FROM THE PRESIDENT: You and Division 39 in 2006

David Ramirez, PhD

Remember that hole in the fence? A year ago I used the image of a fence to illustrate my sense of the insider/outside dynamic I planned to address during my presidency. The year that marked our 25th anniversary saw notable progress in several domains. On the cultural/social diversity front, we were well represented at the definitive meeting on the subject of diversity: the APA-sponsored National Multicultural Summit. Once considered outsiders without interest or relevance, we are now squarely on the playing field, participating in the “difficult dialogues” around race, culture, class and physical difference. Within APA governance, thanks to the leadership of our council representatives, we had a strong voice in debates related to ethics and the interrogation of prisoners of war by psychologists, deepening the view that psychoanalysts have an investment in issues central to the identity of APA as an organization.

Among the most pressing needs within the division has been the need to shift the insider/outside dynamic as it relates to students, early career professionals and psychoanalytic candidates such that Division 39’s policies and procedures act to facilitate the inward movement and development of those members. Thanks to the efforts of the Graduate Student Committee, the Task Force on Early Career Professionals, and the initiatives of the Section Representatives to the Board, programmatic and financial modifications and enhancements have been developed and implemented. These will be most notable at the upcoming Spring Meeting, the annual event that holds the greatest promise of addressing the experience of the insider/outside dynamic as it relates to being a member of 39. For anyone wishing to be more “inside” the world of psychoanalytic/psychodynamic thinking, the opportunity created by the spring meeting is important to recognize.

Which brings me to a question: Where will you be on April 19th or 20th? If you have not already made plans to do so, I recommend that you come to Philadelphia to attend the 26th Spring Meeting of the Division. Like all of our spring meetings, this one is a multi-year project, coming to fruition thanks to the volunteer efforts of a score of psychology, social work and psychiatry colleagues. In my view, the Spring Meeting is the most visible evidence of the vitality of our organization. In a perfect world, all of our members would attend, creating an intellectual plebiscite on the importance and relevance of psychoanalytic theory and practice in our scholarly and clinical lives. Here’s a chance to vote with your feet.

As you can see in the announcement of the meeting in this newsletter, the themes for the meeting include passions and disruption. As such, the program will make the best use possible of symposia, panels, presentations and demonstrations to illuminate and articulate the vitality of psychoanalytic theory and practice. And, this year there will be a new feature inaugurating the first meeting in the next set of 25: a dance.

Do psychoanalysts go to dances? Do we dance? Of course we do, but not usually as an official aspect of our annual gatherings. In the past, groups have gone off to clubs or private rooms to enjoy the pleasure afforded by some good music and a little room to move. In the early days of my attendance at Spring Meetings, it pained me to see that there were groups of people who knew one another well enough to go off and socialize. I felt left out, standing at the proverbial fence wondering what it was like inside. This is not a feeling that typically motivates attendance to a meeting; I continued to attend because I was obligated by virtue of representing our local chapter. Eventually I got to know others well enough to be included in the informal events that made meetings fun.

As president, planning a dance represents the most “hands on” thing that I can think to do to help create the opportunity for everyone to be included in the pleasurable socializing that can make a scholarly meeting more satisfying. Music for the dance will be provided by the band, Boogie Knights, led by a psychologist who was formerly...
part of an intern group I supervised at Swarthmore College. Determined to take their educational experience to a new level, one of them hosted a party at the end of their year together featuring the band. As is often the case, students led the way to the creation of a memorable gathering. I hope that you will join me in the inauguration of what could become a new ritual for our meetings.

I will close with a mention of prospective activities of the division and changes in its governance. Marsha McCary joins the board as Treasurer, having served as member at large as well as having been an officer of Section VI (Local Chapters). She will be responsible for oversight of the fiscal activities of the division, its nine sections and the 27 local chapters affiliated with Division 39. The scope of this position is broad indeed. Nancy McWilliams steps in as president-elect as a warm up to her two-year presidential term beginning in 2007. In January, along with colleague Stanley Greenspan in our sister organization, the American Psychoanalytic Association, Nancy helped unveil the prodigious *Psychoanalytic Diagnostic Manual*, a psychoanalytic annotation of the diverse range of human experience and clinical phenomena that we face as psychoanalytic practitioners.

New Orleans will host Division 39’s summer meeting, *Psychoanalysis: A Psychological Science*, occurring in conjunction with the APA annual meeting. Our presence in the flood ravaged city is likely be emotionally stirring for many. Plans are underway to coordinate our activities with the efforts and needs of local colleagues. More details will follow.

Finally, the Austrian embassy in Washington, DC, will host an event on September 15, 2006, commemorating the 150th anniversary of the year of Sigmund Freud’s birth. Due to the efforts of our board member Richard Ruth, the division has had a prominent role in the planning for this event and will be recognized as one of the principal psychoanalytic professional organizations in North America. For at least one day we will be beltway insiders.

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**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.

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Deadline 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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**Membership Alert - 2006**

As most of you know, the Membership Directory is available on our website, www.division39.org. What you need to remember, however, is that it is your responsibility to update the directory with any changes you wish to make. Even if you have sent in an address change to APA or to Ruth Helein with our central office, only you can make the changes to our online directory. It is very easy. Please take the time to visit the website and check your information and add or correct information as needed.

In addition to the newsletter, members also receive the quarterly journal, *Psychoanalytic Psychology* and the quarterly summary of psychoanalytic journals and books, *Psychoanalytic Abstracts*. If you are not receiving these publications, contact APA or Ruth Helein to make sure your mailing address is correct for these publications.

Finally, this newsletter is available in PDF format and can be accessed from the Division website. Book reviews for the last six years can be accessed directly from the website as well.
Division of Psychoanalysis (39)
American Psychological Association
26th Annual Spring Meeting

Love, Desire & Passions:
Variety, Enigma, and the Disruption of Psychoanalysis

~April 19-23, 2006~
Loews Hotel
Philadelphia, PA

·Continuing Education Credit for Master Classes and Selected Panels and Papers·

Keynote Speakers:

Jody Messler Davies, Ph.D.               Ken Corbett, Ph.D.

Guest Participants:

Jane Fonda
Actress/Author:
“Gender and Destiny”

M. Night Shyamalan
Film Director: In conversation with
Ricardo Ainslie, Ph.D.

Continuing Education Master Classes with:

Susan Coates, Ph.D.               Gerald Koocher, Ph.D.
Richard Kluft, Ph.D.              Kimberlyn Leary, Ph.D.
Deborah Anna Luepnitz, Ph.D.      Daniel Schechter, M.D.

Panel and Paper Topics Include:

·Adolescence & Children               ·Psychodiagnostic Manual
·Analytic Love                          ·Relational Psychoanalysis
·Anger                                  ·Lacan
·Dissociative Phenomena                ·Religious Fundamentalism
·Families After Divorce: 10 Year Study  ·Transgender Identities
·Kohut                                  ·Politics
Letter to the Editor

Initially, I was pleased to see Division 39 and psychoanalysis spotlighted in the October 2005 issue of the APA Monitor. Psychoanalytic ideas and activities all too often are overlooked or parodied within mainstream psychology. Recent articles in the Monitor, for example, have addressed issues such as unconscious processes, dreams and attachment behavior without so much as a passing glance at the body of knowledge developed by psychoanalytic theorists and researchers. I was disappointed and dismayed, however, to see such a misleading and demeaning portrayal of our psychoanalytic forebears as smug, socially indifferent money-grubbers—and silent, too!

The representation of contemporary Division 39 psychologist-psychoanalysts as new champions and providers of psychoanalytic treatments to socially, economically disadvantaged and vulnerable people in the U.S. is inaccurate. In the U.S., there is a long tradition of providing psychoanalytically informed treatments to other than the “wealthy.” This tradition, actually as old as organized psychoanalysis itself, began with the Vienna Clinics and included socially-minded analysts such as Wilhelm Reich, Otto Fenichel, Edith Jacobson and August Aichorn. This tradition continued in England when the Freud family took refuge from the Nazis. Anna Freud’s Hampstead Clinic provided treatment to children orphaned and traumatized during WW II. In this country that tradition was indeed carried forward by immigrant analysts and the next generation of analysts. One only has to review 1950s, 1960s and 1970s issues of The Psychoanalytic Study of the Child to find articles on the treatment of ghetto children and consultation with educators in Washington, DC ghetto schools by Dale Meers, who trained at the Anna Freud Center in London. Other studies further attest to the social activism of our psychoanalytic fathers and mothers, as evidenced by research and clinical studies of blind children, learning disabled children, intellectually limited mothers, hospitalized and institutionalized children, etc.

