



# International Society for the New Identity Process

Daniel H. Casriel, M.A.  
Founder

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## Letter from the President

Greetings from our meeting in Stockholm! What a lovely place to have the Conference. Everything was just right from the delicious meals to the excellent presentations. Those who were able to come for the pre-conference workshops reported that they got a great deal out of them.

As President, I reported "a difficult year". I trust that the 1988-89 ISNIP year will be much better. In fact, it is already. Johan Maertens and Peter Geerlings are working on theoretical background for presenting NIP outside our fellowship. Bill Wolfson and I are working on an outline of NIP as we would define it for research planning. We are meeting in October in Holland to integrate some of this preliminary work.

Over on the "West Bank", we are already making plans for the 1989 Meeting in New Haven, Connecticut. Please send in any suggestions to Yetta Lautenschlager.

Let's make things work together, and enjoy ourselves.

Love and Hugs,  
George M. Rynick

## Letter from the Editor

Greetings!

A huge thank you is in order for the Swedish Society's hosting of the 1988 ISNIP Conference near Stockholm. Word has it (from a variety of sources) that it was a well-planned, informative and FUN conference for those who participated. And for those of us who couldn't make it — we missed out!

I have corrected the numerous addresses, misspellings, etc. that I received for the Society listing. Please check, and if other corrections are necessary, send them to me (*printed or typed*).

Thanks to Jurgen Kremer for the excellent main article.

Note the listing of committee chairpersons — just in case you're needing to be in touch with them.

Hugs to you all,  
Pat

## Welcome Swiss Chapter

The Societé Suisse Pour le NIP & Bonding Therapy has been added to the International Society. Officers are Claire Colliard, President; Thomas Renz, Vice President; and Nimet Salem, Secretary.

## CHOICES

An Introduction to Jerri Sousa's Book: *Bailing Out of Homosexuality*  
by Jurgen W. Kremer, Ph.D., Society Teaching Fellow

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NOTE: This article is the introduction to the book *Bailing Out of Homosexuality* by Jerri Sousa. The book can be ordered at \$4.95 plus \$1.50 for shipping from: A Better Choice, 559 Telegraph Canyon Road, Suite 352, Chula Vista, CA 92012-6436. phone (619) 482-0234.

I. In 1978, while I was an intern at the Casriel Institute in New York, I participated in one of the Institute's weekend workshops. On the second day Dr. Casriel suggested that I work with one of the new clients, a man by the name of Jerry who had begun his therapy in the New Identity Process. As everybody was beginning their emotional work, I also began to guide Jerry through a sequence of intense cathartic experiences. I expressed my emotional support and love verbally through encouragement and empathy as he was in the throes of painful early memories. All the while I was holding him in the customary bonding position, which allows for the physical closeness and comfort necessary for the reliving of anguishing and agonizing experiences. Jerry was screaming and crying and sharing his story with me. I could sense the gradual relief resulting from the expression of his feelings. But as I was holding him, I was disconcerted by the feeling of his body. By all appearances, he was a man. He had worn a man's glasses before, he was now screaming with a deep voice and his beard was the epitome of maleness. However, I could not help but feel his body as a woman's body. I failed to make the visual appearance of his maleness match the femaleness that my body sensed as I was hugging him. This jarring inconsistency of my perceptions stayed with me from the time I worked with Jerry at the Casriel Institute to today. After almost ten years I don't remember specifics about the content of his emotional work during that session, but the memory of this disconcerting perceptual experience is still vividly with me.

The man who was Jerry then, is now - again - a woman and her name is Jerri Sousa. She has gone through an extraordinary journey of which I witnessed but a small part. Before I had met her she had undergone a surgical sex change to present herself as a man. She has since then changed her sex back again to being a woman. It was the image of my disconcerting body experience that came to mind first when Jerri Sousa called me recently to ask if I would read the manuscript of her book. She wanted to know whether I was willing to write an introduction. Not having seen her in ten years, I was curious to read about the continuation of her story. What she told me over the phone sounded fascinating.

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Her book, *Bailing Out of Homosexuality*, is the record of her suffering and release from her journey through homosexuality and sex changes. Naturally, this journey is not over, since Jerri is alive and well and continues to grow. But an important segment comes to an end with the writing of this report. The term 'report' is misleading, however, since it is more than that. Jerri's process has resulted in a number of very clear and adamant personal convictions about homosexuality and transsexuality. They carry the stamp of somebody who has suffered and who has found ways to relieve her suffering. Many people will take issue with her assumptions; some are directly contrary to what experts say. To view homosexuality as the acting-out symptom of an incomplete personality is not a popular stance today. The understanding of homosexuality as an addiction for which an AA-like program is appropriate may be even less popular. And others may disagree with her Christian beliefs. But what I think is important to keep in mind while reading this book is the fact that someone who has actually lived as a homosexual (and transsexual) and who has experienced her behavior as acting out symptoms, is able to make suggestions for a route of psychological changes.

