FROM THE PRESIDENT

My route to psychoanalysis began as a student teacher at Bettelheim’s Orthogenic School as part of a masters program in education at the University of Chicago in 1969-70. When I announced to my class I would be leaving at the end of the term, an eight-year-old asked me how long I had been at the school. When I replied that I’d been there for fourteen weeks, he said, “That’s much too short for so long.” I feel much the same way as I write this final column of my presidency. I am both sad and eager to say goodbye to the privilege and responsibility of leading Division 39.

We’ve accomplished much in the past two years. My presidential initiatives included ideas that came under the headings of Outreach and Inreach. We now have a large database of over one hundred outreach projects nationwide in which division members are involved. The Outreach Committee is ready to launch its own web page so information about these projects will be readily available. Our new web page, launched as my presidency began, now acts as a major source of communication for us. Calls for papers, program listings, newsletter archives can now be downloaded and each member now can update their online membership directory information. Our journal, Psychoanalytic Psychology, is now on the PEP CD-ROM deservedly increasing its visibility and desirability as a place to publish.

Within APA we have maintained our five seats on the APA Council and the awareness of our voices that this allows. We have more people sitting on APA Committees and Task Forces. We have forged important alliances with other divisions and debunked the myth of analysts as an isolated, elite group. We have the privilege of being called “allies” by Division 44, the Society for the Psychological Study of Gay, Lesbian and Bisexual Issues. We are an active member of the Divisions for Social Justice. We are seen as one of the vanguard divisions in the Evidence-based Practice debate.

Nationally we are devoting time to advocating for standards in psychoanalysis and for the belief that psychoanalysis is an advanced specialty within mental health and not an independent profession. We’ve been supporting our membership in New York State, where psychoanalysts can be independently licensed without a mental health degree, to push for standards for training in the regulations which we hope will protect the public from an inadequate treatment that can be called psychoanalysis. We continue to participate in The Working Group on Psychodynamic Approaches to Classification spearheaded by Stanley Greenspan, which hopes to produce a diagnostic manual that utilizes a psychodynamic approach to the classification of mental health disorders. The completion of a first draft is anticipated in Spring 2005.

Within the Division, our sections are all thriving with healthy membership numbers. The requirement that the sections retain at least 150 members to vote on the division board acted as an impetus for the sections to mobilize, to review and recommit to their visions. The Division Board is working in a respectful, collegial manner, which allows our energies to go into bettering the Division instead of arguing with each other. My personal goal was to run all six Board Meetings of my term without having to pound the gavel to maintain order. I hand over to David Ramirez, a well-rested gavel.

I leave much undone. We continue to fight to deconstruct the stereotyping of the psychoanalysis as an archaic elite therapy for the walking well. We continue to strive to achieve diversity within our membership and to show the applicability of our ideas to people within minority communities. We continue to try to preserve psychodynamic training in doctoral programs and in practicum and internship sites so we have a next generation; and to work to bring this next generation into active participation within the Division. If we are to get our mean age of members down from the current 50+, we need to recruit a slew of members younger than 35. We need to come together as a pluralistic psychoanalytic community and spend no time fighting with other psychoanalytic organizations and all our time as advocates and protectors of psychoanalysis in the larger community.
GUIDELINES FOR SUBMITTING MATERIAL
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.

ADVERTISING
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DEADLINES
Deadlines for all submissions is January 1, April 1, July 1 or October 1. Issues generally appear 5-6 weeks after deadline date.

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William A. MacGillivray, Editor
7 Forest Court, Knoxville, TN 37919
Phone and Fax: 865-584-8400
Email: DrMacG@bellsouth.net

I am grateful for the privilege of two years at the helm of the Division and for the support I’ve received from the Board and the membership. I want to thank Ruth Helein, our administrator who makes this job doable. I will miss being action central and the exquisite tension of never knowing when the next crisis is coming. I will miss the deference granted to the president and all the people who will return my calls and emails while I carry that imprimatur. I will miss writing this column, which has been an enjoyable part of this job for me. Fortunately, I get to keep the friendships and affiliations forged in doing this job and I get to continue working for the Division as past-president for the next two years.

On January 1, 2005, I will hand over to David Ramirez one well-functioning Division in which he may have his two years shaping it with his hopes and visions. I join a long line of past presidents from whom I’ve learned. We have recently lost two such with the deaths of Lee Caligor and Ruth-Jean Eisenbud. I bid this office adieu and because I’m not gone yet, I urge you all to nominate people and to run for Division offices when, in my first duty as past-president, I chair the Nomination Committee.

FROM THE EDITOR
Bill MacGillivray, PhD

This issue marks the end of four years as editor of the newsletter, with two more to go in my tenure. I would like to use this column to take stock in what I have tried to accomplish over these years. When I was appointed editor, I was asked to take on the responsibility for developing a book review section that would free up space in the journal for more peer-reviewed articles. I also set as a goal to include more of the business of the division, including publication of board meeting minutes. There were two other initiatives I hoped to accomplish: a section on research and a series of “special section” articles on various topics. Recently, I have added a section called Psychoanalytic Profiles. One set of articles has been written by senior division members, reflecting on the development of their identity as psychologist-psychoanalysts. Another set of articles is written by graduate students who interview and write about prominent division members. In addition to articles and reports that I solicit, the newsletter is also a place for members to contribute short articles on a variety of subjects, from clinical issues to practice concerns and beyond.

That’s the gist of the work. The rest is background, including the actual hands-on production of the issue, soliciting articles and reminding writers of their commitments, and handling the financial end of this business by keeping track of ad revenues, requesting books for reviewers and sending tear sheets back to publishers and advertisers.

I hope you enjoy the new Special Section, “What I Did on My Summer Vacation,” in this issue. Although the “rules” for this piece were flexible and I expected and hoped for a variety of responses, I was truly amazed at the diversity reflected in these 12 writers. I wanted this series to allow our members to gain a more personal sense of our colleagues. I think this goal is successfully realized. I have another idea for the newsletter; but I will require help from the membership to do this. It’s tentatively called “Stump the Chumps,” in deference to the Car Talk guys. I would like to have a psychoanalytic contest that would involve correctly matching the author to a particular quote from his/her writings. I would like to have quotes that would present something surprising and unexpected about the person’s theories or approach to psychoanalytic practice. When I get enough quotes, I can then hold the contest. I have not figured out what the winner could receive; perhaps readers have some thoughts about that as well.
Division 39 Spring Meeting

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

Continuing Education Programs
Wednesday, April 13, 2004

• Donnel Stern - Dissociation and Enactment

• Otto Kernberg - The Almost Untreatable Narcissistic Patient

• Beatrice Beebe - Face-to-Face Communication in Infant Research and Adult Treatment: A Film Lecture

• Robert Langs - The Communicative or Strong Adaptive Approach to Psychotherapy and Psychoanalysis: The Claim for a Leap Forward

• Irwin Z. Hoffman - Overcoming the Odds in the Psychoanalytic Process: Core Principles of Dialectical Constructivism

Join us in New York City for the Division 39’s Workshops, which will be held on Wednesday before the Spring Meeting. These Master Classes offered by prominent psychoanalysts, theorists, and researchers are open to all mental health professionals. Continuing education credits will be offered. Complete information is available on our website: www.division39.org.
IN MEMORIAM: JUDITH AND LEOPOLD CALIGOR

The psychoanalytic community was shocked to read a *New York Times* article (August 28, 2004) under the title “Manhattan Couple Killed on L.I. Road” learning that the couple were none other than Drs. Leopold and Judith Caligor. Lee and Judy were both well-known and much beloved figures in the world of clinical psychology and psychoanalysis. As the *Times* went on to report:

Dr. Leopold Caligor, 82, was the director of curriculum of the William Alanson White Institute in Manhattan, where he had worked since the 1960s. Dr. Caligor wrote a book on dream interpretation, *Dreams and Symbols: Man’s Unconscious Language* (1968), with the psychologist Rollo May.

Dr. Caligor was a practitioner of the interpersonal approach to psychoanalysis, in which the analyst becomes a partner in the therapy. He also taught courses at the institute on dream analysis.

"Considering that he was 82, he had a very youthful mind and a very youthful energy," said Dr. Joerg Bose, the institute director. "Nobody thought of him as retiring."


"They were remarkably vigorous, both of them," said Anne Ebersman, their daughter-in-law.

Prior to this tragic fatal car accident, Lee had been asked to prepare the following brief profile for this newsletter. Even this brief summary should make clear how active Lee was throughout his professional life in various psychoanalytic institutes, organizations, and associations, most especially in the enormity of his role in Division 39 from its outset.

In this brief introduction I want to highlight one particular value that I know was important to Lee and that he personally embedded and taught me in principle and by example. I first met Lee when I was a supervisor at St. Luke’s/Roosevelt Hospital in the 1980s. At that time Lee taught his deservedly famous seminar on dreams in which he emphasized the dream series, utilizing sequences of dream narrative and imagery in understanding character and transformation. During Lee’s term as president of Division 39 he recruited me to become active in the Division. Lee impressed upon me his belief that the leadership of the Division should include individuals who were involved in BOTH professional administration, leadership, and politics AND clinical practice and scholarship. Lee believed that it would be a mistake for Division 39 to embody a split between those who ran the organization and those who practiced, wrote and taught. He fought to encourage many of his friends and colleagues to bridge what he felt was too often these split worlds.

I was privileged to work with Lee in both of these worlds. We spent many hours discussing dreams, including our own. He taught me the ropes of Division 39 including his own personal strategies for handling sensitive political and organizational conflict. We also spent a great deal of time discussing his love for Judaism and Israel, and of course the future of psychoanalysis in Israel. In all of this what I will always remember is Lee’s passion and abundance of energy along with his generosity and commitment to the future and to the younger generation. It is incredible to me that although 82 at the time of his death, I can only picture him being struck down in what I see as the prime of his life.

May their memory be a blessing.

MY YEARS AS A PSYCHOANALYST

I came out of World War II at the age of 25. During my three and a half years of army service I had experienced the war in Europe and had seen terrible happenings and extremes of human misery. I needed a direction and social psychology seemed to offer some approach to understanding and perhaps even diagnosing society. After some exploration I realized that I needed to understand the individual in society and clinical psychology seemed to be the answer.

New York University’s Doctoral Program provided a rich education. The psychodynamic orientation included creative use of projective techniques and a respect for unconscious processes. I received my Ph.D. in 1950.

The summer of 1950 I attended Bruno Klopfer’s Rorschach workshop in the rustic setting of Carmel, New York. I met a pretty graduate student named Judy. We were married one year later. Judith Caligor is a psychologist psychoanalyst and on the faculty of the Post Graduate Center for Mental Health and the Adelphi Postdoctoral Program. We have two children. Eve is a psychiatrist psychoanalyst and Dan is a management consultant.

For my dissertation I created a figure drawing test involving a series of eight interrelated drawings, each one based on a tracing of the previous one so that an entire set of individual dynamics was revealed. The Eight Card Redrawing Test (8CRT) was published as a monograph, *A New Approach to Figure Drawing* (1957) Springfield: Thomas.
After an internship with the New York State Department of Mental Hygiene at Rockland State Hospital, I worked at the Jewish Board of Guardians, an outstanding psychoanalytically oriented child guidance clinic staffed by talented medical psychoanalysts and social workers. The teachers were all psychiatrists as psychologists were not getting analytic training at that time. The role of the psychologist was relegated to psychological testing by the medical establishment.

I entered analytic training at White in 1954. The William Alanson White Institute of Psychiatry, Psychoanalysis and Psychology had been founded by Clara Thompson, MD, Frieda Fromm-Reichmann, MD, Harry Stack Sullivan, MD and Erich Fromm, PhD. Psychiatrists and psychologists were training together in this first-rate program. Thompson and Fromm-Reichmann had left the New York Psychoanalytic Institute in support of Fromm who as a psychologist could not teach. Also, these four were interested in an interpersonal focus beyond a drive model.

I completed training at White in 1958 and have been actively engaged in the Institute ever since as faculty, supervising and training analyst. I co-chaired the Union Therapy Project for many years, an experimental program geared to providing psychodynamically informed brief psychotherapy to blue-collar workers in the United Auto Workers Union Local 259. The Union Therapy Project became a model for UAW nationally and for other unions. At present I am Director of Curriculum, a challenge I enjoy enormously in working with a curriculum that is innovative and evolving.

**THE ADELPHI POSTDOCTORAL PROGRAM**

In 1963 a group of the psychology faculty at Adelphi University recognized the need for a psychoanalytic training program for psychologists within a university setting. They sought out psychologists and psychoanalysts from a variety of settings, Freudian and interpersonal. I agreed to join. I was impressed with the quality of the leaders and with the vitality of the faculty and the informal, yet effective way they functioned. I have continued to teach dream seminars and supervise in the program to the present day.

My hospital affiliation for many years was St. Luke’s-Roosevelt Hospital and I am currently Emeritus. I was a founding member of the Association for Mental Health Affiliation with Israel (AMHAI), a support group of mental health professionals interested in dialogue with Israeli colleagues to further exchange, encourage research and offer professional hospitality to visiting colleagues.

I have lectured, supervised and given workshops at the Department of Psychotherapy at the Tel Aviv University Sackler School of Medicine.

**ERICH FROMM AND THE MEXICAN VILLAGE PROJECT**

Erich Fromm was my supervisor at White and involved in studying patterns of social character in a Mexican village and was seeking a psychological instrument that could be used cross-culturally. Margaret Mead was familiar with my 8CRT test, had tried it out with some cultures she was studying and recommended it to Fromm for his study. Fromm was interested and invited me to come down to Cuernavaca and work with him that summer of 1960—an experience that was interesting and rewarding.

**DREAMS AND SYMBOLS**

In the course of my training at White I had made a complete record of my treatment with one patient. I realized that I had the data of a complete interpersonal analysis, including the entire dream tract and its handling. Rollo May became interested in using these data to present and discuss some of his ideas about the evolution of the self in treatment as evidenced by the evolving symbols in dreams. Out of this collaboration came our book *Dreams and Symbols* published by Basic Books in 1968.

**SUPERVISION**

In 1980 when I was president of the William Alanson White Psychoanalytic Society I instituted a program in which outstanding analysts demonstrated their approach to analytic supervision conducting a supervisory session observed by our audience and then discussed. The experience was interesting and involving. Philip Bromberg, James Meltzer and I had been a peer supervisory group for years. We decided to prepare the proceedings for publication. *Clinical Perspectives on the Supervision of Psychoanalysis and Psychotherapy* was co-edited by the three of us and published by Plenum in 1984.

My particular interest in supervision was the repeated occurrence of a parallel process, the enacting without awareness back and forth of key dynamics between the patient-therapist dyad and the therapist-supervisor dyad. My paper, “Parallel and Reciprocal Processes in Psychoanalytic Supervision,” described the centrality of this for me. It was given as my Presidential Address to the William Alanson White Psychoanalytic Society in 1980.

**DIVISION 39**

In 1978 Reuben Fine invited a group of us to form a Division of Psychoanalysis in The American Psychological Association. This gradually became Division 39. This was the beginning of many years of active and demanding participation in the Division as we struggled through the formation of Section I, the GAPPP lawsuit, Standards of Training, the Psychoanalytic Consortium and ABPP.
Having sat on the board of each, I knew of the efforts, the fragmentations and finally synthesis each required over many years. We all felt it was worth the enormous time and energy to restore psychoanalysis as a psychological discipline and to repair the fracturing of this relationship caused by the medicalizing of this discipline when it crossed the Atlantic Ocean to this country.

**ABOUT DREAMS**

I have always had a deep affinity to the subject of dreams and have taught them at White, Adelphi, Roosevelt Hospital and elsewhere. My enthusiasm for them was enhanced by my work with Erich Fromm who encouraged me to go my own way. For my Presidential Address to the Division in 1983, I chose to present a dream specimen from an interpersonal viewpoint. The paper, “The Clinical Use of the Dream in Interpersonal Psychoanalysis: A Dream Specimen,” was dedicated to Erich Fromm. My introduction to the paper states: “I hope to convey to the reader through the analysis of a dream specimen how an interpersonal psychoanalyst apprehends and processes a dream in the context of the actual session; how the dream evokes in me thoughts, images and affective responses; and how these are shared in the dialogue with the patient.”

**A PERSONAL NOTE**

I am respectful of the contemporary literature and the contributions of the various schools each of which has added to our current psychoanalytic knowledge.

In terms of credo, I believe in the centrality of the unconscious and that it is best experienced and studied in an interpersonal field wherein the analyst is an active participant as well as an observer.

I want to thank the Division for affording me the opportunity of having worked with dedicated and outstanding colleagues who have become friends.

Last, I am grateful to the field of psychoanalysis for making possible so interesting a life.

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**PSYCHOANALYTIC TRAINING at the CHICAGO CENTER FOR PSYCHOANALYSIS**

The Chicago Center for Psychoanalysis, a postgraduate training program leading to a Certificate in Psychoanalysis, welcomes applicants from any mental health field who have attained an MD, PhD, PsyD, or MSW degree. A personal analysis is required, as is state licensure, and at least 5 years’ clinical experience.

- **WE OFFER A CONTEMPORARY CURRICULUM** that encompasses multiple theoretical perspectives.

- **COURSES ARE SCHEDULED ON THE QUARTER SYSTEM,** and take place either downtown weekly or in intensive weekend seminars. Training is focused on theories of development, psychopathology, clinical theories and case conferences.

- **THE SUPERVISED TREATMENT OF THREE PSYCHOANALYTIC CASES** is also required.

- **OUR FACULTY INCLUDES MANY OF THE BEST** from the Chicago analytic community and also draws internationally famous psychoanalysts. Among those who have served or are serving as teachers are: Salman Akhtar, Jessica Benjamin, Hedda Bolgar, Christopher Bollas, Bertram Cohler, Jody Messler Davies, Darlene Ehrenberg, Gerald Fogel, Lawrence Friedman, Glen Gabbard, John Gedo, Merton Gill, Peter Giovacchini, Jay Greenberg, Michael Hoit, Irwin Hoffman, Frank Lachmann, James Fosshage, Kenneth Newman, Donna Orange, Fred Pine, Leo Rangell, Owen Renik, Roy Schafer, Frank Summers, Marian Tolpin, and Elisabeth Young-Bruehl.

- **FLEXIBILITY IS THE HALLMARK OF THIS PROGRAM,** one of the first in the nation to have a truly inter-disciplinary group of candidates and faculty. Part-time candidacy is optional at the discretion of the Admissions Committee, and the Center accepts applications for admission throughout the year.

For further information about the Chicago Center for Psychoanalysis, call (312) 986-1187 or visit our website: www.ccpedu.com
Psychoanalysts and members of other constituencies and professions, and divisions of the APA, among psychoanalytic psychologists and psychologists from other general understandings of politics, culture, race, gender, sexuality, work, and media, and to advances in the sciences? What is the developmental edge within psychoanalysis itself—how are we co-evolving with our own shaping contexts, and what are our own realities?

We invite posters, papers, panels, symposia, workshops, and conversation hours that explore the full range and diversity of psychoanalysis in the real world. We especially welcome programs that reflect collaborations among psychoanalytic psychologists and psychologists from other divisions of the APA, among psychoanalytic psychologists and members of other constituencies and professions, and among diverse types of psychoanalytic psychologists.

For details about how to submit a proposal, please see the detailed instructions in the September Monitor on Psychology, or consult the APA website, www.apa.org.

All proposals for the summer 2005 Division 39 proposals must be submitted via the APA website, http://apacustomout.apa.org/ConvCall, and must be received by midnight, December 3, 2004. For more information, please contact the Division 39 program chair, Richard Ruth, PhD, 11303 Amherst Avenue, Suite 1, Wheaton, MD 20902, telephone (301) 933-3072, fax (301) 933-0118, email rruth@erols.com.
As I’ve described in earlier columns the ongoing goal of all of my study groups is to continually explore the direct relevance of very recent findings in the psychological and biological sciences for clinical practice. The broader objective of this ongoing collaborative work is to expand the developmental models of regulation theory that underlie psychiatry and psychoanalysis, in order to more deeply explicate the fundamental mechanisms that mediate both psychopathogenesis and the change process of psychotherapy. But at the same time the attention of the groups is also focused on the pragmatic applications of affective neuroscience to a variety of clinical phenomena that emerge in various psychotherapeutic contexts. A particular interest is in patients who until recently were seen to be refractory to psychotherapy, and therefore treated purely pharmacologically. Recent studies clearly demonstrate that there are severe limitations of interventions that minimize the critical import of relational influences in the treatment of disorders of the self, and that psychotherapy changes not just the mind, but also the brain (Paquette et al., 2003; Schore, 2003). Updated clinical psychoanalytic models must therefore integrate findings from neuropsychoanalysis and developmental psychoanalysis, and attempt to integrate psychology and biology.

With this perspective in mind, in this month’s column two members of the Los Angeles study groups offer evocative contributions that focus on clinical applications. In the first Delphine DeMore deftly utilizes a psychoneurobiological lens in order to more closely inspect the critical process of establishing safety in the early stages of the therapeutic alliance. Over the last decade clinical psychoanalysis has expanded its perspective and clinical reach, moving more deeply into trauma syndromes and the related realms of severe personality disorders and addictions. Yet despite the varieties of clinical presentations of these disorders, a common bedrock underlies the effective treatment of a broad array of infant, child, adolescent, and adult psychopathologies: the therapeutic alliance. In recent traumatology research Cloitre et al. (2004) conclude, “The strength of the therapeutic alliance established early in treatment reliably predicted improvement in PTSD symptoms.” These authors report that in cases of childhood abuse-related PTSD the therapeutic alliance and the mediating influences of emotion regulation capacity have significant roles in successful outcome.

DeMore convincingly argues that the co-creation of a “safe-enough” interpersonal context is an essential goal of the early stages of the alliance. Indeed, a general principle of trauma therapy is that the empathic therapist helps the patient to re-experience the trauma in affectively tolerable doses in the context of a safe environment, so that the overwhelming traumatic feelings can be interactively regulated and ultimately mastered into the patient’s emotional life (Schore, 2003). It is now clear that effective treatment of psychical trauma “implies a profound commitment by both participants in the analytical scenario and a deep emotional involvement on the analyst’s part” (Tutte, 2004). But in addition, Allen (2001) emphasizes that because trauma impacts both mind and body, “therapists must appreciate the biological basis of trauma to empathize with our patients.”

DeMore specifically focuses on basic safety/danger as a major issue of the dynamics of the early alliance, and thereby the treatment of trauma patients. This especially applies to cases of early relational trauma, which alter the development of the right brain (Schore, 2003). According to Greenberg & Pavia (1997), “When…traumatic memories become embedded in brain functioning they interfere with adaptation, the normal learning process, and with relearning that is safe and that more normal responses to minor threats are adaptive…Reliving the experience in therapy with the safety and security of an empathic, supportive therapist provides the person with a new experience.” However, as DeMore points out, this is no easy matter, as it provides a continual challenge for even the accomplished clinician.

This is due to the fact that patients who have experienced childhood abuse have difficulty in tolerating the interpersonal nature of therapy, particularly “the [need] to trust another person with his or her pain” (Turner, MacFarlane, & van der Kolk, 1996). But in addition, current neurobiological studies show that the right amygdala, an essential fear center that continually appraises safety/danger, also stores memories of attachment trauma, and is therefore activated in moments of interpersonal threat, rapidly monitoring interpersonal threat cues at nonconscious levels (Baker & Kim, 2004; Kimura, 2004; Nomura, 2004). These data clearly suggest that within the transactions of the therapeutic alliance the patient must appraise safety from the therapist at not a conscious but an unconscious level.

In the second contribution Ann Nesbit proficiently applies regulation theory to the dynamics of a clinical moment, but even more, she offers a creative attempt to translate the therapist’s countertransferential reactions into not left brain objective language but right brain subjective...
bodily-based images. In order to capture the essence of the subjective psychoneurobiology of a heightened affective moment, her “clinical poem” describes ongoing therapeutic communications from the perspective of the visceroaffective operations of the right brain. This nonverbal affective intersubjective space is thus depicted in terms of dynamic facial and prosodic expressions, somatic imagery, and olfactory, gustatory, tactile and kinesthetic sensory data.

In contrast to most descriptions of the therapy process that exclusively focus on left brain verbal content, Nesbit eloquently captures essential right brain communications in order to model the powerful impact of a de-energizing clinical moment. There is now a convincing body of neurological evidence which shows that “Mental states that are in essence private to the self may be shared between individuals...self-awareness, empathy, identification with others, and more generally intersubjective process, are largely dependent upon...right hemispheric resources, which are the first to develop” (Decety & Chaminade, 2003). In a review of the importance of facial expressions of emotion, Mandal and Ambady (2004) conclude, “Human beings rely extensively on nonverbal channels of communication in their day-to-day emotional as well as interpersonal exchanges. The verbal channel, language, is a relatively poor medium for expressing the quality, intensity, and nuancing of emotion and affect in different social situations...The face is thought to have a primacy in signaling affective information.”

Within neuroscience there is now an intense interest in the nonverbal channels that process emotional communications at implicit, nonconscious levels of awareness. This expanding body of research strongly suggests that the ability to decode another’s mental states from observable cues (such as facial expressions) relies on operations of the orbitofrontal/temporal circuit within the right hemisphere (Sabbagh, 2004). In a study, “The importance of the right hemisphere in the processing of emotional prosody” Mitchell et al. (2003) assert that not semantics but prosody “conveys different shades on meaning.” And other research demonstrates the essential role of the right hemisphere in the perception of expressive gestures that communicate inner feeling states (Gallagher & Frith, 2004), supporting Sapir’s (1927) insight, over seventy years ago, “We respond to gestures...in accordance with an elaborate and secret code that is written nowhere, known by none and understood by all.”

This work in neuroscience is echoed by current psychotherapy research which suggests that “the body is the very basis of human intersubjectivity” (Shaw, 2004), and that “The body is clearly an instrument of physiological processes, an instrument that can hear, see, touch and smell the world around us. This sensitive instrument also has the ability to tune into the psyche: to listen to its subtle voices, hear its silent music and search into its darkness for meaning” (Mathew, 1998). Nesbit’s contribution elegantly demonstrates these principles of right brain communication.

Ten years ago, in Affect Regulation and the Origin of the Self, I wrote that at that point in time the bulk of psychoanalytic research...focuses upon the patient’s verbal outputs as the primary data of the psychotherapeutic process. Often this material is represented in transcripts and not actual recordings of a patient’s (and incidentally the therapist’s) verbal behaviors. Such samples totally delete the essential “hidden” prosodic cues and visuo-affective transactions that are communicated between patient and therapist. I suggest that the almost exclusive focus of research on verbal and cognitive rather than nonverbal and affective psychotherapeutic events has severely restricted our deeper understanding of the dyadic therapy process. In essence, studying only left hemispheric activities can never elucidate the mechanisms of the socioemotional disorders that arise from limitations of right hemispheric affect regulation (Schore, 1994, p. 469).

Psychoanalysis, which is both a scientific discipline and a clinical profession, is now in a position to correct this situation. In her integrations of psychoanalysis and neuroscience
Bucci (2002) argues, “Language alone is not sufficient to bring about change.” My work and the following two articles clearly indicate that the implicit mechanisms that underlie the change process lie beneath the words.

REFERENCES

Columbia University Center for Psychoanalytic Training and Research Welcomes Clinical Psychologists to Train in Adult and Child Psychoanalysis

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Allan N. Schore is on the clinical faculty of the Department of Psychiatry and Biobehavioral Sciences, UCLA David Geffen School of Medicine, and at the UCLA Center for Culture, Brain, and Development. anorschore@aol.com.
BEGIN AT THE BEGINNING: CREATING SAFETY IN THERAPY RELATIONSHIPS

Delphine Demore, PhD

The therapeutic alliance is formed in the emotional atmosphere created within the first few sessions of the therapy. It is an integrative, participative, intersubjective interaction, with both sides attempting to reach enough rapport for working together in the treatment. When the patient has been the victim of relational trauma, the interaction must also include some reassurance that the therapist is a sympathetic witness to the victim’s pain and suffering. (Herman, 1992). The neutral stance prescribed by classical psychoanalysis will not be helpful for these patients (Kluft & Fine, 1993). If the patient has been maltreated or abused over a long period of time, particularly beginning in childhood, interactive events will be distorted, fraught with danger, or even grossly misunderstood. These sensitized responses are built into the structure of the traumatized child survivor (Perry, 1994).

This article addresses the critical mutual process of establishing the experience of safety at the very outset of the therapy. The safety created in this first stage is the firm foundation upon which the more precarious, painful, and frightening aspects of the treatment can be supported. Herman (1992) emphasizes physical safety in the patient’s external environment, which is certainly necessary. But a sense of psychological safety, or more precisely psychobiological safety is an essential element of the alliance. Addressing this safety can be interpreted by the patient as concern, compassion, comfort, or it can be met with suspicion or worse, fear of reprisal from the therapist. Weaving together a simultaneous awareness of one’s inner, unconscious, intuitive sense and a professional knowledge base (Schore, 2003), the therapist becomes more attuned to the stressful fluctuations in the therapeutic interactions and responsive to disruptions of the therapeutic bond.

Development, Affect Regulation, and the Therapeutic Alliance

The importance of the therapeutic alliance for progress in therapy and for effective treatment outcomes has been well established by research (Horvath & Greenberg, 1994; Safran & Muran, 2000). There is now a growing literature that is integrating the body of the therapist into the understanding of the alliance (Shaw, 2004; Boadella, 1996). The very welcome integration of disciplines such as infant development, neuroscience, attachment theory, and psychoanalysis further informs our understanding of the essential relational processes that underlie the creation of working alliances (see Schore, 2003). The precise mechanisms by which two individuals in the therapeutic treatment room create an oasis of safety in which to explore the difficult, the painful, the sometimes intolerable, need further articulation.

Cloitre and her group (2004) have suggested that one of the components that contributes to an alliance that can tolerate and ameliorate posttraumatic stress disorder symptoms is training in affect regulation. This idea—that affect regulation learned dyadically creates alliances—echoes Schore’s (1994) assertion that the primary evolutionary role of attachment is to enhance the development of right brain structures involved in affect regulation. Given that, it would seem that the therapy relationship resembles the infant—mother relationship, particularly for those with attachment trauma-related difficulties.

Schore traces the development of the infant’s affect regulation through a series of experiences with the mother (or other primary caregiver) in which the mother psychobiologically attunes her affective state with the infant’s state. As the infant’s internal state fluctuates, the mother alternatively soothes and comforts negative states or stimulates increasing positive joy states (Schore, 1994, 2003). When the mother’s state does not match the infant’s state, the mother must be the one to change, and she does so automatically, through right brain mechanisms that read the right brain cues from the baby. This sequence assumes that the mother is able to regulate her own affective state and is able to read and respond to her infant’s cues, right brain-to-right brain. When she can not so attune, the attachment bond is limited and the infant’s ability to regulate affect will be equally limited. As the infant matures, the style, process, and method of regulating affect that is used by the mother becomes structurally mirrored in the infant’s brain, ideally allowing the infant to regulate him/herself. This system becomes the attachment system, will be the intrapsychic mechanism upon which the appraisal of interpersonal safety or danger in all future relationships will be built (Schore, 1994).

Safety and Trauma Within the Therapeutic Alliance

In histories of early relational attachment trauma these mutual regulatory systems are severely compromised. As with the traumatized infant, the child or adult survivor of trauma also experiences dysregulating arousal levels in the body that can distort perceptions. This hyperarousal is expressed in significantly increased heart rate, blood pressure, respiration, and muscle tone, a state of hypervigilance, and a tuning out of all information that is not critical to survival. The numbing symptoms that accompany post trauma syndromes distort the patient’s ability to recognize
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attempts at interpersonal rapport from others. This heightened arousal can lead to focused scrutiny of seemingly small misunderstandings, resulting in the triggering of a full fight/flight response. Such distortions of appraisal responses are potential traps for the therapist at the beginning of treatment. Without an awareness of this subtle right brain-to-right brain interplay, misattunements are increased and the fragile connections that must be made between the therapist and the patient will be blocked or damaged.

Just as the mother lets the infant lead and then follows with attunement, this same sequence must be established in the early sessions. Not only does the patient decide what should be discussed, the patient also sets the emotional tone for the session. If the initial sessions are fraught with anxiety, the therapist will attempt to find a way to soothe. Much of this occurs on an implicit automatic level for the psychobiologically attuned clinician. Attempts to comfort may flounder, as would be expected between strangers.

The trauma patient can sometimes not tolerate such floundering, as the intensity of the distress is chronically high and the misattunements brush against sensitized neural pathways. Early trauma activates the stress-associated catecholamine system in the brain leading to a “cascade of associated functional changes in brain-related functions.” (Perry et al., 1995) The child over time, develops “hyperactivity, anxiety, behavioral impulsivity, sleep problems, tachycardia, hypertension, and a variety of neuroendocrine abnormalities” (Perry, 1994). The adult patient presents with a lifetime of experience of such sensitized overwhelming responses over which he/she has no control. The therapist’s empathic resonance with the arousal and frustration, which reassure the patient that such reactions are common for one who have suffered such pain, offer the patient the possibility of a regulating dyadic experience. Most importantly, the therapist persists in monitoring her bodily-based countertransferrential responses to the patient, auto-regulating him/herself in order to generate the soothing tones and comforting actions that can interactively regulate the patient’s stressful states.

Co-Creating Safety: An Essential Goal in the Origin of the Alliance

At the outset, the challenge is to be open to the patient’s experience wholly and without emotional pre-judgments. The clinician’s eye contact, voice tone, and body position all communicate to the patient a stance of advocacy for his/her difficulties. In these first encounters, the patient often lashes out in irritability, irrationally blaming or accusing the therapist. The sensitized threat response is easily triggered in the therapy room, even if the content is seemingly innocuous. And yet these stressful confrontations are opportunities to create the safety necessary to make progress. For example, the patient: “Oh, you just think I’m being stupid!” The therapist: “No, I was thinking how hard that must have been for you at the time.” This response, framed within the proper prosodic and facially-expressed context, amplifies the empathic attunement and opens a pathway to the patient to experience the attempt at repair from the therapist, rather than the more neutral, “What makes you think I think you are being stupid?” The therapist’s demonstrated willingness to be more open and forthcoming encourages the patient to investigate the distortions in his/her thinking, allowing him/her to attune to the therapist and internalize her interventions. Most importantly, the regulated response that is empathic in tone sets a context for dyadic repair in the
ruptured attunement between patient and therapist. It is these attunement, misattunement, reattunement (repair) sequences that build resilience into the therapeutic attachment bond and enhances safety in the relationship (Schore, 1994).

In other moments of the early stages of therapeutic encounters, the patient may be more dissociated, seeming distracted, changing the subject, speaking in seeming non-sequiturs. These are recognizable defensive measures. For trauma patients, the essential task of the therapist is to co-create with the patient a therapeutic context which the patient, appraises, more and more, to be safe. In part, this entails the patient’s increasing ability to sense that the therapist is willing to follow the emotional lead of the patient, and that the therapist can more or less objectively and more importantly subjectively recognize the intensity of her distress. In subsequent sessions, as the safety and familiarity is slowly but more securely established, the therapist must be able to “bear the strain” (Winnicott, 1947) of allowing the patient to struggle to regulate, which helps to focus the therapy on regulating the affect rather than remembering the horrifying.

For the patient overcome with intrusive symptoms of trauma, co-creating a containment technique with the empathic therapist can strengthen the bridge of the alliance. A visualization of a container of the patient’s choosing, with directions to move the feelings, visual memories, auditory memories, pain, anything presently distressing, into the container can be very effective. If the patient can participate in the hypnotic-like process, the relief from the immediate symptoms can be a powerful message that he/she has come not just to the right place but to the right person. Other visualizations of a safe place of comfort and support in present day experience give the therapist an opportunity to discover relevant cues for interactively regulating the patient. Calling upon more developed regulating mechanisms that are underutilized brings the negative affect and arousal down gradually. Often, the best containment is the therapist’s persistence in soothing comfort.

CONCLUSION
In the treatment of severe trauma survivors, the therapeutic alliance can be difficult to establish, though in such cases it is even more essential for treatment outcomes. An understanding of the underlying psychobiological mechanisms of attachment and of the therapist’s evolving capacity to read the patient’s cues, right brain-to-right brain, can enhance the clinician’s role in the alliance and help amplify and repair the expectable misattunements and ruptures that occur even at the outset of the treatment. These initial forays begin to transform the therapy room into a safe physical environment to pursue the painful process of healing and the therapeutic alliance into a safe interpersonal environment to explore dissociated and dysregulated painful affect.

References

Delphine DeMore is in private practice in Tarzana CA and specializes in treating trauma. She is an associate professor at Santa Barbara Graduate Institute and Ryokan College. Email: xamarya@adelphia.net.
THE PSYCHONEUROBIOLOGICAL DIALECTICS OF THE CLINICAL MOMENT

This article emerged from my effort to ally psychoanalytic and psychoneurobiological theory in a clinically useful manner. It begins with a brief theoretical introduction to Allan Schore’s (1994, 2003) affective psychoneurobiology, then offers a clinical illustration, and concludes with hypotheses that juxtapose, and at times integrate, these two theories in relation to the clinical material presented.

**Theory: Psychoneurobiological Dialectic**

Schore elucidates a plethora of psychoneurobiological structures that regulate both intrapsychic and interpersonal functions. Affects are generated by the activities of both the autonomic (ANS) and the central (CNS) nervous systems. The subcortical ANS and the orbitofrontal cortex, the highest cortical structure in the CNS that bidirectionally connects with the ANS, are critical mechanisms that mediate the dynamics of clinical moments of heightened affect, and are therefore discussed here.

