FROM THE PRESIDENT

Inward and outward are one set of dynamic tensions for me when I think about psychoanalytic psychotherapy and psychoanalysis as I practice it today. Looking inward, I want to understand for myself and for my patients how unconscious fantasy, conflicts, representations of self and other contribute to who we are and how we think, feel and act. Looking outward I want to understand the sociocultural and sociopolitical elements that contribute to how we think feel and act. I would like to discuss two aspects in this column, I plan to talk about the neuroscience research that is validating the psychoanalytic principles which guide my looking inward and about an exciting outreach program where what we know about the intrapsychic aids a group dealing with the sociopolitical.

NEUROSCIENCE

Freud (1895), in his *Project for a Scientific Psychology* attempted to formulate a neurological basis for a psychology of mind. He ultimately gave up this effort to focus on psychic meaning and psychic mechanisms. Modern neuroscience, with high tech imaging capacity, is now proving Freud’s hypotheses correct. Mark Solms writing in the May 2004 issue of *Scientific American* documents the mapping of brain systems responsible for inhibitory structures, which he likens to ego, and of implicit (unconscious) and explicit (conscious) memory systems. He discusses neural pathways that bypass the hippocampus allowing an event to trigger unconscious feelings without conscious memory. In the January 2004 issue of *Science*, Anderson et. al., delineate neural systems underlying the suppression of unwanted memory. They propose and demonstrate via Functional Magnetic Resonance Imaging (fMRI) how we utilize our lateral prefrontal cortex to disengage hippocampal processing. They conclude this work proves we can actively choose to forget. “The current findings provide the first neurobiological model of the voluntary form of repression proposed by Freud... (p. 235).”

We continue to demonstrate the validity of our work and to make known the large body of outcome research on psychoanalysis and psychoanalytic psychotherapy as we assert our rightful spot as an evidenced based practice. I wonder if a compilation of fMRI scans trumps a double blind study as evidence for efficacy.

OUTREACH

Ken Reich is a member of the Division 39 Outreach Committee and the President of the Psychoanalytic Couple and Family Institute of New England and (PCFINE). He has helped me become acquainted with this wonderful outreach project. PCFINE is affiliated with all three psychoanalytic institutes in Boston (MIP, BPSI, PINE). PCFINE has launched an outreach program to offer pro bono services to members of National Guard and Reserve families many of whom have family members serving in Iraq. Unlike families of regular military, psychological services are not provided by the military for these families. Ken and PCFINE launched this program in Massachusetts and the National Guard is interested in making it a nationwide program.

We have all learned to separate our personal feelings about the war in Iraq and about our government from our ardent support for those who serve in the war. This is an excellent opportunity to take our expertise about the impact of separation and trauma on individuals and families, and offer our skills to a population that needs these services but might not know how to seek us out. Any local chapters, institutes, or individuals can contact Dr. Kenneth Reich at 617 492-0280 or by email at IRA7007@aol.com with National Guard Outreach on the subject line.

REFERENCES


Freud S. (1895) *Project for a scientific psychology*, S.E. 1, 295-391

A quarter-century ago, psychoanalyst members of the American Psychological Association founded Division 39, the Division of Psychoanalysis. This landmark event solidified an intellectual community for American psychologists engaged with psychoanalytic theory and practice. Today Division 39 constitutes a vibrant, pluralistic entity, one from which vital contributions to the world of psychoanalysis regularly emerge. We now come together in New York City to consider where we have been in these twenty-five years and where we will go in the future.

At once looking back and looking forward, we endeavor to examine our history and to articulate what might be next. We intend to eschew nostalgia yet reckon with the past with open minds and hearts. We balance our aspirations to reach for the limits of what is knowable with an awareness of the demands of the here and now in our work. In parallel to the generative process of psychoanalysis, we seek to create fresh understandings and new directions out of an exploration of our work and ourselves. What the psychoanalytic process teaches us about continuity and change in the processes of being and becoming implores us to appreciate that complacency may portend our demise. Just as psychoanalysis is arguably thriving it also remains vulnerable to challenges from without and within. Let us take this celebration of our anniversary as an opportunity to renew and enliven both our spirit and our message to the wider world.

We invite proposals which take this call for reckoning and anticipating as a point of departure. We seek contributions on a broad range of themes, reflective of the multiple engagements of our Division’s members.

For Each Submission:
- Send four (4) copies of the proposal with a TITLE ONLY (omitting names). NO FAX SUBMISSIONS WILL BE ACCEPTED.
- Create a cover page containing: Your name(s), address, fax and/or e-mail, title of submission, and, for each author, his/her primary affiliation and a ONE-PAGE Curriculum Vitae.
- FOR PANELS ONLY: Submit four (4) copies of the following
  (a) A 150-word overview of the panel; (b) A 350-word abstract for each paper.

In order to facilitate discussions between presenters and the audience, we strongly recommend that panels be limited to two (2) papers and a MODERATOR (versus DISCUSSANT).
- MEET THE AUTHOR has a delivery time of 50 minutes and requires a 150-word overview WITH name(s) INCLUDED.

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* Please specify issues to be addressed in this informal format.
** The Core Planning Committee encourages graduate and undergraduate students to present their psychoanalytically relevant research.

NOTES:
1. All presenters must register and pay for the Conference. NO EXCEPTIONS. Please consider this when putting together your program.
2. Only three (3) proposals will be accepted per person. Scheduling decisions are non-negotiable.
3. Psychoanalytic Psychology has the right of “first consideration” for all papers and panels under the aegis of the Division of Psychoanalysis (39).
4. Please direct all questions regarding submissions to Conference Co-Chairs Anton H. Hart, Ph.D. (212) 595-3704 / anton.hartphd@alum.vassar.edu OR Stefan R. Zicht, Psy.D. (212) 580-7252 / srl2@rcn.com

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Submissions, including references, need to be in APA style. Email your submission in an attached Word or WordPerfect file to the Editor. If you do not have attached file capabilities, mail the disc to the Editor. Hard copies are not needed. Please write one or two sentences about yourself for placement at the end of the article and indicate what address information you would like published. Submissions should be no longer than 2500 words.

All materials are subject to editing at the discretion of the Editor. Unless otherwise stated, the views expressed by the authors are those of the authors and do not reflect official policy of the Division of Psychoanalysis. Priority is given to articles that are original and have not been submitted for publication elsewhere.

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DEADLINES

Deadlines for all submissions is the first of January, April, July or August. Issues generally appear 5-6 weeks after deadline date.

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LETTERS TO THE EDITOR: DAVID SCHARFF

In Dennis Debiak’s brief contribution to Psychologist/Psychoanalyst, “State of the Art II: Introducing Students to LGB-Affirmative Psychoanalysis (24: 2) he told of using my 1982 book, The Sexual Relationship, to teach about the dynamics of sexual development. The article cited the reprint date of 1998, without noting that the book was reprinted unmodified from the original of 16 years earlier. In teaching from the book, he had the upsetting experience that many students, including those especially who may have been gay, lesbian or bisexual, took offence at my 1982 position concerning homosexuality as pathological, and particularly, of classing it with perversions. His students correctly called him (and me) on these anachronisms in the book which no doubt wounded them personally. He notes how encounters with such material discourage students from considering analysis as a relevant discipline, and contribute to their conviction that analysis is stuck in an stubborn, outmoded and insulting place. In opposition to the students’ position, he notes the evolution in our field, and quotes the late Steve Mitchell’s argument that while homosexuality is by no means pathological, we should still consider the role of early object relations as a means to understanding all development—heterosexual, homosexual and bisexual.

I certainly want to apologize to Dr. Debiak and those students for my position then, which is one that would be hurtful to any GLB student, and offensive to many others. However, I also want to set the record straight concerning that book and the evolution of my own position. The preface to the 1998 reprinting of the book (which Dr. Debiak tells me he noted in class and in the longer article from which this contribution was condensed) established my changed understanding and my current agreement with him on the very points that the article implies I still represent so badly. In the 1998 preface, I indicate that I decided not to rewrite the book because so much has changed that it would essentially be a new book, and that I clearly no longer stand behind the original argument on homosexuality—one of several areas of sexual development where knowledge and attitudes have changed markedly in the generation since I wrote. There I say (in full agreement with both Dr. Debiak and Steve Mitchell):

In the past fifteen years we have come to see homosexuality as an alternate developmental line rather than an area of pathology. … [T]he things I had to say about parental and environmental influence on gender identity and object choice, for example, heterosexual object choice and homosexual object choice, seem now to me to be relevant as partial contributions, but not to encompass the whole subject. …We are often confronted with the task of helping homosexual men or women with many aspects of their life aside from that of homosexual object choice. As with our heterosexual patients, the understanding of developmental object relations is central to that task.

Dr. Debiak’s experience gives me cause to rethink the questions of rewriting the book in light the fact that there is still no other book I know of on the psychodynamics of sexual development. Meanwhile, I hope this letter, and my apology for my earlier position, might offer small testimony to the fact that analysts, like any other breed, can be wrong—and also that we can grow to embrace better positions.

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LETTERS TO THE EDITOR: BOB LANE

Upon reading the obituary of Lois Barclay Murphy in the *American Psychologist*, I couldn’t help reliving my contacts with her. Robert Sommer of the University of California wrote the obituary and in his last paragraph he says,

This spare outline of education and achievements does not do justice to this remarkable, warm, compassionate person who, throughout her long life, had the gift of experiencing the world as the child felt and saw it: Lois Barclay Murphy, a pioneer in child psychology and a wonderful person passed away in Washington, D.C. from congestive heart failure, on December 24, 2003. Born in 1902, Lois was a centenarian, living 101 years.

Let me just add to what Robert Sommer had to say about Lois: What a wonderful first lady, hostess, and companion she was to Gardner! Visiting at their home with them was like taking a journey and discovering a new world and beautiful untouched territory. My original autobiographical essay (*Psychologist-Psychoanalyst*, Winter 2004) had contained a description by Lois of her husband, which I cut from the final draft. It was so accurate and reflected such sensitivity that it elicited shivers from those who knew Gardner and read it. Those who knew the Murphy couple were greatly influenced by both of them. Here’s how Lois described “Murph” (during an interview of Gardner by Larry Nyman, Lois entered the room, so Larry also interviewed her) (*Recollections*, Lawrence Nyman, pp. 7-8):

**Lois Murphy:** Wherever Gardner goes, a tiny plant, as it were, begins to shoot up and develop into something big and substantial. At Columbia, there wasn’t any social psychology program. He was doing two jobs there, really, running the undergraduate psychology, and the 15 or 20 Ph.D. theses, and then starting the social psychology, and so forth. Then going to City, where there was no independent Psychology Department. And then presto, change-o! there’s a sizable department, with a fascinating group of faculty; heterogeneous, with very different contributions to make and very different personalities.

Then when he went to the Menninger Foundation, the research department had consisted first of David Rapaport and his work and his training some psychologists; and then Escalona’s very important work with infants and a full staff of her own. That was it! Then Gardner goes to Menninger Foundation and a great big research building. This capacity is like the story of talking to, or blowing on a plant and seeing it grow in front of your eyes.

**Larry Nyman:** I was trying to get Gardner to give me the formula for that kind of success. But I couldn’t get it out of him.

**Lois Murphy:** I think that it is a quality that people have sometimes teasingly referred to as his being an enthusiast. Another thing that has always interested me is—as committed a psychologist, and committed a teacher as he is, he never developed a school—and didn’t want to, didn’t have any drive to develop a Gardner Murphy school, like the Kurt Lewin school. You know, a lot of our friends were developing this and that school. Not Gardner. What was he doing? He was nurturing individuals. A student comes into his office with an idea and Gardner immediately gets excited about it, fires the student with enthusiasm about it, and then the student gets to be an outstanding psychologist. This happened at Columbia, it happened at City College, and the Menninger Foundation, too. I think it’s not pushing; it’s really, you can say, a quality of loving.

He has a feel for very different kinds of people as students. Gardner appreciates the individual qualities of each person and their individual ideas, and gives each one whatever kind of support that a person needs, e.g., “fine, go ahead with that.” And then not bothering him too much, you know, giving him his lead. With others, taking them by the hand, but always with this quality of, I can only say, loving appreciation. I think that it’s a rare quality that’s involved in people continuing to be nourished by it. For instance, since coming here to George Washington, I’ve known some of his students. And one of them said to me, “You know, all through high school and through undergraduate college, school was boring, I know I had to go get ready for something that I was going to do later, but I just wasn’t excited about anything—until I got into Gardner Murphy’s class and then I began to see the light and saw exciting possibilities.” I think that this is back of that survey that you probably run into, asking, “Who was most important in influencing you to go into psychology?” And Gardner was mentioned by more people, except those who mentioned Freud.

Robert C. Lane, Ph.D., ABPP
Clinical Professor of Psychology
Nova Southeastern University

(Although she was not a member of the Division, Lois Barclay Murphy was a psychoanalytic psychologist who made important contributions in the area of child development, personality and projective techniques, and was the recipient of the G. Stanley Hall Award in 1981. Additional information about Dr. Murphy is available on several websites, including an appreciation of her work by Nancy Chodorow at http://www.webster.edu/~woolflm/murphy.html. The editor.)
PSYCHOANALYTIC PROFILES: ESTHER MENAKER

To write of Esther Menaker’s life (1907-2003) and contributions, I am reminded of Robert Jay Lifton’s comments on Erik Erikson. Lifton saw Erikson’s creativity as centrally related to his being on the margin of American psychoanalysis. Although highly esteemed by many and a member of the American Psychoanalytic Association, Erikson was not fully accepted. The same can be said of Esther Menaker. Esther Menaker died on August 20, 2003, just two weeks short of her 96th birthday. On April 12, 2003, she was given a Vision Award by the National Association for the Advancement of Psychoanalysis for outstanding achievement as a psychoanalyst. Helped to the dais, she gave a stirring talk on what it means to be a psychoanalytic maverick. What have been her achievements and in what way has she been a creative maverick?

Esther and her late husband, William, went for four years of training at the Vienna Psychoanalytic Institute in 1930 (two of the only Americans to complete the four years at that time), and also received a Ph.D. in psychology at Vienna University. She was one of the first American women to be trained as a psychoanalyst, and one of the few then to have a professional career and a family. The Menakers returned to New York City, and were refused admission to the New York Psychoanalytic Society, which they had been promised, because policy had changed to only admit physicians. Nor were they made members of the International Psychoanalytic Association. This was a blessing in disguise. They had to make their own way on the margin for many years without being part of a psychoanalytic establishment. It demanded courage and resourcefulness, but they were actually much freer to go their own way in their thinking and to forge their own unique psychoanalytic identities.

Perhaps it was only as a couple that they were able to do this. The Menakers, along with Theodor Reik and Erich Fromm, became the most important figures in New York City from the late 1930s on to train non-medical or what I prefer to call, multi-discipline psychoanalysts. Quite a roster of recognized current-day and deceased psychoanalysts were supervisees, analysands, or seminar students of theirs. To name just a few: Martin Bergmann, Ruth-Jean Eisenbud, RoseMarie Perez Foster, Mark Grunes, Helen Bloch Lewis, and Edmund Weil. In the 1950s they became central figures at the New York University Clinical Psychology Program and played a major role in the formation of the Postdoctoral Program in Psychoanalysis and Psychotherapy.

As psychologists/psychoanalysts went from being on the margin to gradually building an important establishment of their own within Division 39, Esther again experienced being on the margin. The NYU program changed from being one that freely exposed students to a number of different psychoanalytic perspectives, in full accord with the Menakers’ vision, to a track system where a student is primarily a traditional Freudian, or an interpersonalist, or now a relational psychoanalyst. Esther eventually resigned from the Freudian track as she was not a traditional Freudian, and she was invited to join the interpersonal track. But she wasn’t really that either. Esteemed and honored with important awards, by Division 39 included, she was once again on the margin. In her subsequent teaching, supervising, and analyzing of students at the National Psychological Association for Psychoanalysis, with its multimodel Freudian orientation, and then at the Training and Research Institute for Self Psychology, she had chosen to be at psychoanalytic institutes more on the margin than centrally located in the medical or psychological psychoanalytic establishments. And once again her creativity flourished: she published two books at age 88.

Three things are striking about Esther Menaker’s 45 plus papers and six books. The first is the fluidity and clarity of her writing, even when dealing with complex conceptual discussions. In a field not always known for its felicity of expression, this is no small accomplishment. Even more striking is that she had evolved a broad philosophy and psychology of life that permeates her thinking on many different levels: the conceptual, the therapeutic, and the everyday. It is a broad vision of the human condition in which growth, evolution, self-creation, and affirmation predominate. The third is that over 80% of her articles and books were written and published after she was sixty.

Her first published paper in 1942, “Masochistic Factors in the Psychoanalytic Situation,” is the first one in Freudian psychoanalysis to assert that the psychoanalytic relationship is not only transference but also develops on the reality of the interactions between two people with their own personalities, thus anticipating the current formulations of intersubjectivity. In another important paper on masochism in 1953, “Masochism as a Defense Reaction of the Ego,” she focuses on the preoedipal relationship with the mother, and on masochism being driven by primary considerations of the ego rather than the pleasure principle and guilt. In her situating masochism in a particular kind of unloving, tenuous early object relationship, she again anticipated much of the contemporary interest in early object relations.

While incorporating basic psychoanalytic thinking and inquiry, the Menakers expanded it immeasurably in their book, Ego in Evolution (1965), in which they developed a viewpoint of an ego with muscle, evolving in a
life-long striving for autonomy and differentiation, to new levels of individuation, integration, and complexity with its attendant anxiety and guilt; toward self-creation and self-realization of inner potentials, an ego profoundly related to the will and to the human spirit; and an ego integrally related to the sociocultural world of values, social relationships, and social change in a dialectical interaction in which each influences the other; an ego profoundly related to American society with its more open opportunities for growth, change, mobility, and choice than most other societies, as well as to the rapid social change of the 1960s and ‘70s that spawned the Women’s Movement.

Esther Menaker wrote a number of papers in the 1960s and the first half of the 1970s on the evolving ego as being intrinsically related to identification and the internalization process. She differentiated her position from the classical one in viewing identifications as major building blocks for the growing, developing ego, ego-ideal, and superego integrally related to values, cultural continuity, and social change rather than being defensively motivated by anxiety or compensatory for loss as in the classical formulations. These papers appeared in a book edited by Leila Lerner in 1979, _Masoichism and the Emerging Ego._

Dr. Menaker then turned to a more comprehensive consideration of Otto Rank, who had earlier influenced both William and her, and with whom she deeply resonated. For the psychoanalytic community in New York City, she almost single-handedly rescued Rank from oblivion in _Otto Rank: A Rediscovered Legacy_ in 1982, making his thinking accessible, clinically and theoretically relevant. She was then invited to present her work on Rank at a number of meetings in the 1980s, these papers being published in a book edited by Claude Barbre in 1996 in _Separation, Will, and Creativity._

In line with her own philosophy of life, Esther Menaker expanded her horizons after the 1970s by resonating with Kohut’s formulations of self psychology and the affirming nature of selfobject relationships, integrating self psychology with her earlier work on masochism and later work on Rank. Gems of this integration are chapters in a book that Claude Barbre edited in 1995, _The Freedom to Inquire._

Then there is the personal side to Esther’s writing. This includes a memoir involving her experience of psychoanalytic training in Vienna and her analysis with Anna Freud in _Appointment in Vienna,_ 1989. At 95, Esther had completed revising a book manuscript, a memoir from her own childhood and adolescent experiences, “The Secret and the Shame: Growing Up in the Shadow of a Terrorist,” about a noted and notorious uncle who was a double agent in the Czarist government in the early decades of the 20th century.

One of her colleagues, Jeffrey Rubin, commented on Esther’s gift for inspiring others with her love of life and psychoanalysis:

I first met Esther Menaker at a friend’s book party… I was struck by her open spirit, her passion for ideas, her breadth of interests, and her capacity to laugh. Subsequent meetings… deepened by initial impressions. Each time we spoke an intellectual spark was ignited and an emotional or intellectual doorway was opened… Esther is a rare and vanishing breed, a psychoanalytic humanist… I have been touched and inspired by Esther’s interest in culture as well as the consulting room, her love of questions no less than answers, and her belief in the wisdom of the visionary.

Esther Menaker’s life was productive to the very end, seeing a few patients and supervisees, and writing and revising. It was a remarkable journey of important contributions, of creating and being herself, of careful inquiry, and of thinking freely.
THE LAWSUIT IN RETROSPECT

This article, and the following one by Harold Davis, is the first of a series of contributions to the newsletter as part of the 25th anniversary of Division 39. Many of you have read History of the Division of Psychoanalysis (Hillsdale, NJ: Lawrence Earlbaum and Associates, 1994), edited by Bob Lane and Murray Meisels. This series of articles represents an update of that history and a reminder of the contributions of our colleagues to the development of psychoanalytic psychology. The editor.

On March 1, 1985 four psychologists filed a class action anti-trust lawsuit against the American Psychoanalytic Association (the “American”), the International Psychoanalytic Association (IPA), and two affiliate institutes of the American. The essence of the lawsuit was that the defendants had blocked psychologists from practicing psychoanalysis in ways that were in violation of the Federal anti-trust laws.

The lawsuit alleged that the American was restricting the practice of psychoanalysis by refusing to let psychologists train in the American’s institutes, refusing to let psychologists hire members of the American to teach in institutes the psychologists tried to set up, and denying access to the International Psychoanalytic Association for the small number of psychologist institutes that did exist (all but one in New York City) effectively cutting them off from the world community of psychoanalysis.

Three years later, after substantial litigation and after the plaintiffs won a critical summary judgment motion holding that their lawsuit had sufficient legal merit to go to a jury, the lawsuit was settled with the defendants agreeing to end their restrictive practices and to pay the plaintiffs’ attorney fees.

Today, there is widespread agreement that the lawsuit played a significant and constructive role in the evolution of psychoanalysis over the last twenty years. The contribution of psychologists and social workers (who were also given access to psychoanalytic training by the lawsuit) to psychoanalysis is now beyond question, and most recognize that, but for the supply of psychologists and social workers, psychoanalysis would be moribund.

Over the last twenty years I have been asked on several occasions to write a summary of the lawsuit from my perspective. I have especially appreciated Bob Wallerstein’s entreaties to do so. Dr. Wallerstein played a constructive role throughout the lawsuit as president of the IPA and has written the definitive book on the history of lay analysis within psychoanalysis. While he has made an obviously good faith attempt, to describe the lawsuit, as part of that good faith effort, he has acknowledged the impossibility of doing so without input from the plaintiffs’ perspective. Hopefully, this article and a similar one I co-authored with Nathan Stockhamer for JAPA will help fill that void.

For young psychologist-psychoanalysts today, given the present opportunities for analytic training, it is hard to appreciate what a different landscape it was in 1985. At that time, outside of New York City there was only one very small institute (in Los Angeles) that provided training for psychologists. Not only were psychologists ineligible for admission to institutes of the American, even psychologists interested in setting up their own institutes were not able to hire trained analysts because of the de facto restrictions of the American on where analysts could teach.

In addition, even those psychologist institutes that existed in New York had a hard time gaining stature and recognition. They were, of course, excluded from the American. However, the American had also secured an agreement from the IPA not to admit any entity from North America without the approval of the American. Thus, despite the fact that psychologists and other non-physician providers were routinely practicing psychoanalysis around the world and participating in the IPA, highly trained psychologists from America were excluded from the world community of analysts.

Psychoanalysis suffered greatly from the restrictive policies of the American. Freud’s genius was in showing us that we all shape our personal “reality” in accordance with our individual wishes and our experience. Thus, in analysis we all approach the object of our investigation with a tool that is inherently and idiosyncratically distorted. While the training analysis is an important attempt to reduce the effect of these distortions, to claim more than a comparatively modest improvement in this area is simply unwarranted and misses what is at once both the most fascinating and the most daunting aspect of analysis, to wit, the infinite complexity and multifaceted nature of the human mind. A good training analysis should be a humbling experience undercutting dogma and narrow-mindedness. It should include a recognition that as individuals each of us is limited in our capacity to perceive reality.

Because of the inherent limitations we confront in seeing ourselves, psychoanalysis as an institution desperately requires organizational pluralism. Individuals with different backgrounds and training experiences add important new perspective.

Psychoanalytic organizational pluralism requires at a minimum taking advantage of the diverse perspectives that non-physician mental health professionals such as well-trained psychologists and social workers can provide. This is not to denigrate or trivialize the significance of medical
training. To the contrary; the question is not which training is superior. Medical training is unarguably a powerful formative educational experience.

Given the nature of the psychoanalytic enterprise, however, this profound influence of medical training has a yin-yang character. Medical training opens certain vistas to the physician analyst, but, at the same time, it inevitably preempts awareness of other potential vistas. Thus, while one’s access to the workings of the mind is, to some extent aided so, too, is it limited by one’s life experiences and training. This is true with all other professions as well. It is an inherent aspect of the human experience from a psychoanalytic perspective.

The point is that if the enterprise depends upon multiple awarenesses, as psychoanalysis surely does, then psychoanalysis simply cannot be left in the hands of any one profession without limiting its growth and ultimately stultifying it. Psychologists and other trained mental health professionals, as most institutes would now agree, provide the benefit of bright, highly trained individuals who are able to look at psychoanalysis through diverse filters. The presence of multiple different realities, each adding and protecting the significance of their experience, is a critical check and balance on premature closure on psychoanalytic “truth”. The essential state of consciousness for psychoanalytic work, free association, requires such a mindset.

The problem of premature foreclosure has been a costly component at the heart of the American’s excessive reliance on unwarranted orthodoxy. One simply needs to look at the analytic genius that was marginalized in this country by the once orthodox attitudes of the American. Winnicott, Klein, and Sullivan stand out. But those are just the individuals whose work survived the ostracism of their colleagues. What work was stillborn or never bore fruit of any kind is a loss that is very hard to measure.

The problem was hardly limited to the exclusion of a handful of creative geniuses. Many talented and creative potential analysts were lost. In the late 1960s and early 70s there was an explosion of interest in clinical psychology on college campuses. The events of the 60s produced a marked increase in introspection. Psychology was the academic vehicle for that self-searching and the concomitant attempt to understand human nature. As a result, doctoral programs in clinical psychology that were already competitive became extremely so. It was not uncommon for graduate programs to have eight hundred or more applications for entering classes that numbered ten or twelve students in size.

Students who were intellectually gifted and interested in introspection inevitably turned to psychoanalysis. Neither of the more traditional areas of psychological

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thought, behaviorism or humanistic psychology (for different reasons) was satisfying.

Even within the American Psychological Association few were aware that by the early 80s, psychoanalysis had become the fastest growing area of interest within the American Psychological Association. The recently trained cadre of psychologists interested in psychoanalysis represented an academic cream of the crop with extensive experience and training in treating mental illness.

Whatever merit may have existed in arguments advanced by the opponents of “lay analysis,” it was hard to see their relevance to the issue of training psychologists or clinical social workers. From the Plaintiffs’ perspective, the lawsuit was not a question of training lay analysts as the issue was debated during the first fifty years within the world psychoanalytic community. The most persuasive issue in opposition to training laypersons to practice psychoanalysis was the inherent relationship between psychoanalysis and health care. This included the need to understand mental illness and to have sufficient training to refer patients to other physicians as health care problems revealed themselves in a psychoanalytic treatment. It also emphasized the importance of the “physicianly attitude” that was central to caring for patients. Psychologists were already effectively performing those tasks with patients who were much sicker than typical analytic patients.

While most young psychologists soon learned of the exclusionary policies of the American, there was always a proposal pending in the American to change the policy and a resulting sense that soon psychologists would be eligible to apply to local institutes. Hopes became quite high in 1982 and 1983 that change was imminent.

Three events dashed all such hope and precipitated the lawsuit. First, in December of 1983, according to the Newsletter of the American, Dr. Melvin Sabshin, medical director of the American Psychiatric Association, addressed the American. In commenting on the proposals for training non-physicians Dr. Sabshin advised the members to stick “close to their medical roots.” The Newsletter article characterized many members of the American as even feeling “threatened” by Dr. Sabshin’s comments. Second, in May of 1984, the Executive Committee of the American voted to table the proposals to train non-physicians. Third, in their Summer Newsletter, the American’s President, Ed Joseph, expressed his relief the issue had been put on the “back burner” and that “institutional resources” could be directed elsewhere. The matter was dead and deader than it had been in twenty years.

I had for some time considered the viability of an antitrust lawsuit using the restraint of trade aspects of the policies of the American as a legal club to open training opportunities for psychologists. During the late 70s and into the 1980s I was practicing clinical psychology in Chapel Hill, North Carolina where, despite the existence of a Duke-UNC Institute affiliated with the American, psychoanalytic training was unavailable to psychologists.

I had graduated from Harvard Law School shortly before enrolling in the clinical psychology program at UNC and was generally familiar with the anti-trust laws. My father was a city manager whom I greatly admired for his extremely constructive and compassionate use of the tools of government. He gave me a very comfortable sense that using the political-legal system for change was a high calling and, also, something that was very doable given perseverance and thoughtfulness.

In 1982 I had finished a term as president of the North Carolina Psychological Association in which I had led a successful battle to make North Carolina psychologists eligible for insurance reimbursement and had also established a differential dues for practitioners and academics to let N.C. practitioners build the kind of advocacy structure they needed without incurring the enmity of their academic colleagues.

In 1983 I was elected to the APA Board of Professional Affairs. I had two objectives. The first was to secure analytic training for psychologists and the second was to build an advocacy structure at the APA like I had in North Carolina.

As soon as I started to attend APA meetings I was, of course, drawn to other members of the psychoanalytic community with the hopes of establishing a sufficient political base to launch both an anti-trust suit and the advocacy structure (which later became the APA Practice Directorate).

The most fateful meeting for me without question was when I met Nathan Stockhamer, the clinical director of the William Alanson White Institute. Nat is, of course, one of the most respected psychologist analysts in the country. He is far more, however. He was to become the key catalyst to the lawsuit helping to legitimize the idea to senior psychologists in Division 39. Throughout the lawsuit he lent a very unselfish, wise and guiding hand to the effort. Without Nat’s contributions the lawsuit simply would not have gotten off the ground, let alone been successful. The gratitude psychoanalysis owes him cannot be overstated. Earlier this year when I wrote an article for JAPA describing in more detail Nat’s role in the lawsuit I was surprised to get a call from members of his own institute, who had not even been aware of what he had done!

The early days of the lawsuit planning were largely the work of Nat, myself, and Ernie Lawrence, a senior analyst from the psychology institute in Los Angeles who also had broad experience in APA and was able to bring his years of advocacy experience to the effort. The lawsuit obviously would require political leadership, organizational and financial support, legal talent, and “class representatives” i.e.,
Occasionally your adversaries inadvertently help you. In October of 1984, Dr. Janet Spence, then President of APA, received a letter from Edward Joseph the President of the American. He indicated that he had heard rumors that a group of psychologists was planning to sue the American and wondered if it would be possible to meet with the American Psychological Association to discuss this. His goal obviously was to do an end run around the Division and the lawsuit leaders.

Janet Spence was an academic psychology experimentalist with little interest in psychoanalysis. Ironically, I was invited to the meeting by Spence because I was, coincidentally, at the time the Chair of the APA Board of Professional Affairs. I, in turn, prevailed upon Dr. Spence that Nat Stockhamer, as the Clinical Director of the William Alanson White, was intimately familiar with both the issues involved and the psychoanalytic world in general. As such he was the logical third member. Accordingly we joined Dr. Spence to represent APA in the meeting attended by Dr. Joseph as President of the American, Richard Simons as President-elect, and Homer Curtis, Chair of the Board of Professional Standards.

Dr. Joseph opened the meeting by saying that when he learned of the planned lawsuit, he thought possibly “the President of the American Psychological Association had lost control of her ship.” For the three psychologists in attendance Dr. Joseph’s opening seemed like a transparent attempt to manipulate Dr. Spence and undercut the lawsuit. Shortly thereafter, Spence stood up and advised the group that Stockhamer and Welch would be speaking for APA on the issue and that she had to leave. Instead of undercutting the lawsuit, Dr. Joseph with his first utterances had provoked Dr. Spence into giving the lawsuit leaders the seeming imprimatur of the American Psychological Association. Dr. Spence became a stalwart ally of the lawsuit, frequently referring to the encounter with Dr. Joseph. Although the APA contributed very little financially to the lawsuit, with Dr. Spence’s support for it, our concerns about a rearguard action from within the Association never materialized.

The rest of the meeting was cordial. Dr. Joseph characterized his membership’s reaction to the matter of training as a “pocketbook issue.” At the end of the meeting Dr. Joseph invited us to come to the next meeting of the Executive Committee of the American. However, Joseph made clear that any discussion of our concerns was contingent upon the American’s EC having sufficient time left after completing their other work. This would not be known until the end of the meeting, so Dr. Stockhamer and I could come and wait outside the meeting to see if time was left for the American to meet with us.

When we processed the meeting, Dr. Stockhamer and I each concluded that it would be wishful thinking to believe that Dr. Joseph and the majority constituency he represented in the American were interested in the kind of change that we felt we needed to obtain psychoanalytic training for psychologists. Dr. Simon has recently written that he believes from an organizational perspective at the time that the American was paralyzed.3 We declined Dr. Joseph’s invitation with a follow-up letter after the meeting. We simply did not believe there would be changes until some of the members of the American who had opposed or been indifferent to the issue appreciated that there were forces at work that were not under their control. We still believe that was the correct assessment of the situation.

Nothing Ed Joseph did during this period provoked or affected the initiation of the lawsuit as some have speculated. He appeared to us to reflect the majority sentiment within the American and the organizational attitude that supported the restrictions.

If we felt initially we had to be cautious about the lawsuit with the American Psychological Association, we had no such problem with Division 39 and the myriad of young psychologists across the country who wanted psychoanalytic training. Very few psychologists interested in psychoanalysis, trained or untrained, had not experienced to some degree the effects of the American’s policies. The resentments ran very, very deep.

There were two groups who initially had reservations about the lawsuit. The first was a small but certainly vocal group, who felt that psychology should simply set up institutes without the teachers of the American. While there was some disagreement within Division 39 on this matter, the Plaintiffs believed that for most psychologists, the institutes and teachers of the American were the only viable training opportunities. Setting up institutes without any fac-
ulty in residence or even in proximity seemed unfeasible and irresponsible. There was considerable consensus, however, that if we could develop a sufficient cadre of qualified teachers to build our own institutes, participation in the affairs of the American and its institutes was not essential. Among psychologists, there was wide divergence on the question of whether it would be desirable to be part of the American.

The only other pocket of concern came from some of the psychologist division members who had become members of the American through research associate status. Needless to say, the lawsuit put these individuals in a difficult position. Some of them were extremely supportive of the lawsuit and made sizeable financial contributions to it from the beginning. Others were initially very dubious, but over the course of the lawsuit became quite supportive of it. A few others periodically approached Division 39 members either with efforts to persuade them to abandon the lawsuit or with information that seemed to us at the time to be rather transparent attempts to create divisions within the multiple constituencies that we were trying to hold together.

Throughout the lawsuit there were also concerns created by ongoing tensions within the Division itself. What would the implications of the lawsuit be for the Jungians in the Division, for example? All of these issues required the establishment of trust, which in turn required constant communication. Yet, on the whole, while it was very taxing at the time, in retrospect, the remarkable part of the political process from the plaintiffs’ perspective was just how well the “center held” throughout the lawsuit.

The major issue for the Division in deciding to pursue the lawsuit was not the desirability of the lawsuit, but simply whether we had a strong enough case to justify the time, effort, and expense it would certainly require. That was an issue on which the Plaintiffs simply never wavered.

The antitrust theory at the heart of the lawsuit was that by controlling the training programs across the country and membership in the IPA, to the exclusion of other potential entrants into the market place, the American was restricting commerce. There were a myriad of quotes in the minutes of the business meetings of the American explicitly asserting economic considerations as at least part of the rationale for the American’s policy. These were viewed as smoking guns by most of the antitrust experts with whom we consulted.

This was to be a class action suit. That meant that by controlling the training programs across the country and membership in the IPA, to the exclusion of other potential entrants into the market place, the American was restricting commerce. There were a myriad of quotes in the minutes of the business meetings of the American explicitly asserting economic considerations as at least part of the rationale for the American’s policy. These were viewed as smoking guns by most of the antitrust experts with whom we consulted.

This was to be a class action suit. That meant that there were common issues of law involving the “class members” that made it much more efficient for courts to try the matter in a forum in which the rights of all class members could become determined at once. Of course, the implication for the defendants was that if they lost they would be liable for damages for the thousands of class members not just the named plaintiffs. Because it was one central policy that affected all would-be applicants, certification as a class seemed highly probable to us.

The cost of the lawsuit we knew could be daunting, and we certainly had no illusions that the supporters of the restrictions within the American would fold without a considerable fight. Ultimately Division 39 was a major contributor to the lawsuit, but many individuals also made significant contributions. Fundraising was, of course, a constant headache for the Plaintiffs.

We spent considerable time selecting an attorney. We retained Clifford Stromberg of the Washington firm of Hogan and Hartson because of his background in antitrust law and mental health. We were always very pleased with Cliff’s work, demeanor, and character. The briefings and legal work by both Stromberg and Joel Klein, for the American, we viewed as superb. (Klein went on to represent the Justice Department in the Microsoft case for the Clinton Administration).

With organizational, legal and financial support in place, we needed to find appropriate “class representatives.” We wanted individuals who had strong academic credentials, who had been denied access to full analytic training by the American, and who were willing to be used as “cannon fodder” for a class action suit in which they not only stood to gain nothing financially but would inevitably be the target of acrimony from within the very same psychoanalytic community in which they resided and that they wished to join. (This, of course, assumed that the lawsuit would go well. If
it were to fail, they could also expect to be pariahs in some segments of the psychology community.) We did not foresee just how fortunate we would be in this regard. The four plaintiffs became a very tightly knit unit with strong bonds that were greatly fortified by their shared experience in what was a psychoanalytic analogue to a foxhole. Each encountered hostile treatment along the way.

Arnold Schneider at the time of the lawsuit had completed a post-doctoral program at Menninger and was practicing in Topeka. He had been unable to obtain psychoanalytic training. Psychologists who were at Menninger at the time have described the treatment Dr. Schneider received from many of the Menninger medical analysts after the filing of the lawsuit as old-fashioned “shunning.”

Helen Desmond had received partial training from the Los Angeles Institute but was blocked by the American in her effort to undertake control cases despite her experience and widely-recognized clinical skills. Married to a medical analyst who was extremely supportive of her, she, too, placed a great deal at risk in the lawsuit.

Toni Bernay had sought psychoanalytic training but been denied all access. She was active in Division 39 and the APA at the time of the lawsuit.

Personally, I was, of course, the subject of considerable “wild analysis” with ad hominen attacks. Friends in our home community who were in analysis at the time were told they would have to choose between continuing their analysis or continuing their relationships with me and my family.

With the critical elements in place, the legal complaint was filed on March 1, 1985. At the time, the Southern District of New York was the site of many class action suits, and we felt it was a favorable jurisdiction because of the quality of judges and their familiarity with anti-trust law. To ensure jurisdiction remaining there, the New York Psychoanalytic and Columbia Institutes were named as co-defendants.