During that same time, city hospitals in the five boroughs of New York, all affiliated with medical schools and departments of psychiatry were hotbeds of psychoanalytic discourse and treatments, which were provided by psychiatrists, psychologists and social workers to socially and economically disadvantaged adults, children and families. Many psychoanalytic institutes had very low cost clinics. The Postgraduate Center for Mental Health (PCMH), for example, where I did my psychoanalytic training, had a comprehensive training and treatment center in NYC which provided low fee (and sometimes waived fee) treatment to adults, children and their families and a therapeutic community day treatment program for chronic schizophrenics. Founded by Lewis Wolberg, MD, the PCMH’s psychoanalytic training program included a third year community consultation project required of all candidates. As an example of psychoanalytically informed community service, I consulted with public health nurses and caseworkers at the NYC’s Chelsea branch of the New York Health Department who provided health services to very ill and impoverished persons.

To pretend that we in Division 39 began a liberal tradition of providing psychoanalytic services to disadvantaged people is beyond inaccurate; it is harmful to psychoanalysis. Similarly, reducing and stereotyping “Freud’s theories” as “biological” is a thinly veiled political ploy that, however intended, panders to the worst fears and prejudices of non-psychoanalytic readers. Characterizing Freud’s lifetime of work as “quirky ideas” seems to me to be a contrived effort at populism. If this remark was intended to present contemporary psychoanalysis and psychoanalysts as kinder, gentler, more generous and socially conscious than the “old,” it seems to me to that the price paid was misleading hyperbole and a symbolic killing of the father.

Citing Mitchell, Stolorow, Atwood and Orange as exemplars of Division 39 members’ contributions to psychoanalysis elides the contributions of others and implies that only intersubjectivity and relational approaches characterize psychoanalysis within Division 39. Their inclusion in an article that is supposed to be about the Division’s contribution to social activism and social justice suggests that only “contemporary” psychoanalysts have a social conscience.

While I will acknowledge that those interviewed will reply that they did not write the article, nor were able to fully articulate the breadth and reach of psychoanalytic ideas, ideals and activities within Division 39, their comments appear to accurately reflect an increasingly dogmatic and self-congratulatory stance within the Division that is troubling, and, I might add, unpsychoanalytic.

Finally, at the risk of siding with the “elitists,” who among us would not want a practice filled with wealthy patients?

Antonio R. Virsida, PhD, ABPP
Boca Raton, Florida
Jody Messler Davies will be one of the keynote speakers at this year’s Division 39 Spring Meeting in Philadelphia from April 19-23, 2006. The conference theme is Love, Desire, and Passions: Variety, Enigma, and the Disruption of Psychoanalysis. Jody’s keynote address is, “From Oedipus Complex to Oedipal Complexity: Reconceptualizing the (pardon the expression) Negative Oedipus Complex.”

In an interview, Jody described how her professional and life experiences have led her to write this paper. Jody was raised in New York and did her undergraduate work at Barnard College. After receiving her PhD from Adelphi University in 1976, Jody worked with mothers who had abused their children. Many of these mothers had been sexually abused themselves as children, Jody found. These early clinical experiences were challenging, particularly in terms of managing the intense transference and countertransference that Jody came to see as part and parcel of therapeutic work with abuse survivors.

Jody then pursued analytic training at the New York University Postdoctoral program in Psychotherapy and Psychoanalysis (NYU Postdoc). While Jody’s name has become most closely associated with Relational Psychoanalysis, there was no specific relational training at NYU Postdoc at the time. Instead, Jody enrolled in the Freudian track and had classical analytic training.

Jody soon began to realize that her clinical work with abuse survivors was very different than what she was learning in analytic training. She found herself struggling to apply Freudian conceptualizations to this clinical work. She says that she was “looking for” what Freudian writers had said about development, the structure of the mind and clinical parameters. While she felt great respect for her Freudian teachers and supervisors, she had great difficulty integrating what she was learning with many aspects of the clinical realities of working with sexual abuse survivors.

At this point in her life, she was wondering if she had made the right choice in terms of a career. Her disillusionment led her to question whether she should leave the field. She even considered attending medical school. During this period of confusion and searching, Jody was introduced to Stephen Mitchell. As their friendship developed, Jody shared more of her dilemmas about her clinical work with Steve.

“What I was learning and practicing didn’t fit with my evolving notions of what was healing for people,” Jody recalls. She told Steve that, when working by the book, she didn’t feel that she was doing her best clinical work. Steve replied, “Maybe you’re reading the wrong book.”

Thus began a long friendship and professional collaboration. Jody, Steve, and others in their study group eventually formed the editorial board of Psychoanalytic Dialogues: A Journal of Relational Perspectives. This group became Jody’s intellectual home. The candor and respect that she found in this group enabled her to begin to reconceptualize her clinical work in a way that felt more generative, exciting, and creative to her.

Much of her clinical work at this time continued to involve survivors of childhood sexual abuse. The openness that she enjoyed with her colleagues helped her process the intense transference and countertransference material that made this work so challenging. Jody came to understand that chaotic sexual material often remained dissociated and unsymbolized for these clients, only to find expression in transference and countertransference enactments. She came to view negotiating two types of danger as critical to this clinical work. She was careful neither to ignore these enactments nor to talk about them in an overstimulating way because either could retraumatize the client.

As Jody continued to formulate her clinical work in new ways, she was introduced to Mary Gail Frawley-O’Dea. Both Jody and Mary Gail were interested in doing some writing and they discussed co-authoring a book, Treating the Adult Survivor of Childhood Sexual Abuse: A Psychoanalytic Perspective, published by Basic Books in 1994, was the result of this collaboration. After its publication, Jessica Benjamin said, “This book is a tour de force. It helps end the uncomfortable silence that for too long has characterized the psychoanalytic response to the reality of abuse.”

Stephen Mitchell’s tragic death in 2000 was devastating for Jody and her group. Jody was involved in the founding of The International Association for Relational Psychoanalysis and Psychotherapy (IARPP) in 2001. The first IARPP conference in New York was a celebration of Steve’s life and work. Jody describes how speaking at this conference was an extraordinary moment in her career.

Her paper titled, “Whose Bad Objects Are We Anyway?: Repetition and Our Elusive Love Affair with Evil” is one of her favorite pieces of her own writing to date. This paper elaborates Jody’s search for authenticity in clinical work and examines issues of repetition and repair with regard to clients’ and therapists’ most toxic introjects.

Jody’s current writing project is the keynote address for the 2006 Spring Meeting. She says that her paper is a work in progress that integrates many of her ideas about love, sexuality, sensuality, and erotic transference and countertransference. She has been thinking a great deal...
lately about why so many people’s committed relationships involve the gradual death of erotic passion.

Jody believes that relational psychoanalysis may have overlooked the importance of the Oedipus Complex, in part because it had become associated with a heteronormative view of the development of sexual orientation, a view that has pathologized homosexuality and bisexuality in the past. Jody wants to emphasize how the movement from dyadic to triadic relatedness in the course of development involves homoerotic and “heteroerotic” experience for all of us. Moreover, she wants to conceptually disentangle sexual orientation from our understanding of sexual relatedness. She believes that better understanding our capacity for sensual, erotic experience involves reviving and reconceptualizing the “negative” Oedipus Complex.

Traditionally, the negative Oedipus complex has been associated with homoerotic sensuality and has functioned as a way of understanding the development of non-heterosexual sexual orientations. Jody believes that homoerotic sensuality is a developmental norm and is a critical part of erotic aliveness that must be tolerated instead of defended against in order for a person to be fully sexually alive.

In her keynote address, Jody will look at the mother/daughter relationship in her examination of the negative Oedipus Complex. She feels that the erotic engagement of mothers and daughters is just as important to libidinizing the daughter as is the movement from mother to father as primary love object for some girls. She will also look at the recently popularized “mean girl” phenomenon as a perversion of mother/daughter erotic engagement.

Jody hopes to play with some preliminary ideas about these topics in her keynote address. She hopes that her paper will begin to depathologize the negative Oedipus Complex and will introduce us to the notions of primary and secondary Oedipal experiences. She feels that full access to both is crucial to sustained erotic aliveness.

Jody’s warmth, creativity and passionate feelings about her work made this interview a pleasure to do. I was left feeling excited to hear her keynote address, as it feels so relevant to the most enigmatic aspects of my clinical work and life experiences. I am confident that her paper and that of keynote speaker Ken Corbett will be highlights of the conference. Please join us in Philadelphia in April.

Dennis Debiak is co-chair of the 2006 Division 39 Spring Meeting. He is Clinical Associate Professor at Widener University’s Institute for Graduate Clinical Psychology in Chester, PA. He maintains a private practice in Philadelphia and Swarthmore, PA.
An Interview with Ken Corbett

Ken Corbett is a New York City analyst who, along with Jodie Davies, is a keynote speaker at the upcoming Spring Meeting in Philadelphia in April, where he will talk about masculinity and phallic narcissism. He is editor of Studies in Gender and Sexuality and associate editor of Psychoanalytic Dialogues, and his numerous articles on the topic of gender and, in particular, maleness, are referenced below. This article is meant to give our readers a background for Dr. Corbett’s presentation, and it is a summary of his life as well as his work, with most of the information coming from an interview conducted in November 2005.