The ANS is bifurcated into an *energy-mobilizing*, sympathetic nervous system and an *energy-conserving* parasympathetic nervous system. In health they function in a regulatory, *coupled, reciprocal mode* that is quick to mobilize energy when needed, and then to return to a state of quiescence, as appropriate. Schore (2003) posits, however, that early chronic, disorganizing/disoriented attachment patterns (the most severe form of early relational trauma) results in disorganization of not only the CNS but also the ANS. This dysregulation is manifest in long-lasting episodes of a coupled nonreciprocal mode of autonomic control, in which concurrent increases (or decreases) occur in both the sympathetic and parasympathetic components, or [an] uncoupled nonreciprocal mode of...control in which responses in one division of the autonomic nervous system occur in the absence of changes in the other. (Schore, 2003, p. 263)

As a component of the parasympathetic nervous system, the polyvagal system has an inhibitory influence on the heart. It is comprised of a late developing “mammalian” or “smart” ventral vagal system which allows for the ability to communicate via facial expressions, vocalizations, and gestures via contingent social interactions, and a more primitive early developing “reptilian” or “vegetative” system in the dorsal vagal system that acts to shutdown metabolic activity during immobilization, death feigning, hiding behaviors, and emotional states such as extreme terror (Porges, 1995). Indeed, Schore (2003) proposes that the psychoneurobiology of dissociation, a primitive response to threat, is mediated by an “inhibitory vagal brake” created predominantly by a rigid, fixed, vegetative dorsal motor vagus.

Schore explicates how, in health, the right hemispheric orbitofrontal cortex becomes the apex of hierarchical control of ANS functions and thereby the brain’s central regulator of emotion. The orbitofrontal cortex is the site of convergence of cortical circuits that process exteroceptive interpersonal stimuli with subcortical limbic-autonomic circuits that process interoceptive changes in bodily state (Schore, 1994). Given healthy development the orbitofrontal cortex (1) expands its regulatory capacities through the extension of axons that synapse on the vagal system, (2) dominates both limbic circuits and (3) regulates the autonomic aspects of all emotions. However, in response to early, chronic trauma a severe pruning of hierarchical cortical-subcortical circuits uncouples the orbitofrontal cortex from these autonomic circuits, thereby establishing “the developmental origins of regulatory deficits that are the sequelae of early trauma” (Schore, 2003, p. 205).

**A Clinical Poem: A Verbal Painting of Nonverbal Somatoaffective State**

For this article a fragment of a vignette from the 12th session of a psychodynamic psychotherapy group of eight women is condensed to three women and focuses on their interactions. It is written in experience-near, poetic language to highlight visceral awareness, capture the texture of nonverbal affective space, and facilitate the understanding of psychoanalytic phenomena through the lens of subjective psychoneurobiology. The purpose of this clinical poem is twofold. First, grounding the discussion in the body and affect allow the two disciplines to elucidate each other and guide us through the opaque labyrinth of the “somapsyche.” Second, it is a tentative attempt to translate countertransference responses into right brain language, and thus is replete with somatic imagery, prosodic expressions, and olfactory, gustatory, tactile and kinesthetic sensory data. I adopt the word “communiqué” to earmark right brain “dialogue,” and to underscore the maladroitness of left brain communication vis-à-vis right brain communiqué.

As a genetic and treatment history is outside the purview here, the narrative compares and contrasts two clinical moments: one of very mature functioning with another of very primitive functioning. This selection sprang from three...
factors. First, as a psychoanalytic psychotherapist, I have been trained to think in terms of a developmental continuum from primitive structures and states of mind to healthy ones. Second, it is helpful to use mature functioning as a baseline and springboard for comparison. Third, clarity tends to emerge when contrasting opposites. In short, this poetized vignette and ensuing discussion seeks to demonstrate how a combining psychoanalytic and psychoneurobiological frames of reference can more deeply explicate the somatoaffective matrix of both processes.

When I first presented the vignette (from which this clinical moment was drawn) to Elizabeth Bott Spillius in 1994, it became apparent that the best way to summarize communicate fleeting, intense affective moments was to apply poetic license to the vignette. In 2004, I was gratified to discover, through Schore, that I had applied poetic license to my somatic—right brain—responses! Here then is my attempt to lyrically transpose a right brain, somapsyche moment, for poeticism captures what simple words and prose simply can not: communiqué.

**“JOUISSANCE” AND “GHOSTLINE” ESSENCE** (Bollas, 1969)

_Cathy’s opening communiqué_

Peppy twinkle in her sweet, genteel, yet elfish face.
Laughing bubbles in her rising and falling, well modulated voice.
Playful contacting, linking through her utterances.
Her, her language story.

_Kate’s reaction to Cathy (“Kate”’ represents the five other women in the group)_

While she sits,
Body listening… eyes lively…
Head cocked in smiling attentiveness
Or bobbing jaunty joviality.

_Polly’s reaction to Cathy_ 
But she sits rigid… immobile…
Face flaccid,
Expressionless… pale…
Eyes neither dead nor alive.

_Polly’s dysregulating communiqué_

Her voice interrupts…
Flat… gray… monotone.
She begins her inevitable drone
In nasal New York tone,

“Yea, (no pause)
I know what that’s like”
“I remember…” she says,
Or “my girlfriend used to…” she says.

Beginning her listless litany,
Devoid of vigor or vitality,
Stripped of aliveness,
That no ear can bear to hear—AGAIN!

Her voice spills, a noxious, toxic vapor
Seeping its long saturating fingers,
Creeping throughout the room,
Fouling the nosemouth.

First destabilizing… then demolishing…
Enthusiasm… momentum…
Until only Death
Hangs in the air.

_Therapist: “periregulation” of Polly’s communiqué_

My bones ache as I sink like lead
Deep into the seat of my soft chair.
I hurt too much to be alive.
I look around the room.

_Kate’s reaction to Polly_
Her fingers are playing
With a piece of her skirt.

_Cathy’s reaction to Polly_
And her eyes are glazed over,
Body slumped in hopeless defeat.

_Therapist: somapsyche initiation of the intervention_

I draw a deep breath,
It was time,
The time had finally come.
Up out of the heavy water I shot.

**DISCUSSION: ANALYSIS OF A CLINICAL MOMENT**

_Psychoanalytic Hypotheses:_ Whereas Cathy’s communiqué represents a Winnicottian (1965) “true self” moment, composed of secondary emotions, mature, resilient defense mechanisms (e.g., humor, suppression, sublimation), secure early attachment, and “mature transference;” Polly’s communiqué represents a “false self” moment, in part, composed of primary emotions, brittle defense mechanisms (e.g., dissociation, evacuation), disorganized-disoriented early attachment, and “projective communication.” (I find “projective communication” a construct, regardless of valence and purpose, more accurately descriptive than projective identification. I conceive of projective communication as the precursor of transference). The precipitating intersubjective event is hypothesized to be Polly’s primitive envy of Cathy’s vibrant vitality.
Psychoneurobiological Hypotheses: The following discussion presents tentative hypotheses regarding psychoneurobiological states suggested by the clinical material.

The Joy of Vitality in an Integrated, Energizing Clinical Moment

Cathy’s communiqué is plausibly an emblematic clinical moment of efficient psychoneurobiological affect regulation. Her ebullient enthusiasm suggests modulated activation of the energy-expending sympathetic nervous system. Her somatosensory markers—the sparkle of pupillary dilation, the prosodic melody of her crescendoing and decrescendoing voice, and the mischievous charm of her facial expressions—are observable psychoneurobiological expressions of the somatic stamp of modulated arousal and regulated affect. The positive, secondary vitality affects of interest-excitement and enjoyment—joy, in conjunction with her playfulness, may be indicative of activation of right hemispheric anterior cingulate and orbitofrontal cortex regions, limbic structures that are involved in positive affects, flexible interpersonal functions, and modulation of autonomic activity. This top-down cortical modulation of her sympathetic and parasympathetic ventral vagal system allows for a coupled reciprocal mode of autonomic control and the expression of flexible and contingent social interactions. Her vibrantly felt, right-to-left brain, reflective, coherent narrative and affiliative linking imply mature coping strategies and balanced auto-regulation and interpersonal regulation—hallmarks of a secure attachment.

The Pall of Annihilation in a Malignant, De-energizing Clinical Moment

Polly’s communiqué is an emblematic clinical moment of severe psychoneurobiological affect dysregulation. The interpersonal stress (the evocation of envy) of the group dynamic (here, exposure to Cathy’s right brain visual and auditory expressions of positive affect) triggered an instantaneous loss of flexible higher orbitofrontal cortical inhibitory functions and an inability to effectively top-down regulate both her parasympathetic or sympathetic nervous systems. This shutdown of the ventral vagal system is accompanied by activation of the dorsal vagal system and subsequent decrease in cortical metabolic energy levels. This ensuing simultaneous activation of her sympathetic and dorsal vagal parasympathetic nervous systems represents the etiology of her transient moments of cataleptic immobility, hiding and death behaviors, and is, in part, the biological “bedrock” of her intense shame and envy.

Her somatosensory markers—the glazed, empty eyes, prosodic monotone of her flat, colorless drone, and ashen death mask of her flaccid face—are the outward expressions of the internal somatic stamp of severely inhibited arousal and dissociation. The bottom-up subcortically–driven negative affects that fuel boredom and irritation, although devoid of vigor or vitality, are however accompanied by simultaneous sympathetically–fueled but parasympathetically dissociated rage, agony, and perhaps terror, thereby preventing her from entering into the interactive play state of the group. In this uncoupled, nonreciprocal mode of autonomic control further interpersonal stress would potentially elicit a disinhibition of the shut down neurobiological “bedrock” state and result in the eruption of intense affective states that would riddle her projective communiqué with murderous rage and intense agony, rendering it an even more overt and excruciating “attack on linking.” It is further speculated that Polly’s immature, developmentally impaired orbitofrontal system is the outcome of a history of an insecure and possibly disorganized/disoriented attachment.

These clinical hypotheses were derived by comparing and contrasting the “jouissance” of an energized, regulated, “true self” moment with a “ghostline,” de-energized, primitive “false self” moment, and as such, proffer a preliminary integration of Schore’s affective psychoneurobiology with psychoanalytic theory.

References

Ann Nesbit has been a psychoanalytic psychotherapist in West Los Angeles for 27 years with special interest in Borderline Personality Disorders. She has taught at the Newport Psychoanalytic Institute, Loyola Marymount University and the University of California, Los Angeles, and has been a consultant to schools and clinics, including Menninger.
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GEMMA AINSLIE

This summer I went to my hometown and from there through the countryside in Ohio to an Alzheimer’s facility where my father’s younger brother lives. He seemed pleased to have me there, and to see my brother, whom he apparently confused with his son, and his two sisters. He spoke Italian to one of my aunts, asking her sotto voce if I understood, laughing when I answered the query myself, and he smiled that same heavy-lidded, seductive, mischievous smile that I have known for all my life. Although his sentences were dismembered, he seemed to respond as he always had to the playful quality of my replies, more as one would smile in response to music than to conversation. A picture of my father in US Navy WW II uniform is on his door: “This guy... one day he was here, standing... and then he (gesturing toppling over) just... he fell... and that was it, he was down.” He looked sad as he said it. Am I the only one who would read that as an account of how my father is dead now? So, I walked through the garden with this strangely familiar man, exactly as he has always been and nothing like he was before. He told me, “It’s an alright place here,” looked at the huge old forest growth beyond the fenced yard and said, “It’s God’s place.” He seemed at peace, yet his shoelaces were knotted around his ankles and he clutched his false teeth after his meal.

I, too, clutch the familiar. I know the taste of this same uncle’s roast pork, the texture of my aunt’s versus my mother’s pasta sauce, the balance of anise to butter in all the different recipes in my family for biscotti and pizzelle. The culture of my growing up is evoked by language and tastes and smells, and by the cool summer evenings on the Ohio River, air cleaner now than when the steel mills’ blast furnaces lit the sky red and the nuns newly assigned at St. Agnes School sat on the white frame convent’s porches to marvel and to anticipate their duties with these working class, first and second generation American children.

In October, I am presenting a paper, “Playing with Reality: Transitional Phenomena in Adolescence,” at the Austin Society for Psychoanalytic Psychology (ASPP) monthly meeting. So, I’m reading Winnicott and remembering my work with adolescents, beginning in Ann Arbor and continuing now to my consultation with a prep school here in Austin. In Texas, teenagers “play with reality” by rustling cattle, carrying guns in their pick-ups, shooting rapids in desolate canyons on inner tubes with coolers of beer in tow. The entire world is the adolescent’s stage and we are “merely players.” I’ve read some Adam Phillips in anticipation of the Division 39 Meeting in April. I have started to meet with a small study group to read John Muller’s work on semiotics, the exchanges that establish subject and self, the Third in culture, in psychoanalysis, in preparation for his visit to ASPP in November.

Reconsidering “the Third,” I reflect upon my analytic hours: How can I translate for this man who presents only bodily pain? I say, “So what you thought was evidence of your strength—your thickly muscled calf, your taking on more and more and refusing help—is really the source of your pain.” How much is my white-ness the source of this young woman’s idealization of me? Her brown-ness the reservoir of her worthlessness? How distant does she experience me from her immigrant other-ness? How distant do I experience myself from it? From her? I’ve re-engaged my pleasure in poetry, reading Marie Howe’s What the Living Do, and Bruce Snider’s The Year We Studied Women, and Talking with Poets, in which writers talk about how they construct poems. So, I have a space again in which to play with the parallels between poetry and psychoanalysis, thinking about how the use of metaphor underpins them both, how analysts author metaphors as idiosyncratic and as transformative as poets’. I hope to present something about this at the Division Meeting in Spring 2005.

The strangest thing I’ve done this summer is to begin to study painting. My landscapes look unnatural: objects in my still-lifes float untethered, perspectiveless, but I’m catching on to the human face. My teacher has suggested that I do self-portraits, setting up a mirror and lights next to my easel. I let myself notice anew how from the beginning of my training I’ve characterized patients visually, thinking of one as “My Botero,” another as a Zúñiga, noticing the peculiarly deep-set eyes of the man who talks of wanting to retreat into a cave. Naming them as portrait subjects allows me to see them in metaphorical ways. The painter Julie Speed denies that her powerfully inscrutable, narrative paintings have anything to do with her unconscious or with her memory, yet she paints the same nose over and over again—my nose. How much is my white-ness the source of this young woman’s idealization of me? Her brown-ness the reservoir of her worthlessness? How distant does she experience me from her immigrant other-ness? How distant do I experience myself from it? From her? I’ve re-engaged my pleasure in poetry, reading Marie Howe’s What the Living Do, and Bruce Snider’s The Year We Studied Women, and Talking with Poets, in which writers talk about how they construct poems. So, I have a space again in which to play with the parallels between poetry and psychoanalysis, thinking about how the use of metaphor underpins them both, how analysts author metaphors as idiosyncratic and as transformative as poets’. I hope to present something about this at the Division Meeting in Spring 2005.
A friend once told me the two themes in literature are “stranger comes to town” and “hometown boy leaves.” My summer has been an aligning of these catalysts—les agents evocateurs—presence and absence, familiar and unfamiliar, reunion and introduction, newness embedded in and sorted by memory. Just as in my office I become someone’s bossy older sister, and another’s hurried and scatter-brained father, and the abandoning mother of the young woman who today is sobbing about the children of Bezlam—those who have died, and those who are maimed, but especially those who have not been claimed and lie waiting in the hospitals. The thoughts and images that Julie Speed describes as “skittering” through her mind before and as she paints—are they the same or different from those my uncle tries to string together, attempting to communicate a memory, conveying more in tone and movements than in words, no longer able to reach the register of language but communicating nonetheless? No doubt, some of these agents evocateurs will appear in what I am writing about and presenting this year.

STEVEN H. KNOBLAUCH

A contrast of wonder filled encounters with folks and places set against a continuously haunting sense of the uncertainty that can plague human relationships, interpersonally and collectively these times…and maybe in all times, colored these last summer months for me. June commenced with a great adventure structured by the Italians, Susi and Gianni Nebbiosi in Siracusa, Sicily around the conference Dionysius’s Ear: Trauma, Tragedy and Psychoanalytic Listening. While the papers and discussions, many by relatively new voices, were top level, the juice of this time was provided by shared evenings with so many good friends attending the powerful performances of Medea and Oedipus Rex, dining and dancing and walking the charming streets of Siracusa, Notto, as well as sides trips with my wife, Ingrid to other parts of the island. I vote for more similar conferences enhancing these aspects of our shared experience as well as our ideas and clinical tales. Among the many images to carry from that time was the sharply etched face and gentle gravelly voice of our morning café host feeding us cappuccino and brioche, the indescribable tastes of Sicilian cooking, and the great fun we shared with all involved.

As the summer further unfolded, as terrible tales traveled with horrible images from Iraq, the Sudan, Afghanistan, Russia, Israel, as fear shown in the faces of many New Yorkers dreading the impact of a political convention, and worry anticipated the possibility for tragedy in Athens, we tried to find moments with family and friends to celebrate the days of life we could steal from the seemingly always always gathering storms. A birthday dinner with my 79-year-old mother, Old Timer’s Day in the bleachers of Yankee Stadium with two of my nephews, a good old-fashioned 4th of July barbecue in the Shawangunks with family, friends and neighbors became such opportunities. Additionally, spring/summer in New York City was a rich time for revisiting old jazz friends and legends and I was able to see and hear Steve Lacy (just weeks before his death), Jackie McLean, Bobby Hutcherson and Grachan Moncur III, Henry Grimes and Perry Robinson, John Handy, Archie Shepp and Roswell Rudd.

Writing during this time was mostly editing talks as I prepared for an active time August through November. I met with colleagues tying up projects from the previous year and continuing activity at IPSS, NYU Postdoc, AAPI, IARPP and Progress in Self Psychology. Clinical and supervisory work continued to challenge and I frequently was given opportunity to remember why I love the work we do, as well as the difficulty involved and the humility required.
for encountering the complexities of human relationship and the power of the unconscious.

August shifted us below the equator where the rhythms, gestures and intonations of Brasilian sensibilities (and they are multiple as you might expect) washed and shaped our skins and awarenesses. My wife, Ingrid and my daughter, Giana with some friends, and I first visited Ingrid’s father, Jano, and brother, David, in their Brasilian Buzios home where Jano works several times a year on a project concerning the protection of the Pau Brasil, the tree for which the country is named. There was much time for boat rides to paradise beaches and walks and climbs through tropical vegetation and coastline eco-systems… and, of course, many caipirinhas. Later we shifted from the natural surrounds of that place to the magic of Rio, with its beautiful modern buildings contrasted against the fear and violence filled-hillside favelas, framed by the never ending beaches of volleyball, soccer and scantily clad sun worshippers, the soothing drone of wave rhythms washing the white sands and the powerful mountain presences of Sugar Loaf and Corcovado spreading a numinous blessing upon all the pleasure and pain of life below. There, friends from the ABEPPS and SBPRJ provided an opportunity for a series of rich intellectual exchanges as well as hosting us through a panorama of scenes from Ipanema to Lapa to Santa Teresa to Barra to feel, taste and dance our way into their Brasilian flow.

As if that was not enough, we then flew on to the soul center of Brasil…. Salvador, Bahia, where again we seemed to move through centuries of history, cultural transitions and melts. Words cannot capture the experience of walking through the town of Cachoeira, the feel of the gait and pace of the townspeople in their various work and the markets we visited, the Orisha presences there and in the Pelourinho of Salvador, the rhythm lift of bands like Belo Jamaica or Olodum to carry one, body and soul above the pain or numbness lining the fabric of most everyday events. How consistent with our Dysonian experiences of early June!!… and how, both different and similar to what we strive for in psychoanalysis!

We concluded our Brasilian odyssey in Belo Horizonte, Minas Geraes a quiet but large city surrounded by a countryside of mines and natural resources that make it one of the most prosperous regions of Brasil. Good company with friends from around the world gathered to a conference sponsored by IFPS concluding with a delicious Bahian meal. The exchanges at the conference afforded a special opportunity for “a dialogue of tribes” as one of the conference planners, Javert Rodriguez called it. Freudian, Interpersonal, Kleinian, Lacanian, Relational, and Self Psychological voices seemed to hear and respond to each other across different psychoanalytic cultures.

Back, in NYC to end the summer, we suffered the RNC, prepared to send Giana off to Smith for her last year, to face the uncertainty of a national election and how significantly it will shape the events of our lives for years to come, and finally, to return to the work to which we have given our commitment and which I continue to feel “makes a difference” in big as well as little ways, only to the extent that we are able to surrender ourselves, as Mannie Ghent reminded us, to the expanding/transforming possibilities for which we work to create opportunities on a daily basis with our patients and colleagues.

LYNNE LAYTON

As I write, my summer vacation is drawing to an end, which, for me, always evokes loss as I anticipate shorter days, less light, autumnal frosts, and the frenzy of fall activity. I’m writing in my study in the house on Cape Cod where I’ve done most of my writing in the past 13 years. The house will go on the market at the end of this weekend, so this is my weekend to “say goodbye” to the house, street, beach, and town. Up the street, a house was demolished yesterday, and I’m looking out on the house across the street that’s about to be demolished; both will be rebuilt, bigger and higher, their owners after the latest in hot commodities, the “water view.” I admit: I’d quietly hoped the house across the street would already have been
demolished, so I, too, could have had a few weeks of a water view. Never thought of it before, in 13 years, but suddenly I want it, too.

The Republicans, whose tax legislation will allow me to pay virtually no capital gains tax on my home, are about to meet in New York for their convention. Despite Cheney’s “break” from the party line, they’ve just put a plank in their “compassionate conservative” platform that bars from legitimacy both gay marriage and civil unions. So, it’s a weekend, like many in these crazy-making political times, where I feel all the contradictions of my privilege. With whom do I identify? Can I keep faith with my left-wing political commitments while, as my accountant put it, “riding the wave” that’s lifted my boat big-time in the past fifteen years? Not more than two seconds ago did I experience the contradictions, in the very moment I wrote of house demolitions: I’m active in a Jewish peace group, Brit Tzedek, that stands for a two-state negotiated Middle East solution, the “spirit of Geneva,” and is against Israel remaining in the occupied territories. As I wrote about the house being demolished, I visualized Israeli tanks demolishing homes in the occupied territories. It’s not easy to live with such contradictions, but acknowledging them and thinking about how to deal with them is precisely the work we do.

My summer vacation abounded with contradictions. At the APA meeting in Hawaii in late July, which cost a veritable fortune to attend and therefore WAS my summer vacation, I gave a paper that pulled together the themes from a lot of the writing I’ve done in the past four years. The first thing I realized when working on this paper is that I’ve written more in the past two years than I usually write in five. I hypothesized that the writing spurt was in great measure due to my strong feelings about the domestic and foreign injustices of the Bush administration—I’ve felt compelled to think about the ways that psychoanalysis and psychotherapy, i.e., my own practices, are simultaneously implicated in and resistant to dominant ideologies. I teach in the Social Studies concentration at Harvard, and my courses all center on different contemporary ways of conceptualizing ideology and the way ideologies are lived. While several of the most sophisticated theorists of ideology insist that ideologies are largely conscious, my own sense is that ideologies are lived in practices, the social constraints and power origins of which are unconscious. If this is so, then analysts have something important to contribute to the understanding of how ideologies function, something most academics don’t quite grasp because they don’t have the opportunity we have to study ideology in microscopic interpersonal exchanges. Many, if not most of the problems we treat have to do with the way we, patients and treaters, become implicated in conflicting ideologies of gender, race, class, sexuality; in the conflictual para-
digms concerning what it means to be American or what it means to be an individual or what it means to be a man of a certain class or race in relation to other men and women. This summer, I’ve been trying to gather my thoughts for a book on what a non-conformist clinical practice might look like. I’ve been thinking about certain kinds of enactments that take place between me and my patients, ones in which they and I are unconsciously pulled to act in accord with the very social norms that have contributed to their psychic distress in the first place. Some of the normative unconscious processes I’ve been thinking about become visible in enactments that, for example, enforce a separation between our psychic and our social being, or that reinforce the dichotomization of nonwhites and whites and idealize whiteness, or that reinforce the divide between straight and gay, or that reinforce prescriptions for what those of a particular gender or class are allowed to do and whom they are allowed to love. For instance, I’m working on a paper about some enactments with an Asian American patient. In one, he endowed me with the power of whiteness and I unconsciously accepted the projection and acted as though I occupied that position. In others, I became confused about certain tenets of my practice when I recognized the different ways that the patient and I were drawing lines between assertion and aggression, civility and submissiveness.

I’ve read two very interesting books this summer that similarly are engaged with what one of the authors calls a “social unconscious” (a term coined, I believe, by Fromm), Farhad Dalal’s Race, Colour and the Processes of Racialization and Earl Hopper’s The Social Unconscious. Both are British analysts in the group analytic tradition and both directly connect their views on the way ideology is lived to their clinical work. Closer to home, Section IX, Psychoanalysis for Social Responsibility, is having a list-serv discussion in which clinicians are wrestling with these very issues. Section IX has developed a syllabus of clinical papers on the psychic and the social, which we hope will become a template that people will draw on to teach such courses in their institutes. We discuss one paper each month, and the discussions have been extremely rich. Two other Section IX members, Nancy Hollander and Susan Gutwill, and I are also working this summer on an anthology of papers on class and politics in clinical work, most of which are by Division members.

So it’s been a hard-working summer, but the working conditions are great—I see patients three days a week, and then, after two clinical hours on Thursday mornings, I retreat to the Cape house for a couple of days in which I’m free to think, write, bike a little, write again, go to the beach, and read in the chair on the deck—quiet conditions for thinking that most, I’m quite aware, don’t have. Then there’s the good and bad noise of the rest of life. I’ve done
some voter registration work with MoveOn, and I find continued intellectual and political community in my work as editor of Psychoanalysis, Culture & Society.

And finally: this summer, I unwittingly participated in an experiential gender “workshop,” taught by the two kittens my partner and I adopted in July, Jack and Abby. Jack, they told us, was a boy, and Abby a girl. Within two weeks, Jack sure looked like a little boy to me. But then Jack went for his second distemper shot, and the vet said, “Who told you Jack was a boy? Jack’s a girl.” So Jack became Jackie, but the process of seeing a girl where I’d seen a boy is still surprisingly, if ridiculously, disorienting.

NEIL ALTMAN

I am very excited about many of the things I did this summer, some of which are professionally related and some not. So, to get the non-professional things out of the way quickly: I climbed Mt. Marcy (the highest peak in New York State); on the way, I saw Lake Tear of the Clouds, the highest source of the Hudson River. That had been a goal of mine for many years.

In June, I spent three weeks in Italy. I presented a paper on the therapeutic action of psychoanalysis over a weekend in Rome at the Societa‘ Italiana di Psicoanalisi della Relazione (the Italian Society for Relational Psychoanalysis). Then with my wife and two of our friends, I rented a house in the mountains near Castiglion Fiorentino in Tuscany. While there, I saw a wild boar mother with her babies and escaped with my life! The week was heavenly. It was early June, the weather wasn’t too hot, and the tourist crush hadn’t yet arrived.

Then my wife and I continued on to Sicily where a conference was being put on by the Istituto di Specializzazione in Psicologia Psicoanalitica del Se e Psicoanalisi Relazionale (The Institute for Specialization in Psychoanalytic Self Psychology and Relational Psychoanalysis), located in Rome, in collaboration with four American institutes (the National Institute for the Psychotherapies in New York, Institute for Contemporary Psychoanalysis in Los Angeles, the Massachusetts Institute for Psychoanalysis, and the Toronto Centre for Psychoanalysis) in Siracusa. This was a truly extraordinary conference. It was organized around performances of Oedipus Rex and Medea in the ancient Greek amphitheatre. Can you imagine what a powerful experience it was to see those plays in something close to their original setting, then to spend our days discussing them? The setting and the acting were superb. I felt Freud’s presence very powerfully. I felt awe at what he had done with the myth of Oedipus. It seemed clear to me that Freud was profoundly stirred by the psychological richness of the play and the myth, and that he recognized that something very deep about the human condition was revealed therein.

From my point of view, however, the theory that emerged from his reflections on the play was too specific. Yes, the play does focus on incest and patricide, but more than that, it seemed to me, the play was about the process of coming to realize that one does not know oneself. At one point, Oedipus cries out to his mother, Jocasta: “Who am I?” I thought this is the quintessentially psychoanalytic moment, a moment that captures the wonder and terror of psychoanalysis. This is the lasting legacy of Freud, I thought, one that survives the rejection of drive theory. The specifics of what we do not know about ourselves at any given time is important, but not as important as the fact that we always exceed what we know about ourselves. Of course, the play and the myth themselves also exceed anything we can say or think about them; the encounter with the plays and to imagine myself in Freud’s presence made this summer truly memorable.

RICARDO AINSLIE

This summer I worked on three new projects, two of which may seem, at first glance, at a remove from psychoanalytic considerations, but that’s only if you think of psychoanalysis in the narrowest terms. In my consulting room and in my teaching, I practice that art form we know and love. I enjoy my clinical work, find it immensely rewarding, and I also relish the (increasingly rare, in American universities) opportunity to teach doctoral students at the University of Texas about the rich discipline of psychoanalysis via courses in psychoanalytic psychotherapy, object relations theory, projective testing, and via my Psychoanalysis and Culture seminar. However, over the years, in my writing, through film projects, and through collaborative photographic essays, my work outside of the consulting room and beyond the university has increasingly sought to apply psychoanalytic ideas and a psychoanalytic sensibility to topics not typically associated with psychoanalysis such as social issues, community conflicts, the psychology of race, and the psychology of immigration.

The first of the three projects is a documentary film titled Looking North: Mexican Images of Immigration. I went to Mexico City twice this summer trying to understand how Mexicans view the fact that so many of their relatives, friends, and neighbors, have moved to the United States. You might be surprised at how this social phenomenon—the unprecedented migration of Mexicans to the US—“resides” within the Mexican imagination. One of my interlocutors (I mostly did man-in-the-street interviews with people from all walks of life) described the fact that her husband is the only member of his family remaining in Mexico. He’s depressed because he feels they have all
abandoned him, she told me. Others described their ambivalence regarding friends and relatives who come back to visit. They come with a swagger, I was told, and with the attitude that accompanies stylish clothing and cash in the pocket, that is, the markers of having “moved up” socially, as well as geographically. The envy for those who have perhaps managed to escape Mexican poverty was sometimes palpable, but also, in some instances, a defensive derision of them, as if to have left made one a traitor. Interestingly, some accuse their fellow expatriates of being lazy: “If they wanted to work they could find something to do here,” someone said. Many were accused of simply chasing “the illusion of the dollar.” But many also viewed those who had left for the US in decidedly heroic terms. The border crossing has taken on mythic significance in Mexico. Most recognize the inherent dangers, and the fact that many have died in the crossing is the stuff of nightly newscasts and is well known to Mexicans. And, notwithstanding the aspersions of some (the pursuit of “easy money,” the disinclination for “real” work), most, by far, view the motives for the crossing as laudable: to provide desperately needed money for their families (funds sent from the US represent the second largest infusion of capital into the Mexican economy, second only to oil exports). Thus, the exodus of so many of their countrymen to the United States is experienced in complex ways in Mexico.

I stumbled upon my second project while in Mexico City earlier in the summer. Two events capture the topic. First, I was invited to interview two bodyguards at a private school in a wealthy neighborhood. As my daughter (who was helping on the project), my cameraman, and I approached the school, we were dismayed to find ourselves surrounded by a sea of luxury cars (all armored, I was later informed) and 30-40 body guards who there to protect their charges in true Man on Fire style. The second event brought home the fact that the security issues in the city are no small matter: two brothers, ages 28 and 30, were kidnapped while I was in Mexico City. Although the family paid a ransom of six hundred thousand dollars, their captors murdered both young men. The crime outraged the city’s residents. They had become acclimated to the epidemic of crime, from multi-million dollar ransoms to the more quotidian so-called “express” kidnappings where victims are taken to ATM machines and forced to max out their credit cards, but this was the tipping point. The brutal murder of these two young men stirred the city to action, culminating in a march of hundreds of thousands of people (the New York Times reported a quarter-million people, other estimates were twice that figure). It was the largest march in Mexico City’s history.

Freud was prone to thinking of civilization as but a thin veneer, tenuously covering the darker propensities inherent in the human condition. He spoke eloquently about our need to protect ourselves against the awareness of those dark forces. In this second project we see what lies beneath that veneer—the wave of kidnappings, going back a decade now, and the unprecedented climate of lawlessness that has become pervasive in Mexico City—are symptoms. The causes are many and they are complex, including a power vacuum created by Mexico’s current transition to democracy. Brutal kidnappings of rich impresarios whose families pay large ransoms to get them back has become the emblematic crime, but the reality is that the current climate is affecting people of all backgrounds and social classes. This is what happens when a society’s social institutions begin to falter, the dark forces that lurk beneath gain ascendance.

Finally, this summer I have been working on a collection of interviews conducted with Hispanic World War II veterans. My part of this project is to explore the evidence of Post-Traumatic Stress Disorder in these veterans and the impact of these symptoms on their families.

**Allan N. Schore**

Summer—as it approached I was looking forward to a time when the livin’ is easy. Particularly so after a fast paced spring. Leading up I had completed a number of rather exciting keynotes, starting with the James Grotstein Conference at UCLA, “I Feel Therefore I Am! The Growing Importance of Affects for Psychoanalysis.” Did a PowerPoint, “Affect regulation and the right brain: linking neuroscience to psychoanalysis, the science of unconscious processes,” and then good dialogue with the other presenters Antonio Damasio, Peter Fonagy, and Jim Grotstein. A few weeks later, I presented to the 3rd Annual UCLA Attachment Conference, “Trauma, Traumatic Attachments and Borderline Personality: Implications for Clinical Treatment,” with Bessel van der Kolk, Karlen Lyons-Ruth, Howard Steele, Francine Shapiro, Jim Masterson, and Alicia Lieberman. My address was titled “Advances in regulation theory: The role of attachment trauma and right brain development in the etiology and treatment of borderline personality disorder.”

In May to New York for the American Psychiatric Association Annual Meeting to do a symposium, “Current Concepts of the Neurobiology of the Self” with Joe LeDoux, Julian Keenan, and Todd Feinberg. Heartening to see a packed room in the land of psychopharmacology. Then to Chicago, to Loyola University of Chicago Stritch School of Medicine for a Grand Rounds to the Neuroscience Program and Pediatric Behavioral Divisions, “Developmental neurobiology and psychopathogenesis: The impact of early relational trauma on the developmental...
trajectory of the right brain.” While in the Windy City also presented to the International Society on Infant Studies Annual Conference, offering hard core developmental psychology a symposium “Neural mechanisms of attachment and early self regulation” along with Jaak Panksepp, Steve Suomi, and Don Tucker.

Finally summer. A relaxing couple of days at Santa Catalina Island, CA, interspersed with a keynote to the Society for Advanced Brain Analysis, “The right brain, attachment experiences, and the origin of self-regulation.” And then to some serious summer at the Annual Cape Cod Summer Symposium, New England Educational Institute, where I did 5 half days on “Affect regulation and the repair of the self.” Neuroscience and psychoanalysis in the morning; then Judy and I did lighthouses and lobster in the evening. In July back to Santa Barbara, CA to do a graduation address and then a two-day workshop “Recent advances in neuroscience and attachment theory: Relevance to prenatal, perinatal, and somatic psychology.”

Later in the summer an interview on WSB 98.5 FM, National Public Radio, in Atlanta GA for Suzi Marsh’s “Choosing Life: Addictions, Mental Health and Recovery.” And then the capper—an end of summer trip to Europe. To Warsaw for Third International Conference on the Dialogical Self, where I presented with Leslie Greenberg and the Dutch social psychologist Hubert Hermans.

And then to Assen, Holland, for the GGZ Drenthe Trauma Conference, “The Broken Self: Theory, Research and Treatment of Chronic Traumatization.” In addition to a keynote also did a one-day workshop to an international audience of clinicians, “The right hemisphere is dominant in clinical work: implications of recent neuroscience for psychotherapists.” The real highlight was at the end of the conference, when my host and colleague Ellert Nijenhuis was surprised to be presented with the Dutch Order of the Lion for his groundbreaking work on dissociative identity disorders. Not too many American conferences end with a knighthood and Veuve Clicquot.

Meanwhile, by summer my writing efforts were hitting pay dirt. Either out or in press were a number of projects: “Commentary on Dissociation: a developmental psychobiological perspective” in the South African Psychiatry Review; “Developmental affective neuroscience describes mechanisms at the core of dynamic systems theory” to be published in Behavioral and Brain Sciences; “Graduation address, Santa Barbara Graduate Institute” for Journal of Prenatal & Perinatal Psychology and Health; “Attachment, affect regulation and the developing right brain: Linking developmental neuroscience to pediatrics” for Pediatrics in Review (particularly excited about reaching 35,000 pediatricians); “Minds in the making: attachment, the self-organizing brain, and developmentally-oriented psychoanalytic psychotherapy” for the Italian journal Psicoterapia; “Dysregulation of the right brain: traumatic attachment and the psychopathogenesis of dissociation,” About to submit to Nature “Angry young elephants: neuroethological models for violence and trauma in elephant communities,” which I co-authored with Isabel Gay Bradshaw, Oregon State University, and Janine Brown, Smithsonian and National Zoo. At the end of the summer a nice bonus—Judy and I are about to sign a contract with WW Norton for co-editing a book tentatively titled, Reader’s Guide to Interpersonal Neurobiology. And now working on a chapter in “ISSD Report on Dissociation and the Dissociative Disorders,” a Sourcebook on the Dissociative Disorders Section of DSM-V.”

Summer also saw the completion of a functional magnetic resonance imaging study of ‘Theory of mind’ in borderline personality disorder.” About to travel to Canada for consultation with my co-author Ruth Lanius for an upcoming large neuroimaging study of the neurobiology of attachment, “Neural correlates of mothers’ response to infants in women with borderline personality disorders and healthy controls” at the University of Western Toronto.