There is no question that the existence of Division 39 was critical to the lawsuit. It provided the forum and some of the money. At the time, it was comprised largely of New York psychologists who had received training in the non-American institutes in the City. In addition, there was a rapidly growing component of (then) young psychologists from around the country who were psychoanalytic aspirants lacking training opportunities. Both of these groups had felt very strongly the effects of the policies of the American. The lawsuit had a highly unifying effect on the Division.

The first critical legal test for the lawsuit was the American’s motion for summary judgment. A summary judgment is a motion asking the court to dismiss the lawsuit because it is not legally meritorious. The Federal Court’s rejection of the American’s motion for summary judgment evoked an enormous sigh of relief for the Plaintiffs and the Division members. The critical words in the decision were, “Already the Plaintiffs have shown more than a hint of commercial motive” to the American’s actions excluding psychologists. With the Court’s decision, there was little question that our case would get to the jury and that the policies of the American could be changed by the outcome.

Early efforts at settlement were very ineffective. From the plaintiffs’ perspective, there was nothing offered by the American that remotely met our objectives, and promises of future reforms if the lawsuit were dismissed, of course, only exacerbated feelings of mistrust.

Dr. Wallerstein’s personal involvement in later efforts at settlement gave them a more constructive character. I had several phone discussions with him and with very little effort worked out the parameters of an agreement that would certainly have been successful in accomplishing our primary objectives: making both psychoanalytic training and membership in the IPA available to psychologists.

Dr. Wallerstein describes in his book an amicable and constructive meeting between the leadership of the American, Dr. Wallerstein and Dr. Weinschel from the IPA, and Dr. Stockhamer and me from the Plaintiffs. Dr. Wallerstein was somewhat critical of the Plaintiffs because subsequently the negotiations came to naught.

The meeting in question was both cordial and constructive in that for the first time there appeared to be a shared sense that all factions just might be honorable people dealing with a complex problem in good faith. This, of course, created a sense of good will and a sense that the matters could be amicably negotiated. From our perspective, at that point the meeting precipitously and prematurely adjourned. At the end of the meeting I was adamant that we should not adjourn but, instead, should work into the evening and, if necessary, stay over the next day to work out more specifics face-to-face with the benefit such direct contact could have, especially in the spirit of good feeling that had been generated in the meeting. As we recall it now, the Defendants had just attended organizational meetings and been through many days of meetings already. At any rate, the decision was made to adjourn and let the lawyers draft some language to which the other parties could react.

While it is unclear whether we could have done better with more time at that point, we could hardly have done worse than we ultimately did without the time. The problem was that in the legal realm, drafting and negotiating is, whether of necessity or not, almost always characterized by a familiar pattern. The first party stakes out a high demand that is inevitably followed by a minimal counter offer. The parties then crawl inch by inch to a “common ground.” One knows that the first draft is going to be a ceiling from which one negotiates downward. If the members of one party put what they will settle for in that initial draft, they will wind up with less. This, of course, runs the risk that one party or the
other will respond with a self-righteous “harrumph,” ending the negotiations. As it turned out, the Plaintiffs’ first draft was offensive to the American. As I remember it now, there was no counter offer, but my memory could certainly be wrong on this. Possibly we gave the terminal “harrumph”. In retrospect, we should have not permitted the process to unfold as it did but, instead, simply insisted on another meeting. Unfortunately at the time I had just moved my family to Washington D.C. and was building the APA Practice Directorate. Whether the matter could have been resolved at that time I am not sure. My inclination looking back on it is that it could not have.

At any rate, the process broke down, and none of us spoke to the other side apart from the communications through the attorneys. These subsequent communications only re-hardened attitudes.

The attorneys by now were focused on the upcoming class certification briefing. As mentioned above, the legal significance of the issue was that if certified as a class, the plaintiffs would then be speaking on behalf of several thousand “plaintiffs,” and the financial stakes would be amplified many times over. There is no question that we hoped it would have an _in terrorum_ effect on the American. In all honesty, however, it was little more than a tactic serving the primary objective of forcing an end to the restrictions on training. In fact, several Division 39 members with close ties to the American required repeated reassurance that the lawsuit would not lead to the destruction of the American.

Of course, to those of us who were feeling pummeled ourselves in the midst of the battle, this fear of “overkill” seemed like a longed for problem of riches we could deal with at some later point should it arise.

We do contend, however, that none of the Plaintiffs had any gratuitous wish to destroy the American. In fact, we all believed quite deeply in the importance of an institutional base for psychoanalysis. We had, after all, rejected arguments by some psychologists to the effect that we could get psychoanalytic training perfectly well without the American. Our hope was to make the American something that was, in our eyes, better.

How did the lawsuit come to the conclusion that it did? Ironically it was facilitated by the American’s brief opposing class certification. Shortly after learning of the lawsuit, the American instituted the “Gaskill procedure” to admit a limited number of psychologists and social workers to full training provided that they were processed through a special “waiver” review conducted by the American. We viewed this development both skeptically and positively. Skeptically, because it was highly burdensome and very limited. Positively, first because of the obvious possibility it might lead to real change. Second, and more importantly, because it would make it very hard for the American to argue in court that it was “not feasible” to train non-physicians in psychoanalysis, as many of the opponents of such training had alleged throughout the history of the American’s deliberations on the matter.

In the opening of the American’s brief, Joel Klein, trying to dispute our claim that the American was restricting...
training, cited the most recent year’s admission statistics for the American’s institutes. To me, they were mind-boggling. According to the brief, almost forty percent of the most recent entering classes across the country were psychologists and social workers. Twenty-nine percent were Gaskill waiver candidates and ten percent were CORST waivers. (CORST was the limited waiver procedure that had existed in the American for several decades to train a small cadre of researchers without medical degrees most of whom were psychologists.) Since in the entire prior history of the American there had been only about twenty CORST waivers granted, this was, indeed, a sea change!

I was initially annoyed at what seemed like a very disingenuous attempt to imply that these numbers had been typical of the American’s training with respect to members of the Plaintiff class. But at the same time, it seemed likely that when exposed in court, such a pretense would annoy the court when it saw just how unrepresentative the figures truly were.

Soon, however, what I had been viewing as an effort to deceive the Court also seemed to hold promise as a potential resolution to the lawsuit. For the Plaintiffs the issues had always pertained to training and membership in the IPA. Within the American, as we understood it, the primary issue was no longer whether it was feasible or desirable to train psychologists. Instead, it had become a question of self-determination, that is, the right of the American to decide for itself, without Court coercion, what its policies would be with respect to training. Now, if the American was declaring that under its policies thirty-nine percent of their entering class were psychologists or social workers and if it would legally commit to such a practice, for all practical purposes the training issue could be resolved.

With the American publicly declaring its own extant self-determined policy to be to train large numbers of non-physicians, a critical obstacle was possibly overcome. If the American could commit to this current pattern of training, the American could feel that it had maintained its principal of self-determination, and the Plaintiffs could have their training opportunities.

While the Gaskill procedure itself was viewed as an extraordinarily cumbersome process, it was as burdensome to the local institutes as it was to class members. It would either collapse of its own weight, with the effect that psychologists would be evaluated along the same line as other applicants or, if it did not, with a few classes of graduates we would have our own cadre of responsibly-trained teachers with whom we could open our own institutes. We felt it was the more likely scenario that the institutes of the American would see that the application procedures were unworkable, and they would fix the Gaskill in fairly short order. This, of course, is what happened.

The remaining issues we assumed would be quite easy to resolve. Based on our discussions with Dr. Wallerstein, we believed that he would be delighted with the resolution and that the IPA would quickly agree to full equality for psychologist institutes in the United States.

We also felt that the monetary issue would be easily resolved. The Plaintiffs were pledged not to seek any financial damages beyond the expenses of the litigation. As we understood it, the American’s liability policy had kicked in and, given the opinion of the court in the summary judgment motion, it was hard to believe the carrier would not agree to pay the legal expenses of the plaintiffs in return for getting out from under the possible threat of an expensive litigation that would be costly to defend and financially disastrous to lose.

Thus, the framework of the settlement was that the American commit to what it had characterized as its current behavior in its brief to the court, that the IPA admit psychologist institutes, and that the Defendants pay the legal expenses of the Plaintiffs.

When the plaintiff attorneys broached this proposal to Joel Klein, he was quite receptive as apparently were the representatives of the other Defendants. We heard rumors that the Columbia was resistant to the agreement, but the Columbia was largely irrelevant to our objectives since the lack of training opportunities that had necessitated the lawsuit existed not in New York but, ironically, everywhere else. If New York psychologist institutes could gain admission to the IPA and be part of the national and international psychoanalytic establishment, the Columbia was simply marginalizing itself; it would be cut off from the new resources that psychologists and social workers provided and would soon become an odd relic within the newly-emerging structure of the American.

The actual negotiation of the settlement document was complicated, but cordial. The central problem that all parties seemed to appreciate was that the concept of a quota was anathema to the American (and actually to the Plaintiffs as well.) On the other hand, the Plaintiffs were certainly not going to risk settling for illusory gains. As a result, what followed was an almost comical exchange of documents including “side letters” that clarified that the language did not mean the American was agreeing to a quota but that it did mean the American was agreeing not to “back off” from the representations made in the Klein brief. In short, it was not a “quota,” but it was some sort of “floor” with varying degrees of flex to it depending upon each individual’s readings of the lawyers’ language. The lawyers on both sides made excellent and constructive use of controlled ambiguity.

In the final analysis, both parties agreed that a quota system was not reflective of the type of admissions process under which psychoanalytic training should be conducted,
and yet at the same time, both parties respected the fact that the Plaintiff needed some legal teeth to any legal settlement. The ultimate settlement document and all of the accompanying side letters achieved that objective very well.

With respect to the American, the rest is history. In the immediate aftermath of the lawsuit, some medical analysts did gratuitously and vociferously insist that they “were going to do it anyway” (i.e., make the changes in the agreement irrespective of the lawsuit). But what is remarkable to us is how smoothly the implementation of the agreement proceeded and how lacking in contention it has been.

More importantly, we believe most Institutes of the American now appreciate fully the enormous contribution that psychologists and other non-physician mental health professionals play in the ongoing dialogue that is the evolution of psychoanalytic thought and psychoanalytic practice.

Ironically, the agreement with the IPA proved very problematic and quite painful for many psychologist-psychoanalysts. With Wallerstein’s term as President of the IPA at an end, he was succeeded by Joseph Sandler. I had read Dr. Sandler’s work and was quite sure the transition would not lead to any significant change in the posture of the IPA.

I was quite wrong. Under the Sandler presidency the IPA essentially retreated from what I believe was the obvious meaning of the settlement language and what I feel quite confident was what Bob Wallerstein had intended. Arbitrary standards were used to divide individual institutes by suggesting that certain training was acceptable on a member by member basis while other training was not.

We had one face-to-face meeting with Sandler and other representatives of the IPA. The night before the meeting with the IPA, I had debated the Reverend Jerry Falwell on CNN’s Crossfire on the issue of gay rights. When I returned home the next day after the IPA meeting I remember telling my wife that if I had to choose an analyst between Falwell and Sandler, I would take Falwell hands down!

The difficulties with the IPA were so pervasive that we had to establish an enforcement committee simply to focus on the IPA issues. Helen Desmond and Arnie Schneider did a commendable job of damage control. It was certainly an unexpected irony of the settlement that imple

mentation with the American went relatively smoothly while it was the IPA that proved problematic.

As for the plaintiffs, all graduated from psychoanalytic training. Dr. Desmond graduated from the Los Angeles Psychoanalytic Institute and has already served as President of the Institute. Dr. Schneider received his training from the New York Freudian Society, one of the first institutes admitted to the IPA under the terms of the lawsuit settlement agreement. He was also one of the first psychologists to be Board Certified in Psychoanalysis under the auspices of the American Board of Examiners of Psychology. Dr. Bernay trained at the Southern California and subsequently wrote a book on the role of women in politics. I established the APA Practice Directorate which I ran for several years and received a research associate degree from the Washington Psychoanalytic Institute.

Several of the institutes that had to deal with the IPA went through very difficult times and in at least one instance an institute established by psychologists was irreparably damaged by the new access psychologists had to the American’s institutes. The anguish that these developments reflected should not be overlooked. On the whole, however, the remarkable thing about the lawsuit, given how cumbersome such an enterprise is, was the ultimate precision with which it achieved its goals. The training institutes were fully opened and the IPA has now welcomed American psychologist-psychoanalysts to the world community of psychoanalysis.

I hope that the lawsuit has also played a catalytic role in the increased tolerance and openness that now seems to characterize the American. The lawsuit, in Bion’s phrase, did certainly “disturb the establishment.” It was, however, an establishment that needed to be disturbed if it was to survive.

Psychoanalysis is the liberation of subjective human experience. Orthodoxy and authoritarianism are its natural predators. At the same time it is a health profession that is subject to abuse and requires regulation and oversight. Psychoanalysis in America in the 1980s and for several decades before was rigidified by too much orthodoxy and too much authoritarianism. Hopefully, the lawsuit helped counteract that imbalance. Of course, it is hardly a final or definitive answer to the struggle for the appropriate balance between order and chaos in psychoanalysis. That struggle is Sisyphean in nature and will depend upon the wisdom of those who follow.

**Endnotes**


Bryant Welch is a clinical psychologist and attorney now residing in Hilton Head, SC. He is a research associate graduate of the Washington Psychoanalytic Institute and was the lead plaintiff in the antitrust lawsuit, Welch v. American Psychoanalytic Association et al. He established the APA Practice Directorate. He practices psychoanalytic treatment and represents psychologists on legal-ethical matters. He can be reached at 301-983-4344 or welchfirm@aol.com.
Section V: Psychologist Psychoanalyst Clinicians

Harold B. Davis, Ph.D., ABPP

Section V was born out of philosophical and political concerns. Before the current issues of the consortium, accreditation of psychoanalytic programs, ABPP in Psychoanalysis, and state licensing of psychoanalysis, the philosophical and political issues of what is psychoanalysis and who is a psychoanalyst were being debated within the division. An early expression of this debate was a qualifications committee, which sought to set some standards for psychologists as psychoanalysts. To some extent it was a forerunner of Section I. Section V was developed to give a place within the Division for people, originally primarily from the New York U. Postdoctoral Program, to express and seek out others whose interest in psychoanalysis reflected its philosophy. This was necessitated because of the development of Section I and its qualifications for membership, primarily the frequency per week issue, which precluded some but not all of the NYU graduates from belonging along with other psychoanalytically trained people.

The reason why all the accrediting groups mentioned above are outside of the Division is that all sections of a division are interest groups. Section I, in its definition as a practitioner group, has excluded some members of the Division who were trained as psychoanalysts. When one group of division members, holding certificates in psychoanalysis, are excluded from a section it develops its own. In part, the New York State licensing of psychoanalysis was pushed by those groups excluded from the Consortium. While the requirements for the New York state licensing law are not spelled out yet there is an indication that it may follow the ABPP model where people are recognized as psychoanalysts on the basis of their own orientation and its requirements and not necessarily solely on the definition of the consortium which the Division board has approved. Furthermore holders of the diploma in psychoanalysis from ABPP are likely to be grandfathered in when the law takes effect.

While there have always been division members who belong to both Section I and Section V, currently some of these joint members serve on the Section V board. With the development of the external accrediting groups, the original issue between the sections is no longer material. Indeed, we now have held a joint program at a Spring Meeting.

In addition to being a voice within the Division for a broader definition of psychoanalysis and its practice, Section V presents programs at the division conferences reflecting its philosophy. It also presents the Bernard N. Kalinkowitz Memorial Lecture, in honor of our founder.

Many years ago Section V broadened its horizons from the metropolitan New York City scene by setting aside places on its board for different areas of the country. In the more recent past the Section has further broadened its membership. Under the guidance of Henry Seiden and the late Morton Schillinger, the Section board has developed its own website (www.sectionfive.org), continuing education program (open to all Section V members free), introduced a biennial essay contests for division members and for students in addition to its previous functions.

The Section continues to represent psychoanalysis in its broadest sense. As we work with more difficult patients in a societal structure that challenges the work we do, the Section has addressed these issues in its programs.
24TH ANNUAL SPRING MEETING STEERING COMMITTEE

The Steering Committee is the main driving force for the Spring Meeting, working for two years to develop the theme of the program, soliciting speakers for keynote talks and Invited Panels, and coordinating with the Sections, Committees and Juried Presenters to schedule the events, including Board and Section Business Meetings. A tall order! This year’s committee was made up of its Co-chairs, Andrea Corn and Antonio Virsida. The other members were: John Auerbach, Debra Bader, Max Harris, Erica Hill, Emily Krestow, Marylou Lionells, Bill MacGillivray, Dorita Marina, Rosa Maria Rigol, and Arnie Schneider. Captured on this page are some of the committee members who attended the SEFAPP Reception.

Tony Virsida brought his passion and love of psychoanalysis to his role as Co-chair of the Meeting, and, as a founding member of the local chapter, SEFAPP, he clearly enjoyed hosting this event for our community. Andrea Corn was tireless throughout the year in attending to details great and small, fielding the countless little crises and showing great respect for the teamwork involved in bringing the meeting to fruition.

Hosts for the SEFAPP/SEFIPP Reception were Max Harris and Emily Krestow, who, in addition to their work with the Steering Committee, are officers in these respective organizations. They worked to “talk up” the Meeting among local chapter members, increasing awareness of the importance of involvement in the Division to help local groups thrive and grow. Other SEFAPP members, Debra Bader, Erica Hill, Dorita Marina, and Rosa Maria Rigol brought their diverse talents and interests to ably work on the Steering Committee.

The Steering Committee was far-flung in membership, with Arnie Schneider (with his wife, Constance Gross) from Clearwater, Florida, Marylou Lionells from New York, and Bill MacGillivray (with Andrea Corn) from Knoxville, Tennessee. Not pictured in John Auerbach, from Johnson City, Tennessee. John and Marylou ably organized the Proposal Review Committee; Bill coordinated Continuing Education.
SEFAPP-SEFIPP RECEPTION AT DIVISION 39 MEETING

Stan Moldawsky made an appearance, following a successful gig at a National Coalition fundraiser last year where he was dubbed “Curly” by the jazz musicians who ended up accompanying the not-so-shy Stan. Stan is a double threat musician as singer and pianist. Although Stan has played the Division reception route in the past, Nancy McWilliams solo performance was her debut, although she performs with her group, Three Blonde Chicks, in New Hope, PA. These bravura performances helped set the tone for the entire Spring Meeting, which we conceived as an event where both learning, collegial socializing and good fun would combine in the South Florida sunshine. These pictures only capture one small aspect of the 5-day event. Next year in New York, we will have the opportunity to mark the 25th anniversary of the Division and perhaps the party will be even bigger and better.
MORE COLLEAGUES ATTENDING THE RECEPTION

Among the guests attending, moving up and in a clockwise direction: Section II stalwarts, Richard Ruth and Diane Ehrensaft; Board members Dolores Morris and Laura Barbanel with Helen Silverman; Keynote Speaker for the Meeting, Otto Kernberg; Drew Westen; next year’s Keynote Speaker, Jay Greenberg, and, finally, I thought folks would like to see another picture of Nancy McWilliams. The Reception was well-attended but Bill MacGillivray, the self-appointed photographer for the event, could only take so many shots. Thanks to all the presenters and attendees who made this a successful event. Finally, thanks to Natalie Shear, who along with her staff, Tamara Shear and Johanna Beyer, made the event go as smoothly as it did.
SAVE THE DATES

Being and Becoming: 25 Years of Continuity and Change in Psychoanalytic Psychology

Keynote Speakers:
Jay Greenberg, Ph.D.
Adam Phillips, Ph.D.

April 13 – 17, 2005
The Waldorf Astoria
New York City

Join us in New York City for the Division’s Spring Meeting to honor our past while looking ahead to new directions in theory and practice. Psychoanalytic thinking and practice are no longer limited by a one- or two-person psychology. Over the last 25 years we have attempted to recognize and understand our own human complexity by embracing theories related to culture, ethnicity, literary critique and a broad spectrum of neuro-scientific thought. Our conference will address the ongoing engagement of psychoanalysis with this rich amalgam.

For Information see APA Division 39 Website or contact Conference Co-Chairs Anton H. Hart, Ph.D (212) 595-3704 / antonhartphd@alum.Vassar.edu OR Stefan R. Zicht, Psy.D (212) 580-7262 / srz2@rcn.com
Psychoanalysis on the Edge

24th Annual Spring Meeting, Miami Beach, March 18-21, 2004

Panel and Paper Summaries

Scientific Award for Psychoanalytic Research: Enrico Jones

Presenter: J. Stuart Ablon, PhD
Moderator: Maureen Murphy, PhD

In his presentation, A Tribute to Enrico Jones: Studying the Process of Change in Psychotherapy, Stuart Ablon highlighted the contributions Enrico E. Jones made to understanding psychoanalytic process that made him amongst the most significant psychoanalytic researchers in the last century. Dr. Jones’s research sought to answer the question of whether psychoanalytic constructs generally, and the nature of the analytic process specifically, can be formally studied using empirical methods. Dr. Ablon reviewed a study that presented an innovative methodology for identifying and assessing change process in psychoanalytic treatments. A panel of experienced psychoanalysts developed a prototype of an ideal psychoanalytic hour using the Psychotherapy Process Q-set (PQS). The prototype was then applied to verbatim transcripts of three archived treatment samples: psychoanalysis, long-term analytic therapies, and brief psychodynamic therapies. The degree to which these treatments fostered an analytic process as represented by the prototype was measured quantitatively. Analytic process, as defined by the expert-constructed prototype, was significantly more present in psychoanalysis than in the long-term analytic therapies and, in turn, analytic therapies also fostered significantly more of an analytic process than brief psychodynamic therapies. The results demonstrated that, given a system and descriptive language that does not represent a particular theoretical perspective, analysts can agree on a definition of analytic process, and that analytic process can be operationalized and quantitatively assessed. Specific differences in psychoanalytic process between the psychoanalyses and the long-term psychotherapies were also identified.

A second study presented demonstrated that despite this consensus about what identifies an analytic process, there is in fact not just one proper analytic process, but change processes that are unique to each analytic dyad. A quantitative case study illustrated how each analytic pair has a unique interaction pattern, and how these patterns are linked to therapy outcome. These dyad unique processes, which Dr. Jones termed “interaction structures” in his landmark book, Therapeutic Action: A Guide to Psychoanalytic Therapy (Rowman and Littlefield, 2000), are recurrent, mutually influencing patterns of interaction between analyst and analysand. Dr. Jones’s new theory of therapeutic action flowing from his empirical research suggests that the experience, recognition, and comprehension of the meaning of such repetitive interactions appear to be a fundamental component of therapeutic action. Dr. Jones’s bi-personal model bridges those theories of therapeutic action that focus on insight and self-understanding and those that emphasize the patient’s experience of the therapist.

J. Stuart Ablon

Stephen A. Mitchell Award: Papers are invited for the third annual Stephen A. Mitchell Award. Established by Psychoanalytic Psychology and the Board of the Division of Psychoanalysis, the award honors our esteemed colleague as well as a graduate student whose paper is deemed exemplary by a panel of judges, all journal editors and Division 39 members. The award includes a $500 cash prize, airfare and registration for the Division Spring Meeting, at which the paper will be read, and publication in Psychoanalytic Psychology. Deadline for submission is July 1, 2005, and presentation of the paper will be at the 2006 Spring Meeting in Philadelphia. Five printouts of the paper should be submitted to me according to the procedure for submission to Psychoanalytic Psychology and should include a cover letter indicating that the paper is being submitted for the Stephen A. Mitchell Award. Division members with academic affiliations, in particular, as well as all members are strongly encouraged to invite graduate students to submit papers. There are no restrictions as to topic or theoretical orientation, although the papers must be of a psychoanalytic nature. Manuscripts and questions should be addressed to the editor: Joseph Reppen, PhD, ABPP, Editor, Psychoanalytic Psychology, 211 East 70 Street, New York, NY 10021-5207, 212/288-7530 (voice), 212/628-8453 (fax), jreppen@datagram.com.

Deadline: July 1, 2005
Jonathan Slavin, in his Past-President Address, framed the question "what do people want?" in the context of personal agency. Dr. Slavin described the important moment in an individual’s development in which intersubjectivity emerges and the process of mutuality is experienced. In that moment, the person realizes for the first time that she is a differentiated self and can recognize her ability to impact others with her own wishes and power, as well as allow herself a degree of vulnerability when being impacted by others. However, in some cases, as elaborated in several vignettes, the primary caregiver may be limited in his or her ability for intersubjective connection and capacity to appropriately respond to the child’s needs of developing a sense of agency.

Dr. Slavin examined classical psychoanalytic perspectives on personal agency and its development, and proposed that an interactional and intersubjective dimension must be included in it. He proposed that while the development of agency occurs within an individual’s inner experience, the ability to develop it is a both one and two person process. The child’s ability to develop a sense of agency, and the elaboration of internal intrapsychic space that this entails, is dependent on the caregiver’s degree of recognition of the child’s needs. In situations where the parent is unable to acknowledge the child as separate and to be responsive to her agentic needs, the capacity to establish a sense of agency, and thus a true ability for intersubjectivity, is harmed, limiting the person’s development. The relational perspective, in this sense, adds a collaborative meaning to the development of intersubjectivity within the dyad, in contrast to earlier views that place primary emphasis on what must be provided by the caretaker.

Dr. Slavin applied these ideas to the clinical setting, where the interaction between the analyst and the patient affects the patient’s internal space. The patient, possibly for the first time, experiences and recognizes her own personal impact on the analyst, and thus is eventually able to repair the damaged sense of agency she internalized when her needs were unseen by the primary caretaker. The patient who recognizes her ability to impact the therapist and gain personal agency, will in turn allow others in her social world to have an impact on her. The analyst’s role, as envisioned by Dr. Slavin in this talk, is, like Winnicott’s "good enough" mother who learns who the infant is, to allow impact and foster a true interpersonal engagement, while remaining attuned to the patient’s needs for growth and development gained through the experience of newfound relational agency.

To illustrate his ideas, Slavin presented several vignettes, derived from treatment, social psychological experiments, and from life experiences of children and adults, individuals and groups alike. These illuminating anecdotes tell of a common need shared by many individuals, and bring to life in a clear and vivid way the main idea this paper explores: that earlier relational experiences have a significant effect on our ability to develop a sense of agency. Such experiences prevent individuals from recognizing their ability to impact others and be impacted by them. The result is a sense of thwarted agency, a sense of suffocated worth, that negatively affects other areas of life, especially the ability to form healthy relationships. It is in therapy that these individuals attempt to liberate themselves from this overpowering experience, to learn new avenues where they can relate to the analyst and to others, and to nourish a sense of personal worth and agency.

Dr. Slavin ended the paper in a call for psychology, and psychoanalysis within it, to further develop the mutual process by which both disciplines can contribute and enhance each other; in that way both disciplines will further enhance their own agency.

Nurit Weinstein-Carmeli
INVITED PANEL: PSYCHOANALYSIS AND AUTHORITY

**Presenters:** Morris Eagle, PhD  
Doris Silverman, PhD  
**Chair:** Arnold Schneider, PhD

The presentations for the panel *Psychoanalysis and Authority* were prepared by Morris Eagle (presented by John Auerbach in his absence) and Doris Silverman. The objectivity of the psychoanalyst, the complexity of the interactions between the analyst and analysand, the idiogenic styles (history, etc.) of varying analysts, among a myriad of other variables all have impact on the psychoanalytic process. How are we to understand these complexities within the concept of “Authority and Psychoanalysis”?

Dr. Eagle noted the presence of “unearned authority” (based on transference) initially assigned to the psychoanalyst being transformed into “earned (legitimate) authority.” He stated that this transformation is communicated through an attitude of analytic neutrality, i.e., “honesty, open mindedness, non-exploitiveness, reflections on one’s tone and intentions...” He goes on to point out that rather than neutrality referring to the “blank screen stance,” it is related to taking a “disinterested” position regarding how the patient want to live his or her life. Thus, a core value, or the core value underlying psychoanalytic work is “autonomy of choice,” i.e., “to remove impediments to the patient’s ability to make choices...for increased satisfaction and happiness.”

He completed his presentation discussing the crosscurrents of therapeutic effectiveness with one’s value system.

Doris Silverman’s paper, “Authority on the Cusp,” contrasts Freud’s Enlightenment orientation (“the analytic situation has always provided a rich source of testable hypotheses”) with Nietzsche’s postmodern influence (“depreciating objectivity and empirical data”) as each has shadowed psychoanalytic thinking. She highlighted the relevance of both perspectives and recommended that these two orientations—the deductive and the inductive—must be blended. Noting a myriad of philosophers and psychoanalysts, and blending research with postmodern views, she posited that while power and authority are linked (e.g., via transference), the postmodern approach reduces power and authority as we consider the limitations imposed by countertransference and subjectivity. Thus, while enlightenment values enhance our respect for authority, Freud cautioned us about our capacity to mold patients and underscored the patient’s need to develop his/her own individuality. Postmodernists recognize the analyst’s subjectivity and countertransference and, through exploration, this recognition allows us to reduce our authority in the patient’s life. Both positions will benefit us if we are able to combine them.

She concluded by pointing out the influence of suggestion on memory, suggestion and authority arriving from the way we linguistically frame interventions.

The presentations were followed by lively discussion among the audience.

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INVITED PANEL: ATTACHMENT AND TRAUMA

**Presenters:** Susan Coates, PhD  
Arietta Slade, PhD  
Stephen P. Seligman, DMH  
**Chair:** John S. Auerbach, PhD

The ways in which the parent-child attachment relationship and the parent’s own history of trauma mediate the expression of trauma in children were the main foci of the panel, *Attachment and Trauma.* Particularly stressed by the panel was the effect of parental reflective functioning on children’s capacity to metabolize and cope with traumatic experience. Panel chair John S. Auerbach, opened the proceedings by noting that *attachment and trauma* were terms with long psychoanalytic histories, trauma dating to the beginning of psychoanalysis and attachment being of more recent origin. He explained that the purpose of the panel was to explore the ways in which attachment and trauma interacted with and affected each other.

Susan Coates, then presented her paper, “Trauma and Resilience in a Two-Year-Old and a Three-Year-Old After September 11, 2001.” She presented an overview of the history of trauma in young children and illustrated, with 2 case vignettes, how a mother’s ability to reflect upon her child’s traumatic experience either mediates or moderates her child’s experience of trauma.

In the first case, a mother with a history of unresolved trauma was strolling her 2-year-old daughter, Abbey, in the plaza between the Twin Towers when the first plane hit. Ms. A thought it was a nuclear attack and the end of the world. She was so traumatized that she remained unaware of her child’s traumatization for nearly 5 months after the attack despite Abbey’s recurrent nightmares and night terrors. In 2 sessions, one with the mother and one with mother and daughter, Ms. A became able to recognize and acknowledge her daughter’s experience. Dr. Coates described how Abbey, in the middle of her first session, began to build towers with blocks, building them higher and higher until they fell down. Abbey closely monitored
Coates’s face and must have registered Coates’s uneasiness about what she was doing because Coates was worried that she might retraumatize herself. She looked startled when the blocks fell down and looked at Coates to check her reaction. Coates said, with a little smile on her face, “Boom, they fell down.” In a pause in which she seemed to not know what to do, Coates said, “Shall we build them up again?” She built them for Abbey 2 more times, and then Abbey looked them over and began building them up and pushing them down with great glee. Mrs. A could not believe that her daughter remembered September 11 and could not bear the noise of the blocks falling because it gave her flashbacks. Coates helped the mother to take over the role of participating in her daughter’s traumatic reparative play. After this session, Abbey’s symptoms rapidly remitted. In only 2 sessions, her mother became able to take on a reflective stance in relation to Abbey’s experience and began to understand Abbey’s experience in a new way.

The case of Abbey was compared to that of a 3-year-old whose father was killed in the Twin Towers. Despite this traumatic loss, the mother, Mrs. P, was able to keep her children’s experience in mind and as a result her children remained symptom free. Coates concluded by noting that attachment research teaches that one of the most important factors in protecting a child in the face of trauma is a parent’s ongoing attempt to understand the child’s experience—the parental capacity for reflective functioning. She stated that the presence of this capacity in parents serves as a containing function when children are faced directly with a traumatic experience, and when there is trauma in the parent’s own history, it is protective in preventing the intergenerational transfer of trauma.

The first discussant was Arietta Slade, whose talk was entitled, “Attachment, Trauma, and the Reflective Self.” Dr. Slade focused on Coates’s paper from the perspective of reflective functioning. She discussed first how a mother’s capacity to keep the child in mind can become disabled in instances of trauma. She remarked that Coates’s case material demonstrated vividly that, when a trauma is reevoked in a parent, who must absorb the trauma and protect the child from its impact, there are often, sadly, two victims. Children whose mothers are undone by trauma are faced with intolerable and unmetabolizable feelings and with a level of stimulation and chaos that is unfathomable and profoundly dysregulating. Children whose mothers are able to manage and regulate trauma adequately do well enough. She therefore noted that Coates’s paper illustrates how the caregiver is both the mediator and the moderator of trauma.

Slade then turned to the question of situations in which either the child himself or herself or the act of nurturing reevokes past trauma in the mother, such that the mother herself becomes a traumatizing agent. In these instances, the child is without protection, and there can be no effective mediation or moderation; the child is trapped in the despair of seeking care from someone who is also terrifying to him. This, as attachment researchers have so clearly demonstrated, is the source of profound disruption and disorganization in children. Slade presented case material from Minding the Baby, a mother-infant intervention program recently developed at the Yale Child Study Center to enhance reflective functioning in first-time mothers. She discussed the treatment of a multiply traumatized young teenage mother and described how she became less traumatizing and more reflective in relation to her infant over the course of her work in the program.

The second discussant was Stephen P. Seligman, whose presentation was entitled, “Issues of Attachment and Trauma in Young Children in Acute Distress.” Dr. Seligman began by noting that the contrast between the 2 cases presented by Coates highlighted the extent to which social events cannot be understood in themselves but are mediated by the family and personality context in which they are experienced. This is especially obvious, he said, in regard to children. Even something as decisive as the September 11 events took on very different meanings for the two girls as they were mediated by their mothers’ characters and resources.

Second, he described Coates’s paper as part of the very extensive tradition of the analytic–clinical study of trauma, based on case studies of pathological outcomes. These case studies lead to important generalizations about the effects of trauma, including measures to obviate some of its effects. Seligman found Coates’s discussion of these issues to be sophisticated and useful, although he also expressed concern that the use of the clinical infant nosology, even in an analytic context, can often be overly schematic and simplified.

In discussing the 2 cases, Seligman noted the importance of the child’s taking on an active approach to the traumatic experience, with special reference to Coates’s elegant way of moving back and forth between passive and active positions in her work with Abbey. Play, he noted, was especially important in allowing such processes to proceed. In addition, he focused on the special nonpsychotic disturbance of the reality sense that often follows the traumatic experience, and like Slade, he discussed how the related interplay of recognition, reflection, symbolization and dialogue in both cases allowed for repair, following the traumatic events.

John S. Auerbach
In his paper, “Racial Consciousness and the Psychodynamics of a Hate Crime,” Dr. Ainslie presented his understanding of how it is that John William King became the central figure in the murder of James Byrd. Byrd was a 46-year-old African American who was dragged to his death behind a pickup truck in Jasper, Texas in the summer of 1998. King and one of his co-conspirators had been members of a white supremacist prison gang. Issues of racial consciousness and ethnic identity were a crucial component of King’s emotional life, in part because they had specific meaning in relation to his adoption as an infant, a fact that, unconsciously, played into King’s fascination with genealogy and related elements of white supremacist ideology. While endeavoring not to reduce a complex, unspeakable act to simple psychoanalytic formulations, psychoanalysis nevertheless provides us with a lens that is unusually suited to conceptualizing the life and the struggles of this East Texas man and illuminating important aspects of this heinous crime.

Dr. Perez-Foster’s paper, “When Immigration is Trauma,” outlined current global migration trends and emphasized the multiple points around migration per se that can constitute potential traumatogenic experience incurred from violence, kidnapping, significant loss, continued deprivation and oppressive treatment in the host country, etc. These experiences are recognized in the international mental health literature as occurring at multiple points in transit: pre-migration (e.g., incarceration, torture, war, natural/industrial disaster); during transit (death at sea, etc.); in resettlement camps/detention centers (mistreatment, fear of repatriation); upon arrival to host country (continued, chronic poverty, oppression by host, etc.). These experiences, especially for poor, disenfranchised and/or undocumented groups tend to be hidden/obfuscated in a clinical situation. The North American clinician who has little idea of political/historical events in a patient’s country of origin and often prefers to stay “unknowing” about these event and, as a result, often colludes with perpetuation of these situations. A case vignette was included of a Haitian boy from the U.S. with memories of violent experiences from military police in his country. The report emphasized how all this was enacted in his current functioning and how it was taken up in a therapy that also involved his mother who had been in the U.S. while her son was being traumatized.

In “M(othering The Other In the Mirror,” Dr. White asked: Is it ever possible to conduct psychoanalytically ori-ented psychotherapy within the context of a public agency? What does an analyst do when the immediate demands of the agency conflict with what she has established to be the needs of her patient? How does an analyst negotiate inevitable conflicts incurred in the therapeutic relationship itself, as a function of being, with her patient, embedded in the culture of a public agency? These, and other questions, were raised and addressed in this paper. The author traced her journey with her patient, a severely traumatized, pregnant teen, a ward of the state, who was depressed, who hid her psychic vision from the turmoil of the visible world, and who shirked from verbal contact with others. The patient’s mother, blind and depressed, refused interaction with her infant daughter, who was left in the care of a nearly blind father. He abused his daughter sexually and verbally. She learned early on to regard any fragmentary images of self as constituting a frightening and hateful “other” and refused to catch sight of her own image, even in a mirror.

Both patient and analyst faced the dilemma of negotiating a working relationship in which the patient might safely relax her guard and embark on the road to discovering a more positive self-concept. The psychic struggles between patient and analyst were presented, not without frequent allusions to the intrusive, larger structure of the agency by which the analyst was hired and which served as the patient’s legal guardian. In fact, the reader was given clear view of the analyst’s struggle to maintain loyalty to her patient, while negotiating a different relationship with this agency. As the analyst “parented “ the patient, she helped the patient learn to nurture herself. And as the patient “mothered” the unloved mirror self, she learned the art of parenting her infant.

The analyst took the audience through a series of steps developed to help prepare this adolescent for the difficult task of parenting her child, even as the agency had deemed her incapable of negotiating this successfully. The patient was given custody of her baby, and placed in a supportive living situation, where modeling and discussions were used to engage and to teach her.

In his discussion, Dr. Altman spoke of how each author, in taking on these clinical and societal issues, had to dispense with purist notions of what constitutes a psychoanalytic method, becoming flexible theoretically and technically in the interest of giving priority to the patient or the social problem at hand, rather than to the maintenance of an elitist notion of psychoanalysis. He spoke of psychoanalysis as a tool that may be useful in an urgent project, such as responding to an individual’s distress or addressing suffering in the social world. He argued that the usefulness of psychoanalysis lies, in part, in getting a handle on the impulse to turn away from the type of painful human situations presented in the three papers.

Neil Altman
SECTION I PANEL: IS THE UNCONSCIOUS CULTURE BOUND?

