

Empowering relationships...



APRIL 2020

The Redwood Empire Therapist

OUR APRIL MEETING

RECAMFT REGRETS THE CANCELLATION OF OUR APRIL MEETING

We stand in solidarity with our community in the struggle to protect ourselves from the coronavirus COVID-19. If you have been following conversations on the Listserv, you know that your colleagues are researching how to continue working with our clients without exposing



us or them to the virus. Fellow therapists have been sharing ideas, how to find and submit an attestation about doing teletherapy sessions with

Partnership clients, how to deal with clients that object to suspending face-to-face sessions, which virtual servers work well and what the costs are like, how to get payment, and lots more. Just like so many around us right now, our colleagues are sharing information and support with great generosity. (If you wish to join the Listserv, it is easy. Log in to the RECAMFT website at recamft.org, click on the heading at the top Members Only and scroll down the page to the big red @ and learn how to get on the Listserv.)

I have just tonight learned that I am one of those required to isolate myself. I am looking around at who could be over 65 here and realize I am! By 10 years! That just can't be right! I don't feel old but must do as asked so now I will be asking my clients to do teletherapy sessions until the danger has abated. We just have to beat this thing. We will be staying in touch with you so stay in touch with us. We all need to pull together.

Gail Van Buuren, LMFT
Editor

April 3rd, 2020 – RECAMFT Meeting

**The Changing World of Insurance: What Every Therapist
Should Know**

Barbara Griswold, LMFT

**HAS BEEN CANCELLED
DUE TO COVID 19**

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***IF THE PARKING LOT IS FULL, YOU WILL FIND LOCAL LONG TERM
PARKING ON THE STREETS ON THE SOUTH SIDE OF PACIFIC AVENUE.***

May 1, 2020

**The Hidden Epidemic of Shame
Identifying and Treating Chronic Shame**

Kristine Jensen, LCSW

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Save Time – Pre-Register at www.recamft.org**

MEETINGS ARE OPEN TO ALL ~ NON-MEMBERS FREE (\$15 FOR CEUS)

RECAMFT is now accepting applications for our monthly trainings for 2020-2021. You can complete an application by visiting our website and clicking the news and events tab on the top of the page.

What Else is in Here This Month?
Check It Out

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President’s Message
Tara D’Orazio , LMFT



***Self-Care in a Whole
New World***

Self-care has usually seemed so clear to me: take breaks, move your body, sleep, breathe, set boundaries. But this month we woke up in a totally different world, and I don’t have the same clarity. As my practice bears the stretch marks of too rapidly changing form (from my sweet little office to a laptop webcam) I feel the whiplash of all the new decisions to face.

We’ve all had to make the decision of when and if to work from home, if we have that **privilege**. The first shock came in the early days of making that decision. Choosing self-care and following my beliefs about the right course of action for our community had never before felt like being in opposition with a client. I struggled with feeling selfish and insecure that I could lose credibility with my clients if they disagreed with my decision. If I acted ‘too soon’ was I over-reacting? If I acted ‘too late’ was I irresponsible? Could anyone really make that determination but me? It helped to recall some assertiveness wisdom: **you have the right to judge your own behavior**, thoughts, and emotions, and to take

the responsibility for their initiation and consequences upon yourself.

Switching to a distance counseling format is fairly straight forward, technologically, if you have a laptop or the right phone app. I do not come to this digital format naturally though I can navigate it well enough. Not all our colleagues or clients will be able to make the switch for many reasons: lack of privacy, internet connection, technology, ability. Considering alternative ways to meet the needs of my clients for whom teletherapy isn’t an option while practicing self-distancing has led to some pretty creative problem solving.

Emotionally switching to the new format hasn’t been as easy. I already feel the grief of missing the closeness of our shared space and giving comfort through a cup of steaming tea. We are leaving the familiar behind and trudging into new territory under great pressure and at great speed. This is where my own anxiety and stress threatens to overwhelm my system, and where I most need to practice self-care. I take a break, I stretch, refill my lungs, refocus.

