

# Éisteach

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▼ **The Provision of Prescription Privileges  
for Psychotherapists: An Ethical and  
Legal Dilemma**

Francis McGivern

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▼ **Happiness – hype or helpful?**

Patricia Allen-Garrett

The logo for the Irish Association for Counselling and Psychotherapy (iacp). It features a stylized white '@' symbol followed by the lowercase letters 'iacp' in a bold, sans-serif font.

*Irish Association for Counselling and Psychotherapy*

Welcome to this Autumn edition of Éisteach. I hope the articles you read will be stimulating and informative. Whilst there is no subject theme running throughout the edition, one does encounter the recurring themes that appear again and again in counselling and psychotherapy: the resilience and fragility of the human condition; the continuing quest for understanding the emotional, pathological and neurological human response to the world; the ethical issues that arise when vulnerable people are put in our care and how the therapeutic relationship with its interdependent dynamic realises a potential that is a powerful healing force.

Francis McGivern makes an urgent call for members of the IACP to acquaint themselves with the ethical and legal ramifications surrounding who does and does not have prescriptive authority in prescribing psychotropic medication, in order that clients may receive optimum care at all stages of their treatment. This issue has already raised its head in the USA and UK and will no doubt raise its head in Ireland in the near future.

The Tai Lung Journey by Mike Hackett from the Hollywood movie - Kung Fu Panda; Embracing 'evil' - the development of compassion and empathy using a reflective approach to a movie therapy session - highlights how story and image can challenge us to acknowledge the 'shadow' in our lives and recognise the triggers at play in the safe environment of the Disney movie. He also poses the question does the triumph of good over evil fossilise this idea to the extent that we become caricatures of our fate.

Peter Labanyi contemplates death and I am reminded of the late Nuala O'Faolainn whose wonderful interview with Marian Finucane brings Peter's quotation by Emily Dickinson to life: 'Because I would not stop for death / he kindly stopped for me.'

It seems we are a cynical bunch when it comes to discussing Happiness - hype or helpful? Patricia Allen-Garrett provides a framework to explore the issue as a way of strengthening our resilience to life experiences, whereby our experiences of attachment and our innate need for connection at a neurological level may be why we seek it in the wrong ways through addiction, self-medication, over-eating, under-eating or chasing love.

As always we have our workshop report, the therapist dilemma and Editor's letters in which we would like to encourage you to take part in creating a dialogue between professionals, and introducing colour and texture to our chosen profession. As a final word, I would like to thank Mike Kelly who mentored me through this edition of Éisteach and who was very gracious with his time and experience.

*Eithne Doherty*

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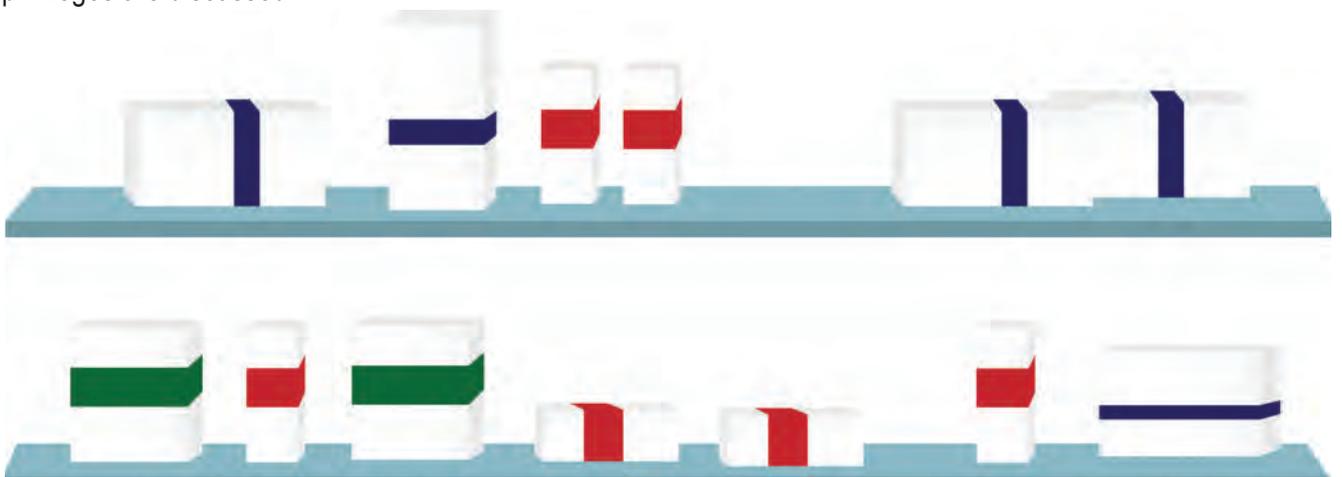
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# The Provision of Prescription Privileges for Psychotherapists: An Ethical and Legal Dilemma

By Francis McGivern

## Abstract

With the advent of greater influence from 'pharmaland' in the domain of psychotherapy, so too has the debate loomed over granting mental health practitioners the right to prescribe psychoactive medication (Lavoie and Barone 2006). With the pharmacological industry occupying an increasingly larger stakehold in the mental health field, particularly over the past two decades or so, it is incumbent upon us as ethical psychotherapy practitioners to explore what direction we wish our profession to take, moving forward in the context of how and by whom prescribing of psychotropic medication is done. Ethical and legal arguments for and against gaining prescription privileges are discussed.



## Introduction

The so called ‘RxP’ movement is one that perhaps few psychotherapists in Ireland are familiar with as it has predominated in North America and in the UK. Furthermore, amongst the mental health profession (beyond the domain of psychiatry), this issue has, to date, permeated only as far as the profession of psychology, with the first fully-trained prescribing mental health practitioners being US Department of Defence psychologists, graduating in 1994. Legislation since then was passed in a number of States to grant limited prescription privileges whilst the legalisation of prescriptive authority still eludes other States to this day (Lavoie and Barone 2006).

The author makes an urgent call, however, to psychotherapy organisations who represent the profession in Ireland and, indeed, to psychotherapists themselves to reflect upon the future positioning of the profession in light of the rapidly burgeoning pharmacological industry. With both psychotherapists and psychotherapy service users having greater exposure to psychotropic medication on an increasingly regular basis, we need to explore the ethical and legal ramifications surrounding who *does* and *does not* possess prescriptive authority in order that clients receive optimum care at all stages. Below, a framework is proposed for conceptualising ethical conduct within psychotherapy and one that could prove useful in managing the dilemma of whether or not to extend prescriptive authority to encompass our own profession.

## Ethical/Moral Responsibility

Whilst there is no real clear distinction between the terms *ethics* and *morals*, it is argued that “*the main difference in common usage would be perhaps that morals are usually seen as the system adopted by an individual whereas ethics is the science of morality or of duty*” (Palmer-Barnes and Murrin 2001:1-2). Rowson (2001) offers two very different positions regarding the nature of ethics. The first, the *teleological* position (from the Greek word *telos* meaning ‘end’) relates to ultimately achieving the optimum benefit or the best consequence for all concerned. Unlike the teleological view, the *deontological* position (from the Greek word *deon* meaning ‘duty’) concerns itself more with the virtue of actions one takes rather than the end result, positing that certain actions are intrinsically good whilst others are intrinsically bad.

The author champions a third view, the *ethical pluralist* position which holds to both and reflects the complex nature of resolving ethical dilemmas, none more complex than the issue of providing prescriptive authority to psychotherapists. By adopting an ethical pluralist approach, we, as practitioners, can strive to achieve “*optimum standards of conduct*” (Corey 2001:45) known as *aspirational ethics* rather than merely operate standards within minimal parameters. Thus, whilst the issue of prescriptive privileges for the psychotherapy profession in Ireland appears currently to be a non-entity, it is vital that the profession be proactive and find its voice on this issue sooner rather than

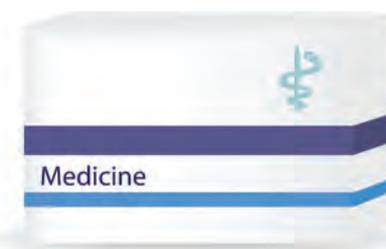
later, rather than find themselves reacting to a rapidly changing landscape within mental health service delivery, that sees them become less attractive an option for service provision. In fact, Robiner *et al.* (2002) suggest that the mental health landscape has been transforming subtly for at least the past ten years.

“*Advances in neuroscience, the development of safer, efficacious drugs such as SSRIs, and changing realities in health care economics are transforming the delivery of mental health services.*” Robiner *et al.* (2002:231)

***We need to explore the ethical and legal ramifications surrounding who does and does not possess prescriptive authority in order that clients receive optimum care at all stages.***

## Arguments in Favour of Granting Prescription Privileges

Devotees of the ‘RxP’ movement champion the view that granting of privileges to prescribe would have an almost immediate positive impact on mental health care services. This would be primarily due to their belief that the service as it stands is faltering due to increasingly limited access to psychiatrists and poor GP prescribing practices. A review of the literature, which is almost all



based within North America, would suggest that the US mental health system is underperforming with respect to lengthy and unacceptable waiting times to see psychiatrists (Lavoie and Barone 2006). Whilst General Practitioners are more immediately available to their patients, it is claimed that an alarming proportion of those seen by GPs are diagnosed inappropriately, and are subsequently either given a prescription unnecessarily or prescribed inappropriate medication (DeLeon and Wiggins 1996).

Research conducted over twenty years ago revealed that in women alone, depression was not only being misdiagnosed on thirty to fifty percent of occasions, but also their prescribed medication was later poorly monitored (McGrath *et al.* 1990). As the number of both diagnosable disorders and psychoactive medications have increased over the last two decades it is feasible to imagine that not much has improved and that this situation applies as much to Ireland and, indeed, the rest of Europe as it does to the US. Proponents of gaining prescriptive authority for psychotherapists might argue that appropriately trained, our profession would be in a better position to develop a longer-term relationship with clients and thereby, diagnose, prescribe, and monitor more efficaciously than GPs.

Those in favour of granting prescriptive privileges are responding also to the gradual shift that health services are taking towards brief interventions within managed care. Since cognitive behavioural and brief solution-focused therapies are being advocated within the public sector above more expensive longer-term approaches, mental health practitioners posit that the ability to prescribe would act as a coherent adjunct to these brief approaches (Freimuth 1996). If one also considers the currently challenging economic environment, it would prove more cost-effective for individuals to consult with a single care provider who can provide a more comprehensive psychotherapeutic and medical intervention rather than moving between professionals who may possess fundamentally different conceptualisations of mental health. Continuity of care is a contentious issue for many service users who are discontent at having follow-up appointments with *locum* GPs and psychiatrists who have very limited insight into their lived experience. Psychotherapists can offer a continuity of care which other service providers struggle to achieve.