People who don’t know Ken well may be surprised to learn that he is an artist as well as an analyst, specializing in “mostly sculpture and conceptual projects that involve a variety of media.” He has shown his work for the past five summers at the Schoolhouse Gallery in Provincetown, MA. People may be surprised to learn that, since 1986, he has been the life partner of Michael Cunningham, the author of The Hours (a Pulitzer prize winner that was made into a popular movie starring Meryl Streep; the book was dedicated to Ken) as well as the recent Specimen Days. Michael and Ken have homes in NYC as well as in Provincetown (“on the east end of town, on the water—we love it there, all seasons”), and they regularly travel between these two very different locations.

Corbett comments about his life: “I’ve been lucky. Of course I know it’s not just luck, and I contributed too—but the feeling is that I’m lucky.” He attributes at least some of his good fortune to his two analyses, which were quite different. “In the first analysis (with Richard Isay), I dealt with issues of growing into work and finding love; in the second (with Maryanne Goldberger), I learned how to enjoy the good fortune of work and love.” He also feels lucky in love. “Michael is a big spirit, generous and so encouraging. And our life, the world that has opened up before us, is really quite extraordinary, a sincere gift.” Cunningham appears to share these positive feelings. He writes in Specimen Days: “I must acknowledge Ken Corbett, who not only reads passages as I go along, offers brilliant suggestions, and talks me through my fits of discouragement, also helps to create a domestic environment of discrimination, generosity, humor, scrupulous thought, and belief in the fundamental human obligation to try to do at least a little more than one is technically able to” (2005, p. 306).

Corbett’s roots are in the Midwest. “I lived with my parents in a typical small town middle class neighborhood in Illinois.” His parents were the first generation to come off of the farm, his father working as an electrician and his mother as a homemaker. Ken was born on his young father’s birthday—“a fact that, let’s just say, was complicated.” He considers some of his “unconscious drift toward psychology” to be a reaction to his father’s long-standing dysthymia. His one sibling, a brother who is a pilot in the Navy, is ten years younger. “It is like a family of two only children.” Ken was particularly close to his maternal grandparents. “They had big personalities. They met while riding the range in the Dakotas and then ran liquor in Chicago in the 1920s. Then they bought a farm on Bass Lake in Indiana, just over the Illinois–Indiana border, where they had both grown up. I spent a lot of time there—in the country, in the water, in the garden and the barn—so I think of myself as coming from both Illinois and Indiana. My maiden aunt Idie, who was a kind and tolerant person, lived with my grandparents and was also part of my childhood.” Ken’s mother was “somewhat akin to Idie, a woman who loved children and wanted everyone to be happy—or at least not anxious, even when they were!”

Corbett described himself as “different as a child, a talks-too-much-sissy-bookworm.” But he was also an easy and agreeable boy who enjoyed the company of an adult world. “I think I had a pretty good childhood, especially given that I posed a real challenge for my parents. My family was not educated or worldly and of course, as a child, neither was I—but my curiosity often took me far afield, and eventually took me very far away from small town farm life. The distance was difficult for us all. Thankfully, it is a difference that time has soothed, as it were.” He says that he was “saved by books—I read all the time--constantly--and from early on I went to the adult section of the town library. I read The Old Man and the Sea in third grade and began reading Jane Austen in fourth grade! I had little idea what these books meant, but I could read them and pretend to understand them. I still read constantly and have always maintained my allegiance to 19th century British fiction. I think George Eliot is the consummate psychologist.”

His interest in literature led Corbett to major in Psychology and Linguistics for a BA degree at Northern Illinois University and an MS degree at the University of Wisconsin, where he studied childhood language development. His PhD in Clinical and Developmental Psychology is from Columbia University, where his interests evolved toward psychoanalytic theory and gender studies. He told me that there were two experiences that stood out for him as a student. The first was his attendance at a short seminar taught by Angela Davis, when he was an undergraduate: “I think it was the first time that I understood that you could use your mind to try to change the social world—that ideas had currency, clout, possibility.” The second experience
was more substantial, and Corbett acknowledges “a great debt of gratitude” to John Broughton, his graduate school advisor. Broughton, who had been a student of Kohlberg at Harvard, “introduced me to the rich possibilities born of the marriage of psychoanalysis, developmental theory, and critical theory.”

At Columbia, Corbett worked with a circle of graduate students who were interested in feminism and in the just-burgeoning field of queer studies. “I was in graduate school at a very fertile time, just as second-wave feminism was starting to engage psychoanalysis and gay liberation was moving from the streets to the Academy in the form of queer studies.” It was at Columbia that he first met and studied with a group of women who are fondly called “The Gang of Four”: Jessica Benjamin, Virginia Goldner, Muriel Dimen, and Adrienne Harris. He went on to further collaboration with “The Gang of Four” at the New York University Postdoctoral program, where he studied with “the shining lights of the American relational school,” including Stephen Mitchell. At the same time, he made it a point to spend at least half his time studying with the Freudian faculty. Building on this rich mixture of diverse thinking, Corbett’s current work is characterized by blending developmental psychology with relational thinking with Freudian thinking, blended in turn with other analytic traditions such as self psychology and British object relations. (Donald Winnicott and Adam Phillips are often quoted in his writings.)

“The Gang of Four” continues to collaborate with Corbett as well as, recently, Judith Butler, “whose work serves to stimulate and thrill us all.” This fall, Corbett and Butler conducted a colloquium at New York University, Doing Gender, which was extremely well received. Dimen reports, “The long hoped for-interdisciplinary conversation has begun to take place at last, not, to our surprise, among second-wave feminists, but in the Butler-Corbett colloquium and what it represents: a queer, postmodernist, and clinical discourse articulated, practiced and applied, for starters, by two of the premier members of the next generation, a philosopher and a psychoanalyst, speaking to an audience of clinicians and academics, professors and graduate students and candidates.” As Judith Butler has done in her own field, Ken Corbett is now doing in his: moving our intellectual and clinical practices in a new direction, one that follows on the journey so far, but is also a departure bound to take us to places we could not have expected. And Harris commented, “The colloquium was an ‘event,’ fabulous. We refer to it now as ‘The Ken and Judy Show.’ The room was packed, with people sitting in the aisles. Their different ways of thinking about gender made for an intriguing mix.”

Perhaps at the heart of Corbett’s work is his belief that “psychoanalysis can be so normative, such a bully. We lost hold of the very wide arc of the human, the variance that may make life worth living.” Corbett believes in the use of writing to “try to capture the affect that underscores life and human development,” and he has set out to “queer the record” by “queering the inflection” of psychoanalytic writing. His early work on girlyboys (Corbett, 1996) is an interesting example of this voice and, although Corbett wrote the paper in an ironic tone, it addresses what he calls the “peculiar ideality” of gender variance.

In conjunction with his innovative thinking, Corbett respects the importance of daily living and the ordinary “normal.” “Ordinary life matters, even for the rebel,” Corbett commented. “Normal can be dull and defensive—and it can also be relational and rehabilitating.” He examines features of normative boyhood by integrating his new ideas with concepts like psychic structure and ego integration. “Call me old-fashioned, but I find these ideas to be helpful and important. I just want to free them from their normative value chock-hold and their theoretical fixity.”

Donald Winnicott predated Corbett with radical thinking about ordinary matters of childhood, and Corbett acknowledges his interest in Winnicott in a footnote from one of his papers: “Something about the tone of Winnicott’s writing allows me to imagine him living a daily life on his own and with his patients. I like to think he might have joined hands with [Adam] Phillips and me as we live each
day before the revolution, even though I suspect Winnicott was not much interested in revolutions” (Corbett, 2001b, p. 349). One can only wish that Winnicott were around to comment on Corbett’s work, because surely he would have been interested. Adam Phillips, who is a Winnicott biographer, has written admiringly about Corbett’s work (Phillips, 2001), commenting that Corbett works with “a perplexity of sympathies.” (When asked about Phillips’ remark, Corbett replied, “Perplexed is good—I can live with that. Maybe it’s the best we can hope for.”)

Corbett is currently at work on a book tentatively titled, Boy Hoods: Psychoanalysis and Masculinity, a series of essays aimed at critiquing and re-fashioning the psychoanalytic theory of masculinity. “My aim is to present masculinity as a complex field: atomistic, ever-shifting, yet also marked by pattern and the structure of process.” He questions and re-works basic concepts such as penis envy, castration, oedipal theory, and even gender, which he views as “a border phenomenon between the social and the psyche, between the conscious and the unconscious.”

