

the AMERICAN PSYCHOANALYST

FALL/WINTER 2008
Volume 42, No. 4

Quarterly Magazine of The American
Psychoanalytic Association

Law and Order Taps Infant-Mother Paradigm Research

Ed Tronick

In 2007 research on my still-face infant-mother paradigm was featured on the "Cage" episode of *Law and Order: Special Victims Unit*. Certainly I had never entertained the idea that my laboratory research would make it to prime time. Yet there it was. For the program, it was used to illustrate the damaging effects of poor parenting on children. For me, it illustrated how children try to make sense out of the senselessness and the lack of shared meanings they may experience growing up. I thought about something Arnold Modell has said, "The vitality of the private self depends on the capacity to generate meaning; the inability to generate meaning is a psychic catastrophe." I also associated something my analyst said to me: "I have never experienced someone before whose personal and professional life is so much of the same piece." I will leave it to you to make further interpretations, but in my work I have tried to understand the relations between meanings and experience.

For me how individuals make meaning is related to growth and development, creativity and pleasure as well as to fixedness, lifelessness, and suffering. The relationship is explained by principles that govern the operation of open

biological systems. These principles teach us that as open, complex systems, we humans connect with one another to maximize the organizational complexity, coherence, integration, and flexibility of our sense of ourselves in the world. We thrive in the messiness of human connection and without it, we wither. In this regard, for example, I see Psyche's story as a canonical myth because she acts in the most human of ways: as a seeker expanding the complexity of her sense of herself, according to Carol Gilligan. She understands that striving for and creating the new requires risking the old and that it may bring deep and abiding pleasure and simultaneously loss.

MEANING MAKERS

The link between systems theory and pleasure is provided in Jerome Bruner's beguilingly simple assertion that humans are meaning makers. As meaning making open systems, humans utilize energy to create complexly organized, coherent, integrated, and flexible states of consciousness. States of consciousness are psychobiological states that contain the private meanings individuals give to their place in the world. The meanings may be in or, more likely, out of awareness, nonetheless they function to organize and anticipate the future based on the immediate present and updated past.

Ed Tronick, Ph.D., is a developmental and clinical psychologist with faculty appointments at Harvard Medical School, University of Massachusetts, Fielding Institute, and Boston Psychoanalytic Society and Institute. His research has been funded by NIDA, NICHD, NIMH, NSF, and the MacArthur Foundation.

Continued on page 6

INSIDE TAP...

- Winter Meeting Highlights 8-15
- Soldiers & Veterans Initiative 15
- Special Section: Reflections on Education 18-19
- APsaA Fellows 23-25
- Empirical Research 26
- Saint Elizabeths 27
- Notes on a Scandal . . . 29
- Interview with Phillip Freeman 30
- In Memoriam: Stuart T. Hauser 34



- 3 Meeting Members' Needs *Prudy Gourguechon*
- 4 Spring Meeting Update *Warren Procci*
- 5 COI Makes Proposals for Psychoanalytic Education
Elizabeth A. Brett and Daniel H. Jacobs
- 8 Projections: Dreams and Film *Bruce H. Sklarew*
- 9 On Stage during APsaA's Winter 2009 Meeting *Dottie Jeffries*
- 10 Psychoanalysis and Narrative Medicine *Fred L. Griffin*
- 11 New Education Division to Boost Public Interest in Psychoanalysis
Stephen Sonnenberg
- 12 Update on NAPsaC *Harriet I. Basseches with Abbot Bronstein and Fredric Perlman*
- 16 Politics and Public Policy: Achilles in Iraq: Part II *Bob Pyles*

SPECIAL SECTION
Reflections on Education

- 18 A New Model for Psychoanalytic Education *Sylvia S. Welsh*
- 19 Learning the Lessons of Shame *John Samuel Tieman*
- 20 Candidates Create Dialogue Across Institutes
Kim Gelé and Gregory M. Lowder
- 21 Affiliate Council President's Letter: December 2008 *Laura L. Jensen*
- 23 APsaA's Excellent New Fellows for 2008-2009
- 26 Analytic Clinicians Find Empirical Research Valuable
Gregory M. Lowder
- 27 Saint Elizabeths: Patron Saint of Psychoanalysis
Roger Peele and Humaira Siddiqi
- 28 FORWARD! Association of Administrators Celebrates 51 Years!
Dionne Hogans and Elizabeth Manne
- 29 Psychoanalytic Reflections on *Notes on a Scandal:*
The Psychopathology of Everyday Strife *James Hansell*
- 30 Interview with Phillip Freeman *Vera Camden*
- 31 Poetry: From the Unconscious *Sheri Butler Hunt*
- 34 In Memoriam: Stuart T. Hauser *Linda C. Mayes and Richard Almond*

Special Insert: APsaA Thanks Its Contributors

Correspondence and letters to the editor should be sent to TAP editor,
Janis Chester, at jchestermd@comcast.net.

THE AMERICAN
PSYCHOANALYTIC ASSOCIATION

President: Prudence Gourguechon
President-Elect: Warren R. Procci
Secretary: Robert M. Galatzer-Levy
Treasurer: Judith S. Schachter
Executive Director: Dean K. Stein

THE AMERICAN PSYCHOANALYST

*Magazine of the
American Psychoanalytic Association*

Editor
Janis Chester

Associate Editor
Christine Ury

Editorial Board
Brenda Bauer, Vera J. Camden,
Leslie Cummins, Phillip S. Freeman,
Maxine Fenton Gann, Noreen Honeycutt,
Sheri Butler Hunt, Laura Jensen,
Nadine Levinson, A. Michele Morgan,
Julie Jaffee Nagel, Marie Rudden,
Hinda Simon, Vaia Tsolas,
Dean K. Stein, *ex officio*

Senior Correspondent
Jane Walvoord

Photographer
Mervin Stewart

Manuscript and Production Editors
Michael and Helene Wolff,
Technology Management Communications

The American Psychoanalyst is published quarterly. Subscriptions are provided automatically to members of The American Psychoanalytic Association. For non-members, domestic and Canadian subscription rates are \$36 for individuals and \$80 for institutions. Outside the U.S. and Canada, rates are \$56 for individuals and \$100 for institutions. To subscribe to *The American Psychoanalyst*, visit <http://www.apsa.org/TAPSUB>, or write TAP Subscriptions, The American Psychoanalytic Association, 309 East 49th Street, New York, New York 10017; call 212-752-0450 x18 or e-mail info@apsa.org.

Copyright © 2008 The American Psychoanalytic Association. All rights reserved. No part of this publication may be reproduced, stored in a retrieval system, or transmitted in any form or by any means without the written permission of The American Psychoanalytic Association, 309 East 49th Street, New York, New York 10017.

ISSN 1052-7958

The American Psychoanalytic Association does not hold itself responsible for statements made in *The American Psychoanalyst* by contributors or advertisers. Unless otherwise stated, material in *The American Psychoanalyst* does not reflect the endorsement, official attitude, or position of The American Psychoanalytic Association or *The American Psychoanalyst*.

Meeting Members' Needs

Prudy Gourguechon



Prudy Gourguechon

Imagine a first year candidate. We'll place her at a medium-size institute. In October APsaA sends her an offer for a great deal—free membership for her first year as an Affiliate. She

accepts, and is now a member. Now let's imagine her professional needs over the course of, oh, a 35-year career as a psychoanalyst. And let's imagine her reciprocal relationship with APsaA, the only national professional organization she belongs to for the course of her professional life. She is a life-long member and it is the Association's purpose and obligation to meet her professional needs as best it can. So what are those needs? How can the Association best meet them? How can we thoughtfully plan to meet them better over the long haul?

Before we take a closer look at members' needs, let's consider who we are, APsaA's 3,000 plus members. We practice an arcane profession. The vast majority of us work alone. We usually lack any experience working in teams, competing for jobs, hiring and firing, going on company picnics, getting Christmas bonuses or even salaries. Most of us are small business people, micro business really, with an employee roster of one, and 100 percent of responsibility for everything from producing the product to leasing office space, ordering supplies, keeping the books, and purchasing services from accountants, lawyers, and utilities.

We sit all day, and often hunch over the computer at night. We usually serve as our own IT department and type our own letters. We are our own marketers and advertisements. We make a decent income as long as we keep working, but generally our income flattens out early in our careers. We don't

Prudence L. Gourguechon, M.D., is president of the American Psychoanalytic Association.

have paid sick leave or vacation days. Increasingly, we may have an ever harder time securing health insurance.

With this sketch in the background, I would like to review various categories of member needs and assess how we're doing at meeting them. Where there are significant shortfalls, I'll pose questions. I hope you will have the answers, which will lead to new programs and solutions.

Members need thriving practices requiring marketing, advertising, and self-promotion.

Our practice surveys have taught us that most analysts have about one or two psychoanalytic patients at a time. This is not necessarily a terrible thing. Most of us use our psychoanalytic knowledge and technique with every patient, even those that see us infrequently. Nevertheless, we often wish we had

more patients in analysis. Many of us have observed that though the mean number of analytic patients is low, there are a small but identifiable group of colleagues that have very busy analytic practices. The other APsaA officers and I have been talking about tapping into this cohort to see if they can teach the rest of us something. You will hear more about plans to address practice development over the next year.

Members need intellectual stimulation and continuing education.

I think we do a pretty good job in this area, with JAPA, our scientific programs, TAP, and local scientific meetings. We have good relationships with other psychoanalytic groups that also offer services that meet this need.

I personally would like to have the opportunity to attend updates in psychopharmacology and psychiatric diagnosis at our annual meetings, since I don't have the time to attend non-psychoanalytic professional meetings. I am curious to see if any other members see this as a need.

Members need facilities and equipment to conduct their practices.

Couches, stationery, computers; we don't require much. But I'd like to hear from members about any specific questions you have. Do you want your national organization to help you "shop" for the best couches, ergonomic chairs, hardware, and billing programs?

Members need to manage their practices efficiently and prudently.

Practical matters of record keeping, dealing with third parties, billing and collections can be done well and properly or haphazardly, leading to a smoothly running business or stress and frustration. We have started to provide brief

I would like to review various categories of member needs and assess how we're doing at meeting them. Where there are significant shortfalls, I'll pose questions. I hope you will have the answers, which will lead to new programs and solutions.

articles on these kinds of topics in the Practice Toolbox section of the Members section of the APsaA Web site. I hope you've visited it at <http://www.apsa.org/practicetoolbox>. We already have articles on opting out of Medicare (if you wish), writing a professional will, obtaining a national provider identification number, and more. Our elegant, thorough, and invaluable "Practice Guidelines," published by the Committee on Peer Review, provide a deeper look at complex practice issues such as:

- Charting Psychoanalysis,
- Interacting with Third Parties, and
- Psychoanalytic Clinical Assessment.

The complete "Practice Guidelines" have been collected and can be found at <http://www.apsa.org/practicebulletins>.

Continued on page 4

Members' Needs

Continued from page 3

Members need assistance with occupational stress and health issues.

How does your back feel after 20 years of practice, sitting in a chair craning your neck forward? After 35 years? What are the effects of stress on our coronaries, blood pressure, immune systems? How many of us quietly suffer a mild degree of work-related secondary PTSD? How many of us with chronic illness or personal loss struggle silently with the impact on our professional lives? Is there anything realistically that APsaA can do to help with these issues?

Members need opportunities for affiliation and collegiality.

Concern about this issue seems to have been the root of the distress expressed recently over the possibility that our spring meetings, losing almost \$200,000 per year, might not survive. If it does prove to be necessary to drop the annual spring meeting, what can we find to replace it at a less disastrous financial cost? Regional meetings, topical, and/or research meetings? Our work life is isolated, team-less, and sometimes friendless. How can local, national, and international organizations best (and financially prudently) meet members' needs for affiliation and collegiality?

Members need information.

As in all professions, members need a constant supply of information—about practice, theory, research, the basic body of knowledge of the profession, and the way it links to other fields of thought. I think we do a pretty good job in this arena but there is a constant need to maintain and improve quality and widen the scope of focus. Our committees are exploring new communications methods, with increased and more sophisticated use of the Internet. Survey Monkey, podcasts, social networking sites, Wikipedia, and other knowledge sites and services all offer promising dividends in our ability to manage and share information.

We are left with a great number of questions about how to better meet members' needs. Together with the rest of the Executive

Spring Meeting Update

Warren Procci

In the last issue of *TAP* I promised that I would get back to you with our final revenue figures for the Atlanta meetings. As expected, we once again had a sizable loss of \$178,000, although this was not quite as bad as the 2007 loss of \$187,000 in Denver. Unfortunately, these figures only confirm the findings and recommendations of our Task Force on the Future of the Spring Meetings, which I reported to you in the last issue of *TAP*. We now have had five consecutive years of six figure losses from the spring meetings. If we are to maintain these meetings, and I hope that we can, we have to hold them only in those cities where we have been consistently successful in the past, and they will have to meet the attendance and revenue guidelines we have established.

While I have your attention, I'd like to address a nagging question, which I hear from some members. I must dispute the notion that some may have that separating our spring meetings from those of the American Psychiatric Association has led to the ongoing difficulties with these meetings. This is simply not true. For example, during the last two years that we met in conjunction with APA (2000-01) we had an average attendance of 535 members and an average total of attendance of 897. Over the course of the next four years (2002-05), we had an average attendance of 536 members and an average total attendance of 1,017. Obviously the factors interfering with the lack of profitability of the meetings are complicated and multifactorial, but it is quite unlikely they are related in any clear way to the disjunction from the meetings of the APA.

In future *TAP* issues, I will discuss a number of additional ideas and misconceptions about the spring meetings.

APsaA

Warren R. Procci, M.D., is *president-elect* of APsaA.

Committee and the staff, I want to construct an e-mail questionnaire to send you by early spring to help obtain answers to some of the questions posed. The data from the Members Needs survey will tell us what directions

to take in improving old services and inventing new ones. The basic question is this: What do you, APsaA's member, need over the course of your entire career, and how can we meet those needs?

APsaA

COI Makes Proposals for Psychoanalytic Education

Elizabeth A. Brett and Daniel H. Jacobs

The Committee on Institutes (COI) visits four institutes each year and, as most of you know, these site visits extend over four days and produce extremely detailed reviews of an institute's educational functioning. Over time the accumulated knowledge arising from these visits gives the committee a broad and deep view of analytic education across the country. This makes us aware of the many challenges facing analytic educators as well as the responses they have made to them. In addition to our own observations about teaching at institutes, we have had the help of Paul Holinger and the Certification Examination Committee (CEC). They have identified difficulties colleagues have in presenting their work, which most often do not represent personal limitations but limitations in analytic education. Holinger's committee, for instance, noted the difficulty many colleagues have in making themselves clear in writing and, at times, speaking about their work.

clinical material to classmates and faculty, and 3) greater attention to the termination phase of analysis. The courses on writing and formal presentations would begin early in and continue throughout training. They would supplement the usual courses on psychoanalytic theory and technique. The purpose of the courses and presentations is to enhance candidates' ability to assess psychopathology, formulate cases, and describe the dynamic currents in sessions over longer periods of the treatment and ultimately through the arc of an entire analysis. Writing courses, pioneered by Stephen Bernstein, have proliferated throughout the country. These courses focus on the articulation and communication of analytic ways of understanding. COI, through our site visits and committee discussions, hopes to collect models for teaching writing that seem to us to have been most effective and to disseminate them to interested institutes.




Elizabeth A. Brett



Daniel H. Jacobs

of training and determine whether candidates advance to the final stage of their candidacy. At other institutes they occur later as a determination of readiness to graduate. Again, useful models of education that encourage formal presentation can be collected and disseminated.

The teaching about the termination phase of analysis, in some institutes, may not be given as much attention as is needed. Candidates have often completed their own analyses and may have even graduated before they terminate an analytic case. This makes it harder to organize a course of study in termination at a time most relevant to the candidate. Asking graduates and advanced candidates to formally present material from their work on termination may be one way of addressing this issue. A series of scientific meetings that focus on the subject may be another. We would hope that directors of institutes coming together at the COI sponsored Meeting of Directors might address this educational issue in greater depth.

By regularly writing and speaking about their work, including termination of analyses, candidates will enhance their developing capacity for self-observation and self-reflection. Gradually this will prepare them to function independently with the assumption that after graduation they will continue these processes of reflection on their own and in supervisory dialogues with individual analysts and groups of colleagues. This will enable them to write about and describe their work in professional settings as authors of journal articles or as teachers of psychoanalysis. It will also prepare them for the clinical reviews of their work required for career advancements by whatever certification and training analyst appointment procedures are in place. 

The ability to clearly describe one's work and one's thinking to others is an important professional achievement.

They noted problems formulating cases and describing termination phases, this latter related to candidates' often graduating without a terminated case.

The Committee on Institutes recommends that institutes incorporate the following framework for teaching clinical thinking into their curricula. We propose a sequence of courses which include 1) seminars on analytic writing, 2) seminars on formal oral presentations of

The ability to clearly describe one's work and one's thinking to others is an important professional achievement. Formal oral presentation of a candidate's work should be part of every curriculum. Early in training the focus might be on initial assessments and brief clinical vignettes. Later longer portions of an analysis might be described and at advanced stages of training a complete or nearly complete analysis. Institutes have developed a variety of approaches to the presentations of clinical material. The Houston-Galveston Psychoanalytic Institute has a system in which analysts unfamiliar with a case, i.e., someone other than the supervisor, read and discuss annual summaries with the candidate. A number of institutes, Chicago and Los Angeles included, require lengthy case reports which are presented to and discussed by the candidate with a panel of analysts. At some institutes such presentations occur in the middle

Elizabeth A. Brett, Ph.D., is training and supervising analyst at Western New England Institute for Psychoanalysis and associate clinical professor of psychiatry (psychology), Yale University School of Medicine.

