

GPSCH HypNews

Newsletter of The Greater Philadelphia Society of Clinical Hypnosis
Volume 20 Number 2-3 Spring-Summer 2024

Happy Birthday GPSCH HypNews

With the publication of this issue, *GPSCH HypNews* is 20 years old. The Winter issue did not print due to illness. Unbelievable! Twenty years have zipped by in the blink of an eye. And at the same time, 2004 seems like 100 years ago. Can you remember what you were doing in 2004? Or something significant about that year or the intervening years? As with all birthdays, this is a time for celebration and remembrance. A focus on the present-future and honoring the past. A newsletter reflects the mission and activities of its member organization. Founded in 1959, GPSCH has remained steadfast in providing the healthcare community with the highest level professional training and continuing professional education approved by the American Psychological Association and the American Society of Clinical Hypnosis. GPSCH workshop presenters have come from different places in the world and have shared the common element of being masterful teachers and wonderful human beings.

GPSCH HypNews has had the pleasure of reporting the activities of this Society and its members as well as offering observations and viewpoints *For Your Consideration* via the editor's column. This issue's *From the Editor* started out as a brief television commercial critique but grew into something longer and personal. I appreciate your indulging my indulgence, the catharsis of one man's experience and patient perspective.

GPSCH has established through its membership and workshop presenters a professional healthcare community dedicated to increasing the knowledge and skills of its members and workshop attendees to improve the health and welfare of their patients. We have come to know these professionals as significant contributors to who we are as a person and practitioner.

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Lest we forget, the following is a list of GPSCH members and workshop presenters/friends of GPSCH and their year of death, respectively. May they Rest in Peace and their names and spirit live forever. Apologies to any individual's name inadvertently omitted.

Mary "Brenda" Byrne, PhD Past President - 2023
Peter B. Bloom, MD Life Member - 2023
Alan W. Schefflin, Esq. - 2023
Max Shapiro, PhD - 2023
Daniel P. Brown, PhD, ABPH - 2022
Maggie Phillips, PhD - 2021
Dabney M. Ewin, MD - 2020
Claire C. Frederick, MD - 2015
Clorinda G. "Coco" Margolis, PhD Past President - 2011
Louis L. Dubin, DDS, PhD Past President - 2002
Peter C. Toren, MD Life Member - 2001

We have each had our unique experience with them, taken what they gave of themselves and carry it forward. That is their legacy and our responsibility. To give to others. For it is a gift twofold returned. *When you are good to others, you are best to yourself.*

We may honor the past, celebrate today and anticipate the opportunities of tomorrows. The past 20 years have been quite significant and memorable. Who knows what the next 20 years may bring as well as what we may bring to them? In the meantime, let us celebrate today our 20 years together. In the words of cartoonist Larsen with a Philadelphia regional dialect: *Yo, Hippo Birdie, Two Ewes. Cheers.*

Stephen
Stephen G. Glass, ED.M.
Founding Editor, *GPSCH HypNews*

MEMBER NEWS

Welcome New Members

Congratulations to Karen Clark-Schock, PsyD who had her ***lovely original paintings showcased and celebrated*** at the art show at Easttown Library, Chester County, PA.

Congratulations to Julie H. Linden, PhD who has ***published as primary co-editor, The Routledge International Handbook of Clinical Hypnosis.***

Invite a Colleague to Be a Member

See your/your colleague's name listed here.

Congratulations to you, ***GPSCH Members*** for being GPSCH Members his section is for you. Let us know what you are doing or have written presented, taught, or if you have been honored in some way. Share the good news! Please submit Member News and other items of interest for "You've Got Mail" as well as Letters to the Editor to Stephen.Glass@crozer.org.

GPSCH Membership and GPSCH Webinar CE Benefits

Become a GPSCH Member and benefit from the Society's camaraderie and stellar webinar presenters. ***Obtain BOTH APA AND ASCH CEs when attending one webinar.*** Attend all GPSCH webinars for two consecutive years and ***PA psychologists satisfy BOTH substantive CE requirements for licensure renewal (plus ethics, child abuse, suicidality) AND satisfy ASCH Certified Practitioner and Approved Consultant renewals at the same time.*** Other license holders should contact their respective state boards for acceptance of APA CEs via GPSCH webinars. ***GPSCH Membership and Webinars are the best deals in town!***

"YOU'VE GOT MAIL"

OCT 23-27, 2024. SCEH - 75th Annual Workshops and Scientific Program.
Anaheim, CA. For more info: www.sceh.us.