Chair: Mary Beth M. Cresci, PhD, ABPP  
Presenters: Albert J. Brok, PhD  
Allan Frosch, PhD  
Discussant: Mary Beth M. Cresci, PhD, ABPP

The Section I panel took as its starting points the theme of the Division 39 meeting in Miami, Psychoanalysis at the Edge: The Transmission of Culture, Class and Institution, and the interest of Section I members in depth psychology. Our topic was to consider the interface between culture and the unconscious. Our two presenters approached this topic from different perspectives.

Dr. Brok, in “Whose Internal World Is It, Anyway?” discussed his work with analysands who are bicultural and bilingual, as Dr. Brok is himself. Although he sees unconscious processes as being universal, Dr. Brok postulates that the content of the unconscious can vary depending on one’s cultural background. In particular he noted how psychic reality when enmeshed with perceived and internalized cultural reality can influence memory. He gave the clinical example of a patient whose dreams reflected not only an oedipal rivalry with his father but also demonstrated how the patient’s internalized concepts of his original South American geographical location (on the bottom of world maps) symbolically manifested themselves in the way he emotionally organized and located himself in his current life. Dr. Brok also discussed the ways in which choice of language (mother tongue vs. second language) can serve purposes of defense. Transference dimensions of the analysand’s resistance to recognizing Dr. Brok’s similar cultural and linguistic background were also explored.

In his paper, “The Culture of Psychoanalysis and the Concept of Analyzability,” Dr. Frosch considered the topic of psychoanalysis as a cultural milieu. He suggested that Freud’s own unconscious processes had influenced him in setting the standards for psychoanalytic treatment. Dr. Frosch discussed Freud’s case of Dora and his thinking in Beyond the Pleasure Principle in order to highlight some of the conclusions re criteria for analyzability that Freud drew from his clinical experiences. He contrasted some of Freud’s ideas about analyzability with a presentation of an analytic candidate who worked with a young woman of a different culture from her own. This analyst was more accepting of her analysand and was able to work with the analysand for a substantial period with a good result. Dr. Frosch suggests that we are expanding the culture of psychoanalytic analyzability beyond the bounds established by Freud.

Dr. Cresci discussed the common issues in these papers as well as their distinctive points. She considered the obvious advantages and less apparent disadvantages of sharing cultures and multiple languages with an analysand. We assume that the analyst’s understanding of the analysand will be facilitated when there is a common background. However, there may also be a tendency to accept cultural explanations for the analysand’s difficulties rather than to explore the intrapsychic aspects. Dr. Brok’s clinical examples emphasized the importance of investigating both avenues. In reviewing Dr. Frosch’s presentation, Dr. Cresci explored other ways in which Freud’s unique personality had influenced the various aspects of psychoanalytic technique. She suggested that our expansion of the definition of analyzability is the result of our greater collective experience building on Freud’s work. However, we also have to consider how current economic and cultural pressures may be affecting us as analysts. It remains to be seen how the culture of psychoanalysis will affect and be affected by the general culture in which we work.

SECTION VII PANEL: CULTURE, PSYCHOANALYSIS AND GROUP

Chair/Discussant: Albert J. Brok, PhD  
Presenters: Andrew Eig, PhD  
Christine Kieffer, PhD  
Susan Kavaler-Adler, PhD


Dr. Kieffer’s paper was an innovative attempt to integrate dynamic systems theory principles with the concept of “thirdness” with respect to therapeutic action in group treatment. As part of this process Dr. Kieffer focused on the systems principle of “emergence” which she describes as a non-linear phenomenon propaedeutic towards, and underlying the sense of, an “analytic third,” which she further relates to the notions of mutual intersubjective recognition developed by Jessica Benjamin, the cul-
The next big question that Westen said was important for case formulation is, “What psychological resources does the individual have at his or her disposal?” He advocated an evaluation of ego strengths and weaknesses, object relations and relational issues. He focused specifically on how the person experiences intimate relations, the person’s character style, the ability to work, play and find meaning in life. He distinguished between implicit and explicit motives, and cited McClenman et al.’s study of power motivation. Using the Thematic Apperception Test (TAT) to study successful entrepreneurs, they found that the unconscious motives that turned up correlated .24 with an interest in power. The entrepreneurs were unaware of their interest, however, and said they had no interest in power. Their unconscious motives predicted nothing.

Westen also recommended evaluating the beliefs underlying motives and pointed out that a deep-seated fear of intimacy rooted in early attachment relationships is a conflict, but it is not a classical conflict between the id and superego, mediated by the ego’s defenses.

Special attention should be paid to the patient’s psychological resources. Intellectual resources help with all kinds of adaptation. Investigating the role of IQ as a moderator of responses in wartime, Rich McNally in a study of Vietnam veterans found that those with higher IQs were less likely to develop PTSD. The integrity of thought pro-

**SECTION VI PANEL: CLINICAL PROCESS — EMPIRICAL PERSPECTIVES**

**CHAIR:** E. Lisa Pomeroy, PhD  
**PRESENTERS:** Drew Westen, PhD  
Kenneth N. Levy, PhD  
**DISCUSSANT:** John S. Auerbach, PhD

Drew Westen’s goal, as he described in “Case Formulation: Integrating Classical, Ego Psychological, and Relational Approaches,” is to bring together these schools of psychoanalysis and integrate them with cognitive research. He used case formulation as a way to do it. He recommended focusing on a number of variables, including the patient’s concerns, symptoms and their history. Evaluating personality is a key to case formulation. Contemporary research has found that personality can be used to predict virtually all psychopathology. Recent research demonstrates that DSM IV, Axis I symptoms are due to personality, and some are recommending abolishing Axis II. Westen also recommended taking a family and developmental history, with attention to the biopsychosocial contest. The evaluation of progress and treatment should address what is likely to change, what is not, and the likely transference-countertransference dynamics.

The next big question that Westen said was important for case formulation is, “What psychological resources is likely to change, what is not, and the likely transference—evaluation of progress and treatment should address what history, with attention to the biopsychosocial contest. The also recommended taking a family and developmental the patient’s concerns, symptoms and their history. Evaluat- Westen also recommended evaluating the beliefs underlying motives and pointed out that a deep-seated fear of intimacy rooted in early attachment relationships is a conflict, but it is not a classical conflict between the id and superego, mediated by the ego’s defenses. Special attention should be paid to the patient’s psychological resources. Intellectual resources help with all kinds of adaptation. Investigating the role of IQ as a moderator of responses in wartime, Rich McNally in a study of Vietnam veterans found that those with higher IQs were less likely to develop PTSD. The integrity of thought pro-
cesses is another resource. He emphasized the awareness of and tolerance for affect and pointed out that positive and negative affects are not opposites. Depression is different from negative affect, and is an example of emotional dysregulation.

Westen concluded by noting that research is becoming more relevant clinically and warning against accepting “single-bullet” theories of therapeutic action.

In “Change in Attachment Organization in the Psychoanalytic Treatment of Borderline Disorder,” Ken Levy discussed the steps involved in developing and testing a treatment, including the nature of clinical dysfunction, the proposed mechanisms of change, the specification of treatment aims, and how they can be accomplished. Their research group has developed Transference Focused Psychotherapy (TFP), a modified psychoanalytic psychotherapy specifically for borderline personality organization. It is a structured, twice weekly, outpatient treatment, based on Kernberg’s ideas about the treatment of borderline patients. A proposed mechanism of change in TFP is the integration of self-concept and split off affection. The techniques used are: clarification, confrontation and transference interpretation. Increased differentiation and integration lead to the ability to function more flexibly and benevolently.

Levy also summarized a TFP Outcome Pre-Post Treatment study. The sample in the study consisted of 17 female patients, ranging in age from 50 to under 20. Their hospital stays were shortened from more than a month to less than a week of hospitalization during the time period studied. In addition, the number of times they were hospitalized decreased.

In the study of the different treatments, the research group used the Adult Attachment Interview (AAI). The AAI is designed to elicit thoughts, feelings and memories about early life. The AAII is designed to “surprise the unconscious,” and it provides numerous opportunities for the speaker to elaborate upon, contradict or fail to support previous statements. There are different classifications: Secure, Preoccupied, Dismissing, Cannot Classify (an indication that there is not single state of mind is predominant).

The research group measured an Assessment of Coherence by examining the responses according to a particular scale. They also measured reflective functioning, mentalization or mentalizing capacity using the Reflective Function Scale.

The research group found that at the beginning of the study, most of the patients were insecurely attached. One third had had traumatic experiences or loss. There were a number of dismissing and cannot classify styles. By the end of the study, 36% were securely attached and many showed an increase in coherence. Unresolved trauma decreased. A comparison of Transference Focused Psychotherapy with Dialectic Behavior Therapy and Supportive Therapy showed that attachment scores and changes in coherence of the narrative improved but not significantly so. Reflective functioning, however, only changed in TFP. What is happening? Is Reflective Function related to symptomatic improvement? By the end of treatment, coherence and reflective functioning were no longer correlated. They are two different things. The group will continue to study mechanisms of action resulting in behavioral change and what causes the changes to stick or increase, and what causes them to wither away.

The discussion was led by John Auerbach, who spoke about the bifurcation in the psychoanalytic and psychotherapeutic community: the split between those who characterize the work as hermeneutics and the other group that wants to do research and discover objective truth. Those things that are intersubjectively sharable will help a lot. Most of our literature consists of case reports. This is not evidence or proof, since the analyst is a highly biased reporter and memory is fallible and selective. We need process recordings, because the match between what we think we do and what we do is not as good as we would like. Interpretations need to be supported by research that provides evidence that conforms to a number of different kinds of validity.

While Freud’s theories of motivation and cognition aren’t accepted anymore by those interested in cognition, unconscious mental processes are motivational and symbolic. They are about how we make meaning. The multiple perspectives that we have generated as clinicians can inform both clinical work and research. In considering the questions surrounding motivation and meaning, coping resources and adaptive capacity are very important. Ego psychology has something to offer. Issues of loss and abandonment, sexuality and attachment, are important for all. Why is one person better at managing? They have better relationships, a higher IQ, and there may be genetic variables, also.

He concluded with a further series of observations about the applicability of psychoanalytic research to practice with a observations that many of our best measures, such as the AAI, are only able to “capture” one aspect of the rich complex that makes up the individual. Finally he noted the similarity of psychoanalytic work with that of radical behaviorists, in contrast to cognitive behaviorists who appear to be “stuck” in an unhelpful paradigm of how individuals function.

Fonya Helm
Section VIII Panel: The Social Construction of the Family and the Decision to Have a Child in Same— and Opposite—Sex Couples—Implications for Couple Therapy

Chair: Susan M. Shimmerlik, PhD
Panelists: Ann D’Ercole, PhD
          Dennis Debiak, PsyD
          Virginia Goldner, PhD
          Deborah Anna Luepnitz, PhD

Last year Section VIII’s invited panel for 2004 made a plan to focus their presentation on questions about what defines a family, who determines this, how couples decide to raise children, what issues are reactivated as a result of the decision, and what are the implications for couple therapy, raising these questions with a special emphasis on diversity and gay and lesbian families. It turned out that nothing could have been timelier, since this past spring the country has been in turmoil about same-sex marriage and civil rights for gay and lesbian couples.

Ann D’Ercole, editor of a new book entitled Uncoupling Convention: Psychoanalytic Approaches to Same-Sex Couples and Families (2004), discussed the changes and the challenges faced by same-sex couples. In the 1960s, these couples did not usually consider raising children, but now in the 21st century, it is quite common, with 14 million children estimated to be living in same-sex families. Meanwhile, divorced and blended families predominate in opposite-sex couples; less than 25% of them are intact.

Deborah Luepnitz pointed out that Freud himself analyzed a lesbian mother (H.D.) and did not pathologize her relationship. Dr. Luepnitz described a report in Child Development (Patterson, 1992), which looked at 12 studies and found that children in same-sex families were doing as well as those from opposite-sex families. As for defining a family, our culture is gradually adjusting its concepts. In the American Heritage Dictionary (2000), the more recent definition is “a fundamental social group, typically consisting of one or two parents and their children,” and even more encouraging, from the Oxford English Dictionary (2005), “the legal or religious union of two people.”

Dennis Debiak, chairman of the Committee on Sexualities and Gender Identities, suggested we think about new ways to support same-sex families, such as developing psychoeducational workshops for prospective gay and lesbian parents, to address topics such as division of labor, relationships to families of origin, and internalized homophobia. Dr. Debiak pointed out that many of these same problems confront opposite-sex couples as well, and they could clearly benefit from such workshops.

In addition, same-sex couples face different issues and therapists need to know about them in order to guide these couples in an exploration of their feelings about such realities as the genetics involved in reproductive choices, the ways in which they will divide the traditional gender roles (will each be both mommy and daddy for the child?), and the outside forces that push them into corners (in some states, one of them must pretend to be straight in order to adopt a child, even though they are in a committed same-sex relationship).

The panelists agreed that many parenting decisions are similarly stressful for all couples. Psychoanalysts not only need to understand the issues facing couples who are deciding to become parents, but also need to be aware of the additional conflicts faced by same-sex parents, e.g., the increased intensity of conflict with their families of origin.

All the panelists emphasized the many countertransference issues that therapists face when dealing with issues of reproduction, parenting, and fertility, including sibling conflicts and other family matters lurking in our pasts. Dr. Luepnitz recommended using dream work to help couples sort out some of these conflicts.

Virginia Goldner, founding editor of the journal Studies in Gender and Sexuality, summed up many of these issues as she discussed her own evolution in understanding. The gay and lesbian culture had been construed as unconventional and “outside the norm,” and it requires a flexible approach by the dominant culture to accept their wish to be traditional—have children, form a family, and marry. Their identity is no longer just about sexuality. When people are viewed as different, they are often labeled “deviant,” a judgmental term resulting frequently in various forms of “punishment”—e.g., you can’t raise a child, that’s immoral. You can’t be a family—that’s only for us: the heterosexual good citizens who own the term.
SEXUALITIES AND GENDER IDENTITIES COMMITTEE PANEL: TRANSGENDER EXPLORATIONS

CHAIR: DENNIS DEBIAK, PSYD
PANELISTS: RANDI KAUFMAN, PSYD
DEBORAH ANNA LUEPNITZ, PHD
BETHANY RIDDLE, MED
DEBRA ROTH, CSW.

The panel was the third in a series of discussions on sexual object choice. Dennis Debiak introduced the topic by raising several questions related to the complex intersection between gender identity and sexual object choice: “Is there a way in which changing one’s body to match one’s inner gender affects one’s object choices?” he asked, “or is it more likely that sexual attraction follows a distinct developmental line through childhood, adolescence, and adulthood?” The four discussants responded to the opening remarks with perspectives both similar and diverse.

Debra Roth asserted that psychoanalytic conceptions of gender identity and sexual object choice relied too heavily on the nomenclature of sexual orientation. She remarked, “Worlds of people [are] transmuting the limitations of gender and literally dismantling the scaffolding of a binary gender system.” Roth illustrated her premise with the vignette of Eli and Sam, a lesbian couple that decided to undergo double mastectomies in order to reconcile their physical appearance with their interior sense of gender. Ultimately identifying as Transmen—men who are male but who were once female—Eli and Sam finally experienced a sense of well being in the world while also incorporating their histories as females into their masculine identities.

So far, psychoanalysis has failed to understand the subjective experience of transgender individuals, and has generally disavowed notions of gender multiplicity. According to Roth, Trans phenomena simultaneously highlight essentialist and constructivist notions of gender and sexual object choice; yet we as analysts are ill equipped to categorize the object choice of Trans people.

Randi Kaufman provided clinical data suggesting, “sexual object choice became much more fluid postoperatively for many individuals completing surgery.” Kaufman conducted an informal study of 54 clients who had altered their gender identity, and found that roughly 1/3 of her clients changed their sexual object choice. According to Kaufman, individuals who experienced a change in sexual preference also experienced greater fluidity in their gender identity. Her clinical experience suggests, “it is not all that unusual in the sub-group female-to-male for the person’s attraction toward women to ‘switch’ toward men.” Put another way, “the lesbian becomes gay.”

Drawing on historical sources, Kaufman also discussed the development of categories related to sexual orientation while concomitantly addressing current linguistic and epistemological limitations of describing the experience of being transgendered. “For example,” she remarked, “if someone is female bodied and likes women, is she lesbian?” “Only if she identifies her gender as female,” Kaufman insisted. In this context, she also acknowledged the conundrum faced by many of the partners of transgendered people.

Bethany Riddle commented on the contradiction between her theoretical, clinical, and political interests. In particular, she related how her clinical experience working with transgender people did not necessarily correspond to her theoretical leanings about gender identity and sexual orientation. She remarked, “The Trans people I’ve worked with have felt decidedly confident about their gender identity and more fluid about their sexual orientation. They tend to embody [gender] in a hypernormative way.” Riddle reported that her transwomen clients felt most like women where they were hyper-feminized, i.e., wearing clothing and accessories associated with stereotypical views of femininity. Interestingly, Riddle also found that some of the Trans people she saw clinically defined themselves as heterosexual and felt they were simply in the wrong body. For example, a transwoman (MTF) describes herself as a heterosexual woman. A preoperative, pre-hormone transman (FTM) describes himself as a heterosexual male. However, Riddle also treated a transwoman (MTF) who remains undecided about her sexual orientation, commenting, “I don’t know what I am. I just don’t fit the categories.”

Analyst and author Deborah Anna Luepnitz discussed the distinct experiences of intersexed people, i.e., individuals born with genitalia not recognizably male or female, with those of transgender people in order to highlight the profound differences between people who are assigned a gender identity and those who choose. She asserted, “the experiences of intersexed people can set in relief those of transgendered individuals, sharpening our discussion of object choice.” Luepnitz described the complicated case of a woman who had given birth to an intersexed infant. Almost immediately, the neonate was assigned a male gender although later medical complications con-

Continued on Page 28
This panel explored the psychoanalytic space that is inhabited by analysts who are non-white, and therefore both within and outside of the culture of psychoanalysis. The panelists posit that the analytic space is cultured and racialized, with analyst and patient confronted by unconscious cultural aspects of the psyche and racial-cultural identifications. This unseen space can be illuminated by the analyst’s position as the in-between bi-cultural other.

Dr. Nguyen in her paper, “Recognizing the Other, Narrating the Self,” used the cultural-narrative perspective to explore the “cultural” transference meanings that occur when the analyst is bi-cultural. Dr. Nguyen’s purpose was to clarify the narrative structure and interpretive traditions that inform psychoanalytic culture and define the meaning-making and narrative activities that impact on a person’s “culturedness.”

Dr. Nguyen stated that the culture consists of the thematic and formal elements of the life narrative and the space within which to define self and others. She raised the question of what happens when the analyst is non-white. Dr. Nguyen believes that there are moments of “congruence” and “invisibility” in the work when the analyst’s culture is recognized by the patient and is perceived as congruent / incongruent or is negated and rendered invisible in the interpersonal. For Dr. Nguyen, these moments are important because they enhance the patient’s ability to perceive and re-tell their self-narrative and signal the paradox of existential aloneness and the desire to connect.

Dr. Bennett’s paper, “The Analyst at the Intersection of Multiple Cultures,” explored the space that the African-American psychoanalyst occupies at the intersection of three cultures: psychoanalysis, African-American and that of the dominant (white) culture. She stated that the African-American analyst brings to the work an additional set of experiences and tensions — that of being the racialized other, an outsider in the analytic world, as well as in the larger American culture. In that world, there is a power differential in which there is a presumption that the values of the dominant (white) culture are superior to all others. Thus, the African-American analyst has had to live in a bi-cultural world (white and African-American) and as an analyst moves into an intrapsychic, as well as external space at the intersection of three worlds.

According to Dr. Bennett, as a racialized other the African-American analyst experiences dissonance. The fluidity of movement between worlds is hampered by the anxiety and the trauma of living in multiple worlds. The dilemma for the African-American analyst is that to be authentic all aspects of the self must be available for use in the work. The anxiety and discomfort engendered by the limits imposed by the devalued status of the analyst contributes to a therapeutic impasse which can only be resolved when the analyst can be free to bring to the treatment the multidimensional aspects of self that evolve from life at the intersection of multiple cultures.

Dr. Jones in her paper, “Whispering in the Darkness: Psychoanalytic Treatment in Black and Almost White,” discussed the ways in which black analysts use repetition of the structural relationship to free themselves and their patients to explore barriers to communication. She stated that this is essential when the black psychoanalyst finds herself thinking about whether her patient is black or non-white. According to Dr. Jones, to write and think about the assumptions made about culture, race, skin color and ethnicity is important as more and more non-whites see psychoanalysis as a treatment option. With such dyads, the work shifts between visibility and invisibility, shared moments as well as a shared sense of separation. Dr. Jones noted that if the patient and analyst are not able to communicate about their awareness of the similarities and differences, it can lead to premature termination. In addition, she attempted to illuminate and explore the technical shifts that must occur in the analytic dyad where racial, ethnic, cultural and color differences occur, to enhance the process by which the patient can locate and identify their intrapsychic issues.

Janice Bennett
PSYCHOANALYSIS AND HEALTH CARE TASK FORCE: MIND-BODY RESEARCH APPLICATIONS FOR PSYCHOANALYTIC CLINICIANS

Presenters: MARY-JOAN GERSON, PhD
            MARILYN S. JACOBS, PhD, ABPP
            TAMARA MCCLINTOCK GREENBERG, PsyD

Mary-Joan Gerson opened the panel with an emphasis on the mission of the Task Force; i.e., that the central issues seen in modern health care are related to the psychoanalytic endeavor and that psychoanalysis has been neglected. These issues include somatization, psychosomatic generation of illness, coping with pain, illness and suffering and the complicated realm of psychimmunology. She also emphasized that psychoanalysis is too often marginalized in today’s health care culture and bypassed in favor of the practice of cognitive behavioral therapy, which promotes a speedy and effective reduction of symptoms. She emphasized the richness of the psychoanalytic repertoire highlighting the role of unconscious factors in immunological functioning, the symbolic meaning of suffering, the intersubjective relationship between patient and physician and the process by which pain and disease can become crucial aspects of self-concept, identity and the quality of relationships.

Dr. Jacobs discussed the efficacy of psychoanalytic theory and technique in health psychology. She provided a distinction between psychoanalysis and health psychology in that health psychology relies predominantly upon a patient’s self-report for its database and is based primarily upon cognitive behavioral and stress theory/practice. Health psychology as it is now constructed is organized by causal/genetic explanations and technical/reductionistic techniques. In contrast, contemporary psychoanalysis with its nonlinear, non-Cartesian emphasis and its existential, contextual and interpretive humanistic procedures is a domain of great relevance to the medical patient. Dr. Jacobs pointed out that the problem of persistent pain is linked to the origins of psychoanalysis, as “pain without lesion” was one that greatly preoccupied 19th century physicians and was a dominant theme in the Freud’s early texts. It is the hope of the Task Force that there will be a furthering of the development of psychoanalytic health psychology.

Dr. Greenberg then made a presentation entitled, “Mind-Body Research and Applications for Psychoanalytic Clinicians.” In this talk, the research regarding mind-body connections, which link physical illness and psychological states, was reviewed. The areas of research discussed were: a) child abuse and neglect and subsequent effects on health; b) the impact of hostility, anxiety, and depression on health and physiology; c) social support and its implications for health and mortality; and d) proposed biological and neurological mechanisms which explain these findings. It was emphasized that there is a large body of research supporting the contention that emotional states effect physical functioning via immune and endocrine responses; and that certain conditions (e.g., chronic depression) are more predictive of negative health consequences. Psychological treatment can be thought of as a way to possibly prevent physical illness as well as providing treatment for emotional and psychological conditions. Given the types of problems linked to physical illness, psychoanalytic treatment was an obvious choice of intervention.

Marilyn S. Jacobs

Continued from Page 26

vinced the physicians to then recommended surgical gender reassignment. As a result, Christopher became Christine. Luepnitz emphasized that in this case object choice was “being decided by others—by well meaning if naïve physicians—almost in advance of gender.” At age 8 Christine began saying she was a boy, claiming that he had a penis although no organ existed. Christine’s protests led to further consultations with medical experts, who recommended social reassignment as a boy. Surgeries followed.

In contrast to those born intersexed, Trans people often recall having remarkable certainty about their gender identity. Luepnitz then referred to the transsexual travel writer Jan Morris, who from the age of 10 identified as female despite living outwardly as a traditional male. Long before having reassignment surgery, she had been clear, deep down of having a female identity.

As did others, Luepnitz commented on the limitations of language to describe and discuss sexuality. Reflecting on the film Hedwig and the Angry Inch, by way of Lacan, she remarked, “there is something in our sexed being that is left over, that cannot be accounted for in language.” She continued, “In something we might call ‘health,’ the individual would be able to ask of the body, ‘What is it?’ and the body would reply with equanimity: ‘It’s what I have to work with.’”

After the presenters’ formal remarks, the audience participated in a lively discussion, ultimately arriving at the consensus that psychoanalysis has yet to describe persuasively the relationship between gender, sexuality, and object choice.

John Rosario-Perez
The two papers in this panel posited contrasting and complementary perspectives on the interface of psychoanalysis and poetry. Dr. Seiden, in “On the ‘Music of Thought’: The Use of Metaphor in Poetry and in Psychoanalysis,” offered both clinical material and a poem as examples of the parallel function of metaphor in psychoanalysis and poetry. Dr Orfanos used the work of a specific poet as an example of a postmodern sensibility that parallels current psychoanalytic thinking in his paper, “Desire and Death in Alexandria, Egypt: The Poetry of C. P. Cavafy.”

Focusing on the clinical use of metaphor—“when psychoanalytic psychotherapists move intentionally to figurative and comparative language in talking with their patients, Seiden posited, “both poets and psychoanalysts, despite the differences in the aims of their arts, rely on this way of speaking in order to evoke, discover and create meaning.” Seiden evidenced such a clinical use of metaphor via an account of an exchange between analyst and patient “thinking about and speaking of the patient’s girlfriend as a ‘butterfly.’” He then compared this clinical example to the use of metaphor in Alan Dugan’s poem “Love song: I and Thou,” which, he observed, “relies on an extended series of metaphors to make a ‘true,’ tragicomic statement about the nature of love and marriage.” Among the points he made about the characteristics of metaphorical language, Seiden stated:

Metaphors indicate, that is, point to as opposed to define experience. Metaphors often work (paradoxically) by disguising experience—making it possible to communicate indirectly, engagingly and, importantly for our work, tactfully and empathically. Metaphors allow both poets and psychoanalysts some control over the depth of experience entered into. The use of metaphor evokes, indeed requires, creative capacities of mind in both maker and receiver. Metaphors provide an interpersonal opportunity. There is pleasure in metaphor, which deepens the interpersonal bond. And finally, metaphors have a portability that more theoretical statements are unlikely to have.

Entering the debate between “classical” and “postmodern” perspectives on the psychoanalytic endeavor, Seiden concluded his presentation by asserting that the clinical use of metaphor suggests, “both points of view are correct. The metaphorical language we rely on in the clinical exchange both discovers truth and also creates it.”

After an introduction regarding applied psychoanalysis in a postmodern world, Dr. Orfanos considered the work of C.P. Cavafy, an early 20th century Greek poet who lived in Alexandria, Egypt, whose “poetic themes were the decline of the Greek ideal and the location of desire, particularly homoerotic desire.” Emphasizing “sensual pleasure and the journey from harbor to harbor,” Cavafy wrote about “the body, sex brothels, churches, corrupt priests, narcissistic leaders, the City of Alexandria, and the psychological journey,” always emphasizing that “individual experience was of central value.” His poetry functioned as a vehicle through which he “came to terms with his homosexuality,” and gradually acknowledged it publicly.

Orfanos posited, “Cavafy’s postmodern sensibility provides readers with glimpses into the poet’s unique viewpoints and casual affairs.” Further, Orfanos observed that via its “mix of memory and desire “ and its ironic and cynical perspectives, Cavafy’s poetry “offers a postmodern sensibility that is in line with much of current psychoanalytic thinking about clinical process.”

To demonstrate the creative course of a unique poetic voice, Orfanos read a selection of Cavafy’s poems—among which were “Ithaca,” “Waiting for the Barbarians,” “Body, Remember,” and “Their Beginning.” In conclusion, Orfanos imagined an encounter with Cavafy, as if “the poet was in the meeting room listening to the presentation,” and offered that he “would have liked to ask Cavafy if the poem about ‘Anna Dalassini” was indeed about his mother and if it were true, “she never uttered those cold words ‘mine’ and ‘yours.”’

Discussion paralleled the two presentations. Many were engaged in considering the clinical use of metaphor. Dr. Ainslie noted her curiosity that the group was not considering the most prominent metaphor in psychoanalysis: transference. Others were interested in pursuing the clinical implications of Cavafy’s postmodern voice. The value of engagement with literary processes to both clinical and theoretical psychoanalysis was generally emphasized.

Gemma M. Ainslie
In this panel, Dr. Nina Gutin and Dr. Jane Tillman explored an area that has rarely been addressed in the clinical literature, namely, clinicians’ loss of either a family member or a patient to suicide, and the subsequent implications for clinical practice and professional identity.

Dr. Gutin’s paper, “Clinician Survivors of Family Suicide: Implications for Practice and Professional Identity,” focused on the impact of family suicide loss. Dr. Gutin described how, after she’d lost her brother Jeffrey to suicide, she noticed substantial changes in both her clinical work and professional identity. She attempted to address these issues by attending national Suicidology conferences in which both clinicians and family survivors were represented. However, she described how the “Clinician” and “Survivor” divisions of these organizations were clearly delineated (if not segregated) despite substantial “overlap” in division membership, and found virtually no presentations addressing the impact of family suicide loss on clinical work. She subsequently organized panels and workshops on this topic at these conferences, and has thus been able to consult with other clinicians who had experienced family suicide loss. Her presentation integrates the common themes and issues presented by her colleagues with her own personal experiences.

Dr. Gutin first highlighted the research on the ways in which family suicide loss differs from other types of loss. She then focused her presentation on two interrelated areas: the potential impact on clinical work, and the effects on professional role/identity, with special attention paid to the distinctive contributions of stigma within the mental health community, as well as internalized stigma/shame around suicide and suicide loss. Such externally imposed stigma can become intertwined with internalized stigma and shame around both of these issues, and may subsequently lead to increased isolation from one’s professional peers, and a defensive compartmentalization of the roles of “clinician” and “survivor.” This role delineation is often reinforced within the professional community and is likely to present an additional liability to effective practice.

Dr. Gutin expressed her hope that an open discussion of these issues with other “clinician-survivors” would facilitate an awareness of relevant clinical issues, a reduction in stigma and professional isolation, and an improved ability to integrate one’s personal losses into one’s professional roles.

In Dr. Tillman’s paper, “Exploring the Responses of Therapists to the Suicide of a Patient,” she presented the results of 5 years of interviews and workshops conducted with psychoanalytically oriented psychotherapists who have had a patient commit suicide while in treatment or shortly thereafter. From these efforts, she has learned a great deal about the various reactions therapists may have to the death of a patient by suicide.

In her presentation, Dr. Tillman focused on the effects of patient suicide on the professional identity of the therapist. Using data from eleven subjects, several themes were identified related to professional identity, including feelings of grandiosity, shame and humiliation; a crisis of faith about intensive treatment with severely disturbed patients; and relationships with colleagues. In the aftermath of a patient suicide, subjects reported concerns about professional competence, fears of being stigmatized by colleagues, and feelings of having their hope for the treatment dashed by the patient’s suicide.
Understanding professional identity formation from a psychoanalytic viewpoint has often been limited to identifications established with one’s analyst or supervisor, or other idealizing professional relationships. The suicide of a patient was noted to precipitate a sense of crisis in both personal and professional arenas, presenting various challenges to the therapist’s professional identity. Dr. Tillman returned to Erik Erikson’s (1959, Identity and the Life Cycle) work, noting that the narrative data from her subjects mapped very well onto Erikson’s psychosocial crises. Erikson’s original model postulated linear progression or epigenetic sequences of development, through life stages or crises. Dr. Tillman proposed that for the therapist’s in her study, the suicide of a patient led to a revisiting of Erikson’s psychosocial crises in an accelerated and quite telescoped fashion, not linear in nature, but thematically alike. Ending her talk, Dr. Tillman noted that we have much to learn from our colleagues who have lost a patient to suicide, because their reactions tell us something about latent ideals and hopes many of us bring to our work, and how these ideals may be challenged by a suicide. Further, as a profession, how do we work to understand the process of stigmatization via projection and counterprojection occurring when a colleague’s patient commits suicide?

Following the two presentations, Dr. Gerard Fromm facilitated a discussion among attendees, expressing the hope that by sharing their relevant experiences, colleagues could ideally learn and take support from each other’s experiences. A fruitful discussion ensued. Attendees generally noted that the issues presented resonated with many of their own experiences, and expressed the desire for more opportunities to discuss these issues.

Nina Gutin

A 3 1/2 YEAR OLD CHILD WHO WOULDN’T EAT

**Presenter: Etta Gluckstein Saxe, PhD**

**Discussant: Johanna Krout Tabin, PhD ABPP**

This panel consisted of a case presentation and discussion. Space allows for only a short summary of the case. The unfolding of the work begins as follows. The first time I saw Stevie he was lying in a crib. He was a pale, blond boy whose almost visible backbone was covered with the scars of bedsores that had developed from immobility while comatose. He was markedly listless and apathetic with no sign of any affect or interest in anything. His crib was placed in the corner of the ward. He in no way protested or attempted to get attention. After meeting Stevie for the first time, which included my holding him briefly to get a feel for his relationship through body contact, I interviewed his mother and collected some history material.

Stevie, age 31/2, was severely injured in an automobile accident while sleeping in his mother’s arms. There was brain damage, a coma of many months and loss of function in one leg, arm, eye and ear. As he recovered after waking from coma he manifested a serious refusal to eat/drink. Many interventions were tried with psychiatric consultation resulting in a diagnosis of autism. Much of the psychoanalytic work was done in daily meetings while he was housed on a regular ward at a children’s hospital because life could not be sustained at home. Later we met at my office twice weekly.

The extensive case material details the work as it unfolded chronologically. Ongoing work with parents and nursing personnel is included, as is the mental activity of the therapist. The story ends as follows. When I told Stevie about the coming transfer vigorous protest ensued. He repeatedly kissed me. I responded by indicating that Stevie was angry and that Stevie was saying no to saying goodbye. I also commented that Stevie liked me and I told him that I liked him too.

**Dr. Tabin’s Discussion** This very detailed case of psychoanalytic treatment of a deeply regressed child includes adjunctive milieu therapy and the child’s parents’ roles. It increases our knowledge of how to help people who have suffered great trauma. It is rich in implications for psychoanalytic theory and illuminates the concepts of regression and repetition compulsion. This account also brings light to our understanding of mechanisms of anorexia in a boy. Although the child was initially mute, psychoanalytic sophistication made treatment possible.

The process notes allow us to trace the child’s development during treatment and to weigh the contribution of relationship/insight. As beneficiaries of remarkable studies of early infantile behavior, we nonetheless continue to find problems in interpreting what we witness. Stevie’s pattern of regression permits reconstruction of his development with lessened guesswork as to the meanings of his behavior.

This treatment was all about understanding, with the therapist’s understanding eventually fostering Stevie’s understanding of himself and his world. She proceeded as she did because she respected Stevie in his struggles, a respect manifest in the assumption that while Stevie could not explain his behavior, it made sense for him. This interpersonal factor was crucial.

Dr. Saxe’s efforts to return the feeding process to Stevie’s control included work with his mother and nurses. Simultaneously, she introduced verbal interpretations of...
Stevie’s conflict over eating, providing words Stevie could recognize for his own actions and feelings. As Stevie ventured to be more active, Dr. Saxe affirmed every sign of his autonomy.

Using words for identification of objects and learning about his body became the next phase, along with much more vigorous behavior. This included difficult behavior, but Dr. Saxe hewed to the real task, declaring for him, “I can spit! I can bite! I can kick!” She also interpreted the context of such behavior as meaning that Stevie was basically saying “No!”

The developmental replay that Stevie demonstrated could have been scripted by Freud and Abraham, passive early orality, the biting stage, messing and vigorous defiance, especially when his mother tried to reinstitute toilet training, all remind me of the old textbooks. Only this time, it is not reconstruction from work with adults. Stevie also reminds us that the elements of mastery, that ordinarily accompany maturation of the body, come in a predictable sequence, contributing to the formation of the ego. Stevie regressed when Dr. Saxe disappeared for two weeks due to illness. When she returned, he recapitulated the course of their relationship, taking much less time than with the initial development.

Dr. Saxe observed that Stevie had concerns about his penis. Chronologically old enough to experience Oedipal conflict, he seemed to be on an earlier level quite uniformly. My own work leads me to believe that proto-oedipal feelings arise along with the awareness of the third. As Jacobson pointed out, a self-concept is greatly enhanced by the dynamic of two separate people as parents. Genital sensations also demonstrably contribute to a child’s determination of a self, linking interpersonal experience with body ego.

Family dynamics as described through his baby book suggests what is sometimes seen in cases of anorexia in boys, a mother both seductive and controlling to unusual degrees and a son ambivalently but strongly attached. A possible script for consideration emerges. While trying to develop psychic autonomy from his mother, Stevie tried to reject food, a symbol of her power. Fear of being hurt inside by what he might swallow reflected projected rage against his mother, who in her food form might revenge herself against him. While I lean toward this interpretation I must caution us that his behavior with food changed more rapidly when the feeding tube was removed and his sense of autonomy in feeding was increased and his throat stopped hurting. As psychoanalysts, we do need to keep in mind that the unconscious is not the only contributor to behavior.

Stevie demonstrates the process an ego requires in rebuilding itself after shattering trauma: A return to the earliest level of organized behavior and recapitulation of former development, eventuating, in his case, in arrival close to chronological age. Freud originally introduced the concept of repetition compulsion in relation to thoughts about Thanatos and a return to a non-biological state. Stevie’s case illustrates repetition compulsion as an ego need for mastery. All these values, and foremost Stevie’s recovery, are available to us only because of a profundity of psychoanalytic understanding and conviction. For those interested, an audiotape of this panel is available through Sound Images and may be ordered through the Division 39 website: https://www.soundimages.net/conference.aspx?cfsi=158

Johanna Tabin and Etta Saxe

More Than Skin Deep: Identity and Culture

Chair: Ruth Litmaer, PhD
Presenters: Eileen Kohutis, PhD; Ruth Litmaer, PhD
Moderator: Michael Moskowitz, PhD

This panel addressed the issues of identity and culture in the analytic relationship. The first presenter, Dr. Eileen Kohutis, an American, discussed how a patient used culture as a defense to avoid her own issues. In her paper, “Conflicted Identity: Culture as a Defense,” Dr. Kohutis stated how our culture defines us. It provides us a sense of generational and historical belonging; it defines our traditions and our customs; it gives us a feeling of personal relatedness to others. Becoming a member of that new culture and finding a way to integrate these two cultures are a complex task for an individual and have us to think of the bedrock concepts of defenses, conflict, separation-individuation, object relations, and identity in a different light. When this integration is successful, the immigrant has a broadened and deepened sense of self and of identity. But, what happens when this integration is not successful and culture is used as a pre-tense to avoid personal issues? What happens when it is used as a defense?

