



International Society for the New Identity Process

Daniel H. Casriel, M.D.
Founder

July 1988

Letter from the President

In a short time we have a chance to take time for ourselves and for ISNIP. Most of us have to limit our response to the demands made on us.

I am looking forward to sharing myself with others who also have hopes and dreams for ISNIP and for the future of our children and our world.

Alice Miller, who has written the book "For Your Own Good", has graphically portrayed the continuing process of sowing hatred into the children of our culture. The seeds of war are being planted in the same fertile soil.

Our tiny organization is like one candle burning in the darkness. It may not make any difference. But I have committed my life and resources on the firm belief that love is still stronger than indifference, and joy and peace are destined to triumph over any odds.

I am looking forward to being with you in Stockholm.

Love,
George

Letter from the Editor

Greetings!

As you will note, the second half of Gunvor's interview with Dan is found in this newsletter. Enjoy!

The conference is only a month away. Unfortunately I will be unable to attend. However, any suggestions, additions or corrections for the newsletter can be given to Ron Kissick. If you would print them on paper and give them to him, I would deeply appreciate it.

If there is someone attending the conference who would be willing to write up the conference highlights for the next newsletter (October), **please** contact Ron or me. Thank you!

I'll be thinking of you all — have a wonderful time!

Hugs,
Pat

An Interview With Dan Casriel

This month's main article is the second part of an interview with Dan Casriel done by Gunvor Gustafsson on August 24 and 25, 1978. We hope you will learn and enjoy from this interview.

Bonding and Using a Person as an Object Use vs. utilize

GG: About the bonding concept again. Is there a risk of looking upon the other person as an object? You talk about the **biological** need for bonding, and you compare it even with the need for food, and food, of course, really is an object - it is nothing that you have a relationship to. What is your view of this aspect of bonding?

DHC: I'm not quite sure of the question.

GG: Well, is there a risk that the other person becomes an object? When you emphasize the biological aspect of the need for bonding.

DHC: I still don't know what you mean. What do you mean by the person becoming an object?

GG: You **use** food, you have no relationship to a steak or a hamburger, you just use it for you, you use it for yourself. Isn't there a risk that you just use and throw away. Now, that's one thing that I have heard in Sweden, people really being upset with your view of people, of man, because it's just use them and throw away, use another one and throw away.

DHC: Except, you see, you see it as use - I see it as utilize. And it's different. People need this utilization, people need to be utilized. It enriches **them**. It isn't that you devour them like an apple, and then throw the pits away. It's like a violin, that has to be played on, to be utilized. It's like. . .

GG: There **is** such a thing as using other people, though?

DHC: You can use other people, but, you know, it's up to each individual to allow himself to be utilized, but not used.

GG: How do you convey that to people who come to your workshops, the difference here?

DHC: I tell them they don't have to do anything they don't want to do; that they are free to say no, free to pull away any time they don't feel comfortable; if they feel that somebody is beginning to use them, to just push away and confront the person; to separate use from utilization. And use has a connotation of . . . of . . . not destroy, but of . . .

GG: Abusing?

DHC: . . . of using up, of in some way destroying gradually, a person. I don't mean it that way. Perhaps I should say utilize. Just as a violin is enriched when it is played upon,

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just as. . . a person is enriched, if he has frequent interactions. It's a practice that a person needs to do. It's like utilizing part of his body function that needs to be utilized, to be exercised. Just like a person will utilize his own legs to run. You know, it enriches the legs, it strengthens the legs. It doesn't take anything away from that person. And I see it the same way, that people need to be utilized. It's a part of a biological need, to utilize and be utilized by each other. And perhaps the word use is a bad word, and perhaps the concept of utilization, that people need to be utilized and utilize each other - it's part of the human need for bonding.

Bonding and Relationships

GG: Hmm. O.K. Do you see bonding as a more important need to be fulfilled than a need for relationships? How do you see the difference between bonding and relationship, and what. . . ?