Finally, reflecting upon the fact that there is a “powerful seductiveness about medications”, DeNelsky (1996: 207) concedes that gaining prescriptive privileges could mean shorter and less frequent sessions of psychotherapy, thereby being more cost-effective for the client but ironically more financially rewarding for psychotherapists. With the ever-growing demand by consumers of mental health care for more immediate symptom relief, psychotherapists with prescriptive privileges would be more available to meet this need.

***It is vital that the profession be proactive and find its voice on this issue sooner rather than later, rather than find themselves reacting to a rapidly changing landscape within mental health service delivery, that sees them become less attractive an option for service provision.***

### **Arguments Against Granting Prescription Privileges**

As much as there are numerous advocates that champion the granting of authority to prescribe psychoactive medication, there are as many, if not more, detractors. This is particularly evident amongst talking therapists themselves who have demonstrated a lack of consensus on this topic. This forms the basis of one of the most obvious arguments which is that pursuing prescription privileges would serve to alter the collaborative approach between therapist and client toward a more traditional medical-model (Gitlin 1990).

With the ever increasing influence from the pharmaceutical industry it is likely that psychotherapists would end up placing emphasis upon medical intervention as much as, if not more than, psychological intervention. Current literature is increasingly claiming that viewing mental illness as a disease requiring large-scale usage of psychoactive drugs is an illusion. Keith (2003) describes psychiatric diagnosis and prescription as the “*quantification illusion*” as it reduces the human being and all his complexities into a singularly measurable disorder of genes or chemistry. Were psychotherapists to be granted prescription rights it would serve to create another doctor-patient type dynamic in which ‘the professional’ is seen to provide a solution and the ‘patient’ experiences a

relief from ambiguity. Ultimately this would see psychotherapeutic skills being slowly eroded over time. This would go against the very ethos underpinning psychotherapy which supports agency remaining with the client, self empowerment, and working through difficult thoughts and feelings.

Many of those disavouring psychotherapists gaining privileges to prescribe believe that they are in effect, campaigning to safeguard against the very essence of psychotherapy itself from being eradicated. They conceptualise psychotherapy as an unquantifiable art form and, therefore, assert that introducing the power to prescribe would compromise many of the core conditions attributable to psychotherapy, conditions which the profession hold dear.

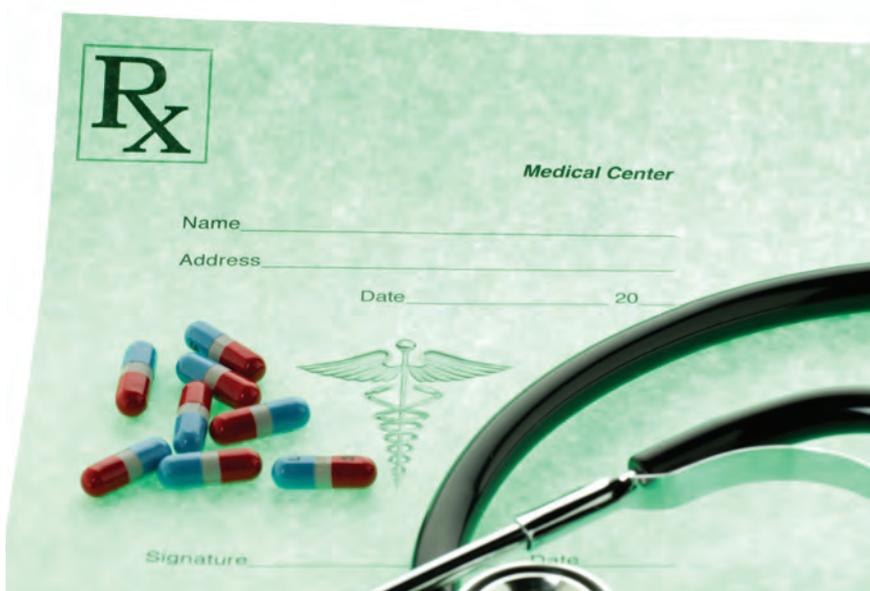
Advocates of the psychotherapy profession gaining prescriptive authority posit that with increasingly greater collaboration amongst health care professions, particularly within primary care settings, having prescriptive authority would open up a common language amongst

these professions ultimately benefiting all service users. However, despite the *apparent* evolution toward a multidisciplinary approach, in practice it still appears that only one route proliferates within this health care system, the biological approach. Regardless of our professional training, it would seem that we have all been conditioned to perceive the 'biological' as the definitive source of all our 'dis-eases' whether physiological or psychological. This creates a position in which multidisciplinary treatment looks 'as if' collaboration is taking place but in reality is being dominated by a single intervention which favours a biological basis for all ills (Prosky 2003). Sharfstein (2006) poignantly conceptualises this argument as the bio-psychosocial model having given way to the *bio-bio-bio* model. Thus, were we to gain prescriptive privileges would we be seduced by the ever

***If one also considers the currently challenging economic environment, it would prove more cost-effective for individuals to consult with a single care provider who can provide a more comprehensive psychotherapeutic and medical intervention...***

encroaching pharmaceutical empire; host regular meetings with medical representatives touting psychotropics; and ultimately be enveloped by the dominant biological discourse?

So how might psychotherapy with prescriptive authority manifest negatively within a therapy session? Freimuth (1996) describes the complexities surrounding the decision to recommend medication and suggests a number of scenarios in which a 'medical psychotherapist' might find themselves ethically compromised. A therapist who struggles to sit with intense feelings may be quicker to medicate a client experiencing prolonged grief or one who experiences anger outbursts and acts out this anger during psychotherapy sessions. If a psychotherapist was to assess progress for a client to be slow or lacking s/he, due to feelings of professional inadequacy, may be more easily drawn to medicating the client. On the other hand, a medical psychotherapist might be *less* prone to medicating during periods when, in fact, medication might be warranted, for example, chronic insomnia or anxiety, due to the therapist's unwillingness to acknowledge the limitations of psychotherapy or due to





***This would go against the very ethos underpinning psychotherapy which supports agency remaining with the client, self empowerment, and working through difficult thoughts and feelings.***

the therapist's strong desire to appear conservative in their prescribing practices. Finally, a psychotherapist might prescribe a course of psychoactive medication in response to either an unconscious or, indeed, conscious desire for the client to terminate counselling.

Of note when considering the ethical implications of gaining prescriptive authority is the responsibility related to becoming an independent prescriber. An important issue in this context, therefore, would be the legal and medical liability attached to prescribing for medically complex clients. For example, a client who takes daily medication for a heart condition; a client with Hepatitis C who is on antiviral medication; a teenage client who takes medication for acne; a client who has diabetes and/or high blood pressure and, indeed, the client who is on daily medication which was not mentioned at assessment.

Should these clients experience any adverse reactions as a result of contra-indications not being heeded by the prescribing therapist, s/he could ultimately be held liable. Thus, the ethical argument against therapists gaining privileges is that they would eventually be investing disproportionate amounts of time studying medicine rather than psychotherapy in order to minimise such occurrences.

### Conclusion

The ethical and legal debate surrounding the provision of prescriptive privileges to the psychotherapy profession is an intriguing yet difficult one to manage. Since it has multiple layers encompassing social, political, economic, and legal aspects, it is a debate that will require an *ethically pluralist* position in order to account for the complexities inherent in it. If we as a profession can remain client-centred as we have historically managed to do so,

then ethical principles such as beneficence, non-maleficence, autonomy, and competence will be maintained. However, it may prove inevitable that our profession falls victim to the allure of the ever encroaching body of research that suggests biological predispositions for mood and anxiety disorders (Hammond 2005) culminating in our conceding to clients that their locus of control lies externally to them in the form of a psychoactive drug. We must also temper this with acknowledgement of our client's agency in deciding whether to comply with a prescription. Clinical experience would suggest that clients can often feel ambivalent about medication and compliance can tend to be more *miss* than *hit*. In a field that has invested much effort in demonstrating validity in psychotherapeutic intervention, the author suggests that we continue to safeguard our 'heritage' but champion the introduction of limited

prescriptive authority for psychotherapists that would require collaboration between therapist, GP and client. This would enable a healthy collaborative decision regarding the requirement of medication *initially* to occur between psychotherapist and client, then devolving responsibility for signing off, monitoring, and liaising on medical aspects to GPs. 

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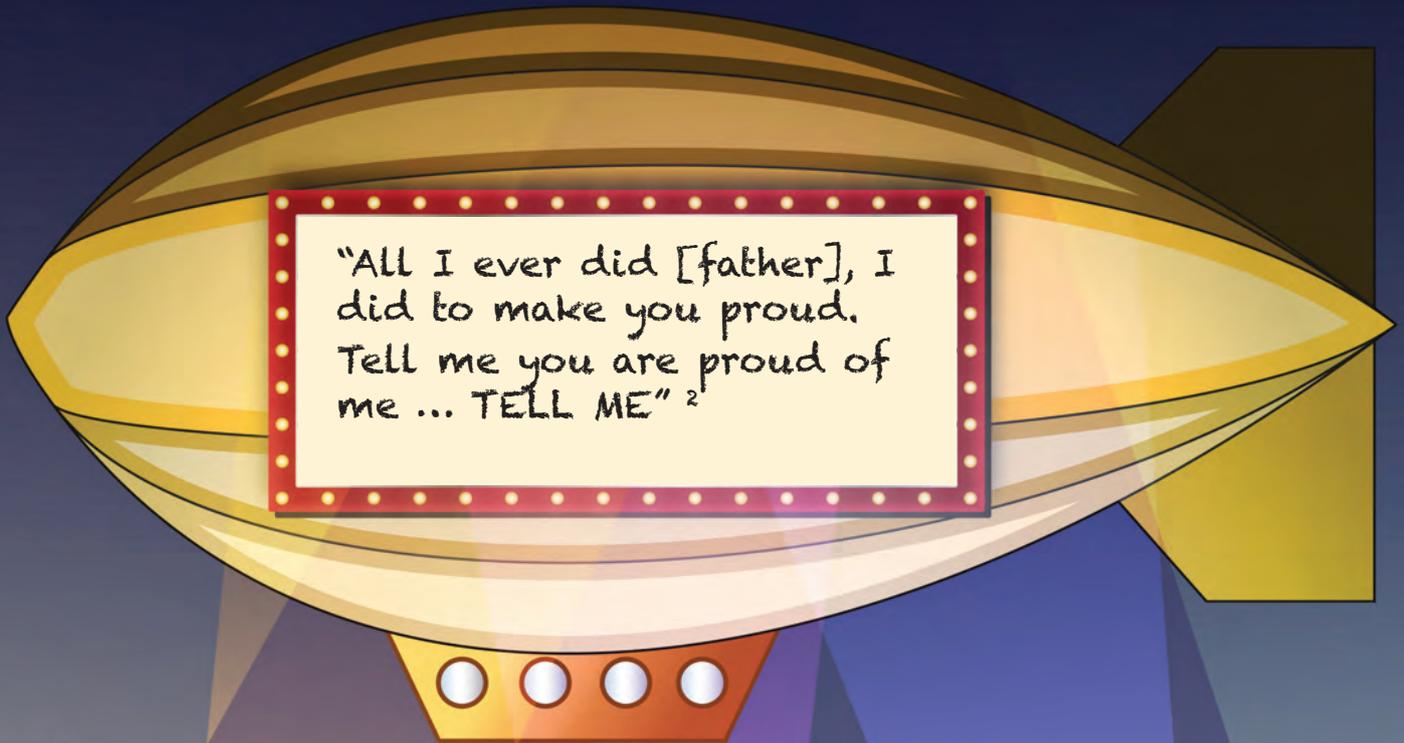
**Francis McGivern** is a Counselling Psychologist registered with the Psychological Society of Ireland. He has a private practice in a multi-disciplinary medical centre and is a student counsellor at the Dundalk Institute of Technology in Co. Louth. Francis is a Doctoral Candidate in psychotherapy at Dublin City University. He sits on the Board of Directors of the Rape Crisis and Sexual Abuse Centre North East.