Daniel H. Jacobs, M.D., is a training and supervising analyst at the Boston Psychoanalytic Institute and director of the Center for Advanced Psychoanalytic Studies.

Editor's Note: This article replaces the BOPS column, which will return in the next issue.

Infant-Mother Paradigm

Continued from page 1



Ed Tronick

A first principle of open systems is that systems that successfully gain energy and resources become more complex and integrated, as stated in *The End of Certainty* by

Stengers and Prigogine. By contrast, systems that fail to gain sufficient resources lose complexity, dissipate, and move toward chaos and death. Gaining resources is always a struggle and the human struggle for resources is the struggle for meaning. Though humans can self-organize states of consciousness, one of the most robust ways of expanding an individual's state of consciousness is to create what I call a dyadic state of consciousness. It is the joint creation of two or more embodied minds bringing elements of meaning from each of their separate states into a shared dyadic state. As participants in this dyadic state, individuals appropriate new meanings into their own state of consciousness, and as a consequence the complexity of each individual grows.

Paradoxically, though systems principles suggest that organisms strive to maximize the coherence of their sense of the world, the shared states that human beings seek to nourish their existence are always unpredictable and messy, and may be contradictory and incoherent. This messiness is inherent to the

But with the mother's continued lack of response the infants disengage, look away, become sad, and engage in self-organized regulatory behaviors, such as thumb sucking (see illustration below). Though we cannot directly know the meaning which an infant makes of the still-faced mother; it must be something like,

I am left to wonder if some of what is heard from analysts on the couch is not generated by a lack of shared meaning making and their having to make meaning on their own.

process of meaning making because of the many kinds of meanings to be integrated, limitations in the capacity of meaning making systems, and the many kinds of meaning making processes (affective, cognitive, memorial, linguistic, and bodily processes, and psychodynamic meaning making processes such as a dynamic unconscious, projective identification, and transference). Nonetheless, the messiness of meanings is essential; it is the ooze from which new meanings are created.

STILL-FACE PARADIGM

To explore meaning making, I created an experiment to disrupt meaning making in infants, children, and adults: the face-to-face still-face paradigm. With young infants, we ask the mother to freeze while *en face* with her infant—to hold a still-face and refrain from talking or gesturing. Initially, in response to the still-face, infants act to re-instate their exchange of meaning by smiling at and gesturing to their mothers.

“This is threatening,” or perhaps “I no longer exist” or echoing André Green, “She is dead.” As the still-face continues, the infant's state of consciousness is likely to change to something like, “I must try to hold myself together.” For the infant in the still-face there is meaning expressed in his or her posture, actions, and affects, but the meaning is one that precludes gaining complexity.

More recent work by my group with toddlers in a still-face paradigm and adults in a role-playing still-face paradigm found that they react similarly to the infants. Importantly and in keeping with their greater meaning making capacities, toddlers attribute states of mind to the mother (e.g., “Are you sleeping? Wake up!” or “Don't be afraid of the [toy] alligator!”). There is meaning in their words, in their affect, and their actions that reflect their capacities for pretend play, cognition, language, mentalization (according to Fonagy and Target), and complex affects. Their impelling certitude is one of fearfulness and confusion at the break in connection. But the need for making sense of the world is so great that when play is resumed after the still-face some of the toddlers ask questions that attempt to make coherent sense of what happened with the mother (“Why didn't you talk to me?”) even though it brings back the painfulness of the experience. Perhaps their seeking has some relation to insight. For the role-playing adults, the “infant-persons” reported feeling anxious and vulnerable, angry, frustrated, sad, afraid, confused, even “panicky.”

Continued on page 7



The still-faced, “mother-person,” reported feeling guilty, distressed, anxious, depressed, shamed, vulnerable, and confused. One reported, “It felt terrible to be so closed off from the infant. It made me feel depressed and I’m sure the ‘infant’ did too after our interaction.” I am left to wonder if some of what is heard from analysts on the couch is not generated by a lack of shared meaning making and their having to make meaning on their own.

DISSIPATION OF SELF

What then is the link between open systems theory, meaning making, and pleasure? I believe that when humans are seen as *experiencing* meaning making systems, the systems phenomenon of an expansion or dissipation has powerful experiential consequences. Dissipation is experienced as shrinkage, anxiety, a loss of self, and a fear of annihilation. One’s sense of self in the world begins to come apart. René Spitz’s infants, for example, were chronically deprived of the possibility of making meaning, and every level of their systems failed to grow and expand. Their experience was one of apathy, fearfulness, and sadness, and this experiential state further amplified their failure to make meaning. I think it is noteworthy that in the adult still-face study the reported experiential effects occurred in role-playing adults who were fully aware that the

curiosity, and exuberance. We see this in adults when an interpretation takes hold. Ultimately I believe there is an embodied elemental experience of fulfilling a basic life-governing principle: the success of making sense of one’s place in the world and becoming more complexly organized. Often this feeling of wholeness, completeness, safety, and exuberance is out of awareness. Occasionally it is in awareness, and when it is, it is special indeed. But whether in or out of awareness it is the experience of a deep, abiding pleasure.

Humans as meaning makers have no option but to strive to increase the complexity of their states of consciousness. Were we to stop we would dissipate and experience the terror of annihilation. Successfully creating new meanings increases our complexity and brings pleasure. However, it is not as simple as



such fixedness precludes the pleasure of expanding and the fulfillment of systems principles. Thus the dilemma of striving to grow in complexity while risking dissolution is to either experience pleasure tinged with terror or to not strive to grow and never experience pleasure. Healthy humans choose pleasure and terror.

Psyche has all the pleasure one could imagine yet chooses to look at Cupid because she must strive for the deep pleasure of expanding her knowing of him and her relation to him, even at the risk of dissolution of the complexity she has already achieved. It is something she must do to be human. Her greatest pleasure comes when she dissolves the old and expands her state of consciousness even though much is lost, including immortality. Thus the myth captures the momentous and the everyday nature of meaning making, the experience of pleasure and, yes, it even embeds systems principles. To create the new is to risk the old for the possibility of a greater pleasure, but not to create the new is surely to perish. And while I recognize that analysts do not give advice even to mythical figures, my myth is that there was an analyst at Psyche’s bedside—perhaps even my analyst—who conveyed to her the message: “Take the candle and look, it will change how you see yourself in the world.”

For video of the still-face, citations, and further information, please contact the author at edwardtronick.org.



Joy, interest, curiosity, and exuberance...
we see this in adults when an interpretation takes hold.

situation was set-up and unreal. Nonetheless, the effects were powerful, because the experiment taps into a basic primordial experience of a dissipation of self-organization because of a failure to form a dyadic state.

By contrast, when new meanings are self-created or cocreated the individual experiences an expansion of her own state of consciousness, a feeling of being bigger and a connectedness to the action, idea, or person on which or with whom the new meaning was made. When creating new meanings, individuals—infants, children, adults—grow in every possible way and experience joy, interest,

either success or failure, because striving to create something new requires taking apart something old. Taking apart the old organization to create something new reduces complexity in the short run, and the reduction is experienced as anxiety, a threat to one’s self. This anxiety is increased because of the implicit knowledge that there is no guarantee of ultimate success in the creation of new meaning. This anxiety is not the same as psychodynamic defenses, it is an inherent experiential quality of humans as systems. One apparent way to prevent the anxiety is to remain fixed and not to change, but of course

Dreams and Film

Bruce H. Sklarew

Freud had an antipathy toward the usefulness of film portraying psychoanalytic ideas. He refused an offer by Samuel Goldwyn of \$100,000 in 1935 to consult on a film about famous love stories and strongly advised Karl Abraham and Hanns Sachs not to consult on the first psychoanalytic film, *Secrets of the Soul*. However, he encountered film when he saw movies in New York City in 1909, appeared in many home movies, and was sighted at an American double feature in Vienna in 1936 or 1937.

FRATERNAL TWINS

Nevertheless, despite Freud's antipathy, film and dream theory were conceived and born as fraternal twins. In December 1895, the Lumière brothers developed an apparatus for projecting images on a wall, introducing moving images as entertainment and eventually as a new art form. In Vienna in the mid-1890s, Freud elaborated on the transformation of dream thoughts into a visual representation, the dream. According to Anne Friedberg, the cinema, an apparatus that could project visual images, was in search of a theory and dream theory was in search of an apparatus. Freud's theoretical "body" and the Lumières' apparatus developed with ambivalent mutual attraction.

Freud's delineation of the mental apparatus that contains the site of the dream parallels the development of the film apparatus—camera, film stock, processing, and projection. Quoting G. T. Fechner that the scene of action of dreams is different from that of waking ideational life, Freud wrote in *The Interpretation of Dreams*, chapter 7 (B) that this scene "corresponds to the instrument which carries out our mental



Bruce H. Sklarew

functions as resembling a compound microscope or a photographic apparatus or something of the kind." Could his cryptic flow of associations which begins with a projected virtual image followed by an apparatus, or a "form of photography," and then the vague and ambiguous and perhaps covering up phrase "something of the kind" suggest that he did not acknowledge but incorporated into his theory the Lumière apparatus that was well known throughout the world by 1896? Did Freud here leave a message to be deciphered?

SECONDARY REVISION

Like segments of ice, the dream thoughts of the latent dreams are pressured by the dream work, but after thawing, its elements are turned about, broken into fragments and jammed together in refreezing. The "film work" parallels this dream work. It transforms the "film thoughts" in the filming into visual images. The out-of-sequence actual film shots result in a disordered array like the disjointed icepack. The "film work" then uses the equivalent of condensation, displacement, symbolization, and especially visual representation. Editing weaves the visual and auditory segments of film into a believable narrative and emotional flow that become the film in a process resembling the secondary revision that results in the manifest dream.

Fellini said, "Film is a dream for the waking mind." Bergman said that cinematography is essentially dreaming, and that as a director or creator of the picture you are a dreamer. Bertolucci said, "In dreams as in the cinema, or in cinema as in dreams one has the great liberty of using free associations to explore meaning. Cinema is really a language which uses signs drawn from real life...Cinema is made from raw material woven on a dream loom."

Bertolucci began his first analysis in 1969. Within three years he scripted and directed three masterful films in his most productive period—*The Spider's Stratagem*, *The Conformist*, and *Last Tango in Paris*. He quipped that he was not analyzing himself but rather his dreams about his films with full awareness of the use of displacement. What a strong antidote to those who fear that analysis will dampen creativity.

"Cinema is really a language which uses signs drawn from real life...Cinema is made from raw material woven on a dream loom."

FILM AT THE WINTER MEETING

The theme of film and dreams is addressed in the three-part workshop at the meeting of the American Psychoanalytic Association in January 2009. Esther Rashkin will show and discuss *Star Trek: The Next Generation* on Thursday, Jan. 15, at 7:30 p.m. This series tells stories about alien species, intergalactic travel, twenty-fourth century technology, and life in outer space as a way of talking about *intrapsychic space*, the alien world of dreams, the unconscious, and the fundamental question of what makes us human. On Friday afternoon, Adrienne Harris will show and discuss *Tarnation*, a film in which a gay, Jewish Texan filmed himself, his psychotic mother, and his disturbed grandparents from age 11 to 30. In this film the audience is plunged into a visual and auditory

Continued on page 9

Bruce H. Sklarew, M.D., co-edited *The Last Emperor: Multiple Takes (1998)*; Bernardo Bertolucci: *Interviews (2000)*; and *Analyst in the Trenches: Streets, Schools and War Zones (2004)* and has authored *papers on film, the Annunciation, and trauma and loss in the inner city*.

On Stage during APsaA's Winter 2009 Meeting

Dottie Jeffries

New York City and the theater arts go hand in hand. How can you visit the Big Apple and not see a Broadway or Off-Broadway play while you're in town? Reflecting this vital part of New York's fabric, the Scientific Program for the Winter 2009 Meeting features three outstanding theater-related sessions.

THE VISIT— SYMBOLIC OF THE RISE OF NAZISM

Stage design at a Winter Meeting? Tony award nomi-

nated (*The Pajama Game*, 2006) set designer Derek McLane will join the discussion group, "Friedrich Durrenmatt's *The Visit: Super-Ego Failure in a Group*," as presenter. *The Visit*, a play that has recently been staged as a musical, is frequently seen as symbolic of how Nazis gained popular support in Germany. *The Visit* portrays the gradual dissolution of super-ego functioning as impulses. Feelings are rationalized, individual responsibility is relaxed and



Derek McLane

Photo: Montique Carboni

denied, and primitive group standards are substituted for individual integrity. The play also depicts the group's investing an authority figure with power to override their consciences. The chairs for this discussion group which will take place on Thursday morning, January 15, from 9:00 a.m. to 11:30 a.m., are Eva F. Lichtenberg and Arnold D. Tobin.

McLane, who designed the sets for two productions (1991 and 2008) of *The Visit*, will discuss his own experience and story analysis of the play in context of this discussion group, paying close attention to Freud's *Group Psychology* which attendees are encouraged to read. He will likely illustrate his remarks with images of the set designs and may sketch as well.

HEDDA GABLER ON BROADWAY

On Thursday evening, January 15, the theater discussion group chaired by APsaA members Fred Sander and Phillip Freeman will see a live production as a point of departure for discussion of how analytic theory has been and can be applied to theater events. This year, the discussion group will see the Broadway production of Christopher Shinn's (past APsaA Fellow, Obie Award winner, and 2008 Pulitzer Prize finalist) adaptation of



Christopher Shinn

Photo: Trevor Oswalt

Hedda Gabler starring Tony award winner Mary-Louise Parker. Playwright Shinn will meet with the group at a neighborhood restaurant prior to the 8:00 p.m. curtain to discuss how psychoanalytic ideas informed his adaptation.

"Henrik Ibsen's great social drama is contemporaneous with the birth of psychoanalysis and draws from the same wellspring of ideas," says Freeman. "When we discuss the challenges of mounting a contemporary performance of this late 19th century play in the present year, we may discover echoes of negotiating early psychoanalytic ideas into contemporary practice."

Prospective participants are asked to e-mail Fred Sander, Fredmsander@aol.com, expressing their interest in attending.

Continued on page 14

Dreams and Film

Continued from page 8

world of fragmentation, incoherence, and contradictory narrative fragments and images within a striking montage. The filmmaker, Jonathan Caouette, will be interviewed by Laurence Hegarty. On Saturday, afternoon following the showing of *Idlewild*, John Hartman will focus on a recurrent suicidal dream and on Leon Balter's exploration of dreams nestled within works of art. This mechanism deals with problems of reality including denial of a painful reality or the depiction of an antithetical view of that reality.

PROJECTIONS: THE JOURNAL FOR MOVIES AND MIND

The fourth issue of *Projections: The Journal for Movies and Mind* (discussed in the Fall 2008 TAP) begins with Andrea Sabbadani's conversation with British film director, Mike Leigh, exploring the psychology of the artist and the actor. Yadin Dudai discusses the developing field of "neurocinematics," the ways which film "uniquely fits, exploits, and expands the potential of a specialized cognitive machinery in the human brain." A pioneer of science fiction studies, Eric Rabkin, takes a look at the 1941 films *Dracula* and *Frankenstein*. In discussing Kubrick's *A Clockwork Orange*, Jens Eder

develops a multilevel theory of emotion elicitation for a film. Catherine Fahlenbrach analyzes the way in which sound design controls the emotional impact of image and sound on the viewer.



Future columns in TAP could further compare viewing film and the dream experience, Ingmar Bergman's use of dreams and dreamlike visuals, Bergman's final legacy, and how film programs are presented by psychoanalytic societies to professional audiences and to the lay public to elucidate psychoanalytic ideas.



Psychoanalysis and Narrative Medicine

Fred L. Griffin

She lay there like a hieroglyphic: her enormous head permanently turned to the right... her arms wasted and contorted into cryptic gestures, her legs flopped to either side with ankles touching, forming a diamond. She had only the timeline of her parents to confirm that she was a 13-year-old girl... Every morning her father, a soft-spoken man with infinite patience, would translate her spasms and tracheostomy smells, while mom slept...

Her fever broke without provocation on the fifth day... She began to smile more and flail less... And all at once every past thought of "let her die" gave way to the reality that the family will once again depart intact; that the mystery of her continued existence may be solved by musing in self-defense that perhaps it isn't as much an exhausting prolongation of life as it is the preservation of an opportunity to love.

This narrative was written by a third-year medical student during a weeklong class on narrative medicine that was taught by a psychoanalyst and an English professor. Although this piece is written by one who likely knows something of the craft of writing, it is a story that mostly comes from an invitation to this student to write about his experience with this patient and her family—to allow his senses to play freely within an imaginative space that creates a kind of capacious language, that transforms the sensory world into something that is comprehensible as a story. In speaking of the interweaving—and reconciliation—of primordial, affective-sensory-motor, and cognitive realms in language, Hans Loewald in his 1980 paper, "Primary Process, Secondary Process, and Language," quoted Paul Valery:

Fred L. Griffin, M.D., is a training and supervising analyst with the New Orleans-Birmingham Psychoanalytic Center and director of psychoanalytic psychotherapy training at the University of Alabama School of Medicine. He is in private practice of psychoanalysis and psychotherapy in Birmingham.