DHC: Well, I don't think you can really have an emotional relationship without that bonding. You can have utilitarian relationships: If you go to a restaurant, you have a relationship with the waiter, he asks you what you want to eat and. . . You don't need to be bonded with this type of relationship. But a relationship where you share feelings with each other, where you invest a long period of your time with each other, then there should be bonding.

Now, tragically, western man, 20th century Western man, is frequently forced to be involved in extended relationships with people, with whom he is not bonded. And this causes alienation and isolation and tension. I'm sure that primitive man, who after all lived for about two million years - except for the last ten thousand years - their relationships were bonded. They went hunting and fishing together, and they had emotional communication. They **had** to, to survive. They would have been destroyed or destroyed each other if they didn't. And so, I think it is part of the human need to be bonded with people they have extended relationships with. Whether it is people you work with or people who matter.

I think this is part of the alienation we feel. We use the word alienation: People feel alienated in a crowd, people feel alienated at work, they feel alienated at home, they feel alienated all over their lives. It's because there's no bonding. As soon as there is bonding, there's no more alienation.

GG: Hm. And Dan, then, my next question is: You concentrate totally on the bonding aspect here in the process - is it that you mean that if people really learn how to get bonding, the relationship won't be any problem any longer or. . . ?

DHC: Yes.

GG: Are you sure of that?

DHC: Their relationship with people in general won't be any problem.

GG: It won't?

DHC: No!

GG: It's a different thing, though, to be bonded, to share emotions for a short while on the mats for instance, and to go on in a continuous relationship. It's quite different kinds of. . .

DHC: Yah, because, in the bonding on the mat there are some attitudes that come up that can be dealt with, right then and there: the fear of bonding per se. In ongoing relationships there are other pathological attitudes that have to be dealt with.

GG: Yes, and how do you deal with that?

DHC: As they come up. A person then has to start to talk

about his relationships and what comes up. Now, in an outpatient setting all we can do is to talk about how they interact in the group, which is a very small, miniscule, perspective of their total personality structure. In a residency program like AREBA we really see that in magnification in all the aspects of the relationship. So the group per se, you know, only has one aspect of the person's relationship, but. . . Individual analysis had only one aspect of the person's relationship. The rest was all hearsay, that the patient brought in to the analyst's room. And it was all distorted by his own. . . prejudicial objectivity. He was as objective as he could be, and he was still prejudicial, according to his experience.

GG: Hm. But you stress relationships very little in your therapy. All the emphasis is on bonding.

DHC: All right. That's because. . .

GG: I think there's a risk that that distorts people's view of what life is about.

DHC: Well, you see, the first part of this process is to experience bonding, and deal with the emotions that have interfered with this. And in the process to learn about emotions. **Then** we could start to extend this in the person's life.

In AREBA this is dealt with all the time in terms of relationships, **all** the time. They don't talk about the concept of bonding per se. They talk, you know, of what are they doing with each other. In AREBA we try to have an experience and observe their relationships with authority, which is the staff; their relationships to their peers, and later their relationships to underlings, which means the newer residents, that they become senior to - they are responsible for a work group, for instance, where **they** are in charge, that type of relationship. These are the three. . . (telephone call)

GG: O.K. This relationship vs. bonding again. When you talk about bonding, you point out that there are no commitments and no obligations and all those things, but that does enter into relationships. And I know that some people really think that bonding is all there is and really get fucked up about the commitment and obligation part.

DHC: No, no. I tell people it's just the beginning of a relationship.

GG: You do?

DHC: That you can't have a relationship without this.

GG: Yes.

DHC: You can't have a significant personal relationship without. . .

GG: You tell that?

DHC: Yes. And that's just the beginning of a relationship.

GG: I think it's important to stress that.

DHC: Maybe it has to be spelled out more, but all right. . .

GG: I think that there are many things that are very self-evident to you that. . .

DHC: Yah.

GG: You don't spell out, and people get. . .

