

**Shrink Rap Radio #76, February 9, 2007, The Psychologist As Novelist
David Van Nuys, Ph.D., aka “Dr. Dave” interviews Stephen White, Ph.D.
(transcribed from www.ShrinkRapRadio.com by Kat Bautista)**

Excerpt: *I was a creative writing major for 3 weeks in college. I started off as a freshman as a creative writing major at the University of California. And after getting 2 D's and an F on my first three weekly papers, I dropped the class and changed my major and didn't actually write another intentional piece of fiction for 20 years. So in some ways, I guess, the dream of writing had been there for a long time, but I really turned my back on it when I changed my major, and never considered that I had a future as a writer, and it was not a dream I was harboring.*

Introduction: That was the voice of my guest, Dr. Stephen White, who's the author of the New York Times bestselling Alan Gregory novels. In his books, he draws upon over 15 years of clinical practice as a psychologist to create intriguing plots and complex, believable characters. Trained as a clinical psychologist, he received his PhD from the University of Colorado in 1979 and he became known as an authority on the psychological effects of marital disruption, especially on men. His research has appeared in The Psychological Bulletin and other professional journals and books. After receiving his doctorate, he not only worked in private practice but also at the University of Colorado Health Sciences Center, and later as a staff psychologist at the Children's Hospital in Denver, where he focused his attention on pediatric cancer patients. During those years, he became acquainted with a colleague in Los Angeles, another pediatric psychologist named Jonathan Kellerman, who also went on to become a very successful crime novelist. At the time, Kellerman and White were 2 of only about a dozen psychologists in the country working in pediatric oncology. At this point, Dr. White has written 15 novels, the most recent of which is Dry Ice. Here's the interview.

Dr. Dave: Dr. Stephen White, welcome to Shrink Rap Radio.

Stephen White: Well, thank you. I can start off by saying it's been a long time since anyone's called me Doctor, but it's a pleasure to be here.

Dr. Dave: Okay, really, well, I have to tell you I've read two of your books now, Privileged Information, and the one that's coming out soon or will have just come out by the time that we play this, Dry Ice. And I have to say I really loved them, and I don't know how I missed them. You've got 15 books out there and I love to read in that genre and somehow I missed them.

White: It's been surprising to me over the years that A, anybody found the books in the first place, and I never am surprised that someone has not managed to stumble upon them. As my son reminded me when he was very young, there are a lot of books out there, and it's really hit or miss with any particular title, or any particular author, for that matter.

Dr. Dave: Oh, sure, there's such a flood of books being published all the time that it's a wonder that anybody even goes to the trouble of writing them anymore. Or at least that's how I talked myself out of it from time to time. (laughs)

White: I think if I were trying to start the same career as a writer that I started in 1990, if I were trying to do that today, it would be a much different process and a much more uphill struggle.

Dr. Dave: Really, how so? How are the...

White: Publishing has changed tremendously since 1990. What you just said is very true, the number of titles has greatly increased in genre and out of genre and the competition for bookshelf space in bookstores is very different. And I had the blessing of starting off in the industry before computer inventory and computer tracking pretty much determined who was going to survive and who was not. And I was allowed to build an audience relatively slowly. It took me 3 or 4 books before I achieved a significant national audience. And these days, not too many writers get 3 or 4 books to do that. You need to make your publisher money in the first book or at least the second or your career pretty much comes to an end.

Dr. Dave: Wow. Wow, I really understand what you're talking about. I had a little taste of that myself. I co-authored a true crime book, actually, on the Zodiac serial killer, in which I was asked to try to profile him based on the letters that he wrote to police and press. And that book just absolutely died. I mean, it should have been, at least here in the San Francisco Bay Area where those killings happened – it should have received a lot of attention, but the publishers put absolutely no energy into promoting it at all. And so it's a fairly good unknown book.

White: Well, it's just unfortunately a typical story. An agent once told me that publishers treat first novels the way mother birds treat baby birds. They push them all out of the nest and the ones who fly on their own get further attention.

Dr. Dave: Okay.