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# THE TAI LUNG JOURNEY FROM THE HOLLYWOOD MOVIE – KUNG FU PANDA

By Mike Hackett



## Embracing 'evil' – the development of compassion and empathy using a reflective approach to a Movie Therapy session.

### Abstract

Using the vehicle of movie therapy, we have the ability to exercise our various therapeutic muscles and engage in our own personal growth by accompanying the characters portrayed on-screen as we get to journey through their lives in full Technicolor™ on screens large and small. In particular though, by focusing on the journeys of the anti-heroes, the villains or the bad-guys, we are presented with an opportunity to; employ our empathy and compassion; to gain new perspectives on the human condition, our own personal journeys; and the wider lessons these films portray to ourselves and to our children. This reflection aims then to demonstrate how just such a journey can provide such opportunities for connection and reflection, by really encountering the humanity one such bad-guy, the villain of the popular children's movie – Kung Fu Panda.

In dark movie theatres amongst others, or in our private homes on our own, we are transported. We encounter characters onto which we project aspects of our own life's story, and the influences both people and situations have on our very being and our individual journey. These characters (some of whom we love, some we loath), stir feelings within which leave us enriched, ashamed, joyful, angry, disconcerted, and more, indeed, they bring us into contact with myriad feelings as broad and as deep that we as human beings can fathom. Movies are, after all, stories from the minds of writers, imaginations of directors and portrayals of human emotions by gifted actors. But more than that, when these creative forces combine on screen, they have the power to transform our very emotional being for a time, and contain the potential to influence the course of our lives in strange and subtle ways.

It must also be acknowledged however, that the power movies exert over us is merely an echo of the range and depth of feeling which we already have the capacity to experience. We cannot be 'touched' by these stories if we are incapable of connecting to that inner world which exists within us. Every feeling, thought or mystery awakened by movies are then ultimately, aspects of ourselves. These aspects are represented on-screen, compressed into 90-minute journeys of cold reality, escapes into the wilds of imagination, or reflections of our past/present/future thoughts, hopes or fears.

And yet it is not the inner power which movies possess, but what must also be recognized is the external power – that of the movie industry and it's ability to influence us in other ways!

Movies today are synonymous with one place – Hollywood also know as 'The Dream Factory'.

**“While the Lumiere Brothers are generally credited with the birth of modern cinema, it is undisputedly American [Hollywood] cinema that soon became the most dominant force in an emerging industry. Since the 1920s, the American film industry has grossed more money every year than that of any other country.”<sup>2</sup>**

With so much wealth, comes enormous power – especially when we welcome the messages, which Hollywood films convey into our homes, our families and our lives. In particular, I wonder

what Hollywood children's films convey and especially, the messages that they impart to our children.

To more fully expand on this curiosity, it perhaps is fitting then to elaborate on this theme by means of my own experience with one such Hollywood Children's Film – Kung Fu Panda!<sup>3</sup>

It began in a personal development context in which we were invited to view and reflect on the movie – Kung Fu Panda. The effect on what, on the outside at least, seems such a typical Hollywood children's film, left me with feelings, which remain very much alive months after the viewing, and has thus become the inspiration for this reflection.

***These characters (some of whom we love, some we loath), stir feelings within which leave us enriched, ashamed, joyful, angry, disconcerted, and more.***

Our story begins with the Hollywood hero of the story – an overweight Panda called Po;

**“In the Valley of Peace, Po the Panda finds himself chosen as the [Kung Fu] Dragon Warrior despite the fact that he is obese and a complete novice at martial arts.”<sup>4</sup>**

And though your mind may automatically jump ahead, thinking that this will remain a 'typical' story of the Joseph Campbell 'Hero Journey'<sup>5</sup>, for me, it is not the hero, not the wise man, not the side-kicks nor any of the other archetypal characters portrayed in the film which touched me most, but the anti-hero, the villain, the Snow Leopard – Tai Lung.

#### **Tai Lung's Story:**

**“Shefu [the Red Panda] found Tai Lung [a Snow Leopard] as a cub and he raised him as his son. And when the boy showed talent in Kung Fu, Shefu trained him, believed in him, told him he was destined for greatness. It was never enough for Tai Lung, he wanted the Dragon Scroll. Uguay [the Tortoise] saw darkness in**

his heart, and refused. Outraged, Tai Lung laid waste to the valley. He tried to take the scroll by force, and Shefu had to destroy what he created. But how could he? Shefu loved Tai Lung unlike anyone he had loved before, or since. And now, he has a chance to make things right – to train the real Dragon Warrior.”<sup>6</sup>

In this summary of Tai Lung’s journey from infant to prisoner, we are presented with what appears to be a straight forward villain, because in truth doesn’t every story need a ‘good’ villain? But perhaps, in altering our perspective, flexing our empathy and compassion emotional muscles, and meeting this ‘villain’ with an open ear, an open heart to his story, can we hold our beliefs about villains so rigidly?

In the story, Tai Lung is portrayed the classic evil monster, powerful, terrifying and threatening. He is the anti-hero, the shadow, and the dark force in an otherwise idyllic hamlet. He is the one whose name is spoken in hushed tones amongst the villagers, a source of shame and fear in the very place where he grew up as an orphan. An entire community cowed by the arrogance and selfishness of one of their own. The name Tai Lung has become synonymous with the bogey-man!

Tai Lung’s crimes, were so heinous that our first meeting with him directly, is in his underground prison, in the dark, alone and encased in iron and suspended by huge chains - essentially immobilizing him. He is bound and gagged. Silenced in the dark, deep, damp and devoid of anything but the beating of his own heart, and his own conscience in his ears. The only light which can be seen, is revealed as the light of pure malice, shining from the eyes of this bound and lonely Snow Leopard. He has been held in this state, removed from the light, isolated and confined, alone and vilified for 20 years!

Pause! For a moment, can you imagine what Tai Lung feels? Sit with the idea of this for just a moment. What stirs within you? What must it be like, to be Tai Lung?

It is then I came to understand that Tai Lung’s confinement, is not simply a defeat of his liberty, but actually amounts to a double imprisonment – a prison within a prison, the physical walls which are his cell, perhaps not as cloying as the cell

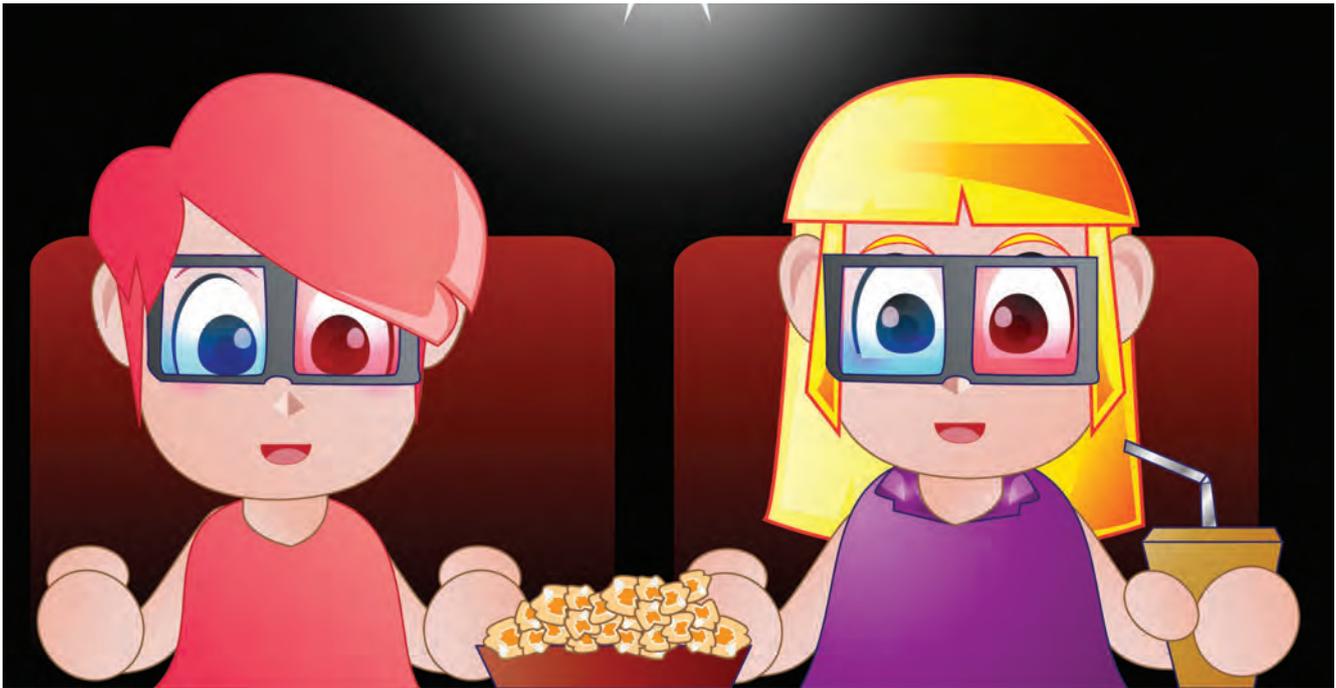
made by his thoughts and feelings roiling in his enforced silence. He must have been truly terrible to deserve such a fate.