To further explicate these issues, Dr. Kohutis presented a clinical case of a patient that used her culture as a vehicle to avoid her own issues. The youngest of three daughters born to Greek immigrants, Olympia is a 34-year-old single woman who feels close to no one in her family and reports that her parents as being able to only provide for her physical needs and not for her emotional ones. She views her mother as hysterical and emotional and her father as a poor provider for the family who had sporadic jobs. To develop her sense of Greek identity, Olympia’s parents sent her to Greek school, encouraged her to socialize with...
other Greek children, and sent her to Greece every summer. Now, as a grown woman, she reacts vehemently to any-thing Greek, from dating Greek men to speaking Greek at home with her family, and embraces all things American—from food to politics. Clearly, Olympia has not integrated these two cultures into her identity. Her attempts at separating and individuating from her parents as she develops her identity as an American has been problematic for her especially since she uses her culture as a way to avoid her feelings of anger and deprivation.

The second presenter, a Hispanic immigrant, Dr. Lijtmaer, focused on the biracial and bilingual elements of work with a member of a similar language, but different race. In her paper “Black, White, Hispanic and Both: Issues in Biracial Identity and its Effects in the Transference-countertransference,” Dr. Lijtmaer defined identity as a feeling of belonging and if conflictive creates a feeling of exclusion. For the biracial individual, identity is multifaceted, subject to change and a malleable component of the social universe. Biracial individuals may identify with both racial groups they have inherited and this may create conflict and the identity process appears to be more variable for persons of mixed-race heritage. Traumatic racial experiences of discrimination, particularly when they occurred at a young age, may encourage an irrational color-coding of the experience that may alienate the individual from others and create traumatic experiences. Potential problems may include cultural and racial identifications issues, lowered self-esteem, difficulties with cultural demands, and feeling marginal in two cultures. The patient presented, Joan, was a woman in her thirties who was the only dark-skinned child of a white-skinned couple. Her siblings were white-skinned. Due to her dark skin, she suffered discrimination at an early age. In addition to that, as an adult she learned that she was the product of her father’s liaison with a black nanny that had raised her. Her world was split between good Hispanic and bad black.

In this clinical case, the issue of race had significance as a result of Joan’s struggles with her sense of identity. Because of Joan’s negative experiences and circumstances, her world was split between good Hispanic and bad black. She had not experienced cultural stability that would allow identity formation to proceed (provided that the relationship with important objects is not traumatic). She had enough good in her very early experiences (with her nanny-mother) to function in the world, but not enough to feel good about her biracial self. The cultural upheaval that she had experienced increased her difficulties in adolescent identity formation maintaining the split of her two worlds. Joan’s distant relationship with her mother, an almost non-existent relationship with her father, and the secrets in her family were significant ingredients in her identity confusion.

Even though Dr. Lijtmaer and her patient shared two aspects of identity, Hispanic culture, and the Spanish language, the patient’s dark skin complexion and analyst’s white one, added a new dimension to the transference-countertransference dynamics. Initially, the dyad’s common language helped the developing of the working alliance and positive transference. Another significant transference response was Joan’s wish to find a good-enough mother in the analyst. Dr. Lijtmaer’s fear of judging Joan because of her skin color provided a countertransference resistance that had to deal with. Other countertransference feelings included sadness and helplessness at the patients’ traumatic experiences of discrimination, which at times the analyst identified with. After the presentations of the two papers, the moderator, Dr. Moskowitz, discussed how both papers provided powerful examples of ethnicity becoming the carrier of powerful, often negative self-images. Dr. Kohutis’s case demonstrated that Greeks could be as self-hating as Jews. Dr. Lijtmaer presented a modern day story of Moses. The patient was raised by her (black) mother-nursemaid without knowing she was her mother, and like Moses’ mother-nursemaid, Yocheved, gets little mention. His comments and the papers generated considerable discussion among the audience and the panel.

Ruth Lijtmaer
Psychoanalysis is developing to meet the therapeutic needs of ordinary people in distress. Occasionally during the course of analysis an analyst or an analysand needs to relocate. More data are needed on the use of the telephone to continue and complete such analyses. The first paper in this panel illustrated the mid-phase transference-countertransference processes of an analysis that is on going and was shifted to the telephone when the analyst relocated. The second paper illustrated working through to termination when the analysand moved. The presenters and moderator all agreed that telephone analyses are different than those conducted in the office. Nevertheless they can be beneficial for analysands. That is, when conditions require a shift to the telephone, it is viewed as an appropriate compromise to continue the analysis.

Dr. Manosevitz, in “Mid-Phase transference/Countertransference on the Telephone,” noted that such flexibility is consistent with meeting the needs of analysands as they arise during the course of an analysis. He quoted Owen Renik:

In my opinion, something we very much need to standardize is an experimental approach to psychoanalytic technique. It is striking how little our principles of technique have evolved since the early days of psychoanalysis. I think that in our efforts to maintain what is called “psychoanalytic identity” we have clung too tenaciously to established practices based on received wisdom.

The different context or frame of such telephone analyses must become a part of the material of analysis. Since such an analysis is different, one must carefully attend to what is lost and what is gained in such work.

Manosevitz reported on a patient who upon initially coming for consultation clearly stated that he wanted to complete an interrupted analysis that had begun years before in Italy. He was told at the initial appointment that the analyst would be relocating his practice in one year’s time. The analysis was shifted from office to telephone sessions when the analyst moved. Sessions were conducted on a three times per week basis. From time to time, the analyst has returned to where he formerly practiced and office sessions are conducted.

The main issues for this man are his narcissistic character structure and significant problems with close interpersonal relationships. He is not especially grandiose but significantly lacks empathy. He seeks admiration from others and can be arrogant and exploitive. His narcissism has components of degradation i.e., narcissistically damaged by growing up with parents, both of whom were quite narcissistic. He experienced growing up as an object that was to satisfy the needs of his parents. His own needs were largely ignored. Thus his sense of self was quite impaired. Symptomatically, he presented with extreme anxiety, many compulsive rituals and extremely disturbing night terrors.

He accepted the recommendation that he resume his analysis and he decided to resume with this analyst, in spite of the fact that his analyst would be relocating. When the analyst moved, the analysand decided with some ambivalence to continue his analysis over the telephone. The transition to the telephone was moderately disruptive, but the work soon settled down and the analysis progressed. At one time, he was told that his analyst would return for a visit and a series of sessions would be in an office. This, much to the analyst’s surprise, stimulated a narcissistic rage reaction. Working through this narcissistic rage, for “opening up the wound” again stirred major narcissistic conflicts. Working through the transference-countertransference complex with telephone and office sessions in mid-phase, permitted a focus on his conflicts concerning abandonment, separation and being used as a narcissistic object by his analyst.

The shift to the telephone provided the opportunity to analyze the abandonment rage he felt toward his parents when they physically and emotionally abandoned him to satisfy their own needs. His rage at his analyst for abandoning him to meet his needs stimulated useful countertransference reactions. Thus by working through the transference-countertransference complex stimulated by being reminded how much he missed his analyst (and his parents) and how much he hated the analyst (and his parents) he was able to make considerable progress in his analysis. This work was excellent preparation (little did one know) for helping him when his wife developed cancer and died within 18 months. Her abandonment of him was painful for sure, but was probably less devastating because of the analysis of the genetic material regarding abandonment that had been worked through surrounding his analyst relocating his practice.

Dr. Moldawsky paper, “Telephone Analysis: Is it Possible? Answer—Affirmative,” presented clinical material on the termination of a case at a distance. His patient had a lifelong obsessional neurosis in which he was plagued by fears of thorns, splinters, and needles. He grew up with an intrusive mother who never understood why her son was so fearful. His father grew up in an immigrant family and although he was college educated worked as a foreman in a construction company and spoke the language of the workingman. His mother was very critical of his father and this analysand never dared express any anger towards her for fear
of rejection. The analysis helped him get in touch with those feelings. He expressed anger towards his analyst for long summer breaks and towards his mother for how she “made him into such a frightened kid.”

Although there was unfinished work, it was decided to work towards termination in the last year. He planned a permanent move to Italy, which would end the analysis at the end of the year. Termination feelings including separation issues, dependency issues, independent strivings, identification with his father, daring to be independent of his analyst, etc., were worked out in his analysis on the telephone due to the strong working relationship of this analytic dyad.

Moldawsky presented this case twice to his weekly study group. All members of the group were interested in whether telephone analysis was possible. Their work on this issue convinced them that the following circumstances were key to success: 1) there was a strong motivation for patient and analyst to continue the work, 2) there was an existing working relationship established during office sessions, and 3) there had been successful progress on transference-countertransference issues during face-to-face sessions.

The analysis was terminated after 5 years. This year, approximately one year after termination, he was visiting the United States and dropped in for a visit. As soon as he walked into the office he said to Moldawsky that the telephone is not as intimate, but it sure did the trick. Both Manosevitz and Moldawsky were concerned about whether affect would be different in telephone sessions than in office sessions. They both reported that in these cases, affect was similar in telephone and office sessions.

Zalusky noted that in this panel, both analyses were started in the office and shifted to the telephone after they were underway. She reported an unusual situation where an analysis was started over the telephone with the clear expectation that when the analysand moved (in a few months) to the city in which the analyst resided the analysis would continue in the office. In this circumstance, fantasies about each other are very important and must be analyzed. This is true when an analysis is shifted to the telephone, i.e., what new fantasies does the analysand develop about the analyst’s looks, place of analysis and activities of the analyst during the session and vice-versa. Zalusky also commented that we are seeing a new generation of analysands whose use of the telephone is ego syntonic i.e., much of their life is conducted on the telephone including many features of courtship. For this generation, sessions or a significant part of an analysis on the telephone may not be as strange to them as it is to their analysts. In keeping analysis current with the social milieu, we need to change. Zaluskoy stated, however, that she does not permit an analysand to have sessions using a cell phone while driving! This is one of many technical issues that need to be addressed as we develop more experience using the telephone in analyses.

Marty Manosevitz

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Living on the Edge: Narcissism, Restitution and the Culture of Violence

Chair/Discussant: Peter Shabad, PhD
Presenters: Christine C. Kieffer, PhD
Mark D. Smaller, PhD

The panel participants examined the influence of chronic narcissistic injury in shaping individual personality, including characteristic modes of relating to others, and also explored some of the ways in which these phenomena are manifested at the socio-cultural level, sometimes leading to political disturbances of tragic proportions.

Christine Kieffer presented a paper entitled, “Living on the Edge: Entitled Victims, the Restitutive Fantasy and the Schizoid Solution,” in which she described the nature of the restitutive fantasy of the “entitled victim.” Dr. Kieffer asserted that such individuals frequently display a relational pattern characterized by idealization of an unavailable other in the service of shoring up a fragile self-state. Such individuals may erupt in narcissistic rage when a sudden and traumatic de-idealization occurs, and may be mobilized when the idealized other cannot participate in the fantasy. These patients may appear markedly independent, often quite aloof and even isolated, but further examination reveals pseudo-independence. Dr. Kieffer maintained that such patients are actually highly dependent on the often primitive selfobject functions provided by the idealized other. While often presenting in consultation as highly related, there is, in actuality, limited capacity for intimacy because that would threaten the fragile nature of the idealization due to increased potential for narcissistic injury. Therefore these individuals must achieve a “schizoid solution” of distance in order to preserve connection with an idealized object. Thus the “entitled victim” stance is part of this self-protective strategy, which is intended to protect against re-injury but instead virtually guarantees it and blocks repair, since the idealized fantasy continues at the expense of other, more reliable forms of gratification and development. This fantasy often contains elements of union with an idealized parent, thus it is also a strategy to avoid loss and mourning, in the interest of retaining the internalized object. Dr. Kieffer presented a clinical vignette that illustrated the necessity for interpreting the restitutive fantasy along with the underlying schizoid core.

In “Stabilizing the Self Through Violence,” Mark Smaller presented a self-psychological perspective on socio-cultural aspects of violence. Dr. Smaller conveyed a touching humanity and perceptiveness as he described some of the parallels between person-to-person narcissistic rupture and the ways in which similar dynamics get played out both in the local as well as international community. Dr. Smaller started by presenting a candid depiction of a scenario in which he and a stranger had gotten into an argument on a subway train, disclosing the level of helplessness and anger that he experienced, and acknowledging that his response to this stranger was influenced by a narcissistic injury that had been dealt to him by a colleague earlier that day. He then illustrated his use of vicarious introspection in reflecting upon possible motivations for the stranger’s behavior, extending both this line of inquiry as well as his own self-analysis, in helping us to understand the maintenance of and meaning of violence as it occurs in adolescent gangs.

Dr. Smaller, who has been serving as a consultant to an inner city alternative high school, then extended his analysis of gang behavior to understanding the ongoing Middle East conflicts. He views engagement in violence as a means of stabilizing the self in response to the narcissistic disequilibrium engendered by helplessness, which many self-psychologists view as more disruptive than the experience of loss, anger, sadness or fear. That is, the origin of chronic narcissistic rage lies in the experience of utter helplessness in response to the “humiliating selfobject parent.” Dr. Smaller explained that such experiences of helplessness are unbearably painful because they threaten the very continuity of and existence of the self and therefore evoke the strongest emergency defense of the self in the form of narcissistic rage, which, in its extreme form, may be experienced in the form of homicidal or suicidal fantasies or action.

Peter Shabad, in discussing the papers by Drs. Kieffer and Smaller, observed that when one’s individual dignity is wounded, one closes in on oneself to protect oneself from further hurt. At the same time, there is a detachment from wishes that lead one to feel too narcissistically vulnerable with the consequence that one is passive with regard to pursuing those wishes in a more active manner. Dr. Shabad noted that “one still wants what one wants” and now, unlike in childhood, one must also undo the insult to one’s individual dignity, hence the idealization of the unavailable other. Dr. Shabad also speculated that the hidden idealization in the case presented by Dr. Kieffer might have had more to do with the patient’s depressed mother. In responding specifically to Dr. Smaller’s paper,
Dr. Shabad emphasized the preponderance of the moral stance of “strong is good and weak is bad” in those who have lived with shame all their lives. Dr. Shabad also underlined the distinction between respecting and loving patients who are entitled and angry—more specifically that one should not bypass angry manifest behavior by explaining it away as a function of frustrated selfobject needs—but to respect the anger as something substantive in its own right that was freely chosen by the patient. Dr. Shabad also interjected a note of caution with respect to attempts to empathize with the roots of violence, fearing that this might entail a risk of overidentifying and condoning those reasons of violence. Thus, he averred, we cannot negotiate with Al-Qaeda nor would have the employment of Martin Luther King’s nonviolent techniques have worked in Nazi Germany.

Christine Kieffer

**WHO IS ANALYSIS FOR? CHANGING VIEWS ON ANALYZABILITY**

**CHAIR:** Linda Marino, PhD  
**PRESENTERS:** Linda Marino, PhD  
Emily Ets-Hokin, PhD  
**MODERATORS:** Marian Tolpin, MD  
Bruce Herzog, MD, FRCP(C)

The question “Who is analysis for?” lay at the heart of this panel. Two papers by candidates in analytic training addressed the crosscurrent of conflicting needs and requirements that contemporary analytic candidates face when assessing analyzability and selecting a control case.

Marian Tolpin opened the panel with a brief discussion of her concept of the “total transference,” with its emphasis on the “forward edge”—i.e., the potential for healthy development—along with the “trailing edge” of pathology. She noted that both candidates intuitively addressed the tendrils of healthy strivings that were at times almost indiscernible in the midst of serious symptoms. Dr. Tolpin utilized the rest of her time for questions and answers at the end of the panel.

Linda Marino’s paper, “Is This Patient ‘Analyzable’? —The Candidate’s Dilemma,” used clinical material from two control cases to explore the issues that arose when attempting to select a “good,” i.e., analyzable, case for analysis. The first case focused on the initial presentation of Colleen, a person who appeared to be falling apart and whose potential for growth was almost obscured by the presenting picture. Colleen’s primary symptom, that she hated her hair and it ruined her life, showed a serious cognitive distortion. She was prone to fragmentation and wanted immediate relief. However, Dr. Marino found Colleen likeable and thought she could work with her. She was intelligent, motivated, and emotionally expressive, although she didn’t seem to understand her feelings. With her supervisor’s support, Dr. Marino offered her analysis.

In the rocky opening phase, Colleen was able to use the analyst to recover from and mitigate her fragmentation. With this glue holding her together, she developed the capacity to look within and explore her feelings, memories, and dreams. The transference “broke” her free-fall and provided a “usable,” reliable object to help her restart a process of interrupted integration.

The second case focused on the disjunction that arose when Dr. Marino’s supervisor concluded that a patient was unanalyzable. Soon after entering analysis Sean, a brilliant doctoral student in his mid-40’s, manifested ominous symptoms associated with his internal state, which he described as a “fear of falling into a void.” Eventually, with the agreement of her supervisor, Dr. Marino changed supervisors and continued the analysis.

Sean’s struggle allowing Dr. Marino to know him is the crux of this analysis. He has described the “iron-clad survival chamber” that he developed to protect himself, as well as his childhood belief that “not only does nobody get me; I don’t fit in the world, and the world has no place for me.”

These two clinical situations evoked Dr. Marino’s interest in the question of analyzability, usually discussed in connection with a list of developmental criteria, such as ego strengths, object relations levels, the capacity for tolerating frustration, separation, delay and anxiety, etc. Ultimately she did not rely on these selection criteria. Instead, Dr. Marino used her own subjectivity—her counter-transfer response—as an important source of information. She liked Colleen, saw her likeability as a strength, and thought that they could make a connection. With regard to Sean’s ominous symptoms, she intuitively felt that he wanted to be known, despite his fear. Cases like this indicate that the question of analyzability is an ongoing process and that candidates in training—in the midst of a crosscurrent of conflicting needs and demands—may play a role in pushing the boundaries of analyzability.

“The Challenge of Analyzability; or A Good Man is Hard to Find,” by Emily Ets-Hokin, used clinical vignettes to explore the issues that arose in this process. An advanced candidate at the Toronto Institute of Psychoanalysis, Dr. Ets-Hokin described her search for her third and final control case, who was required to be a male patient. Her paper outlined her selection of a patient who was in crisis and presented with a constellation of symptoms, which included...
compulsive cross-dressing, OCD, and a history of learning disabilities. He did not fit the idealized YAVI (young, attractive, verbal, intelligent) profile of the conventionally analyzable analysand, nor did he apparently “fit” with this beleaguered candidate’s wish for the “perfect” control (having previously treated “difficult” control patients).

Despite the fact that this patient’s troubles were deeply embedded, Dr. Ets-Hokin outlined her observations of his strengths, such as creativity, a capacity for self-reflection, and a motivation—if not urgency—to address his turmoil. Another important consideration was the fact that she had already established a ten-year course of supportive therapy with him in which an engaged relationship and mutual trust had emerged. Further, the patient was able to utilize the treatment in a stabilizing and supportive manner and seemed to have a reasonable chance to benefit from an analysis, potentially deriving more help from an analysis than from a less intensive therapy. Further motivation to help him was driven by the candidate’s own need for a psychoanalytic control case, thus encouraging her to wade in waters that might otherwise be avoided in a more traditional approach. Dr. Ets-Hokin described a clinical vignette in which she was challenged to question the patient’s analyzability, her own thinking in the form of the “analytic third,” and the unfolding transference/countertransference matrix. Herein, she illustrates the containing and illuminating paral- lel process of supervision, which helped to propel the analytic process forward, thus revealing the expanded application of psychoanalytic theory and technique.

Bruce Herzog’s discussion, “To Analyze or Not to Analyze,” emphasized that whether a patient is analyzable is dependent on the capacities and limitations of the therapist as well as on those of the patient, noting that the patient–therapist “fit” is the most important factor in patient selection. He concluded that previous notions about analyzability are no longer applicable to modern psychoanalytic practice because they do not take into account salient changes in psychoanalytic theory, including the contribu- tion of the therapist to the functionality of the analytic dyad. Dr. Herzog ended by stating that the best indicator of therapeutic success currently available to us, as illuminated by Drs. Marino and Ets-Hokin in the preceding examples, may be the intuitive use of the analyst’s self.

_Linda Marino_

**Tangos and Bullfights: New Dynamics in the Arena of Psychoanalysis**

**Chair:** _Rosa Maria Rigo, PhD_

**Presenters:** _Linda Rudy, PsyD_

_Emily Ets-Hokin, PhD_

**Discussant:** _Linda Marino, PhD_

This panel was comprised of two papers, “Bullfight: Psychoanalysis in the Arena of Sex and Death” presented by Dr. Linda Rudy and “Being from the Inside Out: Contemporary Reflections on Dance and Psychoanalysis” delivered by Dr. Emily Ets-Hokin. Dr. Linda Marino followed with an integrative and thoughtful discussion of these seemingly disparate topics that she entitled “Sex and Death in the Afternoon—Followed by Movies and Dancing”.

In Madrid’s Plaza de Toros the bull always dies, his fate as inescapable as that of Oedipus. In the face of mortality, the behavior and the spirit of both bull and mator create what is not considered a sport, but a tragedy performed in three acts. The corrida is not reducible to only an act of violence or animal cruelty that must be protested. One must also consider the event’s cultural context, the concept of nation, gender issues, intimations of sexual perversion, and the function of theater and spectacle. Being enacted in the shadow of impending death uniquely heightens these concepts.

The corrida brutally deprives the viewer of defenses against the knowledge of death’s inevitability even as the undercurrents of sexual play seek to maintain them in much the same way as the muleta’s enticing movements distract the bull from the freshly sharpened sword that lies...
beneath it. The bullfight becomes an arena in which the complementarities and contradictions of sex and death can be richly explored if we dare to look beyond the blood in the sand.

Dr. Ets-Hokin’s presentation integrated dance and psychoanalysis through the use of film while interweaving thoughts from dancers, choreographers, psychoanalysts, and clinical vignettes. Drawing upon dance film from Baryshnikov to *Stomp* and writers such as Winnicott and Hoffman, she depicted the ways in which dance as an art form and metaphor have served to inform the art and discipline of her psychoanalytic practice.

She put forth the idea that despite the natural cross-fertilization between the arts and psychoanalysis, dance as an art form has been underrepresented. This is noteworthy since dance has a universal presence and is an art that is engaged in across cultures, time and life stages—it speaks many languages in its nonverbal expression. It is the language of the body that is spoken by all who have the rhythm of a heartbeat and the capacity to move through space. Psychoanalysis and dance live centrally in the “here and now.” At the heart of both dance and psychoanalysis is the goal of self-expression and communication.

Dr. Ets-Hokin shared a number of dance principles or “lessons” learned at the “barre” (i.e., her own experiences as a dancer and choreographer) that have served to inform and enrich her engagement with her patients. Intersecting with psychoanalytic theory, she covered topics which included, Being in the Moment, The Dialectic of Being and Doing, The Power of Imagination, Grace, Center, Falling, Procedural Memories, Discipline and Freedom, Multiplicity of Experience, Relational Improvisation and the Area of the Nonverbal.

In her discussion of the two papers, Dr. Marino utilized her own primarily clinical focus. She commented upon the matador’s narcissistic display and the purpose this serves for him. In this brush with mortality, the matador demonstrates his potency and prowess as he dominates and kills the bull and emerges victorious; he has cheated death, and is (in fantasy) immortal. The rage and defiance against death expressed in the power of an aggressive assault against a beastly enemy is primarily a masculine (or hyper-masculine) solution. Dr. Marino raised the question of how women achieve power and a sense of immortality. She observed that one “feminine” expression of power is the creation of life. She raised additional questions: Must men have an enemy to defeat? Do women, as a whole, channel things differently, even if culture gives them equal permission? In answering this question, Dr. Marino turned her comments to Dr. Ets-Hokin’s presentation, which she observed had a different focus but shared some similarities with Dr. Rudy’s paper.

A bullfight and a dance are both performances that take place on a stage before an audience. They take place in the nonverbal sphere and are powerful forms of communication and self-expression. They also are important transmissions of culture. She observed that because dance is inherently ambiguous and takes place in an intermediate space between dancer and observer, both partners in the communication engage in a creative act. The dancer’s movements cue certain responses in the audience, and these responses in turn have an impact on the dancer—in this way it becomes a dialogue. This relational aspect of dance is an apt metaphor for psychoanalysis. Dance, like analysis, happens in the “here and now” and is a process, taking place in a “potential space.” The paradoxical limitation and expansiveness in time and space elicits concepts of mortality and immortality, which the dancer embodies. The “last dance” is a euphemism for death; the self-expression and vitality of dance are a temporary transcendence of mortality.

Dr. Marino observed that self-expression, such as through the arts, offers a different kind of solution for the desire to transcend mortality—whether it occurs in creative efforts that result in a tangible product such as a sculpture or a book, or in an ephemeral performance such as dance.

*Emily Ets-Hokin and Linda Rudy*
The Day-to-Day Workings of Psychoanalysis: The Routine, The Exceptional, and the Uncomfortable

Chair: Linda B. Sherby, PhD
Presenters: Karen E. Baker, MSW
Robert E. Hooberman, PhD
Linda B. Sherby, PhD

This panel addressed the question of what happens during the day-to-day workings of psychoanalysis that results in many sessions being simply routine, while others are either exceptional or uncomfortable. Using process material that was routine, or exceptional, or uncomfortable, each presenter put forth his or her understanding of what was—or was not—taking place within the treatment that resulted in the analysis being in one of these three places. The panel illustrated that it was at the point of greatest emotional connectedness within the transference/countertransference paradigm that the treatment was most likely to move from the routine to either the exceptional or the uncomfortable and that the uncomfortable might well give way to the exceptional.

Linda Sherby presented process material six months into the analysis of a professional woman who had previously been addicted to drugs. Both parties in this analysis appeared to be doing their part. The patient talked freely, presented rich material including a dream, and reflected on what she had to say. The analyst listened, responded, and interpreted. But something was definitely missing. The analysis was plodding dutifully along with each participant involved in her respective tasks with no sense of genuine connectedness. Rather, patient and analyst were like two celestial bodies floating in space, neither coming together nor crashing apart.

Sherby addressed the question of what was happening in the transference/countertransference paradigm that kept the treatment in such a safe, routine place, without any spark or sense of aliveness. She saw the difficulty as stemming from three sources. The first was the marked difference in the patient and analyst’s religious beliefs that inhibited the latter’s comfort in making confrontational interpretations, especially given the analyst’s own need to be tolerant and accepting. The second was the patient’s sadomasochism and the analyst’s concern about becoming more passive position vis-à-vis the patient. The third was the patient’s defensive stance against her own neediness and the analyst’s collusion with that defense so as to avoid either being swallowed up by the patient or reawakening the analyst’s own neediness. In each of these points, it was the analyst’s own history and issues, in interaction with the patient’s history and issues, that led to a reluctance to directly confront and bring into the room the unspoken transference/countertransference dynamics.

Robert Hooberman reached a similar conclusion in his paper on the uncomfortable hour that presented an enactment that occurred between himself and a patient in her second year of analysis. This patient was subject to affect storms, excessive overeating, and pervasive self-hatred. She had little self-understanding and no ability to maintain control over herself, despite the numerous health difficulties that had arisen because of her obesity. In the process note that Hooberman presented, he became angry with the patient for her inability to control herself, and came across in a scolding, punitive manner. The patient, raised in a sadomasochistic world where love was supposedly conveyed through beatings, happily accepted his criticism, while he was left backpedaling and trying to understand what had occurred. What he came to understand was that the patient and analyst’s respective pathologies intersected and acted on each other. The similarity in some aspects of their background and Hooberman’s own conflicts around issues of indulgence, made it difficult for him to be consistently empathic to his patient. Additionally, he realized that at this point in his life he too had “bitten off more than he could chew.” Just as the patient had trouble discerning appropriate portions of food, the analyst was not judiciously choosing what was enough in terms of professional commitments. He was critical of the patient for his selfsame shortcomings.

In a subsequent interaction, Hooberman was able to make use of his self-analysis, as well as his understanding of his own history and dynamics, to forestall an enactment and enable the patient to gain greater insight. In this instance he was able to tell the patient about his annoyance at her unreasonable demands, knowing that his annoyance stemmed partially from his feelings about his father’s unreasonable demands, and thereby helping her to recognize a similar dynamic between herself and her mother. Hooberman concluded that our work as analysts would be better served if we could look at our differences and similarities as points of interest, instead of points of contention.

Karen Baker discussed an exceptional hour in the treatment of a gay man who had been in treatment for 14 years and who used his obsessional style both to control the analyst and to deaden his desires and excitement. On the day presented, Baker knew that something had shifted as soon
as she saw the patient’s colorful shirt, vibrant blue instead of his standard white. The color was a metaphor for his richer, more colorful emotional world. There was excitement in the room, excitement that led to feelings of aliveness coupled with a mutual sense of hope and possibility.

In the weeks prior to this hour, patient and analyst were discussing the advisability of increasing the frequency of his analytic sessions. He expressed his fear that every relationship involved a winner and a loser. For him to increase the frequency of his sessions felt as though he was submitting his will to that of the analyst. This is tricky ground for any treatment for although the analyst might well want her patient to increase the frequency of his sessions, she must know both herself and her patient well enough to back away from her own desire and allow the patient his. Baker’s ability to be non-controlling enabled her to navigate these treacherous waters effectively. When the patient realized that the choice was his alone he was able to move beyond his competitive feelings and his sadomasochistic view of relationships. A new level of understanding emerged that left him feeling cared for and respected. His relief in this connection, which involved neither submission nor loss of self, opened the door to new possibilities.

The panel concluded that it is when the analyst is able to go to a place of danger with a patient, a place where the unconscious of both parties meet and collide, that the treatment can progress beyond the routine, making way for either the exceptional or the uncomfortable.

Linda Sherby

**Traumatizing Impact of Culture**

**Presenters:** Etty Cohen, PhD  
Giselle Galdi, PhD

**Discussant:** Robert Prince, PhD, ABPP

All of human knowledge, beliefs, language, institutions, art, and techniques are part of the idea of culture, an all encompassing and ever-present phenomenon. Inevitable, it will play a major role in the analytic work. In this panel, two authors, from Hungary and Israel, describe their unique perspectives on being part of a new culture: American Society. Their different cultural backgrounds afford them a special vantage point of bearing witness to cultural processes that become especially intensified within their analytic dyads.

Dr. Etty Cohen’s paper, “Enactments and Dissociations Driven by Cultural Differences”, argues that therapists’ cultural biases are powerful in fostering the countertransfer-ence, and thus promoting traumatic reenactments. One of the undeniable facts of psychoanalysis is that radical cultural differences between therapist and patient may become part and parcel of traumatic residues in their own way and lead to dissociation for either or both partners in the dyad. From Bromberg’s point of view, at the time an enactment begins (regardless of its initiator), the analyst cannot be immediately attuned to the shift in here-and-now reality. She inevitably becomes part of the dissociative process. As an Israeli, Cohen has experienced this kind of interlocking dissociation as a direct consequence of cultural or ideological differences in her own work. Joining unconsciously in a momentary mutual identification with one another in terms of being different, and not being recognized as such—shared trauma—can become the basis for a mutual healing experience.

Living in multicultural society intensifies mental states of sharing dissociative states of different intensity and duration. Cultural acclimation makes routine the moment-to-

moment employment of certain commonplace judgments and (largely stereotyped) perceptions. Experiences and perceptions that do not fit the cultural pattern (or the economic prejudices, or the particular value system) go unattended. Thus they create their own potential for creating communicative mismatches. These mismatches, in turn, are fertile ground for traumatic enactments going unattended (which at a sufficient level of intensity can lead straightaway to re-traumatization). It is not merely that having one’s cultural assumptions challenged leads directly to anxiety and fears of ostracism. It is also germane that cultural embeddedness contains a degree of “normal” dissociation, which becomes potentially problematic when one is dealing with traumatized patients.

Clinical illustrations of working with New York City teenagers who have survived the wars of inner city life and Israeli teenage soldiers who have survived the wars of the Middle East demonstrated how social-cultural differences entering into the therapeutic dialogue led to the emergence of enactments and dissociations.

In her paper, “The Analytic Encounter: A Scene of Clashing Cultures,” Giselle Galdi referred to Karen Horney, the culturalist psychoanalyst. Horney made sense of her own loss of her culture and the abrupt entering into another by studying the cultural aspects of psychoanalysis. The traditional European culture Horney left behind was more streamlined. It idealized altruistic qualities, self-interest was often equated with being selfish, narcissistic and helpfulness for the other was highly romanticized. Streamlining is a Horneyan defense mechanism; a process in which the person represses thoughts, needs, feelings and sensitivities about the self that contradict idealized values. The idealized trends then become the predominant orientation toward life.

To the immigrant Horney, American culture appeared to idealize opposing values of power and love, cre-
In traumatizing times there is an increased potential for enactments of the dynamics of the divided culture. Leading up to the Iraq war, Dr. Galdi, a political refugee from Hungary, realized that many patients in her practice were demonstratively pro-war. Uncharacteristically, there was a hostile rejection of attempts at analytic inquiry. Some patients felt entitled to have strong, unexamined opinions, because they were American. 9/11 powerfully served as a streamlining force against external aggression for many patients. They felt that Dr. Galdi, being a foreigner, had no basis of understanding their points of view. The analyst became the recipient of externalized, hated, helpless, limited aspects of self-experiences. In her presentation Dr. Galdi illustrated these processes with the case of a Vietnam combat veteran, a first generation American. Dislocating war and emigration experiences were the main themes of cultural experiences where the patient and the analyst initially came together as well as where their alliance ruptured. In joining the mainstream, the people who are innocent about war, the veteran dissociated himself from his Vietnam trauma, as well as from the analyst, a witness to the war trauma. The victorious American forces in Iraq made the patient feel free to experience his proud identification with being an American, powerful, fearless, and mighty. The process of further accessing traumatic war history was vital in addressing the rupture in the analytic relationship.

Robert Prince, in his appreciative discussion titled, “Found in Translation,” described both these papers as paying homage to and enriching Ferenczi’s confusion of tongues theory. He addressed culture through the metaphor of fish in water and trauma in terms of the severing of social ties, disruption of meaning and de-symbolization. He examined the cases described by Drs. Galdi and Cohen in terms of the parts of the self that have been made inaccessible. Although therapy is constituted by the bridge that is built between individuals and worlds, each person in the encounter has to accept the limits of the others attachment and engagement, the part of the self that is potentially available and the part which remains pierced by trauma. Ultimately therapy becomes a dialectic of hope and despair. The struggle to resymbolize the world, i.e., find meaning in it, has to start with the therapist’s willingness to build a bridge to place there is no water, where life has no meaning, and to come back.

Robert Prince
Transgenerational Haunting

Presenters:  
Fonya Lord Helm, PhD, ABPP  
E. Lisa Pomeroy, PhD  
Bertram P. Karon, PhD, ABPP

Chair:  
Fonya Lord Helm, Ph.D., ABPP

Transgenerational haunting, an evocative phrase indicating the transmission of trauma from one generation to another, was first used by Abraham and Torok, two French analysts, according to Apprey (1996, 1998a, 1998b), who has found the concept useful in his studies of the intergenerational transmission of trauma throughout history. In this panel, three psychoanalysts discussed different aspects of the transgenerational haunting. The first paper discussed the transmission of trauma in psychoanalytic institutional life, and the second and third papers discussed the intergenerational transmission of trauma in individuals.

Fonya Helm presented “Transmission of Trauma in Psychoanalytic Institutions.” Transgenerational haunting has been ever present in psychoanalytic institutions, starting with Freud’s personal traumata: the loss of his brother Julius before he was two years old, the loss of his nanny, who was fired because she stole, the loss of his home in Moravia when he was three, and the loss of his home in Leipzig when he was four. The paper also focused on the kinds of trauma that are especially hard to metabolize: trauma that includes the family secret or phantom, mourning that is complicated by the intrusion of conscious sexual wishes, a secret alien identity, and the “crypt” that “entombs’ an unspeakable but consummated desire” (Abraham and Torok, 1994). The paper also focused on the trauma of migration experienced by many analysts. Migration not only disrupts the sense of identity, but also causes bewilderment and confusion. The paper also mentioned the transmission in psychoanalytic institutions of a 19th century European educational system that relied on authority, rather than empirical data.

The paper next provided examples of the inducement of feelings of bewilderment and disorientation in members of psychoanalytic organizations. It concluded with an overview of the way the structure of psychoanalytic institutions lends itself to the transmission of trauma.

Lisa Pomeroy discussed a case entitled “‘The Devil Made Me Do It’: Dissociative Disorders.” An outstanding, brilliant eighteen-year-old male college student, who presented a caring and competent “self” to the world, uttered the statement that he could murder and not deserve or receive any punishment from a judge, jury or society. If he murdered the murderer would not be “him” and, therefore, no punishment would be given. The targets of his murderous wishes were his mother, father and the psychoanalytic therapist. John suffered from a dissociative disorder and post-traumatic stress as a result of reported childhood abuse. He had no internal contact with other aspects of his “self” that were in opposition to his murderous omnipotent view. John therefore behaved violently towards his family members who secretly and passively did not contact authorities or try to stop his escalating acting-out.

John’s father, a well known, gifted, outstanding and wealthy man had a secret family life that included physically abusing his two children “when they were out of control.” In addition, his mother reported that she also was physically abused by her prominent husband and John’s father. John’s mother reportedly had been violently abused as a child by her own father. All kept the family violence a secret.

The family was investigated three times by child protective services after teachers made reports. There was no action taken and abuse was not believed. The family denied any abuse or violence in the family. They maintained their wealthy, outstanding illusion as they went about making
a genuine contribution to society. The father, due to success and fame, never received consequences for his violent behavior. He, however, never lost control outside of the home. The secret was kept within the house. When John became eighteen (no longer a child) the father admitted to some of the accusations of John and John’s mother of the secret violence at home. They sought help.

What was transmitted intergenerationally in this case was secret violence which was seen in three generations. In addition there was a mutual cover-up of shameful wishes and behavior. Self-hatred and contempt were obvious in the two generations. But, of greatest concern was the absence within John of guilt, responsibility and concern about harm to others and societal punishment. John’s violence initially occurred secretly as if no one would ever know or care. There was no superego prohibition within John’s conscious awareness that violence or murder were wrong. As he approached adulthood John’s behavior escalated.

As the case unfolded it became clear that John was acting–out with the police beyond the limits of the family home. On one hand he verbalized the transmitted intergenerational message that violence did not result in punishment or consequences; on the other hand he was stimulating police involvement in the family. John escalated to potential murder, breaking the law, involving the police and threatening non–family members. He repeated the statement “It is not me.” Treatment was an attempt to help John think about the meaning of his behavior and utilize symbolic language instead of action.

Intergenerational trauma and violence were not expressed symbolically or verbally as John began at The Healing House. Treatment had to help John utilize words and fantasies instead of action. Some of the questions raised included: Is John amenable to treatment or will his violence be acted-out murderously in society? Will treatment help? Is it possible for John to be in contact with dissociated parts of his mind that limit him or is he desperately driven so that everyone discovers what has been hidden and secret? If he does act-out will he destroy himself as well as others? Is his seeking treatment a genuine wish to be healed?