FEB 23-25, 2025. ASCH - 66th Annual Scientific Meetings and Workshops.
Virtual. For more info : www.asch.net

GPSCH Membership Dues and GPSCH Webinar Fees

Reduced webinar registration fees for GPSCH Members are a benefit of membership. ***GPSCH Membership Dues must be paid in advance of registering for webinars to be eligible for member discounted rate.*** Dues cover Society membership July 1 through June 30 and are payable upon receipt of dues notice.

** Please Note GPSCH Email Address: admin@gpsch.org **

GPSCH Board of Governors 2024-2026

Jeffrey E. Celebre, PhD - President
Stephen G. Glass, ED.M. - Chair, Bylaws Committee

Many solicitations for nominations to the Board and direct invitations were unsuccessful in obtaining members to fill vacancies on the Board of Governors. Jeff Celebre has graciously accepted an unprecedented 3rd consecutive term as President and Stephen Glass remains Chair, Bylaws Committee. Both serve on the Training Committee, responsible for maintaining the GPSCH Academic Calendar of training.

Please consider becoming active in governance of GPSCH. Contact GPSCH Administrative Director Suzanne Malik (Admin@gpsch.org) saying that you want more information about how to serve GPSCH as a member of the Board of Governors. As a Board Member, you will have the convenience of meeting via Zoom 5 times per year. You will have the satisfaction of selecting and meeting international hypnosis luminaries, arranging for them to provide GPSCH with academic presentations via webinars. *Become a Member-at-Large on the Board of Governors!*

The fact is, each year Jeff and Stephen become one year older and closer to retirement. Additional Board members are needed to keep GPSCH a viable Society. So, if you want to have GPSCH alive and well for many years to come, help make that happen - Contact Suzanne! *That is a direct suggestion. - SGG*

ACADEMIC CALENDAR

2024

SUN SEP 22 Dissociation & the Shame-Spectrum of Emotion: A
Webinar Useful Role for Self-Hypnosis as Antidote for Shame
10AM-1:00PM Richard A. Chefetz, MD

SUN NOV 10 Hypnosis & Zen Buddhism in the Treatment
Webinar of Pain & Suffering
10AM-1:00PM David R. Patterson, PhD, ABPP, ABPH

2025

SUN JAN 26 Activating Unconscious Intelligence: Using Hypnosis to
Webinar Activate Problem-Solving Abilities
10AM-1:00PM Dan Short, PhD

SUN MAR 16 Utilizing Hypnosis Relationally in the Treatment of
Webinar the Spectrum of Anxiety Disorders
10AM-1:00PM Douglas G. Flemons, PhD, LMFT

SUN APR 27
Webinar TBA
10AM-1:00PM

Academic Calendar listings originate in Eastern Time zone, USA & Canada

In-Person Meetings/GPSCH Workshops are held at
Roxborough Memorial Hospital
Virtual Workshops are held in the comfortable setting of your choice

For additional information, please contact GPSCH Administrative Director
Suzanne Malik at admin@gpsch.org or 301-830-1941.

FROM THE EDITOR - Stephen G. Glass, EDM

FOR YOUR CONSIDERATION

**"Ah, Ah, Ah, Ah. Stayin' Alive. Stayin' Alive."
Remembrance and Celebration**

During those hazy, hot, humid days of Philadelphia summers when I was a T-shirt and shorts boy, I occasionally took my lawn-mowing earned dollar and went to the local movie theater to enjoy an afternoon of film, popcorn and airconditioned cool, dry air. As I entered the theater, I was bathed with the refreshing cool air, enticed by the freshly made popcorn aroma, large assortment of candy and cool drinks. No doubt my eyes grew large with the darkness and visual delights. Upon leaving the theater, I recall blinking a lot, my eyes accommodating to the sun's bright light.