***In particular, I wonder what Hollywood children’s films convey and especially, the messages that they impart to our children.***

However, as we collect the pieces of his story, from the fragments of his tale, we realise that this is a soul who has suffered three major rejections in his life. First, his abandonment by his mother, left on the steps of the monastery – cut off from his kin and his history. Second, in his failure to be the ‘son’ his adoptive father wanted him to be, coupled with his acting out, he is rejected and committed to prison forever. And the third – rejection by society and his internment to solitude and silence, his very name, and so his very Self, becomes synonymous with what it is to be Shame – something to be denied, hidden and forgotten forever.

The pieces of his journey thus come together. His story is one of abandonment as an infant, finding a father figure, reclaiming hope in the love, attention and connection with his surrogate father, being raised with the dreams and expectations of a father’s love and pride, seeking his approval and acceptance, trying to fit in. Eventually, coming into his prime as a young man, a warrior: years of training, discipline and expectation heaped upon expectation. We come to meet a new version of Tai Lung, very different to the one we see in that first scene of a smiling, vulnerable, abandoned infant left on the steps of the monastery. He has labored under the pain of his abandonment, failure to meet the ever increasing standards of his father, failure to manage his sadness and anger stemming from his orphanage and in possession of training, strength and discipline above any other member of the community, with an opportunity to seize the ultimate power ‘The Dragon Scroll’ and in so doing, find his identity as the hero, claim the love of his father, and his place (finally) in the world despite the cost.

And so, in a moment of impatience, frustration, loss and anger, Tai Lung acts out. He makes a break for power (the scroll) and clashes headlong into a battle with his father – an epic, Kung Fu



battle no less! And in so doing, his father, in the way of all parents in a similar situation perhaps, must choose between crushing/supporting his son and protecting/abandoning the greater good of the community!

Shefu chooses the greater good. And time moves on.

And so, in time, a new hero rises, and Tai Lung is consigned to his fate. Life resumes, normality returns, and Tai Lung is forgotten, relegated to myth, consumed by hate and shame.

But just as a hero must inevitably rise, so too must a threat to the hero's position, and reveal the crisis the hero must overcome. And so we see the return of Tai Lung!

### **The confrontation between Tai Lung and Shefu:**

Tai Lung: I have come home master.

Shefu: This is no longer your home, and I am no longer your master.

Tai Lung: Ah yes, you have a new favourite. So, where is this Po? Ha! Did I scare him off?

Shefu: This battle is between you and me.

Tai Lung: So, that is how it is going to be?

Shefu: That, is how it must be.

Tai Lung: I rotted in jail for 20 years, because of your weakness.

Shefu: Obeying your master is not weakness.

Tai Lung: You knew I was the Dragon Warrior, you always knew. But when Uguay said otherwise, what did you do? What did you do? Nothing.

Shefu: You were not meant to be the Dragon Warrior. That was not my fault.

Tai Lung: Not your fault? Who filled my head with dreams? Who drove me to train until my bones cracked? Who denied me my destiny?

Shefu: It was never my decision to make.

Tai Lung: It is now. Give me the scroll.

Shefu: I would rather die.

*[Father and son duel kung-fu style in a mighty battle of limb and will]*

Tai Lung: All I ever did, I did to make you proud. Tell me how proud you are Shefu. Tell me, TELL ME.

*[Tai Lung beats his father until he is sprawled on the floor]*

Shefu: I, I have always been proud of you. From the first moment I have been proud of you. And it was my pride which blinded me – I loved you too much, to see what you were becoming, to see what I was turning you into. I'm, I'm sorry.

*[There is a tender moment of meeting eyes between the two]*

*[Tai Lung retreats into his head, years of pain, anger and fear grip him, he growls and attacks his father again, unable to forgive, unable to weep, anger takes hold and spills over into aggression]*

Tai Lung: I don't want your apology, I want my scroll. Where is it? (he looks up to see the scroll missing from its resting place).

Shefu: The Dragon Warrior has it, and it is safely half way across China by now.

*[Rage wells up in Tai Lung]*

And here again, my inner self reacts; this powerful interplay between father and son. The overwhelming range of emotion; the regret, the sorrow, the disappointment, the abandonment, the fear, the anger, the frustration, the rage, the failure to meet for more than a mere moment of apology and recognition. I simultaneously feel empathy for both father and son and compassion for their individual positions, an understanding of their perspectives. And yet this is not enough. The deeply wounded son must be damned. He has truly become - evil. Hollywood in this moment, damns Tai Lung forever as the villain, a slave to his rage, his greed for power, his arrogance, and it is the travesty of his story that in this moment, he utterly loses himself. And in some ways, just like others in his life, he too

***My inner self reacts; this powerful interplay between father and son. The overwhelming range of emotion; the regret, the sorrow, the disappointment, the abandonment, the fear, the anger, the frustration, the rage, the failure to meet for more than a mere moment of apology and recognition.***

abandons the vulnerable orphaned infant within in order to seize the role he has now been cast into. The travesty is that he has now learned to damn himself.

As Po, the hero, and Tai Lung meet in the final battle – the classic Hollywood clash of good meeting evil, the struggle for supremacy – the lesson that sometimes fists and feet are necessary to vanquish evil. The characters fight over possession of the fabled Dragon Scroll. Until Tai Lung makes a dramatic lunge and seizes it...

Tai Lung: Finally, oh yes, the power of the Dragon Scroll is... Mine!

*[Tai Lung unrolls the scroll to claim the wisdom, which would imbue him with ultimate power. Suddenly he realises the scroll is simply mirrored parchment, revealing only his own reflection.]*

Tai Lung: It's, it's nothing!

Po: It's ok, I didn't get it the first time either. There is no secret ingredient – it's just you!

*[The realisation of what this means suddenly dawns, Tai Lung roars, cheated, confused, he lashes out, his hopes and dreams for salvation in ultimate power frustrated for the last time. He attacks Po once more. Until... Po in a special Kung-Fu move, seizes Tai Lung in the 'Wooshi Finger Hold']*

Tai Lung: The Wooshi finger hold.

Po: Oh you know this hold.

Tai Lung: Shefu didn't teach you that hold.

Po: Nope, I figured it out.

*[A look of fear and recognition crosses Tai Lung's face, his features contort – for the first time, out of fear]*

Po: Skidoosh.

*[In a blinding flash of light, Tai Lung evaporates – annihilated utterly. As the dust settles, Po emerges as the Dragon Warrior to the acclaim of the village. Tai Lung is no more.]*

The final mention of Tai Lung in the story is made when Po reports to Shefu that he has defeated Tai Lung. Shefu takes a breath and reports he is now at peace. In the Village, spontaneous celebrations break out; the hero is greeted excitedly to whoops and hollers. The only cost... the utter destruction of an individual, and after all, he was a pretty rotten egg!

***Is it possible that stories like these teach kids to accept blindly the judgment of another soul as bad/evil and forever fixed as such?***

The implications of this story resonate with me still! Is it possible that stories like these teach kids to accept blindly the judgment of another soul as bad/evil and forever fixed as such? Does it deny kids the opportunity to explore the 'what if' of another's story to imagine what it would be like if they found themselves in the villain's place? Does it further teach kids that there is only one moral standard (our standard) thus denying them other salient facts or views, and with it, an opportunity to see a different perspective, and as a result learn the skill of discernment – the act of making an informed view?

And so, perhaps, dear reader, you may now have a sense of my discomfort with this particular Hollywood treatment of 'a hero story' and the consequences for other characters in the context of the messages to ourselves and to our children. It is perhaps an opportunity then, an opportunity toward awakening, to be ever vigilant to those stories which are served to us 'Hollywood Style' and a reminder, that all of what we see is indeed, only part of the story. 



**Mike Hackett PMP, ARCHTI, MIACP** is a therapist, dream-worker and educator based in Dublin. He is the founding member of Introspect Counselling, a service that provides lower cost counselling in Dublin. Mike is

the founder and dream group leader of the Dublin Dream Appreciation Group and has been a member and patron of the IASD (International Association for the Study of Dreams) since 2005. In more recent years, Mike has worked as an educator in counselling and psychotherapy in private colleges and has developed training courses in a number of counselling and psychotherapy-related areas.

When not working directly with people, Mike is an avid photographer, interested in making images of, and around Ireland, and is a member of the SWPP (Society for Wedding and Portrait Photographers).

Mike has been an Accredited member of the IACP since 2009. He can be contacted by phone or email at: [info@introspectcounselling.com](mailto:info@introspectcounselling.com) or 086-851 2433.

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# Finding your Way through the Snowstorm: Mortality as Teacher

By Peter Labanyi

Because I would not stop for death / he kindly stopped for me.

Emily Dickinson

Perhaps we shouldn't always avoid the obvious: 'I'm not afraid of death, I just don't want to be there when it happens.' Yet, ironically, 'being there' may be just what is needed: 'Oh God! May I be alive when I die' (quoted in Phillips, 1988: 19). Which do we prefer, Woody Allen's aversion or Winnicott's embrace, stoicism or despair, resolution or paralysis, in our response to mortality? Or perhaps open and quite understandable denial: 'I'm glad I don't believe it/For it would stop my breath - ...' (Dickinson, 1960: 41)? My own fear of death is by no means new. The immediate motive for this essay was re-reading a couple of my favourite novels, *Anna Karenina*

and *The Magic Mountain* - a convalescence from a Christmas flu that led to the cancellation of an elaborately-planned trip to India: the 'holiday of a lifetime' had to be put back in the dream cupboard. As a relatively benign though expensive reminder that, no matter what we may believe, we are never ultimately in charge of our lives, this too served as a *memento mori*.

The question is, assuming that the route of religious belief and after-life is closed, where do we turn for help in coping with our mortality? Certainly not to the Irish Zen teacher who could stand at his lectern and pronounce to a large audience

that death was 'no problem'. His dismissiveness is echoed by the hubristic title of Julian Barnes's book about mortality and the joys of atheism, *Nothing to Be Frightened of*. The grandiose macho posturing apart, how can anyone claim this when fear of death is hardwired into all living creatures as a survival mechanism? Neither would there be much point trying the facilitator of one of my first psychotherapy trainings. One day, some twenty-odd years ago, I recklessly asked in the group how one could keep going with one's motivations and attachments in the knowledge that it would all be obliterated by death. The answer was, at least, concise: 'We all have

to deal with that', whereupon the group process was redirected to more tractable matters.