Now that summer’s over I’m ready for the fall. Preparing for New York and a keynote to the Association of Autonomous Psychoanalytic Institutes Annual Meeting, “The Interplay of Implicit and Explicit Processes in Psy-
choanalysis” with Jim Fosshage, Wilma Bucci, and Steve Knoblauch. While there also will do a workshop “The enduring impact of attachment trauma on the developing right brain: Disorders of self-regulation” for the National Institute for the Psychotherapies Training Institute. Next month will do an interview here in LA for the Public Broadcasting System Television 2006 Series “A Sense of Self: An Introduction to Psychology.” Right here in LA an address to the UCLA-Santa Monica Medical Center Stuart House/Rape Treatment Center. Then to do 3 days at the 12th Annual Santa Fe Symposia, New England Educational Institute, and finally to Seattle and San Francisco to meet with my ongoing consultation groups.

Glad the relaxing summer is over and I can get back to work.

Elisabeth Young-Bruehl

When I moved to New York from Philadelphia three years ago, I made myself a promise that if I could build up a practice from zero in this shrink packed city, I would reward myself with a vacation of the sort I have never taken—a work free vacation with no writing except in my journal and dreambook. So, this June I finally took my reward in Sicily, with a tour that started in Palermo, went eastward, and eventually circled the whole island. I have never been in a place where I was so amazed by the juxtaposition of cultures, the layering of civilizations, the omnipresence of historical record. Rome, of course, has been the city of archeological metaphor for psychoanalysts since Freud, but Sicily made me feel the metaphor with startling immediacy. This was both because of Sicily’s extraordinary eventfulness—ten civilizations have invaded and colonized the island—and because I, as an American, could not for a moment get away from my present in this place so thick with past. I did take a vacation from my work in Sicily, but there was no way to vacation from being an American.

For example, I spent a late afternoon in the Duomo in Messina, which dates from 1160, with the idea that I would then watch the elaborate golden机械s, imported from Strasbourg in 1933, of the renowned campanile. Well, no, the orologico astronomico only performs at noon said a refined, elegant elderly man, speaking Italian, without a trace of Sicilian dialect, who suddenly appeared at my side while I stood in the piazza staring up at the campanile. In my childlike Italian, I expressed my disappointment. It would be his great pleasure, he said, to show me a video of the clock that he had made at noon. On his digital camera’s little screen, I watched the golden figures go into action: Dina and Clarenza, the heroines of Messina at the time of the Sicilian Vespers, rang a huge bronze bell while a lion rampant, roaring, waved a banner and a cock crowed and flapped its wings. A bronze Jesus jumped up out of his tomb and was resurrected. While Schubert’s Ave Maria set the pace, all the tower’s many dials, telling the date, the year, the position of the planets, and the phases of the moon, made their minute adjustments. Laughing at the campy extravagance of this display I thanked my benefactor and joked with him, “Maestro, you must let me photograph you in front of the circus. “Uno recordo, prego.” He agreed, but asked, in exchange, that I hear his personal story, his racconto, “because you are an American.’

He had found the perfect ear for a line like that! A psychoanalyst, a writer. Hooked, I invited him for coffee at my hotel that evening and he explained over his espresso how as a young man in Rome he had trained as an archeologist and art restorer. His first big assignment, the launch of his career, was the reconstruction of the Duomo in Messina, which had been bombed to rubble in 1943. Retired now, he is making a video record of the places all over Italy where he has done restorations. “So,” I said, “you tell me this because I am an American and it was my people who destroyed this magnificent church?” “Ah, signora, almost every people in the Western world has taken the opportunity to destroy something in Sicily. Sicily is a magnificent ashtray!” (Portacenere is a portentous word to use with Mount Etna smoking in the background and so much of the Duomo itself made from blocks of lava.) He sighed: “We believe the American bombs were aimed at the Nazi camp by the harbor. The intention was good, the aim not so good. The liberation of Italy depended upon American bombs.” Then he said, watching me intently, “We do not feel the same way about the destruction in Baghdad by your people’s ‘smart bombs.’”

I remember when I was a graduate student in the late 1960’s, traveling on the Continent for the first time, that I was constantly being charged in small and large ways to take responsibility for the war in Vietnam, so hated by most Europeans. It was the same this summer in Sicily. I had the great good fortune of attending a brilliant modern Italian production in the Greek amphitheatre at Siracusa of Euripides’s Medea. The violence in that play about culture clash and arrogance and rage was stunningly rendered, but I could hardly get out of my mind the posters plastered on the fence next to the box office: AMERICA OUT OF IRAQ! BUSH IS A WAR CRIMINAL! RESIST AMERICAN IMPERIALISM!

Since I came home and took up my practice again, I have been dreaming of Sicily a great deal, but my dreams are laced with the images that come to me every morning in my newspaper. Images of Iraq portacenere. On the weekends, I have been struggling to write a four lecture series that I will give this academic year at Yale called “One Hun-
dred Years of Psychoanalysis,” an introduction to our art and science, open to all the undergraduates as well as to the general public. Until I decided to begin the fourth lecture with Freud’s 1931 “Why War?” letter, I was terribly distracted. Now—sublimation in better action—I am writing straight into the face of this question, and that feels better, purposeful. Today, I made these notes for the fourth lecture:

It is not wars of survival or wars of self-defense that compel this “Why war?” question or that frighten us with visions of what human beings can do to each other; it is wars of imperialism—wars, in one form or another—intentionally devoted to overthrowing ‘others’ and taking their goods or enslaving them. Group narcissistic wars. For these are the wars that kill all concerned: the attacked who are dehumanized and the attackers who are also dehumanized. Aeschylus psychoanalyzed the process in The Persians. Under modern conditions, prevailing since the First World War and laying the groundwork for totalitarian regimes, the attackers are dehumanized in a particular way: the army and the citizens of the attackers submit masochistically to a provincial, anti-metropolitan obsessional-narcissistic leader and a leader group. When their sadism goes unchecked and their use of secret police and intelligence unregulated, the whole attacking nation becomes to a degree perverse and the soldiers become torturers. A group perversion. And, like all perversions, this perversion, this group sadomasochism, then generates other perversions and related addictions, as perversions never stay simple.

I will speak less sharply and with less condensation at Yale, but this is what I think.

MARY-JOAN GERSON

Probably like others, Bill’s first request for a statement about “what I did this summer” reminded me of that summons after Labor Day in junior high school. The composition assignment “What I did last summer” always made me feel suddenly accountable and a little guilty—short on self-improvement and long on mindless pleasure. Plus ca change… I suppose. My first thought at the computer: Should I, a psychoanalyst with an intense interior life, spend a summer renovating an apartment and obsessing about window treatments and floor stains? How could I have failed to reach even the middle of my absolutely urgent “to read” pile?

However, my mind was not totally off-duty this summer, and I did dig further into an area of longstanding interest to me: mythology and ritual. As many of you know, my avocational work has been adapting mythology/folklore for children: creation tales from Nigeria, Guatemala and Brazil and feminist tales from Mexico—five books published in all. My mother’s lament that I hounded her with “why” questions always seemed to explain my valence for creation tales. But then psychoanalytic speculation legitimizes preoccupation with “why” questioning as well.

Mythologies are celebrated and maintained in ritual, another passion of mine. This summer was one of the few in which I didn’t set off for a remote area in pursuit of a unique, sometimes arcane ritual, generally to the bemusement of my friends. I wrote a paper a couple of years ago on the ritual of couples therapy (Contemporary Psychoanalysis, 37(3), 2001), but my interest in how mythology and ritual process organizes our scholarship and clinical experience wasn’t satisfied by doing so.

I’ll be focusing on mythologies of self in whatever I write this year, for example, a paper on working with patients with chronic medical illness, which I will present at the Division Meeting. I now co-chair a Task Force on Psychoanalysis and Health Care, and as we try to frame the unique contribution of psychoanalytic thinking in the health care area, I am thinking about schema of healing. Work
with chronic illness often seems framed ritualistically; every culture has symbolized illness and the process by which health is restored. I’m currently conducting research on chronic illness and relationship dynamics, particularly patterns of attachment, and will likely cite this research in my presentation. For me, illness is a cultural and interpersonal phenomenon, and I look at the “mythology” of illness, as a one-person phenomenon, with skepticism.

I’ll also be presenting a paper on “ethical” issues in intimacy—at Division 39 in the spring, as well—for Section VIII. Once again, I think that most of our “ethical” transgressions with significant others, emerge from mythologies of self-autonomy and self-delusion. What’s a psychoanalyst and a couples therapist to do? In the tradition of Irwin Hoffman’s work (Ritual and Spontaneity in the Psychoanalytic Process, 1998) and my interest in couples therapy as ritual, we can look to psychotherapy as a compelling secular ritual of our time. We try to reach just beyond the familiar, the ordinary, the banality of self-absorption. Sometimes we proved—as all ritual does—a too comfortable sense of timelessness and continuity. At other moments, our work offers a jump into discontinuity and a strike at transcendence.

KAREN J. MARODA

Perhaps it is my age. Perhaps it is the state of the world. But I find myself feeling more unsettled in the last couple of years. Like many of my patients, I question the value of what I am doing. Perhaps it is the shock of the world-as-we-know-it having changed so dramatically. At a conscious level, I do not feel particularly distressed as I go through my normal day. The violence and chaos in the world has become the status quo. Yet I am not as comfortable as I used to be. And my dreams tell me that global unrest and daily beheadings are, indeed, registering in my unconscious. As a result, I think more seriously about what is truly meaningful to me, about what I want to do with the rest of my life.

This summer I had planned to write at least a couple of chapters in my next clinical book. But I did not. My book is on technique, so I read Nancy McWilliams’s new book, Psychoanalytic Psychotherapy, and Sandra Buechler’s Clinical Values: Emotions That Guide Psychoanalytic Treatment, as well as some older texts—Wachtel’s Therapeutic Communication, Stark’s Modes of Therapeutic Action, and Safran & Muran’s Negotiating the Therapeutic Alliance. Each book had great things to say about the process, and I was happy to read them. With that, my literature review was pretty much done and I was ready to write. Except that I didn’t.

Instead, I read some philosophy and literature, and wrote other things. A friend told me about Vanity Fair Magazine’s 2004 essay contest on “The American Character” just a few days before the deadline, and I spent the whole weekend writing something to send in. I don’t expect to win, of course, but I wanted to write something. I wanted to get in the game. I also sent a piece about Sylvia Plath’s relationship with her psychiatrist to Salon.com. It was accepted and will appear by the time you read this. And I recently translated my “Women and Power” piece from the August issue of Psychoanalytic Psychology into an article for the general public. I have submitted it to Ms. and am waiting to hear if they want to buy it. On my summer “vacation” I became a free-lance writer. And I am happy about it.

Even though I still love psychoanalysis, and find my clinical work gratifying and interesting, I want things to change. I firmly believe in the transformational power of psychoanalysis, but I am tired of reading about the same subjects, in the same journals, over and over again. And, yes, I am tired of what I have to say, too. I want to write something different. In spite of having sixty-five pages of quotes from books and journal articles, I’m not sure that I will even review the literature in my new book. Since it is on technique, a part of me wants to simply tell young therapists what I’ve learned about the process. Maybe I’ll mention people’s names and annotate my references in the back of the book. I don’t know for sure how I will work this out.

It’s not that I don’t want to recognize the contributions of others. I just want to be freer in my writing. That’s why I like doing popular writing. I get to tell a story, or write about an idea without constantly interrupting it with quotes and references. Footnotes are great for helping to keep the flow, even when you are clearly attributing a thought to someone else. Just mention a name and pop in a number—you add the rest later. That way your rhythm isn’t disrupted or your voice weakened.

I am also tired of providing reminders that I am not advocating boundary violations when I talk about analysts being freer with their emotions within the treatment. The down side of being innovative and advocating for change, is that you have to constantly situate yourself within existing practice and ethical standards so people don’t think you’ve lost your marbles. Perpetual explanation or over-explanation of one’s position to avoid misunderstanding, unfair criticism, or irresponsible practice by those who read your work, is burdensome.

In addition to being freer in my writing, I want to communicate with the larger world. The world of psychoanalysis is so small, with all the same people writing and presenting all the time, that it sometimes feels claustrophobic. And even within our tiny world, there is much competitiveness and infighting. Too much. I do not delude
myself that the larger world does not have the same dynamics, but as one of my first patients said to me many years ago, “Even though you know that within a few years every situation is going to be like the last, sometimes you just need a change.”

**Robert D. Stolorow, PhD**

**Phenomenology, Hermeneutics, and Contextualism: Summer Reading Notes**

There are three terms that characterize three general and closely interrelated features of my psychoanalytic perspective (Stolorow, Atwood, & Orange, 2002)—phenomenological (its focus is on worlds of emotional experience), hermeneutic (it seeks to illuminate the structures of meaning that organize worlds of experience), and contextual (it grasps experience and its horizons as being constituted, both developmentally and in the psychoanalytic situation, within formative intersubjective systems). Two books I read this summer—Dermot Moran’s richly informative *Introduction to Phenomenology* (2000) and Marie McGinn’s superb *Guidebook to Wittgenstein and the Philosophical Investigations* (1997)—supply some important philosophical background and grounding for these features.

Moran’s *Introduction* traces the evolution of phenomenology through the writings of Brentano, Husserl, Heidegger, Gadamer, Arendt, Levinas, Sartre, Merleau-Ponty, and Derrida. The detailed and systematic elucidations of the contributions of these thinkers are sprinkled with valuable commentary on both the mutual influences and important differences among them. Here I summarize my understanding of the line of development from Brentano through Gadamer, as these are the contributions most relevant to my psychoanalytic perspective.

Although a number of 18th-century philosophers—most notably Kant and Hegel—had used the term *phenomenology* to denote the study of experience or consciousness, it is Husserl who is usually considered its founder. The initial inspiration for Husserl’s phenomenology—his effort to free philosophy from metaphysical presuppositions and to bring it “back to the things themselves” as they appear to consciousness—was neither Kant nor Hegel but Brentano’s “descriptive psychology.” Brentano’s aim was to grasp acts and structures of consciousness as these are self-evidently given in experience. He is perhaps best known for his claim that consciousness has an “intentional” structure, i.e., it is always about something or directed toward an object.

From its beginnings, Husserlian phenomenology, following Brentano, was devoted to rigorous presuppositionless description of structures of consciousness directly given in intuition. Access to such presuppositionless intuition was to be achieved via the method of phenomenological reduction, in which all natural attitudes and prejudices—philosophical, scientific, cultural, everyday—are “bracketed” or suspended, placed under an *epoche*. In the course of its development, Husserlian phenomenology became more avowedly Cartesian and neo-Kantian (transcendental), as Husserl claimed that his proposed reductions brought about an “eidetic seeing” of the pure essences or ideal meanings that make all experience possible. In his later work, no doubt influenced by Heidegger, Husserl’s Cartesianism was tempered some by his focus on temporal horizons, intersubjectivity, and the “life-world” in which experience is embedded.

Heidegger transformed phenomenology by making its primary focus not consciousness but the question of Being: “What does it mean to be?” Thus Heidegger’s was a hermeneutic inquiry, an inquiry about meaning. He noted that a fundamental aspect of human Being is an awareness of Being. Therefore, the inquiry into the meaning of human Being had initially to be phenomenological, seeking to identify the basic categories or modes (the “existentials”) that structure the awareness or experience of Being and make it possible.

Against Husserl’s Cartesianism and neo-Kantian idealism, for Heidegger the Being of human life was always contextually embedded and situated, a “Being-in-the-world.” In Heidegger’s vision, human Being is saturated with the world in which it dwells, just as the inhabited world is drenched in human significance. Having illuminated the basic modes of Being-in-the-world, including the authentic and the inauthentic, Heidegger arrived at what he thought was a supraordinate existential—“care”—as the basic structure of human Being. The concept of care brought to light a primordial engagement with oneself and one’s world—a powerful alternative to Descartes’s isolated, detached, worldless subject.

Having been led to care by his phenomenological analysis, Heidegger proceeded to a hermeneutic inquiry into the meaning of (or necessary condition for) care, which he found to be temporality—to be in time. It is its grounding in time that makes human Being-in-the-world finite and fundamentally historical—a lived “stretching along” between birth and death. Thus it was a unique blending of phenomenology and hermeneutics that enabled Heidegger to find his way to ontology, to a philosophy of Being that is deeply contextual. In harmony with Gadamer and the later Wittgenstein, Heidegger in his later work grasped the contextuality and historicity of Being in terms of language: “Language is the house of Being. In its home man dwells.”

Highly relevant expansions of Heidegger’s contextualist ontology were elaborated by Merleau-Ponty (who emphasized the embodied nature of human Being and the irreducible situatedness of the body and its perceptions in-
the-world) and, especially, Gadamer. A pivotal contribution of Gadamer’s “philosophical hermeneutics” was to make the hermeneutical situation ontological, that is, following Heidegger, to place understanding at the heart of human Being-in-the-world. Understanding, according to Gadamer, is always relating-in-the-world, i.e., “undergoing a situation,” and relating-in-the-world centrally involves understanding. Furthermore, all understanding is mediated by interpretation, and interpretation can only be from a perspective embedded in the historical matrix of the interpreter’s own traditions. Understanding, therefore, is always from a perspective whose horizons are delimited by the historicity of the interpreter’s organizing principles, by the fabric of preconceptions that Gadamer called “prejudice.” There can be no understanding without prejudice, without “effective history.” Thus, against Husserl, pure immaculate perception of the essential structures of subjectivity is, according to Gadamer, impossible. In Gadamer’s view, truth about human experience is achieved not through an inwardly directed eidetic seeing but through dialogue in which each participant is open to the other’s perspective. Such dialogue brings about a “fusion of horizons,” whereby the perspectives of conversation partners are widened and enriched.

The later Wittgenstein’s philosophy of language and of mind, rendered in McGinn’s Guidebook, seems to me to be highly compatible with the evolution of phenomenology just outlined. I am tempted to think of Wittgenstein’s later philosophy as a phenomenology of linguistic practice. Briefly, he offered a series of “grammatical investigations” of linguistic and psychological terms, investigations of how words like “meaning” and “sensation” actually function in our everyday use of language. These grammatical investigations show that the idea that words like “meaning” and “sensation” denote mysterious inner states, processes, or entities hidden within a Cartesian container is a philosophical illusion. The meanings of such words are to be found only in the context of the “language-games” we play with them—linguistic practices, customs, or traditions that are inextricably embedded in our “forms of life” or, in Heidegger’s terms, our forms of Being-in-the-world.

What will I be reading and writing in the forthcoming year? Believe it or not, I am now, in my sunset years, enrolled as a second-year graduate student in philosophy at the University of California at Riverside. My reading will be determined by the seminars I take. So far, my participation in seminars has resulted in a number of short articles on the interface of philosophy and psychoanalysis, three of which will be published soon in Psychoanalytic Psychology. Perhaps at some point there will be enough for a book....

REFERENCES

STUART A. PIZER

This was a summer for grandfathers. I had been invited to write a paper for an issue of Psychoanalytic Inquiry devoted to the theme of recognition. While on a July vacation outside of Bar Harbor, ME—enjoying Acadian hikes and the rare refreshment of sleeping nine hours a night—I crystallized my decision to focus my paper on scenes with my own grandfather, startling moments in my young adult life in which my grandfather rendered for me powerful experiences of recognition. My grandfather, who had dropped out of the sixth grade to help support his family and ran a newsstand in New York City, opened me to the heart of intersubjectivity and helped to shape what has become the core of my psychoanalytic ethos. I will call this paper “TheShock of Recognition,” and welcome the opportunity to honor my grandfather in this way. At the end of July, I was invited by N.I.P., in New York, to join with my wife Barbara in being the plenary speakers for their February 5th, 2005 Symposium on the power of intimacy in relationships inside and outside the consulting room. I will present this paper at that program for an institute whose offices are located a block away from the spot where I sold papers with my grandfather.

And then there was the early August phone conversation with my stepdaughter Andrea, who said that my 5 1/2 year-old grandson, Ben, had reported a dream to her in which he needed my help. So I suggested that Andrea and Ben come to Cambridge to spend the next weekend with us. We mobilized. I ordered from Amazon, overnight, the Disney cartoon of Tarzan and Barbara bought Ben running shoes and exercise shorts. When they arrived, I took Ben to the basement exercise room to spend 45-minutes showing him lots of ways a guy can get strong. Then we sat in the study and watched Tarzan (we guys were served lunch at the TV by grandma). When we moved on to The Lion King, Ben sat on my lap for the scary parts. I am fortunate to be able to share with my grandson the legacy of my grandfather.

I have begun to receive commentaries written by readers of my paper “Impasse Recollected in Tranquility: Love, Dissociation, and Discipline in the Analytic Process,” published in Psychoanalytic Dialogues in the June issue, and I’m incubating my replies. And Barbara and I enjoyed
odd as it may sound, although we go to Mount Desert Island in Maine every summer for the wrap-around glass windowed house we rent with its great views of Frenchman’s Bay on one side and Cadillac Mountain on the other, for the hiking and climbing and swimming, and the clean rest rooms in Acadia National Park, for all of that I have to say I spend some of my happiest times all month standing in front of the refrigerator.

At first it happened quite by accident in our second year up there, but now I must admit my icebox occupation has become a habit. The misfortune occurred on the morning we wanted to set out on a particularly exciting climb. When I stood up to go, my back buckled and—would you believe—I felt my feet on fire! Something in my spine and even worse-- I learned I had a thing called Plantar Fasciitis.

You know how that goes. Once you contract a name like that in your feet, you hear from a lot of other people who’ve got it or had it too at one time or another. They tell you all about how painful it is. Bummer. Stuart and I had mightily looked forward to that hike, and I was so embarrassed that I insisted he should go without me. He didn’t in the least bit want to, but he knows me well enough to realize that I’d feel even worse if he stayed home.

Soon after I heard the car go down the drive, I blew my nose and hobbled over to the refrigerator. Of course I knew what I would find. A random scatter of magnetic rectangles, each imprinted with a different word or word fragment, was stuck to the door, as if once carelessly tossed there by some absent muse. Our analyst friend and landlord might have faced that muse before he left the house to us. He had placed four words together in a challenging phrase: “Poetry is wild work.”

And so I began to play. I stood there longer than I should on that day, fiddling with the words. And when back and feet could bear no more, I grabbed a pen and paper and sat down. Refreshed, I wrote, to my great surprise, about what happened at the fridge. A day that had begun in disappointment, grief, and self-reproach, ended in pleasure that has now become a regular summer recreation. It was long after lunch before Stuart came home from his hike and I felt happy to show him all that had transpired while he was away. Here is how I described my experience:

**Musings on Magnetic Poetry**
**The Liabilities That Liberate**

With excitement and anticipation
I approach the white field of potential
Scattered with a tumult of words—
Evocative patterns of image and idea--
Inviting me to verse.

But alas, too soon I am distracted
From my muse because a word
I knew I’d seen as clear as day
Has disappeared in camouflage of blur!
Had I been dreaming “angel” merely
Or was she teasing underneath
Three lettuce leaves, layered in between
The “grass” and “green” and “mist”?
Seek becomes search becomes re-search
And I grow weary . . .

This seemingly ample
Vocabulary spread seems sorely lacking!
How can it be that it has
Plenty of “this” without a single “that”? I see “groan” and “moan,”
“Dance” (I think) and “sing”;
Even “symphony,” and yet
For all that music not a single “sound!”
We have “up” and maybe “down,”
“Above” and “below,” I think,
*So who in hell would go and steal “around”!!*

Look how I can “come” to something
But never “arrive.”
And for all of the “flowers”
That bloom in the “spring,”
I must letter the tiles
If ever I wish
To take myself “In-s-I-d-e.”

Well then, so be it . . .
But you know, eventually we find
That these not logical constraints
Do jog the mind toward taking
Odd but somehow fitting liberties
To make more real the thing we mean
With “MAKE SHIFTS” that soon become more apt.
How weird this interaction
Of the spirit with the universe.
One wonders what in life
Might this refrigerator act rehearse?
A truth, perhaps, we would do well
To take to heart,
That making do creatively
With what we have
Is sometimes poetry...
And always art.

Now four summers later I discover that after my July’s in Maine, besides having fun at the refrigerator, the word play has provided me an unintentional discipline that serves me well when I sit with my patients or write “professional” papers. I feel more responsive to whatever is presented in the clinical moment. And random thoughts seem to word into feelings or ideas more easily. But back to this last July. Here’s a brief example- of a finding on the refrigerator door:

What dying next
How can we stop the lie
Must we give power to
This army of men
Who rob eternity by
Crush-ing the weak-est of her brothers
Smearing languid flowers bleeding
Juice from tiny leaves
Only to cook up
A bush pie

(And my word count tells me I have room for another little fragment)

Here beneath one tree
A thousand down-y
Petal webs
As delicate as sleep

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Division of Psychoanalysis (39)
American Psychological Association
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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.

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THE UNMAKING OF AN ACADEMIC PSYCHOLOGIST  JONATHAN SHEDLER, PHD

When I look back, there is one event that stands out as decisive in my decision to become a psychologist. It is personal and embarrassing to tell, but the vital choices that shape lives are not, after all, dispassionate ones. I must tell it as it happened or this paper will be yet another empty academic exercise.

I was in my sophomore year in college and, I suppose, rather impressionable and immature for my age. I was friendly with a crusty old psychology professor who had a southern accent, who seemed larger than life. I thought he was a mind reader. I always sought him out, eagerly awaiting such tidbits of insight as he might bestow.

I was also in love, my first love. My love and I relied on condoms for birth control, and one day we made love and the condom broke. After that she missed her period and we were sure she was pregnant. They didn’t have home pregnancy tests then, so she had to go to the doctor and then wait several days for the results. The night before she got the results, she had a dream.

The two of us were in a car, and we were driving over bridges, crossing lakes and rivers and streams. Then the scene changed, and we were in a shop where I was trying on hats, one after another. Then some people were commenting on how well her perm had held up. She did, in reality, wear her hair permed.

I told the dream to my southern professor because I was interested in dreams. He didn’t know it was my girlfriend’s dream, or even that it was a woman’s dream. He certainly did not know about the broken condom and our fears about pregnancy. I got as far as the part about changing hats when he interrupted. “Mistuh Shedluh,” he drawled. “Water represents birth. Crossing water represents a wish to avoid birth, that is, to avoid pregnancy. Covering the head with a hat means covering the head of the penis with a condom. The dream expresses your girlfriend’s wish to avoid pregnancy by having you use a condom properly.” He went on to lecture me in a paternalistic way on the use of condoms, while I blushed to my toes.

The impact could not have been greater had the professor’s words been heralded by celestial trumpets. At that moment I knew that this Freudian stuff—at least a good bit of it—was real and true. Naturally, my view of the professor as a mind reader was confirmed for all time. And I, for my part, decided that if there were people in the world who understood such things, I had to be one of them.

Never again would I believe that dreams had no meaning, or that they were random neural impulses, or any number of other anti-psychological theories I have since encountered, all wrapped smugly in the mantel of “science.”

The poets were right and the “scientists” wrong: the dreams of men and women, sleeping and waking, were rich tapestries of meaning. They could be explored and understood.

Some years later I was a doctoral student and was teaching a college course. A student told me a dream. She and her boyfriend were standing beneath a waterfall. The water fell all around them but somehow they didn’t get wet. I smiled to myself and said, “you’re afraid you may be pregnant.” Her lower jaw nearly hit the floor.

Whenever I tell the last part of that story, I think of a saying: “There are only two tragedies in life, not getting what you want, and getting what you want.” This paper is about the second kind of tragedy.

I did not come to be a psychologist by the usual route. I had always been interested in psychology and I read “pop psych” books as a child. As a twelve-year-old I tried (unsuccessfully) to hypnotize my friends, attempted dream interpretation, and administered “psychological” tests I found in magazines. But in college I did not major in psychology and never seriously considered becoming a psychologist. Like many laymen, I did not understand the difference between psychologists, psychiatrists, and psychoanalysts. I thought a psychologist was a kind of second-rate psychiatrist and I had no intention of becoming a second-rate anything. I had no interest in medicine (and blood makes me queasy) so I ruled out psychiatry too. I hadn’t a clue what a psychoanalyst was. So I just gave up on the whole thing and studied economics instead.

After college, I went to Columbia University to take the psychology courses I needed to apply to graduate school. I didn’t know what I was doing. I didn’t know what courses to take. I didn’t know why there were so many different sub-fields in psychology (experimental, social, personality, clinical, biological, developmental, cognitive, organizational, etc.). I just didn’t know.

So I got where I am by a roundabout path. I have since likened it to trying get to Broadway, starting out in California, and having no directions other than the knowledge that one should go east.

At Columbia, I met a professor by chance—I needed his signature to enroll in a course—who asked me to work as his research assistant. I had explained my situation and asked for advice about the courses I should take.

“You should take statistics.
“I already have a good background in statistics.
“What do you mean good?
“I studied hypothesis testing and regression. I also
have experience with computers.

The professor looked at me as if for the first time.

“Are you smart?”

“I think so.”

“Listen, all these courses are bullshit. Come work as my research assistant. That’s your best bet.”

I signed on with the jubilant feeling that I was now on my way and that my life might go as I wished after all. For the rest of the week a popular song kept running through my head, with the lyrics, “This is it, this is your miracle!”

I soon found myself sitting in front of a computer, writing computer programs for statistical data analysis, and programs to run reaction time experiments. The work was interesting in the way playing chess or assembling a picture puzzle might be interesting, but I did not know what it had do with psychology. I assumed I could not appreciate its relevance because of my inadequate background, so I decided to keep my mouth shut. (Better to be silent and thought a fool...).

I also sat in on the professor’s introductory course, where I learned about the basilar membrane of the human ear, and about Ebbinghouse’s memory for nonsense syllables, and something about the retina of the horseshoe crab, and other such things. One day another student approached the professor and said something like, “this is all well and good, but I don’t see what this has to do with psychology.” I do not recall the details of the professor’s response, but the gist was that she might reflect on whether she really belonged at a university like Columbia. After that I was certain to keep my mouth shut.

I suppose if you are in California, then Broadway is east. But once you get to New York, Broadway might be east, north, southwest, or whatever, depending on where you happen to end up. I had aimed for Broadway and ended up—I didn’t know where, maybe Brooklyn. But I had not yet realized this.

There were certainly enough clues that I hadn’t gotten where I thought I was going. Early on, I was “running subjects” for one of my professor’s reaction time experiments. The “subjects” sat alone in a large room in front of a video screen, and they were supposed to press a button whenever a certain light flickered on the screen. I sat in an adjacent room where I could watch them on my video screen. I watched my video screen, watching them watching their video screens.

Ultimately I noticed something very odd. All these people entered the room the same way, and they all sat the same way, with their shoulders scrunched up and their hands folded tightly in their laps. They all had odd, wide-eyed, tight-lipped expressions on their faces. There was something fascinating going on here, something about the room, or the experiment, or the experimenter, or something, that powerfully controlled behavior and made each of these people sit, and move, and hold themselves in exactly the same way (I now recognize that they were scared). I said to my professor, “look what’s going on here, all these people are sitting exactly alike”—inviting him to share his observations and insights about this, to explain what might be causing this, to bestow his presumed psychological wisdom on me. He said “good” and went about his business.

I was baffled by this response but now I understand it. It was not a snub. He simply had no interest whatever in the emotional (dare I say psychological?) reactions of these people. He did not notice them, did not even grasp what was that I was asking. This was an experiment in cognitive psychology, and these people were numbers in a data file. If they all behaved the same way, it was excellent: so much less error variance in the statistical data analyses.

There were other clues I had traveled east but gotten nowhere near Broadway. Not only had none of my professors at Columbia ever seen an actual patient, but not one had any professional interest in dreams, or human passions, or vital life choices, or love, or hate, or emotional distress, or insanity, or psychological conflict... in short, in anything that
most people would consider psychologically interesting. Somehow they conveyed a subtle disdain for these things. Because this disdain was expressed subtly, in indirect and covert ways, it was difficult to question let alone confront. In my eagerness, in my enthusiasm, in my wish to identify with these “mentors” I began to echo their attitudes. I had begun to betray myself.

Ultimately I took a course in personality theory, and we did “cover” Freud. We even read some Freud in the original. The professor had never, of course, practiced psychoanalytic psychotherapy, or undergone psychoanalysis herself, or read any contemporary psychoanalytic writings, or had ever (I am quite sure) had a meaningful conversation with a practicing psychoanalyst. She got most of it wrong and made all of it sound absurd. How could I not be influenced by this? She was the professor and I the student. She bore the symbols of knowledge and scholarship and authority. She carried the imprimatur of the university, of Columbia University. Despite her errors, despite her sins of omission and commission, this professor was the closest I had yet come to the kind of psychology my old professor with the southern drawl had known about. This professor called herself an “experimental cognitive social psychologist” and I learned to mouth the words and say that I too wanted to be this.

Things happened every day that baffled me. A graduate student told me about a study he was conducting, I don’t recall about what, other than that it involved telephoning people and asking them to do something. I didn’t see how the study would yield any particular insight or wisdom regardless of the outcome. I assumed (yet again) that I had missed something, that I just didn’t have the background or knowledge to appreciate the study’s relevance and importance. I asked why he was conducting the study and he said “to get a publication.” He said this simply and matter-of-factly, as though it were self-evident.

I had not yet grasped that studies are the currency of academe and that a publication is somehow valuable in its own right, not by virtue of its content, or the wisdom it contains, or whether it answers a question that anyone actually cares about, or leads to a deeper understanding of the human spirit, but merely by virtue of its existence. It doesn’t matter whether the study yields wisdom, or merely contributes to a growing glut of unintegrated and unintegratable “findings” that collectively lead to nothing. The mere act of publishing is somehow an intrinsic good.

For what it’s worth, this theme was echoed later when I got to graduate school, where I heard the term “scoring pubs” (publications), kind of like scoring baskets in a basketball game. It was said that one should score three pubs before leaving graduate school to have a chance at a good academic job. I also heard the acronym LPU, for “Least Public-...

In return for writing computer programs, running subjects, chauffeuring the professor’s children, and not asking stupid questions like what this all had to do with psychology, my Columbia professor kept his word and helped me get into graduate school. I might not have gotten in without him, for admissions committees did not know what to make of me. I had been an economics major, then did research in experimental cognitive psychology, and was now applying to graduate programs in personality (still moving east...). My “statement of purpose” was probably vague and diffuse. But the professor called an old colleague at the University of Michigan and assured him that I truly was interested in personality and motivation and “things like that.” On the basis of this telephone call my application folder was moved from the “reject” to the “accept” pile. The song about miracles was no longer running through my head. Instead I was thinking about a story I once read, about someone who sold his soul to the devil.

I continued groping my way east.

My Michigan professors placed a great premium on research. I confess I was a bit bewildered about what purpose all the research served. It had nothing to do with the practice of psychotherapy, that was clear, but it seemed to have no relevance at all. What was the point of it all? Here was an entire profession that did nothing of practical import. Worse, it was a profession devoted to the study of things that interested nobody except other academic psychologists. It was a self-contained system, with everyone reviewing each other’s articles, publishing in each other’s journals, approving each other’s funding requests, hiring each other’s students, granting each other tenure, responding and counter-responding and counter-counterresponding to each other’s publications. And all the while the field spiraled further and further away from anything most people would consider meaningful. Why shouldn’t our psychology have some application? It seemed to me we should be able to do something, not just study in perpetuity.

These concerns were not quite so elaborated then, but I do remember wondering, in the presence of one of my professors, whether our collective research efforts might be better directed toward questions of practical importance. The professor was John Atkinson and his response was brilliant. Unfortunately I have come to believe it is wrong. He said, “Why do you think scientific research should have an application?
Galileo spent years rolling steel balls down inclined planes. That work had no application, but it was important and now we all know about Galileo. The fellow working on avalanche prevention in the Alps that year? Never heard of him.”

Atkinson’s argument seemed unanswerable. I was persuaded, and for a time felt better. We were engaged in “pure research,” “basic research,” and this was a most worthwhile pursuit. We were Scientists. But in my heart I was not convinced. When all was said and done, most of the published research in psychology still seemed pointless.

It was a good while before I knew how to respond to the “Galileo” argument. I now believe that invoking Galileo was hubris. True, Galileo was involved in “basic research.” But history has shown that basic research in the physical sciences does indeed lead to applications, and this has been so whether or not the original researchers could foresee those applications. The physical sciences can lay claim to the value of “pure research” because history attests to its value, and because they have earned the right to do so. In contrast, more than half a century of “basic research” in psychology has led to relatively little. Galileo transformed the intellectual world of his time. So, for that matter, did Freud. Academic psychology has contributed nothing remotely comparable.

If I seem bitter, it is for this reason. No one who is honest with himself enters psychology primarily to “advance knowledge” or “help humanity” or any such lofty thing. We go in because we want to know ourselves. And this is tricky business, because we all have a wish for greater self-knowledge, for emotional growth, for what a psychoanalyst would call “working through.” But these things involve pain, involve discovering things about ourselves that we may find distressing. Opposing the wish to know is a wish not to know, a resistance to knowing, a longing for the complacent security of what is comfortable and familiar. Working through and resistance—these are the opposing forces at work in psychotherapy, and in life. And young people enter the field of psychology, shyly and haltingly seeking to advance the process of working through, to expand their range of human feeling, to understand more, to experience more, to be freer and more autonomous. They wish to know themselves. And they wish not to know.

Academic psychology too often takes the side of the resistance. It gives them an endless supply of other things with which to occupy themselves, to distract them from the questions that drew them to psychology in the first place. It tells them that the whispers from their souls, whispers of deeper truths, are irrelevant and perhaps not even there. It provides them with elaborate rationalizations (called “theories” or “models” or “paradigms”) to assure them that what is important is not, and what is not important is. Is our research in the service of knowing ourselves? Or is it in the service of not knowing?

