



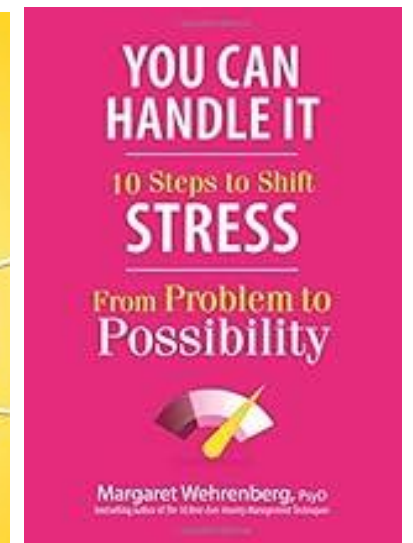
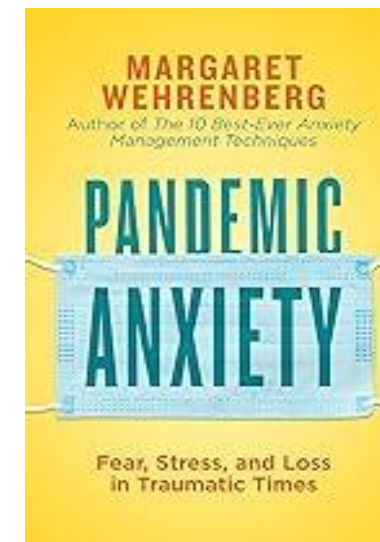
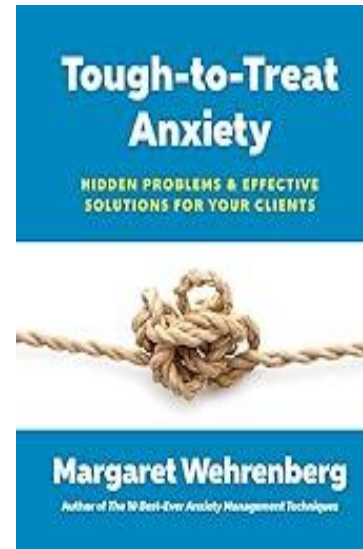
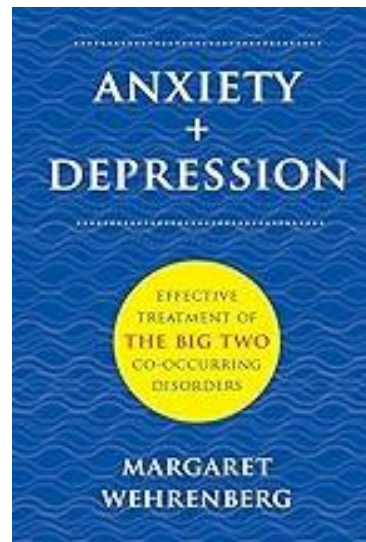
# **Saying Goodbye to the Work You Love**