We are all facing messy, fast-paced decisions. I choose to remember that when **facing uncertainty**, it helps to accept what I cannot control. I cannot control how a client reacts to my decisions, I can only make them with

compassion and consideration. I cannot control how long this crisis will continue, I can only keep informed and promise to get back to the office as soon as it's safe. I cannot control the grief of the loss of our shared familiar space, I can only make this new format as comfortable as possible and make space for our temporary loss.

So, even in this new world, self-care is still: **take breaks, move your body, sleep, breathe, set boundaries**, and be kind.

To yourself and to others. **Be Kind.**

Tara D'Orazio has a private practice in Santa Rosa and can be reached at 707-992-5008 or Tara@AthenaCounseling.com

JOIN RECAMFTS LISTSERV

It's easy. Just send your email request to join the RECAMFT listserv to:

therapy@recamft.org

Once your RECAMFT membership is confirmed address emails to the group to recamft@groups.io

PLEASE VISIT RECAMFT'S WEBSITE

www.recamft.org

FOR INFORMATION ABOUT UPCOMING PRESENTATIONS/MEETINGS AND REGISTER FOR THEM AHEAD OF TIME

THERE IS LOTS OF HELPFUL INFORMATION AND ALSO VIDEOS OF OUR PRESENTERS YOU CAN WATCH AS A MEMBER. THERE ARE DOWNLOADS FOR MAKING A PROFESSIONAL WILL AND MORE.

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SOCIAL TIME BEFORE START OF MEETING

What You Missed

By Michael Krikorian

We had a very interesting and stimulating presentation today on an exciting development in the field of psychotherapy. In a presentation titled “Psychedelic-Assisted Psychotherapy,” Jim Matto-Shepard, Ph.D., and Christina Ingenito, LCSW, gave a framework for understanding the use and healing mechanism of psychedelics as a therapeutic agent in psychotherapy as well as a testimonial on how life-changing this type of therapy can be. Both presenters have graduated from the CIIS Certificate in Psychedelic Therapies and Research Program and are part of TEMENOS Center for Integrative Psychotherapy in Petaluma. The Center specializes in use of ketamine as a psychotherapeutic agent.

Christina opened up with a dramatic presentation of her life story starting with growing up and moving into adulthood feeling very happy with her life. This suddenly and dramatically changed first with the leaving of her beloved partner that was followed by the discovery that she had cancer. After going through the horrors of cancer treatment, she finally got evaluated as cancer-free. Christina did not feel healed, though, as she found herself continuing to struggle with despair and depression which was a great shock after how she had known herself to be for so many years. She finally joined a support group and met a woman who reported being “cured” of her depression by going through MDMA treatment. Curious, Christina enrolled in a MDMA research study in Marin County. She went through 3 treatment sessions with the use of MDMA. Christina states that while on the MDMA, she had profound feelings of “everything is OK.” She reports that “I had effortless access to the vastness (of the universe).....there is no separation....compassion ignites in me for everyone, no exception.....I rest beyond cancer, and George (lost love)...I feel again life’s pure, exquisite beauty.” As a result of these experiences, Christina said, “I’m here to tell you I am cured.”



In explaining how psychedelics work, Jim noted that while there are a variety of psychedelics and each has its own particular “signature,” they all loosen the boundaries “between parts of ourselves, between me and you, and between ourselves and what is bigger than us.” It is believed that the medicine loosens our default network of how we normally experience ourselves and the world. This loosening may let “something more natural” come through within us and we re-align our sense of ourselves and how we experience the world. The result can be a significant transformation.



TWICE THE USUAL ATTENDANCE

Using these medicines therapeutically means following certain procedures to assure safety and increase the therapeutic benefit. The TENEMOS team use “scaffolding,” meaning they prepare the clients to have the optimal mind set, prepare the setting, choose the type and amount of medicine (only ketamine is used at TENEMOS), and have post-treatment sessions to help integrate the experiences that the client had.



JIM & CHRISTINE SHARE A LAUGH WITH PATRICK ARMSTRONG, PROGRAMS

Jim explained that ketamine and cannabis are the only currently legal psychedelics available for therapeutic use in the U.S. There do exist research trials with other psychedelics such as psilocybin. Jim said that ketamine was originally developed as a dissociative anesthetic in the 60’s. It had the advantage of not depressing the respiratory system like other anesthetics. It was observed that some patients reported being released

from long-standing depression following its use. Research was done and it was found that 70% of people doing a regimen of 6 infusions over 2 weeks got relief from treatment-resistant depression. Now it is thought to be highly effective for depression, anxiety, PTSD, suicidality and end-of-life existential angst.