"Poetry is an attempt to represent or to restore, by articulate language, those things, or that thing, which tears, cries, caresses, kisses, sighs... try obscurely to express." Not unlike psychoanalysis, the emerging field of narrative medicine strives to find words to capture what is truly going on in clinical experience. And for the physician, it is an attempt to restore and to represent the subjective (and intersubjective) domain as a complement to medical training that is dominated by the objective—a reconciliation of the two registers of discourse with oneself.



Fred L. Griffin

experience as medical students, and the memories and associations triggered by their work," states Charon in her book, *Narrative Medicine: Honoring the Stories of Illness*. "They have found comfort in hearing one another read Parallel Chart entries, commenting often that they no longer feel alone in their mournfulness or sadness or guilt."

Writing narratives and reading them aloud to fellow students enhance narrative competence, defined by Charon as "the competence that human beings use to absorb, interpret, and respond to stories." Having developed greater capacities for self-awareness, self-reflection, and insight, as graduate physicians they may become better listeners and thereby extend their diagnostic and therapeutic reach. What is more, by becoming more cognizant of what is happening within the force field between doctor and patient and less disconnected from their own emotional experience, physicians are more capable of creating engaged connections that permit them to accompany patients in their illnesses. In the end, this leads to a medical encounter that is more satisfying to patient and doctor alike.

Not unlike psychoanalysis, the emerging field of narrative medicine strives to find words to capture what is truly going on in clinical experience.

Evolving out of the tradition of literature and medicine and the medical humanities, narrative medicine directs medical students and physicians to write about their encounters with patients. The discipline's founder, Rita Charon, a professor of internal medicine at Columbia who has a doctorate in English literature, possesses the trained ear of a listening physician and the skills of textual analysis honed as a literary scholar. In 1993 Charon invented a teaching tool she called the Parallel Chart, in which students write about the emotional experience of their engagements with patients.

"Students have written powerfully about their deep attachment to patients, their awe at patients' courage, their sense of helplessness in the face of disease, their rage at disease's unfairness, the shame and humiliation they

In 2002, I began leading evening discussion groups for experienced physicians in which we read and discussed published works written by physicians such as William Carlos Williams. A 2003 interview of Charon about her work on National Public Radio alerted me to the existence of narrative medicine. At the same time I saw an announcement of a February 2004 conference on "Psychoanalysis and Narrative Medicine" organized by Peter Rudnytsky at the University of Florida. I submitted a piece for the meeting based upon my experience in teaching John Berger's *A Fortunate Man*. Rudnytsky and Charon have brought together a collection of essays (including mine) from that conference in *Psychoanalysis and Narrative Medicine*, which was published earlier this year.

Continued on page 13

New Education Division to Boost Public Interest in Psychoanalysis

Stephen Sonnenberg

Born out of the success of the 10,000 Minds Project, APsaA's Division of Education has had a robust first year. 10,000 Minds was APsaA's attempt to reach out to the younger generation of college students and their teachers. It produced two research studies, a specialized Web site (www.teachpsychoanalysis.org), a packet of projects for local societies, and significant attention in the national press.

In response to these exciting results, President Lynne Moritz and President-Elect Prudence Gourguechon formed a new nine committee Education Division. They saw outreach to educational structures as the best way to interest the general population in the power of psychoanalytic ideas and treatment.

Currently, the Education Division committees are: Liaisons to Schools, Psychoanalysis and Undergraduate Education (ad hoc), Graduate Education in Psychology, Graduate Education in Social Work, Medical Student Education, Resident Education, Psychoanalysis and the Academy (ad hoc), Student/Resident Associates, and Fellowship. These committees, taken together, have responsibility for education about psychoanalysis from pre-K through graduate school.

Here's what each committee focuses on:

- **Liaisons to Schools** is a meeting ground for elementary and high school educators and psychoanalysts, generating projects which provide education for students and educational assistance to teachers at that level.
- **Psychoanalysis and Undergraduate Education** considers the way undergraduates might be taught about psychoanalysis as it

is relevant to various subjects, including psychology and how teachers of undergraduates can benefit from APsaA input.

- **Graduate Education in Psychology** has a similar mission for psychology master's and doctoral education.
- **Graduate Education in Social Work** has a parallel focus for master's and doctoral education in social work.
- **Medical Student Education's** mission involves determining how students pursuing their medical degrees can first be exposed to psychoanalytic ideas, and how the teaching of clinical medicine, including psychiatry, can incorporate psychoanalytic principles of careful listening and communicating with patients.

- **The Fellowship Committee** implements a well-established and effective program which brings together outstanding, competitively selected mental health trainees and individuals from other fields with interdisciplinary interests in psychoanalysis for a yearlong experience organized around attendance at our national meetings.

At the Winter 2009 APsaA Meeting in New York these committees, some recently formed, some recently invigorated with new members, will be coming together for a day-long exercise on Tuesday, January 13. In the morning, each committee will meet to discuss its part within the framework of the Education Division-wide mission. In the afternoon, at an open forum, all members of these committees will come together to discuss the formation of this new division and its collective mission. A distinguished educator will deliver a major address at this meeting, and every interested APsaA member is welcome to attend and encouraged to participate.

They saw outreach to educational structures as the best way to interest the general population in the power of psychoanalytic ideas and treatment.

- **Resident Education** looks at the way all post-graduate training in medicine, including psychiatry, can offer psychoanalytic perspectives. Both Medical Student Education and Resident Education will attempt to provide vehicles assisting medical educators, which reflect psychoanalytic thinking.
- **Psychoanalysis and the Academy's** mission involves assessing the place of psychoanalysis across the widest possible range of graduate programs and developing helpful bridges to the range of academic disciplines.
- **The Student/Resident Associates Committee** organizes a program which reaches out to all students, from undergraduates to graduate students to psychiatry residents, and attempts to involve them in APsaA through attendance at our national meetings.

The committees in this division have already begun to work together and to reach out to APsaA committees outside the division. Current projects include efforts to increase the number of APsaA Associates, not only in the categories of Student/Resident Associates but also in the categories of Research, Psychotherapist, and Educator Associates. Other initiatives involve the use of Internet technology to provide information about psychoanalysis to the range of constituencies for which this new division is responsible.

An exciting example of such an Internet project is Reaching Out to the Younger Generation, funded by an IPA Developing Psychoanalytic Practice and Training (DPPT) grant. That initiative will bring together a group of APsaA members with expertise on sex and dreams, and a group of teachers, students, and parents. Their goal will be to develop a Web site

Continued on page 13

Stephen Sonnenberg, M.D., is Education Division coordinator; clinical professor of psychiatry, Baylor College of Medicine, Houston, Texas; adjunct professor of psychiatry, Uniformed Services University of the Health Sciences, Bethesda, Maryland; and training and supervising analyst, Houston-Galveston Psychoanalytic Institute.

Update on NAPsaC

Harriet I. Basseches
with Abbot Bronstein and Fredric Perlman

You will recall from an earlier article (*TAP* 42/1, 2008), that the North American Psychoanalytic Confederation (NAPsaC) is made up of the IPA psychoanalytic organizations in North America. These include the American Psychoanalytic Association, the Canadian Psychoanalytic Society, the Confederation of Independent Psychoanalytic Societies of the United States (CIPS), which itself encompasses five psychoanalytic societies—the Institute for Psychoanalytic Training and Research, the Los Angeles Institute and Society for Psychoanalytic Studies, the Psychoanalytic Center of California, the Northwestern Psychoanalytic Society, and the San Francisco Institute for Psychoanalytic Studies—plus three otherwise unaffiliated societies of IPA, including the Japan Psychoanalytic Society, the New York Freudian Society (NYFS), and the Psychoanalytic Institute of Northern California. The primary unifying goal of NAPsaC is to bring all the IPA groups in the North American region together to form a working group for the benefit of psychoanalysis and membership.

NEW LEADERSHIP FROM APsaA

The governance of NAPsaC is shared by the leadership of each of the above organizations, and the chairship is rotated. The first chair, Arthur Leonoff, from the Canadian Psychoanalytic Society, led the fledgling group in its initial stages. I served as the second chair, coming from CIPS (and NYFS). Following the next NAPsaC meeting to be held in New York in January, the chairship will go to APsaA's own Prudence Gourguechon and her chosen co-chair, Robert Pyles. NAPsaC is a young organization, with ambitious plans to work on your behalf, strengthening North America's psychoanalytic identity and bringing IPA resources closer to members.

Harriet I. Basseches, *chair of NAPsaC*

Abbot Bronstein, *chair of NAPsaC Working Parties Committee*

Fredric Perlman, *chair of NAPsaC Web Site Project*

WORKING PARTIES GROUPS UNDERWAY

The Working Parties model was first adopted in the European Psychoanalytical Federation (EPF), which is the European version of NAPsaC. They created settings for dialogue among analysts to study the psychoanalytic process from different vantage points. Groups would meet intensely, in a retreat model, for a day or two at a time. A presenter brings process material and a moderator guides each group. The basic material is clinical, but the group's attention was explicitly not supervisory; the focus is on the creation of a work group centered on the theme under consideration, such as Comparative Clinical Methods; Implicit Theories of the Analyst; the Specificity of Psychoanalysis; Beginning Psychoanalytic Treatment; and Terminating Psychoanalytic Treatment, among others. The project in Europe has been very successful.

The NAPsaC entrance into the field of Working Parties rests on the experience culled from the European efforts and will be broadened to include analysts from the Federation of Psychoanalytic Societies of Latin America (FEPAL). The committee appointed by NAPsaC to run a two-year pilot project is chaired by Abbot Bronstein, with committee members including Margaret Ann Fitzpatrick Hanly, Peter Ruderman, Beth Seelig, Nancy Wolf, and me. The first NAPsaC Working Parties were run over two days in June of 2008. There were two groups, each including analysts from North America, with a moderator from Europe

IPA Meeting

The IPA meeting will be held in Chicago in July 2009. APsaA will forgo hosting its Annual Meeting in June 2009 and encourages all members to attend the IPA meeting.


Highlights of the IPA meeting in Chicago will be covered in the next issue of *TAP*.

(Sweden) and a presenter from Latin America (Mexico and Uruguay) joining each group, making a total of 36 analysts participating. The experience reported by the participants was even more enthusiastically positive than anticipated. Many of these initial participants will be joining the next Working Parties Groups to be held in New York on January 10 and 11, 2009, where six groups will be offered. These will include four Comparative Clinical Methods groups, one Implicit Theory group, and one Specificity of Psychoanalysis group. If you are interested in participating in one of these groups contact Abbot Bronstein (cladg@aol.com).

The final part of the pilot project sequence will occur at the IPA Congress being staged in Chicago in July 2009. At the Chicago IPA Congress, there will be an even greater number of NAPsaC Working Parties available for participation with strong representation from EPF and FEPAL analysts. We hope you will participate!

"FIND-AN-ANALYST" WEB SITE LAUNCHED

NAPsaC and IPA have successfully collaborated to launch a North American "Find-An-Analyst" Web site (www.FindAnAnalyst.org). This Web site will enable prospective patients in North America to find an IPA analyst near them. A publicity campaign for the new Web site is planned in conjunction with a professional publicist. A grant proposal to fund the campaign has been submitted by NAPsaC and is currently under consideration by IPA.

All North American members of IPA are invited to have their names, office addresses, and telephone numbers included in the database. (Home addresses and e-mail addresses will not be made public.) To register for the new service simply log onto the site at www.findanalyst.org and click on the "GET LISTED" link on the lower right hand side of the page. That's it. This new service is intended for your benefit and could be a strong promotional tool for you. The Web site is already getting "hits." For questions about the Find-An-Analyst Web site, or interest in participating in the development of the publicity plan for the site, please contact Fredric Perlman, chair of the Web Site Project, at ftperlman@earthlink.net. 

New Education Division

Continued from page 11

with a psychoanalytic perspective on sex and dreams for high school-age Internet users. The Web site will be designed by students and teachers with input from APsaA members. This effort is being led by Dan Frank, who is an APsaA Educator Associate and member of the Liaisons to Schools Committee and the principal of the Francis W. Parker School in Chicago.

A very important development is the establishment of an Education Department within APsaA. The department and the activities of the division which it supports have been made possible by a generous grant of \$30,000 from The Ernst and Gertrude Ticho Charitable Foundation. Ernst and Gertrude Ticho, deceased psychoanalysts and APsaA members who were born and educated in Europe, were always interested in the intersections of psychoanalysis and other fields in education, science, social science, and the humanities.

It is hoped that many APsaA members will attend the division meeting on Tuesday, January 13, at the Waldorf, to help articulate its mission.



Narrative Medicine

Continued from page 10

When I arrived at the University of Alabama School of Medicine in 2004, I discovered that introducing my interdisciplinary work with physicians as *narrative medicine* opened many doors: I was not seen as a psychiatrist but as a fellow physician who shared in common with other doctors the physician-patient relationship. Without resorting to alienating psychoanalytic terminology, I was able to make use of narrative medicine to create a language that my medical colleagues could grasp, one in which I could meaningfully convey the experience that has come from my years of being immersed in therapeutic relationships.

Along with a colleague in internal medicine, I gave a series of grand rounds on narrative medicine to a number of medical departments, and I started a monthly narrative medicine discussion group for senior medical

faculty in which we read and discuss works by published physician writers and our own narratives. I inaugurated a course in narrative medicine for the medical student curriculum, beginning with an annual weeklong course for third- and fourth-year medical students and, recently, adding one for first- and second-year students. The narrative at the beginning of this article was written for one of my classes.

My version of narrative medicine is not exactly the same as that of Charon, who uses the skills of textual analysis to illuminate medical narratives. Rather, I use what I have learned from my experience of listening to my patients' stories and of "reading" what is "written" within the transference-countertransference. However, the kinds of discussions created by these approaches to narratives generate similar conversations.

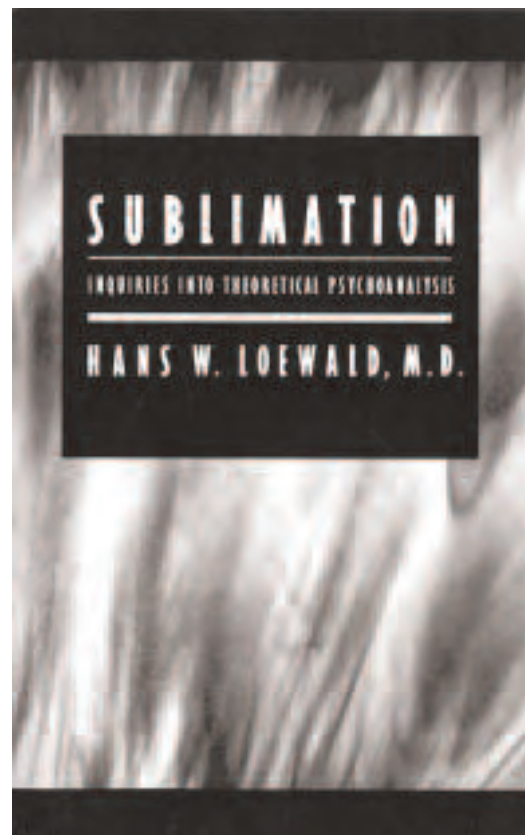
My work in narrative medicine has provided many opportunities for interdisciplinary exchanges between this psychoanalyst and faculty and students in other departments in the medical school and in undergraduate and graduate programs in the larger university. For example, I gave a presentation on narrative medicine to the nationally renowned honors program at the University of Alabama at Birmingham, which led to another invitation for me to speak to that program on "The Enduring Influence of Freud." In addition, I have been interviewed for articles on narrative medicine in four university and medical school publications. In sum, I have made good use of narrative medicine as an effective and mutually enriching medium of exchange between psychoanalysis and other disciplines on this campus.

When I asked Charon to provide a comment about the relationship between psychoanalysis and narrative medicine for this article, she invoked voices from our discipline to join her own:

In deep ways, our two fields not only overlap but are fully transparent. In *Sublimation*, Loewald explains that the sensory-motor acts of writing transform the immaterial into material, enabling the

writer to see, for the first time, what has been disembodied perception. I believe that. I believe that writing grants us access to what Christopher Bollas calls the "unthought known," that vast continent of ours simply unavailable until we reach it through dreams, treatment, or, I submit, writing. You can imagine what a difference all this makes for doctors, nurses, social workers—to have full-bodied access to one's knowledge of, feelings about, and fears for, and love toward those sick persons in our care. We are accruing evidence that this newly found access matters a great deal for the patients in our care as well. It is for *their* sake only that we do it.

Randall Paulsen and I co-lead an ongoing discussion group at APsaA meetings, "Conversations with Doctors: From Balint Groups to Narrative Medicine." In January 2009 Rita Charon will be the guest presenter at this discussion group.



On Stage

Continued from page 9

SYMPOSIUM: THEATER AND PSYCHOANALYSIS

Also exciting is the symposium, "The Real and the Imagined in Psychoanalysis and Theater," that will explore psychoanalysis and theater; the relationship between psychoanalysts and theater artists, and possibilities for mutual enrichment. The symposium will take place on Saturday, January 17, from 12:00 noon-1:30 p.m., and features playwright Christopher Shinn and noted theater director Anne Bogart as well as APsaA members Phillip Freeman, (the symposium chair) who is a consultant to theater troupes including the American Repertory Theatre; and Henry F. Smith, a past Performing Arts Fulbright Scholar in acting and playwriting. Shinn's adaptation of *Hedda Gabler* opens on Broadway in early January 2009. Shinn is also the recipient of a Guggenheim Fellowship and teaches playwriting at the New School for Drama. Bogart, a professor at Columbia University where she runs the Graduate Directing Program, is a recipient of two Obie Awards and a Guggenheim Fellowship. Bogart will be directing *Freshwater*, Virginia Woolf's only play, which will be open in preview Off-Broadway the weekend of the Winter Meeting.