DHC: Maybe it has all to be written down rather than lectured.

Hedonism, Pain, and Growth

GG: Might be, yah. O.K. Another thing. About this hedonism. I remember out in New Jersey this last training workshop talking with you, and you said something about trying to find the least painful solution in a particular situation. And of course, in the long perspective, that's the right thing to do. But don't you believe that avoidance of pain

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may hinder growth?

DHC: No, I don't think that pain grows - I think love grows. I think in my process you're going to have pain, no matter how well you try to avoid it. But I don't think you grow from pain, I think you grow from love. I think love is the sunshine. I really do. I don't think that pain... That's the price we sometimes have to pay in the pursuit of love and pleasure.

GG: Yah.

DHC: I've never seen any animal or plant grow with pain.

GG: You know, in the humanistic concept, all these emotions, pain and fear and... really belong to the growth orientation.

DHC: Well, I think as we grow we're going to deal with all our emotions. As we grow up, we're going to have pain, we're going to be able to deal with pain, of course. But I don't think that you have to go out and get your head hit against the wall to be sure that you deal with pain.

GG: Yah. Sure.

DHC: You know, in a way that's almost... that's masochism. And, you know, there are people who worship the devil, and people who worship pain, as some sort of strength. You know, when does that end? When does that testing of pain end? And what do you need it for?

Now, there **are** things that are painful in growth. A person who wants to start to run for instance. He's going to get exhausted - it's painful to run. When I played the base fiddle, I got a lot of pain in my fingers in the beginning. So sometimes in the pursuit of the goal that you want, there is pain, which has to be overcome.

GG: Yes. That's what I mean.

DHC: But I would not like to see a person feel, I am now growing by exercising pain.

GG: No. But still, if you really just want the pleasure, you may escape the growth.

DHC: No, I don't see how you... No! That's not true, because... I went to medical school for pleasure - boy! - for the pleasure of being a doctor, and - oh, boy! - I went through a lot of pain.

GG: Yes. All right.

DHC: I went through a lot of pain. But I was not going through pain, you know, as an exercise of pain, and I don't want to have anybody who listens to me infer that I say we have to have pain to grow.

GG: No.

DHC: There are enough of pains in life, and frustrations in life, in our pursuit of pleasure. We have to be able to **deal** with those frustrations and pain, and stick it out. But to think, "Well, I am having all this pain because it's building my personality", that's a type of fallacy. Yes, a person has to learn to deal with stress and pain. To go to your dentist to get your teeth fixed... I just came to the dentist - it was painful.

GG: Yes. But also what you said about medical school...

DHC: But that pain is always in the pursuit of pleasure.

GG: Yes, and the long term goal can entail pain for the present moment.

DHC: Oh, of course! It may mean to give up a lot of immediate pleasures. Now, when I went to medical school, I gave up all social activity except for a few hours on Saturday night. And that was painful. And so, yes, if a person cannot accept this, and recognize why he is doing it... But a person who then has in addition to say, "pain, now, it's growth", it's totally...

GG: O.K. I perfectly agree with you.

DHC: The price we pay for the pursuit of pleasure is to experience the emergency emotions of fear, pain and anger, and we cannot avoid that. Our healthy growth tries to eliminate it as much as possible, reduce it, avoid it as much as possible. But then be able to accept it in a mature way, as much as possible.

Need for Creativity

GG: O.K. Dan, lately you have been talking more about another need that we have, a need for creativity.

DHC: Yes.

GG: Are you beginning to see that as...

DHC: Yes, I see this as a dual pleasure in life. To me there truly are, and should be, two pleasures. One is the pleasure of bonding with human beings. Or maybe the pleasure of bonding with some of these select animals like dogs, which is pleasurable. But basically we have to be able to be bonded with our own species. And this is a pleasurable experience, and I think it is based on nature's built-in survival mechanism. The other is the pleasure of creativity, which is also a built-in survival mechanism.

