
Dr. David Van Nuys, aka “Dr. Dave” interviews Dr. Daniel Rosenblatt (transcribed from www.ShrinkRapRadio.com by Jo Kelly)

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Well then later in life, here I am practicing as a therapist, with clientele one third of whom were gay, and with a gay group, and the AIDS epidemic comes along. One of the first 25 people who was listed as having died from AIDS was one of my patients. In New York City and San Francisco – I think those were the two hardest hit – well it was ghastly; it was like another kind of Holocaust.”

Introduction: That was the voice of long time Gestalt therapist and author Dr. Daniel Rosenblatt, Ph.D. Dr. Daniel Rosenblatt has two books being published this year in Germany, Your Life is A Mess: And What To Do About It, and The Demystification of Therapy, as well as a U.S. publication of Between Men (publishers@heliotropebooks.com), a book about working with gay men. He also may have an off-Broadway production of a play, Unfinished Business, about the similarities between what happens in a therapist’s office and in his personal life. His previous books include Opening Doors: What Happens in Gestalt Therapy and The Gestalt Therapy Primer. Dr. Rosenblatt has degrees in history, sociology, and clinical psychology from Wayne State University, Columbia University and Harvard University. He has held staff or faculty positions at the Bureau of Study Counsel, Harvard University; the Russian Research Center, Harvard University; McLean Hospital, Harvard Medical Center; Bank St. College of Education; Teachers College, Columbia University; Brooklyn College, City University of New York; Downstate Medical Center; and New York University School of Social Work. He has conducted training workshops in Germany, Belgium, Denmark, Norway, and Sweden.

Dr. Dave: Dr. Dan Rosenblatt, welcome to Shrink Rap Radio.

Rosenblatt: Here I am.
Dr. Dave: Glad to have you here. First of all I should let our listeners know that I was referred to you by Dr. John Drimmer, who was my guest on this show about two episodes ago, and John suggested you would make a terrific guest. He told me that you were his therapist years ago and have been a mentor and a friend ever since, and he gave me a lot of background on you and suggested issues I should explore.

Rosenblatt: Well that’s all true.

Dr. Dave: OK. You’ve had a long, and distinguished, and multifaceted career; in fact John mentioned that you are in your eighties, so you have had a long, and a distinguished, and a multifaceted career. And there are so many different areas that we could explore, but we aren’t going to have time to go down all the possible pathways; so my questions are going to focus on your long experience as a Gestalt therapist who also happens to be gay.

Rosenblatt: Right.

Dr. Dave: So let’s start at the beginning, which for me is: when did you first realise that you were gay?

Rosenblatt: Oh, it’s so long ago, it’s hard to reconstruct. There are a lot of people who know very early. I had some patients who told me they knew they were gay when they were five and six.

Dr. Dave: Yes, that’s what I was wondering.

Rosenblatt: And I didn’t. I have a twin brother and he is straight, and he is also in his eighties. We grew up together of course, and at that time – it was in Detroit Michigan – it was not cool to be gay; and whatever intimations I may have had, and they were few and far between, I pushed them aside. So I think it wasn’t until I was through undergraduate school.

Dr. Dave: Yes, I’m fascinated by the fact that you have a twin brother, I believe an identical twin; isn’t that right?

Rosenblatt: That’s right.

Dr. Dave: So you’ve got the same genetics, and you had the same environmental exposure; so how do you account for, or is there something known in the literature for how this would come about?
Rosenblatt: Well I don’t think there is anything in the literature, and my own non-scientific guess, is that identical twins are not necessarily identical. He is right handed and I am left handed, and he is straight and I am gay. We had the same environment, he came out of the womb first; but you know I don’t know that identical means identical. In the sense of: do we really know that all the genes are the same?

Dr. Dave: It’s making me wonder, how do you know that you were identical twins. Well I have fraternal twins, and they certainly looked alike in the early days, but do you know for sure that you guys were properly classified as identical twins?

Rosenblatt: Well we were always told that by psychologists and by doctors and so on. People always mistake him for me; although again he is a little bit taller than I am, maybe as much as a half inch. But people always meet him on the street and think he’s me, or vice versa.