The title *Bailing Out of Homosexuality* may have moralistic overtones to some readers (especially in view of Jerri's Christian beliefs); and it may even signal the condemnation of homosexuality as sin by churches. In a largely homophobic society it may be seen to feed fears and prejudices, and further encourage a moralizing attitude already prevalent. These responses may be inevitable. However, I would like to suggest different connotations for the title. Pilots bail out of their planes when a crash seems inevitable. Jerri suggests in her book that there is a way out for those who see themselves on an inevitable route of unhappiness which is similar to hers. Instead of 'crashing' in their unhappiness, they may choose to radically alter their course of action. 'Bailing out' suggests the same radical step as a 'cold turkey' withdrawal of drugs. This book is written by someone who has lived through tremendous unhappiness and believes to have found a way out. Jerri Sousa's larger claims stem from the belief that she is not unique, but comparable in her basic human structures to all her fellow humans - and that, therefore, her way out may be used by others struggling with their unhappiness as well.

Jerri sees the pivotal part of her journey in her psychotherapeutic work with Daniel Casriel, M.D. It is because of this that I want to describe his work in some detail. Dr. Casriel started out as a traditionally trained psychiatrist and psychoanalyst. Later he co-founded the Daytop treatment program for drug addiction and subsequently his own AREBA (Accelerated Reeducation of Emotions, Behavior and Attitudes) center for addicts and the AREBA school for juvenile delinquents. He found that the techniques he used with severely disturbed clients also were very effective with his middle and upper class psychoanalysis clients - in fact, he found them more expedient and effective than the psychoanalytic one-on-one approach. This led to the development of the New Identity Process (NIP) therapy. I never cared much for the name, but it accurately describes the felt sense of clients who have worked on themselves this way. I see it as a very powerful approach to remove the debris of social conditioning and painful personal histories. This then allows clients to develop the chutzpe to create their unique life trajectories based on their individual needs and perceptions. Dan Casriel was a master therapist whose

genius allowed him to synthesize his experience and contemporary humanistic approaches into an innovative and revolutionary therapy. It is unfortunate that he died in 1983 of ALS (amyotrophic lateral sclerosis or Lou Gehrig's disease) when the New Identity Process was still developing further and when much of the detail and research work was still to be done. This may be one of the reasons why the NIP has not received the attention that it deserves. Dr. Casriel has described his approach in the popular book *A Scream Away From Happiness* (1972) and a more professional statement can be found in Corsini's *Handbook of Innovative Psychotherapies* (1981). The latter is probably the most concise and precisely written statement he made on the NIP. Most of his statements were made informally in teaching seminars all over this country and Europe. Many therapy centers in Sweden, Holland, Belgium, West Germany, the U.S. and other countries are using his approach effectively. An international association, founded by Dan Casriel, certifies NIP therapists and encourages the further development of the process. I have been trained in this process and I am teaching it; it is from this vantage point of an NIP therapist that I am writing this introduction, not as an expert in homosexuality and transsexuality.

The NIP is a group process which has two features which help cut through defenses and surface symptoms faster than any other therapy I have experienced myself. One feature is the extensive use of catharsis, where clients reexperience and express full force past painful, fearful and rage provoking situations. However, and this is the second feature, this is almost never done alone, but always while bonding with another person. Hugging somebody else while lying (or standing) is not just an effective therapeutic technique which provides the necessary security and comfort for such rending experiences. But it also serves to begin filling the need for emotional and physical closeness, which in the past had led to tremendous pain concomitant with fear and anger. Bonding helps remove the armor of the old conditioning and facilitates the new conditioning of circuits of love and pleasure. Casriel posits that the need for bonding is the one human need which we cannot satisfy alone - we need others to satisfy this need. If it is not fulfilled, then it is here where most pain hinges. Therefore, the physical act of holding another person may rapidly bring up the feelings of the need for love and pleasure which has been denied in the past. It is astonishing how quickly this can happen. The use of the scream, in addition, serves to cut through intellectualization and other defenses equally effectively. Together both features help to make the NIP effective. But they are also features which oftentimes frighten the newcomer and especially, it seems, the professional.

In order to avoid misconceptions I would like to be very clear that catharsis (screaming, crying, tantrums, etc.) alone is not the magical, quick fix that it was frequently made out to be during the high times of the human potential movement. However, it is an extremely powerful tool in the hands of a professional if used in conjunction with bonding and other techniques which address not only the emotions of human beings, but also their cognitions (attitudes about the self) and their actual behavior. There is no quick fix for any serious unhappiness. Personal change is probably the hardest thing a human being can ever undertake. Even though I have said that the process in the NIP moves quickly, fundamental change also takes considerable time. This is important to keep in mind when you look at the change program Jerri outlines below. If you follow her

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directions - with the help of a support group - then you can get on the road, but it is not a road swiftly traveled. The beacons for the direction of change are fairly clear and simple, but actually traveling that road of self discovery and rediscovery is arduous and time consuming work. This is so even when the pleasure of the closeness and encouragement from emotional peers is not delayed to the end of therapy (as it oftentimes is), but is an integral part of the NIP therapy allowing for faster relief of the immediate psychological pain.