GG: Sure.

DHC: Primitive man after all got pleasure when he caught the fish and killed the sheep and killed the lion and whatever it was. Or got the berries, found the berry patch. And this gave him pleasure, because it fulfilled a basic need for survival. And as we became civilized, everything that gives us a creative pleasure in some way adds to civilization. Some are very new qualities, some are very... a child building sand palaces, getting pleasure out of it. It's the future, potential architect. So our own pleasure in our own creativity will add to the creative portion of the world.

GG: Hm. Dan, do you think that we can get just as fucked up in that area, as in the bonding area?

DHC: Of course.

GG: And that that has to be dealt with?

DHC: That has to be dealt with, too. But I think what happens very early, the basic experience that the infant feels is, "I am good enough", "I am loveable". If he feels that he starts to produce his own things, and enjoys his own productivity, he enjoys his own creativity. If he does not get this sufficiently, he sometimes finds that he'll get approval for his performance, in which case he starts to perform. His creativity is not for his own pleasure, but for other people's approval, which he interprets - misinterprets rather - as love. And that starts a pattern, which to me is highly destructive. So many, many extremely creative people get no pleasure out of their creativity. Their creativity gives them tension and anxiety, and they get... I shouldn't say they get no pleasure - they get a miniscule bit of pleasure. And they look for their pleasure in other people's approval. But they gradually find that the approval is not enough, and they get depressed, and they stop creating. Many creative people get into depression in their forties and fifties and no longer can produce, and it always zeroes in to "the pleasure I got is not enough, the approval I got is not enough". To me it's very... I **know** it's true. And it's so logical.

GG: Hmm. I think this is an area where the process could develop.

DHC: Yes. But you know, if a person comes in for a three day workshop, what am I going to deal with: his creativity or his bonding? For **advanced** people we could have

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workshops in creativity. For advanced people we could have sexuality and sensuality workshops. We started to introduce that. But...yah, we don't have the ability to do this in the three day workshop. Perhaps in Sweden we can start to define the workshop: bonding workshop, the relationship workshop, the creativity workshop, the sexuality-sensuality workshop, or a whole spectrum of that. We could do that. A part of the relationship in group...we had couple's groups, we had family groups. This is all relationship therapy. But we can't put them in those groups, unless they know about bonding. It's like putting a person into algebra, when he doesn't know mathematics. It's an advanced course. Perhaps we should spell that out more.

Future Developments of the Therapy

GG: Hm. OK. What are your feelings about...how do you think your therapy will develop in the future? Do you see any trend that you are going to do more about?

NIP in Schools - Preventive Psychiatry

DHC: Yah, I really feel that my therapy really should be in every school system. We talked about just these basic things: how we utilize a person, the concept of bonding, the concept of creativity, the concept of relationship, the concept of sexuality and sensuality and other pleasures. Now, all these things can be taught, and should be taught. I really think it belongs as part of the educational system. It is just as essential to teach the child and the adolescent this, as it is to teach them reading, writing and arithmetic. Often, as soon as you have taught them reading, writing and arithmetic, they are unhappy and miserable and can't use it anyway, because they are too drunk or full of dope. So I really feel that my basic process, which is education and reeducation, should be in the hands, sooner or later, of the educators, and that's really preventive psychiatry. And we wouldn't need the doctors to deal with the problems. Because there wouldn't be any problems. I really see this process gives hope for a revitalization to Western culture. I really do.

Influences

GG: Hm. OK, Dan. Going back instead: What have been your influences? I know about psychoanalysis and adaptational psychodynamics and Synanon, but what else? Have you been reading Perls and Ellis and...?

DHC: No, no, no. My basic influence is my Process, personal experiences. The two trainings that I have that really influenced me is my Columbia training and Synanon. But there are other factors that really had a profound influence on my mind. And one was my experience in Okinawa, where I became aware of culture and cultural differences. I was able to see how different cultures gave rise to different personalities, different personality structures.