Summarizing his professional goals, Corbett points to ongoing efforts to promote human variance, “especially in relation to masculinity, the norm, if you will, looking to be perplexed, looking to be deconstructed and made more complex.” Having now met him and read his writings carefully, I see how his multidisciplinary style allows his messages to be received by people who might not usually listen to a rebel. Considering his passion and his commitment to open-mindedness, we may be surprised in years to come by what he has to tell and by the contagion of his questioning stance.

Two of Corbett’s closest colleagues have provided personal impressions of their friend. Adrienne Harris writes, “Kenny has many talents, some obvious, some you might not expect. One signature quality to his clinical writing is his way of holding the family and the child in a complex but loving gaze. He does not, as can happen in child work, build an intractable opposition between himself and the parents; so the work feels very close and moving, even as the clinical situations can be fraught. Something you might not know about Kenny is his skill as an editor. This is a kind of behind-the-scenes work that takes nerves of steel and a steady hand. I have so often been struck by the judiciousness of his editing, his calm, his ability to put out brush fires, soothe feathers and move the group or the project along. It’s a great skill.”

Muriel Dimen adds, “Ken and I have been friends and colleagues for 25 years, and we’ve shared an office suite for 15. Who would have known I would luck out like that?! In all these years, we’ve had one disagreement—and he was right. Ken is so very talented in so many ways. His intellectual and clinical and, let us not forget, emotional acuity go straight to the heart of any matter. He is kind and warm and funny. And his queer-eye-for-the-straight-girl take on my apartment renovation was and is priceless.”

So . . . you can see why Ken was chosen as a keynote speaker for the spring meeting, the theme of which is Love, Desire and Passions: Variety, Enigma and the Disruption of Psychoanalysis. Please join us this April in Philadelphia; you will likely learn something and you will certainly enjoy this man!

References and Partial Bibliography of Corbett’s Writings

Where will you be professionally in five years? We can help you answer this question.

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The Psychodynamic Diagnostic Manual: An Overview

Stanley I. Greenspan, MD, Nancy McWilliams, PhD, and Robert Wallerstein, MD

There was a “standing room only” crowd for Nancy McWilliams’s talk on the development of the PDM at a recent meeting of the American Psychoanalytic Association in New York this January. Along with Satnley Greenspan and Robert Wallerstein, Nancy will reprise this important discussion at our Spring Meeting in April. In the final stages of editing this comprehensive document, Nancy reports that she hopes the PDM will be available for sale at this meeting. The editor.

The Psychodynamic Diagnostic Manual (PDM) is a diagnostic framework that describes the whole person—both the deeper and surface levels of an individual’s personality and that person’s emotional and social functioning. It emphasizes individual variations as well as commonalities. This framework opens the door to improvements in diagnosis and treatment of mental health disorders and to a fuller understanding of the functioning of the mind and brain and their development. The PDM complements the DSM and ICD efforts of the past 30 years in cataloguing symptoms and behaviors.

The PDM is based on current neuroscience and treatment outcome studies (discussed in the research section) that demonstrate the importance of focusing on the full range and depth of emotional and social functioning. For example, research on the mind and brain and their development shows that the patterns of emotional, social, and behavioral functioning involve many interconnected areas working together, rather than in isolation.

Treatment outcome studies point to the importance of dealing with the full complexity of emotional and social patterns. Blatt and colleagues demonstrate that the features of the psychotherapeutic relationship, which involve many components of the mind and brain working together in an interpersonal context, predict outcomes far more robustly than any specific treatment approach per se. Westen and colleagues demonstrate that treatments that focus on isolated symptoms or behaviors (only one part of the mind and brain), rather than larger personality and social and emotional patterns, are not effective in sustaining even narrow behavioral or symptomatic change and do not address more complex personality patterns. In addition, Shedler and Westen, Dahlbender, and many others show that it is now possible to measure complex personality patterns, emotional and social patterns, and the interpersonal processes that constitute the active ingredients of the psychotherapeutic relationship. Reviews by Leichsenring and Fonagy, as well as others, demonstrate that psychodynamically based therapeutic approaches not only alleviate symptoms, but also improve overall emotional and social functioning.

The PDM was created through a collaborative effort of the major organizations representing mental health professionals concerned with in-depth approaches to emotional, social, and behavioral functioning. These organizations are: the American Psychoanalytic Association, the International Psychoanalytical Association, the Division of Psychoanalysis of the American Psychological Association, the American Academy of Psychoanalysis, and the National Membership Committee on Psychoanalysis in Clinical Social Work. Their presidents formed a Steering Committee and recommended members to serve on work-groups to construct this diagnostic classification system.

The diagnostic framework formulated by the PDM work groups systematically describes:

- Healthy and disordered personality functioning;
- Individual profiles of mental functioning, including patterns of relating, comprehending and expressing feelings, coping with stress and anxiety, observing one’s own emotions and behaviors, and forming moral judgments;
- Symptom patterns, including differences in each individual’s personal or subjective experience of his or her symptoms.

In summary, the Psychodynamic Diagnostic Manual adds a needed perspective to existing diagnostic systems. In addition to considering symptom patterns described in these systems, it enables clinicians to describe and categorize personality patterns, related social and emotional capacities, unique mental profiles, and personalized experiences of symptoms. It provides a framework for improving comprehensive treatment approaches and understanding both the biological and psychological origins of mental health and illness.

Rationale for the PDM

A clinically useful classification of mental health disorders must begin with an understanding of healthy mental functioning. Mental health involves more than simply the absence of symptoms. It involves a person’s overall mental functioning, including relationships, emotional regulation, coping capacities, and self-observing abilities. Just as healthy cardiac functioning cannot be defined simply as an absence of chest pain, healthy mental functioning is more
than the absence of observable symptoms of psychopathology. It involves the full range of human cognitive, emotional, and behavioral capacities.

Any attempt to describe and classify deficiencies in mental health must therefore take into account limitations or deficits in many different mental capacities, including ones that are not necessarily overt sources of pain. For example, as frightening as anxiety attacks are, an inability to perceive and respond accurately to the emotional cues of others—a far more subtle and diffuse problem—may constitute a more fundamental difficulty than a few episodes of unexplained panic. A deficit in reading emotional cues may pervasively compromise relationships and thinking and may indeed itself be a source of anxiety.

That a full conceptualization of health is the foundation for describing disorders may seem self-evident, and yet the mental health field has not developed its diagnostic procedures accordingly. In the last two decades, there has been an increasing tendency to define mental problems more and more on the basis of presenting symptoms and their patterns, with overall personality functioning and levels of adaptation playing a minor role. There is increasing evidence, however, that both mental health and psychopathology involve many subtle features of human functioning. These include, in addition to surface behaviors and symptoms, a person’s experience, awareness, and expression of a wide range of positive and negative emotions; coping strategies and defenses; capacities for understanding self and others; and quality of relationships. Mental functioning, whether optimal or compromised, involves not only the surface but also the deepest levels of the mind. Mounting evidence from neuroscience and developmental studies supports this perspective. To ignore mental complexity is to ignore the very phenomena of concern. After all, our mental complexity defines our most human qualities.

To describe accurately the mental condition of any human being, a classification of disorders of mental health must involve all relevant dimensions of human mental functioning. The psychoanalytic tradition, or what is often called depth psychology, has a long history of examining overall human functioning in a searching and comprehensive way. Nevertheless, the diagnostic precision and usefulness of psychoanalytic approaches have been compromised by at least two problems. First, in an attempt to capture the full range and subtlety of human experience, psychodynamic accounts of mental processes have been expressed in competing theories and metaphors that have, at times, inspired more disagreement and controversy than consensus. Second, there has been difficulty distin

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of this effort raise the possibility that such a strategy was misguided. Ironically, emerging evidence suggests that oversimplifying mental health phenomena in the service of attaining consistency of description (reliability) and capacity to evaluate treatment empirically (validity) may have compromised the laudable goal of a more scientifically sound understanding of mental health and psychopathology. Most problematically, reliability and validity data for many disorders are not as strong as the mental health community had hoped they would be. Allen Frances, Chair of the DSM-IV American Psychiatric Association Task Force, commented in *The New Yorker* magazine that the reliability hoped for has not been realized and that, in fact, the reliability among practicing clinicians is very poor. In moving towards DSM-V, the APA Task Force is consequently shifting towards a more dimensional, rather than purely categorical, approach.