Work in the New Identity Process is a journey of taking responsibilities for one's own life and of discovering and creating one's unique identity. The starting point - after making the important initial decision to begin taking responsibility - is to go beyond surface symptoms and rationalizations to the experience of basic emotions. If one allows oneself to experience the feelings of pain, anger and fear fully and to express them fully, then things begin to open up and one can also begin to feel love and pleasure. At that point we move away from our social conditioning, the expectations of others which have guided us and the negative judgement others have passed about us (and which we have internalized). We look at our deepest programming: Do we fully love and accept ourselves? Are we able to see eye to eye with ourselves in a mirror, touch our entire body and say that we are lovable? Do we feel entitled to **all** our emotions? Do we feel entitled to be here on the earth at this time the way we choose to be? Do we feel entitled to have our needs met? Do we feel the right to live our lives the way we want (including all possible mistakes and insanities)? Are we willing to take full responsibility for our feelings and attitudes - regardless of our history? Do we give ourselves permission to feel pleasure to the hilt? These cognitions (which are really highly emotionally charged attitudes about the self) determine to a large extent how we feel, how we perceive the world and how we walk through our lives. At the root of our programming are experiences which happen before we can even talk. But these experiences, if they are painful, are reflected in a negative internal dialogue. They can be summarized in simple statements - and they can be changed by using simple statements.

Let me use the lack of experienced lovability as an example: If you tell yourself in the mirror or to the members of a group "I am lovable" and if you have not worked on this issue, then, if you give yourself permission to be open to the experience, you will soon begin to feel potentially powerful unpleasant emotions welling up. These may be feelings of not being loved for who you are and this may make you angry at your parents. Or it may make you sad, because you feel alone and without love and you feel the lack of love within yourself. Or it may make you fearful, because you just can't find anything lovable about yourself. In the NIP you are encouraged to feel and express these emotions of pain, anger and fear fully to the point where you eventually move beyond unpleasant feelings to the experience of love and self-love. If you continue to say the simple sentence "I am lovable" at this point, that is where serious reprogramming begins. The technique is simple and straightforward, but it is hard work to fully turn around decades of negative conditioning.

Once you can say facing yourself in the mirror "I am lovable!" and bodily feel this statement from tip to toe and your heart warms, then a major step has been done. A crucial step in the development of self-acceptance and self-love is to do this with the awareness of all our limitations. In

a sense, it is relatively easy to love ourselves when we feel successful, but the test arises when we make a mistake, or when we are sick, or when we feel down, or when we receive criticism, or when we awake from a nightmare. Many people seem to think that the question is whether they are lovable or not. I rather see the question as: "Do we **accept** our lovability?" We were all born lovable - in my view - but we unlearn this basic experience. If at the same time we learn to accept our lovability, we learn to bond with other people and to hold them in emotional and physical closeness like a baby bonds with the mother, then the basics for the development of our own identity have been laid down.

It is this type of very fundamental experience which has been essential in Jerri's turn toward happiness. Taking our right to exist, accepting ourselves as being with needs, feeling our lovability, feeling good enough to be loved without performing, feeling the entitlement to make mistakes, taking responsibility - that is the basis of any healthy personality.

**II.** As part of my introduction I want to place Jerri Sousa's book in the larger context of a discussion of the labels 'homosexuality' and 'transsexuality'. This is a complex topic and I will barely touch upon it. However, I believe that a clear understanding of terminology is crucial to avoid unwarranted (and potentially harmful) assumptions and misunderstandings. Therefore this section is a brief "guided tour" of a complex subject matter, it is designed to help the reading of the book by placing it in a clear framework.

Dan Casriel (1972) has described emotionally healthy people as free from self-destructive behavior patterns, capable of emotional openness (if they so choose), capable of intimate relationships and of having maximum choice in defending themselves from danger. They also have insight into their emotional programming which allows them to deal with their feelings, attitudes and behavior in constructive ways. Emotionally healthy people function productively in relation to their potential and they are capable of showing and giving their basic emotions, if they so choose or if the need arises, with full intensity.

Few of us seem to have such a healthy personality these days. More or less intense experiences of unfulfilled primal needs as infants and children result in painful memories and negative self concepts. Sometimes people suffer acutely from the resultant symptoms (e.g., anxiety, depression, phobias); Casriel called these people neurotic. But oftentimes people cope with these experiences by turning themselves off so that nothing much is felt at all. Casriel called these individuals, who have encapsulated their fear, anger and pain inside their personalities, *character disordered* - a term about which I will say more shortly. This may also mean that they don't show any 'significant' symptoms; in fact, they may function very well within the current societal norms and values (e.g., the compulsive house-cleaner, the bookworm, the workaholic). Others, however, may show the stigmata of their socialization clearly. At the extreme end of this we find alcoholism and other forms of substance abuse, and criminality and sociopathy. Casriel comments: "We live in a character-disordered society, very few patients come in without some degree of character disorder, and behavior is the character-disordered personality's primary insulation against having to grapple with feelings. Stripping the person of that insulation is the fastest way to get him or her to deal with emotions" (1981, p.575). The specific history of unfulfilled needs and negative programming determines - together with other factors - the

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individual symptomatology (be it neurotic or character-disordered). These symptoms are the signs of unhappiness.