So be sure to partake of these sessions on the Meeting's Scientific Program at the Waldorf, and find time for one or more of these exciting productions listed here. The curtain's going up! Enjoy New York.



Anne Bogart

Photo: Michael Brosilow

BROADWAY

Hedda Gabler

American Airlines Theatre
227 West 42nd Street
212-719-1300
<http://www.heddaonbroadway.com/>

Equus

Broadhurst Theatre
235 West 44th Street
212-541-8457
www.equusonbroadway.com

American Buffalo

Belasco Theatre
111 West 44th Street
Telecharge: (212) 239-6200
<http://americanbuffalobroadway.com/?gclid=CMr02cHi2ZYCFQukHgodGxa42w>

Speed the Plow

Barrymore Theatre
243 West 47th Street
Telecharge: (212) 239-6200
<http://www.speedthelplowonbroadway.com/>

August: Osage County

Music Box Theatre
239 West 45th Street
Telecharge: (212) 239-6200
<http://www.augustonbroadway.com/>

Pal Joey

Studio 54
254 West 54th Street
212-719-1300
www.paljoeyonbroadway.com

The American Plan

Manhattan Theatre Club/
Samuel J. Friedman Theatre
261 West 47th Street
212-239-6200
www.mtc-nyc.org/current_season.asp

OFF-BROADWAY

Freshwater

(by Virginia Woolf—her only play)
SITI Company and The Women's Project
Julia Miles Theater
424 West 55th Street
212-868-0860
www.womensproject.org/on_our_stage.htm

Mourning Becomes Electra

The New Group
410 West 42nd Street
212-244-3380
www.thenewgroup.org/season2.htm

Uncle Vanya

Classic Stage Company
136 E. 13th Street
212-677-4210, x10
www.classicstage.org/vanya.shtml

The Cripple of Inishmaan

Atlantic Theater Company
336 West 20th Street
212-691-5919
www.atlantictheater.org/page.aspx?id=12016819

Becky Shaw

2nd Stage Theatre
307 West 43rd Street
212-246-4422
www.2st.com/seasonShow.php?show=4

Note: Listings are subject to change.
Check the theater section of
www.nytimes.com
or
TimeOut New York
for more information.

The mental health needs of Iraq and Afghanistan soldiers, veterans and their families present an immediate and growing public health crisis as well as a moral and patriotic duty.

APsAA

SOLDIERS & VETERANS



initiative

RESOURCES -

Online materials will be available at www.apsa.org including:

- Local Outreach Information
- Reading List
- Web links and other resources
- Position Statements
- Public Relations Campaign - to begin on Veterans Day, November 11.
- Advocacy

To address this critical social issue, APsAA has launched the **SOLDIERS & VETERANS INITIATIVE** to:

- help members and local groups take action.
- increase public understanding of veterans' mental health issues using a psychoanalytic perspective.

Psychoanalysis has something unique to add to the public discussion of soldiers' and veterans' mental health care: emphasis on long term treatment, individuality of care, and the effects of war trauma on children and families.

SVI RELATED SESSIONS at the Winter 2009 Meeting

Thursday, January 15

12:00 noon-1:30 p.m.

**Committee Sponsored Workshop:
Workshop on Local Outreach**

(including APsAA's Soldiers and Veterans Initiative at the local level)

Chair: Dottie Jeffries, APsAA Director of Public Affairs (New York, NY)

Guest: Prudence Gourguechon, M.D., President (Northfield, IL)

Friday, January 16

12:00 noon-1:30 p.m.

**Symposium I: Community
Psychoanalysis: Addressing
the Hidden Effects of War**

Chair: Marie G. Rudden, M.D. (West Stockbridge, MA)

Presenters: Kenneth I. Reich, Ed.D. (Cambridge, MA)

Gilda L. Sherwin, M.D. (New York, NY)

Thursday, January 15

2:00 p.m.-4:30 p.m.

Discussion Group 68:

Public Forum on SOFAR:

**Strategic Outreach to Families
of All Reservists:**

**Pro Bono Outreach for Families of
Soldiers and Marines Who Served
in Iraq and Afghanistan**

Chair: Kenneth I. Reich, Ed.D. (Cambridge, MA)

Saturday, January 17

12:00 noon-1:30 p.m.

**Symposium III: Clean or Dirty Hands?
Mental Health Care Workers and
Interrogation**

Presenters: Jonathan H. Marks, M.A., B.C.L. (University Park, PA)

Nancy Sherman, Ph.D. (Washington, DC)

Stuart W. Twemlow, M.D. (Houston, TX)



Friday, January 16, 12:00 noon-1:30 p.m.

**PRESIDENTIAL SYMPOSIUM: The Long Haul:
Healing the Wounds of War**

Chair: Prudence Gourguechon, M.D., President (Northfield, IL)

Presenter: Jonathan Shay, M.D., Ph.D. (Newton, MA)

We're fortunate to have Jonathan Shay, M.D., Ph.D., speaking in the Presidential Symposium. An internationally renowned author for his groundbreaking work on Post-Traumatic Stress Disorder, his two books, *Achilles in Vietnam* and *Odysseus in America*, have created new and deep insights into the nature of PTSD. Dr. Shay has compared his work with Vietnam veterans to the descriptions of battle trauma in the works of Homer, providing new perspectives on issues related to the traumatic effects of combat that are as old as mankind itself. In recognition of his work, Dr. Shay was named a MacArthur Fellow in 2007.

For more information about the SVI, please contact: APsAA President **Prudence Gourguechon, M.D.**, prudygourguechon@gmail.com or SVI Co-coordinators: **Marie G. Rudden, M.D.**, mgrudden@gmail.com **Robert Lindsay Pyles, M.D.**, rpylesmd@comcast.net **Mark D. Smaller, Ph.D.**, marksmaller@gmail.com **Stuart D. Hirsch, M.D.**, drsdhirsch@comcast.net

Achilles in Iraq

Part II

Bob Pyles

In my previous column, I described my experience, and those of many of us, during Vietnam (1967-69), in treating young marines. These young men often arrived 48 hours after intense combat experiences to safety in a stateside naval hospital.

Because of the ubiquitous anti-war protests of the time, I had expected these marines to have intense political convictions and resentment of the war. It turned out this was not the case at all. To a soldier in combat, such political considerations are not relevant. The only thing that matters is the man to your right, whom you protect, and the man to your left, who protects you. This differs not at all from the shield wall you might have seen described in the movie, *The Three Hundred*, at the Battle of Thermopylae in 480 BC.

The fact that the experience of combat has not changed in 2500 years is documented in a wonderful book, *Achilles in Vietnam*, by Jonathan Shay, a VA psychiatrist (with appreciation for borrowing his title). He compares the experience of combat, as described in the *Iliad*, with his experience in treating post-Vietnam combat veterans. Shay points out that the agonizing effects and overwhelming trauma of combat described in great detail by Homer, were precisely like those reported by his patients. His technique is to quote a line from a character in the *Iliad*, and then quote a line from one of his own patients, describing the horror of the experience in Vietnam. The words are almost identical. Most striking, he describes the combat experience called "going berserk," in which the individual soldier loses all sense of himself, and simply becomes a killing machine. This usually results from the death of fellow soldiers. Shay describes this

Bob Pyles, M.D., is chair of the Committee on Government Relations and Insurance.



happening to Achilles, after a close friend of his has been killed in the battle for Troy. He goes mad with bloodlust, eventually killing the leader of the Trojans, Hector, and dishonoring his body by dragging it around the city.

Shay's second book, *Odysseus in America*, uses a similar technique to describe the conflicts of the homecoming combat veteran. Shay has received a MacArthur "genius" grant for his groundbreaking work. We will have the honor of hearing directly from Shay in the Presidential Symposium in January.

I interviewed Bobby Muller, president of an organization known as Veterans for America. Muller is a remarkable man whose story is similar to that of the movie character in *Born on the Fourth of July*. While serving as a marine in Vietnam, Muller was struck in the spine by a rifle bullet, rendering him paraplegic. Muller and Massachusetts Senator John Kerry, started the organization, Vietnam Veterans of America. They have lobbied hard over the years for better medical and psychological treatment for both veterans and active military personnel. With the advent of Iraq and Afghanistan, the organization has generalized its mission to include those soldiers and veterans as well.

JUST CAUSE

Muller has several insights into this war and previous ones, which I found startling and thought provoking. He points to the extraordinarily high incidence of psychological casualties resulting both from Vietnam and from the current war: "Why is this?" he asks. His answer is that soldiers can tolerate sacrificing or even dying, if they feel they are doing so for a just cause that is important to their country, their community, and their family. World War II was a conflict in which we were directly threatened by an evil power which was attempting to overturn one civilized nation after another.

The men who fought in that war were secure in the knowledge that they were fighting a battle that was absolutely necessary for the survival of our way of life.



Bob Pyles

When they returned, they were greeted as heroes. The whole nation had geared up to support them and the war effort.

Vietnam and now Iraq have become extremely unpopular wars that seem to have no discernible goal that directly benefits this country, its citizens, or the soldiers' families. Returning soldiers are not necessarily treated with a great deal of honor or celebration. During Vietnam, in fact, returning soldiers were jeered and spit on.

In Muller's view, we should never ask our soldiers to risk their lives in a conflict that doesn't have clear *meaning* to justify their sacrifice. Such a conflict, he feels, not only places the country in harm's way, but also insures massive psychological negative effects among our soldiers.

UNINTENDED CONSEQUENCES

His second insight, which again I would never have realized, is the practical effect of having an all-volunteer military. He pointed out that when he and I were in the military, our attitude toward military authority was something like you might see represented in the series *Mash*. We were irreverent, wisecracking, yet trying to do our best. However, we constantly challenged the military authority, military thinking, and the purpose of the war. And we were loud about it. Muller sees this as healthy dissent, necessary for self-correcting a political course.

The second major difference is that we were all "short-timers," knowing the military was not going to be our primary career. Now, however, for most of our troops, especially for officers, the military is their career. Therefore, they are far less likely to question policy, to bring up dissenting views, or to comment in the media.

Continued on page 17

Thus current military policy is likely to have a kind of internal life of its own, with few self-correcting outside influences.

Lastly, from our point of view in the mental health professions, active military personnel, particularly officers, do not dare go for mental health treatment. According to Muller, one visit to a psychiatrist is likely to ruin a military career. This is not about some sort of "fear of stigma" by those who would like to seek help. He is clear that this is a reality in the value system of the military. What this means is that those who are most in need of help are least likely to get it. A recent cover of *Time* magazine showed an illustration of a Prozac capsule. The article inside commented on how many of our troops were on Prozac. According to Muller, very few officers would risk this kind of treatment and far fewer soldiers probably than necessary.

Another complication is that for the military psychiatrist or psychologist, there is a major

Stuart Twemlow and Steve Sonnenberg have also been involved.

It is also true that the resources of the Veterans Administration are completely overwhelmed by the numbers of people seeking treatment upon their return from military service, and massive additional resources are needed.

However, from Bobby Muller's point of view, the most glaring problem concerns not only the returning veterans but especially those still on active duty, to whom, for the reasons outlined above, treatment is almost inaccessible. Muller feels that the answer is to have a great deal more public education, to put pressure on political leaders to influence the military, and to begin to truly reduce the stigma and negative effect on the careers of military personnel going for treatment.

Muller points out that our military is at a breaking point. They have been overstretched and asked to do far more than they are able.

Bobby Muller wants our help not only to create more mental health treatment facilities but also to lobby for greater treatment capacities for our returning veterans, to educate the public and the military to allow treatment of active personnel, and to use our knowledge of what happens to people as a result of combat to lobby for reinstatement of the draft both for political as well as for mental health reasons.

This fits well with the goals of our Association. As explained in her column, our new president, Prudy Gourguechon, is making lobbying for better mental health resources for our soldiers and veterans a major priority of her administration. We are in the process of making key contacts to make this hope a reality. There will be much more to follow in the next months.



Shay has received a MacArthur "genius" grant for his groundbreaking work. We will have the honor of hearing directly from Shay in the Presidential Symposium in January.

conflict. In an article entitled "The Vietnam War and the Ethics of Combat Psychiatry," by psychiatrist Norman Camp, the military psychiatrist is described as a "double agent." The author points out that mental health professionals in the military, of necessity, have divided loyalties. Their primary allegiance cannot be only to their patient. It also has to be to the military. This is exacerbated by the fact that medical officers are now also career military. In Muller's view, the military does not really believe in the concept of "post-traumatic stress disorder."

Therefore, the obvious question for us both as individuals and as an organization is, "How can we help?" Some of our members have been very active in helping to provide care for families of returning National Guard and Reservists. Ken Reich has enlisted many of our members in his Strategic Outreach to Families of All Reservists (SOFAR) program and has received a great deal of media attention for his effort.

Some individuals and groups are on their fourth and fifth tour in Iraq. The incidence of psychological trauma that occurs increases exponentially with the third, fourth, and fifth tour; and yet there are no signs of resolution to the Iraq and Afghanistan situations.

Bobby Muller's answer to the military crisis is a shocking one—reinstigate the draft. Muller feels that by reinstating the draft, all of the self-correcting measures that used to be in place would be reinstated, so that pressure to correct policy would be much greater. But he has another reason which makes perfect sense to me. He points out that most citizens, particularly parents and families in this country, are not directly affected by the Iraq war. It exists in some sort of isolated, split-off state. If, however, sons and possibly daughters of families were drafted to go into the military, the pressure on politicians to chart a more judicious course and avoid such questionable conflicts in the future would be intense.

Contacting the National Office

The American Psychoanalytic Association

309 East 49th Street
New York, NY 10017
Phone: 212-752-0450
Fax: 212-593-0571

E-mail: info@apsa.org
World Wide Web Site:
<http://apsa.org/>

National Office Voice Mail Extensions

Chris Broughton	x19
Brian Canty	x17
Sherkima Edwards	x15
Tina Faison	x23
Carolyn Gatto	x20
James Guimaraes	x12
Dottie Jeffries	x29
Lisa Jong	x28
Nerissa Steele-Browne	x16
Dean K. Stein	x30
Debbie Steinke Wardell	x26

A New Model for Psychoanalytic Education

Sylvia S. Welsh



Sylvia S. Welsh

While passionate and cogent arguments have been made by both sides of the debate on certification, standards, and the training analyst system and designation, such

debate has served to distract us from what I believe is the critical issue confronting psychoanalytic educators today.

I will say upfront that I am in favor of some type of certification process or test and its link to the training analyst system of selection and evaluation. I support each conceptually, but both need improvement and *both* should be nationalized so that TAs need only go through such an evaluation once in their professional careers, no matter where they choose to roam geographically. What I propose here, however, has nothing to do with this debate or my position about it. Rather, my proposal concerns the problematic, deeper clinical issues regarding candidates that are embedded in our current model of psychoanalytic education, from which the debate on certification and the TA system has been a distraction.

TRIBAL MODEL

In May I attended a faculty meeting of the New York University (NYU) Psychoanalytic Institute. At the top of the agenda was the Project for Innovation in Psychoanalytic Education (PIPE) report. As would be expected, differing points of view on certification, on whether it should be linked to the TA process and selection, on whether there should be

Sylvia S. Welsh, Ph.D., is a clinical associate professor of psychiatry at NYU Langone Medical Center. She trained at NYU Psychoanalytic Institute and has a private practice in New York.

either or both, were represented. A senior analyst declared, with much heartfelt emotion, that he felt that forcing candidates into treatment with training analysts led to a “bad family” situation wherein candidates and their training analysts were both in a fish bowl, each feeling observed and evaluated. This, he added as a matter of fact, does not lend itself to a truly therapeutic experience for the candidate. I asked him how it would be different for our candidates if they were permitted to see non-training analysts of the institute? Wouldn’t the fish bowl problem still exist? Wouldn’t the issue of the candidate never being able to “break free” of his or her analyst, training in the same institute, persist whether the analyst was a training analyst or not?

to remain in treatment with a TA from either of these two institutes. It did not make clinical or therapeutic sense to force someone out of a viable treatment simply to be in treatment with “one of our own.” It could well be deleterious to the applicant/future candidate, while it simultaneously sets the stage for what I will call tribalism among competing institutes. Once the change was formally accepted by the three institutes, I informed the Education Committee that I would not be accepting referrals of candidates from our institute. I can think of no *clinical* argument against this position. Being in treatment with an analyst at an institute different from the one at which the candidate is training is not only therapeutically sound, it is best for the candidate’s professional development and, ultimately, for the survival and creativity of the institutes and the profession of psychoanalysis. The “inbreeding” that has gone on for generations, and continues in our institutes today, was a necessary but unfortunate byproduct of the fact that so many institutes in the country did not have other APsA institutes

Being in treatment with an analyst at an institute different from the one at which the candidate is training is not only therapeutically sound, it is best for the candidate’s professional development and, ultimately, for the survival and creativity of the institutes and the profession of psychoanalysis.