**How do therapists know how to retire and end a practice?**

**Margaret Wehrenberg, PsyD and Lynn Grodzki, LCSW, MCC**

# Margaret Wehrenberg, PsyD

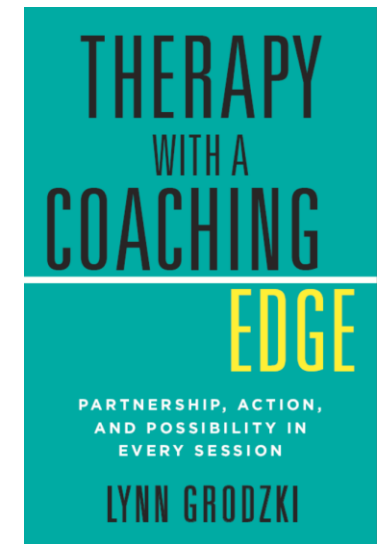
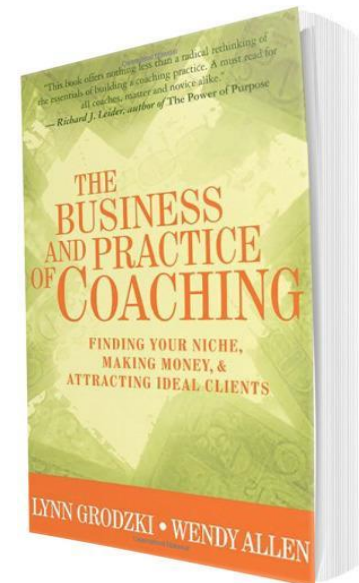
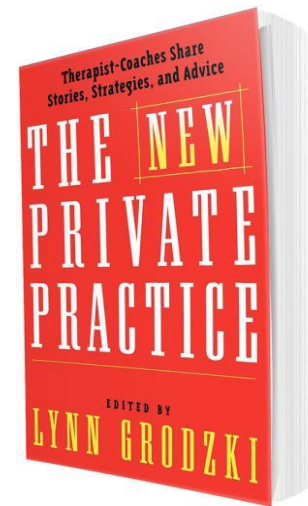
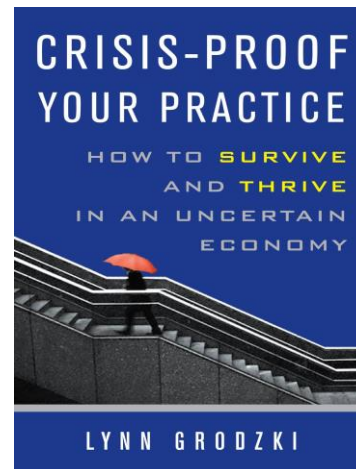
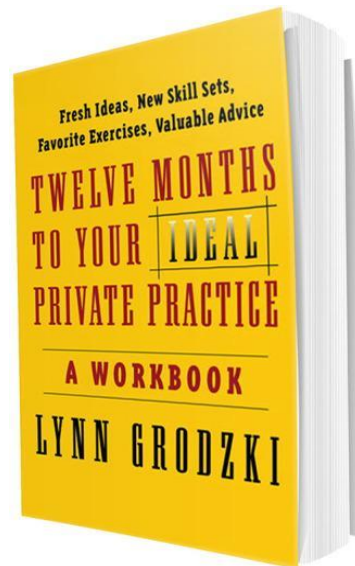
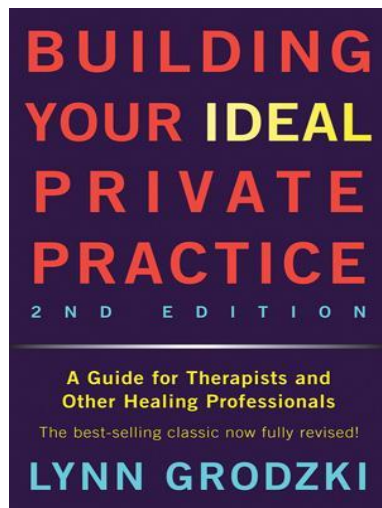
- Clinical Psychologist working in mental health for 50 years.
- Author of 12 books on anxiety and depression
- Presented internationally to over 50,000 attendees



# Lynn Grodzki, LCSW, MCC

privatepracticesuccess.com

- Executive in family business 1980-86
- LCSW in fee-for-service private practice (1990 – present)
- Master Certified Coach (1996-present)





# **Therapy is a unique profession. Therapists have unique and significant retirement challenges.**

- **Surveys, interviews of over 50 therapists (retired and in process of retirement)**
- **Female therapists dominate the profession, our findings reflect this demographic:  
Psychotherapy Networker, 11/2022**
- **Review of the literature on forced termination of therapy, therapists in retirement, retirement in general**
- **Consulting with other researchers about how therapists retire and close a practice**
- **Article: “How do Therapists Know When It’s Time to Retire?” Psychotherapy Networker, 1/2024**



Quick Poll:  
Who are we  
today on this  
call?