White: And you really do need to fly on your own with that very first book.

Dr. Dave: Yeah. Yeah. Which came first, your desire to be a psychologist – because you are a trained clinical psychologist, I should say that to our audience. Which came first, your desire to be a psychologist, or your desire to be a writer?

White: It's an interesting story. I was a creative writing major for 3 weeks in college. I started off as a freshman as a creative writing major at the University of California. And after getting 2 D's and an F on my first 3 weekly papers...

Dr. Dave: Oh my goodness.

White: ...I dropped the class and changed my major and didn't actually write another intentional piece of fiction for 20 years. So in some ways, I guess, the dream of writing had been there for a long time but I really turned my back on it when I changed my major, and never considered that I had a future as a writer, and it was not a dream I was harboring. I took a year off and cooked, basically. I was a cook at a restaurant in Berkeley and then went on to graduate school at the University of Colorado in Boulder. And I entered their clinical psychology program and got my Master's and Ph.D. there. I did my internship at the University of Colorado Health Sciences Center in Denver, and from there began my professional work, which was a combination of private practice and a series of positions in health care institutions. I worked in child development for a couple of years at the University of Colorado, and then developed a passion for pediatric liaison and worked in the Children's Hospital in Denver, initially doing general pediatric liaison in the hospital. And for the last 5 or 6 years I was there, I started and led the program in pediatric oncology liaison. That was actually my last institutional job from when I left there in the late 80s. I moved from there to full-time private practice.

Dr. Dave: I'm not familiar with that term of being a liaison, a pediatric liaison. What would that involve?

White: Basically psychologists who work typically on staff in hospital settings, medical hospital settings, who do psychological consultations to medical in-patients, who work in the general field of liaison psychology. And I found a fascinating use of my skills in a variety of levels. And you might find this an interesting side story. At the time that I developed an interest in pediatric oncology, there were probably only about 10 children's hospitals around the country with active programs and psychological liaison in pediatric oncology. And I went searching for colleagues to try to find more information about this field I found myself working in, and tracked down the only colleague who had put together a book, and he was in Los Angeles. And I took a few days off and flew out to LA Children's Hospital and spent a few days with him and his staff. And they had a very active program. And at the end of my visit with him as we were saying goodbye, he told me that he was about to cut back to half time to write a novel. And he was the youngest associate professor that I knew of in the country at the time. He was in his late 20s and was well-published at the (inaudible) faculty at USC and I just thought it was stunning that he would walk away from all that to write what he told me was going to be a novel. It turned out that that psychologist was Jon Kellerman.

Dr. Dave: Right, the other one. As far as I know, you two might be the only 2 psychologist writers with psychologist heroes in the books.

White: There are a few others who have come and gone over the years, and there may be a few active that I don't know about, but Jon was certainly the trailblazer and my first novel followed his first novel probably by 6 or 7 years.

Dr. Dave: Yeah, and certainly he's very well-known. I had a listener who actually planted this idea in my head, who said, "Gee, why don't you locate a psychologist who writes novels and ask them some questions about how they come up with their ideas and all."

And so of course I initially thought of Jonathan Kellerman. I had read some of his books, and then a friend just happened to serendipitously loan me a book he had taken out of the library, which was your first book, and this happened relatively recently, and I read it and I really loved it. Actually I like your books better, I have to say, so...

White: Thank you.

Dr. Dave: ...I'm really glad to hook up with you. So that's interesting that you're right out there with Jonathan Kellerman. He did plant that flag first and as a result I think became perhaps better known. But he better keep his eye behind him because I think you're going to gain on him very quickly, if you haven't already.

White: Well, thank you.

Dr. Dave: So then you went into private practice after being the hospital liaison, and I guess you were in private practice in Boulder, Colorado. Wonderful place. And...

White: I did have a practice in Denver and in Boulder for a while. I thought, because of my relationships with referral sources I developed in Denver, I actually had a pediatric practice in Denver for a few years and an adult practice in Boulder, and by the late 80s or early 90s it became a full-time adult practice in Boulder.