The PDM is organized around an understanding of the processes that contribute to emotional and social functioning. Early in its history, psychodynamic theories emphasized etiological factors. As in all fields of medicine, clinicians and researchers quickly learned that the etiology of all disorders was more complex than the initial observations and theory had suggested. For this reason, psychodynamic models have moved in the direction of functional understanding of mental health disorders, with the expectation that such understanding will guide the identification of etiological patterns. For example, the PDM approach to personality disorders is built around identifying patterns that capture the quality and degree of impairment in such basic emotional capacities as forming and sustaining relationships; regulating affects, moods, and impulses; and carrying out essential human functions in family, educational, and work settings. The profile of mental functioning in the PDM examines in great detail the components of these functional patterns. The approach to symptom patterns in the PDM is to add to the descriptive level of the DSM system an understanding of the patient’s unique internal experience of those symptoms and their functional role in the patient’s overall experience of the world.

The PDM uses a multidimensional approach to describe the intricacies of the patient’s general functioning and ways of engaging in the therapeutic process. It begins with a classification of the spectrum of personality patterns and disorders found in individuals. It then describes a “profile of mental functioning” to look in more detail at each of the patient’s capacities. This is followed by a description of the patient’s symptoms, but with a focus on the patient’s internal experiences as well as surface behaviors. The PDM covers adults, as well as infants, children, and adolescents.

Continued from page 10

a half-century ago. Managed care uses the DSM because they do not have anything better to offer and they are making plenty of money using the DSM. There is no pressure to change.

In my judgment the DSM system has been flawed from the beginning. Teaching this system in graduate programs merely adds to the cost of graduate education. From my perspective psychologists should use the ICD diagnostic system any time they can. It is a significant way to simultaneously simplify diagnosis and fight psychiatric adversaries. I believe psychologists should try to gain the acceptance of a classification system based on functionality, such as the International Classification of Impairments and Disabilities that is also the work of WHO.
The Psychodynamic Diagnostic Manual (PDM) is the result of a unique collaboration among the major psychoanalytic organizations. The PDM covers adults, children, adolescents, and infants and systematically describes:

- Healthy and disordered personality functioning
- Individual profiles of mental functioning, including patterns of relating, comprehending, and expressing feelings, coping with stress and anxiety, observing one’s own emotions and behaviors, and forming moral judgments
- Symptom patterns, including differences in each individual’s personal or subjective experience of his or her symptoms

For the past two years a task force selected by presidents of the psychoanalytic organizations listed above systematized the descriptions of both the deeper and surface levels of an individual’s personality, emotional and social functioning, and symptom patterns, emphasizing individual variations as well as commonalities. The PDM describes the whole person and complements the DSM and ICD efforts in cataloguing symptoms and behaviors. The PDM opens the door to improvements in diagnosis and treatment of mental health disorders and to a fuller understanding of the functioning of the mind and brain and their development.

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The DSM has been a flawed system used as a political tool by psychiatry to gain economic advantage. Developments of the DSM have followed the patterns of health care economics for the past half-century. The American Psychiatric Association’s Diagnostic and Statistical Manual, DSM I, was being used primarily to gather dust and statistics about mental disorders. No one except statisticians and cleaning ladies paid much attention to the DSM I. The APA was gathering these statistics for use in getting federal funding for mental hospitals. There was little private practice and the DSM I had little clinical relevance for reimbursement because there was no health insurance reimbursement for mental conditions, alcoholism or drug abuse or tuberculosis in those days.

Blue Cross prepayment plans for hospital costs began in about 1935, during the depression when hospitals were having difficulty collecting fees for their services. This was about the time that Social Security was started. Physicians were often paid in kind with chickens, pigs, corn, etc., or through barter of services. Physicians had long lists of unpaid medical bills. After World War II, the success of the Blue Cross prepayment system resulted in private insurers starting their own prepaid health insurance plans. Physicians then formed Blue Shield to pay physician fees and private insurers followed suit. But mental disorders, alcoholism and tuberculosis were excluded because they were deemed to be incurable due to prolonged treatment, high death rates and high relapse rates. The Blue Cross and Blue Shield plans were largely successful because Congress made medical expenses tax deductible.

Then the Taft-Hartley Act allowed labor unions to establish Retirement and Health Benefit trusts. Employer payments into these trusts were tax deductions to employers. Health insurance became big business and created huge war chests for unions to gain more benefits for their members from employers. Taft-Hartley also exempted the Union Benefit Trusts from complying with state insurance laws. The availability of health benefits aggravated the shortage of hospital beds because hospitals were not being built during WW II. So Congress enacted the Hill-Burton Act to provide significant federal funds to build new hospitals and to provide more technologically-based care. This also inflated health care costs.

Psychiatry was being left out of all of this. There was only psychoanalysis and the state hospitals. In the late 1950s psychiatry was able to get provisions for private hospital care (other than state hospitals) and some outpatient treatment written into some union contracts and federal employee health benefit plans (FEHBA). Blue Cross had 75% of federal contracts and Aetna had about 25%. Psychiatry was excluded from reimbursement. This meant that it was cheaper to see a psychiatrist at the going rate of $15 a session and be reimbursed at 50% of the fee ($7.50) than see a psychologist and pay the going rate of $10 a session. This was an untenable situation for psychology.

This was when the “dirty dozen” came into being because the academic control of APA was not supportive of lobbying for practitioners. But this is off the point. DSM I was revised to create a rationale for reimbursement of outpatient services. It was one of the bases for the Community Mental Health Clinics Act of 1963. The DSM had little support from WHO because other countries did not have the same employer-based benefits for outpatient services. The situation really heated up with the enactment of Medicare in 1966, when APA did not support psychologists being included in Medicare. Psychiatry was included in Medicare and the DSM III was its adaptation of the ICD for North America. This was a windfall for the APA because they gained control over mental health and publishing rights of the DSM that earned them big dollars and lobbying power. However, insurance companies still used the ICD series for reimbursement of physical disorders and continued to use the ICD for reimbursement for treatment fees of mental conditions. When the customary and reasonable fee for service, fee-based system was shown to be defective for mental treatment being based on the DSM and health service costs escalated faster than the GNP, health became the big stumbling block for business. Business demanded the same exemptions from state health insurance laws that unions had. They achieved this through the enactment of ERISA in 1975. This Employee Retirement Income Security Act gave employers the right to set up their own employee benefit programs and not pay into union benefit trusts. This shifted the balance of power between corporations and unions.

Corporations were not set up to do the actuarial work in establishing a health benefit plan for their employees. Businesses began to hire third party administrators and over a period of about 15 years, this evolved into managed care organizations. They were euphemistically called managed care because prior to ERISA, health insurance contracts sold and delivered in a state were subject to regulation by the state insurance commissions. The deregulation of health insurance by ERISA thus created managed care organizations. They were euphemistically called managed care because prior to ERISA, health insurance contracts sold and delivered in a state were subject to regulation by the state insurance commissions. The deregulation of health insurance by ERISA thus created managed care by corporations contracting with these entities.

So what happened to DSM? Medicare finally created its own codes for reimbursement and uses a reimbursement system compatible with the ICD but keeps the outdated 50% reimbursement rate schedule for mental health of...
It might be said that psychoanalysis and poetry have a common spiritual concern. For psychoanalysts, the form the concern takes is that our patients’ lives (not to mention our own) are largely a mess, the circumstances often terrible. Our treatment depends on a faith that despite the mess, and wrapped within the destructiveness and the self-destructiveness and the absurdity, there is something healthy, or at least a striving toward health, in every human being. We know that our method (our careful questions, our reassuring presence) would take us nowhere if it were not for that essential striving in our patients.

Modern poets—at least since the Nineteenth Century English Romantics—are up against the same, often daunting, reality. They too want to find an underlying and redeeming value, a truth and beauty in the ordinary and the ugly, in sadness, in loss, in a world which is spoiled by human stupidity and indifferent to human need. They want to celebrate an essence which makes value where there might appear to be none. Both arts depend on the conviction that there is something numinous buried in the troubles we see. The job is to find that glow, to find words for it and to magnify it.

Here’s a good and instructive example of finding the numinous in the mundane from the world of contemporary poetry. This is the title poem of Marie Howe’s widely acclaimed *What the Living Do* (1998). Her volume includes a series of poems that bear witness to her beloved bother’s slow death from AIDS.

**What the Living Do**

Johnny, the kitchen sink has been clogged for days, some utensil probably fell down there.
And the Drano won’t work but smells dangerous, and the crusty dishes have piled up.

waiting for the plumber I still haven’t called. This is the evening we spoke of.
It’s winter again: the sky’s a deep headstrong blue, and the sunlight pours through

the open living room windows because the heat’s on too high in here, and I can’t turn it off.
For weeks now, driving, or dropping a bag of groceries in the street, the bag breaking,
I’ve been thinking: This is what the living do. And yesterday, hurrying along those wobbly bricks in the Cambridge sidewalk, spilling my coffee down my wrist and sleeve,

I thought it again, and again later, when buying a hairbrush: This is it.
Parking. Slamming the car door shut in the cold. What you called that yearning.

What you finally gave up. We want the spring to come and the winter to pass. We want whoever to call or not call, a letter, a kiss—we want more and more and then more of it.