Tolstoy lived a long and fertile life, fathered many children, and received universal acclaim as not just perhaps the greatest novelist of all time but also, in later life, as a sage with enormous global influence – notably on Gandhi and on a whole tradition of non-violent resistance. Despite such immense achievements, he struggled ceaselessly with his fear of death. It haunts all Tolstoy's fiction: from his earliest works, via the breath-stopping *Death of Ivan Ilyich*, right down to his last novel *Resurrection*. In its closing pages, the hero contemplates a corpse in a mortuary: "Why had he suffered? Why had he lived? Does he understand now what it's all for?" ..., and it seemed to him there was no answer, that there was nothing but death, and he felt faint' (Tolstoy, 1966: 561).

By the time he was ten, both Tolstoy's parents and his grandmother had died. But his paralysing dread ('felt faint') dates, rather, from one night in 1869 - shortly after the triumph of *War and Peace* and during the prime of his life - when he was staying at an inn in Arzamas. When Tolstoy asked himself what he was so afraid of, out of the blackness of his bedroom came the reply: 'Of me..., I am here' (quoted in Troyat, 1970: 445). Death itself had appeared to him, and had at a stroke rendered everything meaningless: the dread was never to leave him. So in addition to its relationship dramas, *Anna Karenina* is a novel about death: not just the events that lead to the increasingly trapped Anna's suicide but, equally, the existential torments of Tolstoy's alter ego, Levin: "Without knowing what I am and why I am here, it's impossible

for me to live. And I cannot know that, therefore I cannot live'" (Tolstoy, 2001: 819). This forces Levin to recognize both the limits of reason and the need for humility in the face of ultimate mystery: birth and death are 'like holes in this ordinary life, through which something higher showed' (ib. 741). But the acceptance that Levin appears to achieve is precarious. This is because it depends on his decision to stop asking the questions that make him so unhappy and revert (regress?) to an unquestioning Christian faith.

We all recognise such an image of death, armed archetypally with scythe and hourglass. Mowing down everyone and everything without distinction, the great leveller reminds us that the clock is ticking. This 'countdown' dynamic has been enlisted, notably by existential therapy, to drive us not just to value more the lifespan we are given but to see mortality as both a challenge and an opportunity. Heidegger is a classic source here. His strategy is to link mortality with another core existential issue, aloneness. To hide our fear of death from ourselves, he claims, we take shelter within the collective, which for him is the realm of conformity (what he calls 'the They'). The price I pay for such false comfort – false because temporary, for I will still have to die alone – is that I give up my freedom for a 'belonging' that may negate my real self. Yet it is precisely my death that is most uniquely mine. Therefore, Heidegger argues, it is only when I fully embrace what he calls my 'being-toward-death', that I can begin to claim my authenticity.

There are, however, several difficulties with existential

approaches to mortality. Firstly, by using the countdown model – and our helpless 'thrownness' in space and time into a world not of our making is one of Heidegger's great themes – the 'therapeutic' urgency may increase the panic that I already feel to such a degree that I want to simply pull the duvet over my head. Such a shrill wake-up call is contraindicated for anyone not living in the most blatant denial. Secondly, existential approaches offer valuable *descriptions* of our predicament. When it comes to solutions – such as they are – these rely on reframings of perceived issues: just change the way you see things. Such cognitive tricks cannot meet the powerful emotional and archetypal energies involved. As the novelist Richard Powers has acidly observed: 'Philosophy never consoled anyone' (Powers 2011: 81). As I will argue, a more embodied and indeed relational approach is needed for existential issues too.

***Solutions ... rely on reframings of perceived issues: just change the way you see things. Such cognitive tricks cannot meet the powerful emotional and archetypal energies involved.***

The doyen of existential therapists, Irvin Yalom, does recognize that fear of death is biological. This is why he subtitled his book 'overcoming the *terror* of death' (italics added): perhaps my terror can be reduced to fear, but my fear can never be 'overcome'. And even he is forced to admit that sometimes ideas are no help at all. Take for instance that tired old chestnut: because we won't be around to know that we are dead, therefore death can't

be frightening. In place of the left brain's cold and vacuous games, when up against the wall with a client what Yalom offers is his full presence. This, he says, contains the implicit message: "No matter how much terror you have, I will never shun or abandon you" (Yalom, 2009: 130). Such a promise of relatedness depends, needless to say, on the therapist having reached, if not comfort, at any rate a *modus vivendi*, some accommodation with their own mortality (see my earlier example for a lesson in how not to do it).

Presence we will return to. For now, its mention brings us to the third difficulty with the existential approach, which is its authenticity-driven privileging of aloneness. This sits awkwardly with the relatedness invoked even by Yalom. To put things crudely: does aloneness have any healing role for the relational beings we are, except as a temporary expedient to recuperate after leaving a destructive situation behind? Moreover, I have a suspicion that a hard-nosed emphasis on separation in psychotherapy - teaching people to wipe their own noses, as Fritz Perls wouldn't quite have put it - is often contaminated by characteristically male fears of boundary-softening and by compensatory fantasies of granite-faced autonomy. A soldierly 'resoluteness' was, tellingly, a key concept of the early Heidegger, though he did attain a more surrendered attitude in his later, quasi-Buddhist phase.

It is our second novel that offers an alternative to such cognitive and 'heroic' approaches to - or should we say evasions of? - mortality. Over the course of his stately and no less fertile career, Thomas Mann's view of death would, unlike Tolstoy's, undergo a transformation. A turning-point

is *The Magic Mountain*, which, as its richly woven and endlessly resonant mythic fabric suggests, is a novel of initiation. By this I mean the process of 'spiritual education' that, as the Jungian Joseph Henderson has stressed, occurs throughout life, whereby each successful transition between states and stages inducts us into deeper and deeper levels of being (Henderson & Oakes, 1990). Indeed Mann uses explicitly alchemical language to describe how the base metal of his 'simple' and hence malleable young hero is transmuted into something more refined, which is to say more fully human. The vessel for this process is the Alpine sanatorium where Hans Castorp is exposed to all manner of inputs and influences, both healthy and noxious. But the crux of the initiation is his encounter with mortality - not just via the sick and dying around him but directly, through his own body. When Hans sees the skeleton of his hand in an X-ray image, he knows for the first time that he is going to die: he has been given a glimpse into his own grave. But it is the impact on the young man that is crucial. Instead of Tolstoyan panic and paralysis, he becomes more and more curious about death and - this is his initiation - thereby about life: what a human being is and, consequently, what is humane, how one should live.

Mann's vast symphonic structure may be saturated by ideas, but it is underpinned by compassion. Ideas are evaluated not for their logic but for their humanity: as the novel progresses, the focus becomes increasingly ethical. Upset by the death-denying frivolity and, especially, the egotism that prevail in the sanatorium, Hans makes a

point of spending time with the gravely ill and the dying, taking them gifts, sitting by their bedside, accompanying them on excursions. But the initiation reaches its climax when Hans undergoes a death-rebirth experience on a foolhardy solo trip up the mountain in a snowstorm: an archetypal hero's journey into the land of death and transcendence. When we are told he cannot take the same route back, this advises us that he will not return as the same person. Confronted by the physical danger of getting lost and freezing to death, Hans is made to realise his own fragility as an embodied being. No longer merely a concept, his mortality has become an experience. This engenders a compassion for himself that ultimately extends to all living beings.

***When Hans sees the skeleton of his hand in an X-ray image, he knows for the first time that he is going to die: he has been given a glimpse into his own grave.***

Having been orphaned in childhood, Hans had already developed an 'oceanic' affinity with death: his cathexis of the unbounded 'maternal' sea symbolizes a pre-existing softening of his ego-boundaries. This is why, unlike Levin, the thought of mortality doesn't plunge him into terror and despair. Amid a landscape as hostile as it is sublime, it is Hans's malleability that helps him to shift his identification. What now enables him to resist the seductive pull of oblivion and infinity - symbolised by the sterile 'hexagonal symmetry' (Mann, 2005: 573) of the wilderness of snowflakes - is his body's desire to survive. He thereby discovers his affinity with

the organic: with that which is alive but – or rather therefore – also destined to die and decay. Life and death form a unity; but Hans's crucial insight is that only 'love stands opposed to death – it alone, and not reason, is stronger than death' (ib. 588).

What does all this imply for our search for an adequate response to mortality? The problem with the existential approach is not just that it is disembodied but that, by foregrounding and even making a virtue out of our isolation, it may increase our narcissism. This is in part what makes Levin's 'solution' regressive and contractive: it's all about him, the fate of his small, egoic self. By contrast, Hans's less-defended psyche is capacious and expansive. Hence his initiatory peak experience in the snowstorm takes on a transpersonal slant. He intuits that his dream-vision not only belongs to him but is equally the work of the collective 'great soul' dreaming through him. This enables him to achieve a relativising balance of identification. Indeed for Mann, as for Jung, human beings are defined by their capacity to contain and potentially transcend opposites. Thus although Hans naturally feels fear when he is in danger, what he does not feel is victimized. This is because, when his small self is no longer the absolute criterion, he is able to see his fate as *typical*: this is the kind of thing that happens. What this implies is that, although I cannot escape my mortality, I do have some freedom as to how I respond. But such freedom depends on how I conceive of myself.

As fish live in water, so do human beings inhabit time: it is both the stuff of our lives and the medium through which we experience the process of

living. As Heidegger knew, time therefore has profound existential implications. My sense of time passing and my awareness of my mortality are inseparable, which is why *The Magic Mountain* is as much about time as about death. If I put my focus on linear time – the countdown model – death will always be the future that rushes towards me and infects my present with panic. However if I redirect my attention, I can revision mortality not as a gun pointing to my head but as a teacher. This requires that I see my existence as not just a point on a timeline that is running out, but as having *depth*. Accordingly, it is not enough simply to 'live in the moment'. The real question is, who is living in that moment, which part of my psyche? If I am open to being taught by mortality, I can be initiated – like Hans – into deeper levels of my being, a larger sense of who I am. As the example of Mann's expansively identified young hero shows, because our trans-egoic self transcends the timeline, it lives as it were outside of time. Consequently, to the degree that I can expand my identification beyond my small self my fear of death may be assuaged.