Dr. Dave: OK well let’s come back to some of our other issues around being a therapist. When did you first realise you wanted to become a psychologist/therapist, or is that going back too far again?

Rosenblatt: No, I studied psychology as an undergraduate but my major was history, and my degree was in history; and then I got a masters degree from Columbia University in history. But after I got the masters degree I was in therapy with Laura Pearls.

Dr. Dave: Oh yes, the wife of Fritz Pearls, founders of Gestalt therapy.

Rosenblatt: That’s right; they started Gestalt therapy with Paul Goodman. And I was presumably Laura’s second or third patient in America. So I was in therapy with her for about two and a half years, and then I went to Harvard to get a Ph.D. and I started in history. And it turned out that all the topics I was writing papers about really were psychologically oriented.

I remember I was doing a psychoanalytic study of Gibbons. William Gibbons had left six autobiographical fragments and I was doing a psychoanalytic interpretation of his autobiographical fragments. I remember my professor said he thought this was very interesting, but he had no way of judging it as historical material.

So this was happening in all of the history courses I was taking. My interest, it seemed clear to me, after the work with Laura Pearls was much more psychological. So I switched from the History Department to what
Harvard then had called the Social Relations Department. It was right after the Second World War, and it was an attempt to integrate the social sciences. You had to take courses in clinical psychology, social psychology, social anthropology, and sociology; and you had to become proficient in all of them. Now the department didn’t last, because there was so much bureaucratic infighting among the leaders of the different divisions that after about eight years it broke up.

Meanwhile that was the period that I was there taking courses in all those different disciplines, and I thought it was valuable and useful. But anyway, that’s when I switched from being a historian to being a social scientist; particularly a clinical psychologist.

**Dr. Dave:** OK, so there you are at some point in a doctoral program in clinical psychology at Harvard; and did your professors know that you were gay during that period?

**Rosenblatt:** Yes, and they didn’t like it at all. It was the 1950s and they were very hostile and unfriendly, unsympathetic, un-understanding, and they also didn’t care about Gestalt therapy either. I told them I had been in therapy with Laura Pearls, and she was a Gestalt Therapist: and they said there is no such thing, there is Gestalt psychology in Germany there is no Gestalt therapy. And I said that is not my experience: and they said well we are telling you. So I thought, if I have to survive here I have to shut my mouth.

**Dr. Dave:** Yes so during that period, according to the Diagnostic Manual of that time, homosexuality was listed as a psychopathology; so how did you manage to get through that? That sounds terribly challenging.

**Rosenblatt:** Well it was challenging, and it was tough, and it was difficult, and I did not have the support of the faculty. So that was a great struggle, and a terrible time anyway.

**Dr. Dave:** Was there ever any question that your degree would be blocked?

**Rosenblatt:** Well there was, but then they seemed to relent. I think they were so ambivalent about it themselves; because on the one hand it was official psychopathology, on the other hand god knows how many people on the Harvard faculty were gay already, and how many of their colleagues they knew were in the closet. So it was the same old hypocrisy going on. So officially they were hostile, and unofficially I think some of them were friendly.
One of the people who was very kind to me – I just saw a notice today, I had forgotten he had died – Frederick Mosteller: he was the statistician who first applied statistics to social science data, and he was very important to bring quantitative data to social science; and he was very kind to me about it.

So there were individuals, but as an institution it was terrible. There were suicides; professors who were outed would kill themselves, and so on. It was not a good time.

**Dr. Dave:** Yes, very tragic. So at what point did you come out as a therapist who was gay?

**Rosenblatt:** Well after the therapy with Laura Pearls, although I experimented with heterosexuality, and had girlfriends, and relationships and so on, but it was clear to me that my preference was really for men.

She and Fritz came from Berlin in the 20s and 30s and the Weimar Republic, and those people didn’t give a damn about whether anybody was gay or not. They really saw people as human beings and individuals and they came from a different culture and a different background. And most of their friends in New York were gay, so it was such an accepting environment that I just felt more comfortable accepting that this was who I was; and that it had its own dignity and value, despite what the prevailing morays in the larger culture were. In New York City in bohemian circles, and they were anarchists, nobody cared; so it was not difficult to say: this is who I am and this is where I belong.