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**The Psychology Of Race/Ethnicity, Gender, Sexual Orientation And Disability: What Works, With Whom And Under What Circumstances?**

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For the past five years, along with Lisa Damour, a candidate at the Hanna Perkins Center in Cleveland, I have been immersed in writing an undergraduate abnormal psychology textbook that has just been published (*Abnormal Psychology*, New York: John Wiley & Sons, 2004). It has been an engrossing project, by turns exhilarating and exasperating, gratifying and grueling, but never dull. Along the way, Lisa and I have learned some striking lessons about the place of psychoanalytic thinking in undergraduate education. Considering the well-founded current concern about the near erasure of meaningful psychoanalytic content in psychology departments (McWilliams, 2004), I thought it would be useful to report on our experience. Offering undergraduates—literally millions of whom take psychology courses every year—a positive image of psychoanalytic thinking may be a crucial part of efforts to re-establish psychoanalysis to a more respected position in the intellectual and mental health communities in the U.S.

I began teaching undergraduates at the University of Michigan shortly after receiving my Ph.D. there in 1988. When I started looking for a textbook for my Abnormal Psychology course, I was appalled. The coverage of psychoanalytic theory and practice in the leading textbooks at the time was at best inadequate and at worst explicitly disparaging, as noted in Bornstein’s review of several of these textbooks in *Psychoanalytic Psychology* (Bornstein, 1988). In my own classes, it was relatively easy to include rich psychoanalytic and clinical content through articles in a photocopied coursepack I compiled, but I shuddered to think that undergraduates were being taught that psychoanalysis was a historical curiosity, even an abomination! (Many of the leading textbooks, it turns out, are written by either non-practicing academic clinical psychologists or even by non-clinical psychologists, and certainly not by analysts.) Furthermore, most of the textbooks were so focused on the DSM-IV and the medical model of psychopathology that they seemed to leave out most of what was interesting about the field. Certainly my students seemed to think so; I frequently heard them complain “this topic is so interesting, why is the textbook so dull?” As a result, I began thinking about the possibility of writing an alternative, livelier, and psychoanalysis-friendly textbook.

My first approach was very discouraging. In talking to editors at the major publishers about my idea (this was in the early 1990s), I was told in no uncertain terms that while they sympathized with my concern there was no market for a psychoanalytic undergraduate textbook. In fact, the editors explained that they were used to hearing complaints from psychology faculty around the country about psychoanalytic content in textbooks, and, understandably, the editors were almost phobic that anything psychodynamic was the kiss of death in the marketplace. I wasn’t totally surprised by this, as I had heard similar stories from my friend Drew Westen about his introductory psychology textbook. While his book had been quite successful, it was regarded as “too psychoanalytic” in some quarters and Drew had been asked to tone it down.

After absorbing this depressing news, I briefly toyed with the idea of trying to publish an edited “reader” of case studies and classic articles that my students had liked—something that might meet my goals in place of, or as a supplement to, a traditional textbook. Again, editors were sympathetic, but upon researching the cost of permissions discovered that this was economically not feasible.

It took another two years before I finally hit on an idea that worked. Rather than a book that was explicitly psychoanalytic, I began envisioning a textbook that would focus on the fascinating and enduring issues and controversies in the field of abnormal psychology—issues such as the continuum between normal and abnormal behavior and the connection between mind and body—that my students found so interesting. I thought that such a focus might provide an alternative to the ahistorical, DSM/medical-model emphasis of the existing texts. And, I thought, such a book would provide an approach to the field consistent with psychoanalytic thinking, and in which psychodynamic content could be respectfully included. By this point, I had brought Lisa on board. She, too, had been teaching Abnormal Psychology at the University of Michigan and was frustrated with the textbook options. (In addition, she already had a book to her credit—*First Day to Final Grade: A Graduate Student’s Guide to Teaching*, with Anne Curzan—so she knew what she was getting into!) We pitched this idea, concretized in a prospectus for a book called *Abnormal Psychology: The Enduring Issues*, to several publishers.

To our delight, this formula worked. Not only did the concept appeal to editors, but also the faculty reviewers of the prospectus, commissioned by the publishers, were highly enthusiastic. We received many comments from faculty around the country along the lines of “it’s about time somebody brought back what’s interesting in this field and deemphasized the DSM-IV!” Several publishing houses were so taken with the reviews that we enjoyed a mini-bidding war before choosing John Wiley & Sons. We were thrilled with the confirmation that there was, indeed, a hunger for something different. Little did we know what lay ahead….
Having signed a contract, we began the grueling writing process in January 2000. Each time we finished a group of chapters, Wiley would send them out for review by psychology faculty who teach Abnormal Psychology. This was an eye-opening experience. While we had received a favorable response to our overall vision for the book from reviewers, now they were reviewing chapters that included specific psychoanalytic content. A significant number of reviewers were entirely hostile to any such content, dismissing it as totally inappropriate for inclusion in a contemporary book! A larger group of reviewers seemed to appreciate our clinical content until we used specifically psychoanalytic terms to summarize what we had been saying, at which point they balked. This reaction was familiar from our teaching. Both Lisa and I had repeatedly heard from students: “you can’t be Freudian or psychoanalytic; your lectures are interesting, and Professor X told us that psychoanalysis is nonsense!”

What we began to realize after several rounds of such reviews was sobering, if not surprising. Among the vast majority of academic clinical psychologists today—those who are shaping the interests and attitudes of the next generation—psychoanalytic ideas are either openly derided or co-opted and given new names within other theoretical perspectives without proper credit. For example, research on the therapeutic alliance is thriving across theoretical perspectives, but the psychoanalytic origins and aspects of the concept of the alliance are rarely acknowledged and appreciated.

We adopted a two-fold approach to this problem in our textbook. First, in keeping with our original plan, we organized the book around six “core concepts” in Abnormal Psychology that highlight the interesting complexities and controversies in the field instead of a medical model/DSM-IV/empiricist emphasis. (The six core concepts we chose are: the continuum between normal and abnormal behavior; the importance of context in defining abnormality; cultural and historical relativism in defining and classifying abnormality; the advantages and limitations of diagnosis; the connection between mind and body; and the principle of multiple causality.) Secondly, we chose a “components/integrative approach to the theoretical diversity in clinical psychology. In other words, we present the major theoretical models in the field (psychoanalytic, behavioral, cognitive, etc.) as different lenses through which to view psychopathology—lenses that can complement each other and that often overlap. This approach allowed us to talk about the ways in which newer theories and clinical approaches (such as CBT) have their own terms for describing the same phenomena that have been conceptualized previously within other theories, including psychoanalytic theory. We could also then describe prominently and in detail the psychoanalytic perspective on psychopathology and treatment, showing what it uniquely contributes, where it overlaps with other approaches, and how it can complement other perspectives.

As we had hoped, this approach seemed to solve our problem with reviewers. By the time we were able to refine this vision and finish the book, reviewers were once again enthusiastic about it, and I’m pleased to report that sales of the book are off to an encouraging start. What is most gratifying to us is that many of the positive reviews and early adoptions have come from professors who have in the past been unfriendly to psychoanalysis and used cognitive-behaviorally oriented textbooks. It’s probably going too far to describe our book as “stealth psychoanalysis,” but we do think that it conveys an appreciation of the indispensable role of psychoanalytic thinking in clinical psychology, partly by flying under the jargon-focused radar of the current anti-psychoanalytic zeitgeist. We hope that the book can serve as a partial antidote to the Freud-bashing that has become all-too-common in undergraduate psychology courses, and encourage greater respect for and interest in psychoanalysis in the next generation of students.

Of course, the last chapter of this story has yet to be written. We do not yet know how our book will fare. But whatever the outcome, we feel we have learned some lessons that may be important in the struggle for psychoanalysis to regain its rightful role in the marketplace of ideas. The bad news is that the current situation in Departments of Psychology is dire for psychoanalysis. The good news is that psychoanalytic thinking makes sense to undergraduates and they find it interesting; only the label “psychoanalytic” turns them off. So the battle must be waged on two fronts: we should lead by showing students how we think because they find it compelling, and we should follow by explaining that what they have heard from us is psychoanalytic, contrary to the disparaging stereotypes they have been taught. Most of all, psychoanalytic psychologists need to be finding ways to spread the word more effectively about what we do. In increasing numbers, we need to be venturing out of our consulting rooms and back into the universities to shape the courses and textbooks that are influencing the attitudes of the next generation.

**References**


James Hansell is on the faculty of the University of Michigan Department of Psychology and the University of Michigan Psychological Clinic. He is also on the faculty of the Michigan Psychoanalytic Institute, where he received his psychoanalytic training, and in private practice in Ann Arbor.
APA SPONSORS FIRST PSYCHOANALYTIC CONTINUING EDUCATION WORKSHOP

Spyros D. Orfanos, PhD, ABPP

The Office of Continuing Education in Psychology of APA seeks in-depth workshops to run at the annual summer convention. In formal and informal ways our Division has been trying to get the word out on contemporary psychoanalysis for quite some time. Thus, it seemed natural to organize a workshop officially sponsored by APA that would allow some of the innovative and creative ideas and practices in psychoanalytic psychology to be presented to psychologists not particularly immersed in contemporary ways. In this context, Orfanos began in the fall of 2003 to organize a four-hour workshop proposal for the 2004 Hawaii convention of this past summer. The workshop was titled “Advances in Psychoanalytic Psychology: Key Concepts, Research, and Applications.” The workshop was designed to highlight the myriad of changes that have revolutionized the field in the last 20 years. The proposal required all sorts of documentation and attention to detail and needed to meet a range of criteria and predicted learning outcomes. The workshop was designed by three faculty, Nancy McWilliams of Rutgers University, Drew Westen of Emory University, and Spyros D. Orfanos of New York University. Four educational aims were spelled out for workshop participants:

1. Acquire and update recent developments in psychoanalytic theory and technique.
2. Understand the subtle and overt differences between contemporary psychoanalytic psychology and what is often thought of as “classical” psychoanalysis.
3. Summarize and interpret the research support for psychoanalytic psychology.
4. Identify and discuss implications of advances for (a) diverse populations, (b) diverse modalities, and (c) integration efforts with other models of psychotherapy.

Apparently there is much competition for the few continuing education slots officially sponsored by APA. Our new and innovative proposal was selected and thus we came to offer the workshop on July 28, 2004. While APA Hawaii workshops were down in attendance, twenty registrants attended our course. The group consisted of behavioral and cognitive behavioral psychologists, graduate students, seasoned psychoanalysts and a psychiatry resident.

We had decided that rather than present in didactic form for four hours we would mainly focus on clinical material as a way to enliven the educational process. McWilliams, Westen and I agreed to have one of us present a detailed case that was new and have the other two faculty members discuss the case without any prior knowledge about it. The discussants would work hard and on their feet to bring to bear on the spontaneous discussion all the contemporary ideas they could. McWilliams was the case presenter.

Orfanos began the workshop with a 30-minute introduction to the 100 year history of ideas in psychoanalysis. Westen followed with a brief discussion of case formulation from a contemporary framework and a discussion about research. As indicated above, the heart of the workshop was the case presentation and the discussions that followed it. McWilliams presented the case of a professionally successful but deeply schizoid woman with significant depression and profound difficulties being close to others. McWilliams described the evolution of her efforts to understand this client’s internal life, which was suffused by pain and terror so severe as to render her both speechless in treatment and hopeless about any possibility of change. The therapy (once a week and face to face) came to involve interactions that could be characterized as unorthodox or “wild,” including the therapist’s reading to the client. The eventual achievement of authentic connection between patient and therapist required the therapist’s familiarity with the internal world of individuals with schizoid dynamics, a familiarity reflecting both general psychoanalytic knowledge and personal immersion, via analysis, in the therapist’s own schizoid areas. McWilliams argued that despite its unconventionality, the treatment was quintessentially psychoanalytic, both because psychoanalysis made adequate understanding possible and because the exploration of meaning was the central activity of the participants.

Westen, Orfanos and the workshop participants expressed their appreciation for McWilliams’ evocative and heart wrenching presentation. Westen began his elegant and at times humorous discussion by bringing to bear clinical research on the schizoid personality. He went on to address the matter of psychodynamic formulation from the perspective of conflict formation, ego mastery and mental representations. Orfanos commented on McWilliams spontaneous personal expression during the treatment and how this related to the patient’s need for recognition and affirmation. He also addressed issues of enactment in the context of seduction and abandonment. He suggested that the “success” of the case was due to the fact that McWilliams and the women she worked with co-constructed an experience that allowed for a deep and reparative emotional connection. The large group discussion demonstrated much enthusiasm and first-rate curiosity. The questions ranged from
GENDER UNBOUND: INTO THE VOID

For the Section III (Women, Gender and Psychoanalysis) Panel at APA in Honolulu, Ellen Toronto presented a patient she referred to as “T,” omitting all references to the person’s gender. The material was drawn from a book with the same tentative title as the panel discussion. The book, scheduled for publication by Brunner-Routledge in Spring 2005, includes a compilation of articles relevant to the case material and authored by members of Section III. Other members of the panel were Nancy McWilliams, Maurine Kelly, Gwen Gerber, and Judy Logue.

I. THOUGHTS ON SOME OF THE THEORETICAL, CONCEPTUAL, AND PHILOSOPHICAL ISSUES

Panel members and audience participants reported both intellectual and emotional responses to Toronto’s case. Many reported an inclination to try to guess the gender of the person. The patient “T” provided an interesting exercise in applying the postmodern attempt to understand gender as located between social construction and the material reality of gendered experience—what Muriel Dimen construes as “the third” in Sexuality, Intimacy, Power.

In responding to the case, Nancy McWilliams emphasized that we require a grieving process when we acknowledge the physiology and psychology we do not have: “In addition to the awareness of such painful realities, I have missed an emphasis on the positive in the past 35 years in psychoanalysis. Especially in the history of psychoanalytic commentary about women’s psychology, lack and loss have been recurring themes. In my own training in the 1970s, sometimes the stress on what seemed like a ‘dirty’ or ‘bad id’ got a bit much for me.

“Back then I used to wonder why we did not talk about what we women have, rather than what we lack. I used to complain that we should also talk about the vulva and vagina going around the penis, not just the penis going into the vagina. My fight against such phallocentrism got me teased that I cared ‘more about the donut than the hole.

“After the grieving process, I hope we can also celebrate the nature of what we do have (whatever our sense of gender and sexual orientation) … and its power, excitement, beauty, and complexity, even if, at times, it becomes scary, overwhelming, burdensome, and resistant to intellectual verbal expression.

“Although I regard the contemporary relational emphasis on the co-constructed space of the analyst/therapist and patient/analysand as a conceptual leap into a more realistic depiction of the therapeutic relationship, I also miss what we have left behind. This attitude may reflect my aging and concomitant losses, as well as some achievements and gains in wisdom. I feel it is critical to retain in psychoanalytic thinking some emphasis on sensuality, sexuality, and common sense.”

II. THE IDEAS OF DRS. GERBER, McWILLIAMS, AND TORONTO

Ellen Toronto wrote evocatively about “T,” describing the patient’s uncanny ability to “get into her head,” and the interplay between the beholder and the beheld. Toronto also noted that people need and want to know gender, an observation with which everyone on the panel and in the audience seemed to agree, whatever their overall commitment to political correctness, equality of treatment and repudiation of sexism.

Toronto hypothesized that wanting to know gender originated as a life or death imperative, commenting that we frequently guess and “make up stuff” in order to try to understand “the other.” In the process she made a thoughtful critique of the position that gender is an illusion.

Finally, she noted the unfairness in some current intellectual and clinical developments. Just as women’s experience is given a voice, we find a new focus to make it irrelevant. The pendulum never stops swinging.

In addition to the commentary about grief, McWilliams elaborated on the theme that children are not postmodern, and that in the residue of childhood attitudes that constitute the unconscious, human beings tend to be both binary and categorical. She explored this theme, elaborating on the implications for women and sexual minorities of cultures and subcultures that are more or less egalitarian and flexible with respect to gender.
Gwen Gerber began by describing a group of people at a Guggenheim Museum exhibit involving gender-ambiguous subjects who were eagerly attempting to determine gender in the art. She went on to voice her impression that “T” was a woman. She believed this because T’s spouse had been described as coming home with a surprise gift of rabbits, and she could not imagine a woman in her right mind adding this to the responsibilities of children and a house. A man in the audience commented that he believed the description of “T” as a person “dressed in a mis-matched and well-used assortment of clothing” meant that “T” had to be a man.

Gerber presented results of her research at John Jay College on policemen and policewomen working in pairs. She found that the expression of putatively feminine and masculine traits (such as communion and agency) has far more to do with status differences than with gender. She pointed out that “T” presented as gender-neutral, with difficulty in both the stereotypical masculine traits of goal-oriented behavior, and the stereotypical feminine traits of warmth, relatedness and self-protective behaviors, and she speculated that “T” may have an undifferentiated personality type and be “gender-free” in more ways than one.

In this context I noted some findings about status in recent research on women pilots sponsored by an organization called “Women Take Flight.”Reportedly, women can be motivated to fly airplanes when the training is associated with increasing self esteem and risk-taking. Further, there is a difference between low-status and high-status groups (as defined by education and income) in terms of the types of changes in their lives following the training.

III. Personal Commentary

Integrating stereotypical masculine, feminine, and in-between traits has become easier as I have edged into Erikson’s last stage and phase of life. There is less difficulty with power, thrust, and movement. For example, as a pilot I used to hesitate when pushing the throttle of an airplane, or get tearful when learning to shoot a revolver. This change feels developmental, as well as a result of formal and self analysis. Other colleagues report similar responses.

My own central concerns have shifted from gender and career achievement to life, incapacitation, and death. Health, sensuality, and family were always (and remain) priorities. Observing my patients in their 30s and 40s reminds me how much some things have shifted and some remain the same. “T” is not much older than my own children. S/he elicits a strong feeling of compassion for his/her struggles, as well as relief that a number of my own that may have been similar are no more.

Finally, I mourn the loss of a focus on sensual-

STEPHEN A. MITCHELL GRADUATE STUDENT AWARD

JOSEPH REPPEN, PHD, ABPP

For the second year, there were no papers judged acceptable for the Stephen A. Mitchell Award, although there were six submissions for the award. Two papers were deemed worthy of honorable mention. They are Karen Kaufman, CSW “The Experience of Treatment Failure,” and Vaia Tsolas, MA “The Other of the Body and the Language of the Margins.” Please encourage graduate students to continue to submit papers for this important Award. The deadline for submission is July 1, 2005. Further details are listed below.

STEPHEN A. MITCHELL AWARD: Papers are invited for the fourth 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

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In *History Beyond Trauma* Françoise Davoine and Jean-Max Gaudillière have provided the social sciences, and in particular psychoanalysis, with a profound and original illumination of the theory and treatment of psychosis. Over the course of this ambitious, encyclopedic volume, the authors summarize and integrate thirty years of their collaborative clinical and theoretical investigation of psychotic phenomena. This is an essential book for all interested in the psychoanalytic understanding of madness and trauma.

Drawing upon their early studies in philosophy and classics, subsequent academic experience as professors of sociology, and eventual psychoanalytic training in the school of Lacan, Davoine and Gaudillière approach madness not as a symptom, pathology or structure in the DSM, but rather as a *place*. This is the place where the symbolic order, which guarantees an individual’s connection to language, history and social relations, has ruptured, exploded or disappeared. Consequently, one of the most original and important insights to be found in this work is that the psychotic is engaged in a form of research investigation into the nature and history of this place; he or she is a seeker.

In the clinical situation, the therapist is second in command to the patient—the Principal Investigator—who desperately attempts to articulate an unspeakable dimension of trauma and catastrophe, which has come to be foreclosed in individual or social history. Within this context, Davoine and Gaudillière draw upon numerous other powerful traditions to inform this non-reductionistic formulation of the psychotic experience. From their many years of contact with clinicians associated with the Austen Riggs Center they have assimilated the work of Sullivan, Fromm-Reichman, Searles and Otto Will. They also have been significantly influenced by the texts of Winnicott, Bion and Gaetano Benedetti. Within *History Beyond Trauma* the authors weave multiple strands of the many French and non-French masters from whom they have learned; yet, as they themselves are quick to point out, their most profound teachers have been those psychotic patients with whom they have engaged in psychoanalytic exploration over the years.

As Gerard Fromm notes in his forward to this volume, *History Beyond Trauma* is written in a literary, philosophical, non-linear and somewhat elliptical style. In other words, it is at times very French. For those not used to this manner of discourse it may take some getting used to, but patience and perseverance will provide considerable rewards to the reader. Indeed, as the book unfolds, an overarching polyphonic structure emerges, as in a complex musical score, in which theoretical, philosophical, literary and clinical perspectives upon psychosis begin to synergize each other in surprising ways. The book is divided into two sections: Part I—Lessons of Madness, and Part II—Lessons from the Front. Broadly speaking, Part I develops a philosophic and psychoanalytic theoretical model of psychosis and Part II develops a framework for the psychoanalytic treatment of psychosis by drawing upon principles derived from war psychiatry. The theoretical and clinical sections of the book dovetail; they mutually enrich and inform each other.

The essential insight which is developed with great nuance and complexity in Part I is that the psychotic symptom is a marker pointing toward a *place*; a place of unspeakable catastrophe, destruction and horror once inhabited in the past, and now still relived in the present. The symptom both masks and begins to communicate the madness, mute pain and terror of this as-yet-unsymbolized location. The un-symbolized trauma comes to haunt the subject, while at the same time foreclosing free access to individual, familial, or social history. It is only when this place of trauma can be named and inserted into the symbolic order of language that the horror can be remembered, and not just re-lived repetitively as if it is branded or carved into one’s very being. When the catastrophe inhabiting the place of the Real (the unsymbolized) can be brought into a “social link” through the dialectic of symbolic speech in a human relationship, then the trauma can be remembered, spoken, eventually integrated, and even, for long periods, usefully repressed or forgotten. This field of symbolic language is entered through the inscription of a name or a word that functions as a signifier. How to facilitate the emergence of such a signifier, in word or perhaps, at first, in gesture, within the psychoanalytic situation is at the center of Davoine and Gaudillière’s clinical concern. A general framework for clinical praxis with psychotic patients eventually comes to center stage within Part II.

The authors radically locate psychosis within a social and historical field of investigation. In regard to “madness,” they assert; “we never use this word to describe the structure of an individual but instead to characterize a form of social link in an extreme situation” (p. xxii). It is precisely the unsymbolized and unremembered trauma of
such “extreme situations” that come to haunt the psychotic subject. Within psychosis there is a collapse of time as well as personal identity. The individual is inhabited in the present not only by ghosts from his own earlier life experience, but also those of preceding generations. The authors draw upon their own personal history, as well as their French and European identities, to develop a model of trauma based upon the paradigm of war. Davoine and Gaudillière were literally born into a war zone in the early 1940’s. They and their patients had parents and grandparents who were directly affected by both of the world wars fought on their native soil. In toto, the carnage, brutality and social disruptions of war lead to breakdowns in the symbolic order, the rule of law and the predictability of social relations. This collapse becomes for the authors the basis of a powerfully illuminating model of trauma. They go on to illustrate their concept of trauma as a war zone with vivid clinical material. From this perspective, they take particular care in asserting, “the connection between madness and trauma is not a causal one. For there can be no transition from the past to the present when the impact of disaster has immobilized time” (p. xxx). Thus, the psychotic patient transmits from generation to generation “pieces of frozen time,” eventually bringing a war zone into the analyst’s consulting room.

Davoine and Gaudillière examine this zone of collapsed time through multiple lenses. First and foremost it is a place where conventional, reliable rules and norms of symbolic speech have been exploded; in their place the psychotic individual engages in Wittgensteinian language games. The patient in the place of madness initially comes to the therapist in a state of “rupture, departure and confrontation,” thereby thrusting the therapist into a battle scene. This war zone becomes an empty possibility within which the first beginnings of symbolic exchange may be inscribed. This would constitute a first step away from madness, toward the horizon of the symbolic. At this juncture, the authors provide a rich metaphor for the entire therapeutic process via elaborating the etymological metaphor of the ancient Greek word Symbolon:

*Symbolon* emphasizes the signifying gesture in which two new allies exchange the two pieces of a broken shard, in such a way that their being fitted together later on is a pledge of mutual hospitality for them and their descendants. These humble bits and pieces, broken for the occasion, take the place of one’s word given as a guarantee. Of no intrinsic value, they are the basis of value and the foundation of the social tie, at the same time as they are the possibility of language itself. (p. 66).

Thus, to restore the place of language is to restore the place of the symbolic order itself. This is the task of the analyst, who must now approach the patient in madness upon the battlefield, carrying the broken shards of his own humanity and history. Within the book, this now shifts the focus to the nature of the therapeutic relationship in the field of madness.

Part II of *History Beyond Trauma* delineates the conditions necessary for a psychoanalytic investigation into trauma and madness that can facilitate symbolic exchange and activate therapeutic transformation. Toward this end, Davoine and Gaudillière, remaining within their model of war trauma, recount research that led them to uncover the first principles of war psychiatry. These were developed by Thomas W. Salmon in 1917 to deal with shell-shocked soldiers returning traumatized from the front. The so-called “Salmon Principles” are elaborated upon in Part II by the authors and the implications of each of these principles for establishing the possibility of psychoanalytic work with traumatized, psychotic individuals is developed in detail. Thus, the second half of the book is particularly rich in clinical wisdom and insight. For Davoine and Gaudillière the Salmon Principles become broad technical guidelines for transforming standard psychoanalytic technique and the therapeutic frame for work with those who are psychotic. The principles and their functions are:

- **Proximity** opens up a new space of trustworthiness amid chaos.
- **Immediacy** creates a living temporality in contact with urgency.
- **Expectancy** constructs a welcome to the return from hell.
- **Simplicity** emphasizes the obligation to speak without jargon.

Modifying traditional psychoanalytic practice in light of these principles may at first, to some, seem radical and controversial, yet they are consistent with modifications proposed by many other important psychoanalytic researchers into madness, e.g., Fromm-Reichman, Searles, Otto Will, Winnicott, Margaret Little and Benedetti.

Davoine and Gaudillière contend that **Proximity** not only refers to the actual physical encounter within the consulting room, it also involves a willingness to engage face to face upon the battlefield of a traumatic place; a taking up the gauntlet and a determination to survive the patient’s destructiveness without undue retaliation. From this distinctly Winnicottian position, the authors assert that the details of the real trauma will eventually become revealed within the specifics of the transference relationship. Through the unfolding of the transference, a significant relational bond develops: “Combat evokes in those who are fighting side by side a passion for taking care of the other physically and psychically, equivalent to the earliest and deepest family relationships” (p. 154). Thus, referencing the etymology of the ancient Greek term *Therapôn*, meaning a second in combat and ritual double, the therapist is understood as a comrade.
in arms. Together confronting trauma, the therapeutic dyad engaged in the psychoanalysis of madness create “a psychoanalysis upside down. Far from lifting a repression it becomes the tool that makes repression possible and puts an end to the catastrophic effects of the Real” (p. 158).

For Davoine and Gaudillière, the principle of Immediacy opens up the possibility of establishing contact with the patient at the maximal locus of urgency. When they contend that “It is better to conceive of all crises of madness as beginnings” (p. 168), the authors follow in a long tradition, beginning with Sullivan in his early work Conceptions of Modern Psychiatry (1940) which postulated that the moment of madness creates the potential for hope and re-integration. Within psychoanalysis, psychosis cannot be approached at a distance. Immediacy implies active engagement, and that may engender risk, uncertainty and confusion in the analyst. Again, Davoine and Gaudillière turn conventional psychoanalysis on its head when they propose that upon entering this field of madness, “transferentially the response comes first, then the formulation of the problem of which the analyst will come to be part once he has become confused” (p. 169). It is the gradual working out of this confusion via the identification and naming of ghosts that comes to constitute the fabric of the treatment. Efforts to reduce the immediacy of this encounter by primary recourse to psychotropic medication or behavioral interventions are understood by the authors to be most often a countertransferential backing away by the analyst from the dangerous urgency of the battle scene. In the face of contemporary prevailing modes of treatment offered to psychotic individuals in America and Europe, the authors’ point of view in this regard is unsparing, controversial and ultimately courageous.

The principle of Expectancy references the realm of the interpersonal, of alterity, the place of relying on a trustworthy other. It conjures images of wounded buddies forging a bond in the trenches and implies a form of mutuality in which both participants in the analytic situation bring shards of their own traumas and histories with them (the Symbolon) into the evolving relationship. Davoine and Gaudillière are not thereby proposing a boundaryless, mutual confessional, but rather they recognize that upon entering a zone of trauma, two histories converge in analytic space. Put another way, they assert that when analyst and patient encounter each other in the war zone, all of both of their relatives and ancestors also enter this space. The past is also in the present. Therefore, there are critical moments when the analyst’s own life, memories, experiences and history must be articulated to initiate symbolic exchange. It is possible for this then to be experienced by the psychotic patient as a trustworthy affirmation. Yet, the affirmation of expectancy begins with the very first word uttered by the analyst at the very beginning of the first session. The authors put it very clearly:

This first “Yes” from the analyst is a primal affirmation that in fact presides over the judgment of existence we have spoken of and opens out the field of speech: “Yes, something happened, something happened to you; it’s not all in your head, and what you’re showing is the only way you could bear witness to it. No, these events are not the cause of your condition but the object of your investigation. (p. 221)

The principle of Simplicity can best be illustrated through a consideration of the many generous clinical accounts offered throughout the book. The authors believe that psychoanalysis is within an ancient and long tradition of oral history and their stories of transformative clinical encounters with psychotic patients are masterfully realized and beautifully presented. Within these accounts both analysts are heard to speak simply, directly, and above all, with profound honesty to their mad patients. They make creative use of found objects to initiate symbolic exchange when speech fails or is not yet possible. They utilize aspects of their own (sometimes traumatic) histories in order to make points of connection with patients who have disappeared, exploded or evaporated. Davoine and Gaudillière are true masters of their craft and it is mesmerizing, and a rare privilege, to observe them help create small (and sometimes large) miracles within the consulting room. Often these clinicians appear more related to shamans or medicine men than to scientists or doctors. Yet, within the arena of madness, this is exactly the direction to which a radical trust in unconscious processes inexorably leads. Shamans and medicine men are also fundamental exemplars of an ancient oral tradition.

In summary, History Beyond Trauma is a singularly important contribution to psychoanalysis in general, and the theory and treatment of psychosis in particular. It rests on the shoulders of giants from the past while it simultaneously charts radically creative new directions for the future. For those of us engaged in the ongoing work of undertaking psychoanalytic exploration with traumatized and psychotic patients, this is an indispensable volume. Particularly in this age of managed care, antipsychotic medication and DSM-driven psychiatry, History Beyond Trauma offers hope for the healing power of symbolic exchange within a human relationship. Beyond the dilemma of psychosis, Davoine and Gaudillière deserve to be read by all who believe in the transformative potential of the psychoanalytic relationship. In my judgment, this magnificent book is likely to become an essential part of the psychoanalytic canon for generations to come. It deserves the widest possible readership.

Jim Gorney is a member of the Appalachian Psychoanalytic Society and in independent practice in Knoxville, Tennessee.

Mary Ellen Griffin, PhD

In this ambitious and complicated book, Susan Kavaler-Adler seeks to “catapult developmental mourning to the center of the analytic stage” (p. 2). For Kavaler-Adler, developmental mourning is central to psychological growth and to therapeutic change in psychoanalysis. She shows how this is so in three ways which form the main divisions in the book. First, she provides a theoretical discussion, which is, in her own words, an “amalgam” of object relations concepts (Chapters 2-3). Second, she reviews the literature from Freud and Klein to more modern object relations writers, to examine “mourning as explicit and implicit in psychoanalytic theory” (Chapters 4, 5). And third, she provides extensive clinical material in three longer and two shorter case studies (Chapters 6-14), which describe “object relations treatment” as a “forum for mourning” (p. 274). Throughout the book, Kavaler-Adler relies heavily on theoretical concepts from the Kleinian and British object relations traditions. Readers will need a comfortable working knowledge of the main constructs and vocabulary of Freud, Klein, and Fairbairn. Other theorists—including Jung—play supporting roles.

Kavaler-Adler’s theoretical chapters are quite difficult. They will probably be of most interest to specialists in Klein and subsequent object relations theorists, who will find her arguments a thought-provoking contribution to technical dialogue about how to reinterpret and integrate these various theorists’ views, in the light of modern psychoanalytic thinking. Other readers may wish to skip her theoretical chapters, and proceed to her more accessible literature review, or onward to her detailed clinical chapters.

For Kavaler-Adler, patients with preoedipal psychopathology are best understood as developmentally arrested, in a state of “pathological mourning.” Closely following Fairbairn, she believes they are unable to make progress psychologically, because they are not conscious of the rage and grief they experience in relation to the split off good and bad part objects of their psychic world. They are condemned to compulsively reenact painful, self-defeating interpersonal and intrapsychic experiences that reflect their fixed psychic dynamics, which exist in a closed psychological system that is not affected by present-day relational experience. Alternately, these patients may be seen to operate with the psychic structure of Klein’s paranoid-schizoid position.

By contrast, “developmental mourning” is healthy mourning that not only allows for psychological development, growth, change, and healing, but is, in fact, the necessary process whereby such psychological growth occurs. Entry into the capacity for developmental mourning is equivalent to moving into the Kleinian depressive position, with its capacity for awareness of having harmed the internal loved object, and resulting capacities to regret, to grieve, and to attempt to repair injury to the other caused by one’s aggression.

What enables patients to begin to become “unstuck” from pathological mourning is the holding environment of object relations psychoanalytic psychotherapy or psychoanalysis. Following Klein, Kavaler-Adler believes that patients’ love must outweigh their hate, in order for them to be able to take the psychological risks inherent in depressive position mourning. It is the holding nature of the analytic relationship that enables patients to experience sufficient love to risk profound psychological change. As patients’ transference is allowed to develop and is interpreted empathically using object relations constructs, they feel safe enough to experience emotion on a deep level for the first time. It is this re-emergence of “heart experience” and “body experience,” felt first in the context of the transference relationship, that enables patients to discover deeply moving memories and fantasies about their parents. Thus, they recover deep rage, then sadness, then love for the deeply disappointing and/or aggressively traumatizing parents, who were internalized in part-object form by
the patients during early childhood. These deep emotions, memories, and fantasies vis-à-vis early internal objects provide patient and analyst with now-conscious material which may be analyzed, so that patients are able to mourn developmentally; to let go of old traumas, hurts, and distortions, and to regain wholeness by reintegrating formerly split off parts of the self. Another theme important to Kavaler-Adler in this process is that of increasingly bringing formerly unconscious, split off, projected parts of the self into conscious dialogue and dialectic, as the individual’s experience of self and others becomes increasingly whole.

Early in the book, Kavaler-Adler presents an idea very important in her own thinking, that of the “demon lover complex.” This concept has been important to her in her work with patients who are writers and visual artists, and in her analyses of historical writers and artists, such as Emily Dickinson, about whom she’s written in greater detail in earlier publications. The demon lover complex is a way of talking about preoedipal psychopathology in which the patient’s internal world is composed of “split off instinctual aspects of the self and primitive object representations” (p. 7). For the artist who is arrested developmentally at this stage, his or her creative energy can be experienced as alien to the self, so that to experience creativity, the artist must have a relationship with an idealized other—often a lover—who can function as a muse, who provides the artist with sufficient feelings of well-being to create. However, when this person disappoints the artist, he or she is devalued and is experienced as if he or she were a demon. The artist’s libidinal tie to this now devalued other is disowned and projected, leaving the artist with the subjective feeling that he or she is “possessed” by this demon lover. While I don’t believe this concept is fundamental either to Kavaler-Adler’s theory of developmental mourning or to this book, I mention it because it is distinctive to her thinking, gives one a bit of the flavor of her approach to analytic thinking in her work with artists, and is mentioned in several places in both the theory chapters and her case studies.

In her case studies, the abundance of the clinical material that Kavaler-Adler gives us provides insight into the strange and wonderful world of psychoanalytic process. This is especially so when she includes transcripts of the patient’s material, or of dialogue between herself and her patient. At times, she enriches her clinical discussions with technical comments on why she withheld or offered a particular interpretation or countertransference disclosure. Her candid presentation of clinical material gives us a window into what analysis is like for Kavaler-Adler and a few of her patients. She gives us one model of how a seasoned analyst makes use of both Freudian and Object Relations theory in her clinical work, both to think about clinical process, and to guide interventions in the hour with the patient. At times, she uses complex theoretical concepts to characterize clinical data in her interpretations, so that the patients learn to analyze their own experience using these concepts. It is interesting to see her use various theoretical models in the case material as different lenses which enable her to make sense of the patients’ varying behavior in different ways at different points in the treatment. For example, she sometimes talks about alternative interpretations of particular transference events: should an instance of erotic transference be interpreted through a Freudian (Oedipal) or a Kleinian or Fairbairnian (preoedipal) lens? I would like to see her go further in explaining when theories can be “amalgamated,” (her word), and when they need to be used as distinctive and complementary lenses. I’d also like her to develop her thinking about how to make the choice to use one lens versus another in a given treatment context.

Readers will appreciate her timely commentary about the analysis of hetero- versus homosexual object choice, and its relation to gender identity, in the case of Laura. Readers interested in the psychoanalysis of artists will find her case studies of particular interest. Her two short cases at the end of the book include, respectively, verbal descriptions and both verbal descriptions and visual reproductions of her patients’ paintings, to demonstrate how changes in their art reflect psychological growth over the course of therapy.

In each of the cases, Kavaler-Adler shows how, with a variety of presenting complaints, and through a variety of analytic processes, patients go through a “critical developmental mourning process” that enables them to progress psychologically, to heal splits in the psyche, to become aware of sealed off, repressed emotion that ultimately initiates a developmental sequence required for becoming healthy and being able to enter into healthier relationships, to love, to be more productive and creative. In the case studies, she describes how developmental mourning can take different forms which may imply sequenced phases, beginning with the mourning associated with Masters’ “abandonment depression,” progressing to a more evolved Kleinian “depressive position mourning,” and, at least for some patients, including existential mourning associated with an awareness of the loss of life possibilities inevitable in experiencing human limitation.