1. What is your age?

2. In what kind of setting do you work?

3. What is your educational background?

4. Where are you in the retirement process?

# Today's Agenda, Part 1:

## *Why Retire?*

- Push and pull factors
- Options, timing, pacing
- Stay or go ambivalence
- Readiness for change
- Polling in real time



# Today's Agenda, Part 2:

## *The Retirement Conversation:*

1. Professional Identity – Who am I without my work?
2. Letting Go of a Caseload – Attachment, transference, countertransference considerations
3. Our Business, Our Work, Our Selves – How to close a practice or leave an organization well
4. The Question of Legacy – Where have I made a difference?
5. Beginning Again – Support for a good retirement

# Push Factors – demands of the job

- Tired *by* the work or tired *of* it
- Difficulties with a generational divide
- Discomfort with new clinical approaches or rigors of current practice, including insurance or administrative requirements







# Options, Timing, and Pacing

- **Clean break vs. Semi-retirement**
- **Forced vs. Planned**
- **Mandatory vs. Choice**
- **Financially not possible vs. Luxury of stopping work**
- **Have to vs. want to**
- **Setting boundaries**

# Retirement mixed messages

## What is your family saying to you about retiring?

- I want your time.
- We need your money to keep the family going.

## Concerns from clients

- You aren't going to leave before I am done, are you?
- You seem tired and bored.

## Questions & comments from colleagues

- You're so good at this and so needed, don't retire.
- Isn't it time for you to bow out, let someone else have a chance.

# Pull Factors

- Time for other things
- Bucket list
- Unfulfilled longings
- Travel
- Second career or passion to pursue
- Control over next phase of life
- Meaning and purpose