**Dr. Dave:** And then did you rather quickly begin to develop a clientele?

**Rosenblatt:** No, people used to say when I was at Harvard, what do you want to do? Do you want to do teach; do you want to do research; or do you want to do therapy. And I said, well I want to do all three.

So in the early days I was doing research and teaching; and then when I started to do therapy, Isadore From – Fritz and Laura were his mentors – he had the reputation for being the best Gestalt therapist; he became my therapist and he said he had never seen anyone develop a practice so quickly. I don’t know how it happened, really, to be honest, but it did happen very fast.
It was clear when I started to practice that I wasn’t going to lie about who I was. But when I was teaching I had to lie, because if I had said I was gay I would have been fired.

**Dr. Dave:** Yes.

**Rosenblatt:** That was New York in the 1950s, 1960s; so I couldn’t be honest; but when I started to practice I didn’t have an institution I had to lie to. In my private practice, I never said I’m not gay; I didn’t hang out a sign that said I am gay; if anybody asked me I always told them. Most of the people I saw were referred to me by other people who I had been seeing, so I think that was probably part of what they told them before they came.

John said he didn’t know – John Drimmer who you mentioned earlier – but that he asked me in the first session was I gay: and I said yes. And that was a concern of his that when he left, he said he thought about it and he felt that I had been so direct and honest with him, and that there was so much liveliness in the session that he could overlook it. But it was an issue for him.

**Dr. Dave:** Yes, so now when your practice takes off, that was before Stonewall I believe.

**Rosenblatt:** Oh yes, way before Stonewall.

**Dr. Dave:** Yes, before Stonewall and the whole gay liberation movement. Then Stonewall comes along, which all of our listeners may not be familiar with that, but it was a time of rebellion against persecution of gays in New York City, right? In Greenwich Village?

**Rosenblatt:** Right; it started on the night Judy Garland died, and it started with drag queens in the Stonewall Inn Bar, and the cops were being offensive, and somehow the drag queens decided they weren’t going to put up with any more. It was spontaneous and they fought the cops, and there was a riot, and there was a lot of publicity about it. It was the beginning of gay liberation.

**Dr. Dave:** Yes.

**Rosenblatt:** But from my point of view as a Gestalt therapist, who was in the Gestalt milieu: I was on the board of directors of the Gestalt Institute of New York, and I think if I recall correctly, every one of the male members of the board, except one, were gay. Nobody cared about being gay, it was
already liberated. So Stonewall was something that happened in the larger culture, but in the smaller culture it had already happened; if you follow me there.

**Dr. Dave:** Yes I do. What was the difference for you, both as a man and as a therapist, before and after that pivotal event of gay liberation and Stonewall?

**Rosenblatt:** Well maybe it’s my failing; I understand Stonewall in the larger culture, and that it was a dramatic event in which gays said to the police and to the larger society – we’re not going to take it any more and we demand our rights. But in another way, that had already happened in the liberal, Greenwich Village, bohemian atmosphere and in the liberal circles in New York. So there’s a difference between what the event meant in the larger culture, and what it didn’t mean in the smaller culture. In the smaller culture it had already transpired.

**Dr. Dave:** Yes; it had already transpired for you in your life, even though it hadn’t in the larger culture.

**Rosenblatt:** Right.

**Dr. Dave:** Did you notice differences in your clientele though: before and after?

**Rosenblatt:** For the most part, no. I was already running a gay group in New York; I think it was the first gay group in New York. I did a little research, but I didn’t do exhaustive – I mean, what difference does it make if it was the first or the second – but my understanding it was the first. So it was already a liberationist kind of thing. There were a couple of patients who I really think were more troubled than some of the others; and for them it was very important that Stonewall provided them with a kind of platform, that they felt more secure.

But I saw a lot of people who were professionals, and they had already I think when they came to see me – although they might have been suffering from the prejudice and the stigma in the larger culture – they were more comfortable in their own sense with being gay.

**Dr. Dave:** In the larger gay culture there was a period of jubilant freedom for the gay community, but then the AIDS pandemic struck; and I’m under the impression that you have done a lot of work with gay men suffering
from AIDS; so let’s talk about that a little bit. What did you learn through that?