As Yalom suggests, presence is the core of any *adequate* response to mortality. By 'adequate' I mean a response that I can experience as not just realistic but as healing: as something that furthers my wholeness. Mortality is generally classified as 'existential' – that is, as inseparable from the human condition. However – following the axiom that we cannot make progress with psychic issues at the level from which they originate – any effective response has to be 'spiritual' – by which I mean the larger frame within which we hold our human condition. So this is about finding not an external

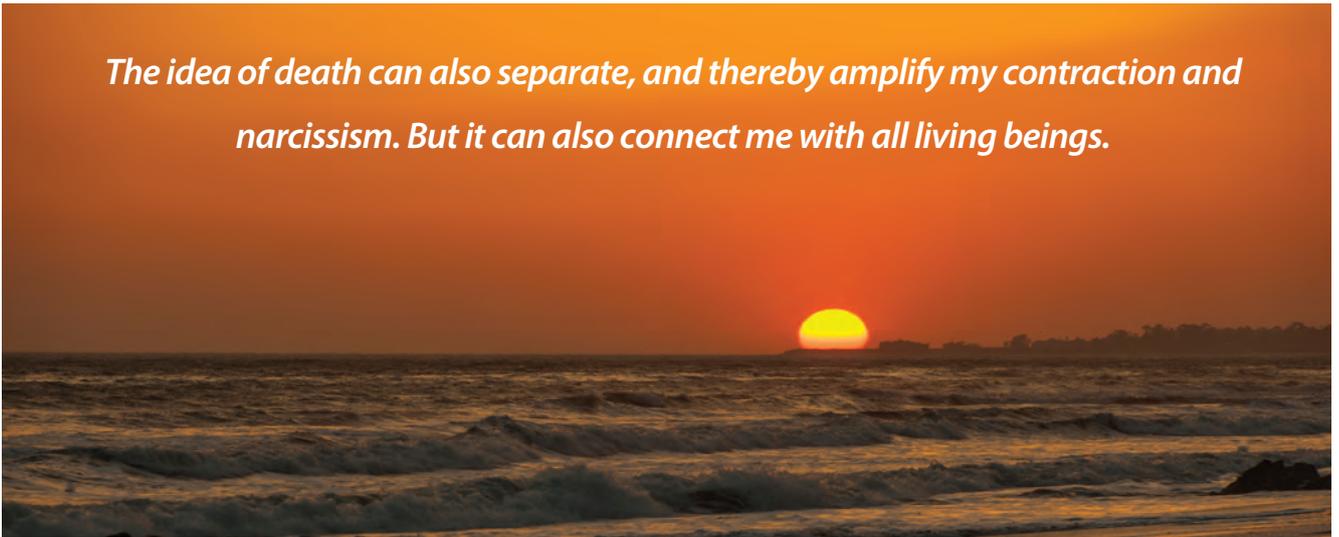
answer but, rather, a place *within myself*. The real question is about identification: not what do I need to do but who do I need to become to face my inevitable end, what inner resources can I draw on (such as Hans's acceptance, ego-softness and beginner's mind)?

Although we have no cure for mortality, it is workable: there is work we can do. At first glance, the classic Buddhist response – 'it's only the ego that dies' – may look like just another cognitive trick to persuade us that 'death is no problem'. On the contrary, as we have seen, such a realisation is about – well, realisation. Fully to awaken to this, to shift our identification, may require decades of spiritual practice. Moreover, this realisation is anything but cognitive. As Hans's experience in the snowstorm shows, what makes him present to himself is his heart-based embodiment. Such presence reveals what, in our deepest nature, we already are: it is both necessary and sufficient. Presence is, in itself, what we are looking for. For example, the work of the remarkable Buddhist psychotherapist Tara Brach is not mere 'teaching' but energetic transmission. She models her own principle that the more we can *become* this 'natural presence', the more our acceptance, love and compassion will naturally flow.

***For Mann, as for Jung, human beings are defined by their capacity to contain and potentially transcend opposites.***

The reality of death will separate me from everyone and everything I love. The idea of death can also separate, and thereby amplify my contraction and narcissism. But it can also connect me

*The idea of death can also separate, and thereby amplify my contraction and narcissism. But it can also connect me with all living beings.*



with all living beings. Through the initiation of its hero – his homecoming to a fuller sense of self - *The Magic Mountain* shows how compassion for self and other are interdependent. This reminds us that mortality is ultimately not about death but about life, about how we are to live. As Heidegger claimed, it can reveal what is of real concern to us. Therefore any attempt, however subtle, to use mortality as a justification for defensively withdrawing our libido from this life and from connection with others, will merely result, as Nietzsche warned, in a sin against life, in a kind of dying before death. ‘Transcending’ modes of spiritual practice need to guard against such a danger and the dissociation and depression it can spawn – something to which even Buddhists can be prone if they interpret ‘non-attachment’ too mechanically. Instead of withdrawing from life, what we need is to engage more fully, to be embodied and present, so that we can get in touch with our warm, beating but vulnerable heart, as did Hans Castorp that afternoon on his snow-covered mountain. 



**Peter Labanyi**

Peter Labanyi has been German Editor at the Times Literary Supplement and has lectured in German Studies at the University of Limerick. He has written extensively, for both weeklies and academic publications, on German literature and thought. Having taken early retirement, he became a psychotherapist. His current interests

are in integrating literature and philosophy with psychotherapy: his Reading for Your Life adult education course in UCD draws on these elements

**Peter Labanyi will be facilitating an eight week course, ‘The Novel as Spiritual Journey’ (*The Magic Mountain*), in the UCD Adult Education Programme, beginning 6th February 2014.**

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# *Happiness* - hype or helpful?

by Patricia Allen-Garrett

## Abstract

“This article is intended to look at what happiness is, how it seems to hold a paradoxical place in our lives and what its psychological background is. By drawing on work of the major theorists and researchers in the field of positive psychology the author proposes the role that happiness could play in enhancing our lives and presents her own three-tiered approach to happiness and the value it has can have in our lives. It addresses practical aspects in terms of how we can increase our happiness at each of these three levels. Further it posits the view that in our very uncertain and scarcity-fuelled world, we risk being drawn deeper and deeper away from sufficiency and further into the depths of scarcity if we neglect this approach which focuses on resilience, hope and action.”

What do you think of when you think of ‘Happiness’? Do you see images of hammocks and perfectly still seas? Or perhaps the picture you see is of whole-sale delusion, of the ‘fake-it-til-you-make-it’ approach to life? Whatever our view,

there has been much talk of late of happiness, from Maureen Gaffney’s bestselling book ‘Flourishing’ to laughing yoga to the whole positive psychology movement growing across the world. What I would like to do in this article is to give you the

background to the scientific study of ‘happiness’ – the positive psychology movement, my view on happiness, also briefly outline some ways where happiness can be increased in our lives and make the case for why in our troubled times it can

be an important resource.

Interestingly I've found that happiness/positivity/well being seems to attract a lot of resistance and cynicism which seems quite paradoxical. Perhaps it's cultural? Certainly we come from an old traditional ethic that says that working hard is good and that leisure and fun can be bad. There may be some truth in that. And yet we all look to be happy – sometimes in the ways that aren't the healthiest but we certainly try – so we are conflicted around happiness. I'm reminded of Marianne Williamson's wonderful words when I think of our conflict and our resistance:

Our deepest fear is not that we are inadequate.  
Our deepest fear is that we are powerful beyond measure.  
It is our light not our darkness that most frightens us.  
We ask ourselves, who am I to be brilliant, gorgeous, talented and fabulous?  
Actually, who are you not to be? (Williamson, 1996)

### **Cynic, Sceptic or Believer?**

Some healthy scepticism is fine – when I first heard about positive psychology and happiness as concepts back in 2005 I was dubious, and thought that it was just another fad, an enhancement of the Polyanna-esque way of positive thinking – you know the sort of stuff, trying to believe in very cheerful statements (different to affirmations) such as “every day in every way I'm getting better and better!” regardless of the fact that there may be no evidence to support such a statement or even contrary evidence. Worse, for me as a therapist was the dread that perhaps this new thinking would deny or play down that so-called ‘negative emotions’,

***Our deepest fear is not that we are inadequate.***

***Our deepest fear is that we are powerful beyond measure.***

***It is our light not our darkness that most frightens us.***

***We ask ourselves, who am I to be brilliant, gorgeous, talented and fabulous?***

***Actually, who are you not to be? (Williamson, 1996)***

depression, loss, etc., were real and I knew that in the therapy and counselling sessions with my clients that we sit with very real pain that people feel and that telling people to ‘look on the bright side’ would not just be unreasonable and unrealistic but it would also be very cruel.

But the more I read the more I realised that in fact positive psychology (the science of happiness, positive emotions, strengths and traits) is very much evidence-based and has its roots in the work of pioneering psychologists and therapists such as Rogers and Maslow. It is a ‘strengths psychology’ and for those of us who are humanistically-trained, it has many of the same beliefs around self-agency and autonomy which we hold. As far back as Freud the focus in psychology has been on the study of what was seen as deficiency, character weakness, anxiety, depression, etc. – all of which were very necessary to look at. But what this new body of psychology has done is enhance our understanding of the circumstances which can promote positive emotions and a better level of wellbeing so that we have a more balanced understanding of the human experience and the value that positive emotions can bring. Additionally it attempts to add to our knowledge of the essence of human nature and looks at interventions that can both relieve suffering and increase happiness. So in effect what

positive psychology is seeking to do is rather than have us think of how we can go from - 5 to 0 in terms of feeling a little less miserable each day, it focuses on trying to help us go from + 2 to +7 so we can build strength and provide guideposts for finding what Aristotle called the ‘good life’.

So as you read this I'm going to ask you to hold on to some of your healthy scepticism but I'm also going to ask you to also consider being open to a different emphasis, an emphasis that looks towards exploring what happiness is and how it can enrich all of our lives at many different levels.

There is no doubt that happiness is a big topic, it has emotional, spiritual, cognitive and creative aspects. It is also big business - all you have to do is to go into any book shop and see the amount of titles that proclaim to offer something new on it. However what I have found from reading many of those books is that the message from all the research is very similar, the emphasis varies in terms of what the individual writer finds important but the messages are surprisingly similar.

### **The Three Levels of Happiness**

And so I came to distil it down to my take on it and the more I have looked at happiness/positivity/wellbeing, the more it seems it comes in different shapes, sizes and depth. I think

one of the big mistakes we have made is to try to approach it as one big generality – that one size fits all and that we will all get to whatever we consider happiness to be if we take a specific route. I don't think it works like that – we are far too individual, complex and quirky for that. Plus happiness needs a little more thought and work than that.