When I was 10 years old, I became ill and was confined to my bed for four months. I recall my mother advising me at an earlier age when I complained the rain prevented me from going outside and playing with my friends. She said, "Stephen, you've got to learn how to entertain yourself." *And that I did.* In addition to watching a lot of television movies and shows, I learned how to draw with pastels with Jon Gnagy, taught myself magic tricks and created one, solved puzzles and problems in *Busy Bee* and *Think-and-Do* workbooks, read the entire set of *The Hardy Boys* mysteries, *The Book of Knowledge*, *Encyclopedia Britannica*, *Webster's Universal Dictionary* and various classics from the family library. I listened to jazz, rock-and-roll and classical music. I learned how to be OK despite that solo confinement. *It was the best of times, it was the worst of times.* After being liberated from bed and spending two more months in the house, I was medically cleared to resume normal activities. I recall that long-awaited day in March when I went outside for the first time, to take a walk. It had snowed. The cold wind and deep snow were pleasantly antagonistic. It just felt good to experience the sensations. *I felt good experiencing the sensations.*

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I returned to school and playing schoolyard basketball daily as I did from age 8 through 22, then twice weekly until 31. My junior and senior high school days were enjoyably filled with as many activities as time would allow - school governance, clubs, sports, hospital volunteer work and watching movies. *Overcompensation or Newton's third law of equal and opposite force? Aside from being interested in the activities, attempting to demonstrate to self and others that I was capable?* In any case, without feeling compelled, I did a lot and enjoyed living fully, the performance and accomplishment. When I was 15, my father became seriously ill, out of work, then back to work half-time. My stay-at-home mother went out to work to defray household expenses. Then she developed cancer and died when I was 17. Later that year, my sister left home to live on her own. My father sold our family home, we moved into an apartment together and I started college.

As a college freshman, when my efforts at JV Baseball failed to produce an athletic scholarship, I went to work part-time to pay for school. At the university, I transferred from being an English major to Social Welfare/Psychology when I determined that I was mostly interested in character development, interpersonal relationships and why people do the things they do. I continued my Psychology studies in the Master's and Ph.D. programs. I received a Fellowship from Temple University School of Medicine to study and work with people having physical illness and disability. I suppose my early childhood experience with health issues and my parents' illness and death at an early age helped inform my ultimate career choice, becoming a psychologist.

Immediately after college graduation, I married a nice, young woman: a starter, kindergarten marriage. We were both too young: we separated and divorced after six years. I was working, going to graduate school, living a bachelor lifestyle and becoming a man as I began my career. With a small multidisciplinary group of Philadelphia healthcare professionals, we co-founded the Institute for the Seriously Ill and Dying. During this time, I graduated from the Three-Year Clinical School of Marriage and Family Therapy of the Family Institute of Philadelphia. I met a wonderful woman

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who also had married young and divorced after a brief marriage and had two young children. Marianna was a strikingly attractive multitalented woman with a quirky sense of humor. We all had fun growing up together. We raised the children until they left home for college. Then Marianna became acutely ill, survived and accommodated significant health challenges as she soldiered on for 16 years before her death, ending our 32 years together. Her motto was: *Look straight ahead and move forward*. I continued my career: hospital outpatient mental health service; university teaching; and independent psychology practice.

Flash forward. I have enjoyed many decades of reasonably good health and great satisfaction in love and work. Then suddenly one morning, I was unable to walk the half-block from my car to my office. No energy or muscle strength for locomotion. I was hospitalized where it was determined that I had severe anemia and acute kidney injury. Etiology unknown. My attending physician told me, "You were very sick; you were the only verbal patient in ICU Step-Down." In the blink of an eye, I went from driver to passenger, from health care provider to patient, from doer to being done unto, from being vertical to horizontal. After blood transfusions, medication and hemodialysis, my energy level increased as well as my mobility. I was grateful to be alive. As my condition improved, I transitioned from mere passive recipient of medical care to active participant in my treatment. I was discharged to home where I spent three months on medical leave. Without much energy or cognitive concentration, I watched a lot of TV. *A lot of TV*. Home alone with television; a cold comfort mixed bag of repetitive news, some entertainment and commercials - *Lots of commercials*.