Thank you, Christina and Jim, for a first-hand look into this exciting new development in our search for how to help people heal from psychological difficulties. More information on Jim and Christina and their work can be found at www.TENEMOS.center

Michael Krikorian, MFT, brings over 40 years of clinical experience to his practice of working with individuals and couples in Santa Rosa. For more information, go to www.krikorianmft.com

CAMFT'S CHAPTER LEADER AWARD GIVEN TO ANNETTE SEIBEL

Annette Seibel has been serving on RECAMFT'S Board of Directors for over 5 years now. She is one of those people who serves for the sheer pleasure of giving. She does not expect lots of recognition or praise she simply enjoys supporting her colleagues and the Profession. Annette is co-chair of our Conference Committee and this is one of the most important committees we have. Every year Conferences produces a Law and Ethics Conference which is always attended by 150+ clinicians. Everyone raves about the high quality of RECAMFT's L&E Conference. As if that were not enough, Conferences produces a second, high quality, and equally well attended, conference every other year. This past year, in 2019, we had Ben Caldwell speak about Suicide Prevention, helping almost 200 local therapists fulfill this important new BBS requirement. When I refer to the Conferences Committee, I am giving the optimistic impression that we have a full committee. Actually the 2 co-chairs form the committee and they recruit volunteers for the events. Annette has been the consistent chair on this committee for over 5 years, and we at RECAMFT are deeply grateful for her dedicated and excellent service to our members.



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A few gifts from the coronavirus:

1) I never really “got” hygiene before. I knew that we were supposed to wash hands after using the bathroom and wash food before eating it, etc, but it was just connected to some vague social propriety and I often skipped the washing food part. This current experience has started to cement the understanding that there are germs everywhere and I get sick because I’m not taking precautions for those germs entering my body. Bonus: I like washing my hands now, it doesn’t feel like a chore.

2) I’m being reminded to think in terms of systems. Again, being pulled out of the abstract into something concrete has helped me understand the abstract better. I think of the privilege of being able to stock up on supplies when others can’t, being able to stay home from work or work from home when others can’t. I think about who is most vulnerable, immuno-compromised makes sense viscerally now, being stuck unable to flee because of poverty, incarceration, disability, homelessness. Understanding how a germ spreads and hits populations differently is helping me see how the system effects all of us differently.

3) I found the push to finally cook at home and for the first time in forever I’m enjoying the feeling of a full pantry and making decisions about what to eat from what I’ve got stored. A major shift from an empty fridge and pantry stocked only with take out containers.

4) This situation has really stretched my creative problem-solving capabilities.

5) With every challenge I am learning another lesson in empathy. For example, it strikes me that this may be a good experience of empathizing with chronic illness in the aspect of being limited in ability to plan ahead for the uncertainty of one’s health.

Tara D’Orazio, LMFT



THE PSYCHOLOGY OF RETAINING AND RELEASING

Don Scully, LMFT

Between the approximate ages of 18 months and three years we learn voluntary sphincter muscle control, the retaining and releasing functions of the body. These donut shaped muscles surround the body’s tubes such as the bowels, urinary tract, throat and others. They range in size from minuscule to large, including two near the anus and one surrounding the urethra. These larger ones give us the option of releasing or shutting off the elimination of waste. They also play a major role in our sexual pleasure. More importantly, they are one of our earliest introductions to social adaptation, functions we learn to control so that our parents will be proud of us and not be embarrassed by soiling our pants. It is hoped that as we grow our own self-interest will replace parental approval as a motivator to bring that kind of order to our lives.

With sphincter control we learn to retain or release at the proper time. When we potty train our young children we put them on the potty and encourage them to release. The child eventually gets the message that he or she is supposed to release something in this container. If they do release something they are usually praised or rewarded for complying, “good boy, good girl, mommy or daddy is so proud of you.”