Bertram P. Karon discussed a case entitled “Transgenerational Haunting: Hell is a Lake of Burning Fire.” “I will burn forever in a lake of burning fire.” That was his deserved fate, Hell, as described by his fundamentalist ministers as well as his mother. The patient was a psychotic depressive in his 60’s, whose first psychotic depression had occurred in his 20’s. He was “cured” by insulin comas, and consequently had psychotic depressions every one to three years for the rest of his life, as well as “spontaneous” panic attacks. Despite that he had a successful career by lying to his employers, telling them that his hospitalizations were for physical problems. He had been assured that with the best of modern treatment—medication—his symptoms could continue to be reduced by 30%. Luckily, he entered psychoanalytic treatment which led to the uncovering of his mother’s trauma, and his lasting recovery.

He had been beaten more than his brothers, sometimes unfairly, by his mother, but that was all right because she was religious, and his beatings were not nearly as severe as those she and her sister had received from his grandfather, a self-proclaimed minister and “saint.” His aunt had burned to death as a teenager, accidentally spilling gasoline from an old-fashioned gasoline iron on herself while the two girls were doing laundry. His mother had quarreled with her sister, his grandfather came downstairs angrily because they were not allowed to quarrel, and the sister accidentally spilled the gasoline on herself. His mother had shown the picture of the gruesomely burned corpse to him frequently, but not to his brothers. His mother treated the patient like the bad part of herself, projecting her feelings of guilt over murdering her sister. But of course it was the terrifying “saint” who was really responsible, a thought more unbearable to the mother even than feelings of guilt.

Fonya Helm and Bert Karon
FATHERS AND SONS (AND DAUGHTERS): NEGLECTED ASPECTS OF PSYCHOANALYTIC THEORIZING

PRESENTERS:  SUZANNE HAAS-LYON, PhD
HANNA TURKEN, BCD, NCPsyA

CHAIR:  DORITA MARINA, PhD

In her paper “Siblings at the Edge of Psychoanalysis,” Dr. Haas-Lyon explored how the failure of psychoanalysis to recognize the significance of sibling relationships has contributed to constricting diversity within psychoanalysis, and has hampered cross-fertilization with other cultures and disciplines. She suggested that bringing siblings from the edge of psychoanalytic theory and practice toward the center can further cultivate the mutuality we seek for ourselves, our patients, and the wider culture.

Sibling relationships are at the foundation of peer relationships, and they often vitally affect strivings and intimacy. Peer relationships characterized by collegiality and enlivening acknowledgment of difference require the assumption that each person (or group) is recognized as unique and has a valued place. Through presenting current theory and utilizing examples from psychoanalytic culture and training, as well as clinical material, Dr. Haas-Lyon elucidated why and how unresolved conflicts related to siblings may preclude the formation of this belief.

Juliet Mitchell’s Mad Men and Medusas: Reclaiming Hysteria (Basic Books, 2000) clarified that sibling relationships are intensely ambivalent because the sibling is a replica of the self. As a replica, she is both a vital mirror/object of identification—the yearned for “twin”/soulmate—and a potentially annihilating replacement who has a place or position the child cannot occupy (younger, older, opposite gender, etc.) The threat of being displaced produces annihilation anxiety, which precipitates regression to the maternal dyad, or the longing to be the mother’s only one. If the sibling threat is experienced as traumatic, hysteria results, which involves repeating the trauma.

What maintains the hysterical belief that one will be either annihilated/displaced or annihilating/displacer? Dr. Haas-Lyon suggested that, among other factors, a pathogenic form of “oedipal sibling triangle” (Sharpe & Rosenblatt, Journal of the American Psychoanalytic Association, 42, 491-523, 1994) often underlies hysteria. In such triangles, a child is recruited into a spousal position by a parent, and becomes the primary Oedipal rival of his sibling(s) as well as the other parent. Each child experiences that the only possible positions are “in” or “out,” rather than that each has a valued place, and both suffer intense guilt, envy, and rivalry.

Dr. Haas-Lyon pointed out that Freud was his mother’s chosen son in Oedipal sibling triangle(s). Further, he had a brother who actually died. The expulsions of Freud’s colleagues/followers who diverged from orthodoxy, which had a stultifying affect upon psychoanalysis, can be largely understood as reenactments of his sibling trauma.

Eisold (International Journal of Psychoanalysis, 75, 785-800, 1994) argued that diversity and creativity have been inhibited in psychoanalytic institutes largely because belonging and securing a place has been associated with powerful pairs, particularly that of training analyst and candidate. Dr. Haas-Lyon proposed that the pairs, particularly when they keep the organization at bay, resemble Oedipal sibling triangles, contributing to the “radioactivity” Kernberg describes as surrounding them. While dyads are inherent in our work, when sibling transferences and countertransferences, organizationally and in individual analyses, are not recognized, an atmosphere of guardedness, exclusivity, rampant competitiveness, and stifling of creativity and diversity is stimulated.

Has psychoanalysis longed to be the only one, as do so many of our patients? Dr. Haas-Lyon concluded that the further cultivation of mutuality involves bringing siblings to a position that reflects their significance.

The clinical material in Hanna Turken’s paper, “Transitions: A Clinical Observation On The Role Of The Father—Therapeutic Implications,” addressed the child’s developmental need of the preoedipal father as a key issue in personality integration. The process entails separation from the mother and transference of attachment to, and separation from, the father. The patients discussed in this paper have a hostile attitude toward their mothers and a mostly benign attitude towards their fathers, whom they perceive as weak. Their hostility towards their mother binds them to her. The father’s weakness makes it too risky for them to move away from mother.

As a result of this pattern of attachment/separation, they engage in an internal journey between mother and father. They appear to be in an unresolved state of transition, going nowhere, experiencing also a constant feeling of vulnerability and failure. This state of transition manifests itself in different ways with different patients. A.’s complaint is a feeling of being caught between two poles. He came into treatment to resolve his bisexuality. B. experiences herself as having no neck. When feeling fat she feels...
close to mother, and when feeling thin she feels close to father. She wanted to deal with an eating disorder. C. is in a tunnel moving towards a light he can see but cannot reach. Dissociative feelings make him fear that he could lose his mind. D. keeps losing the hold on her mother’s hand. She has wonderful sex with all the men she meets but a sense of panic prevents her from establishing a long-lasting relationship. E. feels he is a loser because women that love him leave him. F. feels that he has no backbone. He finds himself compulsively cheating on the women he professes to love.

These patients were differentiated enough from their mother, but could not attain personality integration without bonding, communicating and separating from the other, the father. It was through the communication with the therapist as the other that the fear and hostility towards the mother diminished and as a result self-expression and self-trust developed. What is being considered is the child’s drive towards selfhood and self-definition, a breaking away from the mother and movement towards the outside. It is here that he needs someone else to guide him and it is here that the therapist-father plays a key role. The need as expressed by my patients was for interactions that would lead to mastery and containment of their emotions, which in turn would lead to expansion of their potential, as well as to realistic striving towards their goals.

Suzanne Haas-Lyon and Hanna Turken

Beyond the Clinical Dyad: Intergroup Dialogue

Presenters:
M. Lydia Khuri, PsyD
Jon Hanwell Riker
Marsha Aileen Hewitt, PhD

Chair:
William A. MacGillivray, PhD

In this paper, “Psychoanalysis and Experiential Education: Working with Affect, Empathy, and Resistance in Intergroup Dialogue,” Dr. Khuri addressed working with the affective dimensions of intergroup dialogue. Intergroup dialogue is a form of intentional, small group engagement based on the democratic principle of shared and equal participation in civic processes. In higher educational settings, 12-16 students from different social identity groups come together to address inter- and intra-group similarities and differences, historical and contemporary conflicts, and ways to consider the implications of their learning on issues of social justice. Since its pedagogy lacks a framework for working with feelings, she proposed one based on psychoanalytic principles and technique. This model provides ways 1) to foster an overall positive intergroup dialogue experience; 2) to work effectively with resistance and negative affect as integral and not subversive to positive intergroup interactions; 3) to attend to the force that ambivalence exerts on intergroup interaction; and 4) to manage facilitators’ affective reactions.

Two tensions regarding change underlay working with affect. Clinicians and educators must justify the work of engaging others in processes of change that entail distress and challenge the status quo. Also, ambivalence creates a tension in the dialogue. On the one hand, participants are drawn toward wanting to learn about and relate more authentically to self and others. On the other, participants are pulled to feel secure in what is already thought to be known and predictable even as it is limiting.

Like psychotherapy, the affective layer in intergroup dialogue is not simply a by-product of engagement but both motivational and integral. Affective engagement, that is the process by which we come to understand who and what is important to our goals and projects, is the relational matrix in which clients and students create new levels of understanding, ways of relating, and ways of taking action in the world. Several principles support effective management of this process: the need to build trust; a particular facilitative attitude, including empathy; a developmental, phase-specific framework; thoughtful use of self-disclosure; and the idea that intellectual understanding is not enough for optimal learning and change.

The focus on trust as an on-going process within a developmental context supports fostering an overall positive intergroup dialogue experience. Trust, as a primary condition for relationship, supports participants’ ability to stay authentically engaged even when the dialogue gets tense, confusing, unpleasant, injurious, or hopeless. Through an empathic stance, we attend to students’ potential distress and ambivalence, which helps to reframe resistance and negative affect as central and not subversive to positive intergroup interactions. The use of self-disclosure presses us to consider how our own subjectivities affect the dialogue. Effective self-disclosure requires facilitators to consider how our own subjectivities affect the dialogue and how manage our own reactions. The developmental framework provides an understanding of how group processes unfold and allows us to gauge the quality of students’ sharing and inquiring in relation to the particular intellectual and affective tasks of each stage. Finally, the above principles support working toward intellectual and affective integration of the material necessary for optimal change.

John Hanwell Riker, in “Psychoanalysis and the Social Unconscious: What Psychoanalysis Can Learn from Nietzsche, Heidegger, and Foucault,” discussed the importance of understanding the philosophical background to psychoanalytic thought. Psychoanalysis has as its aim the
release of the psyche from unconscious personal dynamics that limit its life and liveliness. Yet, human beings suffer debilitating limitations in their abilities to act as spontaneous, individuated agents not just from unconscious personal psychopathology; but also from unconscious social forces. These unconscious social forces constitute an “undynamic unconscious” for they impose themselves without noticeable pain or trauma, do not involve repressions, and can be uncovered without working through defenses or resistences. This paper explored these issues utilizing the insights of three philosophers, Nietzsche, Heidegger and Foucault, who have a unique bearing on the psychoanalytic project.

The central theme of Marsha Hewitt’s paper, Subject/Object, Individual Society: The Two Logics of Psychoanalysis,” was the relationship between psychoanalysis and democracy, or the ways in which psychoanalysis as a theory and a therapeutic practice cultivates democratic relationships and democratic minds. From this perspective, psychoanalysis must be considered as a social theory as well as clinical practice, which Freud and many of his contemporaries realized and advocated until the Second World War. Since then, psychoanalysis has severed itself from its activist roots, showing little interest in expressing itself as a critical voice for social and political change.

The paper considered the work of Cornelius Castoriadis for whom “gaining knowledge of the Unconscious and transforming the human subject” is entirely consistent with questions of freedom and philosophy. As psychoanalysis generally fails to seriously consider social and political questions, so also do democratic theorists fail to consider how human beings become emotionally capable of and interested in creating democratic forms of life that are sustained and encouraged by democratic institutions and egalitarian social relationships. Here the work of psychoanalysts such as Peter Fonagy, and his theory of “mentalization” becomes extremely important in thinking about how individuals become critically self-reflective, a necessary condition of a democratic mind.

In conclusion, psychoanalysis and democratic theory must take each other into consideration and enter into a dialogue whereby each illuminates and deepens the insights of the other. In this way both psychoanalysis and social theory gain a greater understanding of the complex relationship between individual and social identity formation.

Lydia Khuri and Marsha Hewitt
A PSYCHOANALYTIC CONSIDERATION OF RACISM’S TRAUMA

This paper explored the particular trauma of racial discrimination from a psychoanalytic perspective. Comprised of a theoretical statement and two illustrative case examples, the paper elucidated the under-recognized yet profoundly damaging impact of even “minor” incidents of the experience of discrimination. The paper isolated key features of such discriminatory gestures and enumerated their psychological toll. Central importance was attributed to the annihilatory threat, which is always implicit, sometimes explicit, in instances of racial discrimination. The dynamics of post-traumatic stress reactions to seemingly “minor” incidents of racial discrimination was examined in an attempt to illustrate how these may have profound, apparently disproportionate effects on victims of racism.

Two cases were presented for illustration. Case I was an African-American woman in her early 30s, a physician who was chronically depressed and isolated. She sought and was referred to a psychoanalyst who was also of African-American descent because she intuitively believed that this credential was required to understand her experience, even though she was not specifically focused on the effects of any racial discrimination when she entered treatment. The course of treatment, which spanned three years, involved a gradual increase in sense of trust with an attendant increase in her ability to articulate details of emotional trauma she had experienced over the years of her life. A specific connection between her experience of multiple discriminatory experiences and a pervasive sense personal annihilation was crucial in the course of her treatment.

Case II was an African-American journalist, also in his 30s, who was, while functioning on a relatively high level due to his keen intelligence, profoundly schizoid and paranoid. He came to treatment due to chronic social isolation, difficulty completing work assignments up to the level of his ability and a concern that he might be “crazy” without realizing it. The treatment lasted six years and yielded moderate progress. In its early phases there was emphasis on the persistent question of whether or not it was safe to talk to the therapist. This was followed by a long period of gradually increased ability to disclose an extensive delusional ideational system involving themes of oppression and discrimination, some of which seemed quite plausible to the minority-backgrounded therapist, others that indeed seemed “crazy.” Countertransferenceal aspects of work with such an at once concretely traumatized, and yet chronically paranoid, person were explored.

Paranoid-schizoid and depressive aspects of patients’ response to discriminatory experience were outlined. The field-wide difficulty in recognizing the traumatic impact of racial discrimination was explored. Recommendations were made for the self-analytic processing of this charged and urgent subject for both minority and non-minority psychoanalysts alike. Audience members participated in a rich discussion of their own clinical experiences pertaining to discriminatory trauma. There was consensus that this is an under-recognized yet crucial issue for analysts to address in their work.

Drive Theory and Primary Process: A Philosophical Account

In her paper, Dr. Brakel described and defined drives, and gave examples. According to Freud, drives are a boundary concept, a mental representative of a physiological need state. Each drive has a source, an aim, and an object through which satisfaction can be obtained. She then undertook a philosophical analysis of drives. The standard philosophical analysis of psychological states using propositional-attitude psychology was demonstrated using beliefs and desires as the prototype propositional attitudes. Drives are do not fit well into these standard propositional-attitude analyses. Drives, unlike beliefs, do not have singular determinate objects. The non-singularity and high displaceability of drive aims is taken up in contrast to the indeterminacy threatening representations of drive objects.

Unlike the case with drive aims, in which there is an original aim, drive objects have no original singular object. The objects of a drive seem instead to be a set of objects organized in a primary process fashion, as clinical familiarity with transference will attest. Returning to the philosophical problem, since standard means will not work for individuating representations of this non-singular kind, the question is raised concerning what can save these primary process sets of drive objects from being unconstrained and indeterminate. A proper function naturalistic account of drive objects will do the job, and after proper function naturalism is explained, a case is made for such primary process sets of objects having a proper function. For the proper function argument to be effective, it must be shown that such primary process objects have a proper function under conditions (called Normal conditions), which will enhance selective fitness. Dr. Brakel concluded this section with further examples of this process. Finally, the objects of drives and their representations were contrasted with two philosophically interesting cases: first with “frog beliefs” in which frogs react in identical ways to bugs and lead pellets suggesting an identical representation; and second with representations studied by philosophers as “vague” concepts.

Linda A. W. Brakel

Anton Hart
TRANSFORMING TRAUMA INTO SOMETHING BETTER: MY WORK WITH EX-OFFENDERS

The paper discussed group work with women who were in the process of attending a day treatment program in lieu of either going, to or remaining in, prison. All were convicted felons. Some had spent years in prison and some were only recently sentenced and scared to death of the possibility of going to prison. Everyone in the group had at the least spent some time at Rikers Island in New York City. I structured the group as open-ended, with no required attendance, and group membership varied from week to week. I approached the group using primarily relational principles. The paper also included discussion of an individual analysis conducted during that same time with a female patient who had never been to prison, but who came from a family where several family members had served time in one facility or another.

I initially approached the group process on my “tiptoes.” I was terrified of making a mistake, of being overwhelmed by my own feelings, of the women ganging up on me, and so on. There were parallels between my fears regarding the group process, and my fears regarding my work with my individual patient. I wanted to rescue everyone from her painful feelings. Davies & Frawley (in Treating the Adult Survivor of Childhood Sexual Abuse) discuss this process of avoiding both the patient’s and their own aggressive reactions: “Keeping the relationship with patients primarily loving and ‘nice’ may represent survivor/therapist attempts to compensate patients and themselves for the wonderful childhood neither ever had” (p. 64).

The paper reviewed specific situations that allowed me to learn more about myself and the others: a group discussion about Mother’s Day, where nobody showed up for group the next week; a discussion about headaches where the pervasiveness of headaches among the women became glaringly apparent; a gentle confrontation I had with a patient regarding her avoidance of allowing herself to be intimate with a man. Theorists who had most informed my understanding of this work include Fonagy’s (2003) work on mentalization and the psychic reality of borderline states; Bion’s (1965) concern with the therapist’s potential for feeling persecuted by the group and eventually depressed; Ogden’s (1997) concept of reverie; Bromberg’s (1998) interest in multiple self-states; and Stern’s (2003) definition of a fitting context for psychotherapy as “one that allows the meaning of the others speech, conduct, or our own experiences, to unfurl.” Also helpful was Billow’s (2003) excellent book, Relational Group Psychotherapy: From Basic Assumptions to Passion, and his observation, “Symbolically all therapy is an act of aggression, interfering, challenging, undermining patient’s beliefs, values, and relationships and perhaps their sense of themselves” (p. 48). Also helpful is Fonagy’s (2003) observation that the psychological meaning behind acts of violence is attachment-related, whereby a “dramatic reconfiguration of the self takes place.”

In both my group and individual work I hope that I will help these women to learn to tolerate a more complex view of themselves and their world, thereby reducing the potential need for them to use violence, against themselves or others, as a coping strategy in the future. Anyone interested in receiving a copy of the paper may email this request to me at pathuntermarcus@earthlink.net

Patricia O. Hunter

THE AILING ANALYST AND THE DYING PATIENT: A RELATIONAL PERSPECTIVE

Part of an ailing analyst’s work is to acknowledge his or her sickness and to battle powerful forces of denial and the inclination to shun the subject of one’s own illness. Consistent with our professional identity, we tend to believe we have to be omnipotent and omniscient, and too often our patients reinforce this belief. This paper focused on Laura, a brilliant and gifted Hispanic-American physician, who was terminally ill and aware of the implications of her illness. At one point, Laura learned of my own previous illnesses, similar to hers, but in my case successfully treated. Of considerable importance to this case study was my return for sessions with my former analyst, so that my feelings about the patient became a subject for analysis.

The material presented represented a relational perspective, intersubjective and co-constructed. The choreography of technique and self-disclosure was developed mutually for this patient and this analyst and is not necessarily appropriate for every dying patient. Questions of boundary violations and alternative choices arose during treatment and were discussed. Laura’s dreams as well as my own were presented along with details of counter-transference reactions and the role played by Laura’s former analytic psychotherapy group. Reports of phone sessions show how Laura and I worked together.

In writing this paper, I had to confront my own denial of death, the mortal terror engendered by a potentially fatal illness and the need to protect myself but also my audience. Despite its unique circumstances, I hope this case study will highlight other more common dilemmas in the profes-
sional lives of analysts. Working with Laura, I altered the analytic frame to suit her needs and interests and to some extent my own, rather than adapting the patient to a particular model. We adjusted constantly throughout this difficult time, with a continual back-and-forth exchange, requiring both of us to change. With time running short, the interplay was elastic, alive, intuitive and creative. Yet the process involved more than simply adapting to Laura. I faced a constant conflict about what I did and what I said. I had to make conscious decisions about self-disclosure: Who is the doctor, and who is the patient? Who is dying? In the long run, my experience with Laura allowed me to be more giving with other patients and in fact more flexible and human.

Central to our work was my concept of the patient’s transference and my use of my own feelings. I did not regard everything Laura said about me as her distorted projection of earlier experiences. Some of what a patient perceives is real and current. Had I not been able to acknowledge mistakes, illnesses and feelings, the outcome might have been quite different. Finally, I don’t think it mattered literally that I was sick, but that having become vulnerable, I was more willing to open up and explore the same conflicts Laura was struggling with. Thus to some extent, writing this paper was a way of keeping Laura alive—and myself as well.

Nancy Edwards

Psychoanalysis and Culture: Integration of Self and Object Relationships

This paper addresses cultural issues that interfere with the individual’s self-integratory function. The cases of three young women a Greek-American, a Croatian-American and one Moroccan-born but college educated here, are used to illustrate how culturally based prohibitions create states of free floating anxiety and depression, induced by conflict between parental expectations, their ego ideal, and their self-defined developmental goals. In these three cases the very strict prohibition to marry men outside their culture created a problematic conflict resolution, since all three seemed to be attracted only to men who were not of their ethnic background. As a result A had had no sexual relationships and was questioning her sexual orientation, B had been promiscuous and feared she had contracted a sexual disease, and C married a Croatian man chosen by her parents and had to convince herself that she could love him.

Based on the understanding that we obey out of superego fear or out of ego ideal love, the aim of the psychotherapeutic process was to help them identify the positive aspects in their object relationships rather than perceiving them as only punitive and restrictive. For it was the internalized negative object relationships that was interfering with ego and identity integration, preventing them from becoming separate and independent. Their sense of entrapment manifested itself as depression and feelings of inadequacy due to narcissistic loss. Their struggle to assert the primacy of the nuclear self in what they perceived as an unempathic home environment was the condition that led to the need to idealize a man from another culture as their insurance in furthering self-development. With conflict resolution, they attained the desired personality consolidation which in turn facilitated the psychological shift from men of another culture only to men who can meet their emotional and intellectual needs and as a result became more productive in their relationships and in their work.

Hanna Turken

Educating Rita: Training Women in Psychology and Psychoanalysis

The 1983 film Educating Rita was about an irreverent Liverpool hairdresser’s quest to understand literature so she could talk about things that matter. It was about the clash of cultures between Rita and Frank, her middle-aged, disillusioned English literature professor. Rita struggles to re-invent herself and Frank searches for a path back to life. Orfanos argued that one of the ways that psychoanalysis has returned back to life has been by the influx of women with ideas and practices sometimes foreign to what was a male dominated field of psychoanalysis. When the Division of Psychoanalysis was formed 25 years ago it had no deep intention of being open to women in any innovative ways. But women, armed with feminist creativity of both a personal and intellectual nature, moved quickly to become co-participants in the Division. This speaks volumes about the women, the times, and the culture in which the Division operated.

The second argument by Orfanos in this roundtable discussion was that the education and training of men and women in doctoral and postdoctoral programs has also undergone change. Besides highlighting data from organized psychology and organized psychoanalysis on the education and training of women, Orfanos used his own personal experience as a male psychologist and psychoanalyst who teaches and supervises on both the doctoral and postdoctoral levels to glean some relevant issues for discussion. He considered the baseball film A League of Their Own about women players during the Second World War. Specifically, he addressed the scene in which the grouchy and
What Am I Doing Here? Psychoanalysis with Nontraditional Analysands

Since the inception of psychoanalysis there have been few changes in, and little questioning of, the structural setting of the clinical encounter. This organization of time and space has come to be called the "frame," although some analysts include the attitude and interpretive strategies of the analyst under this rubric. The privileging of the "frame" puts those people who do not have sufficient time or money, or the means to travel to an analytic office "outside," excluded by this "framing" from an analytic experience. In this paper I have described the analysis of Maria who is young, poor, a minority, often homeless, and a single mother of two infants. Due to her itinerant status, and the difficulty of traveling with two children, many of her sessions have been held in temporary housing, shelters, parks, and even in cheap restaurants or coffee shops. In those sessions that have been held in my office she has not used the couch.

Despite this absence of the traditional frame, in the three years since I commenced Maria’s therapy she has entered into an analytic process, and there have been changes in her internal object relations, in her interpersonal relations and in her lifestyle. She now has permanent housing, is working, and is caring for her children who are developing normally.

This experience has led me to question the traditional analytic attitude, the use of traditional interpretations, the nature of the frame, and the constitution of the analytic space. This questioning had led me to propose a phenomenological approach to all aspects of analysis. As a result, I have suggested that the analytic attitude, the frame and the analytic process be called the "stance," the "place," and the "space" respectively.

Phenomenologically, stance refers to both a location, which is often referred to as a standpoint, and an attitude of mind. I critique the ego psychological and relational schools as taking an outside/inside stance, which, I think, leads to a scrutinizing attitude of mind. I support a "being in" stance, which, I think, is best described by Bion, in which the analyst takes a "registering" attitude of mind. If the analyst can tolerate the registration of the unspoken pain of the analytic discourse, he/she can generate tentative understandings of what is being excluded from the analytic discourse. I call this the place.

Winnicott, I think, gives the best description of the analytic space calling it the space for "play." This is a development of his idea of a space of illusion. The initial access to the space results from the analyst’s capacity to forgo the naming of the pain that results from his/her immersion in the analysand’s total situation. As result of this forbearance, an image, or the rudiments of a thought develop. As time goes by, this becomes a new story line that is deconstructive of the organized panoply of stories that are the discursive matrix of analysand’s lived-in world.

Examples of these concepts are given from Maria’s analysis and from infant observation.

Meet the Author: Barbara Waterman

The Birth of an Adoptive, Foster or Stepmother: Beyond Biological Mothering Attachments. (London: Jessica Kingsley, 2003.)

Like many women in my cohort, I came up against the limits of infertility when I attempted to get pregnant in my late 30’s and early 40’s. My subsequent efforts to adopt an infant were equally unsuccessful. Coincidentally, I met the father of my adolescent stepdaughters in the midst of my adoption quest. My experiences as a stepmother taught me that a woman moves into the “motherhood constellation” (Stern, 1995) whether or not she gives birth to her children.

This book highlights the ways in which adoptive, foster and step-mother/child bonds are both more similar to and more different from biological attachments than is understood in common lore. Thus the book challenges the ideology about the primacy of the so-called “traditional” nuclear family as well as the myth of the perfect (biological) mother. Instead, it draws on the experiences of gay and lesbian parents and heterosexual couples in stepfamilies, or with adopted children, single parents, trans-racial families, international adoptive families, families of all ethnic groups where grandparents or other kin take over the parenting for their drug abuse troubled children and foster parents who do (or don’t) become permanent guardians of their foster children. The book’s major thrust is to draw out the common threads in the mothering experiences...
of all of these “second” mothers in an effort to support their bond-building efforts by offering an understanding of the challenges and joys for mother and child in co-creating attachments, irrespective of the age of the child. For these mothers, like those who give birth, becoming a parent changes their life forever; yet their entry into the ranks of mothers often remains a completely socially invisible event. This book accords non-biological mothers the recognition, long overdue, for their contribution to the many children who are in need of a secure home base. The book presumes that mothering and fathering are behaviors that can be done by men and women.

By proffering an understanding of what certain behaviors or feelings on the part of the child might mean, I’m trying to help non-biological mothers “make it through the night” without doing anything precipitous which might rupture a fledgling attachment with a child. As many women choose non-biological parenting because they are unable to have children of their own, the degree to which they grieve their loss affects their capacity to enter fully into an attachment with their adoptive, foster or step-child. Children, who have lost their biological mother, or the nuclear family, need help grieving. Many agonies that non-biological mothers endure result from the child’s use of the new caretaker—grandmother, aunt, foster, step- or adoptive mother—to weather the emotional havoc of his mourning in the context of a new and hopefully stabilizing attachment.

Similarly the book offers professionals helping such mothers or families a way to reframe challenging parenting moments as contributing to the creation of an attachment rather than joining the mother in the hopeless conclusion that it is impossible to connect with this particular child. Thus professionals can help parents “keep the faith” by applying the bond-building perspective offered in this book.

**Meet the Author: Lora Heims Tessman**


Lora Heims Tessman began by discussing questions that prodded her to research and revise old assumptions regarding the nature of internalization, and its consequences for the analysand’s intrapsychic connection to the analyst during and after termination. The research project, which the book embodies, involved intensive taped interviews (from 2 to 8 hours per participant) with a sample of 34 analysts, about how their own analysts became memorable in ways that made themselves felt over post-analytic time. Since Tessman contends that memory, as emergent in the transference, is transformational, not replicative, and that intrapsychic revisions, are forged within the interaffectivity from which they emerge, the focus of the interviews was on the analyst’s subjective experience of their analysts, rather than on more usual “outcome” measures.

Questions included: How is the analyst remembered differently when an analysis has been deeply satisfying than when it is experienced as beneficial, but with major limitations, or when, in retrospect it is judged to be highly unsatisfactory and even damaging? What surmised attributes of the analyst are viewed as linked to the potentials or the obstacles to mutative change? How do the analysand’s conjectures about the analyst’s view of him or her affect what is internalized and what is memorable about the analysis? How does the gender of the analyst and analysand, housed in like or unlike bodies of desire, affect what transpires between them? What changes in how the analyst is experienced intrapsychically take place over time after termination, and why might that matter? How does post-termination contact, or its absence, acquire meanings that affect future developments in the analysand in positive or negative ways? How are analyses influenced by the socio-cultural context of a psychoanalytic institute as representative of prevalent theory and practice?

The narratives of the research participants were deeply introspective, candid, and moving, forming the heart of the book. The verbatim narratives and excerpts are compared according to satisfaction with the analysis; gender combination; and elaborations of how leave-taking, mourning, self analysis, dilemmas of post-termination contact and the habitat of the analyst in the post-termination imaginative life of the analysand are experienced.

Significant differences emerged in the proportion of participants who, retrospectively, were deeply satisfied, moderately satisfied or highly dissatisfied with their analysis according to the gender combination of the analytic couple and the decade during which the analysis took place. The influence of context on these findings was discussed. Meanings attributed to the affective messages through which interpretations and other interchanges with the analyst took place turned out to be most closely linked to satisfaction with the analysis, while the specifics of behavior and “technique” (such as the proportions of silence, self-disclosure, interpretation of defense or of the transference, etc.) showed no such correlation. The unique dynamic propelling each analytic couple was the most powerful element in the analysand’s inner presence as either a problematic or generative resource after termination.

Lora Heims Tessman
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The last 25 years have seen a revolution in psychoanalytic developmental psychology, and one of the best known names in this transformation is this volume’s second author, Beatrice Beebe. In the past quarter century, Beebe and several other researchers, among them Robert Emde, Lewis Sander, Daniel Stern, Colwyn Trevarthen, and Edward Tronick, have completely refashioned our understanding of infant social development, such that terms like primary narcissism, normal autism, and normal symbiosis are now considered untenable as descriptors for early infancy and such also that the infant is now regarded as establishing relationships with caregivers from the moment of birth. And yet it is likely that few readers of this review know the name of Joseph Jaffe, the first author this slim volume, Rhythms of Dialogue in Infancy, actually a monograph of the Society for Research in Child Development. Jaffe is a professor of clinical psychiatry in neurosurgery at Columbia University and chief of Communication Sciences at the New York State Psychiatric Institute and for many years, actually decades, has led a research group on nonverbal aspects of communication, a research group that has contained as members both Beatrice Beebe and Daniel Stern, whose landmark The Interpersonal World of the Infant (1985) was the book that consolidated the aforementioned revolution in psychoanalytic developmental psychology. In 1970, Jaffe, together with Stanley Feldstein, a psychologist and the third author on the present volume, published Rhythms of Dialogue, an analysis of nonverbal aspects of adult conversation. That book, which proposed a model for subdividing adult conversations into sequences of turns, pauses, and switches, is in essence a precursor to the current volume, and its conceptual model in turn underlies the research efforts of Beebe, Stern, and others who, with their transformation of our understanding of infant social behavior, have sparked a reconceptualization of the nature of the clinical dialogue as well. Most people who are interested in psychoanalysis are not interested in grappling with a complex research study like that reported in the volume at hand, yet an understanding of the research presented here tells us a great deal about both developmental and clinical processes, topics that no doubt are of interest to all who are reading this review.

So what do Jaffe and his colleagues (Beebe, Feldstein, psychologist Cynthia Crown, and psychologist and psychoanalyst Michael Jasnow) have to tell us about dialogue in infancy? The authors situate their work in the relational traditions of psychoanalysis, specifically the interpersonal school in the United States and the Middle School among British analysts. Indeed, Jaffe and Feldstein developed their views on the coordination of dialogic rhythms at the William Alanson White Institute in the early 1960s, at a time in which relational views were decidedly in the minority in psychoanalysis. They developed a dyadic systems view of human communication, that is, of communication as a process of joint or bidirectional coordination. At this time, they shifted their focus from the content to the process of spoken communication, and they developed a computerized technology for studying conversational speech timing, specifically, to measure the duration of utterances, pauses, and switches between speakers. Jaffe and Feldstein (1970) conceptualized adult conversation as a series of turns, and because people in conversation often speak at the same time or are silent at the same time, they decided upon the simple rule that whoever vocalizes unilaterally, regardless of the content of verbalization, holds the conversational turn. Because their model focuses on the pragmatics, rather than the content, of verbal communication, it can be applied not only to adult conversations but to vocal interactions between infant and adult—protoconversations that, like adult conversations, unfold as a series of turns between speakers. This model underlies the groundbreaking research by Beebe, Stern, and others on, to use a now familiar phrase, the interpersonal world of the infant, on the way infants and parents mutually regulate their interactions.

Also underlying Jaffe et al.’s research program, therefore, is the concept of mutual regulation. Jaffe and colleagues conceptualize the interaction between mother and infant as a system in which each party influences the behavior of the other, but this interpersonal coordination is considered to be, from a statistical perspective, a set of mutual correlations, rather than mutual causation. That is, it is not known whether the mother’s vocalizations determine what the infants will be, or vice versa. Instead, all that is assumed is that mother’s vocalizations can be predicted from mother’s, and mother’s from infant’s. To this conceptual model, Jaffe et al. apply the statistical logic of time series analysis. They ask whether mother’s vocalizations, controlling for autocorrelation (i.e., correlation with
her own behavior), will predict future vocalizations of the infant and whether the infant’s vocalizations, again controlling for autocorrelation, will predict future vocalizations of the mother.

In the present study, Jaffe and his colleagues had three main goals: (a) to describe the nature of the infant’s dialogue with adults at age 4 months, (b) to determine, using time series analysis, whether a mutual regulation model accurately describes infant-adult verbal interaction (i.e., whether adult and infant vocalizations mutually predict each other), and (c) to determine whether the nature of infant-adult dialogue when the infant is 4 months old predicts infant social and cognitive development (i.e., infant attachment style and infant mental skills, a precursor to IQ) at age 12 months. To do this, they designed a complex but elegant study. In their sample of 4-month-old infants, they studied face-to-face vocal interactions among 3 communicative dyads (mother–infant, stranger–infant, and mother–stranger), in 2 sites, at home and in the laboratory. They audiotaped the infant–adult dialogues, such that each voice was on a separate channel. They used their computer system to code the vocal interactions into four possible states (both parties silent, adult vocalizing with infant silent, infant silent with adult vocalizing, both parties vocalizing), and from this coding, they were able to determine the duration of the sounds and silences—of the vocalizations, pauses (i.e., where the same person resumed speaking), and switching pauses (i.e., where the turnholder pauses and the other partner begins)—of each partner.

Jaffe et al. found that the nature of the infant–adult dialogue was regulated by both the infant’s interactive partner, mother or stranger, and the place where the interaction took place, home or the laboratory. Adult vocalizations were longer in the lab, and switching pauses were longer at home, with both results suggesting greater activity on the part of adults in the laboratory setting. Infants, meanwhile, displayed shorter pauses and switching pauses when interacting with a stranger, with shorter durations indicating greater activity on the part of the infant when the partner was unfamiliar. Indeed, infants were least active in conditions of double familiarity (i.e., interacting with mother at home) and most active in conditions of double novelty (i.e., interacting with a stranger at the lab). Furthermore, Jaffe et al. found that infant-adult activity levels, as measured by the ratio of the speaker’s vocalization duration to pause duration, were significantly correlated, regardless of whether the interaction was between infant and mother or between infant and stranger and also regardless of whether the interaction occurred at home or in the lab. In other words, both parties in the interaction accommodated their respective activity levels to each other’s.

Using time series analysis to partial out each speaker’s autocorrelations (i.e., correlations with his or her own vocal activity), Jaffe et al. then found, in confirmation of the mutual regulation model, that individual infant–adult dyads showed coordinated interpersonal timing (CIT). The authors considered this to be a particularly important result because previous research on this matter had demonstrated only a group effect, that is, bidirectional coordination between groups of infants and groups of adults. They argued, however, that bidirectional coordination is a phenomenon that, if meaningful, occurs also within individual infant–mother dyads, with each party influencing the behavior of the other. In the present research, Jaffe et al. replicated the aforementioned group correlations between infants and adults, but more important is that they also found within–dyad correlations. Although these correlations were by no means ubiquitous (i.e., that not all dyads showed coordination), Jaffe et al. found that within–dyad coordination of vocalization increased with novelty. That is, there was more coordination in stranger–infant dyads in the lab than in mother–infant dyads at home—a finding consistent with the idea that greater nonverbal coordination is needed when things are unfamiliar.

Finally, Jaffe et al. found that CIT at age 4 months predicted both social and cognitive development at age 12 months. Using the Strange Situation (Ainsworth, Blehar, Waters, & Wall, 1978) to assess attachment and the Mental Development Index (MDI) of Bayley (1969, 1993) Scales of Infant Development (BSID) to measure cognitive development, Jaffe et al. found a significant negative correlation between the MDI and the Degree of Insecurity Scale (Rich ters, Waters, & Vaughn, 1988), a continuous rating scale applied to infant behavior in the Strange Situation, with higher scores on this measure indicating greater insecurity. Thus, as attachment theory in specific, and psychoanalytic developmental theory in general, would predict, attachment security and cognitive development in 1-year-olds are positively correlated. But despite this linkage between attachment and cognition, it turns out that the relationship between infant–adult CIT when infants are 4 months and infant-mother attachment when infants are 12 months is very different from the relationship between CIT and cognitive development.

In general, infant–adult interactions (both infant–mother and infant–stranger) in the midrange of bidirectional coordination predicted secure attachment, but low and high levels of CIT predicted insecure attachment. That is, infant–mother interactions that were in the midrange of bidirectional coordination (i.e., at a level in which there was room for novelty, uncertainty, or play) predicted secure attachment, but a high degree of bidirectional coordination in infant–mother interaction predicted disorganized attachment, with very high levels of bidirectional coordination.
indicating vigilance, wariness, or an attempt to counteract some interactive disturbance. Meanwhile, a low degree of unidirectional infant coordination with a stranger predicted avoidant attachment, as if the infant had withdrawn from dyadic regulation to self-regulation, and differentiated avoidant from secure attachment. Finally, as regards social development, a high degree of unidirectional stranger coordination with the infant predicted resistant attachment, again differentiating it from secure attachment. On the other hand, when it came to cognitive development, a high degree of bidirectional coordination, particularly between infant and stranger when interacting in the laboratory, rather than at home, predicted high scores on the Bayley MDI. Jaffe et al. interpreted this finding as consistent with the proposition that adaptive response to novelty—interacting with stranger in a lab is more novel than interacting with mother at home—is a central manifestation of intelligence at any age.