Throughout the case material, Kavaler-Adler stresses how important it is for patients to experience psychological reality via bodily sensations. In her view, the therapist must make patients’ affective and somatic experience a priority. The analyst must sense what patients are feeling physically, and comment on this experience interpretively. She goes on to say that she believes patients’ capacity to experience a physically-based affective grief is
central to deeply experiencing developmental mourning. She stresses this via clinical material in the first two of her long case studies (those of June and Phillip). For example, in the case of Phillip, she notes that his body-racking sobs indicate genuine developmental mourning. She comments that both June and Phillip have, as it were, a gift for mourning, which is essentially the same thing as their gift for sobbing.

The title of Kavaler-Adler’s book includes “spirituality.” However, readers seeking a contribution to psychoanalysis and religion or psychoanalysis and spirituality will be disappointed, as this theme is relatively minor and undeveloped in the book. In her case studies about June and Phillip, she includes clinical material about the patients’ spiritual experiences, but she does not adequately provide a theoretical or clinical context for understanding the meaning of these experiences. The first patient describes a kind of emotional/somatic experience that Kavaler-Adler describes as a subjective experience of self-transcendence. The second patient’s spiritual experiences include sexual ecstasy within an analytic session, past life regressions, “blockages in his energy field,” and visions of Christ. These are certainly unusual experiences, and it is admirable that Kavaler-Adler includes them in her case presentations for our consideration. She evades the issue with both the reader and the patient about whether she considers these experiences to be spiritual in nature, or reducible to psychological explanation. For example, she is content to respect Phillip’s experiences for “what is emotionally true to Phillip” without further analysis. In the conclusion, she makes a reference to one of her patient’s spiritual experience as “a useful metaphor,” but it is unclear whether she as the analyst saw it as metaphor, or whether the patient came to see it that way. Overall, however, she doesn’t develop her ideas about spiritual experience or spirituality in any depth. She does not make it clear in the text that spirituality is central either to her theory of developmental mourning, or to psychological growth.

By contrast, the emergence and interpretive working through of erotic transference plays a major role in Kavaler-Adler’s three longer case studies. However, she fails to sufficiently highlight either the theoretical importance of erotic transference, or theoretical and practical issues in the interpretation of erotic transference. Kavaler-Adler could have usefully elevated the importance of erotic transference to a major theme in her book. For example, in the case of Phillip, she provides a lengthy discussion of the analysis of erotic transference as a path to his ability to become aware of and tolerate aggression, necessary for moving from his previous pathological mourning into a depressive position capacity for developmental mourning. Kavaler-Adler might do well to develop this theme further, and to consider changing the name of her book to “Mourning, Erotic Transference, and Psychic Change.”

Kavaler-Adler’s case studies are most effective when she uses a straightforward narrative style that permits the reader to follow the relationship between patient and analyst as the story unfolds. A shortcoming in her longer case studies, however, is that she hasn’t “digested” the data sufficiently—it’s as if she’s not sure why she is presenting much of what she presents. There’s too much detail. She frequently repeats the same clinical episodes one or more times at different points in the chapter. The reader is left to sort through too much, too often left to draw his or her own conclusions. Kavaler-Adler could also do a better job of helping the reader by outlining her case studies more carefully. Material is often presented out of chronological sequence, which makes the cases hard to follow. She also includes so many interpretive themes in the longer cases, that the power of her conclusions is diluted. Given its centrality in the book, it might have been useful for Kavaler-Adler to stick closer to highlighting the process of developmental mourning, as an organizing theme in each case study.

In Mourning, Spirituality, and Psychic Change, Susan Kavaler-Adler offers us her unique perspective on object relations theory and psychoanalysis. Psychological growth and healing may be helpfully conceived as a process of developmental mourning. Object relations psychoanalysis and psychotherapy can enable patients stuck in repetitive, developmentally-arrested pathological mourning to access previously split off emotional experience and move into this healthy form of mourning, in which growth is again possible. Her theoretical chapters are most appropriate for specialists in object relations theory, given their dense, technical nature. Thus, many readers with a more basic working knowledge of object relations concepts will want to jump ahead from the introduction directly to the more accessible literature review, or even to the clinical chapters, in which ample and candid clinical data give an intriguing “window” into psychoanalytic process. Readers interested in the psychoanalysis of artists will find the clinical chapters especially useful and interesting. Readers willing to make the effort necessary to become familiar with Kavaler-Adler’s ideas and clinical expertise as presented in this book will be rewarded with rich food for thought.

Mary Ellen Griffin is in private practice in Sylva, North Carolina, and teaches part-time at Western Carolina University, where she delights in introducing undergraduates to psychoanalytic thinking in the context of her courses: General Psychology; Psychology and Religion, and Freud and His Legacy.
In this original edition of her wonderfully insightful book, Dr. Joan Lachkar presents both a groundbreaking overview of psychoanalytic theory and an overview of the drama that occurs when two pathologies meet and marry. (A second edition of this book titled, *The Narcissistic/Borderline Couple: New Approaches to Marital Therapy*, 2nd Edition, published by Brunner-Routledge in 2003, utilizing and expanding the concepts outlined in this original book, was not available for review at this time.) According to Lachkar, it takes two to tango, and two to sustain a long-term relationship that involves abuse. To witness the lives and loves of the couples presented in this book is to be transported back to *The War of the Roses* or the memorable game of “get the guest” in Edward Albee’s play *Who’s Afraid of Virginia Wolfe?*

Defining the narcissistic/borderline couple as “individuals who, when they are together, form a shared couple myth that gives rise to many collective fantasies,” Lachkar proceeds to describe the intricacies of each pathology and to demonstrate how different practice paradigms are needed for successful treatment: the narcissist responds most profoundly to the mirroring aspect of self-psychology, while the borderline requires the containment of object relations theory. Lachkar demonstrates how both theoretical constructs can be intertwined during the course of treatment to provide effective marital therapy.

It is recommended that the technique of mirroring, empathy and introspection can be blended with an object relations approach to help these narcissistic individuals deal more directly with their internal deficits and areas that contribute to the maladaptive nature of their relationships. When couples can face their internal deficits, they feel more secure and contained. For borderlines suffering from abandonment anxiety and preoccupied with the lack of maternal bonding and attachment experiences, self-psychology is not enough. (p. 5)

Lachkar makes several points of interest, focusing on the difference between narcissistic rage and borderline rage observing that the difference between narcissistic rage and borderline rage is profound. The narcissistic responds to being misunderstood, ignored or hurt especially when the injury is to one’s sense of entitlement. This can be illustrated by “I dare you to put me down in front of all my friends;” or “Here I have tried so hard and you never appreciated all these things I have done. I am leaving.” Borderline rage is a sensory response to the threat to one’s very existence, a fear of not existing as opposed to narcissistic rage, which is in response to a threat to one’s special sense of existence. Borderline rage is the attempt to destroy that which is envied in order to hold on to the good internal objects, while narcissistic rage is an emotional outburst to a threatened self, an outcome of guilt, from an indulging self. Excellent suggestions are provided for dealing with what the author considers to be an impossible couple. In her treatment model the more primitive and destructive the couple, the more structure is needed for containment.

Lachkar has developed a systematic approach to treatment in order to deal with the enmeshed, chaotic relationship of the narcissistic/borderline couple. She relies heavily on Bion, and has developed a multi-stage treatment procedure. Stage I develops a state of oneness, Stage II develops a state of two-ness and Stage III develops the emergence of separateness. In the author’s theoretical formulation, the sequences illuminate movement from a stage where self and others are indistinguishable with boundaries blurred and fused, to a state of more clarity, and finally to an awareness of separateness. In Lachkar’s model, the therapist must see the couple together before transitioning into individual therapy so that a safe bond can be established. She cautions against moving into individual work too quickly, and stresses the importance of timing to determine when the couple is ready. Too early a separation of the “couple” can precipitate a “rapprochement crisis,” which may cause them to withdraw from treatment. Lachkar provides case examples that each partner of the dyad must be assured of entitlement to his or her own subjective experience. She cautions that each member of the dyad experiences anxiety differently, with the narcissist reacting to a loss of “specialness” and the borderline fragmenting when faced with things that abandon. An interesting point that Lachkar suggests is that this therapeutic alliance with the patient should initially focus upon the narcissist since the narcissist’s tendency to flee would pose a serious threat to successful treatment.

Getting rid of something by turning to “passion” or mania paradoxically diminishes the passion.
and creates further disappointment and narcissistic injury to the self. The narcissist’s need for self objects, the formation of positive ties, and the need to turn to a variety of external sources can help explain what the person’s real self-object needs are. The formation of healthy object ties provides for both the narcissist and the borderline a vital function and is not to be confused with fusion or immersion. Often such individuals who are partners in couples turn to the wrong self-objects, keeping the partners in a circle, reinforcing their delusions, boredom, confusion, anxiety, dullness, and emptiness. While I suggest that both internal and external object function are vital, it needs to be emphasized that both need to be explored in light of these two specific disorders. (p. 117)

Lachkar describes each of the pathologies in clearly defined terms utilizing theoretical constructs from Kohut, Grotstein, Klein, Bion and others. She makes it clear that these personality disorders are not necessarily discrete and that each individual may show a tendency towards a behavior while exhibiting certain vulnerability. In her attempt to describe the bonds and binds that attract such individuals together, she simplifies the descriptors and describes the basic characteristics of each partner as components of events that perpetuate the circular, never-ending quality of the conflict. According to Lachkar, the borderline is the one who searches for those with whom to bond. When the promise of that bond is threatened, the borderline responds with blame and attack as primary defenses. At the slightest hint of abandonment, the borderline is seized with a desire to get even and to “teach” the other a lesson. Conversely, the narcissist tends to withdraw, becomes easily injured and fears becoming ordinary. The narcissist is constantly searching for others to confirm feelings of entitlement and is constantly seeking approval.

Lachkar points out throughout the book that even though these behaviors cause much pain, they are not purposefully enacted but are a replay or a reenactment of early primitive infantile longings. These findings draw upon Freud’s concept of transference, with the past being brought into the present and the attachment to early interactive experiences resulting in later personality development. According to the author, these personalities function in the constant hope that these infantile longings, yearnings and wishes that are being expressed will somehow result in a happy ending and they replay it repeatedly hoping that the ending will be different. Lachkar paraphrases Bion when she observes that unfortunately, couples who rely heavily upon magical thinking and repetitive behaviors never learn from experience because conflict is not resolved through repetition.

Lachkar illuminates experiences that occur in our personal and professional worlds, when we are in the presence of a couple who “gives us a pain in our stomach”.

Suddenly my head begins to spin. I feel dizzy and confused. My head keeps going round and round. In front of me sits a married couple; they go on and on in circles, going nowhere. A feeling of despair overwhelms me as I think to myself, “This couple needs to be in therapy.” I then realize I am the therapist. (Lachkar, 1985)

The author explores the nuances of the parasitic bond, and describes the difficulty of entering into and changing the circular pattern of behavior. Suggestions for treatment and cautions about possible obstacles to change are carefully delineated. The abusive dyad impacts friends, family, and children involving all who come in contact with it into a kind of “Stockholm Syndrome,” i.e., bonding rooted in trauma.

As we watch the case studies unfold, and watch the abuser laser in on the psychological vulnerabilities of the victim, it feels as if one were watching the lion prey upon the weakening of the antelope herd in the African Veldt. This bond between the abuser and the abused is the glue that holds the relationship together, and the bond is strong, dynamic and co-dependent. According to Lachkar, two narcissists or two borderlines would not be able to maintain intimacy over time. It is the folie a deux quality of the two specific pathologies that “make love last.”

This book is original, sensitive and eminently useful. Dr. Lachkar gives credit to her classical dance teacher of 12 years, Carmelita Marcacci, from whom she first learned the importance of artistic expression, the blending of technique and feelings, and the effect that one human being can have on another. Lachkar’s classical training in psychoanalysis has combined with her classical training in dance to yield a wonderful creation.

**REFERENCES**


*Marilyn N. Metzl is a psychologist in private practice in Kansas City, Faculty and Supervisor: Kansas City Institute for Contemporary Psychoanalysis and Program Chair: Kansas City Association for Psychoanalytic Psychology.*
What were Sigmund Freud’s positions on transference or on dream interpretation? Did his views change over time and if so in what way? How did Freud’s writings influence more contemporary analysts such as Bird, Arlow, Gill, or Kohut? Steven J. Ellman is a retired professor and past director of the clinical psychology program at the City University of New York. He currently teaches at the New York University Postdoctoral Program and is in private practice. His book is a commentary on Freud’s analytic technique and the role his thinking played in contemporary psychoanalytic thought. In his *Freud’s Technique Papers*, Ellman reprints and then reviews a number of Freud’s major technique papers, discusses how Freud’s thinking about technique changed over the course of his writing, and briefly explores Freud’s influence on a diverse collection of contemporary analytic thinkers. Ellman divides his book into six sections: The early years, transference, dream interpretation, clinical practice, termination, and Freud’s legacy.

In section one, Ellman reviews Freud’s early writings and techniques and discusses how Freud’s early clinical experiences lead to his realization of the importance of transference in the analytic situation. Ellman specifically discusses Freud’s use of hypnosis, his development of the “pressure technique,” and the idea of defense. Ellman quotes from the case of Dora to illustrate how Freud came to understand the importance of transference. He takes an honest look at Freud’s lack of success at treating Dora and the significance of this, and then, rather than drawing conclusions for the reader, leaves him to draw his own conclusions. This first part of the book serves as an introduction to the remaining five parts. Overall, this section serves as a good introduction to Freud and his early writing for the less experienced reader.

Ellman structures the next four sections of *Freud’s Technique Papers* similarly. First, he reviews Freud’s changing ideas related to the topic of exploration, for example, transference. Second, he reproduces excerpts from Freud’s writings or reprints articles in their entirety. Accompanying these reproductions and reprints Ellman provides a running commentary in the form of marginal notes. Finally, he explores contemporary views on the topic (e.g., transference) and how they have been influenced by, and deviate from, Freud.

In section two, Ellman explores the concept of transference across three chapters. In the first chapter he first discusses Freud’s evolution of the concept from his early theoretical writings and his topographical model, to his later writings and theory including transference neurosis and repetition. Ellman discusses where and when the idea of transference originated, and how it came to be such an important component in psychoanalytic treatment. At the end of the chapter, Ellman provides an overview of the content of the papers included in the next chapter. The second chapter in this section includes three of Freud’s papers with Ellman’s accompanying commentary: [*The Dynamics of Transference* (1912a), *Further Recommendations in the Technique of Psychoanalysis: Recollection, Repetition, and Working Through* (1914), and *Further Recommendations in the Technique of Psychoanalysis: Observations on Transference-Love* (1915)]. These three papers were well chosen and demonstrate how Freud’s thinking changed in regards to the concept of transference. In the final chapter of this section, Ellman explores the concept of transference as understood by other analytic writers including Bird, Brenner, Gill, and Kohut, and how Freud influenced their thinking. For example, Ellman discusses how Bird (1972, 1973) writes that Freud was unable to understand the implications of negative transference and how this led to the degradation of transference in his writings.

In the third section, Ellman examines dreams and their interpretation. Once again the first chapter in this section begins by outlining the evolution of Freud’s views on dreams. Ellman discusses the early importance of dreams to Freud by citing his *Studies on Hysteria* (Breuer & Freud, 1893). Ellman also makes reference to Freud’s topographical and structural models and how dreams relate to these models. Finally, he discusses how dream interpretation impacted on Freud’s practice of psychoanalysis. Ellman is successful in demonstrating how Freud’s ideas on the interpretation of dreams became an integral part to the psychoanalytic treatment process. Once again Ellman concludes this chapter by briefly reviewing the two papers he presents in the next chapter. The second chapter in this section includes the following papers: [*The Employment of Dream-Interpretation in Psychoanalysis* (Freud, 1912b) and *Remarks upon the Theory and Practice of Dream Interpretation* (Freud, 1923)]. Each paper is accompanied by Ellman’s margin notes. Ellman does not include *The Interpretation of Dreams* (Freud, 1900) in this section, most likely due to the length of this seminal work. The third
In the last section of *Freud’s Technique Papers* Ellman discusses how Freud actually conducted therapy (in light of his theoretical writings), the widening scope of psychoanalysis, and then summarizes Freud’s positions on technique. The first chapter reviews Freud’s *Notes Upon a Case of Obsessional Neurosis* (1909) and how he conducted treatment in this case. Ellman explores the Rat Man, the first 8 sessions of treatment, and transference related to this case. Ellman also explores other aspects of Freud life including his role as a teacher, his “extra-analytic” behavior, and his treatment of the Wolf Man and Dora. The second chapter explores what Ellman considers some of the neglected aspects of psychoanalysis. Specifically, he discusses analytic trust and refers to Bach, Kohut, and
Winnicott. The final chapter in Ellman’s book summarizes Freud’s positions on a number of fundamental issues such as transference, neutrality, analyzability, interpretation, and cure. He contrasts Freud’s positions to his own theoretical positions as well as to those held by the contemporary writers he has cited throughout the previous sections of the book. This was a well-written section and we are allowed to more fully understand Ellman’s position in relation to Freud’s.

Ellman stated that his purpose in writing this book was to bring together and highlight many of Freud’s ideas on technique and to illustrate how these ideas have contributed to contemporary psychoanalytic theory. When one considers the sheer volume of Freud’s writings and the number of contemporary analytic writers this simple sounding task soon becomes enormous. Ellman, however, succeeds in achieving his goal and in introducing the reader to key analytic ideas and the agreement (and disagreement) related to these ideas among other analytic writers. This book is well suited for a graduate student beginning to study analytic theory and technique, or for a clinician hoping to expand his understanding of psychoanalysis. This is especially apparent when Ellman reprints Freud’s papers and includes marginal comments to assist the reader. Those students and clinicians slightly more familiar with psychoanalytic technique may find the marginal comments on Freud’s papers unnecessary, however, they are easy to skip over and do not significantly detract from the chapter.

It is unfortunate that Ellman could not include a larger number of original articles and did not contextualize some of the contemporary writers in greater detail. For example, while the reader is given considerable background relating to Freud and his ideas he is not given the same amount of background for other writers such as Kohut. For the novice this may make some of the ideas and distinctions difficult to understand or appreciate. For the more experienced reader, however, this is not a problem. At 350 plus pages it would be difficult for Ellman to include additional relevant information and theory for all the major writers. It is likely, however, that a novice reader would find it useful to read or have read the writing of the contemporary analysts Ellman cites (e.g., Kohut, Brenner, Gill).

Overall this was clearly written and successfully explores the evolution of a number of Freud’s analytic ideas and techniques. Ellman relates Freud’s writings to key contemporary analysts and explores both similarities and dissimilarities between Freud and these contemporary analysts. Freud’s Technique Papers make an excellent contribution to the analytic literature and reflect the thoughts and experience of an experienced writer and psychoanalyst.

**REFERENCES**


Michelle Presniak is a candidate in the Department of Psychology, University of Saskatchewan. Michael Wm. MacGregor is Associate Professor in the Department of Psychology, University of Saskatchewan. Correspondence can be sent to: Michael Wm. MacGregor, Ph.D., Department of Psychology, University of Saskatchewan, 9 Campus Drive, Saskatoon, Saskatchewan, S7N 5A5; E-mail: michael.macgregor@usask.ca.
What is psychoanalysis? Is there a uniformly accepted definition? Is there even agreement on the components necessary for treatment to be considered psychoanalytic? Kernberg (1999) suggests that there are three essential features to psychoanalysis and psychoanalytic treatment: Interpretation, (historical) transference analysis, and technical neutrality. Interpretation, although a hallmark of psychoanalytic treatment, is not unique to psychoanalysis alone. Joseph Schachter in *Transference: Shibboleth or Albatross* advocates discarding transference analysis. Does that mean that all we are left with is technical neutrality to define psychoanalysis and psychoanalytic treatment? Does discarding the traditional theory of transference and its treatment goals undermine psychoanalysis, or represent an important and necessary paradigm shift?

Schachter’s goals in writing *Transference* are to create a foundation for the dismantling of Freud’s theory of transference, and to replace that rejected theory it with a new theory of Habitual Relationship Patterns. In thirteen chapters Schachter presents the historical origin of Freud’s theory of transference, problems (as he sees them) with the theory, and then provides and alternative theory, Habitual Relationship Patterns, to replace transference as a cornerstone of psychoanalysis and psychoanalytic treatment.

In the first chapter of *Transference*, Schachter orients the reader to the role of transference in traditional psychoanalysis. He then devotes the next four chapters to attacking and dismantling the traditional conceptualization of the childhood origins of neurosis and the transference neurosis. Schachter argues that, although individually traumatic events do occur in childhood, these events do not influence the psyche to the degree that is believed by traditional psychoanalytic thinkers, and that they are not re-lived in neuroses or in transferences neuroses. To strengthen his argument Schachter discusses evolutionary theory, changes in the conceptual context of the theory of transference, and determinism. Schachter devotes an entire chapter to this latter point as he argues that “infant determinism is the keystone to the theory of transference” (p. 89) and that if infant determinism falls then the entire theory of transference falls.

In Chapter 6, Schachter brings chaos theory into his argument against the traditional theory of transference. This chapter is almost entirely theoretical. Schachter suggests that chaos theory can be used as a model for understanding psychological phenomena. For example, psychological phenomena are unstable (i.e., seemingly small perturbations can have large effects) and chance plays a role in the development of change. Schachter argues that although many psychological events are likely determined, determinism does not mean predictability. Accordingly, determinism becomes a less meaningful construct as one cannot know what impact an event will have in the future; or know which past events caused the present event to occur. As such, Schachter argues that this renders the analysis of transference irrelevant as we can not infer determinism or cause and effect, and can not make predictions. This chapter seems misplaced both in the sequence of the chapters and in the book as a whole. This use of chaos theory in his argument may leave some readers puzzled; however, it does raise interesting questions about psychoanalysis, psychotherapy, and psychology as a discipline.

In the next chapter Schachter discusses the practical difficulties associated with transference analysis. He suggests that the questionable validity of the theory of transference leads to the questionable reliability of the transference interpretation. Schachter also suggests that interpretations have the very real possibility of acting not as interpretations but as suggestions and thus undermine the therapeutic relationship. Accompanying this discussion is a second discussion of how therapy works, the placebo effect, and the analyst’s authority. Schachter suggests that the by focusing on historical transference interpretations the analyst may fail to “explore the role of suggestion and placebo” (pp. 123-124). He further suggests that power of the therapeutic alliance may be ignored while the therapist digs for “psychic fossils” from the patient’s past. This latter point is important to address whether one agrees with Schachter’s arguments or not, as it is often leveled against psychoanalysis and psychoanalytic treatment. In fact, this is an often heard argument by proponents of interpersonal therapy who argue that analytic work avoids dealing with current conflicts and feelings.

At this point in the book Schachter suggests that while the historical assumptions of transference have been defeated there is still something that can be salvaged for psychoanalysis. He argues that the focus needs to be on patient’s current feeling both inside (i.e., towards their analyst) and outside the therapeutic environment. In the next three chapters Schachter introduces the concept of Nachträglichkeit and then presents his theory of Habitual Relationship Patterns and his techniques to replace analysis of
the (historical) transference. Schachter uses *Nachträglichkeit* as the foundation for his Habitual Relationship Pattern theory and suggests that the focus of analysis should be on current relationships, especially the relationship between the patient and the analyst. Schachter states that “the dynamics of the irrational aspects of a Habitual Relationship Pattern can be formulated in whatever theoretical terms and concepts the analyst is comfortable” (p. 150), and that, although other ways are possible, he favors structuring them in terms of defenses.

Although many will agree that the analysis of Habitual Relationship Patterns is useful and may be as valid as the analysis of transference, some readers may be disappointed with these latter chapters. Schachter himself states, “it was humbling to learn that my current ideas about analytic theory, which I had thought of as innovative, had been described almost word for word more than 60 years ago by Karen Horney” (pp. 145-146). It is possible that some readers will simply see Habitual Relationship Patterns as an interpersonal view of understanding transference. If this is the case, then the reader is left wondering how Habitual Relationship Patterns are new and different from what is already discussed in the literature. In fact, Schachter makes this same point himself by stating that there are numerous other theorists whose ideas are “essentially consonant with [my] own” (p. 146), from schools within and outside of psychoanalysis and that in terms of Habitual Relationship Patterns, “the concept is functionally the same as Fosshage’s organization model of ‘transference,’ without the distracting terminological link to an older, outmoded conception” (pp. 149). In chapter 10 Schachter also promotes doing away with most therapeutic rules in the service of self-reflective responsiveness. This is somewhat reminiscent of Yalom’s claim that therapists must create a new therapy for each patient (1998, 1999, 2001).

In Chapter 11 Schachter provides the case of “Pat” to illustrate psychoanalysis with Habitual Relationship Pattern analysis as opposed to transference analysis. Once again, I think that some readers will be left wondering how the treatment is psychoanalytic and not simply interpersonal or interpersonal-dynamic. Schachter seems to anticipate this and closes the chapter with a defense of the “psychoanalytic-ness” of his therapy of Pat. I imagine a number of readers will be unconvinced by his explanation that the investigation of unconscious forces is sufficient for a therapeutic technique to be called psychoanalytic.

Schachter concludes *Transference* with a discussion of post-termination relationships. Given that in Habitual Relationship Pattern analysis the therapist and the patient engage in mutual self-disclosure and foster a certain degree of intimacy, it is likely that at some point the two will want to continue their relationship as a friendship.

Schachter acknowledges this and the ethically thin ice of therapeutic relationships turning into personal relationships. He suggests, however, that under some conditions it may not be unethical for therapists to develop friendships with ex-patients. I felt uneasy reading this argument and believe that the topic deserves more attention than one chapter. I think this is especially important given the potential harm that could befall either party in a post-termination relationship, particularly those in long term intensive therapy.

Shibboleth was a word used by the Gileadites to distinguish themselves from the Ephraimites who could not pronounce the initial “sh” and refers to a password that enables a person to identify himself with a particular group. Schachter argues that transference and transference interpretation has been psychoanalysis’s shibboleth. At the same time he argues that transference and transference interpretation is currently psychoanalysis’s albatross, and burdens if not completely impedes the progress of psychoanalysis. Schachter wonders whether abandoning the theory of transference constitutes a paradigm shift within psychoanalysis. He notes that reviewers have commented that the definition of psychoanalysis is becoming vague. In light of this book, which can be argued to promote interpersonal psycho-dynamic psychotherapy as opposed psychoanalysis, this concern seems to be valid. To return back to the question I posed at the beginning of this review I once again ask, “What is psychoanalysis?”

**References**


Michael Wm. MacGregor is an Associate Professor in the Department of Psychology, University of Saskatchewan. Michael Sheppard is a candidate in the Department of Psychology, University of Saskatchewan. Dr. McGregor’s email: michael.macgregor@usask.ca.

Henry M. Seiden, PhD, ABPP

One morning last week a 68-year-old woman patient of mine came to session needing to talk about an experience that Marilyn McCabe would understand. The patient is a widow who started therapy a year or so ago because she was having a hard time in the aftermath of the death of her husband. She had by now been feeling better. She had achieved some perspective on herself and on her loss. She had retired from a job she never liked and gotten her financial life in order (significantly for her, without the help of her husband who, throughout their life together, had handled the money). She’s found some interesting and useful social activities; she is happy at the birth of a first grandchild—a boy named for her husband.

But over the previous weekend she was cleaning out closets and opened the one that held her husband’s suits and his favorite, worn, baseball cap. She was hit by a wave of grief! She had thought she was over all that; she thinks (again) that maybe there is something wrong with her. I found myself reassuring her (yet again): no, there is nothing wrong with her; yes, this is the way loss is, it is never over. Marilyn McCabe would agree—more than agree. She would insist on it. The “relationship” with the lost love endures; the pain of loss never goes away entirely.

Here are some of McCabe’s own words:

It is clear that the tacitly accepted assumptions of prevailing grief theory detract from forming a more accurate and less rigid conception of actual grief experience. While the theories help organize a holding place with which to view grief, it is necessary to see that the construction of universal-type stages or phases and continuums of normality/abnormality is based on certain presumptions, and does not represent truth itself. Because the linear, take it or leave it (i.e., “holding on” versus “letting go”) models do not provide adequate explanation for the temporal or relational aspect of grief, they need to be revised. (p. 74)

The major burden of McCabe’s book—and one suspects, its entire raison d’etre—is a long central chapter devoted to an explanation of her experience of losing her mother. She needs, she says, to tell her story. And tell it she does. She documents the terms of her loss, quotes extensively and in great detail from her journals and poems, (written over a five year period following her mother’s death) and she presents a phenomenological “analysis” of her own experience. The bottom line is the “paradox” of the title—despite the insoluble loss, her mother has not gone away, they still have a “relationship.” Her mother is still there.

One’s heart goes out to McCabe! But the problem with the book is that it is framed as scholarly—studded as it is with references, quotes from, and citations of, anyone and everyone who has anything to say about the subject. While it is presented as social science, what it serves is the author’s wish and longing. It represents McCabe’s struggle to square the circle—to make her own deep emotional insistence reasonable and scientific. She is sometimes more, and sometimes rather less, successful.

In an early chapter McCabe takes on and does an exhaustive comparative analysis of stage and phase theories of grief and mourning, only to end up dismissing all of them as not adequate to addressing the ongoing and untidy way grief reactions, especially her own, tumble one on another and go on and on. This is actually the books strongest contribution: In my clinical experience with people in mourning, this is what grief looks like and feels like. Mourning is messy and, pace Kubler-Ross et al, it follows no good order. (Although it must be pointed out that this is so in all of our psychiatric rubrics—be it grief and mourning, or phobia, or schizophrenia, or learning disability or whatever. What is individual is idiosyncratic and matches only a little what one finds in the textbooks.)

But because the conclusion precedes the argument, much of what looks like scholarship in The Paradox of Loss isn’t really. The pile upon pile of citations adds up to an obsessive (and sometimes querulous) argument against anything which suggests we have to “let go” of those we mourn. Everything, says McCabe, which argues for a letting go is a “bias.” Indeed she devotes a chapter to such “biases,” listing among the villains those who, she says, see as “failures” those individuals “who are unwilling to give up their attachments to the dead” (p. 58). In this group she includes Bowlby, Freud, Kubler-Ross, and others.

The heart of the book—her account of her own
story—is the biggest failure. Here the circle will not square. Because McCabe can’t or won’t see the forest (grief generally) for the trees (her own grief), her self-revelations are excessive, maudlin, and ultimately embarrassing. The chapter is painful to read because there is no enlightenment in it sufficient to justify the endless dwelling on the details of the agony. The “analysis” of her experience is just another kind of holding on. It’s as if one hears a child crying bitterly in these pages and there is no soothing to be offered. This is a bright child who should be amenable to reason: old people do have to die. But there’s no reason, no reasonableness she will listen to. There’s some reference to progress, after a year or two she is “feeling more hopeful,” but it’s hard to find much hopefulness in all this. Let me be clear: I do not deny McCabe her right to her feelings. Only why make a reader go through all this? What is being offered to make it worth it?

To be fair to her, McCabe struggles mightily, and leaves no reference behind, in her further attempts to square the circle. In the long chapter that follows her examination of her own diaries (which one suspects were written some years later), she considers the co-constructedness of self and the impact of grief on the “dialogical” self. But because McCabe so badly wants to keep her mother alive in some symbolic form she keeps calling her process—and therefore the grieving process generally—a “relationship.” In doing this she risks doing a disservice to language and to clear thinking. Relationship with the dead as a metaphor makes sense; relationship in the literal way McCabe seems to want to mean it doesn’t—it’s a sentimentality. The closest to what she could mean (and, in her penultimate chapter, she does give some lip service to this) is a complex, necessary, internal representation that changes over time; but the changes are, all too obviously, coming from only one side of the exchange, from the self who imagines the selfobject. Regardless of the fact that we “talk” to the dead, and alas for us, they are only there in that, selfobject, sense. This is not a relationship in the way we usually mean the word—even though in the process of this “talking” the self may change too.

McCabe insists that all grieving is “relational.” There is the promise that this formulation will extend a concept that has much useful currency in psychoanalytic theorizing, i.e., that self is co-constructed, that we are who we are always in relation to an other, or to many others. That our grieving should be informed by and inform this condition makes perfect sense. When an important other is radically transformed or lost, we should be transformed as well. But how? This is an interesting question to which McCabe after much, much, wandering in the literature of psychology, psychoanalysis, anthropology and even selected contemporary literature, does suggest the beginning of an answer. Here’s what she comes up with:

When someone dies, particularly someone we love, who has become a very real part of our selves, the ultimate paradoxical experience occurs. We cannot negate the reality of physical death. Nor can we deny the reality of the emotional loss caused by this physical annihilation. Yet paradoxically, not only in the first moment or the first months of the loss, but perhaps on and on for years to come, there is a presence of the person who has died. A remembrance of what was, in varying possible levels of concreteness and salience. And there is the reality of that person inside ourselves that contradicts the fact that he or she is no longer physically alive. There is both a presence and an absence, each seeming to illuminate the other. (p. 154)

So there it is: loss makes presence stronger; presence makes the loss harder to bear. Well, maybe yes. And certainly worth contemplating. But is this always so? And for everyone? I’m not so sure. I’m inclined to think that (as we say on the consulting room) it all depends. I lost my own mother recently and I loved her. But my mourning process has been nothing like McCabe’s.

Ultimately, because The Paradox of Loss is essentially an explication of her own experience, McCabe falls into the trap of thinking her experience is universal. There is an important lesson here for psychoanalysts. (Even though McCabe’s book is not psychoanalytic: not psychoanalytic because in all the discussion of her essential case material, her own experience, there is nothing about antecedent conditions. What were things like before her mother died? What was her childhood like? Was there no father? What were the terms of her “friendship” with her mother? Was there no ambivalence? No strain? No separation struggle? On all these questions, she is silent.)

The lesson for analysts is this. One of the great contributions of psychoanalysis, clinically, and to intellectual life generally, is to legitimize enlightened introspection as a source of understanding. As analysts we feel some confidence that we know what our patients are experiencing because we know such feelings in ourselves. But the other side of the coin is that we can never know for sure. We’ve learned to check and keep checking. Is your grief like my grief? Is your mother like my mother? Is your relationship with yours like mine with mine? McCabe fails to check—or doesn’t want to know.

Henry M. Seiden practices in Forest Hills, New York and is a member of the Board of Directors of the division. He is co-author of Silent Grief: Living in the Wake of Suicide. (Scribners, 1987).

Barbara Zimmerman-Slovak, PhD

In the introduction of this book, the editors note that motherhood has been stressed in psychoanalytic literature, but usually because of mother’s powerful influence on her child. Mother as object has long been a topic of study, but not mother as subject. This is stated quite eloquently by one of the contributors (Bernardez):

[W]ith very few exceptions these works have in common an absence that is very critical; the subjectivity of the mother. The mother is treated as an object at the service of the child, an agent defined mostly by her response to the infant, but whose needs are not in the equation. We know that to respond in an empathic, accurate, and satisfying way to the child while preserving one’s differentiated identity, and indeed growing with the legendary task of motherhood, requires a well-developed adult who can negotiate the multitude of conflictual forks in the process of helping the child’s development. But the papers we read continue to deal with the mother as an undefined entity, singularly placed in the world with one goal only, the understanding and satisfaction of the needs of the child (pp. 299-300).

This book is an excellent collection of papers addressing the issues of what happens to a woman’s inner world during motherhood, what is her subjective experience, and how is a woman changed by the fact of motherhood. The Inner World of the Mother provides a much needed contribution to our field, and was a pleasure to read.

The book consists of sixteen chapters, covering topics ranging from normative experience to psychopathology and trauma. The chapters may be read in order or the reader may pick and choose those topics of interest, reading only those. Each paper stands on its own. I found all of the chapters insightful and well written, with some that were quite excellent. The editors, Dale Mendell and Patsy Turrini, wrote the introduction. In addition to providing a brief statement as to the need for a book such as this, the introduction briefly provides the reader with an overview of the book. Including the editors, there are fifteen contributors, each clearly quite knowledgeable about his or her topic.

The first four chapters draw the reader’s attention to what is normative and universal. Peter Blos, Jr., in the first chapter, presents clinical material and discusses it within the context of the theoretical position that development occurs throughout the lifespan and a belief that the mother’s inner world is “an important part of the psychological matrix of expectation that a child enters at birth” (p. 14). Blos stresses the importance of a three generational model: the mother, the mother’s mother, and the new child; and he states, “the maternal tasks are to integrate the new and the old, the real and the imagined, the interior and the social in such a way that a new, stable aspect of the personality is formed—the mother” (p. 5). In three clinical vignettes Blos describes and discusses the defenses of identification with the aggressor and projection.

Turrini and Mendell wrote the second chapter, in which they describe their hypothesis on maternal lines of development, including two maternal structures which they postulate begin preoedipally: the maternal ego ideal and the maternal caretaking functions. I particularly appreciated their comment at the end of the chapter that psychoanalytic theory has traditionally viewed as pathological what Mendell and Turrini describe in this paper as normative. They observe that if this pathologizing stance is taken in psychotherapy, it may lead to withdrawal or depression, and maternal self-exploration will be prevented. Henri Parens discusses mothers’ emotional investment in their babies. I found most interesting his discussion of motherhood as not a “developmental crisis” but as a “psychobiological ‘developmental’ process” (p. 45) marked not by regression, but by “an adaptive, transient increased flexibility in heretofore stable psychic structures, especially in ego functioning” (p. 48). Rosemary Balsam begins her chapter stating, “Often it is only when she becomes a mother herself that a woman experiences the full impact of her own internalized mother. Becoming a mother is a developmental process that carries with it positive and negative effects on a woman’s subjective sense of herself” (p. 71). Balsam discusses the idea and provides several case examples.