But there are moments, walking, when I catch a glimpse of myself in the window glass,
say, the window of the corner video store, and I’m gripped by a cherishing so deep

for my own blowing hair, chapped face, and unbuttoned coat that I’m speechless:
I am living, I remember you.

I find this is a deeply moving poem, one that *sings* out of its vividly drawn location and situation. There’s a big idea here, too: the life force. But it’s a life force found not in glorious sunsets or declarations of transcendent love but, astonishingly (and, formally speaking, ironically), in the homeliest of details—in the glimpsed reflection in the window at the corner video store, in the chapped face, the wind-blown hair, in missing the dead. Life goes on in the Drano in the clogged sink.

Poets like Marie Howe can teach us how to think big and write small—for us, as analysts, it’s thinking big and talking small, talking concretely about what the living do.

And there’s a personal payoff: the feeling of being at once saddened by a world-in-tears and exhilarated by the resiliency and the response to it. I think we’re lucky to have the possibility of touching that response, of illuminating it and sharing it in our daily work, where each well said word is a small victory and a spiritual triumph.
The very being of man is a profound communication. To be means to communicate... I cannot do without the other, I cannot become myself without the other; I must find myself in the other, finding the other in me”.


These days we are marking five years since December 21st, 2000, the day a dear friend and colleague, Stephen Mitchell, passed away. I feel honored to express my deep gratitude to him and to commemorate his unique and significant contribution to the psychoanalytic community in Israel as a full partner in laying down the foundations for the Tel Aviv Institute for Contemporary Psychoanalysis (TAICP).

As I begin the task of describing my personal and professional relationship with Steve Mitchell, doubts and hesitations naturally arise in my mind. First, because my acquaintance with him was relatively short and there are those who knew him better, and longer. Nonetheless, our relationship was very close and intense and had a profound impact on me, and I dare believe it had a similar effect on Steve.

Secondly, our friendship was closely related to the project of establishing the TAICP, and I was not sure I could write about him without entering too deeply into issues concerning the Institute. However, it was through this project that our relationship was born and evolved, so it is only natural that it be interwoven into my account. I am sure that Steve would have been delighted and proud to know that as I write, we are welcoming the institute’s fifth class of full-scale candidate trainees.

Finally, I feared that what I wanted to say would resemble the attempts of a person who has just enjoyed a very helpful therapeutic session and is trying to explain what exactly helped him. I was afraid I would be unable to convey his significance to me, his special way of lending support, of illuminating dark areas, of facilitating my self-expression and providing me with the courage to implement my vision.

Taking these fears and apprehensions into account, I will try to portray my relationship with Steve. Our relationship started in July 1999, by which time I had begun thinking that the dream of founding a new and independent psychoanalytic institute in Israel could materialize. I needed to consult someone and to obtain an external point of view about whether I was being realistic or merely daydreaming. For obvious reasons, I knew that my consultant would have to come from outside the Israeli Psychoanalytic Society, which was founded in 1933, and was the only psychoanalytic institute in Israel. At the time the Society was chaired by Prof. Shmuel Erlich, who adamantly opposed the establishment of an independent institute. Although this was never the Society’s official position, the atmosphere rapidly became hostile, and threats were made against any training analyst who tried to collaborate with us. As one senior training analyst from the Israeli Psychoanalytic Society put it, “McCarthyism is back and thriving.”

I decided to turn to Steve for several reasons. The first was my appreciation of him as a highly innovative and daring theoretician. Another reason was his association with the William Alanson White Institute and the New York University Post-Doctorate Program for Psychotherapy and Psychoanalysis, both of them serious, distinguished non-IPA institutes. Steve also represented a long lineage of theoreticians whose writing had affected me throughout the years, including Erich Fromm and Frieda Fromm-Reichman. Finally, as founder and editor in chief of Psychoanalytic Dialogues, Steve was well known for his executive and organizational skills. He had a vision of a new paradigm in psychoanalysis, the interpersonal-relational school of thought, and thus, he was in the midst of realizing his own dream. All these attributes and achievements, along with Steve’s unique personality, made him a figure to look up to and emulate.

My connection to Steve began through my wife Batya, who attended a clinical-theoretical seminar led by him in New York in 1995. She was deeply impressed by him and his thinking, and during a visit to New York in June 1999, she met with him again and presented him with a preliminary draft of the conceptual foundation of the new Israeli Institute, which the two of us had written, in order to receive his initial reaction. His supportive, encouraging and above all enthusiastic response marked the beginning of our friendship. It also marked the starting point for the founding of the Institute.

The first step was to recruit Dr. Gila Ofer and Mrs. Michal Hazan, two well-known senior clinicians. I became the elected chairman of the Institute, and the three of us became the executive committee. Behind the scenes was my wife, Dr. Batya Shoshani, who was in fact the fourth executive committee member. The next step was to recruit a dozen senior clinicians and university professors, who became the founding group of the TAICP. We began meeting on a regular basis, and simultaneously began our own
official training as candidates.

During the first year of our acquaintance (from the summer of 1999 to the summer of 2000) my relationship with Steve involved daily email correspondence and a long telephone conversation over the weekend. Thus, I accumulated many “Mitchellian” hours. We also had many face-to-face meetings during his visit to Israel in March 2000, some of them personal and others in intensive sessions with the Institute’s founders.

There was a period during which our email correspondence was the high point of the day for me, as a typical anecdote from that time might illustrate: my daughter was traveling in India, and at some point she began signing her emails “Steve Mitchell,” explaining that by doing so she could be absolutely sure that Dad would read the letter! Upon seeing this, over dinner at our house, he laughed to the point of tears. His vitality, humor, warm rapport and directness were always evident and engaging.

Steve Mitchell’s visit to Israel launched three formative events in the establishment of the TAICP. The first was a one-day seminar he led for the Institute’s founding group, comparing and contrasting psychoanalysis with psychotherapy. I am certain that the seminar itself and the way Steve conducted it had a significant role in shaping us from a mere group of professionals into a cohesive team. Steve provided us with the basic tenets for the conceptual foundation of our Institute-to-be.

I had asked the TAICP legal counselor to be present at this gathering in order to collect the signatures of all the founding members, a procedure which officially established the TAICP as a legal entity and non-profit organization. At that moment, our conceptual foundation was symbolically translated into concrete reality.

The second event was Steve’s and my decision that he would immediately and officially assume the role of chairman of both the advisory committee and the qualifying committee of the TAICP. Steve also gave his consent for his name to appear on the Tel Aviv Institute letterhead. Steve had said on various occasions that the Psychoanalytic Institute in Jerusalem, notwithstanding its importance and contribution as the only organization in Israel authorized to train psychoanalysts since 1933, had acquired the characteristics of a monopoly. Steve’s ideas resonated with mine. Obviously, the two most malignant outcomes of a monopolistic organization are (a) complete equivalence of signifier and signified, and (b) a patronizing relationship between the Institute and potential candidates. The Psychoanalytic Institute chose its candidates, but the candidates did not choose it, since there was no existing alternative. Since 1933, and until 1999, an absolute identification had been formed in Israel between “psychoanalysis” and the Israeli Psychoanalytic Society and Institute, which included their structure, ideology, target population, work methods, and so on. In other words, the Jerusalem Institute version had turned from a “version” into a “truth,” thus leading to the trap of equating signifier and signified (see Hanna Segal’s illuminating paper on symbol equation versus symbol formation, in Int. J. Psycho-Anal., 38:391-397 1957).

This state of affairs demanded the establishment of another Psychoanalytic Institute—an expected outcome of the democratization process. There is no question in my mind that my stay in the United States and absorption of an egalitarian–democratic philosophy, and especially the successful struggle of the APA with the American Psychoanalytic Association, had a profound influence on me and encouraged me in my decision to establish the TAICP against the hegemony of the Israeli Psychoanalytic Society. This democratic ideology stemmed inherently from the core of Steve’s values and beliefs as well as mine, both influenced by the Frankfurt School.

As our relationship strengthened and deepened, I turned to Steve for more assistance. I came to realize the honor and privilege of being acquainted with a person who played such a cardinal role in the process of revolutionizing psychoanalysis in the United States, and probably the entire world. Steve invested a great deal of effort and energy in the establishment of our institute and was unconditionally generous with his time, wisdom, extensive knowledge and contacts. This was manifested in his willingness to take over as chairman of our institute’s advisory board and to utilize his contacts within the international community to enlist supporters such as Thomas Ogden, Jessica Benjamin, Daniel Stern, Adam Phillips, Lewis Aron, Neil Altman, James Grotstein and Robert Stolorow. Later on, more members joined our international advisory and qualifying committees, among them Paul and Anna Ornstein, Owen Renik, Joyce Slochower, Jonathan Slavin, Michael Eigen, Joyce
This historical note should not undermine the role played by more than a few training analysts from the Israeli Psychoanalytic Society, who offered us their moral support, their vast experience and their guidance. Though the objection to the newly founded institute had never become the official stance of the Israeli Psychoanalytic Society, these analysts became the target of extreme criticism and an overall persecutory atmosphere. I myself, as the initiator of this “rebellious” venture, had my name slandered and my reputation smeared. I often felt shamed and humiliated, and at times I was at the end of my rope. I am quite certain that without Steve’s and Batya’s faith in the foundation of the TAICP as a legitimate and just cause, and especially their moral and emotional support, I probably would not have made it through the Via Dolorosa of founding a new institute in Israel.