For me it feels like there are three levels to happiness and they address three main parts of ourselves – the cognitive, the emotional and the spiritual/relational. We can increase happiness in each part separately and it will raise our happiness levels in that part, or we can work on increasing happiness at all three levels which will certainly have a stronger impact on our overall wellbeing. We can nourish each of these parts through happiness – but in different ways – i.e. to build more happiness in the emotional part we will use different tools than the ones we will use to increase the happiness in the more cognitive aspect of ourselves and in turn we will use different tools to increase our happiness levels in our spiritual/relational life.

### **Sincerity**

Let me dispel one myth immediately - clichés like “grin and bear it”, “don't worry, be happy” are just superficial wishes. In fact we now know that sincerity is hugely important in happiness. Wishing for it or casually mentioning a few insincere positive words or forcing a smile won't do it – it must be sincere. Positive psychology, happiness/positivity/flourishing, whatever you want to call it runs a lot deeper than smiley faces and wishing. It consists of the whole

gamut of positive emotions from appreciation to love, from amusement to joy, from hope to gratitude and others too.

### **Why be happy?**

So, why be happy? Research carried out by Barbara Fredrickson (2009), Martin Seligman (2002 & 2011), Tal Ben-Shahar (2008), Sonja Lyubomirsky (2010), Csikszentmihalyi (1992) and many others have highlighted that when we are happy:

- (i) our thinking benefits,
- (ii) our creativity benefits,
- (iii) friendship, relationships and love blossom; and
- (iv) resilience and health grow.

Perhaps a better question is why not be happy?

### **The first level of happiness**

In my ‘Happiness Ratio’ workshop, when I ask the question – “what makes you happy?” it yields a plethora of answers ranging from wine, to sex, to music, George Clooney, a movie, to chocolate. And this is where the first distinction around happiness comes in. Many of these things give us pleasure, they are what Seligman calls ‘the hedonistic treadmill’. They are immediate, fleeting and don't need a lot of thinking about or interpretation. And as a result because of their momentary nature it seems these things do not lead to lasting happiness and in fact they raise happiness levels only briefly – e.g. in less than 3 months major events such as being promoted lose their impact on happiness levels, wealth has a surprisingly low correlation with happiness levels, e.g. real income in the US has risen hugely over the last half century but the level of life satisfaction has been entirely flat there (Seligman, 2002).

***There is no doubt that happiness is a big topic, it has emotional, spiritual, cognitive and creative aspects.***

Even physical attractiveness does not have much effect at all on happiness. It's a bit like addiction, we get used to them quickly and we often need bigger doses to get the same kick as we did the first time.

### **So what should we do?**

It doesn't mean we shouldn't engage in them but we need to realise that in the greater scheme of things they won't give us enduring happiness. So for me, this pleasurable aspect of happiness slots in, in my view and model, at the cognitive level or the first level of happiness. There are things we can do to make them hold on to their intensity a little more. Certainly indulge them but spread them out, let more time pass between them than you usually would, this stops us becoming so used to the pleasure that it loses its impact. Secondly, really savour experiences, bring them into your conscious awareness, share them with friends.

### **The role of optimism and pessimism at the first level of happiness**

Another very important aspect of developing happiness at this psychological and cognitive level is our ability to be optimistic rather than pessimistic.

***Clichés like “grin and bear it”, “don't worry, be happy” are just superficial wishes. In fact we now know that sincerity is hugely important in happiness.***

As Seligman says - optimism isn't about positive phrases or images of victory, but in the way you think about causes of things and their outcomes (Seligman, 2002). Pessimists construe their set backs in a very limiting way - they tend to think that the cause is permanent, pervasive and personal. And when things go well pessimists presume that it's all a fluke! According to Seligman, one of the key strengths of the optimist is that they can interpret their setbacks as surmountable, specific to a single problem or cause and resulting from temporary circumstances or other people. Optimists are up to 8 times less likely to become depressed, they do better at school, sports and most jobs, they have better health and better interpersonal relationships (Seligman, 2002). It's not wrong to be pessimistic - but it won't help your happiness levels!

Importantly optimism feeds into hope - being able to find permanent and general causes of good events together with temporary and specific causes for bad fortune. And when we can do this we bounce back from troubles easier and faster and we get on a roll when we succeed once - we take full advantage of the positive outcome rather than assuming it was a fluke. And all the research at this first level points to the fact that this is the way to build longer-lasting psychological happiness.

### **The second level of happiness - the emotional**

At the second level, the emotional level of happiness, the key messages are about decreasing the negativity that corrodes, becoming more mindful, inviting joy, gratitude, love, awe, inspiration, amusement, interest, love, etc.,

into our lives. And we can do this by really savouring goodness, being kind, dreaming about our future, building challenge into our lives, finding out about our strengths and applying them. It's about being in 'flow' which is Csikszentmihalyi's concept (Csikszentmihalyi, 2002). Being in flow means we are engaged in things that engage us completely, we become immersed in them, and absorbed by them and we lose self-consciousness and often a sense of time. It lasts longer than pleasures and is underpinned by our strengths. Flow visits us for a few minutes on several occasions, when the challenges we face and our ability to meet them are perfectly entangled and it's a powerful stepping stone towards emotional happiness.

This concept of 'flow' links in very much to learning what our strengths are (Seligman offers a tool to do this on his website [authentichappiness.org](http://authentichappiness.org)). Seligman and his team selected 24 strengths which increase wellbeing and psychological happiness and what he says is that there are two parts to increasing your happiness emotionally using your strengths - firstly, learning what your strengths are will give your happiness levels a boost temporarily. But if you want to boost your emotional happiness in a way that is much more substantial and more lasting you must find a way to use your strengths every day in your work, your relationships and your general life. If you can do this they will buffer you against your less-strong areas. And remember Seligman's words that if this all feels like too much work then maybe you are doing it the wrong way because:

*"Building strength is not about*

*learning, training or conditioning, but about discovery, creation and ownership, use your strengths every day in the main realms of your life to bring abundant gratification and authentic happiness"* (Seligman, 2002).

Emotionally we are being hit again and again at the moment, the feeling of anxiety and scarcity in our world and which we are definitely encountering in our therapy rooms is very real. And for ourselves we are working in a sector/area which is offering less and less certainty in terms of our jobs or roles and there is no doubt that it's a very difficult time. We are seeing more and more of our clients struggling with economic aspects of day to day living that we genuinely can do nothing about, and that's really tough. Try as we might to not get drawn into it, we can very easily get seduced into the day-to-day negatives of our lives. This seduction is everywhere - it's almost as if the whole economic downturn has become velcro for anxiety, negativity and depression. So for me, this whole area of happiness has become even more important. If at this second level of happiness we don't take the time to really be grateful and allow ourselves feel joy, then we don't have anything to keep us going when the bad times do happen.

Right now we are living in unprecedented uncertain times and our media is fuelled by a feeling of scarcity. But if we stay locked in a feeling of scarcity then we miss its opposite - sufficiency. If we can pay attention to the areas where we have enough and let go of the areas we feel we will lose or experience scarcity in then we change how we think about our circumstances. And when we do this we have far more

***The deeper level of happiness is about engagement with that deeper core of our life, it's about connection, compassion and courage (Browne, 2010).***

opportunity for creativity and openness rather than a feeling of fear and not enough. So for me, happiness is far from redundant.

**The Third Level of Happiness**

Finally the deeper level of happiness is about engagement with that deeper core of our life, it's about connection, compassion and courage (Browne, 2010). It's about recognising that if we are to live a life that brings us deep and enduring happiness then we must learn to create deep connections with others whilst still having the courage to be who we are, because that's the only way that true connection happens.

Connection isn't just a 'nice to have' - all the evidence coming from the exciting field of neuroscience tells us we are hard-wired for connection. In fact one of the greatest learnings we have is in the whole area of attachment - that our earliest experiences of attachment and connection in relationship literally shapes our brains and impacts the way our brain develops and performs. What this means is that our need and search for connection is not some sort of emotional fuzzy, warm, feeling, it's an actual innate need. And it seems to me that this innate knowledge and need for connection at the neurological level may be a cause of why we sometimes seek it in the wrong ways through addiction, self-medication, over-eating or under-eating, chasing love, almost as if any connection, no matter how tenuous or

unhealthy, is better than none.

At this third level of happiness, it's about really exploring who our authentic

self is, accepting that we are vulnerable at times and feeling worthy of love and belonging because of who we are rather than in spite of who we are. It's about accepting our 'gifts of imperfection' (Browne, 2012). It's about building more resilience into our lives, reaching out to others and developing a spirituality that feeds a sense of hope. It's about cultivating a life that is hopeful and that allows us to truly experience. It's about learning how to play and to practise gratitude daily. And finally it's about using the talents and gifts we have to build meaningful work into our lives and to share our gifts with others.

**In Conclusion**

I have found through putting the above into practice that happiness and positive emotions have a real value in my life, in my therapy rooms, in my relationships and in my work. I have found that they have enhanced my resilience when I have encountered very difficult personal times recently. From my personal experiences I agree with the research that happiness and wellbeing builds better health and allows us to be creative and open to others. In our current economic and social climate I am convinced they are essential in how we are to face and come through the challenges in front of us and to thrive. 



Patricia Allen-Garrett, BSc (Hons) Psychology, Dip Counselling & Psychotherapy, (MIAHIP, ECP),

trained in the Dublin Therapy & Counselling Centre in Gardiner Street. She works as a psychotherapist in private practice in Dublin, as a psychotherapist with Hessed House and an Eden Group Facilitator with Suicide or Survive. She is also a tutor on the Dublin Therapy & Counselling Centre's Diploma in Counselling & Psychotherapy. She is the author of the workshop 'The Happiness Ratio' and delivers this to organisations and individuals. Her website is [www.patriciaallengarrett.ie](http://www.patriciaallengarrett.ie) and she can be contacted at: [patriciaalle@gmail.com](mailto:patriciaalle@gmail.com)

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# Workshop Review

## POSITIVE COMMUNICATION

Presenter: Elaine Parker

Date: July 2013

Reviewed by: Eithne Doherty

Venue: Clonmel, Co Tipperary

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This year was the 23rd Summer School of the Adlerian Network Ireland (ANI) held in Clonmel, Co Tipperary. It took place over four days in early July with different workshops lasting four days and two days to suit the needs of those who wished to attend. Presenters come from all over the world and many call into Ireland on their way to the International Adlerian Summer School ICASSI this year to be held in the Netherlands.