I regard Casriel's choice of the term '*character disorder*' as unfortunate since it does not reflect his humanistic stance; instead, it easily connotes the traditional psychiatric medical model and notions of 'mental illness'. As I have mentioned above, it is important to keep in mind that Casriel used the term '*character disorder*' in a unique way for which he had a very clear definition. It is used as a label for people who have encapsulated their feelings and who lack access to them. Casriel has stated that he regards most people of today as *character disorder* in this sense.

Dan Casriel was very clear about the fact that he regarded homosexuality (and transsexuality) as acting-out symptoms of a fundamental lack of self love and self acceptance together with negative attitudes about the self (and forget about any traditional notions of psychopathology and 'mental illness' at this point). He defended this viewpoint of homosexuality as a symptom of a *character disorder* (in his sense of the term) in many discussions, only conceding occasionally that it may be somewhat different for women (but without giving much of an explanation for this). As you will see below, Jerri Sousa subscribes to this view and incorporates it in understanding and explaining her life story. She states her stance as follows: "Homosexuality is, I believe, part of a very deep-seated personality disorder. The roots of this are established within the first two-plus years of the person's life, when the foundation for basic identity and self-esteem is laid."

Casriel's position may seem simple on the surface - but I don't believe it is. In my knowledge of his work it is not part of an entirely consistent theory. The terminology of traditional psychiatry (his unique use of the term '*character disorder*', on the surface implying notions of mental illness) and the terminology of humanistic psychology (his concern with 'happiness') never quite came together. Using his concepts I will attempt to develop a more consistent view. His contribution to Corsini's **Handbook of Innovative Psychotherapies** (1981) was originally subtitled **The Emotional Foundation of Health (Happiness) and Mental Illness (Unhappiness)** (it was written in 1978). I am not sure how it happened that this descriptive statement was dropped. I regard the use of the health vs. mental illness terminology as very unfortunate, but the clarification by way of the happiness vs. unhappiness opposition as fortunate and significant. To me it indicates a terminology that he did not take the time to develop and clarify before his death. *Character disorder* is a normative description attached by outside observers, while (un)happiness is something which people feel and report. In this reading then, Casriel's theory allows for the happy homosexual who is not acting out and has self love and self acceptance. Other homosexuals, however, may be unhappy and act out their unpleasant feelings and negative attitudes through homosexual behavior. And others, again, may be unhappy because of discriminatory values and actions or because of a lack acceptance of themselves as homosexuals; they may seek therapy to address these issues without the desire to change their sexual preference.

Our contemporary society seems to be very much concerned with symptoms and with labels. But one label can hide a multitude of very different individual histories. A psychological symptom can originate from any number of causes. At that point clear cut labels and symptoms vanish and we begin to pay respect to the individual's life history.

We owe this much consideration and thoughtfulness to our fellow human beings under any circumstances. Using Casriel's viewpoint the term 'homosexual' becomes confusing: it is the label for an acting out symptoms as well as the label for a sexual preference. These are two very different issues and they should not be hidden under the same label. The American Psychiatric Association has resolved this issue by deleting 'homosexuality' as a diagnostic category. 'Homosexual', then, is reserved for the description of a sexual preference. 'Homosexuality' as an acting out symptom, consequently, warrants a new and more appropriate terminology (and I don't have to offer a solution here).

In my view, it was Casriel's concern with happiness that was primary over any questions around sexual preference. He was primarily a practitioner whose preoccupation was his clients and the training of therapists; this took precedence over his interest in theory. I believe he cared much more about relieving the suffering that he saw in homosexuals and transsexuals who entered his office, than in providing a complete theory of homosexuality and transsexuality and relating it to the available research. His direct experiences (in conjunction with his traditional psychiatric and psychoanalytic training) led him to his view and terminology which he saw validated again and again in his therapeutic work. It is my contention that this experience is better described by using the terminology of happiness vs. unhappiness rather than '*character disorder*'; in addition, it makes his theoretical framework more consistent. This would also be more compatible with the field of humanistic psychotherapies in which he placed himself.

I want to explain Casriel's viewpoint in a little more detail in order to give a fair picture. He thought that transsexuals showed many different symptoms of unhappiness, but that the bottom line was always the same: "I don't feel loveable in the sex I was born into. I know I would be loveable if I were the opposite sex." And with this goes the individual's assumption that this feeling cannot be changed, but that the sex can be changed by surgical and other means. Casriel thought that the crux of the matter was not the person's sex, but the profound lack of self love and self acceptance. Allgeier and Allgeier (1984) conclude from their reading of the literature that the exact causes of transsexuality are not known, however, that there are indications that a transsexual identity may stem from family patterns. Jerri Sousa makes a very strong case in this book, based on her personal experience, that it was her early conditioning during her upbringing that led to low self worth, self hate and extreme rage: this she sees as the underlying cause for her homosexuality and transsexuality. Her vivid descriptions illustrate the model that Dan Casriel was working from. She thought that she would find love and would love herself once she would get out of the trap of the female body. As she learned at a great price, this was not true for her. Her lack of self love showed itself in her nonacceptance of her biological gender, but that was only one symptom among many. Once she started to love herself fully, she also began to accept her femaleness. (It should be noted that there are important differences between homosexuals and transsexuals, the two should not be confused. However, transsexuals - as in Jerri's case - oftentimes seem to have a history of homosexual behavior.)