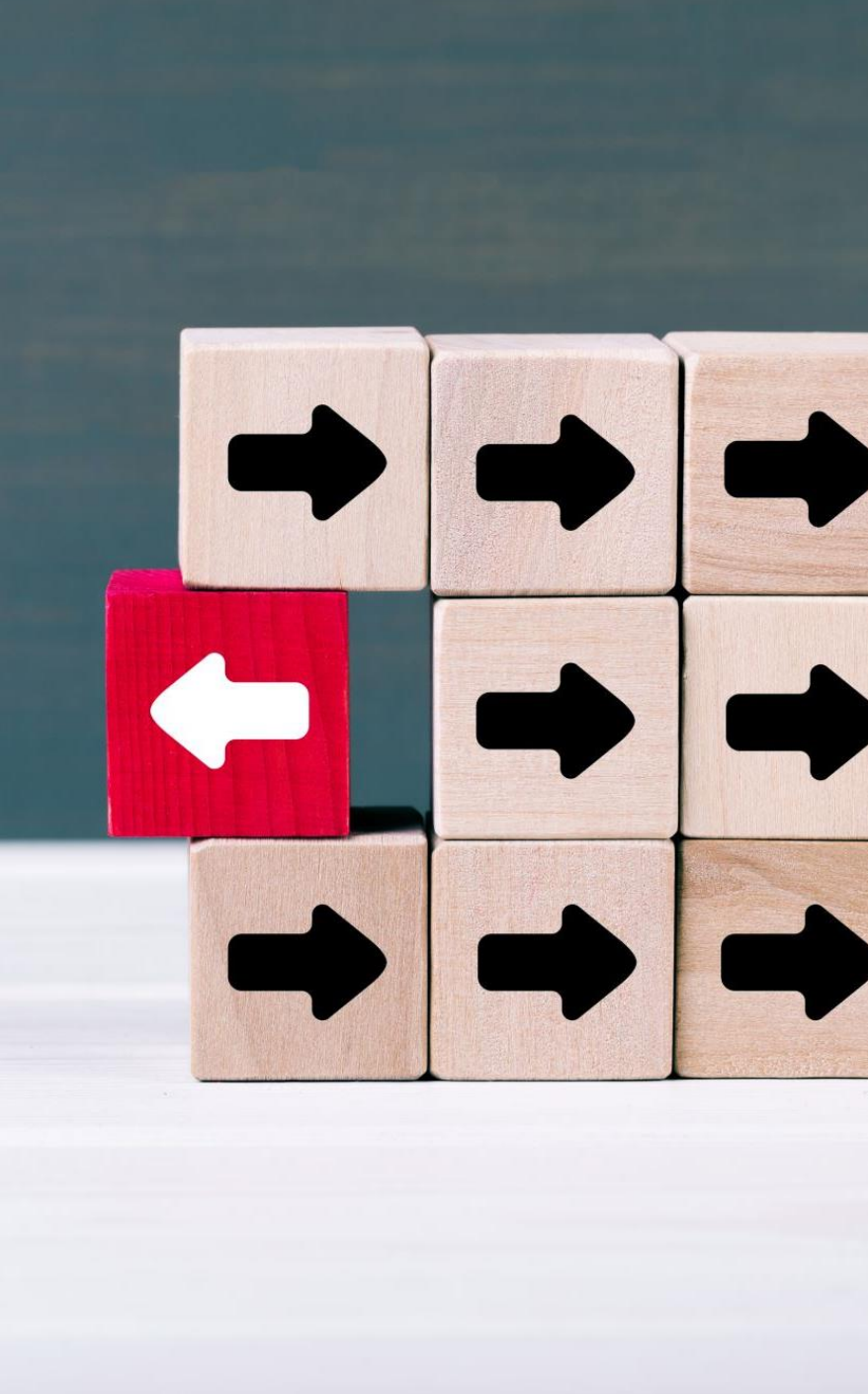


Kojola, E., & Moen, P. (2016). No more lock-step retirement: Boomers' shifting meanings of work and retirement. *Journal of aging studies*, 36, 59-70.



# Stay or go ambivalence

- Goals in conflict
- Cost benefit analysis
- Anxiety about change





# Readiness for Change

**Precontemplation**

**Contemplation**

**Preparation**

**Action**

# Poll



**Which push factors are affecting you now?**



**Which pull factors are you facing?**



**Where are you in the Readiness for Change model?**

# Breakout Rooms





**It takes time to age  
into this career.  
Its equally challenging  
to age out.**



# 1. Professional Identity

A new acquaintance asks “Tell me about yourself”



Write the first five things that come to mind



How many related to your work? Did you use a title or job you hold? Did you talk about your education?



Reflect on how you chose the career. What did it say about you then? What does it say about you now?



# ***We are not taught how to end relationships well***

**Therapist ends treatment = Forced ending**

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## ***Why it matters.***



**The therapeutic relationship is responsible for **most of the gains** resulting from therapy.**

**The client's perception of the relationship is the most consistent predictor of therapeutic improvement.**

Rosenzweig, S. (1936). Some implicit common factors in diverse methods of psychotherapy.

Muran, J., C. & Safran, J., D. (2002). A Relational Approach to Psychotherapy: Resolving ruptures in the therapeutic alliance. In: F. W. Kaslow

## 2. Letting Go of a Caseload

Ending treatment is a unilateral move by the therapist = possible “**Attachment Crisis.**”



### How clients may respond: transference in a forced ending

- Anger, abandonment, rejection, guilt, fear, denial, betrayal, sadness, grief, liberation, envy, all prior losses get triggered
- Leave first or be left; narcissistic injury – kicked out, quick exit; regressed; clingy; aggressive.

Holmes, Jeremy. *Termination in psychoanalytic psychotherapy, an attachment perspective.* 2010



## Client attachment styles in endings:

- **Secure attachment:** review gains, express emotion, be ready to move forward without therapist
- **Anxious or ambivalent attachment:** needy, clingy, insecure, regress to earlier symptoms
- **Avoidant-dismissive attachment:** anger, punishing, rejecting therapist
- **Disorganized attachment:** aggressive, unpredictable, sabotage ending well



*Forced Endings in Psychotherapy and Psychoanalysis* by Anne Powers 2016, Routledge

## Therapist attachment styles in endings:

- **Secure attachment:** review gains, express appreciation, feel sadness at ending, self-soothe, calm or complement patient/client attachment needs, accept loss, failure, success at ending
- **Anxious or ambivalent attachment:** enmeshed, worried, extends leaving date, dreams about client
- **Avoidant-dismissive attachment:** withdrawing, denial, steps back from work, feels provoked or blaming others
- **Disorganized attachment:** inconsistent with ending date, unreliable, no boundaries, makes therapeutic errors, blames client



## How therapist feels: countertransference

- **Guilt, anger, grief, longing, feel loss of part of self**
- **Narcissistic guilt – all about me**
- **Relief difficult work is ending**
- **Feelings of loss -- caring, love, affection for clients**