In the fifth chapter, Laurie Hollman writes about the treatment of two married women in their early thirties, both of whom had lost their parents, and became pregnant and had babies during the course of treatment. Hollman provides very nice descriptions of the treatments of these two women and the relationship of mourning in early adulthood and ambivalence about motherhood. She notes parental loss experienced by young women who then become mothers is not adequately addressed in the literature. This chapter provides a good contribution to the topic. In the sixth chapter, Diamond and Kotov provide a literature review and discussion of the topic of mother’s representational world from the perspectives of attachment theory and psychoanalytic theory. For the reader who is interested in theory, this is an excellent chapter.

The next three chapters continue the discussion of
what is normative and universal, drawing on clinical examples and theory. In a chapter entitled “The Capacity to Cure: Inevitable Failure, Guilt, and Symptoms,” Turrini furthers the discussion of the capacity for caring that was begun in the chapter on maternal lines of development by Turrini and Mendell. In this chapter, she describes the origins in the first year of life of the belief in mother’s invincible capacity to cure. This belief is modified over time, however, it remains a substrate of mother’s internal world. All mothers will fail to meet their grandiose expectations, and therefore, this is an inevitable source of pain. As in chapter two, Turrini tells us that knowledge of this dynamic can be helpful. Ruth Lax discusses another example of a normative fantasy: the “fantasy child.” Lax notes a woman is a mother forever, regardless of the age of her child, and that her relationship with her child is always affected by her reconciliation between her fantasy child and the child in reality. In chapter nine, Mendell explores what she states are three typical maternal fantasies: the one-body fantasy, the cornucopia fantasy, and the fantasy of parthenogenesis. She believes these fantasies begin in the omnipotent-perfective fantasy of infancy and persist and evolve throughout life, and are a part of normative maternal experience.

The next two chapters present “special” rather than normative circumstances. In the tenth chapter, Ricardo Ainslie discusses mothering of twins. Kerstin Kupfermann presents the treatments of four women who came to treatment contemplating adoption, and continued though the adoptions and afterwards as adoptive mothers.

In the twelfth chapter, Joyce Edward discusses the very complicated topic of mother’s hatred. She notes, maternal hatred, whether conscious or unconscious, whether controlled, inhibited or expressed, is at the least troubling and at the worst repugnant to both mothers and society at large. When mothers hate, they are experienced as ‘bad mothers’ by themselves and by their offspring. (p. 246)

Yet, in citing Winnicott, she also notes mothers “ambivalence is both inevitable and natural, and according to him, useful” (p. 246). It is Edward’s thesis that, for healthy mothers with healthy children, in the context of emotional support and favorable environment, hatred furthers mothers’ ongoing development. It is an interesting discussion.

The next two chapters focus on pathology. “The Inner World of the ‘Bad’ Mother,” begins with Oliner stating:

Women who imagine themselves to be bad mothers are plagued by thoughts about the negative impact they have on their children. … They have fantasies of being bad for their children and fear harming them; they frequently inhibit their own judgment with regard to child rearing in order to defer to the judgment of someone else... In this way, they deny themselves the right to their own opinions and absolve themselves from having to judge the validity of their persistent self-accusations. (p. 261)

These mothers may be abusive, or more commonly, due to feelings of guilt, they may be overindulgent or inconsistent. Oliner’s clinical vignettes, literature review and discussion are very good. In “Conscious Wishes of Infanticide,” Weinstein notes, “infanticidal wishes may be universal in mothers and mothers-to-be” (p. 286), although such wishes are typically regarded with horror and strongly defended against. Weinstein presents two patients who came to treatment due to conscious wishes of infanticide. Her discussion of the literature and of her patients is also very good.

“The ‘Good-Enough’ Environment for ‘Good Enough’ Mothering” by Teresa Bernardez is an essential chapter for this book. This chapter addresses the question of what is needed so that women can become good enough mothers; and, as is suggested by the chapter’s title, Bernardez is very clear that what is needed is a good enough environment. She begins the chapter stating, “Good-enough mothering is a complex and creative endeavor full of paradoxes, that requires a supportive environment, freedom of the self, amplitude of choice, absence of misogyny and creative and differentiated personalities in women” (p. 299). Bernardez’s premise is that mothers have very real needs to be met if they are going to be good enough mothers and that there is very little in the literature making explicit what is needed in their environment. Bernardez’s review of the literature and discussion is excellent, and makes an important contribution to this under attended to topic.

In the final chapter of the book, “Recent Research and Future Directions,” Mendell and Turrini discuss six recent studies, which they feel have extended our knowledge in this field; but they note, “psychoanalytically informed research on the impact made on mother by the work of mothering is still relatively sparse” (p. 321). The chapter, and thus the book, ends with recommendations for future research.

In summary, this very fine book addresses a too long neglected topic: What is the inner world of the mother? The contributors are well informed and the chapters are well written. Clinical examples and theoretical discussions are, for the most part, all very good. Over and over again I found myself reading something adding to my understanding of my patients and enriching my work. This book makes an important and long overdue contribution to our literature, and is highly recommended reading.

Barbara Zimmerman-Slovak is a psychologist in private practice in Wynnewood, Pennsylvania, and a psychoanalytic candidate at the Psychoanalytic Center of Philadelphia.
**LOVE AND LUST: ON THE PSYCHOANALYSIS OF ROMANTIC AND SEXUAL EMOTIONS, BY THEODORE REIK (INTRODUCTION BY PAUL ROAZEN).**

NEW BRUNSWICK: TRANSACTION PUBLISHERS, 2002; 639 PP., $34.95.

**SOME THOUGHTS ON THE REISSUING OF LOVE AND LUST**

The landscape of American Psychoanalysis is pockmarked with schisms. In spite of the recent landmark settlement by a handful of psychologists against the American and International Psychoanalytic associations, it remains so. Some several years ago, by way of example, I mentioned to a member of NPAP (a study group that eventually grew to an institute founded by Theodore Reik when training was unavailable for psychologists, osteopaths, social workers and other prospective non-medical practitioners) that his work of the past twenty-five years resonated with Shengold’s more recent publications on *Soul Murder*. He responded by explaining that he was unaware of the details of Shengold’s work and that Shengold was more than likely unaware of his. He sighed: “Alas, we attend different shuls.” And so it was and to some extent remains on the American scene which includes *inter alia* The Academy, The Association, Division 39 (and its subdivisions) and the Lay Folk and others who long ago gathered about Theodore Reik with the founding of the National Psychological Association for Psychoanalysis (NPAP).

It would be pointless to fascinate over whether details would have been different had Reik the psychologist (first ever to receive a PhD in psychology with a psychoanalytic dissertation) been more like the physicist Robert Waelder and had agreed to the terms set out by the Americans for immigrating lay analysts; the past recast is, indeed, *unbewusste* unknowable, and in any case, the psychoanalytic civil war, as Frosch, the emeritus editor of JAPA says something about Reik... and about me!

Perhaps the year was 1976. Reik and his work were already well known to me, as was Freud’s *On the Question of Lay Analysis*, in which Freud defended Dr. Theodore Reik against charges of quackery, of practicing *psychoanalytic medicine* without a license. I was familiar, as well, with his imprimatur within the community from framed documents on the walls of analysts whom I knew; the handwritten document under glass would read (from memory):

> I hereby attest that Dr. So-and-so is well-trained in the scientific principles and practices of Freud’s psychoanalysis and fully-fit to pursue its practice, independently.

> Sincerely, Dr. Theo. Reik

But back to the story. Four of my fellow candidates (Ann Gilpin, Jeffrey Kauffman, Beverly Mitchell, and Victor Schermer) and I had heard rumors that there was a tape of Reik somewhere hidden in the belly of the Institute, somewhere in PSI’s archives. We petitioned Ed Parnes, one of Reik’s students and PSI’s Dean, and after sufficient guarantees were proffered, we were given a date on which

Reik was not one to pull his punches. In any case, Reik did found NPAP, soon-to-be home to the *Psychoanalytic Review*, and within several years began traveling down to Philadelphia on weekends to train those who could not there find acceptance in the medical institutes and opened, with his interested colleagues and students, the Psychoanalytic Studies Institute (PSI) in the early 1950’s. NPAP continues to thrive in New York and, while PSI closed its psychoanalytic training track in 1980, one spin-off group (PSP) continues training in the Philadelphia area. As I had myself trained at PSI and thereafter directed it for some dozen years when its name altered to represent the broadening scope of analytic practice (Institute for Psychoanalytic Psychotherapies, 1980-1998), I was particularly pleased when approached to comment on the occasion of the reissuing of Theodore Reik’s *Of Love and Lust*. If he was not to be my analytic father, he was, indeed, my analytic grandfather... or grandmother. Allow me for a moment to diverge, then, with a personal historical anecdote that, in the end, says something about Reik... and about me!

Perhaps the year was 1976. Reik and his work were already well known to me, as was Freud’s *On the Question of Lay Analysis*, in which Freud defended Dr. Theodore Reik against charges of quackery, of practicing *psychoanalytic medicine* without a license. I was familiar, as well, with his imprimatur within the community from framed documents on the walls of analysts whom I knew; the handwritten document under glass would read (from memory):

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we might come to the Institute with a proper reel-to-reel recorder, one that wouldn’t snag the old and precious tape. On the appointed Sunday, we arrived carrying with us a carefully chosen bottle of toasting wine and our machine, which even then was outdated. The apprentices had arrived to peer in through the Master’s window in order to vision the Master at work. Glasses were set, bottle uncorked, tape loaded onto the Webcor tape machine; alia facta est, the die was indeed cast, and anticipations ran high. One click and the voice of an unidentified osteopathic psychiatrist was heard on the scratchy tape (again, from memory):

Dr. Reik. You have been practicing Psychoanalysis for more than half a century. You walked and talked and argued with Freud and he gave you the first prize in psychoanalysis [actually, it was a prize that was shared with two medical analysts; the division of such prizes among Lay and Medical recipients was a practice that lasted for several years]. He even carried a hobbyhorse up the stairs to your flat for your son to play upon. We are just beginning our journey into the Unconscious. Maybe you have some advice for us.

This was the moment for which we had waited. There was a not insignificant pause before the heavily accented Eastern European voice of an obviously elderly man was heard speaking slowly and methodically, one word at a time:

Be friendly. These New York analysts don’t even let their patients smoke. If your patient would like a cigarette, maybe you could get them an ashtray and then listen! and listen some more for the surprises of psychoanalysis.

And so it was that five neophyte analytic therapists came to know that their institute’s founder was human, was humorous... and had a voice.

There have been many traditions put forth in psychoanalysis; we are a community that functions, at least in part, by inherited traditions. In the time my four colleagues and I had trained, the rhythms of Hartmann, Kris and Loewenstein’s ego psychology and its rigorous analysis of ego functions and resistances and the ego psychology paradigm, in general, held sway in North America and most of the prominent psychoanalytic journals throughout the world. Where Freud, in his Papers on Technique, had outlined suggestions to those practicing analysis, in the post World War II period his students had built a rigid scaffolding to support der alte Hexenmeister’s more impressionistic technique. Reik, on the other hand, stayed closer to that more heimlich style and spoke of surprise in the analyst and his or her need for genuineness. The following comments made by Reik a half century ago (1948) resonate with certain sentiments that today appear not only in interpersonal approaches to analysis but have found their way into mainstream thinking, as well.

The analyst, as he is often trained in psychoanalytic institutes, is an interpreting automaton, a robot of understanding, an independent analytic intellect without ever becoming a personality. He confuses the calmness and control of the observer with absence of sensation and feeling. When he sits behind the patient, he tries to be everything else but himself. But only he who is entirely himself, only he who has the sharpest ear for what his own thoughts whisper to him, will be a good psychoanalyst. I am of the opinion, not shared by many New York analysts, that the personality of the psychoanalyst is the most important tool he has to work with. (p. 272)

As the reader of the above may sense, Reik was not one to pass up an opportunity to offer an edgy fillip to those whom he considered the posturing pretenders within the analytic establishment.

Reik’s oeuvres were broad, variegated and textured, though uniformly presented in the warm, and heimlich, conversational and investigative style of his teacher, Sigmund Freud. By the appearance of Grinstein’s first series in his Index of Psychoanalytic Writings (1958), nearly 250 of his published pieces were listed beginning in 1913; Reik continued publishing till shortly before his death on the last day of 1969.

There were more than a half-dozen book-length works on Biblical themes (and dozens of papers), including those on religious ritual and Divine revelation on Sinai (1931, 1951, 1959), on Eve and Lilith (1960), and on Isaac and Jesus (1961). In each, the author invited the reader on something approximating an archaeological dig. His style was closer to Freud’s and the students of Ferenczi (the likes of the Balints and Edmund Bergler, and Reik’s own student Robert Lindner) than to the ego psychologists. Unlike Ernest Jones who focused heavily on the symbolic (e.g., in his 1912 piece on salt where he equates Salt=Semen=Shit etc.) and for whom Reik often had some barbs and nigh-on mocking comments (cf. 1952, p.36, where he calls him Emperor Jones), Reik’s emphasis was on the manner by which various elements flowed into one another psychologically. As to initiation rites, for instance, other writers tended to look at the homology between the ritual surgery and castration and parricide. Reik was circumspect in his
It would perhaps be preferable to say that it [the cultural superstructure] was built on the enduring effects of that initiation, namely on the bond between the older men of the tribes and the newly accepted young men... (forming) a firm tie between the generations and a strong link in the chain of traditions.

There were many volumes, as well, that looked at the inner processes of the analyst. The newcomer to Reik’s writings may find “Jessica, My Child” (in The Secret Self, 1952) a particularly compelling demonstration of the manner in which the life of the analyst, his or her reveries and associations with literature, and the capacity to integrate these into a whole may not only be clinically relevant (qua analysis of what we today think of broadly as countertransference) but enriching to the personhood of the analyst. The analyst was inseparable from the work of analysis—maybe like the farmer who doesn’t exist without the farm. Listening with the Third Ear (1948; by 1949 this work was into a third printing) is, perhaps, Reik’s best known work on clinical process, though Reik’s memoir pieces (e.g., Fragment of a Great Confession, 1949; The Search Within, 1956, and others) were peppered with a decidedly holistic way of looking at clinical process and the psychoanalytic clinician’s life with analytic purview, as was his From Thirty Years with Freud (1942; an interesting piece which looks at both the life of his then-dead Master and of the life of his Master’s much younger protégé). On Love and Lust: On the Psychoanalysis of Romantic and Sexual Emotions was first published in 1941. It was reissued four years after Reik’s death with a thoughtful forward by Murray Sherman, which in its brief ten pages offered a retrospective of Reik’s life and of his life work. The reissued printing (pagination is identical to 1974 Sherman edition) comes with a brief forward by Paul Roazen. It omits Sherman’s interesting piece and in no substantive way does it either replace or add to it. Perhaps, my discomfort for Roazen’s preface is a matter of personal taste on my part. The first time I heard Roazen speak (sometime in the mid-1980’s at a public lecture at Temple University), I was surprised by his use of the word “diabolical” to describe Freud and asked him about it. He commented that the word was quite fitting for any theory that presents anthropos as constitutionally bisexual.” The words of King David after hearing that his friend had been killed (Samuel II, 1:23) ring in my ears: “How are the mighty fallen in the midst of battle/Jonathan, slain upon your heights.”
From 1990-1994, I had the pleasure to chair a study group on Freud’s writings. As we ended, clinicians and non-clinicians commented that Freud was unique and decidedly unlike many contemporary writers in psychoanalysis, inasmuch as he wrote clearly enough so that we each knew when we disagreed with what he was saying. About one of these less clear works, Eckardt (1992) commented: “It is full of abstractions and conceptual formulations that require the assistance of a non-existent special dictionary. It pretends an aura of depth and scientific wisdom that it rarely delivers. It obscures rather than clarifies.” Reik was a good student of Freud and like his Master garnered no pleasure in being obscure. He wrote both for the interested analyst and for the sentient layperson. Reik, early on in Love and Lust, spells out his frankness, as always, in simple language: “I do not shrink from calling a spade a spade, but I am reluctant to call a rake a spade, even if they stand side by side in the same barn” (p. 15).

I shall leave it to the reader to bathe in Reik’s literary style, in his love for Shakespeare and his obsession with Goethe, and most especially in his reveling in the elegant arguments that he proffers for the psychological method of thought as applied to this or that bit of everyday life. Like Freud’s, his work stimulates disagreement... as he functions as an able interlocutor for the reader’s thoughts.

An anecdote and a thought with which to end. Reik (1952) reports that when he met Freud one evening walking on the Ringstrasse, he was admonished (p. 3) not to scatter his “intellectual energy on too many different subjects. It would be better,” Freud explained, “to concentrate it on one problem at a time, and then after you have led to its solution, to take on another and concentrate on that.” I am moved to say that all analyses are wise to decide for themselves whether such admonitions as are occasionally made by our analysts and mentors need be, from time to time, ignored. The psychoanalytic community was blessed by Reik’s obstreperous willingness and bravado in going his own way and taking on the spectrum of unconscious processes that accompany each of us in our trek to make sense of and find meaning in our lives.... and that he found in his half century of practicing psychoanalysis. I close, then, by paraphrasing Psalm 34, as I commend those who are unacquainted with Reik and those others who have been away from his writings for too many years: O, Taste and See that Reik is Good.

References

Howard H. Covitz is a clinical psychologist in private analytic practice in Melrose Park, PA. He was on the faculty and Director of the Institute for Psychoanalytic Psychotherapies and has recently been visiting faculty at Temple University’s Department of Statistics, Temple University’s Department of Mathematics, and Chestnut Hill College’s and LaSalle University’s Department of Psychology. He is the author of Oedipal Paradigms in Collision: A Centennial Emendation of a Piece of Freudian Canon (New York: Peter Lang, 1997).

Barry Silverstein calls his new book a “Freud 101,” and indeed the most likely audience for this introduction to Freud’s theories would seem to be college students. Silverstein tells us that in contemporary introductory psychology textbooks Freud remains the single most cited author, and that psychology students should therefore understand the basics of his work. But this book has a more ambitious goal than simply to guide undergraduates through Freud’s theory; it also promises to address the development of Freud’s thought in its historical context and to uncover and demystify Freud’s “self-crafted legend.” Because college students these days are apt to be taught an anemic version of Freud’s thought, often presented as an archaic and sexist set of developmental or psychological models to be memorized for a multiple choice exam (i.e., oral, anal, phallic; id, ego, superego), a book that presents the insight and complexity of Freud’s thought, while straightforwardly acknowledging its problematic aspects, is particularly welcome.

Freud’s claim to discovery and originality is Silverstein’s most frequent object of critique. He points out repeatedly where Freud has failed to cite or acknowledge those who influenced his thinking. This gentle criticism also serves the purpose of providing a more thorough historical context for Freud than even more advanced students are typically exposed to. Silverstein explains how Freud’s thinking borrowed directly from predecessors and contemporaries in other fields, and speculates on works and people that might have influenced Freud more remotely, i.e., things Freud likely read in his early education, courses he was known to have taken at university, and people he might have come into contact with. The discussions of these sources and resources tend to be brief, but Silverstein provides many useful references for the interested reader to pursue. In addition to showing these known and likely intellectual influences, Silverstein makes use of Freud’s letters to Fliess to speculate on personal motivations underlying some of his theoretical formulations.

The book is organized chronologically, with short chapters addressing the major phases of Freud’s thinking and writing. In each of the many chapters, Silverstein explicates the major writings of the phase, and comments on the biographical events and intellectual atmosphere that he believes have influenced that work. At the end of each chapter, he provides references for further study. One weakness of this format is that the chapters are of vastly uneven lengths and many seem to have no clear outline or argument, instead moving from straight explication of theory to fascinating but tangential facts about Freud’s life, to exposures of distortion, error and irrationality in Freud’s writing. In this, as in some other aspects of this book, better editing would have made for smoother and more rewarding reading. Nevertheless, there is much of value here for the student of Freud.

Silverstein begins with a prologue in which he sets out his justification for providing students with a “balanced” account of Freud’s theory. He writes, “My concern is what Freud wrote and what Freud did, and what it meant to him at the time.” In this way, he distances himself from Freud’s attackers and defenders. In a separate brief introduction, however, Silverstein emphasizes how Freud used rhetoric with the goals of presenting himself as heroic and original and of attempting to control the official history of psychoanalysis. By this manner of presentation, Silverstein invites the reader to judge for himself, promising implicitly that he will be debunking much of the Freudian myth in the pages that follow. Such an introduction will certainly entice the reader, but it may be somewhat misleading as the introduction for the entire book in its suggestion that this is the book’s primary theme. In fact, the main point is to guide the reader through Freud’s individual intellectual journey.

Silverstein goes on to provide a brief account of Freud’s early experiences studying with Charcot, followed by another short chapter on his work with Breuer. In this latter chapter, he describes some early ideas Freud was exploring, including psychic conflict, compromise formation, the symbolic use of the body, and ideas of nervous energy. In the same chapter he describes how Freud compromised with Breuer on areas of conflict in order to have access to publication, and provides evidence about how the facts of the Anna O. case were distorted in order to better fit the theory. This mix of elucidating the theory and critiquing the theorist is interesting, and one only wishes it had been enriched by more information about each topic and more commentary on the significance of the alleged intellectual compromise.

In the next chapter, “Sex and Neuroses,” Silverstein shifts back to a straight explanation of the theory. He describes Freud’s growing conviction that sexuality lay at the core of neurosis, and explains Freud’s ideas about...
energy and excitation. Silverstein then suggests Freud’s use of cocaine and Freud’s own sexual frustration as likely factors contributing to his theory of actual neurosis, and points out how Freud bolstered his image as an iconoclast by deemphasizing the continuity of his own ideas about sexuality with those of contemporary physicians. A highlight of this chapter is Silverstein’s explication of the ways that Freud borrowed ideas from other areas of science. For example, he speculates, “[Freud’s] search for specific causes of specific symptoms was influenced by advances in bacteriology and the rise of germ theory.”

Creative speculations of this type are scattered throughout the book, although Silverstein often throws them out without going on to offer support for these ideas or further reflection upon them. For example, Silverstein presents an intriguing hypothesis about the religious quality of the psychoanalytic movement being connected to late 19th century revivalist trends. In a chapter called “Defending the Sexual Theory,” Silverstein reports that Freud had a superstitious belief that he would die between ages of 61 and 62, and speculates that this fact colored Freud’s approach to the metapsychological essays of 1915, i.e., he saw them as a “last testament.” These are stimulating ideas, although the reader is at times left unsure of Silverstein’s reasoning, as they are asserted rather than argued.

In chapters on the development of dream analysis and on childhood sexuality, Silverstein again criticizes Freud’s overblown claims to originality and his failure to cite teachers whose ideas he borrowed or contemporaries whose writings were in agreement with his. In other chapters, like the one on the seduction theory, he explains important concepts (e.g., deferred action), and at the same time critiques Freud for having bluntly influenced and disregarded his patients in order to confirm his theory. In discussing childhood sexuality, Silverstein gives accounts of the Oedipus complex and of castration anxiety and penis envy that are disappointingl brief, given that these concepts are controversial in popular culture and that his intended audience of college students may have been exposed to distorted versions of them. A later discussion of Freud’s theories about female development and the super-ego is similarly brief, with the usual quotations reflecting Freud’s befuddlement presented but left without comment. Nonetheless, these presentations certainly provide stimulating jumping-off points for class discussions.

Silverstein provides a very comprehensible explanation of Freud’s shift to the structural theory and the change in his theory of anxiety. Later chapters on defense mechanisms, character types and Freud’s writings on culture seem brief and cursory, however, as though the effort to cover Freud’s work so exhaustively has taken its toll on the author’s stamina. In the areas of Freud’s writings on religion and culture, for instance, Silverstein provides references but says little about the actual theories of those who influenced Freud, in contrast to the very pertinent information he provided in the earlier chapters on “Mind and Body,” and “The Seduction Theory” about the theories of other psychologists, physicians and philosophers.

The book concludes with a four page epilogue which reiterates its major points: that Freud’s thinking must be seen in historical context, and that despite its many problems, the questions Freud attempted to confront were basic to human life and his insights were significant. Certainly, these points are important and valid, but one feels that a more synthesizing conclusion might have been provided, especially given that this book lacks an index and therefore makes great organizational demands on the reader. I wondered, given Silverstein’s assertion in the prologue that Freud’s thinking has contemporary relevance, why there was no discussion of how Freud’s dilemmas (e.g., linking mind and brain, validating the theory, thinking of mind in mechanistic vs. hermeneutic terms) have carried forward into modern psychoanalytic thinking. Why is no assessment offered of the significance of all the fudging that has been documented throughout the book, and no sense of how one might then evaluate the validity of the theory? While I am not suggesting that readers are incapable of drawing their own conclusions, it is unusual for an author to leave so much hanging, especially in a book that is intended to be read by novices. Perhaps this omission is simply a result of the flawed editing that mars the book throughout.

These minor quibbles aside, it is clear that What Was Freud Thinking? will provide a very useful accompaniment for college courses that treat Freud’s theories. It is appealing in its down-to-earth, straightforward language and its efforts to make aspects of psychoanalytic theory accessible: for example by referring to Woody Allen movies. It lays out the essence of the major Freudian concepts in simple terms, and raises significant questions that will enliven class discussions. The value of this book for more advanced students of psychoanalysis is less in its explication of theory, for which there are many thorough guides, than in its extensive collection of references to books about Freud and psychoanalysis and to contemporary sources that influenced Freud.

Wendy Katz is a candidate at the Columbia University Center for Psychoanalytic Research and Training. She practices in New York City.
Operative Groups: The Latin–American Approach to Group Analysis, By Juan Tubert-Oklander, Reyna Hernandez de Tubert. London: Jessica Kingsley, 2004; 256 pp., $36.95. Macario Giraldo, PhD

This book written by two Mexican analysts presents some new untapped regions of group analysis. The authors come across throughout as very experienced clinicians who, in addition to treating patients on the couch, travel comfortably in practically every aspect of psychoanalytic application to groups. They discuss primarily from a theoretical point of view the concept of Conceptual Referential Operative Schema (CROS) and how it is applied in groups such as: the small group, therapeutic communities, multifamily therapy groups, supervision and training of psychotherapists, learning groups, and laboratory and workshop groups.

The book is rich in group theory from Freud through Bion, Foulkes and other writers. Perhaps because this is an introduction of the major ideas of Pichón Rivière, more detailed clinical examples of the application of the basic concept of CROS to the small psychoanalytic group is scarce as opposed to the larger groups, and learning groups. The inspiration for the book appears to be an attempt to bring to the English-speaking world the personality and the work of a remarkable Swiss born Argentine psychoanalyst, Enrique Pichón Rivière. The authors cover aspects of Pichón Rivière’s life and his extraordinary dedication to the work with psychotics and regular neurotics using an approach that he preferred to call social psychological.

In a number of ways, his approach resembles that of the American psychiatrist Harry Stack Sullivan who had begun in the late 1920’s, a decade before Pichón Rivière in Argentina, to use his concept of interpersonal relationships as central in the understanding and treatment of mental afflictions. Sullivan, however, did not conceptualize the use of the group as Pichón Rivière did from the beginning, starting a pioneer work even before Bion, Rickman and Foulkes did in Europe.

The authors point out that Pichón Rivière felt that there was an essential identity between the processes of teaching and learning, on the one hand, and of therapy, on the other. He believed in a continuum of feeling, thinking, learning, understanding, and healing, which was organized around the axis of rational action. For him, that was the crux of the matter: only action was able to modify reality, and the goal of dynamic groups was to create the basis for an effective operation, both for the group and for the individuals that composed it; hence the name ‘operative groups.’ (p. 20)

Further explaining the goal of operative groups the authors state:

The final goal of operative groups is, therefore, to attain a higher order learning which transcends the mere acquisition of information and the development of skills. This experience of praxis gives the members an opportunity to learn to learn and to learn to think. This amounts to a major change in their personalities and their interpersonal and social relations. (p. 57)

The approach described by the authors is remarkable in terms of the disciplined and scientific attempt to apply psychoanalytic concepts to the work with groups. It is of special interest if we are to apply these principles to a diagnostic analysis of the CROS of institutions and organizations. Communication theory and group dynamics theory are used carefully and with promising possibilities for analytic insight into the functioning of small and large groups. It is questionable to this reviewer whether this approach can truly utilize the basic tenets of psychoanalysis, transference, repetition, the drive, and especially the unconscious, and in contemporary trends, intersubjectivity as a central direction in doing clinical work especially with the small psychoanalytic group. The way the approach is described would indicate that the free flow of process in the psychoanalytic group is interfered with an assigned rational task. If that is so one would question to what extent this method used in the small psychoanalytic group enhances appreciation for the mysteries and discoveries of the unconscious, for a journey into the “unthought known.”

Macario Giraldo is a psychologist in private practice in Washington, DC and director of the National Group Psychotherapy Institute at the Washington School of Psychiatry.

Macario Giraldo, PhD

This book has a remarkable diversity of authors from which the reader will have an opportunity to pick and choose. From the United States, Europe and the Middle East a number of ideas on both theory and application of what is called “the large group” is presented successively although at times, repetitively. There are internationally well known psychoanalytic writers such as Otto Kernberg, Malcom Pines, Patrick de Mare and others and those less known have sometimes unique and interesting ideas to contribute. The title “The large group” is somewhat deceptive. There are many kinds of large groups rather than the large group. Since almost if not all of the authors are group therapists the expression “the large group” conveys a reference to the now familiar large group meeting at local, national and international meetings of the various associations of group psychotherapy. In this respect I share Hopper’s warning in his article, “Obviously, the findings from the study of large groups as training events within organizational settings should be referred to other kinds of large groups with caution.”

Malcolm Pines of the Institute of Group Analysis in London gives a brief, scholarly presentation of the development of the large group from Bion, Rickman, Foulkes, and Patrick de Mare. He brings out the contributions of other pioneers such as Trigant Burrow in the U.S and Pichón Rivière of Argentina.

Kernberg and Hopper discuss the classical ideas of Melanie Klein as they apply to the large group phenomena. Kernberg extends his now familiar object relations concepts to expand on the modern phenomenon of terrorism and the prevalence of violence in society. Hopper adds a fourth assumption to Bion’s basic ones, what he calls Incohesion: aggregation/massification. This concept has certain similarities to Lacan’s register of the real. Hopper connects it with the dynamics of violence in individuals and large groups. There are a number of articles of great interest for those working with inpatient groups, those of Robert M. Lipgar of Chicago, Joseph H. Berke, of the Arbours Crisis Centre in London, and Rolf Schmidts of Munich.

The large group as a means of training for work with organizations, to understand political process, to learn to contain and utilize regression are covered by Lamis Jarrar of Washington DC, Gerard Wilke of London, Joseph Shaked of Vienna, Austria, Joseph Triest of Tel Aviv and Thor Kristian Island of Oslo. Haim Weinberg of Israel ventures into the world of the internet and has some interesting conclusions about his work with a large group through the internet. Lamis Jarrar openness into her unconscious process as she writes and works as a conductor is refreshing and very pedagogical. The article by Wilke opens up a new direction in the understanding and utilization of the large group. The book ends with an epilogue by Patrick de Mare of London and Roberto Schollberger of Zurich where important philosophical ideas are used to project the future of group work and especially of what de Mare calls the median group. I believe de Mare’s ideas and developments will carry further the application of psychoanalytic ideas to the work with groups and organizations.

De Mare is clearly anchored in a rich psychoanalytic tradition yet he is not shy to venture out into unexplored applications with the median group. De Mare writes about and conceptualizes a kind of large group The Median Group. It is probably the most applicable and promising kind of “large group” I am still unclear about the therapeutic real benefits of other large groups. I have seen some that show promise, and when this happens is when they lead to building up community. It is not an easy enterprise, and the role of the leader/leaders is central. In these cases the creation of dialogue in the membership takes on a life of its own almost and it is a manifestation of the work done by competent leaders and the clear boundaries, task and purpose of the group.

Throughout the articles there is a dynamic of classical psychoanalytic theory application mixed with sociology, and organizational dynamics. There is an attempt to translate psychoanalytic theory into a broad social and even political realm. It is a very difficult enterprise. I was glad to notice that a few of the authors seem familiar with the work of the psychoanalyst Vamik Volkan of the center he has established at the University of Virginia. Volkan has a lot to say about the “large group” because of his research and involvement with a number of the contemporary conflicts in Yugoslavia, the Middle East and other regions of the world.

The book is a very good reference for those interested in expanding the rich concepts of psychoanalysis to the work with community groups, hospitals, organizations and training activities.

Macario Giraldo is a psychologist in private practice in Washington, DC and director of the National Group Psychotherapy Institute at the Washington School of Psychiatry.
FATHER HUNGER: EXPLORATIONS WITH ADULTS AND CHILDREN
BY JAMES M. HERZOG, HILLSDALE, NJ: ANALYTIC PRESS, 2001; 324 PP., $49.95.

JOHANNA KROUT TABIN, PhD, ABPP

A MAIN COURSE WITH TOO MANY TRIMMINGS

James Herzog’s apparent mission in this book is to rectify the imbalance in current psychoanalytic theory and practice of neglecting the role of the father in personality development from the earliest days of a child’s life. In spite of Freud, with the important exceptions of Loewald (1951) and Edith Jacobson (1964), psychoanalytic thinking has privileged the mother/child dyad. Loewald pointed out the father’s role as a bulwark against a child’s fear of maternal engulfment and Jacobson pointed out the importance of the father as offering the child proof that one could be a different being from the mother. Relatively recently, Abelin (1971) and Lamb (1976a, 1976b) encouraged more emphasis upon the significance of the father. Herzog himself coined the phrase “father hunger” for his report (1980) on treating 12 toddlers whose night terrors revealed their need for their absent fathers.

Reading this book should convince one of the necessities for a constructive father figure in the development of healthy boys. The author does not really provide any theory and not much clinical evidence as to the meaning of a father figure to girls. This slantedness does not limit the scope that Herzog tries to bring to his text. In what sometimes reads as if it were his magnum opus, he repeats a number of times his understanding of what psychoanalysis accomplishes, his idea of the progression of mental processes, his framework for psychoanalytic work. It seems to be important to him to show his originality of thought (or at least of phrasing) and the scope of his European, cultured background. One subtext is the impact of trauma, particularly the Holocaust, on succeeding generations.

Much of the book is devoted to Herzog’s process notes from several cases. These he gives in a spirit of collegiality, sharing his thoughts and personal associations in response to patients’ material. He does not offer what he might have recognized as the reasons for his particular reactions; but they are not really necessary to communicate in a book for publication, even though they must have been germane for him. Unfortunately, the spirit of collegiality often shifts to the tone of a master who explains psychoanalysis to newcomers to the field or even to intelligent laypersons. This seesawing is underscored by the repetition of themes already clearly stated in earlier chapters. It gives an impression that the book is largely made up of case studies Herzog previously presented to other audiences. Father Hunger seems to be an edited book in which all of the chapters are by the same author. There are gems of insight, of course, that one might expect from such an experienced and able psychoanalyst. For example, he mentions first on page 34 that boys’ recognition of sameness to their fathers is useful for boys for learning to deal with mutual concerns and in particular to modulate aggression. Herzog goes on to explain, on the basis of his experience: When a father is absent, if he is revered/valued as an important family member, this mitigates against a deformative effect of his absence upon the son’s developing personality (p.35). A repeated but interesting theme contrasts a mother’s homeostatically attuned relating to a child with a father’s disruptively attuned relating. The significance of this distinction is that the father’s behavior requires mental gear shifting by the child, paving the way for flexibility in the larger world.

Another repeated theme is applicable to thinking about the progression of any analysis. Herzog keeps in mind the natural development of mentation from expressive action to interpersonal action to symbolic action (which he calls displacement). Under emotional pressure, he sees this progression in reverse order. Thus, acting out is typical of the most distressed, next comes interaction—at first with sharply defined requirements for the analyst/other—and gradually, increasingly, the ability to deal with inner situations symbolically. He demonstrates the process in adult patients as well as in children he has treated.

The clinical vignettes are clear and instructive. It is distracting, however, to read about familiar concepts in the terminology that Herzog prefers. Thus, he always refers to symbolization as displacement. Analytic space becomes play space, which he consistently refers to in German, as Spielraum. In discussing the patient’s larger world, he uses Umwelt rather than “surround,” to which we are accustomed in English. (Maybe Herzog considers Umwelt, literally, “world around,” to connote a larger area, including the cultural and historical, but he does not explain this.) Most of the time, he translates the German word before continuing to use it. Once in while he skips this step, e.g., Schweinshund on page 149, without a helpful translation of “pig hound.”

The worst example of the sloppiness of the editing is on page 56, where Herzog is describing the exciting quality of a father’s play with a child and refers to it as Kamikaze action. In another example, in Chapter 16, he presents the case of Tommy. Tommy starts out to have a single younger sister named Abby who was born before the
boy came to treatment; and then turns out to have a single younger sister named Amy who is born a long time after treatment begins.

There is an admixture of familiar psychoanalytic wording, straightforward expression and ponderous, or gratuitously difficult phrasing or simple pomposity (citing what is patristical and then, parenthetically saying *nom de père*). In one carryover from his background in medicine, Herzog talks frequently about a shift to the left (from haematological deterioration) rather than regression. Yet, the book has an important message.

The generous supply of process notes from a variety of analyses is in itself a boon. These pages are lively with a sense of immediacy. Above all, the necessity of a sound father image for constructive integration of a man’s inner world becomes palpable as one learns how deformed egos can be ameliorated through dedicated analytic work.

**References**


Johanna Krout Tabin is a longtime member of the Division. Her affiliation is with the Chicago Center for Psychoanalysis.