Rosenblatt: Well the AIDS thing. I’m Jewish, so when I was young the Holocaust was happening, and it was ghastly. One of my early memories, I remember very clearly when refugees started coming over from Europe when I was about ten years old, and how horrible it was. I remember when the Second World War started and Germany invaded Poland, and I had relatives who died in the gas chambers in Poland. For a Jew the Holocaust is a ghastly experience.

Well then later in life, here I am practicing as a therapist, with a clientele one third of whom were gay, and with a gay group, and the AIDS epidemic comes along. One of the first 25 people who was listed as having died from AIDS was one of my patients. In New York City and San Francisco – I think those were the two hardest hit – well it was ghastly; it was like another kind of Holocaust.

I can’t say it was decimated, because decimated technically means one out of ten; well it wasn’t one out of ten. I counted up at one point: I looked at the gay patients I had, and then the number of them who either died or who had HIV infections, and it came to between 30% and 40%. And that’s presumably what the statistic was for the gay population of San Francisco. If you can imagine having 30% or 40% of your gay patients either infected or dying; how horrible that was – it was just nightmarish.

Dr. Dave: Yes.

Rosenblatt: And the gay groups stopped, there were so many people who died. There were a handful of us left, and we had been to so many funerals and had meetings of the group in hospital bedrooms; and we just looked at one another and we said: what do we do? And there were three or four of us left, and we said: we had just better stop; the group was hardly left.

Dr. Dave: Oh my god.

Rosenblatt: It was nightmarish. It’s much better now with all the antiviral drugs, and people survive. But I saw one of the members of that group recently, and he said “do you remember when we went to visit Tim in his hotel room, and he was dying, and you and I came out, and how we both wept.”
Dr. Dave: I assume that maybe you still had individual clients, after the group broke up, who were suffering from AIDS.

Rosenblatt: Oh yes. When I had patients who were infected, if they stopped working they couldn’t pay me: that was fine. But it was terrible; instead of being able to treat people and see them live happy lives, successful lives; instead you were being a witness to their death, and helping them die.

Dr. Dave: What kept you going? How did you keep from caving in yourself?

Rosenblatt: Well what else could one do? I was happy I wasn’t infected myself. I didn’t feel I could abandon those people. So how did the people survive in the concentration camps? I don’t know how they survived in the camps; and I wasn’t in a camp but I just did what I could to get through it. Most of my patients weren’t gay, and they weren’t dying, but it was a terrible, terrible, difficult time.

Dr. Dave: It certainly sounds like it.

You mentioned that really it was only about a third of your clientele was gay, so that would suggest that about two thirds of your patients were straight.

Rosenblatt: Right.

Dr. Dave: What’s it like to be a gay man working with straight clients? Were there any advantages or disadvantages?

Rosenblatt: Yes it was an advantage. I think a lot of women felt very comfortable with it. They didn’t feel threatened sexually, they didn’t feel they either had to come on to me or they weren’t afraid I was going to come on to them. The whole sexual tension between male and female was lessened, and I think it was an asset for them. A lot of gay men have straight women friends – people have written about it – and I think they appreciated the sexual thing was put to bed, in a sense.

Dr. Dave: Yes.

Rosenblatt: There were a couple of straight women who wanted to seduce me, who wanted to have my child, and so on, but that was rare. Most of them were, I think, accepting this was an asset for them.
Dr. Dave: What about with straight men patients?

Rosenblatt: Well I think the straight men also didn’t feel as competitive. A lot of the straight men confessed to me either their gay experiences or their gay feelings. I don’t know whether they were trying to be friendly; I don’t know whether they were trying to be accepting; but I was impressed with how many of the straight men I saw, unbidden by me brought up their homosexual feelings, or experiences, or desires.

I remember there was one man who was married and had two children, and he told me every night before he went to sleep he had a fantasy about having a sexual encounter with another man. Now it wasn’t an important part of his life, it was sort of encapsulated; but I felt it was easier for him to bring this up with a gay therapist rather than a straight one.

Dr. Dave: Was it harder for you, in terms of counter-transference? Straight male therapists sometimes have to wrestle with their sexual attraction to female clients; and of course there are documented instances where they failed to do so, and ended up getting sued, and all sorts of things happen.