Dr. Dave: Okay, and I'm wondering if you're in practice anymore, because, in my own detective work, I wasn't able to track you down using the phone book and so on.

White: Well, you won't find me in the phone book any longer. I closed my practice in the mid-90s, held on to my malpractice insurance for a few years after that, but I've not been involved clinically for over almost a decade.

Dr. Dave: Wow, so that's great. There are just so few people who are able to support themselves with their writing, particularly fiction writers, and so you've really joined an elite club. So – yeah, were you going to say something?

White: I was just going to say I've been very fortunate. You're right, it's very difficult. One of my early agents told me that in this business you can make a fortune but you can't make a living. And I'm very proud of having proved her wrong. I've not made a fortune but I have made a living, and I'm very proud of that.

Dr. Dave: That's great. So going back to that first seed that was planted by a listener who wanted me to ask, how do you come up with your plot ideas? And indeed you've got very great and intricate plot ideas. Where do they come from?

White: Let's go back to that first book that you read and this first idea I had when I was teaching myself to use a computer. I was on the ethics committee of the Colorado Psychological Association back in those days. And we reviewed cases of transgressions by our colleagues, and...

Dr. Dave: Mm-hmm.

White: ...and while sitting on that committee one of the cases that crossed our path was the Tarasoff case. And...

Dr. Dave: You should explain what that is to our listeners.

White: I'll try to explain what that is. Tarasoff was a California court ruling in the 1980s that set the first legal standard for the conditions under which a psychotherapist is required to breach confidentiality. And those conditions were basically limited to circumstances where the therapist had reason to believe that there was imminent danger to either the patient or someone else based on information that the therapist had learned in psychotherapy. And I began to wonder, when I first started thinking about this Tarasoff problem that crossed the committee, what if the criteria were not quite met but what if, if I, as a relatively insightful therapist, felt that one of my patients was about to hurt somebody and even got convinced that my patient was about to hurt somebody, but there had been no overt threat and there was, as far as I could tell, no imminent danger. Would I be free to warn that person? And under Tarasoff I would not, but I thought that's an interesting basis for a story, that simple dilemma. And that was the kernel that was the heart of Privileged Information, the first book.

Dr. Dave: Yes, and quite a heart it makes. Now – do you outline the whole thing ahead of time? Do you know where it's going to go?

White: (laughs) You have to keep in mind that I wasn't writing a book, so there was no point in outlining it.

Dr. Dave: (laughs)

White: The first thing I wrote turned out to be chapter 7 or 8 in that book...

Dr. Dave: Oh.

White: And I've now written 15 and most of the way into the 16th and I've never outlined one yet. I tend to start off with the dilemma, which is just very much like I described...

Dr. Dave: Mm-hmm.

White: ...and write in such a way that the dilemma becomes clear, and then write away from that in a way that the dilemma becomes resolved. I don't know the stories when I start. I find that I'm amused when readers tell me that they know who did it on page 50, and I never know who did it on page 50.

Dr. Dave: (laughs) Interesting. So, do the characters begin to assume a life for you on their own? Do they ever surprise you?

White: The continuing characters definitely have a life that just goes on through the series. Individual characters that I develop, usually with the intent of having them be secondary characters playing a specific role in a story, often surprise me by taking over a book. And there are examples throughout the 15 years I've been writing of my writing a bit player for a story who never leaves and ends up having a crucial role through the end. So I consider the process to be very organic and try to keep myself open creatively to whatever the characters I create seem to want to do.

Dr. Dave: Mm-hmm. Mm-hmm. Having been a therapist myself, I have to say you have a very finely nuanced sense of the psychotherapeutic process, particularly in terms of transference and countertransference. How did you come by this?

White: (laughs) The old-fashioned way. I spent 15 years, 8 to 10 hours a day sitting in a room with one other person trying to become the best expert I could be on that person. And I had the benefit of some fine training and some wonderful supervisors. And I think one of the advantages of being a writer has given me is I seem smarter than I am.