In addition to his tremendous help with the Institute, Steve was also an important source of assistance and creativity in the establishment of the Israel Psychoanalytic Journal founded by Prof. Moshe Halevi Spero and myself.

I feel very fortunate, and have been deeply moved and inspired by Steve’s generosity, his executive ability, his pragmatism and his vision, married with diligence and decisiveness. Thanks to some common personality features and tendencies, we greatly enjoyed each other’s company and ideas, and saw many issues eye-to-eye. Like any good “analytic couple,” we had our honeymoon at the beginning, but after six months of acquaintance, differences of opinion began to emerge. One of them called for a “couple therapist’s” intervention. The topic of dispute was one of the most debated issues in psychoanalysis: the required number of analyses a candidate should conduct, the number of weekly hours for each analysis, and other closely related issues. We agreed that Prof. Emanuel Berman would be the right person for the mediating job. Emanuel was on the one hand deeply involved with the traditional establishment, the IPA, and on the other hand, held strong, innovative and revolutionary ideas concerning psychoanalysis in general, and training in particular. Fortunately, Emanuel was in NYC at the time. We had a long telephone conversation, and he made some suggestions that I found reasonable. Then he had a long breakfast with Steve in which he presented a compromise, which Steve could accept. Like any good mediator, Emanuel went back and forth between Steve and me. He was able to see and empathically represent both parties’ points of view and perspectives, and the differences between us were bridged ultimately. After a short while the tension subsided and our previous good rapport was restored. My contact with Steve became increasingly personal and provided me with strength and faith in myself, in the idea, and in the feasibility of its execution.

Thinking of Steve, I am reminded of a Talmudic saying that defines a person who has attained the highest moral level as “one who expounds well and practices well.” I believe this virtue was genuinely reflective of Steve. Through our relationship and conversations, I learned quite a bit about him, and felt the power of his theoretical and clinical thinking. I will mention three characteristics, which I experienced personally, and which can serve to describe his approach.

First, my strongest impression was his directness; he always spoke eye-to-eye and without airs. He never infantilized, neither in friendly nor in therapeutic relationships, but always conducted a communication between adults.

Secondly, I was impressed by his freedom to create, initiate and think while disregarding dogmas. Every human situation, every idea, deserved serious consideration, examination and maximal open-mindedness.

The third characteristic was his understanding that everything is dynamic and part of a process, whether in relation to people or to theory. Thus he viewed the different approaches in psychoanalysis and the arguments between them as essential to creating a fertile dialogue that could advance and improve psychoanalysis, rather than “the truth” versus sacrilege. He himself searched continually for the conjunction between the intrapsychic and the interpersonal.

From my interactions with him I acquired strength and a sense of legitimacy, due to his belief in the individual’s deep-rooted and natural right (and perhaps duty) to dream, decide, and realize his thoughts and aspirations, even when they collide with the establishment. This view is closely related to the concept of agency—of the individual as sovereign, which Mitchell so steadfastly believed in and elaborated, and whose roots are to be found in the thinking of his supervisor, Erich Fromm. In this context of agency and choice, he helped me understand that while feeling the enjoyment that comes with realizing and exerting one’s agency, one simultaneously loses and renounces. These inescapable losses must be felt and mourned, and, while accepting this, one must carry on.

Steve’s sudden and unexpected death on December 21st, 2000 left The Tel Aviv Institute for Contemporary Psychoanalysis prematurely orphaned. I lost a mentor, an ally, a dear friend, and a soul mate. Not a single week goes by without my remembering Steve and thinking of him. When facing new dilemmas arising in our young Institute, or difficulties emerging while practicing psychoanalysis, I find myself evoking his voice and image in order to engage in an imaginary dialogue with him and discover new paths I couldn’t see before.
Participants:
Frank Broucek, Sandy Buechler, Irene Cairo, Elizabeth Carr, Carolyn Ellman, Richard Gartner, Jane Hall, Adrienne Harris, Benjamin Kilborne, Jane Kite, Melvin Lansky, Mary Libbey, Joseph Lichtenberg, Janice Lieberman, Riccardo Lombardi, Andrew Morrison, Owen Renik, Arnold Richards, Ruth Stein, Leon Wurmser, Sara Zarem.

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The Importance of Psychoanalytic Psychotherapy Training: A Tale of Two Programs

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If psychoanalysis survives into the next century, it will be because people at long last have come to value the imperishable truth that there is something to be said for being heard by an objectively neutral but empathically interested person who can withstand the rigors and bear the joys of an inner journey with a stranger.

James S. Grotstein, 1985

Preface

It was the best of times. It was the worst of times. In the late 1970’s Freudian psychoanalysis was in the beginning of a downhill spiral. The economy was such that people had trouble affording this expensive and time-consuming form of treatment, and its results were being contested by writers who challenged Freud in different ways. Heinz Kohut (1971) wrote The Analysis of the Self, advocating a new type of therapy called self psychology that focused on the patient’s idealization of the analyst and the need to be mirrored, ideas that precluded the types of interpretation that Freud had advocated. Otto Kernberg (1975) spoke of the Narcissistic Personality Disorder, a diagnosis that he felt required confrontation of aggression by interpreting projective identification, and by including a social worker to set limits with sicker patients. A decade of discussions in the psychoanalytic literature attests to the contributions made by both theoreticians. The culture had become increasingly narcissistic (Lasch, 1979) and theoreticians were addressing a seemingly new patient population with new theories.

This state of affairs affected Freudian-trained psychoanalysts who saw their practices begin to dwindle along with their bank accounts. As their morale suffered, their lowered confidence level seemed to seep through to their patients as fewer potential analysands were willing to undertake four and five times a week treatment. This, combined with the new category of narcissists and so called borderline patients, led to renewed interest in Leo Stone’s 1954 paper, “The Widening Scope of Indications for Psychoanalysis,” which encouraged analysts to broaden their skills to deal with the more difficult patient. Rothstein, in his book Psychoanalytic Technique and the Creation of Analytic Patients (1995) states that the analyst’s countertransference directed the diagnosis and that analysts had themselves to blame for fewer analytic patients in their practices. Rothstein also sees a patient’s refusal to agree to a course of analysis as a resistance meant to frustrate the analyst. I challenged this view by proposing that a “wading in” approach is more acceptable to an average person who perhaps has never even heard of psychoanalysis (1998). I agree with Bernstein (1983) in seeing a period of psychoanalytic psychotherapy as a possible prelude to psychoanalysis.

In 1974 Gertrude and Reuben Blanck tackled the problem of what form of treatment to offer the “less structured” patient with a book Ego Psychology: Theory and Practice, and by forming the Institute for the Study of Psychotherapy (ISP) dedicated to teaching psychotherapy based on their ideas. They reasoned that before a patient could deal with lifting repression (Freud’s idea), there had to be a strong enough ego in place. They called their method Ego Psychology (not to be confused with Freudian ego psychology) and based it on strengthening the ego; and they used the theories of Spitz, Mahler, and Jacobson as a basis for their thought. After many years of success they retired, and five of their students (some analytically trained and some not) went on to form the New York School of Psychoanalytic Psychotherapy (NYSPP). In designing the three-year curriculum, the founders combined what they had learned from the Blancks with a more Freudian approach.

Other institutes began psychodynamic psychotherapy programs, and by 2005 many psychoanalytic institutes include a program in psychotherapy. Taught in most cases by medical analysts, many of whom never had training in psychoanalytic psychotherapy proper, courses in diagnosis and psychopathology are a chief factor in determining techniques such as support, direction, manipulation and management, along with courses on development and psychopathology. JAPA has published debates on the differences in the two forms of treatment, first in 1954, and again in 1979. Results seemed to give a message that psychotherapy was less than psychoanalysis. The term “less than neurotic” was coined and measurement often clouded a patient’s chance to grow (Flarscheim, 1972). When a panel (JAPA, 1979) addressed the issue of the therapeutic action of psychotherapy, Robert Wallerstein posed a question: is psychotherapy only a derivative form of psychoanalysis, or does it have distinctive emergent properties of its own? He acknowledged that psychotherapy might well be a major part of a psychoanalyst’s practice. I pose a different question: is psychoanalysis a specialty of psychoanalytic psychotherapy that should be taught once psychotherapy training is complete (or at least after several years of course work and supervision)?