*Forced Endings in Psychotherapy and Psychoanalysis* by Anne Powers 2016, Routledge

# How to handle your own countertransference

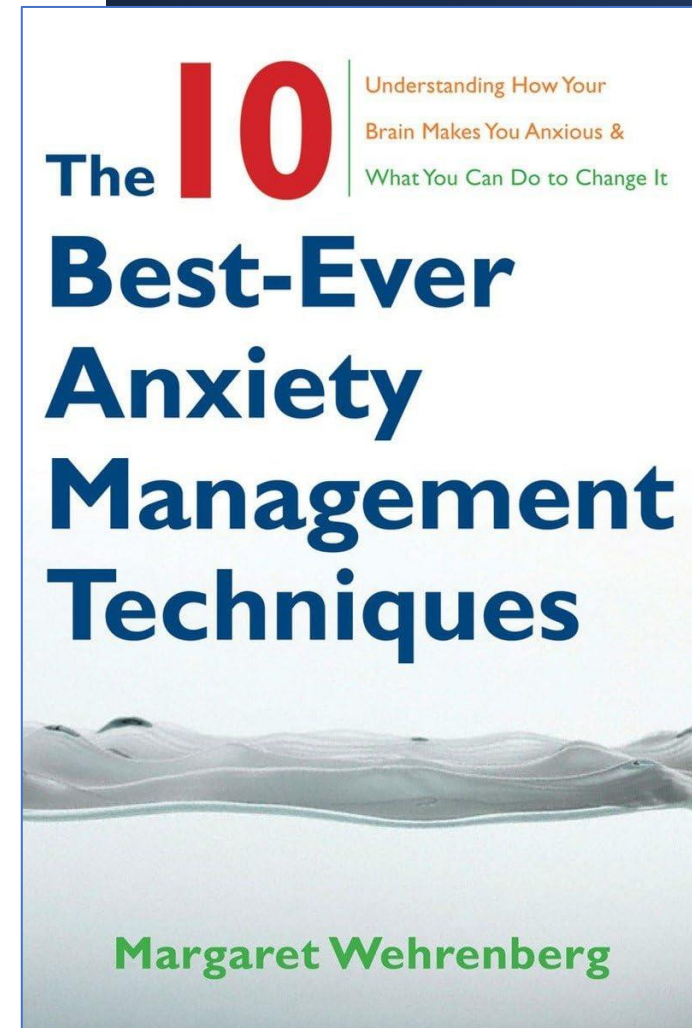


- **Work through feelings and issues before announcing retirement**
- **Work through as it is happening**
- **Pay attention to daydreams, fantasies, dreams about clients**
- **Stay open to difficult topics of your own: death anxiety, illness, mortality, abandonment, loneliness**
- **Get support: therapy, peer supervision, reading, etc.**



# Practice staying grounded and secure inside yourself

1. Make a plan and follow it.
2. Identify and utilize friends and colleagues to check in about retirement.
3. Avoid ambiguity by doing a cost/benefit analysis.
4. Remember that few choices in life are irrevocable.
5. Stop ruminating.
6. Use self-acceptance.



*The Ten Best-Ever Anxiety Management Techniques, by Margaret Wehrenberg, Norton Professional Books, 2019*

### 3. Our Businesses, Our Work, Our Selves

#### Forced endings

- Professional will, notifications, records

#### Choice endings

- Preparation -- when, how, what to say to clients and others

# Forced Endings: You Need a Professional Will

## For backup professional or executor

Information on how to contact my patients (clients), support professionals, listservs, insurers, and other professional contacts who will need to be notified in the event of my death or inability to continue my clinical practice.

## List contact info and location of:

Attorney, accountant, billing records, clinical notes, malpractice insurance, notifications to licensing board, listservs, professional organizations.

## Keep records:

As determined by state and federal requirements (usually 5-10 yrs), electronic same as paper, HIPAA no requirements except for signed NPP (Notice of Privacy Practices) for 6 years.