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**FROM PHILOSOPHY TO PSYCHOTHERAPY: A PHENOMENOLOGICAL MODEL FOR PSYCHOLOGY, PSYCHIATRY AND PSYCHOANALYSIS, BY EDWIN L. HERSCH.**

**Toronto: University of Toronto Press, 2003; 416 pp., $68.00.**

MARILYN NISSIM-SABAT, PHD, MSW

From *Philosophy To Psychotherapy* has four parts comprising twelve chapters. Chapter 1, “Know thy Philosophical Self,” is introductory; Part I: Ontology: The Groundwork and Foundation, has two chapters: “Ontology (Level A): The Question of Reality,” and “Ontology (Level B): Our Basic Problem or Relation to Reality.” Ontology A and Ontology B provide the foundation of Hersch’s hierarchical schema of “levels of theoretical inquiry.” Going up from the base, we have General Epistemology (C), Validity (D), Field-Specific Epistemology (E), and finally, Psychology (G). The book also contains critical discussions of classical psychoanalysis, object relations theory, self psychology, intersubjectivity theory, constructionism/constructivism, ontological relativism, behaviorism, cognitive psychotherapy, and biological psychiatry. All of the thematic material in the book is organized by Hersch’s own model, which he calls the “Beams-of-Light-through-Time” model. He describes this as follows: “The sR (subject-in-relation) illuminates a portion or an aspect of its o (object, or world).” Hersch adds, “The sort of ‘Consciousness’ with which we are now dealing is conceived here as less akin to Descartes’s isolated Cogito than to Heidegger’s concept of *Dasein*, or Being-in-the-World” (p. 75). Subsequent discussions of human existence as characterized by its three temporal modes of past, present and future clarify the Beams-of-Light-through-Time model. Hersch believes that this model, which is based on the philosophical stance of ontological realism derived from Heidegger, transcends both subjectivism and objectivism and provides a new existential-phenomenological paradigm for psychotherapy. Hersch illustrates his model through the use of case studies from his own practice.

Hersch’s book is an attempt to clarify and develop the relationship between philosophy and clinical psychology. It is highly innovative and replete with fascinating discussions and important insights. Most importantly, the book is quite unique, bold, and of great value in attempting to create a methodology that would enable systematic conceptualization of the philosophy-clinical psychology nexus. Nevertheless, despite its great strengths, *From Philosophy to Psychotherapy* manifests a flawed conception of philosophy. The coexistence of this flaw with the book’s strengths complicates the reviewer’s task of evaluation. Put another way, to do justice to this particular book, the reviewer should show that awareness of its flaws is necessary if one is to benefit maximally from studying it.

In the last chapter, Hersch, a Toronto psychiatrist with extensive background in philosophy, explains the tasks he took up in writing the book:

The nature of philosophical work is such that,
In order to carry out these tasks, Hersch uses his own philosophical perspective as a case study. That is, all of the concepts introduced and the content that fills in the slots in the hierarchical system presented in the book are drawn from his own philosophical stance. Inspired by Heidegger, Hersch is committed to “ontological realism.” Hersch claims that utilizing his own views is merely illustrative, in order to show the value of the methodology. This is certainly a possible reading of the book; nevertheless, since Hersch argues fervently for ontological realism as the best philosophical stance for the psychological disciplines, the claim that his stance is only illustrative of the method lacks credibility.

The problem is that the author’s notion of the nature of philosophy is flawed and consequently misleading. Hersch negates philosophy when he claims that it begins necessarily with assumptions, and with acceptance that it must begin with assumptions: “Throughout this work I will be maintaining that the most fundamental of our foundational philosophical assumptions—which nevertheless must remain assumptions—are those dealing with the issues described in our hierarchy as belonging to the ontological level(s) of inquiry” (p. 24). Hersch provides no explanation as to why these ontological claims must remain assumptions, of why, that is, they are not subject to a questioning that potentially could lead to conclusive rejection or acceptance of them, or why one must accept that they must remain assumptions.

For example, Hersch states that his own assumption is ontological realism (Ontology A level) and that this assumption is the foundation of all that follows in the book. He defines ontological realism as the view that “there exists a Reality or some form of Truth that is not merely or entirely dependent on us” (p. 37). He maintains that “relativism” is the opposite view, i.e., that no such reality, or “Reality,” exists. But, since for Hersch this too is an assumption, why should we prefer one assumption to another, ontological realism to relativism? Certainly, throughout the book, Hersch argues extensively and passionately against relativism. But why should this matter, since one could also argue cogently and passionately against ontological realism, as numerous philosophers from Plato to Husserl and beyond have already done? If one assumes that assumptions are necessarily the foundation, how can one refute relativism? All assumptions, especially when held to be foundational, are equal qua assumptions, especially when also held to be necessarily assumptive.

Moreover, it is one thing to say that all philosophical stances are based on assumptions, for this may be the case, despite all efforts by philosophers to avoid basing their views on undemonstrated principles, i.e., assumptions. For example, in his *A Treatise of Human Nature* (Oxford University Press: London, 1958), David Hume based his system on the principle that “all our simple ideas in their first appearance are deriv’d from simple impressions, which are correspondent to them, and which they exactly represent” (p. 4). This is indeed an assumption, but to Hume it was a self-evident principle. By and large, philosophers begin with what they take to be self-evident, not with what they take to be assumptions. For Hersch, it is self-evident that philosophy begins with an assumption. However, it does not follow from the circumstance that one might be mistaken as to what is taken to be self-evident, as, for example, Hume was mistaken, that self-evidence as a criterion of truth should be rejected.

Though it may be the case that philosophies do begin with ontological assumptions, it is quite another thing to say that philosophy begins with acceptance of the notion that all philosophical perspectives are, and can only be, based on assumptions. The latter claim is simply incorrect. Some philosophers, e.g., Gadamer, maintain that one should accept that all philosophies begin with assumptions; but it is patently incorrect to maintain that all philosophies accept this claim.

Related to the above, Hersch maintains further that ontology has priority over epistemology—i.e., that initial assumptions are always ontological in content in that they are assumptions about the nature of being, e.g., his view, ontological realism. I certainly agree with Hersch that this claim is assumptive—i.e., it cannot be demonstrated. I say this because, since whatever we do know, or claim to know, we know or claim to know in virtue of ourselves, it is in principle impossible for us to know whether or not anything exists independently of us, i.e., of whatever about us is held to be our means of knowing, whether our bodies or minds or some mind-body synthesis, etc. Therefore, it is proper that Hersch holds that ontological realism is an assumptive claim, for we cannot know whether or not anything exists independently of us, thus we cannot know whether or not ontological realism, which posits that there is something that exists independently of us, is a true claim. But it does not follow that all other ontological claims are maintained to be assumptive by those holding them. Even if Hersch wishes to argue that all other claims are assumptive whether those put-
ting them forth believe them to be so or not, it still does not follow that it is accepted by philosophers that ontological or other fundamental claims can only be assumptive. This is patently false. That it is so is what led philosophers like Kant and Husserl to turn to epistemology as their starting point, i.e., in order to critique self-evidence and to establish a criterion as to what should count as self-evidence.

Another assumption made by Hersch is reflected in his explanation of the meaning of ontological realism, i.e., maintaining, “there exists a Reality or some form of Truth that is not merely or entirely dependent on us.” Hersch maintains that relativism is the view that there is no such Reality independent of us. But isn’t relativism the belief that there is no reality or truth at all, independent or dependent or both? That is to say, implicit in Hersch’s notion of ontological realism is the view that the only meaning that Reality and Truth can have is that they are that which exists independently of the subject, i.e., independently of us. But there are other non-relativistic notions of reality and truth. That is, relativism is not the only ontological stance that rejects ontological realism. For example, the notion of reality as constituted by Husserl in his philosophical stance known as phenomenology (post-Husserlian philosophies that are loosely called phenomenology, all either follow or deviate, or both follow and deviate from Husserlian phenomenology). Both Heidegger and Sartre rejected Husserlian phenomenology. In the Husserlian phenomenological perspective, (discussed briefly by Hersch, who incorrectly states that Husserl aimed to bracket our judgments “as to whether objects exist” (p. 47)—but what Husserl bracketed was just the belief that “to exist” can mean only exist independently of the subject), reality, what is real, is just that which is intended by consciousness and intersubjectively constituted as real, i.e., intended with the sense “real” or “really existing.” Husserl showed that the sense “real” is the intentional object of an act of meaning-intending or constituting. Moreover, the constitution of existence-sense can only be grasped as such when all ontological commitments or positings are suspended. Thus, suspending ontological commitments does not result in bracketing our judgments “as to whether objects exist.” It is in this sense that phenomenology begins with epistemological inquiry—How is the sense “real” constituted? What does it mean?—rather than with an ontological assumption. This is not relativistic because, despite its subjective, intersubjective, and historical embeddedness, meaning is not merely relative to the individual subject, the intersubjective community, or the historical time; rather, meaning presupposes ideality, or the universality of the structures of subjective life, of lived experience. (See E. Husserl, The Crisis of European Sciences and Transcendental Phenomenology, trans. by D. Carr (Northwestern University Press: Evanston), 1970.)

To summarize the foregoing critique then, Hersch confuses philosophy with his philosophy. If one is an ontological realist, one will maintain that philosophy begins with or is founded upon an ontological assumption, an assumption about the nature of ultimate reality, and that this assumption must remain just that—an assumption. Thus, Hersch’s methodological and analytic hierarchy has ontology as its foundation in the form of an assumption. But there are many stances, other than ontological realism, for example Husserlian phenomenology, which do not assume that we can only assume, and thus never strive for knowledge as an ideal. Thus, Hersch’s system presupposes that ontological assumptions are the foundation of all philosophies, yet this is not the case.

Finally, the consequence of Hersch confusing philosophy with his philosophy is that the book does not succeed in clarifying the relevance of philosophy to clinical psychology. A case in point is Hersch’s discussion of the correspondence theory of truth. In this discussion, Hersch both rejects and accepts the correspondence theory simultaneously (pp. 189-194). This is due to his commitment to the stance of ontological realism which seems to Hersch to require the correspondence theory; yet, his commitment to a coherence theory of truth as well, and his, in my view failed efforts to synthesize the two, or to transcend the duality, suggests that ontological realism is highly problematic as a foundation for psychotherapy. However, nowhere in the book does he call that stance, his foundational assumption, into question on philosophical grounds—rather, ontological realism functions as a discussion stopper throughout the book. Thus, despite Hersch’s explicit disclaimer and his very admirable and important commitment to systematic work, once again, like so many other formulations extant in the literature, it presupposes a philosophical stance, in this case ontological realism, and attempts to overlay that stance upon clinical psychology. The more radical alternative is to show that psychology itself cannot advance further either theoretically or practically without reconceiving itself as a philosophical science.

One of the most interesting, creative, and important discussions in From Philosophy to Psychotherapy is Hersch’s discussion of the temporal character of human existence and its bearing on clinical psychology or psychotherapy. Here is how Hersch expresses the clinical relevance of temporality:

In terms of the future-oriented quality to motivation… when we form our present relationships our horizons are shaped not only by our past experiences but also by our future anticipations and projects. So… when people form new, present relationships that are highly similar to those of their personal past(s)… they are likely trying to get some-
thing for the future out of it. For instance, they may repeat not only because they are “driven to do so”… by their past, but also because… they are “trying it again but this time to get it right, to finally make it work for them.”… [T]he transference is an attempt at “finishing one’s unfinished business,” and one’s phenomenological world has become structured so as to favour that particular aspect. (p. 231)

Many therapists, including myself, have gleaned this insight from their work, i.e., that people will often subject themselves to retraumatization in an effort to undo and redo past traumas. As we know, Freud, too, struggled with the apparent paradox of retraumatization. However, a phenomenological approach to the temporal dimension of human experience shows that failure of a person with a traumatic past to attempt to reconstitute the impact of that past on the person’s present and future may be indicative of far greater psychic crippling than the repeated effort to do so, however traumatic that effort. The commonsense psychological response might be to say that, well, of course, if a person has hope that things can get better, that suffering can somehow be reduced, that person is in a healthier state than those who have no hope. But, what the phenomenological perspective shows is that hope is so to speak the default position. The same characterization that Hersch provides for the phenomenological notion of the intentionality of consciousness (the psyche as a whole), which he correctly ascribes to Husserl, characterizes the temporal structure of the psyche: “This basic structure of experience would then, of course, be seen as present in all manner of psychological experiences, including psychodynamically ‘conscious’ and ‘unconscious’ thoughts, desires, and emotions.” This holds for the temporality—the lived time as opposed to clock time, inherent in human psychic life, “a basic structure of experience.” (Heidegger’s philosophy of temporality owes a great deal to Husserl’s *The Phenomenology of Internal Time Consciousness* which was compiled and edited by Heidegger, a former student of Husserl, in 1928.) Thus, hopelessness is not just despair or lack of hope; rather, hopelessness is a deformation of our being as human—that is, it is a form of dehumanization whether a consequence of self or other failure to nurture or both Despair is an effort to foreclose the future, any future, and it is an effort doomed to failure for, owing to the structure of the psyche as inherently temporal, it creates its own future as the continued effort to deny any future. I have made this point in my own words, but I believe I have explicated Hersch’s view in his many fruitful discussions of temporality in the book. Most importantly, Hersch’s view of the theoretical, and by implication, clinical relevance of temporality is clearly and powerfully stated:

In terms of theories of psychological motivation, what is especially interesting—and different—about this approach is that it emphasizes the future rather than the past as the main temporal locus of motivation. Unlike most contemporary psychological theories, and necessarily unlike any deterministic ones, the emphasis here is on the uncertain-by-definition future rather than on the potentially more fully knowable past. This approach is thus incompatible with psychologies that adhere to determinisms of the sort that make claims to some potential for certainty in the predictability of human experience and behavior. (p. 199)

In showing that the clinical benefit of a therapeutic perspective oriented toward clients’ motivation to create a better future derives from the temporal structure of human psychic life and experience, Hersch has achieved a valuable theoretical and practical advance.

As mentioned above, Hersch’s book presents particular difficulties for the reviewer. *From Philosophy to Psychology* is an important study in that Hersch attempts a systematic integration of philosophy and clinical psychology, and in the course of so doing presents astute and insightful discussion of important themes and movements, which he attempts to illustrate with clinical material. On the other hand, the book is permeated by a flawed notion of philosophy that leads Hersch to a position that cannot transcend relativism in that it posits the necessity for unquestioned ontological assumptions at the outset while at the same time suggesting that such assumptions, including others than his own, are equally worthy. This is suggested also in the title of the book. The trajectory of the book, traversed within the parameters of the hierarchical model, is indeed from philosophy to psychology; the implication is that other perspectives, beginning with alternate ontological assumptions, can traverse the same path within the parameters of the hierarchical model. But, given that model, the path must begin with an ontological assumption that is viewed as necessarily assumptive. That this is the only path that can lead from philosophy to psychology is the assumption that I have questioned. On the other hand, Hersch argues for his own position as providing the philosophical foundation for psychotherapy. Bearing in mind the caveats I have expressed herein, Hersch’s book is worthy of serious study.

Marilyn Nissim-Sabat is Professor Emeritus and Adjunct Professor of Philosophy, Lewis University, and is a clinical social worker in private practice in Chicago.
Upcoming Online Symposium

Conflict about Conflict
Muriel Dimen, Jay Greenberg and Donnel Stern
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Contemporary analysts are recasting every tenet of classical theory, and the question of conflict is no exception. In this seminar two noted theorists offer a fascinating contrast in how, even within the relational rubric, conflict may be looked at from very different perspectives. Greenberg draws upon his own relational re-conceptualization of drive theory to present a view of conflict as embedded in personal striving. Stern rest his understanding of conflict upon his expansion of the interpersonal psychoanalytic tradition and contemporary revisions of views of mind, self and consciousness, stressing that material that is dissociated remains outside the arena of conflict. Finally, Dimen, a seminal thinker in her own right, contextualizes these differing perspectives and provides her own vision of their implications and applications.

Upcoming Online Conferences

Living with Terror, Working with Trauma
Discussions with Israeli Experts
Ofra Ayalon, Moredechai Benyakar, Rony Berger, and Danielle Knafo
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Terrorism has created a special set of people with distinctive and uniquely contemporary therapeutic needs. "Living with Terror, Working with Trauma" will address the ways mental health practitioners can assist survivors of terrorism to deal with their trauma. It will do so by discussing three papers, taken from an edited book by the same title, written by leading Israeli experts in the field of terror-related trauma. Topics will include: early interventions with terror victims; individual, group, and school-based interventions with children; and AbD (anxiety by disruption), a new diagnostic entity that addresses the ways affected populations --patients and non-patients -- struggle with life under the threat of terrorism.

Authors of the papers (Ofra Ayalon, Moredechai Benyakar, Rony Berger, and Danielle Knafo) will discuss them with other experts (Israeli and American) with an eye on the practicalities of community and office based work with individuals.

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Jessica Benjamin and Michael Eigen
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I. Revisiting The Riddle of Sex: An Intersubjective View of Masculinity and Femininity (Jessica Benjamin) This paper summarizes her groundbreaking work on sexuality and gender theory.

II. Faith and Destructiveness (Michael Eigen) "A Basic Rhythm" from The Sensitive Self "Killers in Dreams" from Emotional Storm.

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In the eighth month of his analysis, Mr D had two dreams, both on the same night. In one dream he looked at his hand and he saw it open up, as if the wrist were on a hinge. Looking inside his hand he saw wires and cables and realized that he was a robot. But he was not really surprised by this. In the second dream he’s teaching a seminar at work on computer security and while he’s doing this a presence, a sinister presence, is hacking into the system. There is another him in the dream, one that is observing and maybe omnipotent, and this him feels a bit amused. Mr D’s associations to these dreams revolved around a science fiction book he was reading at the time. In the story there had been a great conflagration in the universe, leaving robots called “inhibitors” searching the galaxy to “cull” all human life. This was done for the eventual good of all.

My interpretation of the dreams was drawn from an experience in a few sessions immediately prior to the dreams. One day Mr D stated that he was thinking of taking a break from his analysis, perhaps three months. His job duties were changing and he felt there would be too much difficulty in trying to arrange for sessions; his schedule would require frequent changes. However, at the same time he became “near obsessed” with a hobby centering on computer security and while he’s doing this a presence, a sinister presence, is hacking into the system. There is another him in the dream, one that is observing and maybe omnipotent, and this him feels a bit amused. Mr D’s associations to these dreams revolved around a science fiction book he was reading at the time. In the story there had been a great conflagration in the universe, leaving robots called “inhibitors” searching the galaxy to “cull” all human life. This was done for the eventual good of all.

The interpretations I offered made sense but didn’t seem to quite capture the symbols in his dream. The sinister presence hacking into the computer system may have been me but where was the fear? There was omnipotence and amusement. This would turn the transference relationship in an asymmetry with me in the diminished position. This is strengthened by one of my reactions to his talk of a break before something happened, but what?

The “what” was not only the emergence of sealed off, old affect but the creation of new. This “new” affect involved what he would call “the logistics” of figuring out needed accommodations in his schedule of sessions. He greatly feared confrontations and this was one of his goals in his analysis—to be less worried about how others would react if he stated his real feelings and needs. He was afraid of the consequences of “disrupting” the schedule of sessions and the burden of trying to do what I wanted.

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For Lacan the Other is the image the child has of its caretakers before the child is aware of any thoughts, language as the destroyer of feeling. It was only rarely that he would feel a brief wave of sadness thinking about some aspect of his life. Invariably, he would start again to report any thoughts, language as the destroyer of feeling. It was if a feeling was the beginnings of a flame and words were water to douse and smother it. He was feeling increasing pressure and his “water” was running out. He needed a break before something happened, but what?

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more static quality of structure. The mysteries of the uncon-
scious were narrowed to the id as structure, not a structure
from outside the individual (an “Other”) but from within.
What of the desire of this structure? For Freud it was based
on biological instincts and drives whereas Lacan saw
instinct as lying at the frontier of the body and the mind: at
the interface. Instincts pass through this frontier, leaving the
mental (i.e., thoughts, images, feelings) as a sort of text of
that passage, a text that could be deconstructed. For Freud
the aim of psychoanalysis was summed up in his phrase
“where id was there ego shall be.” For Lacan the goal is
the “demystification” of the Other through the reading, i.e.,
interpretation in analysis, of this text.

It is not just the presence of the Other but rather what
the other wants from the child/patient that is formative of
psychic structure. Lacan used the term jouissance to cap-
ture this desire of the Other. Originating in Latin, this word
means the right to enjoy the use of an object, without any
right to own or possess it. The crucial difference for Lacan
was that to be the object of the Other’s jouissance is allur-
ing yet terrifying, threatening our very existence. Psychic
development becomes a journey through this dialectic of
the Other’s desire and jouissance and it is this journey that
creates, structures, and gives life to the core of our being,
our subjectivity. The roads of this journey are paved with
language, the Symbolic Order.

Jouissance is an annihilating desire, a desire that
cannot be symbolized, that the child must escape from. It is
the consummate problem of development for the child must
find a solution to the question “what does she want from
me”? At the basis of this dilemma is the child first recogniz-
ing that mother is a wanting, desiring object, that she is not
self-sufficient. Desire is fundamentally a lack, a wanting,
and as such signifies a space, a gap. Recognized as a space
between it and mother, the child attempts to fill that space,
to become what mother desires. The eventual solution is for
the child to realize that only another can fulfill this desire
and therefore the child must give up the exalted position of
the only one who can fill the space of her desire. This frees
the child from the jouissance of mother.

In his rereading of Freud Lacan maintained a loyalty
in that he tried to find a place in his theory for concepts such
as the phallic and castration. Whereas Freud grounded these
concepts in biology Lacan took them to a higher level of
symbolization, a level more truly psychological. Emerging
out of the fundamental dialectic of wholeness and disinte-
gration, the child comes to realize through the experience of
mother’s desire that there is a space between them, a crack
in the fantasy of oneness, wholeness. The phallus signifies
mother’s desire, for it is what she lacks, what she seeks. This
is not confined to the biology of the penis but to the more
psychological realm of mother’s desire. The experience of
castration is one of lack and a crucial moment in psychic
development. For Freud castration was similarly crucial in
its power to compel the child to renounce its exclusive posi-
tion with the opposite sex parent. This necessarily places the
influence of castration for Lacan at an earlier, pre-Oedipal
point in psychic development.

Was the sinister presence in Mr D’s dream his experi-
ence of the Other? The pressure he had been experiencing
leading up to the dream had of course much to do with his
feelings toward me. He talked about how he liked reading
about papers I had presented. He imagined that the place-
ment of my name above others on the office door meant the
greatest prestige and skill. When he found out by accident
my religious affiliation he was both gratified and a little
sad (as in demystified?). The ambivalence in the dialectic
between identification/closeness and idealization/distance
was becoming untenable to him and hence his thought of an
interruption. Something was being invaded, hacked into in
his dream and he was talking all the while it was happening.
Was it a denial of his fear that in the dream some part of him
felt omnipotent and amused? I felt like his wanting to inter-
rupt his analysis was a message to me. This message was that
he needed something more from me to demystify the trans-
ference object he created. He was so concerned about “doing
this the right way” and literally saying every thought that
came to mind speaks of a powerful superego presence. Even
though Lacan clearly saw himself as a structuralist, it was not
a structure that Mr D feared. It was all structure, the Other,
with its archaic components activated in the transference.

For Lacan, our experience of the Other was and is a
frightening mystery. The patient’s or child’s experience of
being for the Other an object of desire allows the patient
to explore what it is about him that attracts the Other. This
requires a translation of the unsymbolized, devouring jou-
issance of the Other to this more generative experience.
At the point Mr D had his two dreams this issue had not
yet emerged in his discourse. He was perhaps still at arm’s
length from the “sinister presence” that was hacking into
the computer system. His experience of the transference
at this moment was frightening but awareness of this was
defused by his “amused” experience of it in the dream. His
idea to interrupt his treatment was in response to this fear
and the intensity of it manifested in his intense preoccupa-
tion with a new exercise regime. This preoccupation was
perhaps a way to train and prepare for the encounter with
the Other. What was there to fear?

Consider Mr. D’s dreams from the perspective of a
dialectic journey. The opening phase is a careful attunement
to the need for the patient to “mystify” the therapist. The
stance of neutrality of course fosters this but the emerging
attention in recent years to theories of a two-person psy-
chology renders this stance problematic. If the Freudian
journey is to turn symptoms into ordinary human unhappiness the Lacanian journey is a similarly bittersweet victory. In demystifying the Other the patient creates something within. It is through the signifiers of the Other’s desire that a patient comes to experience themselves as a desiring subject. To become a desiring subject one must first find the desire of the Other. Where else could it be found? What else in the infant’s (or patient’s) experiential world could have a more profound impact?

The use of countertransference in such a journey is understandably a departure form the Freudian and perhaps even the intersubjective metaphors. In these metaphors, there is no third presence. In the Freudian it is primarily the recesses of the patient’s unconscious that are explored and to a much lesser extent the therapist. In the intersubjective model there is a co-creation of a transference. Orange (1997) preferred the term “co-transference” to capture this two-person experience, moving toward a greater symmetry than Freud. Margaret Little (1981) offered that in reference to interpreting the countertransference

...psychotherapists of other schools to this day regard it as highly dangerous and to avoid it...The attitude of most analysts is...that it is a known and recognized phenomenon but that it is unnecessary and even dangerous ever to interpret it. (p. 35)

Speaking to an intersubjective view, Little went on to write

What is the driving force in any analysis? The answer surely is that it is the combined id urges of both patient and analyst, urges which in the case of the analyst have been modified and integrated as a result of his own analysis. (p. 37)

What does it mean that an analyst’s urges would be modified and integrated? Does this mean tamed? I have declared my interest in Mr. D, indeed referred to him as a special patient. This seems a countertransference response separate from my perspective. The translation from jouissance to desire was not yet ready for words but needed action. The separation needed to be complete, literal, and in his control. Words could not yet contain the dammed up flood of sealed off affect and his “firewall” of defense was being slowly hacked into as he spoke. He had to get out before it was too late. From a Lacanian perspective it was perhaps that his sealed off affect was the core of his subjectivity and Mr. D felt he there would be some annihilation should these feelings and desires be experienced. Such a dynamic would underscore the power of the terrifying presence of a jouissance of the Other, unable to be symbolized or translated.

REFERENCES


NEW DUTY TO WARN RULING PUTS THERAPISTS AT RISK

LAWRENCE E. HEDGES, PhD, ABPP

A California Appellate Court in Ewing v. Goldstein (July 16, 2004) ruled that information provided to therapists by family members that their client is a serious danger to self or others is a part of the confidential treatment process and, on that basis, rules that the duty to warn appropriate third parties and the police is triggered. All mental health organizations have and will continue to oppose this ruling, although it is not clear at this juncture whether the strategy will be through legislative clarification or by re-trial moving toward the California Supreme Court.

This ruling obligates therapists to be capable of reliably identifying telephonic or electronic messages as coming from an “intimate family member,” and to be able to assess the credibility of such communications in order to take immediate action. Further, the question is explicitly left open by the court as to how far the duty may extend—to in-laws, cousins, grandparents, step-relations, domestic partners, same sex partners, intimate friends, ex-spouses, ex-boyfriends, ad infinitum? Further, the court pointed out that the nature of the threat communicated to the therapist does not have to be a definitive, affirmative statement of intention to harm in order to invoke the duty to warn.

One quickly imagines a series of scenarios arranged by disaffected relatives that put both the therapist and the client as well as the therapeutic relationship at risk. For now, the bottom line would be to contact an attorney immediately in an effort to assess your duty to warn in such a circumstance. One of my attorney friends is fond of saying; “I’d rather defend you for breach of confidentiality when you were acting in a good faith to protect someone from harm than to defend you for failing to warn a dead or injured victim.

In a personal communication psychologist–attorney Steve Frankel comments: “The critical leap that the court is making is that, by considering the communications by family members to a therapist to be privileged, they also fall into the class of communications that can trigger the “Tarasoff” duty. There is no reason to believe that this was the intent (much less the reasoning) of the legislature, when it narrowed the triggering criteria from any source of information that leads to a reasonable belief that there is a serious threat (the way it is now in Arizona), to a requirement that the communication comes from the patient only.

“Further, the case law cited by the court that provides confidentiality for family communication dealt with a minor whose parents communicated to a mental health professional. The statement that ALL communications by family members made to support a patient’s care are confidential is a major stretch for cases where the patient is an adult. So I wouldn’t rest too easily with the belief that any communications you receive from family members, for any patients, are privileged.”

Since we are going to be hearing a great deal about this ruling this year I have put the full text of the court decision on my website, ListeningPerspectives.com.

Lawrence E. Hedges is a psychologist-psychoanalyst in private practice in Orange, California, specializing in the training of psychotherapists and psychoanalysts. His books include Therapists at Risk: Perils of the Intimacy of the Therapeutic Relationship; Facing the Challenge of Liability in Psychotherapy: Practicing Defensively; and Listening Perspectives in Psychotherapy.

If You Are Reading This Newsletter...

If you have received this newsletter, you have received only one of the many other benefits of membership. You may not be receiving, however, all the benefits available. Please take the time to review the division materials you should be receiving and those actions you should take to participate more fully in your organization. In addition to this newsletter, you should receive:

• Psychoanalytic Psychology and Psychoanalytic Abstracts: The journal and the Abstracts are published by APA. If you are not receiving these publications, you must check with APA Subscriptions Office.
• Division mailings, including Call for Papers and Spring Meeting Registration brochure: These materials are handled in coordination with our Central Office. Contact Ruth Helein at <div39@namgmt.com> if you are not receiving these materials. Additional contact information on page 87
• Email Announcements: Although Ruth Helein can help (see above), members should take responsibility for updating directory information on the website, www.division39.org. It is very simple and very necessary for members to periodically check their directory information and make corrections.
• Involvement in Sections: Division members are eligible to join the various sections of the division. The sections are important in fostering involvement in division activities, projects and governance. If you do not belong to a section, check out descriptions on the website and get involved.
COMMITTEE REPORTS: MEMBERSHIP

This is the list of new members who joined the Division between June 1 and September 30, 2004. Please look over the names and be sure to greet your new colleagues who have made Division 39 their “home.”

Gavin Behrens, MSW  Michael D. Kahn, PhD
Janet Bertoldi, PhD  Jennifer Kaupp, PhD
Joseph Cambray, PhD  Susen Kay, MA
Ralph Detri, MSW, MPH  Dianne Lavin, MSN, PsyD
Jerry Gargiulo, PhD  John H. Leska, PsyD
Ricardo Gonsalves, EdD  Greg Lowder, MSW
A. Elizabeth Hirky, PhD  Richard Martielli, MS
Amanda Hirsch Geffner, MA, CS  Raul Martinez, PhD
Nancy Julius, PhD  Dorothy A. Mead, MS
Elliot Jurist, PhD  Debra Roquet, PsyM
Irene F. Sharp, MA  Michael Shoshani
Lori Siegel, PhD  Naomi Stein
Elizabeth Stringer, PhD  Theresa Tisdale, PhD
Stephen Withrow, MSED  Edward F. Zimmer, MA

MULTICULTURAL CONCERNS

Division 39’s sponsorship of the fourth biennial National Multicultural Conference and Summit (NMCS) reflects our continued commitment to the valued body of knowledge and experience that the Summit represents. In 2001, we were unique in being the only APA division to make a $10,000 Sponsor level donation for the Summit held that year in Santa Barbara. At the 2003 Summit in Hollywood, we reprised our role as a Sponsor. For Summit 2005, there are no sponsors; and we are one of three Benefactors.

In order to support the Summit and at the same time to provide division board members the opportunity to attend it, for the third time our annual winter board meeting will be held at the conference. The majority of our board members have stayed to attend the Summit in the past and many of our division members came especially for it. We have indications that the turnout will be even larger than in other years.

As we celebrate our silver anniversary in 2005 at the spring meetings, we can be proud of our record of diversity. Over the past decade, Division 39’s members have organized sections that more specifically reflect our awareness of and commitment to the study of social and cultural issues. These include:

• Women; Gender and Psychoanalysis (Section III)
• Psychoanalysis for Social Responsibility (Section IX)

In addition, the leadership of the Division has supported formal committees to advance the mission of scholarship in the domains of multiculturalism and psychoanalytic psychology. These include:

• Committee for Multicultural Concerns
• Sexualities and Gender Identities Committee (SGI)

Some of you may recall, at the last NMCS, David Ramirez and Dennis Debiak led a provocative panel Psychoanalytic Psychology in Action: Clinical Supervision Across Boundaries of Sexual, Ethnic and Cultural Differences. That panel was so well received that this year the Division is proposing two more diversity-related programs. These panels demonstrate psychologist/psychoanalyst involvement in grass roots programs that reach out to the community and will inform the diverse audience of the varied ways in which we work.

The first symposium: A Home Within: Building Lasting Relationships with Children and Youth in Foster Care. A Home Within is a multilevel program that meets the complex emotional needs of current and former foster children and youth through three initiatives:

• First is the Children’s Psychotherapy Project that provides long term pro bono psychotherapy through 12 chapters of clinicians in communities nationwide,
• The second, “Fostering Art,” uses documentary photography and creative writing to enable youth in foster care to express their feelings and ideas;
• The third, “Fostering Transitions” is a mentoring program that builds partnerships between corporations and adolescents in foster care.

Preliminary outcome research of participants’ moods, behavior, cognition, interpersonal relationships and stability of placement and program evaluation will be presented. Slides of the photographs and writings developed in the Fostering Art program will be shown as well as a short video. The symposium will be interactive, encouraging audience participation via questions and answers. Most importantly instructions for the establishment of
community chapters will be provided to the participants to encourage additional programs nationwide. The panel moderator will be Diane Ehrensaft, and the presenters will be Toni Vaughn Heineman, Richard Ruth, June Madsen Clausen and Jessica Ingram. (http://www.ahomewithin.org/)

The second proposed symposium: Psychoanalytic Psychology and the Art of Community Intervention: Illustrations from Three Communities Experiencing Ethnic Conflict will trace the development of Ricardo Ainslie’s psychoanalytic-ethnographic work in three communities in Texas that have experienced significant ethnic conflicts. This presentation discusses the use of community interventions that are informed by psychoanalytic theory.

- “No Dancin’ in Anson: An American Story of Race and Social Change” explores the tensions in a community that had been entirely Anglo in 1965, but which is now one-third Latino.
- Crossover: A Story of Desegregation (film), examines the experience of public school desegregation in the 1960’s and the deep wounds it left within the African American in the community of Hempstead, Texas.
- Finally, “The Healing of a Community Crisis,” a three-year project in Jasper, Texas following the dragging death-murder of James Byrd, Jr. It addresses this trauma by depicting with photographs and narration the key elements of the community’s experience and response to this crisis and portrays this murder as a hate crime that constitutes a collective trauma for the community. The photographic exhibit was prepared in collaboration with a documentary photographer.

The powerful links between narrative processes and the amelioration of trauma and conflict at both the individual and the community levels will be demonstrated. The panel moderator will be David Ramirez and the presenter will be Ricardo Ainslie. (www.ricardoainslie.com)

Additional presentations in the Summit’s two-day series in the form of keynote addresses, symposia, papers and posters on multiculturalism will interest and stimulate attendees.

Graduate students attending the Summit will be especially welcome. Visit the Summit website at www.multiculturalsummit.org and give serious consideration to attending. The conference has a history of being oversubscribed and we urge you to register as soon as possible.

SECTION REPORTS: INTERSECTION

Over the last few years, a loosely formed group has emerged within the division called Intersection. It can best be described as a caucus of section members who get together three times a year before the Division Board Meeting to discuss issues important to section members. It has been a more or less ad hoc group, with shifting rationale and agenda over the years.

Originally, the focus of this group was on conflicts within and between groups in the division on the issue of allied professional membership, and later, the movement to grant voting rights to allied professionals. Not far in the background were conflicts between the sections, including the emergence of two new sections (Sections VIII and IX) with their diverse agendas, as well as the “tried and true” conflicts between Section I and Section V. The initial goal of the group, then, was to develop improved communication among the sections. One practical consequence of these meetings was the development of several joint programs that were held during Division Meetings for several years.

This group has also served as a forum to discuss ongoing issues between the sections and the division board. There has been a more or less inevitable struggle over the years between section leaders and division board leaders. To dramatize the differences, division leaders have sometimes seen sections as pursuing narrow aims in contrast to the wider aims of the division; and section representatives have felt shut out of political process and their concerns and interest dismissed. This issue became acute when it was discovered that a number of sections did not have sufficient number of members to qualify under the bylaws and the board struggled to define how to address this issue. What happened was this: sections were formed under the bylaws when there was sufficient interest among the membership, i.e., when enough people joined a section. Over the years, however, a number of sections lost members yet there was no clear mechanism for addressing this concern. Few things focus us more than the prospect of death, and this applies to organizations as well as to individuals, perhaps more so. This crisis provided another task for Intersection, as section leaders discussed efforts and initiatives to revitalize and increase their membership. Sections were successful in increasing membership levels, although one added benefit of this painful process was to focus section leaders on better defining their core mission and to reach out to potential members through development of websites, and so on. This remains an active agenda item as sections continue to look at ways we can collaborate.

Another task for Intersection over the last few years has been to help address the issue of reduced program time during the APA Convention. The division leadership responded to the cutbacks in program time mandated by APA by “rationing” program time allotted to Section panels. Previously, sections were more or less assured that
they could field a 2-hour panel during the APA Convention. At this point, however, sections are only guaranteed that they can present a program, which may or may not be included in the APA program schedule. If they do not “make the cut” into the APA program, the sections may present in the inevitably cramped venue of the Division Hospitality Suite. This issue has highlighted the divergent interests of sections and division and placed Intersection in the curious position of being a venue to negotiating these concerns.

Intersection has gone through a curious evolution, then, moving from opposition to cooperation, or at least loyal opposition. Perhaps it has been cooptation. I believe, however, that it continues to serve a useful purpose as a focus for section representatives and others involved in sections to contribute to the ongoing work of making our organizations and subgroups responsive and responsible to the membership and each other.