In sum, Jaffe et al.’s research study, although complex, tells us a great deal about a subject of great interest to psychoanalysis—the effect of early infant-mother interaction on infant socioemotional and cognitive development. In grappling with this volume, readers of this review are likely to struggle with Jaffe et al.’s complex multivariate statistics, as well as with the book’s lack of clinical material. Nevertheless, those who persevere with this book will be rewarded with a deep understanding of the research basis underlying the revolution in psychoanalytic developmental psychology. Fortunately, they are likely to be helped by two commentaries include in the volume, one by developmental psychologist and infancy researcher Philippe Rochat and one by Daniel Stern. In his commentary, Stern emphasizes the importance of Jaffe et al.’s finding that a midrange of mother–infant coordination predicts secure attachment; he proposes that this same midrange of interpersonal coordination is the optimal condition for mother–infant play because play requires a certain openness and lack of predictability. Rochat meanwhile states that Jaffe et al.’s findings are “another wake-up call to the danger of splitting the cognitive from the social” (p. 133). In an argument that is highly consistent with the intersubjectivist and relational turn in psychoanalysis, he makes “a theoretical plea for the socially grounded nature of cognition” (p. 133).

For my own part, I find that there is so much to praise in Jaffe et al.’s research that it is hard to come up with criticisms of their efforts. Nevertheless, from a statistical perspective, one concern about this study is that it involves numerous significance tests but contains no adjustments for Type I error. Jaffe et al. say that their study is exploratory and that they usually specified their hypotheses in advance, but nevertheless I fear that, in a study as complex as this, some of their fascinating findings might prove to be statistical artifacts. Another criticism is that the greatest strength of Jaffe et al.’s conceptual model for rhythms of dialogue, elegant though it is, is perhaps also its greatest weakness. That is, their model ignores the representational or symbolic dimension of language, a dimension that differentiates human conversation from other forms of communication, and here I would note that, for example, it was Main, Kaplan, and Cassidy’s (1985) move to the level of representation that made it possible for us to understand the transmission of attachment style from parent to child by linking adult representation of attachment to the child’s attachment behavior. On the other hand, this criticism is unfair insofar as (a) Jaffe et al. set out to study only the prerepresentational infant and (b) it is, after all, through the preverbal, affective dimension that attachment representations—internal working models—are first constructed.

Thus, Jaffe et al.’s Rhythms of Dialogues in Infancy is no doubt a difficult read, especially if one’s interest is in analysis of transference, rather than in multivariate analysis of variance, and it would surprise me not at all if most readers would prefer Beebe and Lachmann’s (2002) Infant Research and Adult Treatment, with its clinical focus instead. Nevertheless, I would say that one important reason for psychoanalytic clinicians to have first-hand familiarity with a research study such as this is that we live in a world in which biological psychiatrists and cognitive-behavioral psychologists increasingly assume that psychoanalysis has no empirical support, a world in which our colleagues increasingly regard what we do as an irrelevancy, and I note in this context that, in preparing this review, I surveyed some 40 of my colleagues, psychiatrists and psychologists, in the small Appalachian city in which I live and found that once one of them had even heard of Beatrice Beebe, a researcher with an international reputation. Here, however, we have a research study that confirms a basic psychoanalytic proposition—that the cognitive cannot be separated from the social, that interpersonal interaction predicts both cognitive development and attachment—and in an age in which our colleagues claim that psychoanalysis has no empirical support, it behooves psychoanalytic clinicians to know of research findings such as Jaffe et al.’s.
WHEN ONLY PSYCHOANALYTIC UNDERSTANDING WILL DO

The lead article in the Spring 2004 issue of Division 12’s journal, Clinical Psychology, deals with the often-raised question of whether repressed memories can exist. The overall conclusion seems to be that both repressed memories and false memories do exist. Harvey Schwartz would agree. In meticulous and scholarly fashion, he examines the extant studies on the subject from various points of view, defending expertly the truth of what we psychoanalysts take for granted: the significance to ego development of a child’s interpersonal experiences. The whole first third of his book is devoted to a balanced and quite thorough survey of the literature. In fact, reading this section would be tedious except for the highly organized presentation and clarity of his writing. It stands as a fine resource for anyone who is interested in further research about understanding and treating people whose psychological survival required them to hide childhood sexual traumas from their conscious memory.

The standard of scholarship continues throughout the book, with apt quotations from different theoreticians and clinicians augmenting Schwartz’s ideas. Nonetheless, clinical concerns and his own way of conceptualizing them are what most make the book valuable. As the title states, the patients about whom Schwartz writes are adult survivors of childhood sexual abuse. Most of the cases he details are victims of horrific ritual abuse.

The “dialogues with forgotten voices” (of the book’s title) occur as a development through the treatment process. Each separate voice expresses an aspect of personality, which the “host personality” cannot consciously recognize as such. Schwartz takes it as the therapist’s task to facilitate dialogue first with himself, leading to spoken dialogue between the voices. His position is to explore what each contributes to the psychological survival of the host. He tries to evoke curiosity about their meanings without a predetermined notion. As the patient’s need for a system of part-self states becomes explainable by the need to cope with overwhelming conditions, the object of treatment as he sees it is to restore the patient’s shattered sense of agency.

Schwartz applies the term “relational” in a few ways to explicate this further. First, each alter represents a particular relationship, whether in the patient’s history, or in the scheme of inner balancing that assigns to that alter a particular role in relation to the whole ego structure. Relational also expresses the need for the therapist to maintain a therapeutic alliance through adamant respect for each part of the personality of the patient. Relational further addresses the way in which the therapist remains vigilant in recognizing the effects on the patient of whatever the therapist is dealing with internally that the patient may react to, our old friend counter-transference.

Schwartz repeatedly reminds the reader that what the patient makes of his or her perceptions of the therapist is what makes the perceptions important. Thus, it behooves the therapist to guard against becoming defensive with the patient, even though at times that might be challenging to maintain. Schwartz indicates that this kind of understanding can be found among those who use various labels for their psychoanalytic orientations by quoting Stolorow, Orange, Kohut, McWilliams, and others, as he integrates his text with case material. He even notes that Freud never eliminated sensitivity to what a patient might have experienced as a child, when it was from a patient’s report, rather than Freud’s own conjecture (as, for example, in the case of the Wolf Man).

The relational perspective lends itself to recognition of dissociated personalities since a multiplicity of selves is part of that tradition. On this basis, a unitary self can be called an illusion. Schwartz refers to it so. Yet, his avowed task is to foster integration of a whole self. Indeed, one might argue that it is multiplicity that is an illusion, albeit a significant one from the earliest time of a human being’s life. Sometimes Schwartz is selective in deciding what reflects only relational thinking. For example, on page 170, he notes that some traditional psychoanalysts might avoid talking with alters out of concern about reifying them; and then he generalizes upon this idea to assume that it is a characteristic of treatment by all those who do not call themselves relationalists. More accurately, Schwartz observes that there is an emergence of integrative and cross-fertilizing ideas in the psychoanalytic community that attests to the growing maturation of our field (p.171).

An interesting point made by the author is that we psychoanalysts are unified in that we all see therapy as a developmental process. This is dramatic in the needs of dissociative personalities. Alters, in Schwartz’s experience, tend to be mostly child representations. Comprehending the dissociative condition as analysts requires knowing that there is an unconscious to which repressed memories, thoughts, and feelings may be relegated, and that the ego must find a way to function without being stymied by the
complexities and perplexities that are stored in that way. How to deal with the problem of historical validity in patients’ accounts is significant for us regardless of theoretical orientation. Schwartz wisely maintains an open-minded attitude on this with a patient. He neither confirms belief in an account nor negates it. The book spells out the pitfalls in taking either position. Basically, going in either direction can have the effect of playing into the scripts that one aspect of the personality (or one alter or another) contributes, thus maintaining a dissociative structure.

Schwartz maintains his function is to help the person to recognize the meanings for that person that the described events have had. His underlying assumption is that forming separate subunits of the personality solves the problem of overwhelmingly paradoxical experience. A perpetrator, for example, might also be a rescuer in different segments of the abuse pattern. The young ego could manage such a childhood only by evolving all-good and all-evil self-states. Schwartz shows respect for each manifestation, appreciating how they balance each other. He also tries to foster awareness of the psychic price the host personality pays for maintaining this kind of system in adult life.

With his focus on what any material means to a patient, and in his effort at balance in what he thinks, Schwartz sensibly points out that there is a continuum in memory between the extreme of high accuracy in reportage and the other extreme of complete fantasy. The memories of dissociated personalities may lie at various places along this continuum. It is another reason to keep an open mind on facts, using all of the material to probe for its significance to the patient rather than as an occasion to exercise forensic skills.

The case vignettes that Schwartz provides are impressive. He provides them always within the context of the particular point he makes about the rationale for his approach. For example, one transcription of a session appears as an example of what he calls “Linking and Delinking.” He also offers in several places lists of well thought out suggestions for being able to do this work. One is called “Clinical Postures that Foster Recognition.” Another is Guidelines for Working with Derailed Aggression.” Another, very important one, is a list of brainwashing techniques used by the Chinese and the CIA. The reader sees how the same dynamics are utilized by cult groups that exploited child survivors.

By the time one has finished reading this book, Schwartz has ingrained the importance of the ambience the therapist must strive for by avoiding traps that would put the therapist in a position of dominance. When it seems urgent for a patient to know what his reaction is to some material, Schwartz is careful to start with how the patient assesses it; and even if it seems appropriate to share his reactions, to keep the emphasis upon its meaning to the patient. When he does not feel it is appropriate to share his own feelings, he explains why. At all times, the patient is the ultimate arbiter of his or her own feelings, what to say or not to say. In a couple of places, a reader’s eyebrows might rise, as when Schwartz refers to the struggle to maintain the patient’s awareness of material already shared. Overall, however, his commitment to respect for the patient’s authority—without losing his own—is paramount. He emphasizes mutuality of respect as basic for the success of such work.

Only rarely, Schwartz’s care in dealing with concepts slips. In his discussion of abreaction (p. 181), for instance, he tries to differentiate abreaction from enactment on the basis that the latter stems from the unconscious while abreaction is in some way volitional. Starting with Freud’s origination of the term (Freud, 1893), a more accurate use of it is that abreaction is specific to the emotional memory of an event in the past of a person, while an enactment is a broader term that may encompass a range of previous concerns as well as the transference-countertransference moment in the treatment. In general, however, he is scrupulous in his definitions and his attributions to others’ thinking.

The gradual emergence of the observing ego, an important step in all psychoanalytic treatment, is especially notable in treatment of disassociated personalities. Schwartz discusses the dialectic between knowing and not-knowing. At the heart of the dissociative process is the host personality’s not being conscious of what seems beyond tolerance. In cases of DID, the child has been part of the atrocities, making personal agency too great a burden to be dealt with unless some mechanisms such as the development of alters can occur.

Schwartz mentions previous efforts at describing the stages which characterize treatment of DID. In keeping with the strong and effective degree of organization of this book, he then offers his own sense of how treatment develops. He presents several excellent lists to summarize his points in various discussions about paradoxical communications by the patient, of necessary attitudes of a therapist toward enabling useful treatment, and of end-products of treatment. He interprets Loewald’s observation that all that works in therapy is negotiation as meaning to create new conditions for the patient to react to in sorting out the patient’s old reactions (p. 245). Schwartz details the difficulties of negotiating with representatives of intrapsychic terrorism. He explores the bizarre situation in which the therapist may become a perpetrator to patients because the therapist’s efforts to unmask their underlying goodness makes them ashamed at not being malevolent enough. The book touches on the use of hypnosis to try to manage the dissociative process. The problem with hypnosis as a form of treatment remains what Freud discovered, that
simply accessing the disturbed parts of the self is insufficient for integrating the personality. That process, as Schwartz makes clear, is a fraught and lengthy one requiring tremendous dedication and skill.

*Dialogues with Forgotten Voices* contains so many intriguing and useful comments that it is tempting to give quote after quote. Instead, here is a sampler: In talking about the experience of finding that a satisfactory negotiation with one alter enables some patients to reintegrate the system: “For many survivors, certain linchpin beliefs and fantasies or perpetrator teachings hold many levels of disassociation in place at once. Just as in a game of pick-up sticks, the movement of a strategically positioned alter-personality, fantasy, or belief can lead to the rapid rearrangement or even deflation of dissociative defenses (p. 203).” Sometimes the elegance of expression is a pleasure in itself, as when he says: “The shrapnel of the patient’s trauma may land squarely in the heart of the therapist’s most vulnerable psychological territory” (p. 470).

Among many intriguing insights, Schwartz points out that socially acceptable addictions like workaholism or perfectionism reinforce the higher functioning DID patient’s defenses. In such cases, a therapist’s insistence on staying in touch with dissociated parts of the personality becomes a two-way battle for the therapist. The patient is too afraid of retraumatization not to fight contact with isolated and threatening self-states; and critics may believe that a wrongful diagnosis is being imposed on the patient. (p. 178) Another frequent complication he discusses is the intensity of a person’s identification with a perpetrator introject, creating what van der Kolk called a trauma-bond. A patient may swing back and forth many times between holding onto this introject and being able to contemplate its significance to the host self—and the new relationship to the therapist (p. 304 and p. 468). The therapist’s search for the patient’s self can be construed by the patient as a mission of destruction (or seduction), ultimately bringing the therapist into a triple transferential role of seeker–destroyer, seeker–seducer, seeker–betrayer (p. 304). Schwartz’s typical discussion of such situations is consistently illuminating. Schwartz’s perilous but often-successful adventures with the wildly variant perceptions of his patients have resulted in production of a quite special book. I think that it will reward anyone in our field with the review of pertinent literature, thoughtful observations, and reinforcement of the fundamental philosophy of our enterprise.

**Relational Group Psychotherapy: From Basic Assumptions to Passion, By Richard Billow. London: Jessica Kingsley Publishers, 2003; 256 pp., $74.95.**

*Relational Group Psychotherapy: From Basic Assumptions to Passion* is difficult for me to be objective about. Like with Billow’s (1999; 2001; 2003) other writings about Bion’s work, I was moved and transformed as I read and reflected upon the ten chapters that comprise this amazingly hopeful book. Admittedly I was biased, as I really liked those previous articles. Nonetheless, this book was a true delight.

James Grotstein, who was himself analyzed by Bion, introduces the book by saying “I am not a group therapist, but after reading Dr. Billow’s theoretical and clinical explications, I began to wish that I had been.” Grotstein agrees with Billow’s assertion that Bion was one of the prophets in the contemporary relational reformation that has been taking place over the last two decades. He also suggests that Bion, like Lacan, liked to write in “poetics,” that he is hard-reading for most, and that Billow through this book has made Bion much more accessible. Billow has thoughtfully applied some of Bion’s ideas to his study of the group psychotherapy process and according to Grotstein, though Bion thoroughly immersed himself in the theory of groups and group relationships, his main thinking centered on the individual “whom he considered to constitute a group in itself.” According to Billow, Bion (1970) saw the mind structured on a dissociative-integrative continuum that defines itself according to the emotional atmosphere of the particular moment. Interactive, separate sub-organizations of personality move in and out of consciousness. Billow refers to the work of many contemporary relational writers, such as Davies (1999), Aron (1996), Bromberg (1996), and Mitchell (1993; 2000) when suggesting that “new meaning emerges from the discovery of isolated, split-off, or undeveloped aspects of the self linked to recurring, developmentally early, emotional experience.” (p. 129)

Grotstein, like Bion and Billow, believes that “the group experience brings out dimensions of a patients character that all too frequently escape detection in individual treatment” (p.15). He makes the assertion that analytic training institutes should do a better job of encouraging their candidates to pursue both individual and group therapy. Billow speaks of the “dread and fear of doing group therapy” on the part of many analysts, which, like the analytic process “acts like a poultice to summon bad demons from inside to the surface to be experienced.” In group therapy situations, as in individual analysis, the patient is unconsciously enjoined to regress, and from this regression
to project infantile anxieties into the analyst. Billow says that group therapy frightens therapists because “a group of individuals who are undergoing a therapeutic regression” is subject to what Bion (1961) calls “valency,” whereby groups “amplify emotional reactions, resulting in a combustible process of emotional contagion (p. 54). The therapist in such a situation feels and is vulnerable to having his or her own unresolved characterological issues stimulated:

The narcissistic therapist fears that an active group will undermine... uniqueness.... The schizoid therapist fears invasion...The depressive therapist needs to remain (the universal supplier)... The compulsive therapist fears...(he/she) must control. The hysterical therapist fears being overwhelmed. (p. 49)

During the time that I first began to read Billow’s (1999) writings on Bion, I was in the process of grieving my mother’s death, while at the same time beginning to facilitate a group with female ex-offenders at the Fortune Society in New York City. These women were attending a day treatment program as an alternative to their returning to prison. As I contemplated my first group meeting, I was having fantasies of feeling ganged up on and overpowered by the hostility of the group members, given their difficult experiences in life up until that point. Although I had previously and spontaneously connected Bion’s writings with the grieving process about my mother, I didn’t think to apply Bionion principles to my work with the group. I remember struggling then with my fears of the group becoming out of control, of my becoming overwhelmed with posttraumatic memories from my own past, and of becoming depressed from memories or insights recovered during the group. Billow quotes Bion (1965) as saying that in breaking down existing meaning for self and others, and confronting what is unknown and confusing to the group, the therapist’s own anxieties, fears of persecution and potential for depression are exacerbated. Despite using certain ideas from Billow’s writing during individual sessions with my patients, I realize now that I did indeed “dread and fear” the inevitable therapeutic regression of the group. I was, in tiptoeing enabler fashion (Beattie, 1991), subverting, avoiding, and attempting to distract myself and the group from unpredictable bouts of anger and rage being expressed, particularly in relation to me. Davies & Frawley (1993), who Billow cites in his book when he discusses Bion’s ideas about personality and multiple self-states, put my dilemma into words with these lines:

Uncomfortable with their own aggression... clinicians may defuse patients' aggressive transference reactions.... This preserves the therapist as a good object.... Keeping the relationship with patients primarily loving and “nice” may represent survivor/therapist attempts to com-

Billow’s Relational Group Psychotherapy: From Basic Assumptions to Passion, however, has helped me to focus attention towards emerging group dynamics that coexist with, vividly illuminate, and add an element of insight and of meaning to my fears. My clinical background up to that point had included intensive group work with sexually abused children, and before that I had intensive group experience as a cognitive-behavior therapist (Ellis & Hunter 1991). I had, until reading Billow’s work, been approaching the group work with a sensitivity to and curiosity about the traumatized backgrounds of the women, as well as a desire to help them develop coping skills for dealing with their difficult emotional and behavioral histories. Although familiar with the relational literature in psychoanalysis, it hadn’t occurred to me to bring it all together in group: my interest in Bion, my interest in group trauma work and my knowledge of relational psychoanalysis. But essentially this is what I have been able to do, and what Billow has done theoretically and clinically, with Relational Group Psychotherapy. He has brought Bion’s early work on the group experience (Bion, 1961), Bion’s complex theoretical writing on the basic assumptions (i.e., three types of primitive object relations, fantasies and affects which individuals project and act out in social settings), and Bion’s writing on the countertransference experience, together.

The countertransference writings seemed particularly relevant to the relational point of view. Billow states,

Although painful to absorb, internally and also make sense of, Bion believed that the group therapist’s subjective reactions could be utilized to process information about the group and its members, and could serve as a basis for interpretation... Using primary process-the capacity to free-associate, imagine and dream—and secondary process, the analyst gathers and deciphers the patients and groups unformulated experience. The therapist makes the thought and emotion tolerable, gradually representing (re-presenting) them to the members in the form of words, silence, and nonverbal and paraverbal behavior. (p.114-115)

Billow illustrates this idea when he describes exchanges between himself and a supervisee who, in running her group, noticed that the group had “heated up” since she had been in supervision. She said that she liked the liveliness, but she also mentioned that she did not like the feeling that her emotions were getting out of control. Billow wondered playfully whether she ever felt her supervisor was out of control, and whether, at present, she even liked him. After reading Billow’s book, I found myself becoming
increasingly able to do with the group what I had been allowing myself, with the help of excellent relational supervision, to do in individual therapy for many years: use the countertransference as a way to understand the patient’s experience. Billow uses Racker’s (1968) suggestion that the analyst continues to be “variable-inconsistent, professional and personal, mature and immature, healthy and neurotic, all regulated by the emotional state of the relational matrix” to describe the group analysts behavior as well. This accepting, permissive, inviting attitude towards the therapist’s sensibility and vulnerability pervades the book, and allowed me to soften unrealistic demands I was making on myself for an idealized and seamless “performance.” As I sat with the women in my group, whose lives had been pervaded by violence and transgression, and who desperately needed contact rather than a calculated performance by an anxiously inhibited “professional,” I realized that Billow’s encouragement for the therapist to “go with the flow” of the groups’ emotionality had freed me to be more myself, and in so doing, had freed the women to be more of themselves while with me:

In being receptive to the infantile, primitive and neurotic aspects of one’s own personality, the therapist may more fully experience his or her own experience, and this is, I believe, the precondition that allows the therapist to help the group members do the same. (Billow, 2003, p.34)

After a time they began to talk much more openly about the behaviors and events that had led to their being sent to prison in the first place and their traumatic experiences both inside and outside of prison, while I began to emotionally “be with them’ in a way that moved me beyond words. The first chapter “The Authority of the Group Therapist’s Psychology” emphasized that insight is a relational process that, while reducing suffering, produces anxiety and pain for all group members. Billow believes that what ultimately holds a group together is the therapist’s ever expanding understanding of the group and its members as well as the therapist’s success in reaching and deepening such understanding, however painful and unwelcome. For this achievement, according to Bion, represents “passion.” The following chapters, in a nutshell, address the therapist’s resistance to the group (Chapter 2), the basic conflict between thinking and anti-thinking (Chapter 3), the occurrence of entitled thinking and dream thinking (Chapter 4), and containing and thinking (Chapter 5). Each chapter builds on the previous chapter, more in a spiral than a straight line, involving cogent and candid concrete examples from Billow’s vast clinical experience.

There is a chapter on the adolescent group experience (Chapter 6) where Billow’s recounting of various group interactions made me smile (e.g., Billow: “I notice that this group can’t take two weeks in a row when people are being emotional” Adolescent: “Fuck you.” Billow: “Very clever. Now I know that you can take it and really think about what I’m saying. Duh.” [p.148]), where Billow says the task is to contain the adolescents’ ambivalent, often confrontational communications with playful use of the therapists own subjectivity. Billow believes a therapist contributes to group not only through words, but especially through a preverbal feeling of bonding. In Kleinian terms, according to Billow, “a secure sense of bondedness represents achieving “the depressive position.” (p. 153). Rebellion in group (Chapter 8) is discussed as a strategy of social action: to overthrow the group’s status quo or adamantly to oppose its revision. Billow expresses a tremendous respect for this process, stating, “Submissive groups and compliant individuals lack creativity, which is stimulated by independent thought and freedom of expression.” (p. 174).

References to Foucault (1978), Marcuse (1955), Sartre (1956) and Lasch (1978) suffuse this chapter with a broader sociopolitical viewpoint while Symington’s (1983) sensibility about the freedom of the analyst to communicate caring while preserving a sense of inner freedom is also included to good cause.

Primal Affects, Loving, Hating, Knowing (Chapter 9) is the heart of Bion’s basic assumption theory and later thinking regarding premonition, beta elements and alpha functions. Billow illustrates these highly complex abstractions beautifully in concrete and clinical terms. His discussion of an “impasse in K’ during an eight week postdoctoral seminar he conducted opened my eyes to the enigmatic ways that knowing can be subverted even by a group devoted to that very purpose. The Passionate Therapist, The Passionate Group, is the title of the final chapter on Primal Receptivity. It is the grand finale for a grand book:

[Passion involves] enduring the breakdown of meaning, tolerating the mourning process, submitting to and suffering through the disorganizing, even frightening sensations accompanying paranoid-schizoid and depressive phenomena. (p. 217) The process necessarily includes feelings of catastrophe, for old meaning must crumble before new meaning is built. (p. 225)

I thank Billow for creating such new meaning for me.

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This book affords a broad overview of the nature of persecutory objects and states of mind. Thirteen distinctive chapters, while varying in complexity and lucidity, sustain a rather coherent theoretical outlook. The book is oriented around both a conceptual understanding of persecutory states of mind and more practical ways of working with tenacious persecutory objects in individual, couples, and group therapy as well as in assessment and consultation. Many of the papers were first presented at an April 2000 conference held by the International Institute of Object Relations Therapy, building on Jill Savege Scharff and David E. Scharff’s object relational approach. Although the chapters vary in quality and sophistication, yet each has something useful for both inexperienced and more experienced analytic clinicians.

Each author writes from within the tradition integrating object relations and Kleinian theories to, in the editors’ words, “reveal the viciousness, hatefulness, and tenacity of the persecutory object, the breadth of its influence, and the object relations approaches we bring to understanding and detoxifying it.” (p. xv). Moreover, the writers made an effort to provide direct clinical material in order to help the reader to create the necessary technical conditions for modifying toxic persecutory objects. I felt this aim was essentially realized and that most readers will benefit from selectively reading this book. In fact, I did assign several key chapters to my own students, both experienced analytic clinicians and postdoctoral level trainees, and all found the readings helpful, as did I, in furthering both our understanding of, and proficiency in working directly with intrapsychic structures causing self hatred. I will briefly highlight the most noteworthy chapters in the remainder of this review while providing an overview of each article’s focal point.

Tsigounis & J. Scharff’s introductory chapter adeptly elucidates the nature and development of persecutory objects. Freudian, Kleinian and Fairbairnian perspectives along with clinical vignettes are employed in discussing the complex interplay between actual, early persecutory events and the individual’s emerging internal structure leading to the formation of persecutory internal objects. It is evident throughout the more theoretical chapters in the first part of the book, as well as in the subsequent clinical chapters, that each writer shares the idea that the prototype for the persecutory object lies in a complex interaction between external and internal objects—between actual mother-father-infant experiences and the child’s aggressive and envious fantasies directed against the parents.

J. Scharff’s second chapter takes up these issues in terms of the death instinct as she supports her thesis with clinical examples and further elaboration of the ideas of Freud, Klein, Bion, Fairbairn, and R. Britton. The distinction is clearly made between the classical view on the death instinct and Scharff’s favored Fairbairnian, object relational position pertaining to the tie to the bad object as the source of persecutory experience. In brief, Scharff’s object relational perspective propounds that aggression locked into a closed system of internal object relationships produces the death constellation. This toxic psychic structure, consisting of persecutory internal objects, is fundamentally interpersonally constructed and does not result from the death instinct.

David Scharff applies the theory directly to the clinical setting in the next chapter as he considers the strength of the sexual tie to the bad, “traumatic” object in psychoanalytically oriented couples therapy. The author dramatically illustrates how each partner becomes closely associated with the other’s painfully persecutory internal objects and how this is played out in the dyad in terms of shame and guilt. Ashbach next explores these affects of guilt and shame as signal emotions for heralding the activity of persecutory objects. The role of masochism and aggression as well as the clinical import of containment in the countertransference are discussed capably in this chapter. Two case studies ensue in the next chapters, one exploring the “noise” of the persecutory object and its link to Winnicott’s fear of breakdown (De Varela) and in the second, a case of Munchausen by Proxy demonstrating how disturbed mothers project persecutory objects into the body (Ravenscroft).

The second part of the book continues the clinical focus in describing work in individual therapy with both an adult (Kaufman) and an adolescent (Johnson), in conjoint therapy with divorcing couples (Bagnini), and in group therapy with a particularly unbearable countertransference (Hall). Later chapters respectively focus on treating the persecutory aspects of physical deformity during surgery (Altamirano) and the persecutory family transferences in family business consultation (Stadter). The concluding chapter, by Tsigounis, presents a useful summation of the limitations in detoxifying persecutory objects while encouraging readers to recognize the necessary frustrations and failures inherent in this type of work.

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Erasmus was known to have said that he would spend any money he had on books and if there was any left over he would buy food and clothes. I suspect that his deep, perhaps spiritual, pleasure in reading was not indiscriminate. Likewise, we know that there are some books that are worth the money and time because they not only provide us with new vistas and perspectives, they also reveal a spirit that invites us to take a journey with the author to other worlds. Randall Sorenson’s book, Minding Spirituality, falls in this camp. There is a spirit of compassion, understanding, curiosity, and intellectual depth and breadth that rises from the text. Dr. Sorenson’s book embodies the best of psychoanalytic respect and curiosity as well as liberal Protestant openness and hospitality to others.

Regardless of whether one is kindly disposed to religion and spirituality or ambivalent about religious faith, this book is well worth reading. Moreover, given the prevalence and diversity of religious and spiritual beliefs and experiences in this society, it is prudent and ethical, whatever one’s views, to read a book that critically and constructively engages the complex issues that emerge between science and religion, in general, and psychoanalysis and religion, in particular. While Sorenson might not have intended this, I also believe the book is timely because of the seemingly mindless spirituality manifested in violent religious and political fundamentalism in the world today and the rise of a totalitarian mindset in some segments of Western societies. In each case there is foreclosure of mystery, openness, and mutual self-critical discourse.

My hope, in this review, is to provide an overview of Dr. Sorenson’s book that gives readers a taste of the banquet of questions, ideas, and research that awaits them. His thought provoking multidisciplinary approach and original research will enrich and enlighten the reader. Of course, any review will raise questions and highlight some of the limitations of the book, but that should not serve to dissuade people from reading this important book. Indeed, any therapist would benefit from the research, insights, and clinical acumen Dr. Sorenson brings to the table.

Dr. Sorenson begins by arguing that multiple methods help us approach issues and questions regarding religion and psychoanalysis. This includes his interesting and clearly presented use of empirical research in mapping psychoanalytic research. For those of us whose eyes glaze over whenever we begin to read statistical research, Dr. Sorenson, in this and other chapters, presents his unique research in a lucid and interesting manner. For example, in his introduction he uses multidimensional scaling to map the perceptual boundaries between the various psychoanalytic schools. He uses multiple perspectives, in part, to illustrate his approach throughout the book as well as to depict how psychoanalytic groups function, from a sociological perspective, like religious groups. That is, psychoanalytic groups often behave in fundamentalist ways. This tendency toward fundamentalism forecloses kenosis or self-emptying, which can, as he demonstrates, occur in sessions with patients. In other words, fundamentalist tendencies, whether in religion or psychoanalysis, stifles the spirit of openness, curiosity, and surprise. Indeed, analytic fundamentalism is in direct opposition to the tenet of free association. Dr. Sorenson goes on to tell us that he is going to attend to the psychological processes implicated in psychoanalysis and spirituality as well as offer an explanation (chapter 7) of how psychoanalysis and spirituality are “parallel and complimentary [not identical] approaches to problems in living” (p. 11).

Included in his introduction is acknowledgment of his own rich religious and psychoanalytic heritage; both of which have the spirit of openness, mystery, curiosity, and deep respect for the transcendence of the other—reminiscent of Emmanuel Levinas. Acknowledgement of one’s history and values, as we all know, is important in attending to the ways we attend to and handle patients’ communications.

Chapter one sets the stage by defining spirituality and explaining what minding spirituality means (i.e., being bothered by it, alert to is presence, care for it). Interspersed with this is research that shows the importance of religion in many patients’ lives as well as an overview of changes in how analysts have understood and attended to religious experience during the past century. His hope is that psychoanalysis and religion can “meet in a profound space in which neither is statically master or slave, neither annexes or subsumes the other” (p. 39). I suspect this Hegelian desire is the hope that we can embrace the paradox of likeness in difference and difference in likeness—a sure sign of mature and humane relationships.

In this chapter, I would have liked Dr. Sorenson to pay more attention to how spirituality and religion are defined. These are notoriously difficult topics and their relation to the thorny concept of faith deserves more than two pages. More specifically, I believe a clear discussion on the idea and dynamics of faith would be important to address because many people in the psychological professions often misunderstand both. There is a wealth of literature on the psychology of faith, which is inextricably joined to spirituality and a necessary perspective to include. I would add...
that one might also address the faith of and in psychoanalytic “spirituality.” Having said this, I realize that authors and editors must make sacrifices in giving birth to a book, though psychologists and analysts could learn from theologians and philosophers who have thought deeply about spirituality and faith.

The oft-conflicted and ambivalent relation between psychoanalysis and religion is surely not surprising to anyone familiar with the psychoanalytic tradition. In the second and third chapters, Dr. Sorenson addresses how changes in psychoanalytic theory and training have altered the analysis of religious experience. Dr. Sorenson goes beyond theory, however. That is, he argues that there is a correlation between theoretical handling of religious experience and the ways analyst’s are trained to handle the patient’s religious experience. It appears, as Dr. Sorenson notes, that many analysts are more comfortable exploring a patient’s sexual life and decidedly uncomfortable in being curious about a patient’s spiritual life and practices. Included in this chapter is a discussion on recent narrative and constructive approaches in psychoanalysis and how these changes shape the analytic minding of the patient’s spirituality.

Traditionally, analytically oriented therapists attend to the analyst’s experience of the patient as well as the patient’s experience of the analyst. Chapter four addresses this dynamic. In particular, Dr. Sorenson provides empirical evidence that indicates that the foreclosure of interest and expression of religious sentiment by the patient is due, to a large degree, on the patient’s experience of the analyst’s beliefs about religion and spirituality. Put another way, does it make a difference whether the analyst is open to the possibility of transcendence? Before answering this question with his own research, Dr. Sorenson is careful to lay the groundwork by addressing philosophical, clinical, and pedagogical objections to examining empirically the patient’s experience of the analyst’s spirituality.

In chapter five, Dr. Sorenson shifts to the analyst’s experience of the patient’s religious experience. He finds that the perspectives of God as a corresponding and compensatory object tend toward psychological reductionism. Ever the analyst, this reductionism is not without a scent of psychological arrogance, omnipotent thinking, and the foreclosure of transcendence. He advocates God as object X, which introduces a measure of mystery and, more importantly, epistemological humility. God as X affirms mystery and the limits of human knowing. More important, X creates a space for curiosity and exploration. I am reminded of Bollas’ aleatory objects—those objects we discover; objects that surprise us. Aleatory objects and God as X only appear when there is a spirit of openness, hospitality, and humility. I believe one can see this clearly demonstrated in Dr. Sorenson’s clinical illustrations.

In this chapter I would have liked to see Dr. Sorenson address some of the possible experiences that analysts may have in relation to the patient’s experience of God. I am thinking of the analyst’s envy or fear of transcendence. There are, of course, numerous other unconscious motives for avoiding the topic.

Lest one lapse into disidentification with regard to religion and religious communities, Dr. Sorenson, in chapter six, returns to a topic he touched on in the introduction. He argues that psychoanalytic institutes operate, at times, like religious groups. Relying on theoretical and empirical studies in the sociology of religion, the reader is faced with the myopic “fundamentalism” of psychoanalytic institutes. This reminded me of my experience. There were times, at the institute I attended, that I had the experience of being in a basic catechism class where doctrine is taught and criticism avoided. Openness was espoused, but the ethos was one of accepting psychoanalytic doctrine. Those who questioned or offered other perspectives were discouraged in a variety of sophisticated ways. What does this have to do with spirituality? Dr. Sorenson, I believe, is attempting to challenge teachers and practitioners of psychoanalysis to recognize how their educational principles and practices can restrict analytic curiosity and respect for the spiritual and religious practices and beliefs of their patients.

This discussion raises the important question concerning the differences between religion and psychoanalysis. Dr. Sorenson, in this last chapter, argues that the easy answer to the question of whether psychoanalysis and religion are in the same business is no. But by examining the warfare metaphor that characterizes the history of the relationship between science and religion, the secularization hypothesis in the sociology of religion, and the decline of foundationalism in the philosophy of science, Dr. Sorenson brings a perspective that changes how we think about this relationship. For example, his careful scholarship indicates that 1) the claims of science can be quite imaginative and difficult to find credible, which is not radically different from religious imagination and claims about the mystery of the world we are thrown into; 2) both psychoanalysis and religion resist succumbing to nihilism; 3) psychoanalysis, like religion, possesses anthropologies and therefore addresses questions about the cause of human suffering and what is a good life. All of this together suggests that psychoanalysis and religion, while not in the same business, are not poles apart. Dr. Sorenson may be said to advocate a transitional space between psychoanalysis and religion—a space that Winnicott believed required the capacities to recognize and handle similarity and difference. Perhaps the maturity and creativity of both psychoanalysis and religion is to be able to handle and appreciate the paradox of likeness in difference and difference in likeness in this transitional space.
Psychoanalysts and psychoanalytically informed clinicians are tasked to mind all manner of human experience. My own interpretation of Dr. Sorenson’s view of the capacity for “minding” in psychoanalysis is connected to the analyst’s courage to be open to mystery and transcendence. Theory, training, and our own idiosyncratic histories can foreclose our capacity to mind the patient’s spirituality as well as our own. Dr. Sorenson challenges us to mind the questions and issues of spirituality and psychoanalysis. This book is an important contribution to the critical and constructive discourse between two, often troubling, siblings of human life and experience. From a different and related angle, I would add that his book is a balm and an invitation. It is a balm because he points to the possibility of engaging the “other” in ways that facilitate humility and openness—two virtues essential for learning and community. It is an invitation to reach out and learn from the other, from the strange other. I do not know of a more apt invitation not only for analysts but also for all of us in this increasingly polarized, fearful, and violent world.

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Louis Rothschild, PhD

**I**nstincts remain relational phenomena. Postmodern science appears to convey a new insight. Taken out of any particular context, these two sentences serve as intriguing stimuli. As I ponder them as decontextualized slogans, I find it quite possible to imagine that they might have originated out of recent writing concerning postmodern approaches to relational psychoanalysis (e.g.; Fairfield, Layton, and Stack, 2002). Therefore, it becomes all the more intriguing to consider the fact that these words belong to none other than Hans Loewald. To further intrigue, these words are pieces of quoted passages found in a text by an analyst concerned with maintaining the “classical” frame of psychoanalysis. It may aid understanding to note that the author of the book under review is that analyst who has also translated four books by Jacques Derrida: the classical frame encounters French theory. Such an encounter presents its own frame: the land of Nietzsche’s eternal return, of difference.

Such a space beckons this reviewer to play. However, I am tethered or shall I say tempted to be tempered by the fact that this work has already been reviewed elsewhere and rather harshly at that (Goldberg, 2003a). Further, this other review led to a brief debate between the author (Bass, 2003) and the reviewer (Goldberg, 2003b) in JAPA. In short, Goldberg finds that the work under review suffers from an overly selective literature review and parochialism. Responding, Bass notes that the central thesis of his work is not mentioned in Goldberg’s review and Bass questions Goldberg’s overall tone as a reviewer. In turn, Goldberg refers Bass to the dictionary and other scholars to find the meaning of key terms. Difference no longer feels so playful.

As the title of Bass’s work suggests, the engagement of difference can be traumatic and an understanding of difference is a key for meta-theory as well as practice. In this regard it is worth noting that much of what Goldberg commented on reveals a careful reading of Bass’s work. In the spirit of engaging difference, and so as not to be boringly redundant, what follows is a review that utilizes in part Goldberg’s review as a frame to engage Bass’ text—albeit from a different point of view.

