists and student psychotherapists (those who are in graduate programs in psychotherapy, e.g., psychology and social work programs) that wish to receive PBSP training but cannot afford to do so.

To apply, contact Matt Fried, PhD (MattF@aol.com).

Our thanks go out to Michael!

Good Question

During COVID lockdown, PBSP training continued via Zoom. From time-to-time participants of these programs have asked follow-up questions via email. Below is one such question posed to Jim Amundsen.

Question: What is the appropriate thing to do when a client isn't presenting an opportunity to tie things back to an ideal? Do you ask any leading questions or...?

Jim Amundsen's answer:

With clinical/practical questions like this I always prefer to have the actual situation because there can be a lot of nuances. This frames my first general response to the question: It is always a good idea to give priority to maintain an "empathic resonance" with the clients we're working with. That is, to give responses that communicate to the client that you understand them, which means not to get into any power struggles about what a client should do. But,

moving on to more specifics, the client taking in the experience of "what it would have been like" to have an ideal figure in their history is the goal of a structure. This goal is something similar to learning a complex skill, like a tennis serve, learning to play a difficult classical music piece, learning to drive, and so on. Complex goals are achieved in increments. Therefore, someone not fully taking in an ideal in a structure should not be viewed as a failure but part of an ongoing process.

Second, not taking in an ideal figure would be categorized generally as resistance. Resistance in psychotherapy is a huge topic but I'll attempt to summarize my point of view. The most "garden variety" of resistance is related to holes in roles. The person, unconsciously, in their childhood development, has taken on a "job" of taking care of someone who seems unable to take care of themselves. I have to say that an important factor is around the themes that Al Pesso called, "input and output." Children have massive input needs. They are sponges waiting to take in everything they need to learn to develop into functioning adults. When children in either fantasy, or in reality, unconsciously take on the role of taking care of someone, they are kind of "stuck" in the output mode. Think of the mouth. The mouth is both an organ of input and output. We breathe in and we breathe out. We can't do both output and input at the same time. If a developing child is living in an unconscious fantasy that it's their job to take care of someone, they are stuck in an output mode and can't possibly take anything in. Al Pesso describes holes and holes as, "Too much going out too soon."

So, when someone is resistant to taking in ideal figures, in general, the first move is look for themes in their narrative where it's their responsibility to take care of someone, where there is something basic missing in the other person's life. Al, in his last paper on holes in roles, gives the example of a little girl having a birthday party and the mother, rather than joining in with the pleasure and fun that the little girl is feeling, says, "Your turning 4 reminds me when I was 4 and my father died." The girl is then thrust into an output mode - motivated by her compassion for her mother - - and away from the more developmentally phase appropriate mode of taking in from her mother. When such interactions go unnoticed and uncorrected, the child's ego remains in the output mode.

All this becomes, for the adult in psychotherapy, a source of resistance for taking in what she needs. The person feels an omnipotent need to take-care-of. It's as if, they think (they certainly feel this), "If I pause to take care of myself, I'll be hurting people whom I'm responsible for taking care of."

When we offer the client a "movie" of the person in need getting what they need, it's as if, they finally feel the freedom to be "off duty" and free to take in what they need.

There are other causes of resistance, which I don't have the energy to go into here, which can also interact with holes in roles issues.

Since we'll be covering the whole topic of holes in roles in future sessions, I've attached the article by AI that I mentioned and my paper on holes in roles that I presented at the last international conference. (Both of those articles are available for download under the "Resources" tab of our website.)

Good question!

US PBSP events & training



Gus Kaufman will be leading a (at this point) live experiential workshop

March 11 – 13, 2022

Denver, CO

Please refer to our [Events](#) page for full details on all our upcoming events and training programs.



PSBSP around the world

Under the initiative and leadership of Tasmin Pessa, a group of international PBSP trainers have gathered to generate a list of reading materials, like, articles by Al Pessa, proceedings articles and any materials Trainers find themselves recommending over and over. The goal is to identify these resources and to make them readily available.

The Psychomotor Institute, under the leadership of Tasmin Pessa, is happy to announce plans to host three Zoom presentations for PBSP trainers (this maybe expanded in the future) on topics of interest in 2022. The first event February 26, will be a presentation by Gus Kaufman on the topic of, PBSP, gender, and sexual orientation – new developments, especially around ideal parents. It will be 30 to 45 minutes of presentation, possibly including experiential exercises, followed by 30 to 40 minutes of discussion.

Michael Bachg, of Germany, will present in May on, “Feeling seen,” which brings PBSP to work with children, adolescents and their families. Anoud van Buuren, of the Netherlands, will share in September on, “Polyvagal theory and PBSP,” drawing on the work of Stephen Porges and Deb Dana. Future presentations are being developed.

We welcome event announcements and news from our colleagues worldwide. Please email us at uspbspa@gmail.com with your enquiries and entry submissions.

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