Rosenblatt: Well I always used to say that there are so many attractive men in the world; why on earth would I have to focus on my patients? There were so many others who I could put my attention on, and that it was therefore counterproductive to make them the focus of my desires.

Dr. Dave: OK; and by contrast, working with straight patients, how was your experience different when you were working with gay clients?

Rosenblatt: Well sometimes there weren’t any differences; I mean people are people, so you are relaxed about it. But I do think one of the differences in the gay group was that there was a stronger sense of community. The way, say, the African American caucus in Congress feels it has a special place in the Congress: that they are not just equal, but they are special because they are the objects of prejudice and discrimination. I think the gay group had a certain élan in that way: that here was a group of gay men who were confronting gay issues together, and that they felt a certain kinship with one other. Whereas in a straight group, it would be more diverse kind of backgrounds.

Dr. Dave: You say that at root we are all people. Do you think a straight therapist can be effective with gay clients?
**Rosenblatt:** Well Laura Pearls was straight, and she was certainly quite effective with me as far as I’m concerned.

It’s like saying: can male patients work with a female? Can females work with a male patient? Can straight patients work with a gay therapist? Can gay therapists work with a straight patient? I think really if you have a little bit of imagination, and a little bit of courage, and a little bit of experience these differences can be overcome.

I do think some lesbians – I didn’t see too many – I think they wanted to see a gay woman, rather than a gay man. So I thought alright, if that’s who they are more comfortable with, then let it be.

**Dr. Dave:** OK, let’s shift a little bit then to talk about change. What’s your view of how change happens, or do you have a theory of change?

**Rosenblatt:** No (laughing) I don’t. I think it’s a miracle in a way. I do think it happens in a lot of different ways, but one of the ways that I would like it to happen is that the person takes something in and lets it make a difference.

I talk sometimes about the sieve: where I worked with some people, some of them very gifted therapists; and I would say something, and they would hear it and they could repeat it; and it was like it went in one ear and out the other. Could they remember what I had said? Yes. Could they repeat it? Yes. Did it make any difference? No.

**Dr. Dave:** (laughs)

**Rosenblatt:** So there was some kind of internal process that had to take place that made a difference.

Now sometimes because of Gestalt techniques you could perform Gestalt experiments; and sometimes that gave people a kind of insight, and a sharpening, and a quickness. But still they had to let something happen inside that shifted for them; so they could let go of what Laura Pearls always used to call fixed Gestalt, a sort of tightness, traditional ways of responding.

We always talked about doing experiments and taking risks. Some way trying out new different kinds of behaviours that would permit people to let something different happen.
**Dr. Dave:** Yes. You know we have a certain number of students who listen to this series. What would be your advice to someone who is thinking of becoming a therapist?

**Rosenblatt:** Well I guess to go in therapy themselves, so they can learn about themselves. I think we are all very blind about ourselves. I was in psychoanalysis before I was in Gestalt therapy, and I remember the psychoanalyst telling me he was going on vacation. And I was very rebellious, and I said well that’s fine, that means I will have a month when I won’t have to see you. And I’m saying this to him and tears are going down my face. On a conscious level, what I meant was: that’s good that you’re going away; and somewhere underneath, something else was happening for me and I was totally blind to it. I’m using that as an illustration of how blind we can be about ourselves.

So I think the experience of being in therapy is where you really learn in a very personal, intimate, direct way how blind you can be about who you are, or what your feelings are. And if you are going to be a therapist the better you know yourself, I think the better it is to be open to how other people can be understanding, and wisdom, and a larger point of view.

**Dr. Dave:** OK, so this hypothetical student should go out and find a therapist. What is your advice in terms of shopping for a therapist? How does one best go about that?

**Rosenblatt:** Well one is to ask friends; and the other is to have interviews and see what happens in the first interview you have. And if you don’t like somebody better not go to them.

(laughter)

I think it is very important that the patient has some positive feelings for the therapist.

**Dr. Dave:** OK, good. Thanks so much for being my guest today on Shrink Rap Radio.

**Rosenblatt:** Well thank you for inviting me.