However, first, a look to what is central to this reviewer regarding the book itself. The Preface of the book speaks to the use of deconstruction to engage the contradictions within Freudian theory in hopes of renewing it from within. Specifically, Bass is concerned with a general theory of fetishism and finds that Freud began to propose one at the end of his life. Bass notes that his own thoughts on the problem first culminated in a 1991 paper on fetishism and oscillation published in American Imago, and that the ideas for this book began to form in a 1997 paper published in Psychoanalytic Quarterly on the problem of concreteness. Central to these articles and the book under review is a focus on a rethinking of repression as central in favor of a focus on disavowal and splitting. Bass notes that others have also grappled with the problem of concrete and resistant patients, and adds that what is novel regarding his approach is a revision of theory based on defenses against differentiation that addresses both sides of the therapeutic dyad in order to open the “closed system” of the concrete patient by working through enactments within analyst and patient.

If only for his careful reading of Freud, and his ability to communicate what he has found, the book is worth a read. Consider the following sentence found in italics on p. 30: “Perceived castration is a fantasy.” Simple and relatively obvious, yet the quote is not a common observation and it affords a scaffold to support a rich discussion of sexual difference. I will quote again to illustrate how moving from Freud to Loewald, Bass illustrates his general theory (his treatment of Loewald is in my opinion equally excellent).
My hope in quoting is that the reader may decide if what is found here prompts one to pick up the book itself:

the fetishist attempts to substitute a static, finished thing for the sexual difference that overwhelms him or her. The opposition castrated – not-castrated dominates consciousness. In more general terms, the concrete patient substitutes an “objective” perception of the analyst for the dynamic reality of the analyst’s interpretive function. (p. 102)

In regards to his use of passages of Freud, I’m not alone in praising. Goldberg does as well. Yet, Goldberg writes of being mildly annoyed in addition to being pleasantly surprised when Bass’ text affords freshness in rereading Freud. In Bass’s reply to Goldberg he notes that such annoyance is confusing. I imagine that the annoyance may be due to the other difficulties Goldberg has with the text.

Goldberg’s central point is that Bass has failed to make explicit his registration of other’s work on disavowal, and that others have already solved the problem Bass seeks to solve. Goldberg further notes that there exist a multitude of answers to the problem Bass seeks to solve. Goldberg then notes that this is a problem of psychoanalysis: that most analysts are content to read only in their area of allegiance where there is certainty, thereby avoiding multiple points of view. In this respect, this reviewer is reminded of the Greek poet Archilochus who wrote of the fox who utilizes many viewpoints while the hedgehog uses only one. Archilochus certainly wrote long before there was psychoanalysis, and the problem of the fox and hedgehog is not unique to psychoanalysis. Some scientists have noted (e.g., Gould, 2003; Moscovici, 1993) that researchers often wear either the face of the fox or the hedgehog. Moscovici adds that when a researcher is using varied facts and methods to aid description, the fox is to be found. When the researcher is engaged in the task of explaining results, like the hedgehog, what contradicts and clashes is rejected. What is at issue in regards to this review is Goldberg’s claim that Bass is guilty of being a hedgehog who devalues the fox.

In that Bass is wedded to his “commitment to maintenance of the “classical” frame of analysis” (p. 270), he may be considered to be a hedgehog. Yet, it strikes me that there is significant variance within that niche. Variance that quite possibly conjures the multiplicity of the fox. For example, his chapter on the part object is a journey through Abraham, Klein, and Winnicott. Further, the next chapter entitled “Analysis of Surface, Analysis of Defense” contends with the work of Paul Gray and Betty Joseph, as extended respectively by Fred Busch and Michael Feldman. Although similar, Freudian ego psychologists are not Kleinians. If that does not afford sufficient evidence of a fox lurking in Bass’s text, consider a footnote (#20, p. 144), in which Bass writes in reference to Cartesianism within Freud’s theory that there is a large literature on the subject. Here Bass may be guilty of showing the fox face in regard to description while sporting the hedgehog while engaged in explanation. However, this reviewer is not certain that this in itself constitutes a foul.

For his own part, Bass states that elements of his theory have been anticipated by other analysts, and goes on to say that the book itself is not an ultimate work for it does not integrate all the thinkers he would have liked to include. He is aware of the limitations of his discussion, and jokes that, “The ideal book for the ideal reader with the ideal insomnia would have been impossible” (p. ix).

The work is not a primer by any means. I would recommend this book to any practicing therapist who has already encountered psychoanalytic metapsychology and desires more. Moments of the text convey Bass’s role as a supervising analyst, and the book would also certainly be interesting to anyone undergoing a training analysis or supervising one for those albeit brief textual moments. Goldberg contends that the text would be of interest to students of Derrida. In this I also agree. I will confess, however, that although I have read Deleuze and Foucault (Gasp!), I have not to date read Derrida. So, how can I agree? The answer is found in one of two quotes resting on a page before the Introduction to the work under review. One is from Derrida’s work, Glas. I found the quote challenging and difficult if not outright confusing when I first opened Bass’s book. That itself provides my overall criterion for this review. Upon finishing the work and looking back to write this review, the quote was understood. Bass does his job well. To that end, the book might also be especially recommended to students of psychoanalysis who are not students of Derrida, but interested in his work.

References

Louis Rothschild, a member of the local chapter, Rhode Island Association for Psychoanalytic Psychologies, is in independent practice in Providence, RI.
Howard Shevrin’s book of reprints of Charles Fisher’s experiments in subliminal perception provides a fascinating experience for all clinicians, especially those with a strong interest in dreaming and perception. I recommend this book with enthusiasm. The first part of the book comprises papers that study very carefully the subliminal perceptions and dreams of individuals, and present drawings and conclusions in great detail. The second part of the book comprises papers using a research methodology to test hypotheses in a reasonably rigorous manner. I will focus primarily on the papers that study the subliminal perceptions and dreams of individuals in detail, because I believe these papers will be most interesting for psychoanalysts and psychotherapists.

In addition to the original papers of Fisher and his collaborators, the book also contains Shevrin’s insightful introduction and thoughtful summary of Fisher’s ideas that he integrates with more recent work from his laboratory. Shevrin states:

Perhaps Fisher’s finest contribution to psychoanalytic theory is his proposed revision of the theory of dream formation…. Fisher discovered that his subjects’ images were in many respects as dreamlike in nature as their dreams. And yet these images were obtained only minutes after the exposure of the subliminal stimulus. These images appeared to contain evidence for the activation of powerful unconscious wishes and dreamlike primary process condensations. (p. 17)

Shevrin gives an example:

[The subject’s initial impression of the subliminal stimulus already manifested the influence of unconscious forces. The stimulus was a colored photograph of two Siamese cats and a parakeet perched between them. Following the 1/100 sec exposure, the subject reported seeing two animals resembling dogs or pigs. However, when she attempted to draw the dogs or pigs, the animals turned out to look like peculiar combinations of mammal-like bodies and bird-like heads and tails. Although the subject was an artist, she complained that she had to draw the animals in a way almost compulsively despite her intention to do otherwise. (p. 17-18)]

Shevrin emphasizes that Fisher proposed that the mind registered many stimuli preconsciously during the day:

Shevrin also points out: “Fisher’s reliance on drawings is particularly noteworthy, because drawings not only allow for convenient identification of visual forms, but often what appears in the drawings cannot at all be inferred from the verbal account of the image” (p. 20). Shevrin also notes that Brakel (1993), a colleague in his laboratory, has shown that drawings of dreams are much richer than verbal accounts (p. 21). In her paper, Brakel argues for changing psychoanalytic technique to include the investigation of drawings of dreams.

Shevrin also states: “Occasionally, Fisher cites a transformation that affects the meaning of a stimulus rather than its perceptual character, and this he will refer to as aperception rather than perception” (p. 20). This idea of aperception is very interesting and it fits well with Schacter’s (1992, 1995, 1996) study of priming in which he distinguishes between a perceptual representation system and a semantic representation system. The perceptual representation system involves visual communication, and the semantic representation system concerns itself with meaning, but with meanings that are literal, concrete, and very specific, rather than the kind of abstract or logical reasoning that we would include as part of secondary process thinking (Helm, 2004, p. 13).

In “Dreams and Perception: The Role of Preconscious and Primary Modes of Perception in Dream Formation,” Fisher (1954) advocates expanding key Freudian ideas concerning utility of the “day residue”:

Freud’s formulation that an unconscious idea cannot enter consciousness unless it is ‘covered’ or ‘screened’ by a preconscious day residue to include the notion that the memory pictures connected with the unconscious idea cannot attain consciousness unless they are covered or screened by preconscious sensory percepts associated with the day residue…. Even, for example, when a figure from the past does appear in the dream, it can be demonstrated that fusion or condensation with a figure in the tachistoscopically exposed picture or with a visual percept from the scenes surrounding the experiment has taken
Fisher states that even though the percepts are registered outside of awareness, the perception is preconscious, something that can become conscious relatively easily when compared with something unconscious that can become conscious only with great difficulty. Nonetheless, there are important differences in the ease with which preconscious perceptions can enter conscious awareness. Some preconscious thoughts emerge very easily, but the kind of subliminal perception that Fisher is dealing with emerges with a fair amount of difficulty and is accompanied by strong emotion (p. 75-76). Fisher continues:

The type of perception involved in these experiments preconscious because, although the percepts are taken in and registered outside of awareness, they are capable of being made conscious. Kris (1950) has pointed out that preconscious is what is capable of becoming easily and under conditions which frequently arise. It is different from unconscious processes in the case of which such a transformation is difficult, can only come about with considerable expenditure of energy, or may never occur. (p. 75-76)

But Fisher notes also notes that Kris understood that there is great variation in the reaction when preconscious material emerges into consciousness. Some of it emerges very easily without being noticed. But the preconscious percepts under consideration emerge accompanied by very strong emotional reactions. “[T]he subjects in these experiments… showed great astonishment and wonder when they recognized the dream images after confrontation with their tachistoscopically exposed pictures” (p. 76).

Fisher states that free association was not enough to bring these subliminal percepts into conscious awareness and that the subjects had to be confronted with both their drawings and the original subliminal stimulus. Potzl (1917) found that subjects were also very likely to forget what they had drawn. And Fisher found that the visual percepts were not only taken from the tachistoscopically presented stimuli, but also from everything surrounding the experiment, such as paintings in the hallway that the subject saw on the way to the experiment. Fisher though the visual percepts were basically structured around the transference to the experimenter and the experimental situation (p. 76-77).

Furthermore, Potzl’s finding that the parts of the picture that were consciously perceived did not appear in the subject’s dream turned out not to be true in the experiments of Fisher and his colleagues, and in the work of Shevrin and his colleagues also. Both consciously perceived and subliminally perceived stimuli can appear in dreams. Often there is a “double registration”:

Some of the visual structures are registered twice, once consciously, once preconsciously. The preconscious percept is registered with much greater accuracy and involves details not appearing in the conscious percept. For example, in experiment IV, the guard and the sentry box were consciously perceived as a silo, but preconsciously there was registration of many of the details of the figure of the guard and the structure of the sentry box… As opposed to the conscious percepts, the preconscious percepts appear to be connected with more deeply repressed material” (p. 76-78).

To return to Fisher’s ideas about the transference, Fisher notes that subjects didn’t dream if they weren’t given any instructions to record dreams, and he seems to be unaware that everyone has four or five dreams a night, whether they remember them or not. Rapid eye movement sleep (REM) was being discovered in Chicago at about the same time that Fisher was working in New York. In any event, Fisher states, “the instruction to record dreams functions as an indirect but highly effective suggestion to dream and is interpreted as a command to dream about the [tachistoscopically presented] pictures” (p. 80). Fisher believes that the “experimental situation, procedure, and instructions activate unconscious wishes in relation to the experimenter” (p. 80), and that all the dreams are transference dreams. He notes that the patients had psychosomatic illnesses and he thought they had unconscious wishes to be cured. Furthermore, there is growing evidence that the most exciting and/or anxiety-provoking stimulus is selected as the day residue for dreaming and creates a match between the pictorial memories and ideas from the past (Reiser, 1997, 1999; Winson, 1986).

Fisher also has some interesting observations about modern art, and particularly Picasso’s work. Fisher notes that memory images of subliminal stimuli can be apprehended as something else, and he points out that, similarly, Picasso’s bronce, Baboon and Young, has a face composed of toy automobile, with the hood of the car and the sloping windshield resembling the forehead, eyes and brow of the baboon. Fisher summarizes certain mechanisms of “gestalt-free perception and imagery”: the abolition of the usual figure-ground relationships, including reversals; fusions and condensations, such as the breast of one figure being also the eye of another; the percept can be multiplied, so that there can be five profiles for three dancers; displacements, such as putting both eyes on one side of the head; extensive fragmentation; loss of meaning and the acquisition of another meaning, and “frequent rotations and spatial translocations” (Fisher, 1959, p. 234-237).

The second part of the book presents four papers of
experiments by Fisher and his colleagues, using more rigorous methodology, and Shevrin provides an excellent summary of these experiments.

A study done by Paul and Fisher (1959) found a relationship between whether the subject was conscious of the stimulus or not and the subliminal effect. There was a negative relationship between success at detection (consciousness) and the emergence of subliminal effects. This finding shows that subliminal effects are not a function of some degree of consciousness, and, in fact, awareness of the stimulus inhibits unconscious effects, and thus relates to the way defenses work. In other work, Shevrin, Bond et al., (1996) found “that people high in repressiveness inhibit the effect of subliminally activated unconscious conflicts from appearing consciously.” Snodgrass, Shevrin and Kopka (1993) found that an active effort to see the stimulus causes an inhibition of subliminal effects, while a passive attitude helps. (p. 248-250).

The study done by Shevrin and Fisher found primary process transformations occurring after subjects were awakened during REM sleep, and secondary process transformations occurring after being awakened during N-REM.

The final chapter reported a study by Luborsky, Rice, Phoenix and Fisher (1968) that examined the eye movements of subjects as they viewed very faint stimuli. The idea was that there should be no eye movements if the stimulus was subliminal and the subject was not consciously looking at something. They found that the eye movements began to center on target stimuli just before the subject reported seeing “something.” They also found that this centering of eye movements was positively correlated with associations to the target word.

This book will be very helpful for all clinicians in that it provides an excellent understanding of subliminal perception and how it relates to dreaming. Fisher’s work illustrates the importance of the visual and pictorial, and how that can be obscured by verbal reports. Brakel (1993), a colleague of Shevrin’s, advocates using drawing in dream interpretation. Her approach deserves serious consideration. Fisher’s papers and Shevrin’s insightful commentary will provide the clinician with a new understanding of dreaming and perception.

REFERENCES:


HATING IN THE FIRST PERSON PLURAL: PSYCHOANALYTIC PERSPECTIVES ON RACISM, SEXISM, HOMOPHOBIA, EDITED BY DONALD MOSS. NEW YORK, NY: OTHER PRESS, 2003; 276 PAGES, $40.00. G. REYNAGA ABIKO, MA

This collection of essays on hatred is an important work that is integral to any clinician’s library. Regardless of theoretical orientation within psychoanalysis, issues of racism, homophobia, and misogyny are rarely considered or discussed. This remains true even in times of great heterogeneity and multicultural interaction in the United States. It is disconcerting that the very theories that promise insight into human nature remain silent regarding painful experiences that negatively affect so much of the population. This work helps shed some light on the historically oppressive systems of racism, homophobia, and misogyny with the final section devoted to a psychoanalytic understanding of terrorism. It is appreciated that each topic is addressed separately, as they are areas that are too often considered in a superficial way, as if all types of hatred and/or bias were alike. Although each topic is of a sensitive nature and often provokes unconscious reactions among discussants, they must be seriously and consciously considered if we are to learn how to live together in peace. The authors of the various chapters provide honest discussions about challenging and controversial topics from which many shy away and for which they should be commended.

The book begins with an introduction from its editor. Moss helps explain the subtitle for the book, making the point that we hate as groups, as this is a means of self-identification that helps fill the need for solidarity with others. If we are to treat hatred psychoanalytically, we must resist the process of disidentifying with hatred, as “it is only an intimate familiarity…with these deadly hatreds that gives us any chance to diminish their influence” (p. xx). However, current psychoanalytic theories avoid talking about the various types of hatred and, when they do, often treat them with a global perspective, as if they were all the same. Fortunately, the sections that follow deal with racism, homophobia, misogyny, and terrorism in ways previously unseen in psychoanalysis.

The first four chapters comprise the section on racism. In Chapter 1, Apprey explains that, not only must we consider our own basic assumptions, but we must also declare some ethic of translating concepts when attempting to understand patients cross-culturally. This is required because it will help capture the experience of groups for which psychoanalysis currently has no language and therefore no means of accurately conceptualizing. Current theory betrays the victims of racism, because it overpathologizes those who are suffering from effects both individual and collective. Apprey then sheds light on “transgenerational haunting,” or the effects of trauma across generations. This is a process with which oppressed groups easily identify but that psychoanalysis has consistently ignored in an American context with ethnic minorities. In Chapter 2, Bass expounds on the ideas brought forth in Chapter 1. He asks, “Why hasn’t this integration of observable intergenerational transmission of trauma with the history of unconscious processes been generalized to include racial persecution in the United States?” (p. 31). Chapters 3 and 4 provide psychoanalytic interpretations of Richard Wright’s Native Son and Ralph Ellison’s Invisible Man, respectively. These are two of the most important works of fiction in African American literature and their inclusion in this work is noteworthy. While this section focuses on African Americans and therefore represents only a small portion of the work to be done regarding theory generation for all oppressed people, it is promising to see such validating words in print. For the countless clinicians of color who are trained under theories and clinical styles that do not adequately represent them, these chapters are integral to a sense of representation for both the analyst and patient. It is hoped that this spawns more work and conceptualization in this area.

Chapters 5 through 8 have as their focus homophobia. In Chapter 5, Corbett provides a powerful and honest investigation into the underside of masculinity and use of the word “faggot.” He describes “faggot” as an “all-purpose put down” that is used as an unconscious attempt to preserve an image of strength in its user. “Faggot” is used whenever males want to aggressively protest the threat of smallness, something considered unacceptable in the U.S. Corbett explains that “…masculinity has been undertheorized and insufficiently problematized” (p. 141) in psychoanalysis. One wonders if this is due to a lack of motivation on the part of analytic theorists: “At the very least, it serves men, who, after all, have largely been the ones who theorize masculinity, to the extent that they do not have to take responsibility for their hate and anxiety” (p. 141). The challenging questions posed in this chapter should help shed light on an important, yet neglected, area in psychoanalytic theory, i.e. the nature of masculinity and male aggression.

In Chapter 6, Young-Bruehl explains that homophobia may only be fought with analytic theories that help understand the character pathology underlying this type of hatred. She describes the different ways that homophobia is expressed in obsessionals, hysterics,
and narcissists. Although Young-Bruehl does not provide case examples or detailed explanations, it is interesting to approach the treatment of homophobia in this way as opposed to a one-size-fits-all approach.

Chapter 7 is a fascinating chapter in which Lewes describes the current status of “gay-friendly” psychoanalytic theories. He states that they do not represent what many gay psychoanalysts would have wanted, as they are based on lesbian and feminist liberationism. He reports that this is due to the fact that many of the male, homosexual analysts who were actively contributing to a reformulation of theory have since died, many from A.I.D.S. He explains that current theories focusing on attachment as a primary motivator of behavior cannot account for the multitude of gay men who identify as such simply in order to have sex with as many other gay men as possible. He argues against attachment as a primary motivator, explaining that relational theorists do not have the language to “hear” many gay patients accurately. In general, current theories “…underestimate the primary motivating power of phallic drives” and are unsuccessful “…in addressing adequately many of the issues that gay men bring to treatment” (p. 171). He provides illuminating case examples in this regard that demonstrate how the patient would have been misunderstood with a relational approach. He ends the chapter with a discussion of current “gay-friendly” theories as simply another disguise for the homophobia that has run rampant through psychoanalysis since its inception: “Psychoanalysis now welcomes homosexual people to its precincts, but in order to do so, it has transformed its image of what a homosexual is…” (p. 189). The “new” image of gay men is that of someone who “…seeks permanent ties of attachment and a stable and respected conventional social position” (p 189), which is not applicable to the patients of whom X speaks. He makes a convincing argument in this regard and it is interesting to consider the ways in which homophobia continues to “hide” in psychoanalytic theory.

With Chapter 8, Moss writes of internalized homophobia in a way that is not conventionally described. He conceptualizes it as the outcome of a substitution for something else as opposed to the typical meaning of persistent negative feelings toward one’s self as an internalization of the dominant culture’s values. He argues that both homophobia and internalized homophobia are renunciations of something sexual, with internalized homophobia targeting the sexual drive’s aim and source (as opposed to its object, as in homophobia). He explains that “one hates oneself for wanting what one wants, and therefore for being what one is” (p. 205). This is something that is able to be seen clinically only when it is unsuccessful but an important factor to consider when working with homosexual patients.

The section on homophobia provides an important contribution to a field that has traditionally overpathologized homosexuality. They represent important steps in the direction of more fully understanding the pernicious effects of both homophobia and internalized homophobia, including the generation of psychoanalytic theory and therefore treatment itself. The absence of work on lesbianism and bisexuality was disappointing. While space constraints certainly limit what is able to be included in any edited volume, the silence in this area seems strangely reminiscent of the lack of clarity in psychoanalytic theory on female sexuality in general. Therefore, even more work must be done on this topic. If analysts hope to remain vital in a country with increasingly blurred sexual boundaries, homophobia and bisexuality are important areas to remain open to in the future.

Chapters 9 and 10 focus on misogyny. In Chapter 9, Zeavin makes the familiar point that psychoanalytic theory is not strong regarding the development of female sexuality and/or femininity in general. She argues that current theories continue to view women as obscure versions of (normal) men. In chapter 10, Harris agrees and makes it clear that “…a psychoanalytic account too easily privatizes psyche and leaves unremarked the material historical conditions and social practices that maintain misogyny and make use of it” (p. 259). Thus, misogyny continues to run rampant throughout psychoanalytic theory, in addition to society and the interpersonal world of both men and women. In general, misogyny is described as a transformed fear of women that begins with the mother. Kleinian theory is helpful in this regard and the authors argue that misogyny is so strong and prevalent because everyone has a mother who is both needed and feared/hated. Misogyny actually allows its perpetrators to maintain a passionate form of attachment with women, albeit distorted and abusive, because it keeps the feminine close and important. These chapters provide a sobering view of a condition that plagues every aspect of society. Whether it manifests itself in unconscious bias against women, interpersonal relations, or societal standards, the hatred of women is not likely to disappear anytime soon. We need theories that allow us to recognize misogyny and treat it, but this does not seem welcomed in psychoanalysis. The authors were brave in their willingness to give justice to a topic that most would either deny as problematic (or even existent) or ignore altogether. Let us all appreciate their effort and continue to foster psychoanalytic discussion and theory about a topic that will only become more relevant as women continue to gain presence in the world, both personal and political.

The final three chapters are devoted to the issue of terrorism, a topic of obvious importance to Americans only in the past few years. This section was undoubtedly the
most incomplete, yet the one to which readers will likely consider first, given the news as of late. It seems that public opinion likely drove inclusion of this section, given that terrorists have varied agenda that is likely related to other types of hatred more than its own unique kind. Chapter 11 was written with a very clear Western bias to any reader with even cursory knowledge of Islam and/or Muslims. Stein writes about “evil” terrorists, with a focus on the letter of Mohammed Atta, the man who bombed the World Trade Center. Although she is commenting on a letter that was translated from Arabic into English, using Christian and Jewish religious terminology to reference Islamic ideas, a caveat is never given, with the exception of a footnote stating the letter had been translated. As any bilingual and/or bicultural individual is well aware, concepts do not always translate well into other languages and one must remain exceedingly vigilant in maintaining accuracy when commenting on “foreign” concepts. However, Stein never does this, leaving the reader with a consistent misunderstanding of Islamic religious devotion and overpathologization of the manner in which devout Muslims speak and act. For example, in reference to a passage of the [translated] letter that conveys Atta’s willingness to die for his cause, Stein writes, “What is the place and role of a smiling, calm, confident state of mind with which one passes from life into death, a state of mind so diametrically inverse to the turmoil, terror, and rage that would be expectable accompaniments to the commission of such destruction?” (p. 286). One is reminded of the ways in which Japanese kamikaze fighters were overpathologized and misunderstood during World War II. It seems that the individuality prevalent in the West, and psychoanalytic theory as well, has no place to consider a human being who is completely willing to give their life for what they consider a greater good. When considering acts of terrorism, regardless of the religious beliefs of the perpetrator(s), it is more productive to attempt to understand how the individual(s) came to define that greater good rather than overpathologizing the devotion itself. For example, Stein mistakenly argues against the ways God is viewed in the letter as opposed to making the comment that the bomber seemed to be a devout Muslim who was suffering from delusional thought processes and a disordered personality structure. Nowhere does she make this point, instead incorrectly placing Western viewpoints and interpretations in exactly the way against which Chapter I warns.

Another complaint against Chapter 11 is the frequent reference to Christian and Jewish concepts when describing a Muslim terrorist. Ironically, there are more similarities than differences between Judaism, Christianity, and Islam, though this is never mentioned. Instead, it seems that the Islamic fundamentalism attacked in this chapter is not understood from a grounded perspective, but rather in a way that judges it against the assumed Judeo-Christian ethic of America. This is problematic, not only because of the inaccurate method of comparison, but also because the rationale for making such statements is never given, as if it were obvious. This is exactly against which every other chapter in the book argues. This essay seems to model what not to do when considering the views of those who are culturally different from us. One wonders why only Muslim terrorists were discussed, instead of the countless other individuals claiming religion as their rationale for violence. One need not search too far in American and Christian history to find examples of such “terrorists,” though this is also never discussed. Overall, it seems that Stein used this chapter to propagate the same generalizations and bias against fundamentalist Muslims that can easily be found in popular media, as opposed to providing a psychoanalytic understanding of “the mind of a suicidal religious terrorist,” as the title promises.

Chapter 12 redeems the section on terrorism, with its admonition against absolutist language and the lack of reasoned discourse that accompanies it. Lichtenstein is articulate in his description of the ways in which many have dealt with the inevitable confusion and coping difficulties after a terrorist act like that seen on 9/11/01. He explains that “‘terror’ has come to be the lasting signifier serving not as an occasion for a progressively more articulated discourse regarding the social, historical, and political meaning of our current crisis, but as a substitute for that articulation, a condensation that can serve, symptom-like, to convey meaning only if it is allowed to open further discourse, not if it is taken as the end point, the truth in itself” (p. 315). This certainly applies to the ways in which many Americans have reacted to the terrorist attacks and is a timely response to the challenges often faced in working with these patients. However, it may also be considered applicable to the ways in which people potentially deal with something they do not understand and/or like, making it consistent with the general theme of the book. The section on terrorism ends with a chapter by Moss in which he explains that “terror ‘ has come to be the lasting signifier serving not as an occasion for a progressively more articulated discourse regarding the social, historical, and political meaning of our current crisis, but as a substitute for that articulation, a condensation that can serve, symptom-like, to convey meaning only if it is allowed to open further discourse, not if it is taken as the end point, the truth in itself” (p. 315). This certainly applies to the ways in which many Americans have reacted to the terrorist attacks and is a timely response to the challenges often faced in working with these patients. However, it may also be considered applicable to the ways in which people potentially deal with something they do not understand and/or like, making it consistent with the general theme of the book. The section on terrorism ends with a chapter by Moss in which he makes the point that the goal of terrorists is to instill fear, making their message irrelevant. Although this may be interpreted as a convenient way to ignore the ways in which the U.S. is seen by others, Moss makes an important argument that conjecture about the goal of terrorist activity as anything other than a way to scare its object only serves the one making the argument. It may be, therefore, intellectualization against acts that are unable to be processed in any other way. Moss makes it clear that, “in a psychoanalytic reading, appearance is suspect. In the construction of evil, appearance is all” (p. 331). Like Lichtenstein, Moss argues against using defenses that serve only to prevent intelligent
conceptualization of those we fear, dislike, and/or do not understand.

The chapters included in this work provide a thoughtful collection that is timely and useful to American psychoanalysts. The U.S. is unique in the multicultural nature of its population, which means that many psychoanalysts are challenged to provide ethical treatment to patients who expose the limits of current theories. It seems that psychoanalysis must work with great vigilance in order to overcome the various biases inherent in its history. This is the only way in which analysts may hope to ethically conceptualize and treat members of a multicultural population. Although we are still in the ground stages of such an overwhelming process, the essays reviewed herein serve as an exciting step in the direction of inclusion of others in psychoanalytic theory and treatment.

**The Analyst’s Analyst Within, By Lora Heims Tessman. Hillsdale, NJ:**

Thirty years ago when I came to training in psychoanalysis, the mainstream had already broadened to include the likes of Anna Freud and Margaret Mahler. The 1970’s, however, was not the decade in which American psychoanalysis would open its doors. Theoretically, the judges were still out on inter alia: the object relationists (e.g., Middle School folk); feminist thinkers (assuredly those who rejected that penis envy was caput nili for neuroses in women); and those who viewed the vicissitudes of the drive for attachment (Bowlby, Ainsworth, etc.) as central to understanding both human emotional pain and the processes for resolving such pain. In addition, the American Psychoanalytic institutes were officially closed to a sizable percentage of those analysts whose ilk now add to their pools of candidates and faculty. And finally, the Training Analyst system in both IPA institutes and those that existed independently was unquestionable. Whether these analysts were “reporting” (i.e., could influence the candidate’s training) or “non reporting,” their authority in their respective institutes was unquestionable—their hegemony more or less complete.

Such were the conditions under which many of us, still practicing today, trained. It may be argued, furthermore, that these three exclusionary practices (exclusion by theory, by membership, and by the narrow locus of decision making authority) could only be perpetuated if there was indeed a vehicle that carried these practices seamlessly from one generation of power-brokers to the next, at both a local society level and beyond. While it is difficult to isolate the dynamics which perpetuated this system, one significant constituent-part for such a carrier-of-the-culture may well have been the Training Analyst system, itself. I suspect that many of the readers of this review recall choosing their training analysts, at least in part, due to the perceived political clout which they wielded in their community—the imprimatur of the chosen one. However chosen, the imprinting of the hand and mind of the training analyst, beyond the therapeutic benefits that may have accrued from this experience, remained and remains upon us as certainly as do the influences of parents from decades past. For some, like Thomas Szasz (1965, p. 118) the impact of the training analysis was “like a fetus deformed by a field of heavy ionizing radiation;” for me it was, indeed, different. When occasionally, I find that I have just wished a patient good-bye with my training analyst’s robustly-spoken “good-days,” I feel comforted and my harmless identification with him reminds me of what must be far more profound inheritances that remain some 18 years after his death and nearly 30 years after finishing our work, together. I find no inclination to ignore the homologies in our attitudes (my analyst’s and my own) towards the fee, towards affiliation with the institute at which we both taught, and much more. How could it be otherwise but that we are impacted by these experiences on the couch that move us to become who we are behind it?

In a successful effort designed to describe this experience of The Analyst’s Analyst Within, Lora Heims Tessman interviewed some three dozen analysts from the Boston Psychoanalytic. “Selections were based on the intent to represent the range of decades, the four possible gender combinations, and the inclusion of both training and non-training analysts” (p. 323). Their analyses had been carried out between 1945 and 1995 (roughly half before 1975 and half since) with 22 men and 13 women chosen to fill the sample. “Of the 34 Participants, 28 compared their experience with two or more analysts, whereas in six instances ... two Participants had shared an analyst” (ibid). While quantitative statistics are presented to describe the sample and review of quantitative literature is distributed throughout, this is a qualitative research study, a method which was well-chosen to the task of understanding such complex interactions as those that obtain within the analyst-analysand field of interaction. And while her conclusions are consistent with those of Curtis’s (Curtis et al., 2004), more quantitative study at William Alanson White and the Oslo Institutt for Psykoterapi of “What 75 psychoanalysts found helpful and hurtful in their own analyses,” Tessman’s study, by presenting verbatim vignettes from her interviews, offers depth and perspective to the conclusion that both draw: broadly speaking, the relationship—its genuine aspects—are central to the training analysand’s
experience of success or failure, of what was helpful or hurtful in their treatments.

Tessman evaluated more than a dozen constituent parts of the analytic endeavor, including the gendering of the analytic couple, how the analysis intercalated with training issues and theories of technique, the manner in which termination was planned and executed and the memories of the analyst. With each such variable, Tessman gave selections from the interviews dividing up respondents into those who were deeply satisfied, those who were moderately satisfied and those who were dissatisfied with their experiences. Care was taken to sculpt the sample so as to provide examples of multiple analysands with the same analyst and individual analysands with multiple analysts. It should be noted that this study was not designed to determine how successful analyses were in resolving neurotic or character pathology but stayed within its defined boundaries of evaluating how satisfying these treatments were to each analysand and how the legacy of the analyst or analysis was apparent to each analysand at this point post-termination.

As noted, this is a qualitative study and little gain would accrue from reviewing a portion of the hundreds of vignettes that Tessman chose for inclusion in this work; the richness of a qualitative study does not lend itself to redaction. Suffice it to say, that the memories thus offered-up—and this was so whether the analysis in question was deemed deeply satisfying, moderately satisfying, or dissatisfying—by Tessman’s vignettes present a portrait of analysands and analysts as quintessentially human. No excuses are made. No whitewashing is attempted. Indeed, as I listened to the accounts of the good, the so-so and the “oh, my Gods,” I came to think of The Analyst’s Analyst Within as an Old Testament version of who analysts are. Like the patriarchs, one Abraham (actually, it was a female analyst) might lie about who made the stink in the office or demand compliance on some altar of theory, an envious Sarah might try to discourage mastery and competition (actually, it was a male analyst that comes to mind) and others might show genuine caring and empathy, recognition of similarity and love beyond the requisites of any cool surgical model of treatment (like a forgiving older Esau bringing brother Jacob out of his fear of filial retaliation). This study demonstrates the essential humanity of the analytic endeavor. Of the 64 (training and non-training) analyses that were brought to the interviews, 39% of analysesand were deeply satisfied with their experience, 39% moderately satisfied, and 22% were frankly dissatisfied. I will, instead of detailing the accounts of the Participants, turn to Dr. Tessman’s conclusions with a call and a recommendation to all who are interested in the history of psychoanalysis and their own very personal history in psychoanalysis (inter alia Adlerians, Freudians, Jungians, Object Relationists, Relational Analysts, Self Psychologists) to visit Tessman’s work.

Tessman is throughout modest in drawing conclusions but towards the close of the volume does offer up her views of the analytic dyad and how they changed during her study; several of these conclusions shall be noted along with some brief comments. Throughout the work, there may be heard a resounding message spoken by the Participants and echoed in Tessman’s voice that the actuality of the analyst matters deeply in whether the analysis was to later be viewed as deeply satisfying, moderately so, or dissatisfying:

Such differences included the Participants’ experience of freedom, within the analysis, to love and to hate, to be authentically themselves rather than automatically adaptive, to feel understood rather than unseen for who they were, to feel cared about, even loved, rather than shamed or unworthy of wanting to have some personal significance to the analyst. (p.307)

And while, as Tessman notes, this already appears in the literature as early as Fenichel’s little book on Technique (1941), anecdotal evidence and the 22% of Tessman’s Participants who were dissatisfied testify to the likelihood that at least some training analysts are further from this caring stance and closer to Chargaff’s (1977) portrait of the university committee chair who, akin to a minotaur, survives off the blood of the doctoral candidate!

This need for a genuinely caring relationship having been recognized, it is perhaps expectable that Tessman would seek to depathologize the wish for continued post-termination contact between analyst and analysand. If there is indeed a beyond-the-transference relationship that exists between these two subjects, post-termination contact ought not be cavalierly confounded with concerns over whether the analysis was complete or not. She notes:

The more satisfying the analysis had been, the more likely that the analyst’s inner presence remains vivid. Posttermination contact accrues positive or negative meaning as it further elaborates the image of the analyst ... It seems important to revise the prevailing bias that if the analysand continues to desire some kind of connection with the analyst, posttermination, that it signifies an incompleteness in the analysis or a failing in the analysand. (p.318)

While Tessman does not speculate about the sources for this “prevailing bias” (above), it is tempting to fascinate about whether it mirrors other biases, the one that privileges the burial of taboo sexual-oedipal urges over what many may view as a pressing and requisite need to maintain the stirrings of the sacred dyad (e.g., Loewald, 1979) or some trenchant cultural trend in the direction of schizoid withdrawal.
On a personal note, I feel blessed to have spent some five years sitting with my ex-training analyst and discussing our difficult cases on a bi-weekly basis before his death (though I have not yet rendered this a tradition by doing the same with my own analyses). He and I disagreed on much. He was still suspicious of the ego psychologists and I had begun speaking of a relational underbelly to the oedipal. I and a number of his other students and analyses helped posthumously publish his last words, much as he had uniformly encouraged me to publish my perfidies and take my “comeuppance like a man.” Psychoanalysis was — I dare to speak for him as well as myself — a set of profoundly human experiences that exist somewhere beyond differentiation and along the vital and winding road to emotional object constancy!

Tessman does note discrepant levels of satisfaction with different gender combinations and with the different decades during which the analyses were carried out. Such group statistics are of dubious value and Tessman maintains an appropriately skeptical view of them. Still, it may well be of future interest to researchers that while the ratio of deeply satisfied to dissatisfied was nearly 10:1 in the 1985-1995 cohort of Participants (67% were deeply satisfied while 7% were dissatisfied), in the 1965-1975 cohort the ratio was nearly 3:1 in the opposite direction (59% of the Participants were dissatisfied with 12% expressing deep satisfaction). Analysands with different gendered analysts expressed deep satisfaction approximately 50% more often than with same gendered analysts. As to the decade-dependent statistics, one can but fascinate about whether the social upheaval in the late Sixties in the United States or the first signs of a weakening of the unilateral authority of an ego psychological point of view or some other dynamic might be implicated in this statistic. Such descriptive statistics as Tessman presents are fascinating but without more studied researches cannot be interpreted.

Finally, Tessman presents what she thinks of as a surprise result: “One of the unexpected signifiers of satisfying analyses turned out to be the Participant’s experience of the analyst as a ‘complete other,’ a person in his or her own right, with a good life of his own” (p.313). Tessman notes that this acceptance of the otherness of the analyst was particularly surprising “for we have only fairly recently moved in the direction of acknowledging the power of empathic attunement, of ‘moments of meeting’ emotionally to amplify the possibilities of a shared and cared about psychic reality between analysand and analyst.” Tessman goes on to suggest (p. 313) that the views of these Participants, in this manner, runs counter to “Bion’s (1967) advice to the analysand to ‘banish memory and desire.’”

For those of us who have come to accept that (e.g., Covitz, 1997 p. 340) “emotional well-being or health are measured in one’s capacity to relate intersubjectively” such results are hardly surprising. Herein, intersubjectivity refers to accepting the otherness of others, i.e., embracing their subjectivity, their inner worlds and their relationships to still others. Wasn’t this, after all, at the core of the toddler’s dilemma: to accept or rather to recoil from the acceptance that mother and father had a right to a relationship with each other beyond their responsibility to raise and nurture their young OEdipus. Some years later (Covitz, 2002):

I came to recast, as well, my understanding of the curative factors in psychoanalytic treatment. No more was it specifically either where Unconscious was let there be Conscious or where Es-It-Id was let there be Ich-I-Ego! Instead, I saw the treatment process as one in which two protagonists — one locked into relating unwittingly on the basis of their relational history and another equally locked into both relational history and theoretical specificity — came to slowly abandon these self-referenced pinions and to work to cherish each others’ inner worlds and to accept each other as unique others, as subjects, each in their own right.