Dr. Dave: (laughs)

White: When I write about psychotherapy, I get to think about those psychotherapy sessions for as many hours as I choose. In real time, real therapists just don't get to do that.

Dr. Dave: Mm-hmm. Yes. Right.

White: We can ponder things for a few moments but at some point our patients would really like us to tell them what's on our minds. So the benefit of getting an opportunity to think about the therapist lines for a couple of days if I choose to, I think ends up making me look wiser than my old patients would tell you I was.

Dr. Dave: Ah, well, it's working, because you look very wise indeed. And I think you must have had some very good training and supervision along the way in order – even with the benefit of extra time to produce it. It's very educational, even for me, who went through a lot of that training myself. It's educational to read those thought processes that would go on behind the therapist screen, so to speak.

White: It's interesting, the two books that you've read are two of the books that have a very sharp psychological focus. Some of the books in this series are psychological in a much larger sense but not psychological in a practice or therapeutic sense. So the role of psychotherapy in any given book could be greater or lesser, and you've chosen 2 books that have a significant focus on the therapeutic process.

Dr. Dave: Okay, well, I look forward to reading the others as well. The two that I did read hinged quite a bit around issues surrounding confidentiality, and the dynamic tension between your hero – clinical psychologist, the character's name is Alex Gregory, and his wife who's named Lauren, and she's a lawyer and she works for the public prosecutor's

office. And then Alan Gregory – his best friend turns out to be Sam, who’s a police detective, and so you set up these plots, at least in these two books, where each of these characters is surrounded by an obligatory cone of silence. They can’t share with each other what they know, and this creates all kinds of difficulties. And I guess I had planned to ask you how you developed such a detailed understanding of all the ins and outs of confidentiality.

White: Well, one place that I go back to immediately is my experience on the ethics committee.

Dr. Dave: Yeah.

White: I would say half of the cases that we ended up dealing with over the time I was on the ethics committee had to do with confidentiality breaches. And when I started writing about it as – not as a professional but as a novelist, I ended up giving it a tremendous amount of thought. What are the boundaries of what people can talk about? And I think that I developed a cadre of characters who all have professional responsibilities to keep secrets, but all had different professional responsibilities to keep secrets. It does provide a natural tension and as a novelist I really appreciate tension and conflict. It helps to drive stories and helps to drive relationships. Again, the two books you’ve read are probably unusual in their focus. In many ways those two books are bookends. They’re the only two books that share the same antagonist, for instance, and so if you do take a look at some of the other books in the series you may see less focus on those issues of confidentiality and the ethical conundrums that arise.

Dr. Dave: Mm-hmm. Well, I found it educational. There were more ins and outs and pitfalls around the whole confidentiality set of issues than I was aware of. For me, it was educational. I would recommend these 2 books to any graduate student listeners who we might have here planning to be therapists.

White: It’s interesting that you say that, because the first book has been used dozens of times around the country as case reading...

Dr. Dave: Interesting.

White: ...for graduate programs dealing with ethical situations.

Dr. Dave: Oh, that must feel very good to you.

White: It does. In some ways I think that first book is an ethical nightmare for a therapist.

Dr. Dave: Yes.

White: It’s just, “What kind of absolutely terrible ethical mess could I put this guy in?”

Dr. Dave: Yeah.

White: And I could hardly imagine a more difficult circumstance.

Dr. Dave: Yeah, right, it made me feel good not to be in practice currently. (laughs)

White: Certainly not his practice, David. (laughs)

Dr. Dave: Yeah, definitely. To me your books have, and I don't know how you're going to be able to respond to this, but to me your books have a dark, gloomy feel. For example, Alex's marriage to Lauren seems fraught with difficulties from the outset, and personally I have a little trouble liking Lauren.

White: This is going to take a long answer.

Dr. Dave: Oh, good. That's fine. (laughs)

White: Going back to the assumption that A, I was not writing a book, you can also take the easy leap that when I was writing the first story, I was not writing a series. I was in no way planning to write a second book, let alone 15 dealing with the same small cadre of characters I'd created.