Casriel stated many times that he saw homosexuals as a product of their upbringing and not born with this sexual preference. But he saw this upbringing *always* as a training for unhappiness. He mentioned a number of emotional

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attitudes which indicate a programming for unhappiness. Here are some examples. Some apply just to men or women, others apply to both men and women: "I am not man enough." "I am not good enough to be heterosexual because my penis is not big enough." "I don't want to be just a sexual object." "Women are so much better than men, I can only get a man." "Men cannot be trusted." "No one ever loved me when I acted like a boy/girl." "I cannot keep my identity if I am heterosexual. Men/women will control me if I love them." "Women/men will destroy me as my mother/father destroyed my mother/father." "I don't want relationships, just sex. Women want relationships." "I want a relationship, not just sex. Men just want sex." If these attitudinal patterns are the basis for the choice of same sex preference, then it can indeed be said that unhappiness is at the foundation. It was his contention that **all** homosexuals have suffered this type of unhappy programming.

Jerri Sousa takes the same stance in this book. One could even say that she carries it a little further: "Homosexual attachments are, I believe, extreme examples of addiction to another person. As with any addictive attachment, the homosexual attachment is based on illusion. The bottom line is that one person becomes, in essence, a mirror for the other to help define, delineate or even create an identity, moving away from the actual self." It is worthy of note that *psychological* addictions are possible to practically anything - from TV to books to drugs to heterosexual partners. However, it is not the object of the addiction which is addictive, but the person who lacks the maturity to establish a non-addictive relationship with a person or an object. Jerri outlines possible ways to deal with patterns of unhappiness and resultant addictive relationships which revolve around homosexual and transsexual behavior. Her suggestions are based on the fact that this was a course of action which has helped her.

Casriel's view of all homosexuality as *character disorder* is unpopular these days. Let me place his and Jerri's statements in the context of the available psychological literature. The American Psychiatric Association's DSM-III-R does not list homosexuality as a diagnostic category. Research has failed to find reliable differences between heterosexuals and homosexuals or to support the notion that mental health and gender role identification are crucially linked. No reliable differences have been found between gays and heterosexuals as far as adjustment is concerned. Storms (1980, 1981) has suggested that other-sex preference needs as much explanation as same-sex preference. This is in opposition to the traditional view that the cause for the 'deviant' homosexual behavior alone warrants explanation. Any notions of homosexuality and transsexuality as pathologies in the sense of the traditional medical model carry implications which in and of themselves can create tremendous unhappiness. The social discrimination and criminalisation of homosexuality is one example of this. The way I read Jerri Sousa's book, I do not find that she views homosexuality this way, points a moral finger or opposes gay rights, but that she offers a choice for those who are suffering from their practiced sexual preference and view it as an acting out symptom.

Western technological societies have a hard time with ambiguity, which may be one of the symptoms of their general malaise. Dichotomous categories of black vs. white or homosexual vs. heterosexual seem to be the preferred mode of constructing societal reality. That such notions of either - or as regards sexual preference are highly

questionable should have been apparent since the 1948 Kinsey report. The research indicated that 37 percent of American males and 13 percent of American females had had at least one homosexual experience at that time. The report described a seven category continuum from exclusively heterosexual to exclusively homosexual behavior (with equal amount of heterosexual and homosexual behavior occupying the middle category). During the last decade the notion of androgyny has become popularized with suggestions from research that people with androgynous identities have more flexible and appropriate responses across a spectrum of situations.

If we leave Western cultures and explore the sexual behavior of other cultures the neat homosexual vs. heterosexual categorization breaks down even further. Williams' recent (1986) discussion of the berdache institution among the American Indians is only one example of an alternative way in which cultures can shape sexual desires. Many American Indian cultures allow for the additional gender roles of the berdache and the amazon - gender roles which have legitimacy and do not carry the stigma of deviance. It is interesting to note that the development of these gender role identifications is supported by cultural customs. Vision quests play a crucial part in identity formation in American Indian cultures; and visions help to clarify the assumption of gender roles. All this would seem to prevent the negative conditioning of the self which Casriel finds integral to the homosexual's make-up. After his review of a number of cultures across the world, Williams concludes that "the Western view, that every person is either a homosexual or a heterosexual, does not hold up under cross-cultural analysis. . . It is inadequate to see sexuality as a biological constant. . . Sexual identity is not set by nature as an essential part of each individual, but. . . sexual desires, like other aspects of human behavior, are largely influenced by the culture in which a person happens to be born" (p.272). All this indicates that the notion of homosexuality as an *inevitable* sign of a *character disorder* (an inevitable symptom of an underlying personality problem) is not a defensible one and is intimately tied up with cultural norms (rather than representing the objectivity it purports to have). The assumption that Western technological societies, because of their particular normative structure, practically prevent the development of happy homosexuals quickly follows from all this.