As one of three institutes accredited by the American Psychoanalytic Association in New York City, the NYU Psychoanalytic Institute is fortunate to have two other institutes from which candidates can choose a training analyst. Not only is this a tremendous advantage to the recruitment efforts of these institutes, it permits the candidate a wider selection of “acceptable” analysts from whom they will not have to be torn should they decide to train at an institute other than the one in which the candidate’s analyst is involved. It is also, most importantly, of tremendous therapeutic value to all potential candidates. Long before the shortage of applicants facing many of our institutes today, I had argued for allowing applicants

in their areas at which candidates could seek training analysts for treatment. However, this inbreeding has been the worm eating at the core of the apple of the institutes of the Association. And there is a solution.

Throughout the course of evolution, inbreeding ultimately and without fail destroys the culture or the species to which it is victim. Recycling the same “gene pool” of an institute follows the laws of evolution: It leads to a weakening of the successive generations, a deadening of creativity, and the increasing loss of the possibility of giving rise to truly remarkable individuals with novel ideas and the freedom to express them. To spend one’s entire

Continued on page 22

Learning the Lessons of Shame

John Samuel Tieman

Between me and my God
There are only eleven commandments;
The eleventh says: Thou shalt not
Bury thy brother alive

Atukwei Okai

At a meeting of the Educator Associates of the American Psychoanalytic Association, I suggested that *Someone* present a paper on shaming in the classroom. After some discussion, I asked the guy next to me, "Did I just volunteer to write that article?"

Shaming in the classroom. So ubiquitous an experience is it that, when I mentioned I was researching this subject, everyone had a story.

A psychoanalyst told me of being stood before his second grade class, while his teacher read his paper as an example of, in a word, stupidity.

A Jesuit told how his seventh grade teacher, a nun, stood him before the class and predicted a lengthy stay in purgatory for his sin of sloth, his tardiness.

I knew I was on to something.

The result, "The Ghost in the Schoolroom: A Primer in the Lessons of Shame", is published in *Schools: Studies in Education*. (The article is also available through the Web site of the Journals Division at University of Chicago Press.) I will present this paper at a discussion group on Thursday and at a Saturday symposium during January's meeting of the American Psychoanalytic Association.

This article is informed by psychoanalytic theory, with special emphasis given to Sigmund Freud and Erik Erikson. The paper has two

John Samuel Tieman, Ph.D., an educator associate at APsAA, is a widely published poet and essayist. His poetry has appeared in *The Americas Review*, *The Caribbean Quarterly*, *The Iowa Review*, and *River Styx*. *BkMk Press* will publish a chapbook of his poems in 2009.

functions. I first explore the use of shaming in the classroom. I see this shaming within the context of a dyad, in which both the educator and student regress to an earlier stage

of psychosocial development. My second emphasis calls for a realignment of teacher education, with more emphasis given to psychodynamic models, and less emphasis given to the cognitive/behavioral. My hope is that my article is a kind of translation from one teacher to another: I'm not an innovator. That work has been done by others. The article seeks to clarify and apply.

But the article began years before I even knew I had an article.

I always planned to go to work for the St. Louis Public Schools. Tenure, OK pay, good pension, nice medical and mental health benefits. It was a plan.

That and I wanted to help the poorest of the poor. I applied. I was asked to teach seventh grade English. I thought I knew what I was getting into.

Nothing prepared me for this. Nothing. Not 30 years of teaching. Not my doctorate.

Poverty. Homelessness. Violence. Malnutrition. Mental illness. A girl had a miscarriage in the sixth grade classroom. The year before I arrived, seven English teachers had quit, including the guy who lasted one day.

And discipline? My classes were chaotic. When I observed other teachers and administrators, shame was what they used. It seemed to work. So I used shaming for the same reason that teachers used to whip children—I just couldn't figure out what else to do.

The shaming process also struck some chord in me that only in therapy became apparent. I certainly could remember the times that, as a boy, I had been shamed and complied. But that exploration would take time.



John Samuel Tieman

In the meantime, Christopher just wouldn't shut up. I kept him from recess. "OK, young man, you want to play around in my class? Fine. Drop out. But before you go, I have one last English lesson for you, all the English you'll need for the rest of your sorry life. Repeat after me. "Would you like fries with that order?" He shuts-up. Good enough for me.

Thus did I continue. I came to be regarded as a strict disciplinarian.

Then there was Samantha. I called her father one day, and asked if we could discuss her behavior. We met outside my classroom. In order to rectify his daughter's misconduct, the father offered to beat her in front of my class. I politely declined. Samantha just hung her head.

I was shocked. But it was at this point that I realized how much like Samantha's father I had become. The fact that I was more restrained, more verbal, did not mean that my shaming was less painful.


I am the product of a conventional teacher education. Meaning that there is nothing in my training that helps me look into myself, to open myself to the full range of emotions, to ask about my motivations, to accept myself and all that continues to create me.

So I knew there was an article there somewhere. What I needed, as a writer, was a timeline, focus, and clarity.

The timeline came from the meeting. I wanted the article published by the next meeting.

Focus came in two parts. My wife, Phoebe Cirio, published an article on shaming and psychoanalytic training. Our discussions were invaluable. I also began studying child development at the St. Louis Psychoanalytic Institute.

The clarity, indeed lucidity, came from five years in psychodynamic psychotherapy. There were many positive outcomes from my therapy. Among them, I'm a better teacher.

I don't want to portray myself as a saint. I've gained awareness, not perfection. That awareness, that attentiveness, that's what I wish to pass on to other teachers. 

Parts of the above are taken from the original "Ghost in the Schoolroom."

Candidates Create Dialogue Across Institutes

Kim Gelé and Gregory M. Lowder

Since September 2007, a group of candidates from several different institutes in New York City has been meeting monthly, with the goal of stimulating inter-institute discussion. Our first event (held this past September 26) was a panel discussion on progression practices in psychoanalytic training.

The idea for our collective originated with the editors of *The Candidate* journal at the New York University (NYU) Psychoanalytic Institute. They put out a call to candidates from other institutes, and after a few initial meetings, a core group began meeting regularly. A strong sense of collegiality, and a sense of discovery, developed over the course of these discussions. Currently there are 7 institutes represented by 11 candidates: NYU Psychoanalytic Institute (Hilary Rubenstein Hatch, Carlos Almeida, and Abby Herzig), New York Psychoanalytic Institute (Gregory Lowder and Hilli Dagony-Clark), Columbia Center for Psychoanalytic Training and Research (David Gutman), NYU Postdoctoral Center for Psychoanalysis and Psychotherapy (Margery Kalb), William Alanson White Institute (Victoria Malkin), New York Freudian Society (C.J. Churchill), and the Institute for Psychoanalytic Training and Research (Richard Grose and Kim Gelé).

Here in New York City, those seeking analytic training have the luxury of choosing among numerous institutes with a range of child and adult analytic programs. Despite this rich opportunity, most candidates gain very little knowledge of other institutes and their members. During training and after, an institute plays a large role in one's professional and, often,

Kim Gelé, Ph.D., is a clinical psychologist in private practice and an advanced candidate at the Institute for Psychoanalytic Training and Research in New York City. She is a Psychotherapist Associate of APSA.



Kim Gelé

personal life. This provides a home base and a community, but it can also limit one's perspective to the confines of a single institute. What's more, the history of psychoanalytic insti-

tutes has been marked by such insularity, which was often fueled by heated theoretical battles, schisms, and policies for exclusion.


Our group came together to break down this insularity and bring candidates from various programs together in an atmosphere similar to a university setting. The institutes represented in our collective are of varied history and background. Some of our institutes cover a broad scope of analytic theories in their training, while others focus on one or another "school" of psychoanalysis. Some of our institutes were founded in order to offer training for candidates who were excluded—because of professional discipline or other reasons—from other institutes represented in our collective. Our goal is to move beyond such historical issues, and theoretical and pedagogical differences, to build a candidate community for support and discussion of issues that are pertinent to psychoanalytic training in the 21st century.

Our initial topic of interest has been training, but, more broadly, we want to create a forum for ideas that are rarely brought out for discussion—those aspects of analytic work and training that may be unconscious or pre-conscious; hence the title of our first event, "Orthodoxy is Unconsciousness." We asked the panelists—all senior analysts from our institutes—to imagine themselves as the founding members of a new institute meeting to establish practices to facilitate and evaluate progress

throughout the training process. We wanted to explore how gatekeeping practices influence who trains, who becomes an analyst, and what happens after graduation. We chose two candidates from our group to serve as moderators.

Another project we have undertaken is to collect data about training policies from each of our institutes. This includes cross-institute comparisons on a broad range of issues: tuition, supervision, personal analysis fees, who is eligible for admission, number of control cases, and what criteria are used, and by whom, to determine when a candidate is ready for graduation. We have found some thought-provoking differences. For instance, some of us were surprised to find that the concept of "readiness for control," which is a major hurdle at some institutes, is virtually nonexistent at others. As another example, at some institutes there are very specific, quantitative criteria specifying the length of time training cases should continue, whereas at other institutes this is assessed on a subjective basis by "demonstration of an analytic process."

Perhaps most interesting to us were the significant differences in tuition and supervision fees. We found that the most expensive institute of our collective cost nearly four times as much as the least expensive (in terms of supervision and tuition). This stimulated thoughts about how much time supervisors can afford to donate to training, the extent to which institutes help candidates build up a well-paying private practice, and, not least, financial disparities among candidates of different professional backgrounds. We plan to continue gathering this comparative data and intend to make it available to others.

We invite other candidates to join us as we begin planning future projects. Various ideas include arranging for candidates to take classes at other institutes, holding a series of inter-institute clinical presentations, and reaching out to candidates from institutes outside of New York City. Participation in this group has allowed for a rich intellectual experience, along with the opportunity to be part of a wonderful group of fellow candidates—we strongly encourage others to join. 

THE AFFILIATE COUNCIL



Laura L. Jensen

Affiliate Council President's Letter

December 2008

Laura L. Jensen

My term of office as your Affiliate Council president comes to an end after the meeting in January. First and foremost, I would like to thank you for the opportunity to serve you. Candidates and candidate issues will always have a place in my decision making no matter where in the Association I go.

That said, I hope that you might consider some major issues coming before the Association that will affect you. Regardless of whether you agree with me, you must educate yourself about these matters and you must vote your point of view. In the end, this is really your Association. The power that candidates have to influence the future of their organization is limited, and I urge you to take what power you have—your vote—to make your views known.

Several matters that are before you now include:

- ▶ **The Institute Choice (formerly known as Local Option) and the Educational Flexibility bylaw amendments.** These two amendments are about the requirement that is presently in the bylaws for TA/SAs to be certified. The Institute Choice amendment says that the Board on Professional Standards shall not require certification as part of TA/SA appointment. The Educational Flexibility amendment leaves the decision about certification in the hands of the national collective body of institute representatives. The Institute Choice amendment puts the decision about certification into the hands of the local institutes, where TA/SA appointments are most subject to local pressures and politics. In this way, the two amendments are radically different in who has the power to decide about certification for TA/SA appointment. I urge you to vote "No" on the Institute Choice amendment and "Yes" on the Educational Flexibility amendment.
- ▶ **The upcoming membership bylaw amendment.** This amendment is likely to come out of the Executive Council meeting in January 2009. When you see the wording on this amendment, please read it carefully. The Board on Professional Standards used to make the decision on who could be members of our Association, this decision rightly resides with the membership as a whole—in short, you and me. This amendment will take the decision about who would become members and put it into the hands of a committee of the Executive Council. While this body is the board of directors of our Association, and highly experienced analysts, any decision that involves a change in the membership of our Association must reside with the members.
- ▶ **Candidate representation.** Remember that candidates in training number almost one-fourth of our Association. You deserve to be represented on our board of directors in some manner with voting privileges. You have special concerns and issues. In fact, changes in the education and training of candidates should have the approval of the candidates in training before being considered by the Association. You need to educate yourselves to participate in your own future as analysts.

Begin educating yourself by reading the articles in *TAP*. Read all the bylaw amendments you see and ask questions. Refuse to be intimidated by anyone. Get involved in the Affiliate Council. Carmela Perez from NYU takes over as your president in January. Give her your support and ask your questions. Or contact me: My e-mail is ljensen701@aol.com. I'll make sure your questions get to Perez. Thank you again for the opportunity to be involved with our Association on your behalf. I will follow your progress with pride.

APSA

Editor's Note: TAP has invited the Affiliate Council president to reprint the President's Letter on an ongoing basis.

A New Model

Continued from page 18

professional life at one's own institute while continually faced with one's analyst is the antithesis of promoting independence of thought and individuality. We all know that transference is never fully resolved; it takes more than should be required of us, if one is so inclined, to take an opposing position to one's analyst, particularly if that analyst holds a position of power in the institute.

In line with the ideas of tribalism and inbreeding, analytic training has traditionally rewarded conformist behavior in candidates while it subtly, and not so subtly, punishes those who challenge the status quo. This is made all the worse when the candidate's professional development is being "watched" by his or her former analyst (even if this is only the fantasy of the analyst/candidate). The institutes of the Association have, sadly, become analyst-oriented when they should be candidate/patient-oriented. In a candidate-oriented institute,

The institutes of the Association have, sadly, become analyst-oriented when they should be candidate/patient-oriented.

what is best for the candidates/patients would be first and foremost in the minds of those of us who are entrusted with their treatment and education. Thus, turf, status, and economics, often rationalized by the need to know that the analysis the candidate is receiving is the "right" kind of analysis (i.e., "administered by one of our own") would be subsumed under the imperative to ensure that the candidate had the best chance of entering an analysis of true therapeutic value with an analyst of his or her choice; an analysis as much separated from the sense of being evaluated as possible and as much separated from the commonly held idea by candidates that their treatment is simply part of the educational model of the institute and, thus, must be conducted in a specified manner; perhaps without regard for the particular and unique needs of the individual candidate.

As I listened to the arguments for and against the TA and certification systems, it dawned on me that the entire tripartite model, the holiest of grails in analytic training in the institutes of the Association, is deeply flawed and simply does not work if what we are after is both educating analysts and encouraging candidates to experience analyses that are real. If looked at in this way, the institutes should have nothing do with the candidate's choice of analyst. Even more radically, the institute should simply require that the candidate be in analysis and leave it to the "honor system" that candidates will enter and complete an analysis. We can and should judge the education of our candidates, their progression toward being analysts, by the work they do with their patients (supervisory reports) and their class participation (reports by instructors). As it stands now, we have no way of knowing what, if anything, the candidate is actually getting out of the analysis we often "force" them to be in. Time and again, we have heard colleagues say that they did one analysis "for the institute" and one for themselves.

BIPARTITE MODEL

This is a sad and sorry state of affairs to which we, as educators and psychoanalysts, have been complicit. It need not be this way. We must strengthen our educational standards so that we may rely on our institutes to graduate only those candidates who demonstrate their grasp of the analytic process and theory and their competence in conducting an analysis. Nothing else is our business, including judging the type of analysis a candidate chooses, or with whom they choose to be in treatment—*only that they be in analysis*. Our institutes, in order to survive and to do what is right for our candidates, should require that the candidate be in analysis but should have nothing whatsoever to do with it after that requirement is made clear. We need know nothing more about it. We must trust our ability to judge the quality of our candidates'

work based on the reports of their supervisors and their instructors, as we already do for all intents and purposes. We can openly and safely do away with the tripartite model of education and, rather, focus on a "bipartite" model: supervision of the candidate's work and academic instruction through which we can assess the candidate's clinical competence and understanding of analytic processes and theory.

The adoption of the bipartite model of education does not negate the value of standards of certification and training analyst. In fact, candidates may, indeed, seek out those analysts who have been certified and/or who are TAs. Or they may choose to be in treatment with someone from outside our ranks. That should be accepted without fear if we rely on our educational standards. Opening our doors, our minds, and our gene pool may prove to be what saves our profession as it quite literally breathes new life into our institutes.

Psychoanalysis is founded on a history of encouraging and valuing independence of thought. Independence of thought without fear of expression is the very heart of creativity. Expanding the gene pool increases our possibility of surviving and thriving, while it underscores our deepest and most profound responsibility: to educate analysts so that they may provide their patients with the treatment that is therapeutic and fluid enough to meet their patients' needs. In order to ensure that our candidates become therapeutic psychoanalysts, we must help them to have conviction in the healing power of psychoanalysis through their own treatments. We have not done so to the extent that we should have for many practical, ideological, and not-so-lofty reasons. I refer here, again, to issues of turf, status, and money. When an analyst relies on the treatment of candidates (or any patient) for prestige, power, or finances, this patient simply cannot be treated in the manner that is most therapeutic. The bipartite model of psychoanalytic education conveys the message that the candidates, not the analysts, are what are most important. The candidates will, in turn, reward the institutes and the field of psychoanalysis. Most importantly, they will know how to heal the patients they will ultimately serve.

APSA

APsaA's Excellent New Fellows for 2008-2009

The American Psychoanalytic Association Fellowship Program is designed to offer additional knowledge of psychoanalysis to outstanding early-career mental health professionals and academics, the future leaders and educators in their fields. The 17 individuals who are selected as fellows each year have their expenses paid to attend the national meetings of the American Psychoanalytic Association during the fellowship year, and to participate in other educational activities. The biographies below introduce this year's excellent group of fellows. We enthusiastically welcome them to APsaA.