Dr. Dave: Mm-hmm.

White: So I didn't give much thought into how these people were going to play years down the line because I had no sense that I would be living with them...

Dr. Dave: Yeah.

White: ...years down the line. And Lauren's character was created solely as a way to have a romantic interest for Alan in that first book who would be reluctant for some very believable reason to become involved with him. And that's why I created her, and that's how I created her. And as the publisher became interested in me continuing to write series books, I was locked into who I created.

Dr. Dave: (laughs) Yeah.

White: There is a time, and a long period of time, starting in maybe book 3 or 4 that their marriage becomes very, very calm, and almost blissful...

Dr. Dave: Ah.

White: ...so marital woes are not a big focus of what goes on in the series. Again, they have trouble getting together and have developed some tension in the past couple of books, but in between, I don't think there's a whole lot of focus on marital discord.

Dr. Dave: Okay. How long does it take for you to write a book?

White: The fastest book I wrote was probably about 4 months. And the longest book was probably 9 or 10.

Dr. Dave: Okay, well that's pretty good. And what's your writing schedule like? Are you a morning writer or a...

White: I am a morning writer. I tend to be at my desk before 8:00 in the morning and my goal each day is to write 3 manuscript pages. If you write 3 manuscript pages everyday you get a 400-page thriller in 6 months. So (inaudible)...

Dr. Dave: That makes it sound easy.

White: Well, when you think about writing 3 pages, it's much easier than setting out to write a book.

Dr. Dave: Yeah.

White: I've proven to myself I can write 3 pages just about everyday. I'm still not convinced on any given day I can write another novel.

Dr. Dave: Right. That's – I think there's a good clue there for people who want to write, which is baby steps. Did you see that movie, What About Bob?

White: No, I didn't.

Dr. Dave: Oh, it's one of the funniest therapy movies I've ever seen, with Richard Dreyfuss as a psychiatrist and Bill Murray...

White: (inaudible) I know which one you're talking about.

Dr. Dave: You've got to see it. (laughs) You've got to see it. Talk about the patient from hell. Bill Murray plays that role to a T. And Richard Dreyfuss plays the role of the harried therapist also to a T.

White: It's funny, when you have the benefit and the pleasure of meeting a lot of writers over the years and you talk about baby steps, I doubt that if you lined up a hundred writers, you would find more than 1 or 2 who did not have a certain discipline about how they write. Almost everyone has a system and a pattern...

Dr. Dave: Mm-hmm.

White: ...and I can't think of two who have the same system or pattern.

Dr. Dave: Wow.

White: I have friends who sit down to write at 10 o'clock at night and they write until they fall asleep. And I have other friends who think about what they're going to write for 6 months and check into a motel and write 18 hours a day for 2 to 3 weeks and finish a book. So I don't think it makes a whole lot of difference what someone's discipline is, but I'm a firm believer that writers write. And when you sit down to write, you've got to write.

Dr. Dave: Yeah. Yeah. And you say you write 3 manuscript pages. You say manuscript pages rather than pages. What does that qualifier mean?

White: Manuscript pages is 1-inch margins double-spaced.

Dr. Dave: Okay.

White: And a typical thriller-sized manuscript will be 4 to 500 pages, so what publishers want to see when novelists send them books is a standard manuscript page, which is double-spaced, 1-inch margins on all 4 sides.

Dr. Dave: Mm-hmm. And are you doing a lot of editing on those 3 pages as you're writing, or do you just write it all real fast and go back and edit it? What's your approach?

White: Interesting question. Each day I start by reading the previous day's pages just to get back into the flow...

Dr. Dave: Mm-hmm.

White: ...and pick up the voice.

Dr. Dave: Mm-hmm.

White: But I don't read the entire book until I'm done and I don't do a major rewrite until I'm completely done with the first draft.

Dr. Dave: Okay.

White: I also, since I don't work from an outline, I will frequently write 10 pages at page 300 to 310 that renders obsolete everything I wrote between page 50 and 140. So rewriting is a major task in that first draft.

Dr. Dave: Mm-hmm.