What all this means to my mind is the following: It is neither socially and politically appropriate nor defensible from the standpoint of psychological theory and research to *equate* homosexuality with *character disorder* (in Casriel's sense). However, as people act out in heterosexual ways, homosexual behavior can be a way of acting out and a symptom of an underlying unhappiness. This should be referred to by a label other than 'homosexuality'. If the individuals themselves are not satisfied with their life course (including their sexual preference) and desire to change it, then a fundamental restructuring of the identity can be helpful.

Let me now use the New Identity Process theory to develop a notion of happy homosexuals. Obviously, they would not carry the negative attitudes about themselves which I have described above. They would love and accept themselves fully and in all aspects. They would fit Casriel's description of emotional health. They would be able to explore and share their emotions fully and in all areas. The positive feelings about themselves would be reflected in the

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positive feelings about the other sex. Of course, they would fully accept and integrate their sexual preference(s). My suspicion is that this person is just about as hard to find as the happy heterosexual. To my mind, openness to finding out that our sexual preference is not what we thought it was is a precondition to any deep exploration in therapy (regardless of the orientation with which we enter therapy). As with many other things, we may find out that our assumptions and perceptions and recollections are not what we thought they were.

In this view of emotional health, sexual preference becomes a question of choice made from a position of emotional openness and maturity — not a place of compulsion, addiction or denial. The choice of sexual preference then is part of the journey of unfolding our unique identities. It is not a question of morality of deviance, but a question of becoming who we can uniquely be. It is the challenge of developing the courage to confront all the emotions and attitudes that are inside ourselves and gradually turning them to a level of self love and self acceptance which allows us to *feel* happy. Using the metaphors from an American Indian teaching I would say: this process must always include a confrontation with the man, the woman, the boy and the girl inside of us (and there are other metaphors to describe the same). These four aspects need to be confronted on the levels of the emotional, mental, physical, spiritual and sexual. Learning about these aspects allows us to find our personal balance of the male and female inside of us. This is not a balance that anybody can prescribe for us, but we can only discover it through our honest self-confrontation. The final word on whether we are happy is ours — even if we find out later that we deluded ourselves.

Jerri Sousa's book is designed to help those who find or suspect that their homosexual behavior is an acting out symptom and who desire to acquire or increase their heterosexual arousal. If you feel this way about yourself, then the book may prove to be a valuable tool. Jerri's descriptions of her painful journey and her suggestions for work on yourself may help you to find your own happy balance of the man and woman inside of you together with a sexual preference which gives you pleasure and intimacy.

**III.** Jerri Sousa's claim of successfully altering her sexual orientation touches on a hotly disputed subject. New York therapist Michael Shernoff stated in *Newsweek* (July 13, 1987) that "there's no evidence at all that the object of desire has ever been changed by any form of treatment." But here we have an extensive self-description by somebody who says just the contrary. In science it can take one case to prove a theory wrong. If the assumption is that all swans are white, then one single black swan can falsify that theory. Unfortunately, psychology rarely operates on the level of clarity of white vs. black swans. The future will tell if Jerri Sousa's journey is the case of a black swan proving the theory of white swans wrong. But it should be clear even now that her subjective report deserves full consideration in the field of sexual preferences, where we are lacking many answers and much research needs to be done to substantiate theories one way or the other.

Extraordinary cases have oftentimes moves science along. The exception or the deviant result in an investigation can lead to the revision of theories and treatment approaches. The history of psychology and other sciences shows as much. In this context I suggest that Jerri's book be taken for what it is: It is the personal story of somebody who reports experiences and an end of her odyssey which is

contrary to many commonly held assumptions. This book is not the report of systematic research of the literature or a carefully designed empirical study. Nor is it a rigorous case presentation (and, obviously, I have not attempted such an investigation myself for the purposes of this introduction). But what it is, is the honest story of somebody who has struggled with issues for which psychology and psychotherapy has no complete answers yet. It thus behooves us to read her story with openness of mind. Only the future will show what the implications of her report are. Maybe she was just an exception. But maybe she was an exceptional case who pointed the way to areas of human potential which have not been sufficiently explored. My suggestion is to take her story at face value and to question our own experiences, to review carefully the clients that we have worked with and to think what would be appropriate research to study her claims.

Let me make a few more suggestions for the reading of her book. Jerri suggests "twelve guides to freedom". This format is — obviously — modeled on the successful AA program, but the twelve guides have been developed from her experience and are grounded in her search for happiness. These guides have not been tested beyond her own experience. At this point they are not based on any work with a larger group of people. This is something that needs to be done soon. However, the guides are clear and promise usefulness. It is important to note that all but one can be used alone or in a self-help group. The one where professional help is mandatory is guide number five, which calls for the experience of bonding and catharsis. In order to complete such process in a safe and successful manner, the guidance of a therapist trained in these techniques is necessary. It should also be noted that the use of the New Identity Process was central in Jerri's healing. She did not just attend one weekend workshop, but she worked extensively in the process. My reading of her story is that she would not be where she is today without it. Although it appears to be a crucial factor in her growth, the other eleven guides can and should be used at anytime. They have the potential of prompting important changes toward happiness.