Ricardo Cáceda, M.D., Ph.D., is a third-year psychiatry resident at Emory University. During medical school at Universidad Peruana Cayetano Heredia in Lima, Peru, he researched the effects of



Ricardo Cáceda

chronic hypoxia in the brain energetics in humans and rodents. Subsequently, he received his Ph.D. in neuroscience at Emory University studying the role of the neuropeptide neuropeptide Y in schizophrenia and in the mechanism of action of antipsychotic drugs. During residency, Cáceda has seen his focus shift toward the study of the human mind, including the biological basis of decision making and psychotherapy. He is currently involved in the study of the neural networks underlying decision-making processes of different types (moral, strategic, tactical) and its variability within human populations.

Kaila Compton, M.D., Ph.D., is a third-year resident in psychiatry at the University of California San Francisco. In the 1980s, Compton lived with semi-nomads in Northern Kenya and was fascinated by the



Kaila Compton

concept of self in relation to community and time, as well as explanatory models of illness and the social politics of healing. This propelled her to a doctorate in cultural anthropology at Harvard University, focusing on Eritrean trauma narratives collected in Cairo, Rome, and Eritrea. Her research interests

include the role of psychoanalytic interpretation of culture and society in public health interventions, as well as the variability of psychodynamic treatment across cultures. She hopes to do analytic training and teach psychodynamic psychotherapy to psychiatric residents.

Diane Coutu, M.A., is a senior editor at *Harvard Business Review*. During her 10 years at the magazine, she has edited or written articles such as "Putting Leaders on the Couch"; "Narcissistic Leaders: The Incredible Pros, the Inevitable Cons";



Diane Coutu

"The Very Real Dangers of Executive Coaching"; "Why People Follow the Leader: The Power of Transference"; and "Resilience At Work." She has also interviewed leading figures both inside and outside of the world of business, including Jack Welch, Mark Morris, Garry Kasparov, Harold Bloom, and James March. Prior to joining *Harvard Business Review*, Coutu worked for *The Wall Street Journal Europe*, and later McKinsey & Company. She is a graduate of Yale and Oxford Universities, where she was a Rhodes Scholar. She was an Affiliate Scholar and the recipient of the Julius Silberger prize at the Boston Psychoanalytic Society and Institute.

Rachel A. Houchins, M.D., is a clinical instructor in the Department of Neuropsychiatry at the University of South Carolina (USC). She recently completed residency training in general psychiatry at Palmetto Health and USC. This year, Houchins was honored with both the Resident of the Year and Teacher of the Year

awards in her department. Additionally she was selected as the Association of Women Psychiatrists' Symond's Fellow for 2008. Along with psychotherapy, Houchins's interests include women's mental health, emergency room psychiatry, substance abuse, and HIV/AIDS. She has presented on several of these topics nationwide. She lives with her husband Mark and two-year-old daughter Annabelle.



Rachel A. Houchins

Jesse Houlding, M.F.A., received his master's degree in printmaking from San Francisco State University in 2005. His work has been exhibited nationally. A solo show entitled "The One Frame Cinema of the Unknown" appeared at Gallery Aferro in New Jersey, and his installation, "The Telluride Currents" was shown at The LAB in San Francisco. Houlding's recent work features a series of installations that use light and other natural phenomena to explore perception and the construction of meaning. His current artistic focus examines the ways we negotiate the anxiety and wonder that comes as we attempt to make sense of the world around us. This is a project that he believes will be aided by an exploration of psychoanalysis. He is looking forward to expanding his work to include a psychological and psychoanalytic dimension.



Jesse Houlding

Continued on page 24

2008-2009 Fellows

Continued from page 23

Abigail Judge, Ph.D.,

did her doctoral training in clinical psychology at the University of North Carolina at Chapel Hill. Her dissertation, funded by a 2007-2008 Elizabeth Munsterberg Koppitz Fellowship in Child Psychology from the American Psychological Foundation, focused on childhood and adolescent-onset psychosis. Judge writes fiction and attended the Bread Loaf Writers' Conference during graduate school. She is currently completing her psychology internship at The Cambridge Hospital/Harvard Medical School. Judge remains interested in severe psychopathology in adolescence as well as creative writing. She sees psychoanalysis as a way of bridging her creative and clinical work lives.



Abigail Judge

Elizabeth Kita, L.C.S.W.,

is currently a Ph.D. fellow at Smith College School of Social Work. Since receiving her M.S.W. from the University of California Berkeley in 2001, Kita has been working for the California Department of Corrections, providing clinical case management along with individual and group psychotherapy to men and women in prison and on parole. Her interests include the impact of traumatogenic conditions on the development of intrapsychic capacities, the synthesis of social and psychoanalytic theories, and the formulation of practice models geared towards treating members of disenfranchised and oppressed populations. She also has a small private practice in San Francisco, where she resides.



Elizabeth Kita

Megan McCarthy, Ph.D., is a first-year post-doctoral psychology fellow in the Program for Psychotherapy at The Cambridge Hospital/

Harvard Medical School. McCarthy graduated from Stanford University and completed her Ph.D. in psychology at the University of California Berkeley, where she was a predoctoral fellow with the NIMH consortium in affective science. She completed her predoctoral internship at the San Francisco Veterans Affairs Medical Center. At UC Berkeley she studied the mechanisms by which environmental stressors are transduced into the biological signals that cause psychological illness. Her dissertation examined the behavioral and biological effects of chronic antidepressant administration on vulnerable juvenile rats. McCarthy's interests include behavioral epigenetics, the neurobiology of attachment, the processes through which people feel safe in psychotherapy, and the integration of psychoanalytic and neuroscientific perspectives.



Megan McCarthy

Nora LaFond Padykula, Ph.D., L.C.S.W.,

earned her degree in clinical social work from the Smith College School for Social Work. Currently, she is an assistant professor of social work at Westfield State College in Westfield, Mass. Her clinical interests emphasize psychological trauma and substance abuse in adults. In addition to advanced training in psychodynamic psychotherapy, she is also a certified dialectical behavioral therapist and eye movement desensitization and reprocessing (EMDR) therapist. Her dissertation research focused on attachment styles of social work students and their capacity to mentalize and use reflective learning.



Nora LaFond Padykula

Tracy Prout, M.A., is finishing her Ph.D. in clinical psychology at Fordham University where she was recognized as Graduate Teaching Fellow of the Year in 2008. She is completing her training as a predoctoral intern at Jacobi Medical Center in the Bronx.

She graduated from Wellesley College with a B.A. in psychology and political science in 2000. She then went on to earn an M.A. in counseling from Gordon Conwell Theological Seminary. Her dissertation research explores the relationship between recovery/quality of life and object representations of God and attachment to God among individuals with schizophrenia. She has participated as a fellow in the IPA Research Training Programs hosted in London and New Haven. She is interested in bringing psychodynamic treatment approaches to community mental health care. She hopes to continue building bridges between the psychoanalytic community and spirituality researchers and to expand the understanding of the psychology of religion.



Tracy Prout

Benjamin Pumphrey, M.D.,

is the inpatient chief resident for the University of Pennsylvania Department of Psychiatry. He received his medical degree from the University of Virginia. Last year, he was a fellow of the Psychoanalytic Center of Philadelphia. He was introduced to psychodynamic theory while conducting dynamically-informed psychophysiology research as an undergraduate at Virginia Tech. The struggle to reconcile the seeming theoretical opposition between psychodynamic theory and empirical research led him to the fields of philosophy of science and philosophy of mind. He is centrally interested in psychiatry's cultural trend toward strict empirical explanation and is looking for techniques and languages for expressing the necessity of anti-reductionist models of mind, especially as used in psychodynamic psychotherapy. He hopes his life after residency includes a psychodynamic psychotherapy practice.



Benjamin Pumphrey

Continued on page 25

Davin K. Quinn, M.D., earned a B.A. in psychology from Princeton University, where he wrote his senior thesis on the phenomenon of tears of joy. He completed his M.D. at Harvard in 2004 and in



Davin K. Quinn

2008, graduated from the Massachusetts General Hospital/McLean Hospital combined adult psychiatry residency. He was the recipient of the Anne Alonso Award in Psychotherapy and the Thomas P. Hackett Award. Along the way he earned an M.A. in creative writing from Queens University, Belfast. He is currently a fellow in psychosomatic medicine and consultation psychiatry at Massachusetts General Hospital, apprenticed to George B. Murray and Edwin Cassem. Quinn has published scientific articles on several topics in medical psychiatry, including carbon monoxide poisoning in suicide, methadone-induced QTc wave prolongation, neuropsychiatric effects of prolactinomas, and cardiovascular disease and depression. His interests include mind-body medicine, group psychotherapy, literature and psychoanalysis, and the incorporation of physical pastimes into the treatment of mental health. In his free time, he enjoys poetry, swimming, and Argentine tango.

D. B. Ruderman, Ph.D., recently received his doctorate in English from the University of Michigan and will be lecturing there in 2008/09. His essay, "Reforming the Child: Infancy and the Reception of



D. B. Ruderman

Wordsworth's *Ode*," appeared in *Romanticism and Parenting: Image, Instruction and Ideology*, Cambridge Scholars Press in 2007. His essay, "Romantic Objects in S. T. Coleridge and Erasmus Darwin," is forthcoming in January 2009 in *Prism(s): Essays in Romanticism*. Ruderman's current project looks at transference and countertransference as a model

for reading. He lives in Ann Arbor, Michigan, with his two children and occasionally plays guitar in various bands.

Noha Sadek, M.D., is a second-year child and adolescent psychiatry chief fellow at Brown University. She was born and raised in war-torn Lebanon where her experience shaped her interests in psychiatry, particularly the impact of war trauma on children and on the formation of group and individual identity. She received her medical degree from the American University of Beirut and then moved to the U.S. in 1997 to start her psychiatry residency at Emory University. She later moved to Fairmont, a small town in rural Minnesota, to work as a staff psychiatrist at the Fairmont Medical Center-Mayo Health System, treating an underserved population for almost five years. Given her interests in childhood trauma and her joy in working with children, she decided to pursue further training in child psychiatry. She would like to pursue psychoanalytic training after finishing her fellowship.



Noha Sadek

Jocelyn Soffer, M.D., is a fourth-year chief resident in psychiatry at the Mount Sinai School of Medicine in Manhattan. She graduated magna cum laude from Yale University with a B.A. in philosophy and Distinction in the Major. She later received her M.D. from the Yale University School of Medicine, writing a thesis on "Portrayals of SSRIs, Personality and Self-Concept" and receiving the Janet Glasgow Memorial Achievement Award. During adult residency training, she has continued to enjoy writing and teaching, authoring a chapter on endocrine comorbidities in the *Comprehensive Textbook of AIDS Psychiatry*. She has a lifelong passion for classical music, with an extensive background



Jocelyn Soffer

in choral singing, and plays the piano in her spare time. She has studied chamber music at the Mannes School of Music and recently performed with the Dessoff Choir at Lincoln Center.

Natalie Weder, M.D., is in her first year of a child and adolescent psychiatry fellowship at New York University. She received her medical degree from the Universidad Nacional Autónoma de México and trained in psychiatry at Yale University. She is interested in the interaction between genetic load and an aversive environment in the role of psychopathology and resilience in children, and is currently doing research in that field. She would like to learn from psychoanalytic theory to further understand the effect and consequences of trauma in early life.



Natalie Weder

Anna Yusim, M.D., is a third-year psychiatry resident at New York University. Born in Moscow, Anna immigrated to Chicago with her family when she was 5 years old. She received her undergraduate degree at Stanford University, where she studied biology and philosophy and conducted research on the effects of stress on the brain. She completed her medical degree at Yale University, where her research interests expanded to include global mental health. Since then, she has traveled to 45 countries and completed research projects in Thailand, Ecuador, and Rwanda. She is particularly interested in cross-cultural differences in conceptions of self, theories of mind, and epistemological frameworks. In addition to her professional interests, she enjoys traveling the world, triathlon training, meditation, creative writing, and existential philosophy.



Anna Yusim

Analytic Clinicians Find Empirical Research Valuable

Gregory M. Lowder

In 2007 I created a power point presentation, in collaboration with Nancy McWilliams and James Hansell, entitled, "The Enduring Significance of Psychoanalytic Theory and Practice." In the presentation I surveyed some of the seminal empirical studies of the effectiveness of psychoanalysis and psychoanalytic psychotherapy; I also included some empirical studies of psychoanalytic concepts, such as transference, unconscious conflict, and unconscious motivation.

The idea originally was conceived out of a need for a presentation for lay audiences and non-psychoanalytic clinicians, which could clear up some of the myths and misconceptions about psychoanalysis that have contributed to its waning respect and prominence in the last few decades. The presentation was made available on the Web sites of the American Psychoanalytic Association and Division 39 of the American Psychological Association. A piece in the newsletters of Division 39 and the American Psychoanalytic Association, that I wrote with Nancy McWilliams, generated many responses. It seemed that a number of individuals throughout the U.S. and Canada intended to make the presentation in various settings, including hospitals, community mental health centers, and undergraduate courses. This was good news; it was how we hoped people would use the presentation.

But then an event occurred that I had not expected, in terms of the value of this outreach tool. This past spring I made the presentation to the Weill Cornell psychiatry residency supervisory faculty at New York Presbyterian Hospital. (Many were psychoanalysts, graduates of the Columbia Psychoanalytic Institute and the New York Psychoanalytic Institute.)

Gregory M. Lowder, Ph.D., is in private practice. He is an advanced candidate in adult training and a candidate in child training at the New York Psychoanalytic Institute. He is volunteer psychiatry faculty at Weill Cornell and Albert Einstein Medical Colleges.

When I was asked to present I was at first surprised at the request, because I thought I would be preaching to the converted who already had knowledge of the studies I would



Gregory M. Lowder

cover. As it turned out, I was indeed preaching to the converted, but what also became clear was that nearly all the attendees were entirely unfamiliar with the empirical studies on psychoanalytic treatment and concepts.

Participants said they were thankful to have knowledge of such research so as to be able to respond better to questions and concerns about psychoanalytic treatments and concepts that might come from patients and/or their family members, supervisees, non-analytic clinicians, and anybody else who asked or off-handedly criticized. Also, the attendees noted that such empirical knowledge, which supported their day-to-day clinical work, served to boost their morale (evident in the palpable level of enthusiasm that evening). Psychoanalytic practitioners have faced various disparaging and demoralizing attacks on several fronts. It would therefore seem important for them to be informed of the number of research studies that supports the practice of psychoanalytic treatments and confirm many of the theoretical constructs that analytic clinicians depend on.

Attitudes toward psychoanalytic research vary greatly within our field. For the most part, it seems analysts are disinterested in and unaware of relevant research findings. Others are openly hostile and attacking. A relative few are actively interested in research and are conducting empirical studies. Joseph Schacter and Lester Luborsky published a paper in 1998 on the results of a poll of analysts about the percentage of research papers they read compared to the number of clinical papers

they read. The analysts with higher degrees of conviction that their rationales and techniques were sound and effective reportedly read fewer research articles than less convinced analysts. About this finding they speculated that "analysts with high levels of confidence in their rationales and techniques may be defending against concerns that they have significant covert doubts about their rationales and techniques." They went on to say "analysts' capacity to tolerate doubts about their work may seriously conflict with a sense or explicit belief that confidence in their analytic work is an important, perhaps essential, mutative force in their treatment. It seems very understandable that such a belief would press analysts to minimize or deny feelings of uncertainty about their work."

But what if analysts learned that the empirical research on psychoanalytic treatments and concepts often supported the belief that these treatments and concepts are sound? Would most of them have a similar reaction to that of the Weill Cornell psychiatry residency supervisory faculty? Those individuals seemed to greatly appreciate learning about the research (which showed favorable outcomes for psychoanalysis and for psychoanalytic psychotherapy). They felt it was useful information to have, and it seemed to boost their morale when it came to practice.

Throughout my experience as a candidate at the New York Psychoanalytic Institute, I have reflected on the process of developing an identity as an analyst. This process has included developing confidence in psychoanalysis as an effective treatment method. Along the way, I have heard many times that the amount of experience you have conducting analysis invariably impacts the degree of confidence you have in practicing and recommending analysis. This made sense to me; seeing firsthand how analysis could be helpful would increase a beginning analyst's confidence. But if confidence in the treatment method is an important aspect of developing an identity as an analyst, wouldn't it also be helpful to be exposed to research that shows support for the effectiveness of analysis, as another means of gaining confidence, especially at a time when so many critics claim that analytic work is a waste of time, or even unethical?

Continued on page 31

Saint Elizabeths: Patron Saint of Psychoanalysis

Roger Peele and Humaira Siddiqi

From the moment Saint Elizabeths Hospital opened its doors in 1855, it began training physicians on how to treat the psychiatrically ill, eight decades before formal residency programs were established. In 1909 William Alanson White (1870-1937) began training future psychiatrists at Saint Elizabeths Hospital in the importance of psychoanalytic concepts.

This psychoanalytic training orientation has remained throughout the last hundred years, through training that became part of Saint Elizabeths's residency programs in the 1930s, through its training U.S. Navy physicians to be psychiatrists in World War II, through the years when psychoanalysis dominated American psychiatric education, and has continued despite the turn toward biological training in many residency programs over the last quarter of a century.

Among the early ones to benefit from Saint Elizabeths's psychoanalytic training was Harry Stack Sullivan (1892-1949). Furthermore, many Saint Elizabeths graduates have become key faculty of the two psychoanalytic training institutions, The Washington Psychoanalytic Institute and the Baltimore Washington Psychoanalytic Institute.