White: Because I create inconsistencies constantly that have to be returned to and be repaired.

Dr. Dave: Are you rewriting sentences as you go along? I notice I do a lot of that. I write a sentence and somehow it doesn't ring right and so I have to keep – I keep working it

before moving along. And I know some people, they try to get it all out, and then they go back.

White: If I know what's coming next, I keep writing. I can always repair a sentence.

Dr. Dave: Okay.

White: So I will ride the wave of the story as long as I have clarity...

Dr. Dave: Mm-hmm.

White: ...before I go back to do anything reparative.

Dr. Dave: Do you read other authors in this genre?

White: I used to. I used to be voracious. I read everybody. And during the last few years I've almost stopped reading in the genre. So...

Dr. Dave: Uh-huh. How come? Did you get bored or are you afraid it would influence you?

White: A little bit of both. It's not so much boredom, I used to be one of those blessed readers who was always surprised when I turn the page. I mean, I was the ideal reader. I never knew what was coming. I never knew who did it.

Dr. Dave: Yeah.

White: I was constantly surprised. And it's one of the joys of reading in the genre and after you've done it a few times, it's real hard to be surprised and it took some of the joy out of reading the genre, once I recognized the tricks and how clues are put in place...

Dr. Dave: Mm-hmm.

White: It just became a very different experience. So most of my reading these days is in nonfiction, not in fiction at all.

Dr. Dave: Interesting. I read a fair amount of what I would call crime genre, I don't know if it's really mystery because generally it's not set up in such a way that I'm trying to guess who did what. I like to read, although less so now than initially, Robert B. Parker, Elmore Leonard. I love John Sandford, I love James Patterson. I like the legal guys, John Grisham, D.W. Buffa. James Lee Burke, I love. Who are some of your favorites?

White: The larger genre is the phrase I'm comfortable with and that's crime fiction.

Dr. Dave: Yes.

White: And it's a big umbrella and you can fit an awful lot underneath it. The smaller umbrella of mystery fiction tends to be books that have a puzzle to solve. A crime that needs solving, a murder that needs a solution. The thriller sub-genre is an interesting sub-genre. Ridley Pearson, a very well-known crime writer, once said that the difference between a thriller and a mystery is in the mystery, the reader's always wondering about the who, and in a thriller the reader's always waiting for the when.

Dr. Dave: Mm-hmm.

White: And I try to write books that have some of both...

Dr. Dave: Okay.

White: ...that have some momentum to carry the reader along to the next page, and also have a puzzle if the reader is interested in solving it. And you'll find out that almost all those writers who fell into your personal list tend to write books that are slightly more thriller-oriented than mystery-oriented.

Dr. Dave: Yes. Yes, that's true. And I'm really fascinated by – I mean, do you read Elmore Leonard, John Sandford, people like that, or did you, when you were...

White: I did, I read everybody.

Dr. Dave: Uh-huh.

White: One of the beauties of becoming a writer is at some point you recognize that you have instant access to the best work that's ever been done, and there's no better teacher, so early on before I started writing and in the first few years I was writing myself, I read everyone, and tried to learn from everyone I could.

Dr. Dave: People like Leonard and John Sandford, they write about what I can only describe as delicious psychopaths. And why would I want to call a psychopath delicious I don't know, and I'm hoping – I'm going to ask you to reflect as a psychologist, on perhaps our mutual psychology, what is it that draws us to and how is it that we get off on crime?

White: I've wondered about it a lot, and the best answer I've ever come up with is that we read crime fiction because it creates context. So much of what happens in the world in terms of evil and viciousness seems to evolve without context. We hear about the Jeffrey Dahmers of the world, or the Zodiac killers of the world, and they suddenly sprout into our living room and we're horrified, but there's no real context for how these people evolved. And one of the things that good crime fiction does is it creates context and then provides resolution. You mentioned earlier your true crime book, and in many ways the Zodiac killer is a very good example. One of the dilemmas with true crime is that the endings are often not very satisfying, and one of the benefits that novelists have is we can create the endings that provide some satisfaction and enclose the circle on the context. So, that's the best I've come up with.