I have mentioned above that any fundamental change in personal identity is a demanding process. What Jerri suggests is not a twelve week program. A twelve week seminar or self-help group can be a crucial beginning. But there is no quick and easy road to happiness along which a few self help exercises whisk us along. The bookmarket oftentimes seems to promise otherwise, but it is the sale of an illusion. Jerri's journey toward happiness took many years and it was unfocused because no roadmap was available. Even if you now have the help of her hindsight, it nevertheless will take considerable time and effort to confront and work through deeply buried emotions and deeply engrained negative attitudes about the self. It takes a solid decision and a high level of determination to travel this road. A new identity is not something which can be selected from the rack (with a little additional fitting) — such a move would crumble quickly from the confrontations that living provides. Addressing issues of sexual preference can only be successful as part of a general restructuring of identity. It is only from the foundations of the personality that any such decision can be made in a happy and fulfilled way.

Jerri Sousa's book gives us the intimate story of a fundamental restructuring of her personality. Her suffering and her healing illustrate her conviction that "homosexuality and transsexuality are complex phenomena, with various

(continued on page 7)

**Choices** (Continued from page 6)

components, (but) however complex, they are both symptoms of a deeper underlying disorder within the framework of a basically incomplete identity." She shows us how she confronted her unhappy upbringing, the confusions she suffered and the resultant addictions. She allows us to see how her surgical sex change did little for her — "as a female I felt phony, unreal and fragmented; as a man I felt the same way". And she shares with us how she confronted long forgotten and denied feelings as her old facades and images crack open. It has been a difficult journey for her so far and those who feel they are suffering similarly can learn a great deal from it. To those who feel a need to widen their circle of choice in a similar fashion, the book is recommended as it shows a road about which we know little.

Jerri has dedicated her book to Dan Casriel and I would like to dedicate these introductory words to the memory of my teacher also. He should have written the introduction and I know that he would have been more than happy to do so. In fact, he had planned to include Jerri's story in the book that he did not get to finish. I am grateful for his wisdom and experience, which has provided the field of clinical psychology with one of its clearest maps. It is thanks to this that Jerri Sousa could write a large part of what she has written. Many others have benefited similarly from his understanding of the deep structures of personality.

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**Prepare for 1989 Conference**

As usual, the International Conference for the New Identity Process was stimulating, enjoyable, a meeting of old friends and new, etc., etc., etc. For those who have never attended — you are missing a most pleasurable experience.

It is not too soon to think of the 1989 Conference that will be held in New Haven, Connecticut. The tentative dates are Thurs., June 22 through Monday, June 25, 1989. We are looking forward to many interesting presentations. If you are planning to present, have your abstract in to Ron Kissick, Personal Resource Center, NYPENN Trade Center, 435 Main Street, Johnson City, NY 13790 by **January 30, 1989**.

It is important that we begin to plan early to include varied presentations, opportunities for work and play, and a pre-conference workshop. Therefore, please begin thinking about your abstract now.

— Yetta Lautenschlager

**General Meeting Minutes**

These are the minutes from the ISNIP general meeting as submitted by recording secretary Yetta Lautenschlager.

General Meeting — Birka Princess, Archipelago, Sweden  
August 12, 1988, 2:00 p.m.

There were 64 members with proxy that constitute a quorum.

**Standards Committee**

Janice Frank reported that she sent packets to Teaching Fellows for input and only one person responded. The members of the Standards Committee will be Bill Wolfson, Yetta Lautenschlager, Betty Butler, Caroline Sperling, and chairperson Janice Frank. These members will be given the task of coming up with a portfolio for training and supervision. This will provide an outline for preparation for the oral exam. The sponsoring Teaching Fellow must make a written recommendation that the candidate is ready for the oral exam.

**Credentials Committee**

Caroline Sperling reported that Yetta Lautenschlager took the oral exam and was extremely qualified to become a Teaching Fellow. The European credentials committee is Ingo Gerstenberg, Johan Maertens and Peter Geerlings. The new Swiss chapter was accepted. Teaching Fellows are Nimet Salem, Claire Colliard and Thomas Renz. It is tentatively named, Societe Suisse pour NIP et Bonding Therapy.

**Nominating Committee**

Ron Kissick reported that in nomination were: Caroline Sperling and William Wolfson for re-election for a three-year term; Ginny Lott for the unexpired term of Tance Rynick, and Marilyn Ellis to replace an American going off the board. The Europeans will not change. Nimet Salem was nominated as a board member from the new Swiss chapter. It was moved and passed by acclamation to accept the slate.

**Ethics Committee**

Michael Brown has been found guilty of ethical charges in the State of Michigan and has resigned from ISNIP.

**Research Committee**

Johan Maertens reported on the population study. He will also set up the description in the manual. He hopes that the committee will be able to work more closely. The Committee for next year will be George Rynick, Peter Geerlings, Ginny Lott, Gunvor Gustafsson and Jurgen Kremer. A research budget of \$2,500 was passed.