However, if they strain and struggle to do what will bring the parental approval but the potty is empty and moments later fill or wet their training pants we begin to wonder if that is the beginning of defiance. It only becomes a concern when it is a chronic pattern and not an isolated incident. So the early patterns of defiance and compliance, retaining and releasing are set by the sphincters.

I wet the bed until I was seven years old. I puzzled over this for years until I realized while my mother was wonderful in many ways she also created fear. So I lay in my bed most nights filled with anxiety. It may have been my way of trying to say, “Mother, you scare me!”

Our obsession with sphincters is reflected in our language, especially swear words. Think of the many words that have to do with these particular muscles and areas of our bodies. Many are four-letter words that express delight or anger and frustration. Most of these

have to do with sphincter muscles, orgasmic, sexual or elimination functions of our bodies.

It is not healthy for us to hold unexpressed anger. I have recommended to a few patients that they find a few acceptable swear words which might relieve some of their pent up frustrations. Much better than hitting someone or breaking things or hurting oneself. So in addition to our sexual-pleasure-seeking behaviors it is our swearing that tells me we have an obsession with our sphincters.

Let us now discuss the implications of the genital and anal region sphincters as they relate to our sense of mortality and immortality. I have playfully but somewhat seriously divided the genital and anal regions of the body into “immortal” and “mortal” sides. The genital side is where we experience a sense of immortality in our sensual arousals and the place we create new life. It is through our children that we experience a sense of our genes continuing into the future. One of my sons has fathered three beautiful girls. While my surname will not go with them my genes will. The gene relay team carries my strain of DNA into my branch of the human race through the ages just as mine trace back to one of The Seven Daughters of Eve, (Sykes)

We also feel a sense of immortality when we are with a meaningful lover where we trigger a soulful arousal in each other, male erection and female lubrication. Orgasm is perhaps the most delightful experience of the natural body. When these special muscles spasm we feel ecstasy. Many health benefits accrue from orgasm including into old age. Older folks are delighted to learn that women over the age of 80 have the most satisfying orgasms.

We clean our mortal side, urinary and anal regions, to keep the odors at bay. We spray air fresheners in the bathroom after passing gas or a bowel movement to cover our mortality. In his book, The Denial of Death, Ernest Becker states that we would like to think of ourselves as immortal, as gods, but we shit and the odor reminds us that we are, after all, mortal. So it is the anal sphincters that primarily hold the mortal message and the genital sphincters that primarily hold the immortal message.

As a therapist, I treated a man who felt he masturbated excessively because his wife said so. It appeared to me that he was an anxious person and orgasm was his way of relieving his inner pent-up tension. His partner said he

was a good husband, lover and father. For centuries in western culture masturbation was considered taboo. In the 1700s the Swiss physician, Tissot, did sexual research in prisons and mental hospitals which were the only places he could do such research. He concluded, therefore, that masturbation would lead to deformed character or mental illness. His booklet on the subject influenced cultures around the world. It wasn't until the mid 1900s when research changed that perspective. We now know that masturbation causes no harm in any way when done safely. My patient's wife may have held to the earlier view of the dangers of self-pleasure.

In conclusion, I believe our obsession with sphincters is universal both in our exclamatory expressions and our sexual pleasure seeking behavior. Occasional swearing and safe sexual pleasure seem to contribute to a healthier life with reduced tension.

Don Scully, LMFT, copyright 2020

SCHEDULE OF UPCOMING RECAMFT PRESENTERS

(See recamft.org for details and to pre-register)

May 1, 2020 11:00 – 1:00

**The Hidden Epidemic of Shame: Identifying and
Treating Chronic Shame
Kristine Jensen, LCSW presenting**

June 5, 2020 11:00 – 1:00

**Winnocott Gone Viral? A Look at Early
Relationships through Viral Videos
Orit Weksher, LMFT presenting**

1st and 3rd Saturdays 10:00 – 12:00

**Pre-licensed Walk & Talks in Sebastopol
See website for details**

**Of course, given the situation we find ourselves in
with Covid-19, this is what we hope to be able to
present and these are the times we hope we will
be able to gather together as colleagues once
again. Until that day take care of yourselves and of
each other as best you can.**

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