Dr. Dave: Okay, that's good, yeah, because I realize in myself it's a guilty pleasure, to read these books and not everybody – do I want to let them know what I'm reading? It's like, well, why would you want to steep yourself in that?

White: I long ago decided I wasn't going to apologize for writing popular fiction. And I've written about some incredibly difficult subjects using crime fiction and the thriller genre as a vehicle, and I know that I've had a larger audience to talk about those things than I ever could have gotten if I've written in any other context.

Dr. Dave: Mm-hmm.

White: So there's almost nothing that can't be talked about in the contemporary fiction mode. And I don't think that contemporary fiction restricts quality. I don't think contemporary fiction restricts topic. It's books that people want to read and books that people want to finish. And if I can tell a story in a way that lets me talk about – I wrote an entire book about retribution called *The Best Revenge*. I get to say everything I wanted to say about retribution...

Dr. Dave: Mm-hmm.

White: ...in a story that people just adored. So I consider it a great vehicle and I get to come up with a better way for me to get to talk about serious topics. The psychological concepts behind *Dry Ice* are very powerful concepts.

Dr. Dave: Oh, yes.

White: I can't think of another way I could have had a podium for talking about them.

Dr. Dave: That was a beautiful metaphor, I meant to touch on that, that runs throughout the book, that you talk about the process of sublimation, both from a Freudian point of view, psychodynamic point of view, and in terms of – I guess you would call it chemistry. And you weave it through the book very nicely.

White: I can't think of any other way that I could have taught so many people about sublimation and had them remember it.

Dr. Dave: Right. Right. Yeah.

White: I can't.

Dr. Dave: Yeah. Beautifully done. As a matter of fact, since we brought that up, maybe I could find a little passage here to share with our listeners. I think I marked one of them and I remember that it seemed to me there were about three different ways that you echoed that theme about dry ice, like, "Oh, here's why it's called *Dry Ice*." And about three different ways that I can't enumerate now since I didn't really take notes as I was reading, and it's

now been a couple of months since I read the book, but let me just read a brief passage here. We're on page 212, and the paragraph starts out: "How would Amy sublimate? I didn't know, but she would. I knew she would. A clinical supervisor who had edged too close to understanding my truth pointed out that the chemical meaning of the word sublimate is not too different from the psychological one. To chemists, sublimation is the process by which matter changes from a solid state into a vapor without first melting. The supervisor could tell from watching my face that chemistry wasn't one of my things. 'Think dry ice,' she said. In the intervening years I had learned that the tricky part about sublimation, whether psychological or chemical, was in that qualifying phrase at the end. The tricky part was in making the change without first melting." So that was one really nice passage, I thought, there where you got in some good points about sublimation.

White: To me, it's – I have this platform where I can teach people basic principles and complex principles. The first book, the other one that you didn't read, has long treatises on transference and countertransference. And many people have told me, people who'd been in psychotherapy for years, that they never really understood them until they've read the book. So I have this way to – this ability, this privilege to be able to teach people about psychological principles in a way that's digestible and I try to take advantage of it.

Dr. Dave: Yes. Yes, well-put. So just a few more questions here. As a therapist, what's your theory of change?

White: (laughs)

Dr. Dave: Just a little tiny question.

White: Just a little question. Boy, I would have to ponder that. One of the truths of being a therapist for as long as I was is that I got better at it over the years and didn't understand it any better...

Dr. Dave: Mm-hmm.

White: ...as I got better at it.

Dr. Dave: Mm-hmm.

White: I'm not sure I could write a textbook on psychotherapeutic change. I'm not sure I could write a coherent chapter on psychotherapeutic change.

Dr. Dave: But somehow you do in your novels.

White: Again, give me an instance and tell me how that person's got to change, and I had the clinical ability to solve that relationship and my relationship with that patient in such a way that I could become a vehicle to help them adjust and change and grow.

Dr. Dave: Mm-hmm. Mm-hmm.