The workshop I chose to attend was presented by Elaine Parker, an Adlerian Counsellor and Trainer from Wales, called Positive Communication. Originally asked to present a workshop on Anger Management she refused saying that as an Adlerian - all anger has a purpose and it can be a positive or a negative emotion.

Some of the purposes that anger might have would be to help us to defend ourselves against aggression or it might propel us towards doing something to create change, fight injustice or defend others. It might also help us to feel more significant and move away from a feeling of inferiority or it might be to help us to achieve revenge over someone who has hurt us.

Anger could also let us off the hook to free us from doing something we don't feel up to. It might help us fight in order to win, or expressed anger might be to keep someone's attention focused on us. When anger is a negative goal, its roots lie in discouragement, when anger is a positive goal, its roots lie in the recognition of our need to connect our need to count or to matter, our need to feel capable and our need to have courage.

If we can understand the goal of our anger, then there are ways in which we can choose to respond in a positive way.

The week progressed with practical experiential exercises causing much group bonding, self-realisation and fun.

Alfred Adler (1870-1937) was an Austrian medical doctor and psychologist. He was the first major figure to break away from Psychoanalytical model pioneered by Sigmund Freud and he founded an independent school of psychotherapy, as well as a unique model of personality development.

The school of psychology established by Adler was called Individual Psychology. He construed the meaning of Individual to be indivisible - i.e. holistic and this is one of the distinguishing features of the Adlerian model, now known as holism. Rather than viewing the individual personality as being in conflict, driven by unconscious forces and drives, Adler's view was that behaviour was largely purposive and that understanding of the purpose was a key task of therapy and change.

Another feature of Individual Psychology is that its students have always been a mixture of professional and lay people. Principles of equality and democracy are fundamental to the Adlerian approach.

Adler died suddenly of a heart attack while on a teaching tour. In the years immediately prior to his death, he was based in the US and fortunately had taught there. One of his students was Rudolph Dreikurs who was instrumental in the development of parent education groups. Such groups are a vibrant part of the world wide Adlerian network today.

# Workshop Review

## MINDFULNESS WORKSHOP

Presenter: Dr Michael DelMonte

Date: 6th April 2013

Reviewed by: Richard Bury

Venue: Dublin

Dr Michael DelMonte completed his PhD on Mindfulness (Psychosomatics) at Trinity in the 1970s. At the time people, including his doctoral supervisor, thought he was crazy as the topic was regarded as being alien. When, in the 1990s, an interest in Mindfulness developed in both the USA and Japan Michael set up an international network of academics who meet every 2 years and produce a book on the topic. John Kabat Zinn is a founder member of the network. A senior clinical psychologist, Michael now practises as a psychoanalyst / existentialist psychotherapist.

The origins of Mindfulness were traced back to the Hindu Upanishads of three to four thousand years ago. Yoga was the first method of practising Mindfulness. An historical line of practice was traced through the major religions, including the Christian Desert Fathers, up to the development of Gurdjieff's Fourth Way, Psychoanalysis and Gestalt. When, in 1976, John Kabat Zinn developed mindfulness stress reduction (in the USA) its principals were introduced to mainstream psychology/ psychotherapy and quickly gained favourable attention.

In Buddhist psychology the construction of happiness is a social thing, something to be learned. It is about intentionality and the Buddhist way is via the eightfold or middle path. Both Aristotle and Confucius promoted this "mean". Beware dogmas, nothing is rigid, attachment and loss are two sides of the same coin. There is no "them and us" dichotomy, rather a socially aware interdependence befitting a relational self. Here, a connected mindfulness (social, ancestors, lineage) permits flow in time and space.

Mindfulness practise interrupts the urge to disclose conscious issues while quiet reflection (meditation) can bring inner conflicts and issues to mind. Mindfulness has two parts (duality) to it: the fallow mind and the empty mind. So, there are two main types of meditation. The first, Concentration, has the goal of narrow focus and deep absorption. It blocks cognitive structuring and weakens psychological defences. It creates a "fallow mind" which leads to catharsis and unstressing. The exercise Michael gave us was to close our eyes and be guided by him into our corporeal selves and right down into our sub atomic particles.

The second type of meditation is called Samatha and it is non-selective, tranquil, silent, an "opening up" or emptying. There is a communion of feeling, a sense of formlessness in the process which allows for a sense of eternity and equanimity. Impermanent, changing, without ego function (form) this is the path to Nirvana or non-distraction. The exercise for this took us out of ourselves into the planet, the universe, the cosmos, the galaxies and out into furthest and darkest space.

Freud's notion of free association resonates with the "choiceless awareness" practised in mindfulness. Jung's statement that everything is mediated by the senses – that mind comes before matter – asserts and underpins the centrality of mind in Mindfulness. Michael quoted several references from Jung, two of which resonate: "What you resist persists" and "Your vision will become clear only when you look into your heart. Who looks inside awakens". So, the mindfulness journey leads to non- judgemental "bare witnessing", the ability to detach and observe and to stay with that experience (Sati).

Finally Michael stressed that for practitioners psychotherapy comes first, that mindfulness (in eight classes!) is not a panacea but rather the fine tuning, an intervention that will not be suitable or appropriate for certain clients but beneficial for others. For the therapist, mindfulness practise can enable deep listening and receptivity - while it does require a sense of decorum, distance, of not "getting colonised" or losing control in the work. On a personal level mindfulness can allow us to operate on the instinctive, conditioned personal, social and transpersonal levels.

A very enlightening and engaging workshop, we were left remembering Michael's quote from Rumi: "Keep your gaze on the bandaged place. That's where the light enters you".



# LETTERS TO THE EDITOR

Éisteach welcomes members' letters or emails. If you wish to have your say on either the contents of Éisteach or on an issue that concerns you or you feel strongly about, please send your views to:

e-mail: [eisteach@iacp.ie](mailto:eisteach@iacp.ie) or  
Éisteach, IACP, 21 Dublin Road, Bray, Co Wicklow.

We hope the 'Letters to the Editor' section will become a strong feature in each edition of Éisteach. For that to happen we need your comments and views. We look forward to hearing from you.

## THERAPEUTIC ORIENTATIONS:

Dear Editors,

I have been disquieted in recent years by a tendency, which I seem to have observed amongst therapists and trainee therapists, to regard the various therapeutic orientations primarily as collections of different techniques.

Each orientation emerged from, and has evolved over time, its theoretical framework to do with valuing and understanding how as humans we think, feel, act and seek meaning in our lives, and what might lead to the fulfilment of our potential. By under-emphasising the theoretical framework, the tendency (to equate orientations with techniques) has a reductionist effect on the wholeness of each historical tradition. And by implicitly separating techniques from their theoretical underpinnings, the tendency moves therapy in the direction of a mechanical and instrumental interaction. In the case, in particular, of the person-centred

approach, it misunderstands the essence of that approach – clearly stated by Carl Rogers - which relies on the embodiment of certain personal qualities by the therapist without dependence on specific techniques.

I hope that my observation of this apparent tendency is inaccurate and look forward to replies to Éisteach confirming that this is so.

Yours etc.,

IAN WOODS

## WHERE TO NOW?

Dear Editors,

I am writing to you as the new academic year begins and I am filled with the frustration of not being able to practise in a profession that I have been proud to have served over the past five years.

All the sources of my referrals have dried up and I have had to eventually let go of the rented room that I had so carefully chosen because of lack of clients. I have held workshops but the cost of renting accommodation and publicity made them non-viable. I have approached organisations on a voluntary basis but find that course providers of counselling and psychotherapy courses seem to have a monopoly on these as well.

Does the IACP have anything to offer to me at this time when initiative is not enough?

Yours sincerely,

FIDELMA MCKEOWN MIACP  
CLONTARF, DUBLIN 3



## *Invitation to submit an article for Éisteach*

**We would like to invite you, the Members, to submit an article / letter / therapist dilemma for inclusion in Éisteach.**

**We welcome articles that promote improvement in clinical practice, research and that provoke thinking on the wider issues, to include the social, cultural and philosophical relevant to counselling and therapy. We also welcome letters to the Editor, therapist's issues and questions, book and workshop reviews.**

**Full Author's Guidelines are available on the IACP website, [www.iacp.ie](http://www.iacp.ie)**

**To submit an article to Éisteach, please send your manuscript electronically by e-mail attachment to: [deirdre@iacp.ie](mailto:deirdre@iacp.ie).**

### **Regional AGM Reminders!**

**MIDLANDS REGIONAL AGM:** Tuesday, 15th October 2013 at 7pm at the Grand Hotel, Moate, Co. Westmeath.

**SOUTH EAST REGIONAL AGM:** Saturday, 5th October from 1.15pm - 1.45pm at the Newpark Hotel, Castlecomer road, Kilkenny.

**WEST/NORTHWEST REGIONAL AGM:** Saturday 5th October 2013 from 10am - 2.00pm at The Family Life Centre, Boyle, Co. Roscommon.

**NORTHERN IRELAND REGIONAL AGM:** Saturday, 30th November 2013, at 4.30pm at the City Hotel, Derry City, Co. L/Derry.

**THE SOUTHERN REGION AGM:** Saturday, 9th November 2013 from 2pm - 6pm at the River Lee Hotel, Western Road Cork (formerly Jury's Hotel).

# Therapist Dilemma

The editorial board introduced Chiron's Corner with the hope of encouraging more involvement from readers and to generate discussions about topical and relevant issues. Unfortunately this vision wasn't fully realised. Research with our readers showed that one of the main sections you enjoyed was our Therapist Dilemma. So it is now officially back by popular demand. Nonetheless, we are still eager for your involvement, your ideas and thoughts, and replies to these dilemmas. Unfortunately, we had no response to date for last issue's dilemma.

Let's hear about what you think about this particular scenario...

Dear Editor,

I have been counselling two individual clients over the past two years. Each has primarily been dealing with issues concerning their childhood but in recent months both have started to deal with issues surrounding their current relationships.

At their last individual sessions both clients asked if I would see them with their partner for couple counselling. I graciously refused their requests citing good ethical practice. However upon further discussion I became aware that in their view a conflict of interest would not arise as I had been counselling them both.

I have a busy practice and the initial referrals for counselling had come from different sources and I did not make a connection between the two individuals.

I am left with a feeling of betrayal and wonder if I played into the drama triangle they have created over the past two years. It has also led me to question the efficacy of the interventions that I have worked through with each individual?



**Send your  
Dilemma and /  
or replies to this  
issue's Dilemma  
to:**

**Dialogue,  
Éisteach,  
21 Dublin Road,  
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Co Wicklow or**

**eisteach@iacp.ie**