I was never a firm believer in Freud, who believed in a type of biological conditioning, because he really didn't take into account culture. Most of his anthropology was based on Frazer's work in the 1880s and 1890s, and that was **very** limited. And most of his concepts of anthropology were strictly confabulations - Totem and Tabu - strictly confabulations, hypotheses of what was going on in primitive society. I don't think this went on in primitive society at all. I think what Freud did was to take Victorian society and say, if the primitives were like Victorian society how would they have been able to deal with this. And they would have killed their father and hate their father and...whatever. But...Freud

was extremely culture bound. He was myopic due to the Victorian culture, which...

GG: Do you think **you** could have stepped out of your own culture? You must be culture bound, too, mustn't you?

DHC: Well, I think we are all culture bound.

My analyst...Of course, I went to Kardiner because he was an anthropologist. I read his books on primitive societies before I went to him - that's what brought me to Kardiner. And I found out then that he was part of Columbia Psychoanalytic Institute, and that's what brought me there; 200 of us applied and 28 of us got in. Then I had a lot of problems. . .

But I see the human being, I think I can see the human being below the culture. I think my three years in Europe have really enriched me. Even though European culture is in many ways similar to American culture, I've seen the differences. I've seen the differences between the Swedish culture and the Italian culture - there's a difference. I've seen the French, I've seen the German, I've seen the Swiss, I've seen the Dutch - they're all different. Now again, I haven't seen every Swede in Sweden, I haven't seen every Dutchman, but the people I've seen - they have all been selected out for whatever reasons - but the ones that came to me are different. I've seen the cultural differences.

GG: Dan, what about influences on direct techniques, like this go-around and repetition of a phrase? Now, I've read about that in Perls. Did you...You must have picked it up somewhere!?

DHC: No, I didn't...I picked it up from my own practice. I didn't read all these books. I was never in group therapy. Never once.

GG: But you might have read?

DHC: No, I didn't read Perls. I was in one of his workshops, once I sat for about five hours with about forty professionals, and I was bored to death. Because he picked one patient, who gave him a dream, and then he had her act out the dream, which I found very boring for so many hours. I wasn't impressed at all. I saw him when I was already running groups, and I felt the way I could have spent this afternoon could have enriched many more. I saw Lowen once, five years, six years ago, we had workshops. And Janov - of course, I preceded Janov. He just preceded me by his book by one year, his came out in 1971.

GG: What about Rogers? Have you been influenced by him?

DHC: No. I have known Rogers, but again I wasn't influenced by him. He was influenced by me, by the way. Before, he was doing Rogerian therapy, which was non-directive therapy. Of course, he is an old man now. But I was the one that introduced him to Synanon, and...he sent his...I don't know if **he** sent them, but two of his staff were here for training, nearly eight years ago. And I know **he** has changed his process. But, no, I haven't been influenced by anyone, except what I learned professionally. Now, I think also, though, that people who are acute observers of human beings will see the same things - I am sure we have things together.

Psychoanalytic Concepts

GG: OK. What about psychoanalysis - do you still think in their language and concepts, and just translate it when you are in groups, or don't you need their concepts?

DHC: Well, at Columbia we were trained in two analytic

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areas, one was Freudian, and one was adaptational. My theory is really a major modification of adaptational psychodynamics, and that's how I think. I don't think in Freudian psychodynamics. Except occasionally, when certain words are useful, like ego or superego. We all seem to understand those words; they are symbols of a certain type of knowledge. Occasionally I use superego or ego. But I think in my, I really think in my theory. But my theory is an extenuation of adaptational psychodynamics, and modification.

Personal Motivation for Leaving P.S.A. and Developing NIP

GG: OK. A quite different set of questions: about yourself, and what you think made you turn from psychoanalysis to encounter and scream therapy. Was it a need of more stimulation?

DHC: No. First of all, nothing made me change. I wasn't pursuing a change. It just happened.