The Washington metropolitan area has five outstanding residency programs in addition to Saint Elizabeths: Howard University, Georgetown University, George Washington University, and Uniform Medical School. By far, most of the psychiatrists in this metropolitan area were trained at Saint Elizabeths, contributing to the Washington Psychiatric Society's (WPS) psychoanalytic orientation. In 1971, for example, the American Psychiatric Association had

Roger Peele, M.D., is an honorary member of the Baltimore Washington Psychoanalytic Society, chief psychiatrist of Montgomery County, Md., and serves on the faculties of George Washington University, Howard University, and Saint Elizabeths Residency. He treats patients at Mercy Clinic.

Humaira Siddiqi, M.D., is a resident at Saint Elizabeths.



Roger Peele



Humaira Siddiqi

developed a publication championing the reasonableness of non-discrimination as to national health insurance, but the book was to have an appendix of "fallback" positions of coverage that would not include psychoanalysis. WPS leadership, largely psychoanalysts with ties to Saint Elizabeths, strongly objected and the book underwent an appendectomy.

From the moment Saint Elizabeths Hospital opened its doors in 1855, it began training physicians on how to treat the psychiatrically ill, eight decades before formal residency programs were established.

It is unusual for a residency program to be independent of a university and to be totally dependent on the public dollar. How can it be justified to train psychiatrists in a public setting, treating the most disabled of the psychiatrically ill, and stressing psychoanalytic concepts, when very few of the patients could be seen as ideal psychoanalytic patients? Why should the public taxpayers pay to train physicians in a psychoanalytic-oriented program? Should not the focus be on psychopharmacology? Should not the focus of therapy be on behavioral and cognitive concepts? These were the questions that one of us (RP) faced when he chaired the psychiatry department at Saint Elizabeths for 16 years (1979-1995). Year after year, first NIMH budget officials and later, beginning in 1987, District of Columbia budget officials would demand a justification for our psychoanalytic orientation.

The answers given to the hierarchy to justify this orientation over the decades would be the same answers TAP readers would give today.

First, we would point out that no matter how short the interaction that a physician would have with a patient, transference and countertransference cast their influence. Actually, we would point out, the very short interactions can be overwhelmed with transference, and countertransference feelings can have an enormous impact on the effectiveness of the interaction. The public system of psychiatric care and treatment effectiveness is very dependent on the clinicians' sensitivity to transference and countertransference, even if not a single one of the several thousand patients is in psychoanalysis and only a handful are in psychodynamic psychotherapy.

Second, it was emphasized that regardless of care and treatment being given, history is important. No other major psychiatric approach expects the clinician to obtain the detailed history of the patients that the psychoanalytic orientation expects.

Third, it was emphasized that we want all of our psychiatrists to view each patient as an individual. One of the most winning aspects of psychoanalytic orientation is its avoidance of simplistic reductions. There is a respect for the person that the psychoanalytic orientation requires that we want all psychiatrists to maintain throughout their careers.

Budget folks have a human side. They can understand that the concepts of therapeutic alliance, transference, and countertransference are very important, that unprofessional psychiatrists can severely harm institutions, that a public clinician should acknowledge the importance of the past, and that it is especially key to accept these vulnerable and unlucky citizens as individuals. These values should last another hundred years.

FORWARD!



Association of Administrators Celebrates 51 Years!

Dionne Hogans and Elizabeth Manne

Fifty-one years ago on December 5, 1957, at the Hotel Biltmore in New York City, 11 executive secretaries from psychoanalytic institutes and training centers across the country met for the first time to learn about each institute's office infrastructure.

The impetus for the group's first invitation to attend Executive Council and Board on Professional Standards meetings, came from APsAA's interest in reviewing its educational program and improving the quality of its training. A three-year, in-person Survey of Psychoanalytic Education of the then 17 APsAA training facilities, found that there was divergence of practice with regard to administrative matters, with varying degrees of effectiveness. Executive secretaries were invited to meet as a group to exchange ideas and procedures so that one would benefit from the other. Numerous questions related to operational procedures were asked, and the responses made it evident that conditions varied at each institute. The group decided to select one topic and then exchange materials on it from each institute. The group's name became GOES, an acronym of Group of Executive Secretaries.

Members of GOES quickly discovered that despite the varying organizational structures of their individual organizations, the common goal was to effectively and efficiently manage the unique educational system that produced skilled psychoanalysts. The yearly meetings in which executive secretaries came to exchange ideas and procedures resulted in GOES laying the groundwork for procedures related to

admissions, progression, faculty appointment, record keeping, and improving office systems at individual institutes. This created a more coherent national network of administrators as well as helping each institute.

Fast forward to December 15, 1981, which found administrators with expanded job descriptions and increased responsibilities. GOES changed its name to Association of Administrators (AOA). Which came first, the name change, or the change in the responsibilities of the individual members of GOES?

Whichever it was, the fact is that those at the helm of administrative functioning of institutes, societies, and centers had in 1981, and continue to have in 2008, a broader scope of work than their 1957 predecessors. In 1957, 81 percent of the members of GOES came from an educational or medical work background and only 19 percent came from a business background. Today it is not unusual for the administrator of a psychoanalytic organization to have experience working with other non-profit organizations, to have business ownership/management experience, and to have an advanced academic degree.

As psychoanalytic training continues to evolve, institutes and societies are changing their structures. With the need to better market their services in an expanded way, administrators with specialized skills are hired to handle the administrative aspects of numerous projects such as development/fundraising campaigns, considering ways to increase enrollment, launching and maintaining Web sites, developing newsletters, preparing marketing

plans, planning community outreach programs, and designing print materials.

A particular day might find an administrator conferring with the bookkeeper in preparation for a Finance Committee meeting, editing a forthcoming center brochure, drafting an article for a newsletter, advising administrative staff of a new policy decision about candidate courses, mailing confirmation letters to faculty for the upcoming academic year, e-mailing institute officers with an idea for a meeting with representatives of another mental health organization, monitoring CME program evaluations and applications for the following year, talking over publicity options with a consultant, completing a renewal application for institute and society liability insurance. These highly trained professionals serve as administrative liaisons between officers and faculty, between committee chairs and members, among various entities within their local organizations, and sometimes within APsAA.

It is administrators who offer continuity, so that important policy changes are not lost as leadership personnel changes.

Administrators represent their local organizations nationally at the AOA meetings during the biannual APsAA meetings, and many times serve in various capacities in the AOA.

As of December 2008, there are approximately 32 members in the AOA, with tenures ranging from six months to 38 years. AOA members continue to support one another through sharing information and ideas at their biannual meetings. The relationships they establish with one another, with the staff at APsAA's national office, and with APsAA officers contribute to the ability of an administrator to have up-to-date, first-hand information about current national and local trends on issues such as informed consent, insurance for clinics, and the best way to offer PEPWEB to members.

Administrators provide direction for the lines of communication while officers and faculty members change leadership roles. It is administrators who offer continuity, so that important policy changes are not lost as leadership personnel changes.

Continued on page 31

Dionne Hogans is the administrator at the Wisconsin Psychoanalytic Institute, Society, and Foundation.

Elizabeth Manne is the executive director at the Baltimore Washington Center for Psychoanalysis.

Psychoanalytic Reflections on *Notes on a Scandal*: The Psychopathology of Everyday Strife

James Hansell



James Hansell

Oscar Wilde is supposed to have once quipped “I never read a book I must review—it prejudices one so!” The cleverness of Wilde’s joke, of course, is that it applies equally to

our reviews of books we *have* read, and films we *have* seen—just less obviously and therefore more perniciously so. We only “see” the film that we are capable of seeing; the film that we wish to see, as our “prejudices”—that is, our personalities, conflicts, and defenses—dictate. This is a central theme of Richard Eyre’s award-winning *Notes on a Scandal*, a riveting drama about the relationship between Sheeba, a young high school art teacher having an affair with a student, and Barbara, a veteran teacher who creepily befriends her. As some reviewers have pointed out, perhaps the most disturbing message of this disturbing film is that *Notes on a Scandal* isn’t really about *them*; it’s about *us*. If I could choose a subtitle for the film, with a nod to Freud, it might be *The Psychopathology of Everyday Strife*. Or, in a less highbrow mode: *Delusions R Us*.

Notes on a Scandal is indeed a sumptuous buffet for a psychoanalytic commentator. The film’s territory overlaps strikingly with that of the clinical psychoanalyst. It offers a profound illumination of the driving power of sexual and emotional needs; of the corrupting influence of feelings of entitlement; of the raw sadism

that can be easily unleashed by narcissistic injuries; and of the stunning tenacity of the “repetition compulsion,” to name just a few of the themes that catch the clinician’s eye. Furthermore, these are played out among the female leads in the film—no conventional idealization of women here!—in keeping with the psychoanalyst’s unsentimental view of the dynamics of sex and aggression in both genders. Indeed, one of the most powerful aspects of the film is its unblinking exploration of the dark side of a female friendship. To quote from the title of Louise Kaplan’s important book, *Notes on a Scandal* dares to examine the relatively uncharted territory of *Female Perversions*.

But despite all of its Freudian content, *Notes on a Scandal* actually has an even more profound and disturbing psychoanalytic sensibility. What I have in mind is that aspect of psychoanalysis which, according to Freud, most “disturb(s) the peace of this world.” Freud’s most discomfiting claim was this: We humans cannot rightly claim that we control, or even really know, ourselves. As familiar and comfortable

as this “modernist” claim may seem to us as 21st century, post-modern intellectuals, I would argue—and I think that *Notes on a Scandal* does as well—that Freud’s point about our difficulty assimilating this “blow to our narcissism” still stands.

In this sense, *Notes on a Scandal* is a classically modernist (and therefore classically psychoanalytic) film, in the spirit of Joyce, Faulkner, Woolf, Schoenberg, Picasso, Nietzsche, and their compatriots. At its heart is a profoundly unreliable narrator; the aptly named Barbara Covett. Barbara thinks she knows herself—indeed, she thinks she knows it all. And yet the film shows us that this woman is incapable of seeing the most basic truths about herself. She cannot admit her motives or her actual desires, hiding them from herself under a screen of rationalizations even as she acts them out repeatedly. When her sister empathically inquires about her sexuality and love life, Barbara is unable to respond, deceiving herself much more than her sister. When confronted by Sheeba, at the climax of the film, with the truth about herself, Barbara is able to thoroughly ignore it.

Sheeba’s situation is somewhat different, yet just as thoroughly Freudian. When her outraged husband screams the anguished question—“Why?”—Sheeba is more honest with herself than Barbara, but no more transparent to herself. In one of the most powerful moments of the film, she responds to this question—why has she behaved in a way that has destroyed her life and the lives of those she loves?—with three astonishingly frank words: “I don’t know!” Even with the back story that the film provides about Sheeba’s loneliness and frustrations, it makes the point that she cannot explain, nor could she control, her actions. She is driven, opaque to herself, and unable, despite her intelligence and reflectiveness, to identify why she seduces Steven, how she really feels about her husband, and what she truly wants from Barbara.

Continued on page 32

James Hansell, Ph.D., is a training and supervising analyst at the Michigan Psychoanalytic Institute, and a member of the psychology and psychiatry faculty at the University of Michigan. He is co-author (with Lisa Damour) of *Abnormal Psychology* (John Wiley & Sons).



Interview with Phillip Freeman

Vera Camden

Phillip Freeman is training and supervising psychoanalyst at the Boston Psychoanalytic Institute. For 15 years, Freeman addressed the Boston psychoanalytic community in an annual talk that followed the exploits of the local congregation of analysts, their theories, their practices, and their efforts to hold onto their dignity in the marketplace. The last 10 years of these talks were collected and published last year together with a CD of some of the performances. The collection, *Adaptations: Disquisitions on Psychoanalysis 1997-2006*, is available at Amazon.com. (See excerpt, page 32.)

VC: You have written a collection of funny serious talks about psychoanalysis and psychoanalysts. Is there something inherently funny about the discipline?

PF: As psychoanalysts, we are ripe for satire. Our best intentions make us so. Psychoanalysis, our theory, is a compassionate satire of our civilized pretensions. No one recognizes better than psychoanalysts the inevitable self-deceptions and hypocrisies that come from attempts to be better than ourselves, and the wish to be seen as lovable. We hold onto our truth a bit better as clinicians than as members of a group. We know, for example, that interpretations inevitably involve confrontations, that analysis includes a measure of seduction. But we still try to avoid the fact that every structure, from the cell membrane to the American Psychoanalytic Association involves distinctions, exclusions, and aggression.

VC: What is to be gained by your decision to consider controversies about the certification process in terms of the question of whether Clinton should have eaten the wafer

Vera J. Camden, Ph.D., is professor of English at Kent State University, training and supervising analyst at the Cleveland Psychoanalytic Center, and co-editor of *American Imago*. She is a member of the Committee on Research and Special Training. Recently she published *Trauma and Transformation* (Stanford, 2007).

at a communion service in South Africa?

PF: Psychoanalysts are the perfect audience for narrative weaves that tie disparate stories together through association and allusion, and flow towards resolutions that are strange and yet familiar. In listening to the interplay of the real and the imagined, the present and the transference, we are attuned to displacement.



Vera Camden

The book is a collection of love songs to a profession built on a creative explosion of ideas, launched into celebrity, shocked by passing fashion, and tempted by endless cosmetic strategies to recapture the past.

VC: Your discussions of Miracle Mike the Headless Chicken, the Totentanz death march, and the ominous ubiquity of dark matter in the universe might be taken as sounding a pessimistic note for the discipline. Are you hopeful?

PF: We have had a rise and a fall. What will be our third act? The book is a collection of love songs to a profession built on a creative explosion of ideas, launched into celebrity, shocked by passing fashion, and tempted by endless cosmetic strategies to recapture the past. What must we do to survive and what must we remember to survive what we would do?

VC: How does humor help?

PF: Freud exemplified and recognized the resiliency of humor: His ironic recommendation of the hospitality of the Gestapo exposed tyrannical authority—whether institutional or intrapsychic—as blind and therefore weak, perhaps vulnerable to interpretation. For a

profession charged with the task of relieving analysts of their more expensive and expansive illusions, his belief in resilient humor strikes a note of optimism.

VC: One of your longer talks is built around the story of John Watson, father of American behaviorism. Why?

PF: Our aspirations to efficiency and interdisciplinary explorations in psychoanalysis sometimes lead to mischief.

VC: Did a monastery really close after an encounter with psychoanalysis in Guadalajara?

PF: History is always subject to interpretation. I think we can say that Guy Pinter's efforts in that setting, if it existed, to develop a research methodology for psychoanalysis based on simulations anticipated by many years current trends in clinical education.

VC: In the preface to *Adaptations* you refer to our efforts to hold onto our dignity in the face of market forces. How do you think we are doing?

PF: I have heard that sometime between the Lorraine Bracco affair and the efforts to remove Freud's cigar from the APsA logo there was a moment's pause for reflection.

VC: Is it all about money?

PF: Some of the more anagrammatic characters in the collection speak to this issue. I prefer to think it is all about trying to remember, on a particularly tricky day, where you left the keys. Or, perhaps it is all about wanting to be loved.


VC: I have recently reviewed your talks for *American Imago* and in that review end up wondering about your role as Shakespearean fool to the aging royalty of American psychoanalysis: Lear's fool came to an ambiguous

Continued on page 32

Empirical Research

Continued from page 26


In the last decade, many institutes have included courses on research as part of their adult psychoanalytic training curricula. This is an important shift in the psychoanalytic community toward developing an awareness of how exposure to research is valuable in helping candidates develop an analytic identity. I would also suggest that many non-candidate members of this organization could benefit from gaining knowledge of the empirical research on psychoanalytic treatment and concepts. Such information may not necessarily affect one's morale or confidence in the effectiveness of analytic work, but it might. It may also be used when talking with the uninformed or misinformed, or when discussing the relevance of analytic training in the 21st century with prospective candidates.

I hope to be able to present this data about empirical studies to as many analytic and non-analytic audiences as possible. Feel free to contact me regarding presentations at glowder@gmail.com. 

Association of Administrators

Continued from page 28

Members of AOA have come a long way. With gratitude to the founding Group of Executive Secretaries who laid the groundwork for us, and thanks to the current administrators for their continuing support, their ongoing dedication, creativity, and resourcefulness, we look forward to the next 51 years. Please join with the Association of Administrators in celebrating its accomplishments, and support us as we support you, APsaA members, as we face the challenges of the future together.

Happy birthday to the Association of Administrators! 

Editor's Note: *The American Psychoanalyst* is grateful to the writers of the Forward column for their valuable editorial contributions over the last year.

From the Unconscious

Sheri Butler Hunt



Stephen S. Madsen is an attorney with an undergraduate degree from Harvard and a law degree from Columbia. His works have appeared in *The Lyric*, *The Mississippi Review*, and other journals. While he has not sought publication of his own poetry in some time, he took an interest in the poetry column of *The American Psychoanalyst*. We welcome his contribution as a guest poet.

The evolution of hope is very apparent in this poem. It grows, alongside of trust in the analyst and the process. This poem strikes a poignant note of faith in the joint work coupled with enduring momentum and acceptance.

FOR THE DOCTOR IN THE CHAIR

During the time when I was on the couch,
I couldn't really tell if you were kind.
You were young then, just starting out. Your touch
Was always to ask questions, just as trained:
What comes to mind? What are you thinking about?
My answer, then, was mostly sullenness—
No rush of insight, memory, or thought.
Still, though, I healed, left, married, found success.
This time around, I've faced you in your chair:
The decades passed give pain new urgency.
I speak my feelings, and you tell me where,
Deep in my heart's dark maze, their source may lie.
And now I see the kindness in your eyes,
Your growing faith in all that loves, and dies.