With such assumptions, if one such as I were to be surprised by the response of Tessman’s participants, it would be more in the spirit of being pleasantly surprised. If health, indeed, is correlated with such experiences of intersubjectivity that transcend the need to recoil from a recognition of other subjects with the introduction of (either alloplastic or autoplastic) symptoms, the awareness of such correlations in analysands did not begin when theory changed. And as to the matter of Bion’s proscription against memory and desire (above), I would suggest, contrary to Tessman’s view, that Bion’s call for the temporary banishment of memory and desire (propensities intrinsic to the monad) lead canonically to transcendent intersubjective moments.

Throughout the work, Tessman is consistent in placing high value on the types of variables that are generally connected with relational paradigms. Such characteristics of the analyst as genuineness and a sense of caring for the other are, in Tessman’s writing, inseparable from the potential for a sanguine analytic dyad. Still, on the matter of self-analysis, Tessman (p. 258ff) would appear to continue to view the analytic introject in terms of its functional aspects in the comfort and ability to render appropriate understanding to the analysand’s post-analytic psychic productions.

I suspect Tessman would agree that what is optically introjected has more to do with the style of this analysis than with its correctness or completeness. This would presumably relate to the manner in which “the I relates to the Me” and parri passu how the earlier analytic dyad serves as a template for the manner in which “The I relates to The Other.” In cases in which Tessman reports
that the analysand retained an unsatisfying sense of the analyst/analysis it would appear that the remembered and oft-continued suffering had less to do with a failure to communicate correctly or completely as it did with the sense that these interventions failed from an intersubjective point of view, one in which the analyst failed to view the other, their analysand, as a subject in their own right.

A colleague recently confided that in his training analysis some 33 years ago, while the analyst was quite willing to offer suggestions about what his analysand’s wife might do or with this or that Oedipal or pre-Oedipal matter, he consistently failed to intrude on self-destructive behaviors in the analysand, himself. “Why,” he wondered sadly after these many years, “hadn’t a single good word been so-offered.” And in a public setting some years before his death, Spurgeon English complained about his training analysis with Willhelm Reich — not mind you about the incorrectness of this or that interpretation but on why Reich never hinted at the fact that they shared a love of music. Here, I agree with Tessman and the empirical studies that she presents, that mourning in the post-analytic period is most often not for the good-enough analyst who is no longer consistently available but relates to memories of the withdrawn analyst, the one who could not tolerate the quintessential humanness of the psychoanalytic endeavor. If self-analysis is to be helpful, it has, perchance, more to do with the manner in which the I and the Me have come to relate to each other intersubjectively.

I leave Tessman’s work thankful for much. She has established a path and research agenda for further investigating the curative factors in psychoanalysis with training analyses serving as a model for clinical analyses. She has done so in a welcoming manner that invites the psychoanalytic reader back into his or her journeyman days. And, finally, as I close by returning to my opening comments, Tessman has quietly cracked another window, one which lets fresh air inside and into the history of the first very schismatic and exclusionary century of the psychoanalytic movement by examining the vehicle by which the psychoanalytic method and ethos are carried forth into the future.

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Howard H. Covitz is a clinical psychologist in private analytic practice in Melrose Park, PA. He was for many years on the faculty and Director (1986-1998) of the Institute for Psychoanalytic Psychotherapies and is visiting faculty at Temple University. His book, Oedipal Paradigms in Collision, was nominated for the Gradiva Book of the Year Award 1998.

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**Section III Announces the Creation of a $500 Grant to be awarded yearly for the support of a dissertation in keeping with the mission of Section III**

Section III is dedicated to promoting research and theory concerning gender and women’s issues, to increasing the participation of women within the profession, to advancing the psychotherapeutic treatment of women, and to advocating on behalf of women’s issues. The Section has an additional focus on contemporary social issues.

Any doctoral student whose dissertation proposal has been approved is eligible to apply. The application will consist of three (3) copies of a letter, not to exceed two double-spaced pages, describing the dissertation and its relationship to the interests of the section and proof that the proposal has been approved. (Faxes and emails are not acceptable.)

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The winner will be announced at the Section III reception at the Annual Spring Meeting of Division 39 and, upon completion of the dissertation, will be invited to participate in a conversation hour sponsored by the Section. Applications for the 2005 award must be postmarked by March 1, 2005 and addressed to: Toni Vaughn Heineman, D.M.H., 2481 Clay St., #201, San Francisco, CA 94115
This book is written by seven women psychologists; and what a useful and delightful book it is! Each of the authors is a prominent psychologist in her own right. The book pools clinical expertise and wisdom culled from years of independent practice. It is a book written for women, although men can get a lot of use out of it as well.

The W2W (women to women) group, as they call themselves, sought to write about the challenges that women face in modern life and how they can meet these challenges while both staying sane and leading fulfilling, rewarding lives. This underlying theme evolves through an introduction of the concept of “self talk.” Self-talk is the internal conversation that we have which serves to point us in one direction or another. It is not always easy to find one’s self talk. Sometimes the conversation one has with oneself is really somebody else’s voice that has been internalized. Self-talk has three steps: voice mapping, reframing and movement strategies. Voice mapping is listening to yourself think about issues in your life. Listen to the “shoulds,” to the attitudes that you have. Reframing is the exploration, the therapy part. How else can you think about a particular issue in your life? What are the other options that you have in life? Movement strategies refer not only to thinking about things in your life in a different way, but also conducting your life in a new way.

We live in a time and a society when women have the greatest number of choices and the most freedom. Why, then, are so many women unhappy? A woman can choose to be a professional, a stay-at-home mom; she can choose to marry or to live a productive life single. Why, then, do women suffer depression about twice as often as men? Is it hormonal? Is it the stresses of life that are different for women, particularly the stresses of choice related to work/family responsibilities, sometimes called in today’s modern terminology, “role stress”? The authors make the point in a number of ways that being free to make choices does not in itself make one happy. It may actually lead to frustration at not being able to achieve all of the things that you are supposed to accomplish in today’s world. What if you cannot combine work and children very well? You are trying but things seem to always be out of hand—a refrain heard from many of our patients. This is a new form of oppression, the W2W group tells us. It is the oppression of modern day life; it is the expectation that women can do it all.

This is a powerful book about self-discovery and a must-read for women and the therapists who want to help them. The self-talk method is a useful tool to self-discovery and its use is demonstrated in many areas—jobs, personal life, etc. They demonstrate the method within the focus of friendship, dating, sex, marriage, child rearing, work, money, etc. Who has not had questions in these areas? Whose patients have not had questions? How do you begin this conversation with them? Each of the voices in the book, each of the stories, is familiar. Caroline, whose husband has left her suddenly and unexpectedly, talks about her difficulty maintaining friendships with her women friends. Is this her neediness, their callousness, or the changed situation? We have all heard this story. How can she reframe and move her life? Is there a simple solution like many self-help books hold out? No. Movement comes one step at a time and only after a full exploration of the self-talk about the issue. Are you feeling unworthy of friendships? Do you not have friendships that you would like because you expect too much from a friendship to begin with? All of these questions are explored in the conceptual frame of self-talk as proposed by the authors. Alice is a sixty-five year old widow who has been dating a highly narcissistic man. Should she stay with him? She values the companionship, but should she remain in a relationship that is based on his needs only? If she does break up with him, she may be alone. How does she resolve this dilemma?

What about dating? What are the expectations that women (and men) have about dating and marriage? Most expect to have a monogamous relationship at some point in their lives and expect the other person to be a “soul mate.” When that expectation is hard to come by disappointment, guilt and anger set in. “What is wrong with the men?” and “What is wrong with me?” are the basic questions. In the area of sex the problem usually is about not enjoying sex or not getting enough sex. In marriage, there is a concept of a very different marriage than a generation ago. The ideal marriage is egalitarian, friendly, and sexual without being demanding: partners without rigid role expectations. Despite that, or maybe because of unrealistic expectations, women are asking, “Should I leave? Is this fulfilling? Is something missing?” Each of these questions is an outgrowth of having choice. But each can be a difficult and painful one.
The key concepts put forward by the authors are the following: identify the principles that are guiding your activity, stop doing what you don’t want to do but think you should, envision better ways, adopt new behaviors, accept yourself and your unique strengths and capabilities. Wow! A tall order. But ever so gently the authors show us how this is possible. The authors also make it clear that when there are certain issues present, such as childhood sexual abuse, it is important to get professional help.

What about children? Theoretically we have children when we choose, and are able to raise them while doing everything else as well. Not necessarily. Modern life makes child rearing sometimes more complicated and difficult. Parents expect to raise their children more democratically and sometimes end up blurring the parent-child lines. Or they are obsessed with the wish to make perfect children. These are the scenarios that the authors describe, and certainly others exist as well. There is the wish to be the perfect parent, while continuing to do all of the things that were done before the babies came along. Frustration and loss of self-confidence are common experiences in new families. In the work arena, choice is also potentially problematic. Can a woman be equally happy as a stay-at-home mom or a “working mom”? Conflict and lack of confidence are common results of this difficult choice. What “shoulds” does the woman live by? Is it possible to be content? So often through self-talk, the woman finds that here, in particular, she is living by “shoulds” rather than “wants.” “I should have a career.” “I should stay home.”

Despite the descriptions of unhappiness that the authors describe, this is a remarkably optimistic and upbeat book. The authors understand that we are living at a time of major upheaval, where choice can make for confusions and anxiety. It can also lead to creative solutions to life’s problems. Is this different for men than for women? Women are more often beset with the voices of others that dictate the ‘should,’ more often blame themselves and more often expect themselves to be perfect. This book is not a rarified theoretical treatise. It is a practical self-help book that can prove valuable both for the therapist and for patients. Its power and authenticity make it unique in this genre, and the authors are uniquely qualified to make it so. I recommend it heartily.

LOCAL CHAPTER REPORTS: WASHINGTON PROFESSIONALS FOR THE STUDY OF PSYCHOANALYSIS

The year ahead is shaping up to be a rich and exciting one for the Washington Professionals for the Study of Psychoanalysis.

Hurricane Isabel served as a backdrop for our annual Board retreat. The absence of electricity, flooded basements and downed trees did not deter our Board from meeting to finalize plans for our coming year’s activities.

Our Program Committee has been very active. The theme of our seven Monday evening dialogues is: The Therapist as Person: Visible and Invisible Intrusions Into the Therapeutic Space. Guided by our presenters, we will explore the impact on the treatment of the therapist’s disability, loss of a spouse, sexual orientation, cultural heritage, relocation of an office and advancing age. Additionally, we will explore how therapy shapes the therapist.

One of our main events will be our annual Fall Conference, to be held on November 16, 2003 featuring Jonathan Lear, Ph.D. The theme of his presentation will be Therapeutic Action: How Can Irony Change the Soul? He will discuss the impact of subjectivity, objectivity and irony on the therapeutic process. Many of the myths and misconceptions surrounding irony will also be addressed, as well as the importance of renewing our engagement with the fundamental concepts of our practice.

Our seminar series continues to be very popular and well attended. Meeting in the facilitator’s home or office, they offer a more intimate venue for addressing a number of topics.

We continue to reach out to graduate students in a number of ways. One of our major initiatives is the Jonathan Bloom-Feshbach Award, which encourages psychoanalytic research and writing. This year, we’ve had a number of papers submitted for consideration, covering a variety of topics.

Finally, as part of our 20th anniversary observance, we will be honoring our past-presidents at a brunch in their honor. In addition to the festivities, we will be reviewing the evolution of psychoanalysis during their tenure. Hurricane Isabel did triumph over our original celebration, but we’ve rescheduled for February 28, 2004. We’re resilient!
FOR APA MEMBERS

DIVISION OF TRAUMA PSYCHOLOGY

A NEW PROPOSED DIVISION OF THE
AMERICAN PSYCHOLOGICAL ASSOCIATION

MISSION STATEMENT
Traumatic stress may well be the single most important behavioral health problem facing people today. It is a major factor in the health and well-being of people who have endured childhood abuse and neglect, adult assault, natural and human-induced disasters, sudden loss of loved ones through homicide, transportation accidents, unintentional injuries, war, chronic poverty and injustice, certain medical and surgical procedures, etc. Yet scholars and practitioners interested in research, prevention, and treatment do not have a common forum within APA to share their knowledge. We do not have ready access to the research methodologies and findings of others working in relevant areas.

The purpose of the proposed APA Division of Trauma Psychology is to provide a forum for scientific research, professional and public education, and the exchange of collegial support for professional activities related to traumatic stress. We envision the new Division of Trauma Psychology not as one that would obviate the need for such a focus within other divisions where it currently exists, but rather one that would allow for cross-fertilization, broader support for psychologist researchers and practitioners, and the resulting greater growth of assistance to people in need of it.

In order to establish this new division, we need to collect signatures of APA members and fellows. By signing this form, you agree to the following:

To maintain a continuing interest in the division
To accept membership in the division if it is established
To pay membership dues of $15 for the division if it is established (you will be billed automatically)

Please provide the following information.

APA Membership Status (check one):  _____Member  _____Fellow

Name (please print):  

Address (please print):  

__________________________

__________________________

__________________________

Membership Number (if known):  

Signature:  

NOTE: Return this form by mail, send to: Judie Alpert, PhD, New York University, Department of Applied Psychology, 239 Greene Street, 5th floor, New York, NY 10003
COMMITTEE REPORTS: FINANCE

This is my initial report to the membership on the financial condition of the Division. I thank my predecessor David Ramirez. He did a wonderful job and was a great help to me as I assumed the responsibilities of Treasurer. I hope to provide a balance between enough detail and overall perspective with our focus on either front.

How does the Division get income to carry out the goals of the Division? Most of our income comes from membership dues. The second source of income is from the Spring Meeting. The amount of money the Division has been receiving over the past few years from these two sources has been decreasing. In general most APA Divisions have seen a decrease in membership, so we are in line with the general trend. Yet the Division is one of the larger Divisions in APA. Very few divisions have separate meetings like our Spring Meeting and we are fortunate that it provides the Division with a source of revenue.

How does the Division spend its money? The largest category of expenses is publications. We support our excellent journal, Psychoanalytic Psychology, our strong quarterly publication Psychologist/Psychoanalyst and Psychoanalytic Abstracts. We also support the website, which is an electronic publication. The second, major category of expenses is the general operation of the Division i.e., meetings, communications and special activities. All are designed to advance psychoanalytic psychology practice, training and research. I believe that we do that with considerable efficiency. We have a fairly large and diverse Board and the Board meetings and its operations are another significant expense.

In the past few years we have been operating at a deficit (2001-2003) and we will probably have a deficit in 2004. This has happened because we have funded some special projects like the membership directory, the development of the Division website, digitization of Psychoanalytic Psychology for the CD PEP project, sponsorship of the Multicultural Summit and a special assessment per member for the Psychoanalytic Consortium accreditation committee. All of these projects were considered to be very important by the Board and thus we went into our reserves to fund them. Our reserves at this time are approximately half of one year’s operating expense. Thus there is an end point to our ability to fund special projects from reserves.

It is important to note that a significant portion of the budget is encumbered by fixed publications expenses and Division operations. Thus we have little flexibility to take on new and interesting projects on behalf of the Division. Because of the limited flexibility in our budget we have become more deliberate in our budget decisions. What this means is that we have had to say no to some worthy projects and fund others at less than full funding. In general, however, the financial health of the Division is good and we can all be proud of how well our Division meets its goals.

MEMBERSHIP

This is the list of new members who joined the Division between December 1, 2003 and February 28, 2004. Please look over the names and be sure to greet your new colleagues who have made Division 39 their “home.”

Steven Abel, PhD
Daniel Araoz, EdD
Andrew Berry, PhD
Suzy Bonfiglio, PhD
Linda G. Buchsbaum, MSW
Lillian Carol Butler, PhD
Alexis Chavis, MA
Jacqueline Cimbura, PhD
Enika Cocoli
Norma Cofresi, PhD
Silvia M. Dutchevia, MA
Brian Feldman, PhD
Naomi Freireich, MA
Claudelle Glasgow, BS
Darlene Hall, MD
Diane Handlin, PhD
Ralph Hutchinson, PhD
Effie Kokkinos, PhD

Mary J. Landy, MD
Judi Levene, PhD
Shira Louria, PsyD
Adriean Mancillas, PsyD
Marilyn McCabe, PhD
Cynthia Mendelson, PhD
Keith Noland, MS
Magalie Piou-Brewer, MS
Geneva Reynaga, MA
Lisa Roth, PsyD
Galia Siegel, PhD
Joshua Slater, PsyM
Erik Sprohge, PhD
Lynn Stormon, PhD
Wendy Swan, MA
Masao Tsuru, MA
Glorianna Valls, PhD
Miriam Wright, LCSW
Upcoming Online Symposium

Religious Fundamentalism: Toward a Psychoanalytic Understanding
Dates: June 21 - July 20, 2004  Fee: $49.95 (early registration)

We are very pleased to announce the first program of what we hope will become a new symposia series devoted to the study of religious fundamentalists. Our first program will discuss two papers by Ruth Stein.

Upcoming Online Conference

Affect Regulation, Mentalization, and the Development of the Self
Dates: May 03 - May 28, 2004  Fee: $59.95 (early registration)  CEUs: 6 ($5/CEU)

Participants:
Authors: Peter Fonagy, Ph.D., Gyorgy Gergely, Ph.D., Elliot Jurist, Ph.D., Mary Target, Ph.D.
Commentators: Sidney J. Blatt, Ph.D., Linda Mayes, M.D., Phil Mollon, Ph.D., Michael Moskowitz, Ph.D

New to Library: CDs and Videos

CDs
- Micro Expressions Training Tool (Paul Ekman)
- Subtle Expressions Training Tool (Paul Ekman)
Paul Ekman’s CDs train you to recognize fleeting and suppressed facial emotions.

VIDEOS
- The Angry Couple (Susan Heitler)
- Men and Emotions (Ron Levant)
- Mixed Anxiety and Depression (Donald Meichenbaum)
- The Abused Woman: A Survivor Therapy Approach (Lenore Walker)

Archived Conferences:
- How to Build a Private Practice
- HIPAA: Nuts and Bolts
- Legal and Ethical Issues: Best Practices
- The Religion and Relation to God of the Therapist
- Conflict Resolution in Couple Treatment

DIVISION OF PSYCHOANALYSIS
BOARD OF DIRECTORS MEETING MINUTES
JANUARY 24, 2004, NEW YORK, NY

Present: J. Darwin, President; D. Ramirez, President-Elect; J. Slavin, Past President; M. Jacobs, Secretary; M. Manosevitz, Treasurer; Council Reps: J. Alpert, N. Altman, H. Kaley, B. Karon; Members-at-Large: J. Couch, M. Cresci, M. Lionells, K. Maroda, M. McCary, N. McWilliams, D. Morris, H. Seiden, L. Zelnick, Section Reps: A. Brok, Section I; R. Ruth, Section II; E. Toronto, Section III; Andrea Corn, Section IV; H. Davis, Section V; G. Gerber, Section VI.; Andrew Eig, Section VII; S. Shimmerlick, Section VIII; F. Summers, Section IX Guests: Dan Hill, PsyBC; W. MacGillivray, Division 39 Newsletter Editor; L. Rothschild, Division 39 Membership Chair; E. Martin; Division 39 Program Chair; L. Wagner, substitute for B. Welch and Parliamentarian.

I. Call to Order: Dr. Darwin called the meeting to order at 9:00 a.m.

II. Substitute Votes: Dr. Jacobs reported that L. Wagner was substituting for B. Welch

III. Welcome and Introduction of New Board Members:
Dr. Darwin asked members to introduce themselves and welcomed new Board members.

IV. Approval of Draft Minutes August 8, 2003 Board Meeting: Dr. Jacobs

Motion 1: To approve the draft minutes of the Board meeting of August 8, 2003 as submitted. Action: Passed 23-yes, 0-no, 1-abstentions

V. Information Items: Dr. Darwin
A. APA Election Updates
1. President-Elect: Ron Levant was elected as APA President Elect
2. Apportionment Seats: It was announced that the Division kept the 5 council seats.
B. Results of Bylaws Referendum on Substitute Policy for Board: Dr. Jacobs reported that the Bylaws amendment passed 389 to 15.
C. Annual Report of the Division: Dr. Jacobs reported on the annual report which she submitted to APA on behalf of the Division. Dr. Jacobs was thanked for the excellent job she did on the report.
D. Program for Division 39 at Canadian Psychological Association, June 2004: Dr. Jacobs reported that she will participant on a panel at an invited program at the Canadian Psychological Association. Her program will be on Psychoanalytic Health Psychology
E. Appointments: Dr. Darwin
1. Louis Rothschild, Ph.D. as Membership Chairperson
2. David Downing, Ph.D. and Martha Hadley, Ph.D., as Education and Training Chairpersons

F. Announcements: Dr. Darwin
1. Harry Levinson Award: The Division was contacted by the AAP and at Dr. Levinson’s request a Division 39 member will sit on the committee.
2. NYSA Division on Psychoanalysis: The Division assisted NYSPA with start up funds to develop a Section on Psychoanalysis.
3. Yale Child Study Center/University College London Program: Division is a co-sponsor of this weeklong program that includes providing mentors to psychoanalytic researchers
4. Contemporary Psychology Book Reviews: Danny Weddington, the new editor has been contacted about the availability of reviewers for psychoanalytic books N. McWilliams and W. MacGillivray developed a list of over 60 people that agreed to be reviewers and they will be encouraged to register on the journals web page as reviewers.

VI. Treasurer’s Report and Discussion of Budget: Dr. Manosevitz gave an overview of the financial status of the Division as of November 31, 2003 and anticipated year-end figures. He stated that the 2003 financials are on close to being on target of anticipated year-end figures. He discussed several additional expenses that would be incurred before the 2003 year can be closed, including the Journal expenses. The deficit for 2003 will exceed the $16,000 budgeted. $50,000 of reserves was used as planned to offset expenses for the digitization of Psychoanalytic Psychology. We expect to receive $15000 in additional revenues from the Minneapolis Spring Meeting misplaced because of accounting errors in the office of Natalie Shear and Associates. Natalie Shear is taking full responsibility for collection and repayment of these monies. The EC has taken measures to insure better fiscal monitoring of spring meeting funds. He commented that some committees and other items within the budget received a reduced amount to assist in reducing the deficit. He suggested that members who have special requests regarding the budget line item to contact him. Discussion and explanation was made regarding
Spring Meeting budgeting.
He also reminded the board members to review the reimbursement guidelines and use the reimbursement form provided in the agenda packets.

Motion 2: To approve the 2004 budget as submitted. Action: Passed – 27 unanimously

VII. Old Business:
A. Presidential Initiatives: Dr. Darwin
1. Outreach: Dr. Lionells: The committee has collected a great deal of data regarding the innovative and exciting outreach projects throughout the country. The data will be compiled and placed on the division web site in a way that can be accessed by region. They will hold an "Outreach Fair" with a poster session on Outreach programs at the Miami Spring Meeting. Sections reported on outreach programs. S. Shimmerlik reported on a developing collaboration with the new York Disaster Counseling Coalition—a post 9/11 organization that serves uniformed personnel. A. Eig reported that Section VI is working with volunteers that assisted during the September 11 events. They held a conference with these individuals. They are working on a collaborative program in Austin. A. Corn reported that during the Miami conference a documentary on children during the Holocaust—Secret Lives: Hidden Children and Their Rescuers in WWII—a powerful movie. This outreach program will be open to the public in the community surrounding the Miami area as well as Division members. M. McCary commented on the program by Section IV on early childhood in August and in Austin they went to pre-schools and discussed issues with the caretakers. In Michigan they meet with a variety of different types of individuals and it was a very important program.
2. In-reach: Dr. Darwin reported that through the work of a number of Division meeting in Toronto a panel was co-sponsored with Division
3. Division 39 Reception at APA Convention: At the cocktail party we will be joined by Division 9 and 44, plus 3 other Divisions. Dr. Darwin announced that N. Altman, M. Manosevitz and P. Strausberg have been elected to APA Committees. Also, President-Elect of APA, Ron Levant has agreed to include Division 39 on his EBT Task Force.
4. Education and Training Committee (APA ‘04 PDW): Dr. McWilliams reported that a workshop would be held at the Hawaii summer meeting. This is a first at the summer meeting for this type of program to be accepted by APA.
B. Evidence Based Therapies: Appointment of Task Force: Dr. Darwin. G. Reed at the Practice Directorate who suggested we not take a polarized position pitting clinicians against researchers. The chair will be B. Welch with members N. McWilliams, N. Stockhamer, Schedler, and D. Holmes. This ad hoc task force will report back to the board providing a plan for the Division.
1. Task Force Report: Dr. McWilliams for Dr. Welch and asked for suggestions for participants from the board.
2. Internet Issues: Dr. Zelnick discussed the "growing pains in expansion." Nothing major has been done—some changes have been made, primarily to the web database. Current issues of the newsletter are now available in PDF and in ZIP formats. Have a home page "news"—new activities box—so that current and upcoming information and events can be highlighted. Committees and Sections have space. Fine-tuning of the site included many different areas for the Spring Meeting. This year for the first time, whenever there is a mailing regarding the Spring Meeting, the same brochure/mailling is online along with the full program. This continues to bring us into the technical era for this meeting. He hopes that eventually online registration for the Spring Meeting will be available. Future and ongoing work—Section II is launching their own list serve, with support from the internet committee, the continuing education committee is launching an online program, Section VIII is working on some expansions of their portion of the website. His committee is expanding and is now under the Publications Committee.
C. 2005 National Multicultural Conference and Summit (NMCS) Sponsorship and January 29, 2005 Board Meeting: Dr. Ramirez commented about the NMCS for 2005. He gave a summary of the history of the conference and the Division’s participation in this conference. He asked the Board to consider continuing to support this conference, which will be addressed in future Board meetings—and to consider the Board meeting in 2005 be held at the conference. He also encouraged the Board members to register for the conference as well as attending the Board meeting at the conference site.
N. Altman spoke to the efforts of Division 9 to establish a Socioeconomic Status Committee within APA. Division 9 is asking the Division support this initiative.

Motion 3: To support the initiative to develop the SES Committee within APA. Action: Passed – 25 unanimous

D. Relationship of Division 39/Other Psychoanalytic Organizations: Drs. Darwin/Ramirez. Dr. Darwin announced that there is a master calendar being developed of the Division’s meeting dates to help
alleviate the problem of organizations having meeting dates in close proximity of each other. The organizations are making an effort to stay in touch. Discussion regarding the different issues involved was held.

**E. PsyBC and Division 39 Collaboration:** Drs. Darwin/ Hill, D. Hill presented a proposal regarding a collaborative educational program between PsyBC and the Division. PsyBC provides continuing education programs —seminars, conferences, and symposia. His proposal would be a joint project to offer continuing education credits for presentations of Division members. A portion of the monies collected from those participating in the continuing education program would be passed on to the Division. Since the Division has such a wealth of excellent presentations at the Spring Meeting and the summer APA meeting, many of these could be placed online and developed into a continuing education program. The Board discussed the presentation made by D. Hill and the motion offered. It was suggested that this could fall under the Publications Committee.

**Motion 4: To engage with Educational Partners (PsyBC) for a period of one year under the revenue sharing arrangement to organize an educational project for promotion of Psychoanalytic ideas in the mental health community under the auspices of a Division committee appointed by the President.**

*Action: Passed – 26 – yes, 0 – no, 0 – abstentions*

Dr. Darwin will name a committee which will present a plan for a first activity at the March 2004 Board meeting.

**F. Consortium:** Dr. Darwin reported that ACPE (Accrediting Council for Psychoanalytic Education) is now organized and beginning to be functional. It was the consensus of the group that maintaining the relationships was of utmost importance. Additionally, the Consortium needed to support the ACPE and its purpose. The groups have streamlined the meeting process to one face-to-face meeting each fall and a teleconference call in the spring. The Board discussed the presentation made by D. Hill and the motion offered. It was suggested that this could fall under the Publications Committee.

**G. Programs:** Dr. Martin

1. **2004 Spring Meeting Miami:** Dr. Corn reported on the progress of the 2004 meeting in March in Miami, FL. She gave an overview of the meeting highlights and keynote/invited speakers

2. **2004 APA Honolulu:** Dr. MacGillivray for Dr. Metzl reported that the Division was allotted 26 hours and the committee have filled the hours. Five sections are represented at this meeting with presentations. The program is very diverse. The cocktail party is set for Friday evening and Dr. Metzl has promised that it will be a gala event.

3. **25th Anniversary of the Division:** E. Martin reported on the 2005 meeting. Drs. Zicht and Hart are the co-chairs of the this spring meeting to be held in New York. The theme for this meeting is "Being and Becoming: 25 years of Continuity and Change in Psychoanalytic Psychology." Jay Greenberg and Adam Phillips will be the keynote speakers. Invited panels are approximately three-fourths committed for this meeting. Dr. Martin shared a list of some of the invited presenters. The Call for Papers is prepared and will appear in the registration packets at the Miami meeting. The new Section on Psychoanalysis of NYSPA will present as well.

4. **Philadelphia Meeting 2006:** The co-chairs of the Philadelphia Meeting are Dennis Debiak and Noelle Burton. They are actively working and their tentative theme is: Multiple Truths: Psychoanalytic Perspectives on Sexuality and Identity"

5. **Toronto Meeting 2007:** Dr. Martin also gave a brief report on the Toronto spring meeting.

**H. Psychodynamic Diagnostic Manual:** Dr. McWilliams reported that she has been active on a subcommittee and that as president, Jaine Darwin sits on the steering committee. This is a group headed by Stanley Greenspan, MD who are working to produce a psychodynamic diagnostic manual. The intention is to create a classification system, supported by both empirical research and clinical data, that represents the internal experience of clients rather than the external description of their symptoms.

**VIII. New Business**

**A. APA Presidential Candidate Endorsement:** Dr. Darwin reported that several candidates requested Division support/endorsement. Two candidates submitted their response/statement included with the agenda packets. Discussion was held regarding whether the Division should endorse a candidate at this early date. It was the consensus of the Board that no endorsement will be made until a slate exists.

**B. Nominations for APA positions:** Dr. Darwin announced that the deadline is very close and members are encouraged to put their name up for nomination. It is important that Division members are involved in the process.

**C. Minnesota Meeting Fiscal Issue:** Dr. Darwin

**D. Section III 20th Anniversary Edited Book:** Dr. McWilliams presented the Section III project and requested that the Division consider assisting the Section by loaning them $10,000 to seed this project. E. Toronto gave a summary of the contents of the book. Discussion was held and members suggested ways to publish the book, including publishing the book on the internet on the Division and/or Section websites. It was apparent there was an informal consensus of the Board that funding the project was not feasible at this time.
E. Awards Committee Nomination Poll: Dr. MacGillivray referred to the Awards History page in the agenda packets and the page regarding Division 39 Board. He asked that members complete the forms and return them to him as nominations for awards to be presented at the Spring Meeting in 2005 in New York.

F. PEP CD Volume 4 Copy: Dr. Darwin reported that the Division owns a copy of this CD and is a single use copy. The Executive Committee suggested that it be raffled or auctioned at the Miami conference.

G. Bylaws Re-wording: Dr. McWilliams presented the proposed Bylaws change. Discussion was held regarding the changes and "friendly amendments were proposed."

Motion 3: To reword the Bylaws as follows (changes in bold) The Publications Committee shall develop and monitor the publications of the Division, both print and electronic. The Publications Committee shall consist of the editors of the Division journal and newsletter, the chair of the Internet Committee, and the liaison to Psychoanalytic Abstracts as ex officio members, plus six to eight appointed members, who shall serve for a term of six years, the terms so staggered as to permit the appointment of one or two new members to the Committee each year. The Chair of the Publications Committee shall be proposed by the President and elected by the Board for a six-year term. 1) The Editor of the Division Journal shall be proposed by the Chair of the Publications Committee and elected by the Board for a six-year term. The Editor shall serve as the Division's Liaison to the APA Publications Committee. The Editor and Chair of the Publications Committee shall assign subcommittees of the Publication Committee for specific tasks and projects. Any disagreements shall be referred to the Board for resolution. 2) The Editor of the Division Newsletter shall be proposed by the Chair of the Publications Committee and elected by the Board for a six-year term. 3) The Liaison to Psychoanalytic Abstracts (substitute for "Editor of Psychoanalytic Abstracts") shall be proposed by the Chair of the Publications Committee and elected by the Board for a six-year term. (Length of term to be left silent)

Action: Withdrawn

IX. Reports:

A. Membership Committee: Dr. Couch

1. General Update: Dr. Couch welcomed L. Rothschild as new Membership Chair. Dr. Couch pointed out that the website database is being used. He informed the board that 190 new members have joined the Division since September 1, 2003. The Division has many programs in place to retain and grow in new membership. He will confer with Dr. Rothschild. Dr. Rothschild is hoping to work at the Local Chapter level to increase membership in the Division. His "dream" would be to have every Local Chapter member be a member of the Division. He suggested looking at discounts for "dual membership" in Local Chapters and the Division. A discussion was held regarding the number of Allied Professional members and the makeup of their group of membership.

2. Foreign Affiliates: Dr. Shimmerlick discussed an issue regarding foreign affiliates being able to pay via credit card payment. Dr. Manosevitz gave a brief summary of the complicated process to be able to accept credit payments and expense involved.

B. APA Council: Drs. Alpert, Kaley, Altman, Karon gave a brief summary of the council meeting and didn’t feel there was any issues that needed clarification at this time.

C. Trauma Interest Group: Dr. Alpert reported that this group has been in existence for four years. She is anxious to have more Division 39 members involved in this group. They are currently approximately 100 names away from establishing a Division.

X. Master Calendar

A. Calendar of Events: Division Program Meetings:

2. 2004 APA Mtg.: (7/28-8/01): Honolulu, HI: Chairs: Dr. Metzl

B. Calendar of Events: Division Business Meetings:

1. Executive Committee Meetings:
   a. March 18, 2004: Miami, FL
   b. July 29, 2004: Honolulu, HI
   c. November 5, 2004: NY, NY

2. Board Meetings:
   a. March 19, 2004: Miami, FL
   b. July 30, 2004: Honolulu, HI

XI. Adjournment: there being no further business to come before the Board at this time the meeting was adjourned at 3:45 p.m. EST.

Secretary: Marilyn S. Jacobs, Ph.D.
Recorder: Ruth E. Helein
**DIVISION 39 COMMITTEE CHAIRS, MEMBERS AND LIAISONS**

### BYLAWS: GOVERNANCE

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<th>Term of Office</th>
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<tr>
<td>Executive</td>
<td>Jaine Darwin, PsyD - <a href="mailto:jldarwin@aol.com">jldarwin@aol.com</a></td>
<td>2003-2004</td>
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<tr>
<td>Finance</td>
<td>Martin Manosevitz, PhD - <a href="mailto:mmmanosev@earthlink.net">mmmanosev@earthlink.net</a></td>
<td>2003-2005</td>
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<tr>
<td>Membership</td>
<td>Louis Rothschild, PhD - <a href="mailto:L_Rothschild@msn.com">L_Rothschild@msn.com</a></td>
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<td></td>
<td>Tal N. Lee - <a href="mailto:talnlee@aol.com">talnlee@aol.com</a></td>
<td>2002-2004</td>
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<td></td>
<td>Steven Luz-Alterman - <a href="mailto:sluzalte@granite.tufts.edu">sluzalte@granite.tufts.edu</a></td>
<td>2002-2004</td>
</tr>
<tr>
<td>Fellows Subcommittee</td>
<td>Joanne Callan, PhD - <a href="mailto:Jecallan@pacific-science.com">Jecallan@pacific-science.com</a></td>
<td>2003-2004</td>
</tr>
<tr>
<td>Nominations &amp; Elections</td>
<td>Jonathan Slavin, PhD, ABPP - <a href="mailto:jhslavin@aol.com">jhslavin@aol.com</a></td>
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### BYLAWS: PROGRAMMATIC

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<tr>
<td>Elaine Martin, PhD - <a href="mailto:esmart@psychoanalysis.net">esmart@psychoanalysis.net</a></td>
<td>2003-2009</td>
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<td>Noelle Burton, PsyD - <a href="mailto:nburtonpsyd@netzero.net">nburtonpsyd@netzero.net</a></td>
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<tr>
<td>Dennis Debiak PsyD - <a href="mailto:ddebiak@aol.com">ddebiak@aol.com</a></td>
<td>2004-2007</td>
<td></td>
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Volume XXIV, No. 3 Summer 2004

FROM THE PRESIDENT
Jaine Darwin........................................ 1

LETTERS TO THE EDITOR
David Scharff........................................ 3
Bob Lane................................................. 4

Psychodynamic Profiles – Esther Menaker
Alan Roland........................................... 5

The Lawsuit in Retrospect
Bryant Welch........................................... 7

Section V: Psychologist-Psychoanalyst Clinicians
Harold Davis............................................ 16

SEFAPP Reception at Spring Meeting........... 17

PANEL AND PAPER SUMMARIES
From the 24th Spring Meeting, Psychoanalysis At the Edge
Scientific Award: Enrico Jones...................... 21
Past-Presidents Address.............................. 22
Invited Panels......................................... 23
Section Panels.......................................... 26
Committee Panels...................................... 29
Juried Panels........................................... 31
Juried Papers........................................... 52
Meet the Authors..................................... 55

PSYCHOANALYTIC BOOKS
John S. Aufbach........................................ 58
Harvey L. Schwartz's Dialogues with Forgotten Voices
Johanna Krout Tabin.................................. 61
Richard Billow's Relational Group
Psychotherapy: From Basic Assumptions to Passion
Patricia O. Hunter..................................... 66
Jill Savage Scharff & Stanley A. Tsigounis's Self-Hatred in Psychoanalysis: Detoxifying the Persecutory Object
Michael J. Diamond.................................... 66
Randall Sorenson's Minding Spirituality
Ryan LaMothe........................................... 67
Alan Bass's Difference and Disavowal: The Trauma of Eros
Louis Rothschild....................................... 69
Howard Shevrin's Subliminal Explorations of Perceptions, Dream and Fantasies
Fonya Lord Helm....................................... 71
Donald Moss's Hating in the First Person Plural
G. Reynaga Abiko...................................... 74
Lora Heims Tessman's The Analyst's Analyst Within
Howard H. Covitz..................................... 77
Dorothy Cantor, Carol Goodheart, Karen Zager, Sandra Haber, Ellen McGrath, Lenore Walker and Karen Zager's Finding Your Voice
Laura Barbanel......................................... 81

LOCAL CHAPTER REPORTS
Washington Professionals for the Study of Psychoanalysis
Connie Halligan....................................... 82

COMMITTEE REPORTS
Finance
Martin Manosevitz................................... 84
Membership............................................. 84

BOARD OF DIRECTORS Meeting
Minutes January 24, 2004......................... 86

COMMITTEE DIRECTORY....................... 90
BOARD DIRECTORY............................ 91

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