### SECTION IV: LOCAL CHAPTERS

The primary tasks of Section IV are to serve as a forum for local chapter leaders to discuss common issues and concerns in development of their programs and other aspects of their mission, and to involve local chapters in division governance. We meet once before the Division Board Meeting and once after in order to discuss division-wide issues and inform the Section IV Division Board Representative of local chapter concerns. The section also works to promote local chapter development and we continue to work with individuals around the country interested in forming local groups. At present, there are about five groups around the country in some stage of formation. We had hoped to welcome a new local chapter this year, but that did not occur. Unfortunately, we have also had several chapters become inactive over the last few years as well, as local groups struggle to define themselves and as formerly active members retire without being able to “pass the torch.”

Recently, we have had to look more closely at another phenomenon. Several local chapters have indeed succeeded in board development, bringing newer members into leadership position. One result of this, however, is that many of these new leaders have little or no connection to Division 39 and may see little need to sustain this connection. We have tried to counter this trend through communication with chapter leaders, as well as by supporting efforts of the Division Membership Committee to increase local chapter members’ participation in the Division. The generational shift is one that our organization, and indeed most psychoanalytic groups, must address if we are to remain viable.

On a more positive note, Section IV continues outreach to chapters in two important ways. While the Section IV meetings have always provided a forum to discuss programming issues, e.g., Is he a good speaker? How much does she charge? we have developed a more formal mechanism with the formation of a Speaker’s Bureau as a way to distribute information about potential speakers, their specific interests and willingness to present for a modest stipend. Also, we continue to sponsor graduate student participation in the division by providing financial help for 2-3 graduate students a year to attend the Spring Meeting.

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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.)

Applications will be judged on: • Relevance of the topic to the Section’s mission, • Importance of the contribution to the field, and • Likelihood that the dissertation will be completed in a timely fashion.

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
LOCAL CHAPTER REPORTS: AUSTIN SOCIETY FOR PSYCHOANALYTIC PSYCHOLOGY

A SPP was founded in 1988. At that time, there were few psychoanalysts in Austin, Texas because there is no formal psychoanalytic training program here. ASPP made major contributions in filling the gap by providing classes and lectures to mental health professionals interested in learning more about psychoanalytic theory and technique. In addition, ASPP members collaborated with the Houston-Galveston Psychoanalytic Institute (HGPI) to bring a training analyst to reside in Austin. Now that Austin candidates could receive training analyses here, this enabled them to commute 180 miles to Houston for weekly didactic classes at HGPI. Some Austin residents commuted to Houston on a monthly basis for training at the Jungian institute there. Others received psychoanalytic education in university-based programs or other internships, postgraduate programs, and distance-learning programs across the country. Hence, there are a growing number of psychoanalysts in Austin. Nonetheless, the bulk of ASPP members practice psychoanalytic psychotherapy rather than psychoanalysis.

When Division 39 opened full membership to allied mental health professionals as well as psychologists, ASPP followed suit. Our membership has grown to approximately 140, including psychologists, psychoanalysts, psychiatrists, social workers, professional counselors, and graduate students. ASPP remains committed to providing stimulating programs for professionals with a wide range of psychoanalytic interests, experience, and expertise. Our basic program structure, as developed in 1988 and persisting to the present time, consists of monthly meetings with scholarly presentations. Clinical workshops and seminars soon were added to the program, which has further expanded since then. Although ASPP still sends newsletters twice per year by way of regular mail, we are relying more on our website and electronic mail as ways of informing people about our events. Two years ago, we created an advisory board of former ASPP presidents to aid in long-range planning for the organization. The current officers on our executive board are JoAnn Ponder, President; Sherry Dickey, Past President; Marianna Adler, President-Elect; Connie Benfield, Secretary; Karen Habib, Treasurer; Terry Smith and Marsha McCary, Education/Training Chairpersons; and Laurie Seremetis and Dale Sonnenberg, Interdisciplinary Representatives.

The ASPP program theme for 2004-2005 is Donald W. Winnicott’s concept of “Play in the Transitional Space.” Monthly programs from September through May will feature related presentations by local and visiting clinicians: Margaret Jordan on D. W. Winnicott’s life and contributions; James Bennett on play in the psychoanalytic treatment of a young child; Gemma Ainslie on transitional phenomena in adolescence; Richard Michael on the analytic space in treating adults; Barbara Waterman on sandplay with a traumatized adult; Catherine Stevenson on the Standahl syndrome, art, and the analytic third; Naomi Freireich on a dream interpretation of The Wizard of Oz; Sherry Dickey on sexual perversions; and Marianna Adler on writer’s block. Visiting scholars will present a variety of workshops and seminars this year: John Muller on semiotics, Jessica Benjamin on therapeutic impasses and the analytic third, Sidney Phillips on homosexuality, and Stephen Firestein and Cynthia Macdonald on ethics related to the death of a client or psychotherapist. The following classes and study groups are being offered by ASPP members: Richard Michael on psychoanalytic psychotherapy, Richard Campbell on Winnicott’s classic papers, JoAnn Ponder on Winnicott and play, and Marianna Adler and Gemma Ainslie on semiotics and primitive mental states. Finally, ASPP will sponsor at least two events for the public this year: Kate Catterall and Stuart Twemlow with an arts program on monuments and memorials and Barbara Waterman on the psychological process of becoming a foster, adoptive, or stepmother. In summary, ASPP members look forward to an industrious year of study and play in the potential space.

For more information: http/www.austinaspp.org
Massachusetts Association for Psychoanalytic Psychology

MAPP, the Massachusetts Association for Psychoanalytic Psychology, celebrated its twentieth anniversary on April 2, 2004, with a wonderful dance party. Free to all, it was a gift from MAPP to its members and friends. Several senior clinicians were door prizes. Fred Busch, Steven Cooper, Dan Jacobs, Barbara Pizer, Stuart Pizer, Malcolm Slavin, Martha Stark, and Gerry Stechler each donated an hour of consultation/supervision time that was awarded in a lively random drawing.

Over these twenty years, MAPP and MIP (Massachusetts Institute for Psychoanalysis), the analytic institute it helped to form, have become major participants in a vibrant analytic community that had once excluded non-pharmacists. Acknowledged as a dedicated participant in this transformation was Dr. Betty North, whom Marjorie Seigal, MAPP president, presented with the first annual MAPP Award Recognizing Service to the Community. As a psychologist who mentored many others in her long career at Beth Israel Hospital and in the Boston community, Dr. North has been dedicated and tireless in her commitment to forming and sustaining MAPP and opening the doors of psychoanalytic training.

Rhode Island Association for Psychoanalytic Psychotherapies

In Providence, RI: The Wednesday evening lecture series of the Rhode Island Association for Psychoanalytic Psychologies continues for the 2005-2006 year under the theme “Psychoanalytic Psychotherapy in the Postmodern Era: Gender and Subjectivity in the Clinical Encounter.” Three lectures each are planned for the fall and winter/spring. Our fall schedule includes: October 6, Judith Teicholz, on “Qualities of Engagement and the Analyst’s Theory.” November 3, Joe Cambray, “Surprise, Coincidence and Emergence in the Therapeutic Field.” December 1, Malcolm Slavin, on “Erotic Love, Intimacy and Human Adaptation. Additionally, Leston Havens, will discuss changes within psychoanalysis from existential and interpersonal perspective during our Fall Conference on October 16. For further information contact: Louis Rothschild at L_Rothschild@msn.com.

Vermont Association for Psychoanalytic Studies

The Vermont Association for Psychoanalytic Studies has established a fairly full agenda for the Fall and Winter months of 2004-2005. Under the guidance of its current president, Polly Young-Eisendrath, a jam-packed schedule has been created for the members of VAPS and the friends of psychoanalysis in Vermont.

Our first exciting event will be held on October 10, 2004. Dr. Glenn Gabbard will be speaking to our group on one of his favorite topics: “The Psychology of the Sopranos.” Much of his presentation will be taken from his book on the same topic. Dr. Gabbard will be joined by the Emmy award winning writers for the show, Robin Green and Mitchell Burgess, along with the psychiatric consultant to the show, Ronald Green, Professor of Psychiatry at Dartmouth College.

The next event will be our Annual Scientific Meeting, to be held on November 6, 2004 at the Trapp Family Lodge. Dr. Nancy Chodorow will be speaking about indeterminancy and uncertainty in psychoanalysis. The title for the entire day’s activities will be Uncertainty in This Psychoanalytic Moment. Also included in the day’s events will be a clinical presentation and small group discussions. This should prove to be a very stimulating and thought-provoking conference.

On March 19, 2005, our organization is sponsoring a presentation by Dr. Joseph Schachter on the forever timely topic of transference. Dr. Schachter will be presenting ideas from his recent book Transference: Shibboleth or Albatross? This should prove to be an interesting day for the attendees. There should be plenty of opportunity for questions and discussion.

Finally, in the works, the members of the VAPS executive committee have been exploring the possibility of recruiting someone to present on child psychoanalysis. There have been a few recent requests for such a presentation. We hope to recruit someone for this event in the near future.
BOARD OF DIRECTORS MEETING MINUTES
FRIDAY, MARCH 19, 2004, MIAMI, FLORIDA

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, H. Seiden, L. Zelnick; Section Reps: A. Brok, Section I; R. Ruth, Section II; E. Toronto, Section III; A. Corn, Section IV; H. Davis, Section VI; G. Gerber, Section VI; A. Eig, Section VII; S. Shimmerlik, Section VIII; F. Summers, Section IX. Parliamentarian: L. Wagner; Guests: D. Debiak, D. Downing, F. Goldberg, M. Hadley, A. Hart, W. MacGillivray, M. Metzl, R. Peltz, S. Pytluk, P. Strausberg, S. Zicht.

I. CALL TO ORDER: Dr. Darwin called meeting to order at 8:55 am.

II. SUBSTITUTE VOTES: Dr. Jacobs reported that Rachel Peltz would serve as substitute for F. Summers from 10:00 am–11:30 am.

III. WELCOME AND INTRODUCTION: Dr. Darwin: Dr. Darwin welcomed the board members and guests to the meeting.

IV. APPROVAL OF DRAFT MINUTES JANUARY 24, 2004 BOARD MEETING: Dr. Jacobs

Motion 1: To approve the draft minutes of the Board of Directors meeting of January 24, 2004, as corrected. Action: Passed Yes – 23; No – 0; Abst. – 0

V. INFORMATION ITEMS: Dr. Darwin

A. 2004 NOMINATIONS FOR DIVISION 39 BOARD OF DIRECTORS: Dr. Slavin detailed the activity of the committee and reported the following election slate: Council Rep: L. Barbanel, B. Karon, M. Kelly, W. MacGillivray, S. Movahedi, L. Wagner. Member-at-Large: M. Cresci, D. Debiak, N. McWilliams, M. Metzl, L. Zelnick.

B. APPOINTMENTS: Dr. Darwin stated that she had appointed S. Axelrod as liaison to Business of Practice at APA.

C. ANNOUNCEMENTS: Dr. Darwin introduced R. Ochroch who gave a brief summary regarding licensed psychologist/psychoanalysts issues that affect the members of NYSPA. Discussion was held.

VI. WELCOME OF APA PRESIDENT-ELECT: Dr. Darwin

A. DISCUSSION WITH APA PRESIDENT-ELECT: Ron Levant, Ph.D.

1. REVIEW OF DR. LEVANT’S PRESIDENTIAL INITIATIVES: Dr. Levant discussed his initiative on Evidence Based practice. He gave a summary of how and why this is such an important issue, as well as background information on how this issue came about. He was very informative and explained the need to pursue this initiative diligently. His main goal is to come to a broad, inclusive definition of EBT. A Division 39 member will be appointed to sit on his EBT task force.

B. REPORT OF EBT TASK FORCE: Dr. McWilliams reported on the activities of the Division EBT task force. She restated the charge of the committee and gave the following recommendations:

1. Respond to empirical arguments with empirical counter-arguments. That is, we need to get psychoanalytically sophisticated researchers to take on the Division 12 subgroup on their own terms.
2. Get to the media with the same effectiveness that the EBT fanatics have demonstrated.
3. Develop a fund to support relevant research.
4. Get NIMH to fund a study of psychotherapy as it is practiced in the community that meets a high standard of research design.
5. Put pressure on NIMH not to fund single-orientation researchers’ projects, given that theoretical allegiance accounts for 85% of the variance in empirical studies of psychotherapy.
6. Make alliances with other sections within APA, with non-psychoanalytic practitioners (including humanistic, family systems, and CBT practitioners in the community), and with medical groups who are also suffering from the “evidence-based” movement.
7. Develop and sponsor a resolution to be passed by APA to the effect that it is unethical to define science so narrowly that patients are deprived of needed treatment. Additionally, the following individuals were recommended to sit on the committee (Researchers [people in bold] are recommendations from Dr. Westen): Ken Levy, Stanley Messer, Doris Silverman, Mark Hilsenroth, Joel Weinberger, Drew Westen, Sidney Blatt, Lester Luborsky, Bob Bornstein, Bruce Wampold, Paul Wachtel, Wilma Bucci, George Stricker, Jonathan Shedler, Joe Masling, Laurie Wagner, Carol Goodheart, Dorothy Holmes, David Ramirez, Dennis Debiak, Karen Maroda, Kim Leary.

A discussion with Dr. Levant and comments regarding the issues brought by Dr. McWilliams was held. Dr. McWilliams stated that the committee needed to be made up of members who are skilled in writing and speaking, university affiliation, and accreditation and education experts.

Motion 2: To establish the Committee on Evidence Based Practice. Action: Passed. Yes – 19; Opposed – 1; Abst. – 0

VII. TREASURER’S REPORT: Dr. Manosevitz

A. GENERAL BUDGET ISSUES: Dr. Manosevitz discussed the financial statements of the Division with particular reference to the 2003 actual vs. budget. He discussed areas where expenses were higher than expected such as the Journal and the website changes.

B. UPDATE ON ARRANGEMENTS WITH N. SHEAR AND ASSOCIATES: Dr. Manosevitz reported that $15,900+ has been collected for the Minneapolis 2003 Spring Meeting, which will be recorded in the 2004 budget. He informed the Board that more detailed information will be submitted for Spring Meeting expenses and income at a later date.

VIII. OLD BUSINESS:

A. UPDATE ON DIVISION 39 PRESIDENTIAL INITIATIVES: Dr. Darwin

B. INTERNET ISSUES
1. Update: Dr. Zelnick reported that some of the Sections have more fully developed sites; Section VIII has a link to their own website on the Division website; all archives for the 2002/2003 newsletter articles are online; and, the spring meeting tapes order form is now online via a link to the taping company – to include back ordering tapes from previous spring meetings. The publica-
tion committee is looking at what types of things should be placed on the website. The committee is also looking at moving the home page to more of a “portal” makeup.

2. Continuing Ed: Dr. Strausberg

3. Outreach: Dr. Lionells updated the Board on the activi-
ties of this committee. She discussed a proposed initiative by K. Rush regarding families who are affected by the war. He has established a voluntary program on how to intervene and help those families – such as National Guard families, etc. The committee is working on the development of a database of information regarding the different programs that are ongoing throughout the country – to give members the opportunity to network and know about the different programs. The committee also plans to publish regular articles in the newsletters. The committee is concerned about media outreach.

Dr. Lionells also announced there is a poster fair on Saturday during the Spring meeting, and a special presentation on Sunday that has been opened to the community, is also part of the outreach initiatives.

C. 2005 NMCS Sponsorship: January 29, 2005 Board Mtg.: Dr. Ramirez discussed this conference and the level of activity and sponsorship the Division has committed in the past. He discussed recommendations of what type of presentation the Division would have at the meeting.

Motion 3: The winter meetings of the Division 39 Executive Committee and the Board of Directors will be held in Hollywood, California in January 2005 in conjunction with the 4th Biennial National Multicultural Conference and Summit.
Action: Passed. Yes - 24

Motion 4: Division 39 will contribute $5,000.00 Sponsor Level to the 4th Biennial National Multicultural Conference and Summit. Action: Passed. Yes - 25

D. Programs: Dr. Martin

1. Spring budget for 2005, New York: Dr. Martin introduced the 2005 chairs – Stefan Zicht and Anton Hart. Drs. Zicht and Hart presented a summary of the program for the 2005 Spring Meeting. This will be a celebratory event – the Silver Anniversary of the Division – and the theme is “Doing and Becoming”. They have invited J. Greenberg and A. Philips as keynote speakers. They also announced the invited panel presenters and titles.

   Dr. Martin presented the 2005 proposed budget for the Spring Meeting.


2. 2004 Spring Meeting Miami: Dr. Corn reported to the board on the 2004 Spring meeting. As of Friday morn-
ing the registration was 515. She gave a brief overview of the continuing education programs attendance. The continuing case/continuing education program was a successful program and generated income for the meeting. Dr. Darwin thanked Drs. Corn and Virsida as well as Dr. MacGillivray for their work putting together the 2004 conference.

3. 2004 APA Honolulu: Dr. Metzl summarized the activities of her committee and the program for the Division’s meetings during the APA meeting in Honolulu.

G. PSYBC Collaboration: Dr. Seiden reported on this collabora-
tion and summarized how the online panel would work. This panel will produce CE credits and fees will be based on the normal cost of CE credits. Additionally, there is a nominal credit fee for processing the CE testing. Division 39 members will not be required to pay the processing fee. This initial, trial panel will be online as early as fall 2004.

H. Public Information Committee: Dr. Darwin asked the Board to discuss defining a manageable charge for this committee, prior to appointing new chairs for this committee. Several suggestions were made regarding the charge of this committee.

I. Update on Section Reports: Dr. Jacobs announced that all Sections are in compliance with Division bylaws in regard to their membership numbers. Section I – 295; Section II – 178; Section III – 166; Section IV – 948; Section V – 200; Section VI – 165; Section VII – 195; Section VIII – 156; Section IX - 159.

VIII. New Business

A. APA Presidential Candidate Endorsement: Dr. Alpert spoke to the board regarding Dr. G. Koocher’s credentials and background.

   Motion 6: To support Dr. G. Koocher for APA President-Elect. Action: Passed. Yes - 24

B. Matter Concerning Salary of CEO Raymond Fowler: Dr. Darwin informed the board there was information regarding this matter in their board packets. Dr. Altman addressed the concerns regarding the process that was used to handle this matter. Council had not been properly informed of the salary/retirement settlement for Dr. Fowler. Council will work with APA staff to make certain Council is informed appropriately on financial matters.

C. Codapar Review of the Division: Dr. Darwin gave a briefly summarized the review and the results of the review. Dr. Jacobs expounded on Dr. Darwin’s summary and asked the Sections and Local Chapters for assistance in gathering the information now required from the Sections and Local Chapters to be included in the annual report.

1. APA Monitor Article – the Division will be allowed a small article in the APA Monitor. Dr. Darwin asked for members to email her with suggestions for the article.

2. Consortium

3. Requirement of Sections and Local Chapters

IX. Reports

A. Membership Committee: Dr. Rothschild summarized his report which had been distributed in the board agenda.
B. APA Council: Drs. Alpert, Kaley, Altman, Karon: Dr. Alpert referred to her written report that was distributed to the Board.

C. Trauma Interest Group: Dr. Alpert reported the group is only 150 signatures short of starting a Division of the APA. They are working diligently toward the goal of developing a Division. She briefly summarized how the group began and some of the activities of this group. They have a mission statement, a steering committee, a list serve, a website, bylaws and a number of other accomplishments.

D. IG and CAPP Mtg.: Dr. Manosevitz discussed the activities of IG and CAPP. He encouraged the board to inform him of any practice issues that need to be taken to these meetings and to APA. He informed the board that the APA record keeping guidelines are being drafted and he asked input from the Board. Input for Record Keeping – the board discussed the different aspects of this procedure and offered input.

E. Education and Training Committee: Drs. Downing and Hadley reported on the activities and goals of this committee.

F. Division 44: Dr. Pytluk asked that the Division consider writing a letter to APA in support of same-sex marriage. It was the consensus of the Board that such a letter would be written. He also invited Division members to attend events sponsored by Division 44 at the Honolulu meeting.

G. Federal Advocacy: Dr. Goldberg distributed a report from APA and summarized the activities of the federal advocacy group. He referred to the three major issues in the handout. Dr. Goldberg also reported on the activities of the Interdivisional Task Force with Division 42.

X. Master Calendar

A. Calendar of Events: Division Program Meetings:
1. 2004 APA Mtg.: (7/28-8/01): Honolulu, HI: Chairs: Dr. Metzl
5. 2006 APA Mtg.: (8/10-8/13): New Orleans, LA: Chair: Dr. McGillivray

B. Calendar of Events: Division Business Meetings:
1. Executive Committee Meetings:
   a. July 29, 2004: Honolulu, HI
   b. November 5, 2004: NY, NY
2. Board Meetings:
   a. 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 3:40 pm EST.

SECRETARY: Marilyn S. Jacobs, Ph.D.
RECORDEr: Ruth E. Helein

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**AMERICAN PSYCHOLOGICAL FOUNDATION**
**2005 HARRY AND MIRIAM LEVINSON AWARD CALL FOR NOMINATIONS**

The American Psychological Foundation requests nominations for the **2005 Harry and Miriam Levinson Award for Exceptional Contributions to Consulting Organizational Psychology**.

The Levinson award is administered by the APA Office of Division Services in conjunction with APA Divisions 13 (Consulting Psychology), 14 (Industrial/Organizational Psychology), and 39 (Psychoanalysis). A committee of the three divisions solicits nominations, reviews nomination materials, and submits the recommended recipient’s name and credentials to the APF board of trustees for final approval. The recipient receives $5,000 and a certificate of recognition.

**Eligibility.** According to the agreement establishing the Harry Levinson Fund with the Foundation, an annual award is to be given to “an APA member who has demonstrated exceptional ability to integrate a wide variety of psychological theory and concepts and to convert that integration into applications by which leaders and managers may create more effective, healthy, and humane organizations.”

**Nomination procedure.** Nominations must include two elements: (1) a letter of nomination addressing the nominee’s record of accomplishment with regard to the award criteria (self-nomination is acceptable) and (2) the nominee’s current curriculum vitae. All nomination materials must be submitted in electronic format only. A “cover” email note with the two attached files (in Microsoft Word or PDF formats) should be sent to division@apa.org.

**Deadline.** March 15, 2005. Announcement of the recipient is expected to occur by or after April 15.

For more information, please contact the American Psychological Foundation at foundation@apa.org. The APF encourages nominations for individuals that represent diversity of race, ethnicity, gender, age, and sexual orientation.
2004 Section Officers

SECTION I - PSYCHOLOGIST PSYCHOANALYST PRACTITIONERS
President: Mary Beth Cresci – mberes@attbi.com
Past President: Martin Schulman – rosieme@excite.com
Treasurer: K. William Fried – billfried@hotmail.com
Secretary: Stephen Miller – 405-810-1133
Newsletter: Batya Monder – bmonder@rcn.com
Members-at-Large: Gemma Ainslie – gainslie@realtime.net; Harriet Basseches – hibasseches@cs.com; Helen K. Gediman – helengediman@aol.com; Maurine K. Kelly – MaurineKelly@comcast.net; Johanna K. Tabin – jktabin@university.com; Jane Tucker – jntucker@nyu.edu

SECTION II – CHILDHOOD AND ADOLESCENCE
President: Peter Carnochan - pcarnochan@mindspring.com
Past President: Toni Heineman - tvh@itsa.ucsf.edu
Treasurer: Sophie Lovinger - sllov@earthlink.net
Secretary: Chris Bonovitz chrisfb@attglobal.net
Members-at-Large: Neil Altman - neilaltman@hotmail.com; Diane Ehrensaft - dehrensaft@earthlink.net; Richard Ruth - rruth@erols.com; Johanna Kraut Tabin - jktabin@university.com; Elizabeth Kandall - eklkandall@aol.com; Kristina Whitney - kristinawhitney@hotmail.com; Larry Zelnick – lz@psychoanalysis.net

SECTION III – WOMEN, GENDER AND PSYCHOANALYSIS
President: Maurine Kelly - maurinekelly@comcast.net
Past President: Judith Logue - judith@judithlogue.com
President Elect: Batya Monder - bmonder@rcn.com
Treasurer: Connie Halligan - challigan@comcast.net
Corresponding Secretary: Nancy McWilliams -nancymcw@aol.com
Membership Secretary: Susan Carpenter - carpentersv@upmc.edu
Members-At-Large: Jane Tillman - jane.tillman@austenriggs.net
Diane Ehrensaft - dehrensaft@earthlink.net, Harriet Kimble Wrye - harrietwrye@earthlink.net, Jill Silberg - jisilberg@aol.com, Judith Levy - jslph@aol.com, Katherine Restuccia - mekar01@moravian.edu, E. Lisa Pomeroyp - elpomeroyp@earthlink.net, Lynne Harkless - lharkless@earthlink.net, Margaret Carr - marcarr00@yahoo.com, Toni Heineman - tvh@itsa.ucsf.edu, Royce Jalazo - drroycejalazo@aol.com

SECTION IV – LOCAL CHAPTERS
President: David Downing – ddowning@uindy.edu
Past President: Marsha McCary – mmdccary@aol.com
Treasurer: V. Barry Dauphin - phinman@aol.com
Secretary: Linda Rudy - DrLinda@ix.netcom.com
Membership: William A. MacGillivray – drmacg@bellsouth.net

SECTION V – PSYCHOLOGIST PSYCHOANALYST CLINICIANS
President: Mark V. Mellinger - markmphd@belhaven.com
Past President: Henry M. Seiden - hmsidean@aol.com
Treasurer: Elgan L. Baker - eblka@aol.com
Members-at-Large: Eastern Region: Ghislaine Boulander Ghislaine_Boulanger@psychoanalysis.net; Western Region: E. Lisa Pomeroyp - elpomeroyp@earthlink.net; Southern Region: Reuben J. Silver - rjsilver@aol.com; Mid-Western Region: Johanna Krout Tabin - jktabin@university.com; Margaret Kuhns - rk2@columbia.edu; David Lichtenstein - davidlichtenstein@att.net; Spyros D. Orfano - sorchanos@aol.com; Robert Prince - rmpphd@aol.com; Sergio Rothstein - serbus@aol.com

SECTION VI – PSYCHOANALYTIC RESEARCH SOCIETY
President: Lisa Pomeroyp - elpomeroyp@earthlink.net
Past President: Steve Portuges - sportuges@attbi.com
Secretary/Treasurer: Pamela Foelsch - paf@tpftherapy.com
Members-At-Large: Jill Model Barth – drjil@aol.com; Robert Bornstein - bbornste@gettysburg.edu; Fonya Helm – helm@gwu.edu; Maurine Kelly - maurinekelly@comcast.net; Richard Lettieri – rlettieri@comcast.net; Johanna Krout Tabin – jktabin@university.com

SECTION VII – PSYCHOANALYSIS AND GROUPS
President: Albert J. Brok - ABrider@uindy.edu
Treasurer: Andrew Eig - aeq@nycrr.com
Recording Secretary: Madalene Berley - MadaleneBerley@earthlink.net
Corresponding Secretary, Karen D’Amore Karedam - MSN.com
Members-at-Large: Shoshana Ben-Noam, shonooan@excite.com; Martin Livingston – m-livingston@nyc.rr.com; Susan Kavaler-Adler – suska674@aol.com; Emanuel Shapiro – bandmshap@aol.com

SECTION VIII COUPLE AND FAMILY THERAPY AND PSYCHOANALYSIS
President: Gerry Stechler - stechler@bu.edu
Past-President: Susan M. Shimmerlik - sms@psychoanalysis.net
Founder: Mary-Joan Gerson – mjg5@nyu.edu
Treasurer: Shelly Goldklang – sgolklang@mindspring.com
Secretary: Justin Newmark – justinnewmark.com
Editor: Antonia Halton – ahalton@rcn.com
Board of Representatives: Lawrence Brown – ljbrown@psycho.com; Phyllis Cohen - pccom@msn.com; Joyce Lowenstein - js.lowenstein@verizon.net; Shelley Nathans – drnathans@aol.com; Leo Weisbender – leo@psychoanalysis.net

SECTION IX – PSYCHOANALYSIS AND SOCIAL RESPONSIBILITY
President: Nancy Hollander - nchollander@attbi.com
Past President: Rachael Peltz - rapeltz@earthlink.net
Secretary: Neil Altman - neilaltman@hotmail.com
Treasurer: Lu Steinberg - lu2stein@msn.com
Newsletter Editor Steve Botticelli - srb224@nyu.edu
Members-At-Large: Muriel Dimen – mdimen@psychoanalysis.net; Elizabeth Goren – elizgor@aol.com; Lynne Layton – layton@fas.harvard.edu; Ronnie Lesser – 212-228-5426; Stuart Pizer – sphizer@psychoanalysis.net; Karen Rosica – krosica@aol.com; Stephen Seligman – seligmn@itsa.ucsf.edu.

SECTION X – LOCAL AND FAMILY THERAPY AND PSYCHOANALYSIS
President: David Downing – ddowning@uindy.edu
Past President: Marsha McCary – mmdccary@aol.com
Treasurer: V. Barry Dauphin - phinman@aol.com
Secretary: Linda Rudy - DrLinda@ix.netcom.com
Membership: William A. MacGillivray – drmacg@bellsouth.net

SECTION XI – PSYCHOLOGIST PSYCHOANALYST CLINICIANS
President: Mark V. Mellinger - markmphd@belhaven.com
Past President: Henry M. Seiden - hmsidean@aol.com
Treasurer: Elgan L. Baker - eblka@aol.com
Members-at-Large: Eastern Region: Ghislaine Boulander Ghislaine_Boulanger@psychoanalysis.net; Western Region: E. Lisa Pomeroyp - elpomeroyp@earthlink.net; Southern Region: Reuben J. Silver - rjsilver@aol.com; Mid-Western Region: Johanna Krout Tabin - jktabin@university.com; Margaret Kuhns - rk2@columbia.edu; David Lichtenstein - davidlichtenstein@att.net; Spyros D. Orfano - sorchanos@aol.com; Robert Prince - rmpphd@aol.com; Sergio Rothstein - serbus@aol.com

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President: Lisa Pomeroyp - elpomeroyp@earthlink.net
Past President: Steve Portuges - sportuges@attbi.com
Secretary/Treasurer: Pamela Foelsch - paf@tpftherapy.com
Members-At-Large: Jill Model Barth – drjil@aol.com; Robert Bornstein - bbornste@gettysburg.edu; Fonya Helm – helm@gwu.edu; Maurine Kelly - maurinekelly@comcast.net; Richard Lettieri – rlettieri@comcast.net; Johanna Krout Tabin – jktabin@university.com

SECTION XIII – PSYCHOANALYSIS AND GROUPS
President: Albert J. Brok - ABrider@uindy.edu
Treasurer: Andrew Eig - aeq@nycrr.com
Recording Secretary: Madalene Berley - MadaleneBerley@earthlink.net
Corresponding Secretary, Karen D’Amore Karedam - MSN.com
Members-at-Large: Shoshana Ben-Noam, shonooan@excite.com; Martin Livingston – m-livingston@nyc.rr.com; Susan Kavaler-Adler – suska674@aol.com; Emanuel Shapiro – bandmshap@aol.com

SECTION XIV COUPLE AND FAMILY THERAPY AND PSYCHOANALYSIS
President: Gerry Stechler - stechler@bu.edu
Past-President: Susan M. Shimmerlik - sms@psychoanalysis.net
Founder: Mary-Joan Gerson – mjg5@nyu.edu
Treasurer: Shelly Goldklang – sgolklang@mindspring.com
Secretary: Justin Newmark – justinnewmark.com
Editor: Antonia Halton – ahalton@rcn.com
Board of Representatives: Lawrence Brown – ljbrown@psycho.com; Phyllis Cohen - pccom@msn.com; Joyce Lowenstein - js.lowenstein@verizon.net; Shelley Nathans – drnathans@aol.com; Leo Weisbender – leo@psychoanalysis.net

SECTION XV – PSYCHOANALYSIS AND SOCIAL RESPONSIBILITY
President: Nancy Hollander - nchollander@attbi.com
Past President: Rachael Peltz - rapeltz@earthlink.net
Secretary: Neil Altman - neilaltman@hotmail.com
Treasurer: Lu Steinberg - lu2stein@msn.com
Newsletter Editor Steve Botticelli - srb224@nyu.edu
Members-At-Large: Muriel Dimen – mdimen@psychoanalysis.net; Elizabeth Goren – elizgor@aol.com; Lynne Layton – layton@fas.harvard.edu; Ronnie Lesser – 212-228-5426; Stuart Pizer – sphizer@psychoanalysis.net; Karen Rosica – krosica@aol.com; Stephen Seligman – seligmn@itsa.ucsf.edu.
2003 Board of Directors, Officers & Committee Chairs

President
Jaine Darwin, PsyD
1619 Massachusetts Ave
Cambridge, MA 02138-2753
(617) 354-7480 (h/o)
(617) 354-7430 (f)
jldarwin@aol.com

President-Elect
David Ramirez, PhD
Swarthmore College
500 College Ave.
Swarthmore, PA 19081
(610) 328-8059 (o)
(610) 690-5724 (f)
dramire1@swarthmore.edu

Past-President
Jonathan Slavin, PhD
98 Athelstane Rd.
Newton Centre, MA 02459
(617) 627-3019 (f)
jhslavin@aol.com

Secretary 2004-2006
Marilyn Jacobs, PhD
921 Westwood Blvd., #227
Los Angeles, CA 90024-2942
(310) 824-8910 (o)
(310) 552-2151 (f)
MJacobsPhD@aol.com

Treasurer 2003-2005
Martin Manosevitz, PhD
PO Box 7976
Aspen, CO 81612
(970) 925-2552 (o)
(970) 920-0106 (fax)
mmanosev@earthlink.net

Division 39 Office
Ruth Helein-Director
3024 W. Shangri-La Road
Phoenix, AZ 85029-4242
(602) 212-0511
(602) 212-9692 (f)
div39@namgmt.com

Website Address
www.division39.org

APA Council Representatives
Judith L. Alpert, PhD - judie.alpert@nyu.edu
Neil Altman, PhD - neilaltman@hotmail.com
Bertram Karon, PhD - karon@.msu.edu
Harriette Kaley, PhD - Dr.H.Kaley@worldnet.att.net
Bryant Welch, PhD, JD - welchfirm@aol.com

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Members - At - Large
Joseph Couch, PhD - jvcouch@aol.com
Mary Beth Cresci, PhD - mbcresci@aol.com
Marylou Lionells, PhD - mlionells@psychoanalysis.net
Marsha McCary, PhD - MDMcCary@aol.com
Nancy McWilliams, PhD - nancymcw@aol.com
Karen Maroda, PhD - kmaroda@cs.com
Dolores Morris, PhD - domorris@worldnet.att.net
Henry Seiden, PhD - hmseiden@aol.com
Lawrence Zelnick, PhD - Iz@psychoanalysis.net

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Section Representatives to Board

Section I - Albert Brok, PhD - ABRiver@aol.com
Section II - Richard Ruth - ruth@erols.com
Section III - Ellen Toronto - etorton@umich.edu
Section IV - Andrea Corn, PsyD - cormpsyd@bellsouth.net
Section V - Harold B. Davis, PhD - HDavisNYC@aol.com
Section VI - Gwendolyn Gerber, PhD - ggerber@jhay.cuny.edu
Section VII - Andrew Eig - aieg@nyr.com
Section VIII - Susan Shimmerlik, PhD - sms@psychoanalysis.net
Section IX - Frank Summers, PhD - Frank.Summars@aol.com

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Committee Chairs, Liaisons, & Appointed Officers

Awards - Maureen Murphy, PhD - Pinc93@earthlink.net
Continuing Education - Patricia Strasberg, EdD, ABPP - pstras@optonline.net
Education & Training - Spyros Orfanos, PhD - sdorfanos@aol.com
Ethics & Professional Issues - Arnold Schneider, PhD - sdocazs@cs.com
Executive - Jaine Darwin, PsyD - jldarwin@aol.com
Federal Advocacy Coordinator - Frank Goldberg, PhD - leonoreg@aol.com
Fellows Subcommittee - Norman Abeles, PhD - Norman.Abeles@ssc.msu.edu
Finance - Martin Manosevitz, PhD - mmanosev@earthlink.net
Graduate Student - Karen Rosica, PsyD - krosica@aol.com & Joseph Schwartz, PhD - JMSchwartzPhD@aol.com
Historian/Archivist - Robert Lane, PhD - boblane@cps.nove.edu & Andrea Corn, PsyD
Infant Mental Health - Stephen Seligman, DMH - seligmn@itsa.ucsf.edu
Internet - Lawrence Zelnick, PsyD - Iz@psychoanalysis.net
Liaison to CAPP and IG - Martin Manosevitz, PhD - mmanosev@earthlink.net
Liaison to the Board & Committees of APA, Interdivisional Task Force on Managed Care, & Federal Advocacy Coordinator - Frank Goldberg, PhD - leonoreg@aol.com
Membership - Joseph Couch, PhD - jvcouch@aol.com
Multicultural - Dolores Morris, PhD - domorris@worldnet.att.net
Nominations & Elections - Jonathan Slavin, PhD - jhslavin@aol.com
Parliamentarian - Laurel Bass Wagner - lwagner@flash.net
Program Committee - Elaine Martin, PhD - esmart@psychoanalysis.net
Psychoanalytic Consortium - Laurel Bass Wagner, PhD - lwagner@flash.net
Publications - Nancy McWilliams, PhD - nancymcw@aol.com
Public Information - Margaret Fulton - maralyssa@aol.net & Gemma Ainslie - gainslie@realtime.net
Sexual Identity and LGBT Issues - Dennis Debiak, PhD - ddebiak@aol.com
Specialization and Accreditation - George Goldman, PhD - drgoldman@aol.com & Nat Stockhamer, PhD - nstockhamer@earthlink.net

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American Psychological Association
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