# Choice Endings: Give Yourself Time to Prepare

## Communication:

- **When to tell clients (colleagues, co-workers, staff, supervisors)**
- **How to tell clients, what exactly to say**
- **Who you tell, who you don't**
- **What to self disclose, what to keep private**
- **How to go through a process of ending**
- **Notification of past clients, shutting down website, phone lines, etc.**

## Complications:

- **Lack of referrals for those you are ending with**
- **Inconsistent communication if semi-retiring**
- **Therapist is unprepared emotionally or practically for these changes**





# To feel better about closing your practice:

- You are **NOT** your business
- Your business **IS** a good reflection of you
- All actions you will take in your business as you operate it and close it down are either fear-based or love-based

# Shift from Fear to Love

***“Fear is the energy which contracts, closes down, draws in, runs, hides, hoards, harms.***

***Love is the energy which expands, opens up, sends out, stays, reveals, shares, heals.***

***Fear holds close, love holds dear.***

***Fear grasps, love lets go.”***

Neal Donald Walsch, *Conversations with God*



## 4. The Question of Legacy – What have you built?

- If you are still working, you may be reluctant to let go of work
  - Feeling legacy is insufficient
  - Feeling that you have failed in some way, or that you are not done
- Readiness to let go: Getting to “enough”
- Utilize the worksheet, reviewing accomplishments

## Worksheet on Legacy

1. Think about the number of clients you may have seen over all the years of your work. (Make a guess.) \_\_\_\_\_
2. Multiply that number by 10 for the people those clients had an impact on. This is a solid guess on how many people you have influenced through seeing clients/patients.
3. How many people have you supervised?
4. How many courses have you taught? \_\_\_\_\_ Lectures given \_\_\_\_\_
5. Approximately how many students? \_\_\_\_\_
  - a. Now reflect: how many people those students had a positive impact on. (Consider if they worked in the field, as you did. Multiply the students by your answer to #2 \_\_\_\_\_)
6. What contributions during your career make you feel proud/positive about your work? Did you work with a challenging population that others may have found difficult to work with? Did you do something unique?
7. How many articles, books or curricula have you written?
  - a. Do you have an idea of how many books were sold or how many people read your article(s)
  - b. Have you written a blog?
8. Do you have a social media presence related to your work – how have you used that to promote your career or promote mental health wellbeing in the community?
9. What organizations have you contributed to, how have you advanced the profession through participation or attendance at meetings, conferences or trainings?
10. Who did you mentor informally, because you are good at helping others?

**What did you wish to do that you  
didn't yet do in your career?**



# How to say goodbye to the work you love

- **When I leave my clinical seat...**
- **Empty rooms metaphor**
- **What are the rooms of your career you need to walk through to say goodbye.**



# 5. Beginning Again

## The “Pull” factors

- **Passion**
- **Creativity**
- **Movement**
- **Family**
- **Adventure**
- **Enough time**
- **Unmet goals**



# Pre-contemplation: What Positives Await?

- **As you do activities that are not work-related, which ones delight you or give you energy?**
- **Which friendships do you want to make more time for? Begin nurturing them before making a decision to retire.**
- **What self-care do you want more time for?**
- **List activities/experiences that you might enjoy that you currently are not doing/rarely do. Plan some of them into your coming year and see if you want to increase those.**
- **Start a list of things you want - to have or to do. Add to it and look at it regularly!**

# Retirement “Identity”

- **The Task Doers** – works in some capacity post retirement
- **Leisure Seekers** – focus on recreation
- **Searching for Calm** – happy just resting and relaxing
- **Explorers** – learning new things, travelers
- **Family Extenders** – time with children, grandchildren, etc.
- **Out of Focus** – forced retirement, no plans, dissatisfied

Bartolome Freire - Richard Margolies, Study on Retirement. <https://www.bartolomefreire.es/en/retirement-and-the-places-youll-go/> *Retirement: A New Opportunity*, 2017.



# **A Walk Through the Future**

- **In this exercise we will explore what retirement might look like**



# Mission Statement for Retirement



**Where do I want to live?**



**What do I want to do?**



**Who will help me if I need it?**



**What relationships can I invest in now, for later?**



**What will I give (leave) to/for others?**



**What will I give (keep) to/for myself?**

“How to Make Retirement Less Scary” by Ron Lieber and Giacomo Gambini, NYT 5/17/24

# Q & A, Comments, Take-aways



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Signature

Date