—Stephen S. Madsen

Sheri Butler Hunt, M.D., is a graduate analyst in the adult and child divisions at the Seattle Psychoanalytic Society and Institute. A published poet and member of TAP's editorial board, she welcomes readers' comments and suggestions at sherihunt@hotmail.com.

Interview

Continued from page 30

end when he tried to rescue his beloved king from self-destructive and narcissistic ruin. Care to comment?

PF: Psychoanalysts are typically portrayed as fools for presuming to know. Fools are sometimes allowed to act as psychoanalysts for presuming not to. It is, however, as you say, a dangerous business. There is enough room in humor to accommodate all manner of projected motives and fear. Still, when things are going well, there also is the more felicitous possibility of providing sanctuary. 

Notes on a Scandal

Continued from page 29

And, like Barbara, she does not know because she *cannot stand to know* these things. Her conscious life, less dramatically than Barbara's, but no less truly, is a self-protective delusion, a self-serving fiction, a convenient dream meant to mask a reality she cannot tolerate.

It is this view of the human condition, our inevitable and thorough unreliability as narrators of our own lives, which Freud emphasized and which *Notes* puts, quite literally, in our faces. When we rail against it—perhaps by seeing these characters as “Others,” or by trying to make their behavior seem comprehensible—we are continuing the revolt against modernism. Does all of this, though, imply a hopeless pessimism about our lot as humans? On this question, I conclude with a few more clinically oriented thoughts.

The patients we see in our offices, ourselves included, are the Barbaras and Sheebas of the world; divided subjects unknown to themselves. What does clinical psychoanalysis have to offer to them, and to us? Can such profoundly split psyches be rejoined through the “talking cure”? Freud was the first of many to oversimplify this task. Despite his discovery that the contents of each individual's unconscious are emotional dynamite, buried deeply for good reason, he naively imagined, for a good part of his career, that people could actually be introduced to themselves in short

EXCERPT FROM ADAPTATIONS

Nationally the number of psychoanalysts reportedly dropped another 1 percent and the average age of the membership rose to 63. Marketers have encouraged us to approach new audiences with a less forbidding product such as occurred when teenage “popera” sensation Charlotte Church topped the Billboard charts with a selection of crossover hits that sold in the millions and reversed a malaise caused by the downward spiral of classical music sales. Paul Burger, president of Sony Music Entertainment Europe, said that only the “classical cognoscenti...a small...but, regrettably, closed community,” felt the successful outreach was limited by the fact that the recordings are not, in fact, opera.


In a related development, the Sisters of St. Joseph in Mt. Holyoke, facing dwindling recruits and an aging membership, discovered that many more women would be interested in becoming nuns if they could do so part-time, without celibacy, interference with a career, or other inconveniences. Some have argued that this solution to the vanishing vestals will defeat the point of the religious life, that it is the task of the religious community sisters to help the lay members of the church. But the lay members want to be sisters too, and so now they will work in the convent as “temporary sisters.” In this way the mission may outlive the missionaries, and it will remain a question as to the importance of the fact that the new, so-convenienced sisters are not, in fact, nuns.

And there was comfort and commiseration as well for our friends under the Smith Kline umbrella, the American Psychiatric Association, who discovered their doppelganger in two groups with a history of progressive ideals that have insisted that drug money is necessary for their operations and for the preservation of their mission. The groups, the Columbia Revolutionary Armed Forces (FARC) and the National Liberation Army (ELN) inherited their drug money from the government-sponsored dismantling of the for-profit Medellin and Cali cartels. Asked whether this arrangement might corrupt the ideals of these peoples' movements, journalist Mark Bowden said that the movements had never convinced the populace of their worth and that 40 years was a long time to live in the mountains.

—Phillip Freeman

order and to good effect. Several professional generations later, we psychoanalysts are less naïve but still trying to figure out the practical and therapeutic paradoxes created by the kinds of profound self-divisions and self-deceptions portrayed so powerfully in *Notes on a Scandal*.

But this takes me too far afield. These remarks are only an effort to comment on *Notes on a Scandal* using a psychoanalytic lens,

and my idiosyncratic psychoanalytic lens at that. Any psychoanalyst worthy of the title is as attuned to the nature, sources, limits, and effects of his own particular subjectivity as to that of his patients. Psychoanalysis fancies itself as the “science of subjectivity,” a challenging and paradoxical ideal if ever there was one. Among many other things, *Notes on a Scandal* brings this difficult sensibility to our attention in a most compelling way. 

2009 2010 *Fellowship* program

NOW ACCEPTING APPLICATIONS!

The FELLOWSHIP PROGRAM seeks outstanding psychiatrists, psychologists, social workers, and academics currently in training or at an early stage of their careers. Competitive applicants should have a curiosity about how the mind works, and an interest in how psychoanalytic ideas may be pertinent to their discipline and field of interest.

Deadline: February 9, 2009

More information: 212-752-0450 x12

Download the application: www.apsa.org

How to Participate in APsAA's Scientific Program

Scientific papers for oral presentation must be no longer than 18 pages and timed for 40 minutes reading time. Submit all manuscripts by electronic mail and please include an abstract. Send one blind paper, with all references to the author deleted. The first page of the manuscript must show only the author's name, address, phone number, and the title of the paper. The author's name should not appear on any subsequent page. JAPA has right of first refusal on any paper accepted for presentation. The paper cannot have been accepted or be under consideration for publication by another journal.

Panel proposals should be two pages maximum. The proposal should contain a description of the format, the objective of the panel, and names of possible participants (chair, panelists, discussant, if any). The Program Committee chooses panels one year in advance.

Discussion group proposals should be two pages maximum. Decisions concerning new discussion groups are made based upon how subject matter relates to what is already taken up in existing groups and on space availability.

Symposia explore the interface between psychoanalysis, society, and related disciplines, attempting to demonstrate how psychoanalytic thinking can be applied to non-psychoanalytic settings. Symposia must be in talking points format, 10 to 15 minutes per presentation (no papers read), with a minimum of 15 minutes for audience participation with emphasis on audience interaction. Submit a brief (two pages maximum) proposal outlining rationale, program format, and suggested speakers.

The deadline for submission of panel proposals is October 1, 2008, for the Winter (January 2010) Meeting.

The deadline for all other submissions is May 1 for the Winter Meeting and usually December 1 for the Annual Meeting, but please note there will not be an Annual Meeting in June 2009.

Address correspondence to Scientific Program Submissions, American Psychoanalytic Association, 309 East 49th Street, New York, New York, 10017 or email cgatto@apsa.org.

In Memoriam

Stuart T. Hauser

Linda C. Mayes and Richard Almond

With Stuart Hauser's death on August 5, 2008, from complications of treatments for esophageal cancer, many members of APsA lost a close friend and long-standing colleague. Psychoanalysis lost one of its most realistic, determined, and effective ambassadors; many young psychoanalysts and psychoanalytic researchers lost an inspiring mentor who took great pleasure in his students' careers. Stuart served APsA in many ways. He chaired and reviewed grant proposals for the Fund for Psychoanalytic Research for many years, and chaired the Committee on Research Education. He began the annual research poster session at the winter meetings of the Association and served on its organizing committee. With his close colleague, Robert Waldinger, Stuart organized a yearly psychoanalytic research Discussion Group that is one of the best attended at the winter meetings. As certification became controversial, his combined clinical/research capacities led to Stuart's being asked by the Committee on Institutes to study the process of evaluation. Most recently, he chaired a special task force to review the place of research in APsA.

Linda C. Mayes, M.D., is *Arnold Gesell Professor, child psychiatry, pediatrics, and psychology at Yale Child Study Center; Special Advisor to the Dean, Yale School of Medicine; chairman, directorial team at the Anna Freud Centre; and faculty, Western New England Psychoanalytic Institute.*

Richard Almond, M.D., *had been a friend of Stuart Hauser since they were Yale medical students. He is training and supervising analyst, San Francisco Center for Psychoanalysis; board member of the Fund for Psychoanalytic Research; and member of APsA's Committee on Psychotherapy Training.*

Stuart grew up in the Bronx and graduated from the Bronx High School of Science. His career path reflected his broad interests and his capacity to bridge different worlds. He graduated from Antioch College in 1960, and received an M.A. in social anthropology from Harvard University in 1965. In 1966, he earned his M.D. from Yale University School of Medicine. He completed residency training in psychiatry at the Massachusetts Mental Health Center from 1967 to 1970. In 1977, he received his Ph.D. in developmental psychology and personality from Harvard University, and completed his training in psychoanalysis at the Boston Psychoanalytic Institute the following year. He always maintained the many identities reflected in his training—psychoanalyst, physician, investigator, teacher, and a scholar devoted to examining some of the deepest questions of human development and attachment.

Following his graduate training, Stuart joined the faculty of the Harvard Medical School with which he was affiliated with pride for nearly 25 years. Fostering adaptive development across the lifespan was one of his deepest commitments in both his mentoring and his research. He directed two major longitudinal studies of adolescent development. The first focused on psychosocial determinants and consequences of adolescent onset insulin-dependent diabetes mellitus; the second addresses family aspects of adolescent ego development in high school students and psychiatric patients. This study, first published as *Adolescents and Their Families* (The Free Press), extended into the young adult and mid-life adult years and has evolved into a three-generation study of development that includes the parents, spouses, and children of the original adolescent subjects. Characteristically Stuart asked questions in this study that bridged psychoanalytic and developmental psychology



Stuart T. Hauser

perspectives on attachment and the major tasks of adolescence and young adulthood, including the forming of close and romantic peer relationships, attachments with family of origin, beginning new families, parenting, and work relationships.

In the last year of his life, he took another bold step in his research, bringing genetic perspectives to his study of ego function and resilience in young adults. His most recent book, *Out of the Woods: Tales of Resilient Teens* (Harvard University Press with Joseph Allen and Eve Golden) describes the stories of individuals he had followed for many years and gives special attention to those traits and adaptations that helped them weather considerable adversity.

In 1993, Stuart became director of the Judge Baker Children's Center in Boston. He served as director and then president until 2004. During his tenure at Judge Baker, he nurtured the center's clinical research training program. This training program had just received renewed funding shortly before Stuart's death, a renewal especially remarkable in a current climate of reduction in NIH funding for training young scholars.


Indeed Stuart's commitment to mentorship of young scholars was evident in so many ways beyond his professorial roles and his success in sustaining NIH supported training efforts. For years, he gave much time and thought to the Westinghouse Science Talent Search. He was equally devoted

Continued on page 35

to the “research summer school” supported by the International Psychoanalytic Association held every summer in London in August and then to a later version of the same program in New Haven held in the spring. There could not be a more fitting setting for Stuart’s devotion to mentoring and to building bridges. Despite long training days, Stuart was energized by the training experience and eager to hear how the participants fared when they returned home. So beloved was he as a mentor in this setting that on his death for days e-mails arrived on the psychoanalytic research listserv describing the impact Stuart’s consultation had had on so many young scholars around the world. He brought the same care for mentoring and developing young scholars to every paper and grant he reviewed.

Stuart’s energy often seemed boundless—and he spoke of how work was his greatest satisfaction and the core of his identity. Many of his colleagues stood in awe of his ability to maintain psychoanalytic clinical work with his research, writing, and constant attention to his students. He also seemed always ready to make himself available as a consultant, and had in the last four years started an active collaboration with colleagues in Norway on resilience. And despite his devotion to his work, his curiosity was boundless and led him to many challenges that often surprised his friends—learning to ski, to sail, to play the piano, to be fluent in Norwegian, only samples from a long list.

While his work and his curiosity were the manifest starting place of his energy, the

deeper source came from his capacity for lasting friendships and his love of his family, Barbara, his wife of 44 years, and his sons Josh and Ethan as well as his two daughters-in-law and two grandchildren. Stuart’s family was the home base of his ability to give to all of us and to hold so many people in mind. Much as we miss him, he left a part of himself in all of us, in his letters and projects that brought us together; his gentle urgings that we join him in a mentoring effort or a task for psychoanalysis, and in his ever resilient attitude to living. We wish he were still here to help us carry on all that he started and fully intended to continue. But if that is not possible, he conveyed his faith and friendship in such abundance that we feel his presence, see his smile, hear his laugh, and carry forward his work so that he will remain with us. 



The American Psychoanalytic Association is honored to accept contributions in memory or in honor of your colleagues, family, and friends. These contributions are a thoughtful way to remember or recognize members while supporting APsAA.

Memorial and Honorary gifts will be listed in our annual Contributors List in each December issue of TAP.

Please mail your contributions along with this form to the American Psychoanalytic Association, 309 East 49th Street, New York, NY 10017. All contributions are tax deductible to the fullest extent of the law.

Memorial and Honorary Gifts



Memorial and Honorary Gift Form

In the name of _____

I am making a gift in the amount of:

\$_____ in memory of _____

\$_____ in honor of _____

My name: _____

Address: _____

email address: _____

WINTER 2009 MEETING PROGRAM HIGHLIGHTS WALDORF ASTORIA HOTEL • JANUARY 14-18, 2009

PLENARIES

FRIDAY,
JANUARY 16, 2009



9:45 a.m.-11:15 a.m.

Killing Caesar

Speaker:
K. Lynne Moritz, M.D.



©Karin Rosenthal 2008

5:15 p.m.-6:45 p.m.

Privacy and Disclosure in Psychoanalysis

Speaker:
Judy L. Kantrowitz, Ph.D.



**Register by
December 29
and SAVE!**

To register, visit <http://www.apsa.org/>
and click on the orange Meeting banner.

PANELS

Panel I: The Role of Dreamwork in Contemporary Psychoanalytic Practice

Chair: Glen O. Gabbard, M.D. (Houston, TX)
Panelists: Vincenzo Bonaminio, Ph.D. (Rome, Italy)
Robert Michels, M.D. (New York, NY)
Presenter: Dr. Paul Denis (Paris, France)

Panel II: The Interpretation of Action in Analysis

Chair: Henry F. Smith, M.D. (Cambridge, MA)
Panelists: Dr. Paul Denis (Paris, France)
Jay Greenberg, Ph.D. (New York, NY)
Dr. John Steiner (London, UK)
Reporter: Dominique Scarfone, M.D. (Montreal, CA)

Panel III: Bending the Frame and Judgment Calls in Everyday Practice

Chair: Nancy Chodorow, Ph.D. (Cambridge, MA)
Panelists: Dale Boesky, M.D. (Birmingham, MI)
Adrienne Harris, Ph.D. (New York, NY)
Peter L. Goldberg, Ph.D. (Albany, CA)
Reporter: Alisa R. Levine, Psy.D. (Newton, MA)

Panel IV: Sex and Shame: Clinical Dilemmas

Chair: Ellen O'Neil Helman, LCSW (Miami Beach, FL)
Panelists: Rosemary H. Balsam, M.D. (New Haven, CT)
Dianne Elise, Ph.D. (Oakland, CA)
Joseph D. Lichtenberg, M.D. (Bethesda, MD)
Discussant: Ethel S. Person, M.D. (New York, NY)

Child and Adolescent Panel: The Adolescent in Analysis Who Wants to Go Off to College: Delay, Stay Local, Terminate or Continue by Telephone?

Chair: Thomas F. Barrett, Ph.D. (Shaker Heights, OH)
Presenters: Ann De Lancey, Ph.D. (Seattle, WA)
Charles A. Mangham, M.D. (Seattle, WA)
Discussant: Jack Novick, Ph.D. (Ann Arbor, MI)
Reporter: Kimberly Bell, Ph.D. (Shaker Heights, OH)

Research Panel: Borderline Personality Disorder

Chair: Eric A. Fertuck, Ph.D. (New York, NY)
Panelists: Glen O. Gabbard, M.D. (Houston, TX)
Harold W. Koenigsberg, M.D. (New York, NY)

TWO-DAY CLINICAL WORKSHOPS AVAILABLE AT PRESS TIME

Workshop Series in Analytic Process and Technique—CLOSED

Chair: Irene Cairo, M.D. (New York, NY)
~~*Featured Discussant:* Dr. John Steiner (London, UK)~~

Workshop Series in Analytic Process and Technique—CLOSED

Chair: Nancy J. Chodorow, Ph.D. (Cambridge, MA)
~~*Featured Discussant:* Dr. Paul Denis (Paris, France)~~
~~*Presenter:* Ann Lehman Katz, Ed.D. (Brookline, MA)~~

Workshop Series in Analytic Process and Technique

Chair: Sharon Zalusky, Ph.D. (Los Angeles, CA)
Featured Discussant: Patrick Miller, M.D.
(Paris, France)

Psychotherapy Technique and Process

Chair: Alan Pollack, M.D. (Newton, MA)
Featured Discussant: Dan H. Buie, M.D.
(Wellesley Hills, MA)
Presenter: Jane Hanenberg, Ed.D. (Watertown, MA)

Child and Adolescent Two-Day Clinical Workshop

Chair: Ruth S. Fischer, M.D. (Bryn Mawr, PA)
Featured Discussant: Alexandra Harrison, M.D.
(Cambridge, MA)

**We look forward to
seeing you in January!**

**Now approved by
NASW and CA BBS
for Social Worker CEUs!**



309 East 49th Street
New York, New York 10017

NONPROFIT ORG.
US POSTAGE
PAID
ALBANY, NY
PERMIT #370