White: Universals about that, boy, David, that's a hard one. (inaudible)

Dr. Dave: Yeah, I really understand where you're coming from, because I would have trouble articulating theory. But as you point out, responding in the moment in a given situation – there's somehow an internalized body of theory that does help direct one's responses. They both feel spontaneous, but they're not random. Certainly they're shaped by years of supervision, personal therapy, reading, etc.

White: Yes. I totally agree.

Dr. Dave: Okay, let me try an easier one. (laughs)

White: (laughs) Thanks.

Dr. Dave: What's your recommendation for someone who's seeking a therapist? How would you tell them to go about finding a good therapist for themselves?

White: Well, something I used to do when I was in practice on which many colleagues told me I was nuts was that I saw people for an initial session for free, and it was my way of encouraging them to shop for therapists.

Dr. Dave: Mm-hmm.

White: And if they came back to see me, I would charge them for that first session.

Dr. Dave: Ah, interesting.

White: But if they never came back, they never got a bill. And although my experience is that not too many therapists have that kind of policy, I really encourage people to get some names from people they trust, people who have been in therapy with them or professionals who know their work, and try a few therapists. Something happens in the room when it's right. And people partially need to trust their instincts and people need to be – they need to feel the freedom to stay in therapy and they also need to feel the freedom to leave. If that first instinct that this is going to work turns out not to be right, they need to be willing to confront it with their therapist and find out whether it's a process issue in the treatment, or whether it's not a good match.

Dr. Dave: Okay.

White: And the fact that you've chosen someone doesn't lock you to them for life. So for me it's this dynamic that requires constant evaluation and re-evaluation.

Dr. Dave: Mm-hmm.

White: I might be the right therapist for someone at some point in their life and not be the right therapist for them at another point in their life.

Dr. Dave: Okay, interesting. What's your recommendation for someone who's seeking to become a therapist?

White: (laughs) Can I talk them out of it?

Dr. Dave: (laughs) My officemate who got a little jaundice as time went on would sometimes say to students who – it seemed like all of our students wanted to be therapists. Everybody wants to be a therapist. It looks pretty great from the outside and he'd say, "Okay, let me see if I understand here. You want to sit in a little room all day long and talk to people who are unhappy, is that right?"

White: (laughs)

Dr. Dave: (laughs)

White: There's a tremendous romance about what therapists do. And there is a tremendous exaggeration about therapists' power to facilitate change. And I understand the allure of the profession, it certainly grabbed me, but people do need to have a realistic sense of what it is as a profession and how hard it is A, to make a living at it, and B, how hard it is emotionally to do the work. I mean, with some patient populations it's just a very, very, very grueling job. My own experience as a therapist was gorgeous. I adored it, I loved the work and learned from my colleagues and learned from my patients, but I left the work at the right time.

Dr. Dave: Mm-hmm.

White: It was time for me to move on and now I really encourage people to look at psychotherapy the same way that many writers look at writing. They choose to be a writer only when they recognize that they're not happy doing anything else.

Dr. Dave: Mm-hmm. Mm-hmm. That was going to be my last question, which is what's your recommendation for someone seeking to be a writer.

White: (laughs)

Dr. Dave: (laughs)

White: I'm such an accidental writer that I feel that I wouldn't know how to prepare someone for this. It's the only job I've ever had in my life where I've never heard a colleague say they wish they were doing something else.

Dr. Dave: Hmm.

White: But it's also something that has such a low probability of success, financially, in terms of being able to make a living that you almost can't plan for it. It'll be like planning your retirement by using lottery tickets. There are great writers who never make a living...

Dr. Dave: Hmm.

White: ...and being good is no guarantee you will ever make a living doing this. But if you have to write, and you can't find a way around it, write, and then do something everyday to try to get your work read. And there are great books out there about how to get your material into the right hands of agents and editors and the advice is sound but the odds are long.

Dr. Dave: Yes. Well, Stephen, thanks so much for being my guest on Shrink Rap Radio.

White: Well, it's been my pleasure. I appreciate the opportunity.