**Newsletter**

Ron Kissick thanked everyone that contributed from Pat. He asked that any suggestions be written down and sent to Pat. He reported that she also likes to hear the good things along with corrections.

**Finance Committee**

Since we are a non-profit organization, we have decided to put our money into research at this time. There are no other projects underway. George, Peter, John and Bill will work on a theoretical background manual, collate and integrate it, and send it out for comments. We need to be able to talk to our colleagues about our work. It can also be used as a basic for training.

**Institutes**

The by-laws shall be checked as to whether an institute committee needs to be established. Institutes projected will be presented to the board.

(continued on page 8)

**General Meeting Minutes** (continued from page 7)**Membership Committee**

Caroline Sperling reported that the Americans have developed and tried a new method for paying dues. A letter is sent out with a return envelope. Level of membership can be checked off and appropriate dues included. This process has worked very well, giving people an opportunity to quickly send it back. She also suggested the envelopes be given out after NIP weekends so participants can join the society. The ISNIP level of membership makes a yearly contribution to the Society.

**President's Report**

George reported that he had a very difficult year. He has forgotten things. It has been hard without his wife, Tance. He asks that we and he have appropriate expectations. He has been struggling with his grief and has been feeling depressed. He requests continued support of members. His aim is to help the Society grow and grow together. He sees a danger in the Society not growing and growing together. He asks members to help him to stay on the right track. He is open to suggestions and will pass them on to the Board.

**Old Business**

Asa Loof informed the Society that the Swedish chapter has accepted Ingmar Arn as a Teaching Fellow.

**New Business**

Frankie Wiggins brought up the subject of the International Group Psychotherapy Conference in Amsterdam on August 27 to September 2, 1989. She asked that two people a day give presentations and/or workshops. Peter Geerlings is on the program committee and said the program is being prepared now so those wishing to present should get their abstracts in by September. Janice Frank suggested that several Teaching Fellows get together and do a combined workshop.

The board is considering a reimbursement for travel for the president.

The 1989 conference will be held in New Haven, Connecticut, U.S.A., tentatively June 22-26, 1989. The 1990 conference will possibly take place in Italy.

The meeting was adjourned at 2:45 p.m.

Respectfully submitted,

Yetta Lautenschlager, M.S.W., C.I.S.W.

Congratulations to our new Society Teaching Fellow  
— Yetta Lautenschlager. Good work, Yetta!

Congratulations to our new (and re-newed) Board Members. Bill Wolfson and Caroline Sperling were re-elected to 3-year terms. Marilyn Ellis was also elected to a 3-year term, and Ginny Lott for 2 years.

**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.)

**Oct. 8-9 – Cheshire, Conn.****Autumn Renewal Workshop**

\*Led by: Ron Kissick, Teaching Fellow, Pat Kissick, Fellow, Yetta Lautenschlager, Teaching 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, Conn. 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) 320-4925

Workshop hours 9 a.m. to 5 p.m.

Upcoming NIP Workshops at the Cancer Counseling Institute will be held on the third Saturday of each month except December, when it is on the second Saturday.

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

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

Contact: Jessica Mercure, M.A., MFCC

1909 Addison, Berkley, CA 94704

(415) 232-8499

**Nov. 19 – Bethesda, MD (near Washington, DC)**

\*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) 320-4925

Workshop hours 9 a.m. - 5 p.m.

**Dec. 2-4 – Minneapolis, MN****Intensive NIP Workshop**

\*Led by: Frankie Wiggins, R.N., B.A. Health Ed.,

Teaching Fellow and Steve Thurik, Fellow

Contact: Steve Thurik

816 West 57th Street

Minneapolis, MN 55419

(612) 861-1766

**Dec. 3 – San Francisco, CA**

**Bonders/NIP Holiday Reunion Party.** Current and former bonders and NIPers, families and guests welcome.

Contact: Jessica Mercure, M.A., M.F.C.C., Fellow

1909 Addison Street

Berkely, CA 94704

(415) 232-8499

(continued on page 9)



**Society Calendar** (continued from page 8)**Dec. 3-4 — Johnson City, NY****NIP Workshop**

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

Contact: Ron Kissick

Personal Resource Center  
435 Main St., Johnson City, NY 13790  
(607) 798-8199

or

George Rynick  
Human Resources Unlimited  
21 Mitchell Ave., Binghamton, NY 13903  
(607) 722-8900

**Dec. 10 — Bethesda, MD (near Washington, DC)**

\*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) 320-4925

Workshop hours 9 a.m. - 5 p.m.

**Jan. 21 — Bethesda, MD (near Washington, DC)**

\*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) 320-4925

Workshop hours 9 a.m. - 5 p.m.

**Feb. 10-12 — San Francisco, CA****NIP Weekend Intensive**

\*Led by: Jessica Mercure, M.A., M.F.C.C., Fellow

Contact: Jessica Mercure

1909 Addison Street  
Berkeley, CA 94704  
(415) 232-8499

**April 16 — Antigua, W.I.**

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

More Information In Next Newsletter

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