During this time, I developed a close, endearing relationship with my bed. I probably watched all 466 episodes of the original *Law & Order* and binge-watched marathons of *Matlock* and *Murder She Wrote*. CNN and the Food Network. Reruns of old crime dramas and movies. It was regressive but accommodated my capacities and limitations. *Mostly limitations*. And like defense mechanisms, only partially satisfying. It was also reminiscent of childhood illness and vulnerability. A widower of 16 years, I live by myself. I

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always say, "Live by myself" distinguishing it from "I live alone." Generally, I am OK flying solo although I do wish my late wife, Mariana, were still alive and well. I enjoy working at my practice. I like to cook and love to eat. I enjoy getaways on the Connecticut coast: reunions with old friends; sweet salt air; and lotsa chowdah. I know how to live, not just survive. Now at home in Pennsylvania, I have television serving multiple functions. *But, oh, those ubiquitous, pesky TV commercials!*

There was the ridiculous *Limu Emu*, *infant* and other insurance company mascots, custom widow replacement, bathroom remodelers ("Are you embarrassed by your bathroom?") and loud, aggressive personal injury lawyers. And tons of people who lost hundreds of pounds on *GOLO* and other weight-loss programs as well as all those individuals who were eating well and exercising only to find out that *Shingles Doesn't Care*. Ads for bladder control products and inexpensive erectile dysfunction pills mailed to your home discretely in unmarked packaging. And that woman shaming us with her total body deodorant to prevent the continuation of foul odors from being emitted from our bodies' various nooks and crannies. "To smell better." Repetitive Mesothelioma lawsuit solicitations. And if you were in the military or a family member who lived or worked in Camp Lejeune between 1958 and 1973 and you want to know what dreadful diseases you may develop, just let me know, I'm your man. And all the cruelty suffered by those neglected, abused and starving animals and seriously ill children - Ugh. A mild offset for this grim state of affairs was *Kars 4 Kids*, *Only Daisy Cottage Cheese Will Do* and the ads for travel to Jamaica and Key West: *Close to Perfect, Far From Normal*. The ads for pharmaceuticals were everywhere all day and all night. Repetitive, synchronized to appear on other channels at the same time rendering only the TV remote's mute function effective in reducing incoming information. *All those medications, diseases, supplements and orthotics*. Things got so bad, I almost started dancing with the *Jardiance* lady. You know, the one with *the swell little pill with a big story to tell*. Also, there was the ever-present Jonathan Lawson, insurance professional and dedicated employee of *Colonial Penn* touting its *\$9.95 Plan*

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for life insurance. And of course, final arrangements may be made with *Trust & Will*. Not to worry that all this was depressogenic and felt like triggers for illness/feeling ill, there was plenty of *Vraylar* and other psychotropics available.

The television commercials' running themes include: *Foreboding* - accidents, injuries and illness are going to happen to all of us; *Instability/Inadequacy* - our houses need repairing/remodeling; *Helplessness/Hopelessness* - we are undesirably overweight and despite best efforts to be healthy, we will become painfully ill and lose control of bodily functions; *Shame* - we emit foul odors that should be eliminated and prevented; we treat animals and children cruelly; *Catastrophizing* - we all are about to contract a serious physical illness and die; *Inadequacy* - we need all sorts of orthotic devices, supplements and pharmaceuticals having adverse side effects worse than the disease they purport to treat. *And then you die.*

Six months later, I am still in shock, experiencing the aftershocks of illness, the patient role and treatment regimen. I surmise that it takes time "getting used to" the imposed life changes and effecting the necessary adjustments dealing with new life status and challenges. I am reminded that survivors of loved ones who died suddenly experience grief more severe and of longer duration than survivors of loved ones who had a chronic illness before death. So, adjusting to my new life circumstances may take the extended time within which to make the necessary changes. I am grateful to be alive and able to do the things I am doing. I have returned to work half-time. I am glad to have had full living lifestyle before all this happened and continue to do so to the extent that I can. What else is there to do? *I am a player, not a spectator.*

My recent health issues inspired and animated reminiscence and life review. I have worked with patients my entire career who are challenged with physical illness and disability as well as having mental health issues. I believe that my professional training, 52 years' experience of clinical psychology practice, empathy and compassion have helped me help them. However, I

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now have a fuller, deeper understanding and appreciation for their challenges, demands, strengths and adjustments necessary not just to survive, but to live a satisfying life, achieving amicable accommodations. My recent health issues remind me that I am humbly just a critter like a dog, a cat or a squirrel; a biological organism that is currently alive and subject to accident, illness, injury and eventual death. And at times, a two-legged chemistry experiment. *Look both ways before crossing.*

This is a time not just of remembrance, but for celebration of today and opportunities of tomorrows. *I have miles to go before I sleep.* My responsibility - and pleasure - is to live fully; learning to entertain myself while accommodating life's challenges. So, I say to you, "Be Well, Live Well." and *Gather ye rosebuds Blink.* - SGG