GG: Hm, but what made it happen? What in you, what needs in you?

DHC: Fortuitious circumstances and observations of what was happening in the group. And what had happened to me: My experience with the encounter group in Synanon was very profound. As I've mentioned, I subsidised Synanon coming to the East coast, for several reasons: I wanted to enlarge Synanon, and I also wanted to continue the encounter group. After I was in the encounter group for a year and I saw its effect on me and others. I introduced the encounter group with two Synanon leaders with my selected analytic patients. And that experience in that group was so electrifying, and breathtaking, and therapeutic, that it was repeated, and that's how it evolved. By that time I broke with Synanon, and I already had a plan with the Mayor, to establish a Synanon here in the City, subsidised by the City. My introduction to Synanon was from a grant from the National Institute of Mental Health, for the preparation for setting up a facility for treatment; Daytop Lodge was already...

GG: Yah, I know about this, you know. What I am trying to get at is, if there are any kind of countertransference wishes that you get more fulfilled in this kind of therapy - like you get more stimulation, you get this bonding...

DHC: Oh! I personally enjoyed it much more. Oh! It became much more... I became active, instead of passive. I became part of the group, instead of behind the couch. I was able to get humanized myself. It was much more fun relating to people. Yes, it was much more pleasureable for me. But I didn't do it because it was pleasureable for me. I did it because I saw the change that was happening in patients. I had simultaneously groups and analysis going on for about six years, with one or two exceptions. But I noticed when the analytic patients went to groups, they changed, and they no longer needed analysis, nor did they want it, nor were they analyzeable in the classical sense. They wanted to sit up; they wanted to relate to me as a peer, as an equal; they talked dynamically; they were much more efficient, effective; they got to their problems very quickly, they didn't have to talk around. And also I started to learn what was important. I no longer, you know, could operate as the analyst, because I didn't want to waste their time and my time, and their money. So I could no longer consciously remain an analyst, because the process to me was no longer

efficient, and secondly I didn't want to sit behind the couch.

You know, I mentioned the fact that I think that for people to do this, the analytic process might be prerequisite. But I don't think the analytic process as people out there practice it. Perhaps we have to develop an analytic process, utilizing this knowledge. I don't think a person needs five years of analysis to understand human behavior or himself. Perhaps what we could use really is a better training program, to understand transference and deal with it. But we need that type of training which I got in analysis, which I think now we might institute a new type of process. Maybe that's something you'd like to do? That would be valuable.

GG: That would be valuable.

DHC: Of course, we need somebody who has been analyzed, to be able to utilize their concepts.

GG: And it is necessary that you are not the only person in this surrounding who has that experience, because things can really be developing in a bad way.

DHC: Yes.

GG: OK. Dan, in your therapy you sometimes see very quick and dramatic results, and it can lead to the group leader being seen as a kind of magician, really omnipotent. Do you feel a temptation to go into that role?

DHC: No, I never have. I've seen my group leaders go into that role. I never have. And I think the danger is when a person is just doing the one thing all the time. I've seen this with my group leaders, I've seen this with the top of the staff in AREBA and in Daytop. Their vision narrows, they start to see their facility or their treatment as the whole world, and they start to feel they are god or king. If you read my book on Daytop, you'll hear about a rebellion that occurred, when the senior paraprofessional rebelled and took away 80% of the staff and 90% of the patients, or vice versa. And I've had to fire two of my senior men upstairs in AREBA.

GG: Hm. Dan, even if you are not tempted to go into that role, do you think that there's a risk that the patients still stay in that wish for omnipotent help?

DHC: Oh! Anybody who is sick! If you read my little unpublished brochure on peer relationship: the individual who feels frightened and sick is always looking for magic.

GG: Yah, and don't you encourage that in this therapy?

DHC: No, I try to prevent that, because that's part of the transference. I try to interdict and prevent the growth of the transference. To me transference is countertherapeutic. Because what you do is to develop a neurosis. And why develop another neurosis? In analysis you need to develop that transference neurosis, and I know what I went through with me - it was very painful and hard.

GG: I know.

DHC: We don't need to do it.

Concept of Identity

GG: OK. One last question. You call your process the New Identity Process. What do you mean by identity? What's that concept to you?

DHC: A sense of self, an awareness of oneself, that you really become aware of a new self, that you're not what you thought you were, that you're loveable, good enough and so forth. And you really get a different sense of yourself.

GG: It's your self picture that changes, is that it?

DHC: It's your picture of yourself that changes. And when you really experience that, you feel a change - that's your new identity, or perhaps it should be called your true identity. It's the person you were born to be, but you were crippled.

GG: OK. Thank you.

Society Calendar Notice

We're interested in what you're doing! If you're planning treatment/training events in the New Identity Process, let Society members know by listing the events in this calendar. Send along a paragraph of pertinent information. A charge of \$20 per event will be made, up to \$200 annually. Please send check along with listing to the newsletter editor.

(*Qualifies for Continuing Education Credit in the New Identity Process.)

July 16 – Bethesda, MD (near Washington, D.C.) NIP Workshop

*Led by: Caroline Sperling, Ed.D., ABPP, Teaching Fellow

Contact: Dr. Caroline Sperling, Director, or
Norma Papish, Administrator
7312 Millwood Rd., Bethesda, MD 20817
(301) 986-9274
Workshop hours 9 a.m. to 5 p.m.

Aug. 19-21 – San Francisco, CA Bonding Weekend Intensive

*Led by: Jessica Mercure, M.A., MFCC, Fellow

Contact: Jessica Mercure, M.A., MFCC
1909 Addison, Berkley, CA 94704
(415) 232-8499

Aug. 20 – Bethesda, MD (near Washington, D.C.) NIP Workshop

*Led by: Caroline Sperling, Ed.D., ABPP, Teaching Fellow

Contact: Dr. Caroline Sperling, Director, or
Norma Papish, Administrator
7312 Millwood Rd., Bethesda, MD 20817
(301) 986-9274
Workshop hours 9 a.m. to 5 p.m.

Sept. 15-18 – Wildwood, NJ NIP Workshop

Just like the Bahamas and Antigua but you can drive there in several hours. Ocean-front apartments with balconies, kitchen facilities, bath and shower. Four persons per apartment, two adults per room. Workshop costs \$250 per person. Room for three nights (Thurs.-Sat.) \$43 per person. Sign up for Sunday room optional if immediate reservation is made.

*Led by: George Rynick, Teaching Fellow, Ron Kissick, Teaching Fellow and Pat Kissick, Fellow

Contact: George Rynick
Human Resources Unlimited
21 Mitchell Ave., Binghamton, NY 13903
(607) 722-8900
or
Ron Kissick
Personal Resource Center
435 Main St., Johnson City, NY 13790
(607) 798-8199

Oct. 8-9 – Cheshire, CT

Autumn Renewal Workshop

*Led by: Ron Kissick, Teaching Fellow, Pat Kissick, Fellow, Yetta Lautenschlager, Fellow and Tom Campbell, Fellow

The weekend schedule will run from 9 a.m.-6 p.m. both days. The \$75 registration fee is due by **September 15**.

Contact: Tom Campbell
406 Orange St., New Haven, CT 06511
(203) 562-4235

Oct. 15 – Bethesda, MD (near Washington, D.C.) NIP Workshop

*Led by: Caroline Sperling, Ed.D., ABPP, Teaching Fellow

Contact: Dr. Caroline Sperling, Director, or
Norma Papish, Administrator
7312 Millwood Rd., Bethesda, MD 20817
(301) 986-9274
Workshop hours 9 a.m. to 5 p.m.

Oct. 27-Nov. 3 – Maui, Hawaii NIP Workshop

*Led by: Jessica Mercure, M.A., MFCC, Fellow

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