Many analysts when treating a patient who is not either ready or able to participate in psychoanalysis use non-analytic techniques such as support and advice, while ignoring transference manifestations completely (Hall, 1998). This paper questions where or whether a prospective psychoanalytic candidate, or even a psychoanalyst, receives training in psychoanalytic psychotherapy. It also
A Case in Point

In a class at the New York School of Psychoanalytic Psychotherapy, a candidate who had been working in a treatment center like Daytop Village where the behavioral model is used, presented a case showing that although a behavioral approach is useful and often necessary in work with substance abusers, high relapse rates underscore the need for a psychoanalytic component that targets the roots of conflict. Due to the time-limited nature of most community-based drug clinics, the behavioral approach can have a temporary impact on patients struggling to work through the trauma suffered in their formative years.

Drug use (heroin, cocaine, marijuana, alcohol etc.), if seen as self-medication, alerts the therapist to severe pain. Telling a patient to stop as a condition of treatment rarely works. Understanding with a patient what the drug means for her, how it alleviates pain, pinpointing the pain if possible, are approaches that over time lead to a working alliance and avoid a power struggle. When the therapist has respect for the patient’s attempts to negotiate life, and when she can replace her critical tendencies with benign curiosity, an inroad is made. If the drug is seen as a necessary crutch by the patient, the therapeutic journey can begin that way.

Informed by the theoretical and clinical insight gained from institute training, the therapist began listening to her patient’s stories with a different and more attuned ear. Us-
ing a psychoanalytic lens, she could view the constant flight and drug-induced highs as an attempt to defend against the loneliness, pain, and rage her patient was unable to express in words.

Ms. S, a Native American/African American in her mid-30’s, entered drug treatment for alcohol and cocaine addiction as a condition of regaining custody of her three youngest children who, for the past two years, had been in kinship foster care with her mother after being removed from Ms. S on child neglect charges. Ms. S began drinking alcohol and smoking marijuana in adolescence and developed a cocaine habit in her mid-20s; by age 30 she was inhaling cocaine on an almost daily basis. She had called her mother for help after suffering a “breakdown” and was hospitalized for a short time. She had been in two different treatment programs before coming to the clinic, but had been discharged from both because of what had been described as her “acting out” behavior.

Ms. S had a history of suicide attempts and gestures, obesity, bulimia, and self-mutilation, and she had undergone several psychiatric hospitalizations and medication regimens. She also had a history of “running away” from things when they proved too much for her: family, men, jobs, and, therapy. The clinic was no exception. She bolted from therapy twice, the first time about six months into treatment following the therapist’s absence for a week’s vacation, and the second time following a brief but inevitable disruption inflicted by the World Trade Center disaster.

In this case, the therapist was able to resolve the first treatment break, which was accompanied by an alcohol and cocaine relapse, by a gentle but firm insistence that Ms. S come in to talk about what had happened. The therapist reported that after examining her own feelings, it became apparent that she had assumed her assigned role in Ms. S’s sadomasochistic enactment and that Ms. S was hoping to be coaxed back following a display of disruptive behavior that she knew would worry and disturb the therapist.

Ms. S had early on become very attached to the therapist, who seemed to represent her father in the transference, and became frightened before the therapist’s vacation, and then enraged by the anticipation of devastating loss (father, the only person she felt accepted and loved by, died suddenly from an overdose when patient was 14). She was reliving the drama by reacting to a separation with the therapist, acting out a memory that she was not able to verbalize.

The therapist recognized her own countertransferrential feelings of worry, anger, and helplessness that ensued when Ms. S abruptly left treatment. This enabled her to interpret Ms. S’s flight and use of drugs as “an attempt to avoid the rage she was experiencing and to defend against further loss.” The therapist also noted: At the time, Ms. S largely resisted this attempt to engage her in an exploration of the anger she was projecting, but acquiesced to return to treatment. “I don’t see it,” she said with a sheepish, satisfied grin, “but if you think it will help, I’ll give you another chance.”

It is not unusual for a patient with a history of abuse to deny her feelings of rage. The internalized object representation, now part of the self, is impossible to give up (Hall, 2004). The best the therapist can do is to modify or overlay the attachment by providing a new object with whom to identify. Sometimes the rage is expressed in self-injury and in frustrating the therapist. These concepts of transference/countertransference, resistance and the repetitive compulsion are part the foundation of the coursework in a psychoanalytic psychotherapy program. The therapist, having completed courses in technique along with courses in object relations and acting out was empowered to apply these concepts to her own cases.

Ms. S’s addiction masked the loss and subsequent depression she experienced in her formative years. Drug and alcohol abuse is essentially a passive response by the ego to conflict and loss, providing an illusion, albeit short-lived, of power and control. In her adult years, a cocaine/alcohol high served as a defense against closeness, separation, and rage (Hall, 1998). Through identification with a neglectful narcissistic mother and a frequently absent alcoholic father who surrendered to their own emotions, drug use also represented an attempt to recapture the lost objects and thereby ward off her depression. This is an example of how masochistic behavior and the symptom of drug abuse are indicators of buried rage; the non-verbalized, acted-out anger that often ends the treatment.

The second break was complicated by Ms. S having witnessed the 9-11 terrorist attack from a bus on her way to work in the downtown financial center. Witnessing the horror had re-traumatized her, and she had isolated herself in her apartment, located in the same downtown area, for approximately two weeks before calling to say she had decided to hospitalize herself for symptoms of posttraumatic stress. The therapist, who had not been able to reach her during the two weeks because of the shutdown of phone service in the area, supported her decision and said she would be waiting for her when she got out. Unlike the past, when she had welcomed the “rest” of a psychiatric hospital stay, Ms. S checked herself out after a few days, feeling, she said, that she didn’t “belong there anymore.” She returned to treatment the next day.

The world shattering event of 9-11 seemed to have shifted her perspective, and Ms. S became more reflective about the quality and meaning of her life and more responsive to the therapist’s attempts to direct her anger to the therapist as transference and new object, one that could
contain and not be destroyed by her rage (Hall, 1998). Thus began a new chapter in the treatment process.

For the first time Ms. S. was able to acknowledge her anger at the therapist for not being there in her time of crisis, for not protecting her in her time of desperate need. Reflecting some measure of self-object differentiation, she also acknowledged that her fantasy of rescue was, given the nature and magnitude of the event, a wish that could not realistically have been realized. In subsequent sessions she began to voice the longing she felt for her mother’s “unconditional love” and the deep disappointment she experienced, over and over, as a result of her mother’s inability to empathize with her needs.

Other smaller breaks also occurred during the treatment. A less disruptive break occurred after the therapist’s absence during an extended holiday weekend, when Ms. S did not appear or call the entire next week. When she did come in the following week, she initially denied any anger towards the therapist but later, with some encouragement, was able to talk about feeling abandoned and alone, even though, she felt obligated to point out, the therapist was “entitled to a day off once in a while.” She was able to verbalize feelings of wanting to hurt the therapist by “picking up” [using cocaine] and disappearing for a while “to get even.” She reluctantly described a fantasy she had been nursing, in which she confronted the therapist with bitter accusations of blame for her relapse and was greeted with the therapist’s extreme contrition for having caused her so much pain. Her discomfort at revealing her feelings seemed to ease with the therapist’s acknowledgment of how very difficult it must have been for her to put her true feelings into words and how much progress it revealed. She was then able to go on to talk about how an incident with her mother over the weekend had triggered her anger and how alone and “little” she had felt. This time she had not resorted to drug use to mask her rage, believing, she said, that she would only have ended up hurting herself.

Here the therapist was able to see these illustrations of Ms. S’s acting out in the treatment as a reaction to her sense of loss and abandonment by two narcissistic parents, and the lack of individuation that had taken place as a result. The therapist noted that: “Like so many others addicted to drugs and alcohol, Ms. S. entered treatment lacking a stable self-image and a sufficiently self-observing ego, and treatment was an effort to engage her in a self-reflective process that would enable her to put words to her thoughts and emotions and, over time, strengthen her ego capacity to self-regulate. While working with abused, addicted individuals is almost always an uphill battle, it can be gratifying when even small advances in the treatment occur.”

The therapist’s theoretical understanding of child development, with its issues of separation/individuation; her knowledge of the compulsion to repeat (abandoning her own children as she was abandoned); her ability to work with transference, countertransference and projective identification; along with her clinical understanding of consistency, neutrality, interpretation, and empathy helped her to treat Ms. S in psychoanalytically oriented psychotherapy.

**A Modality On Its Own: Psychoanalytic Psychotherapy**

Psychoanalytic psychotherapy is a specific form of treatment that provides a corrective emotional experience with the therapist as new object who explains, tolerates, strengthens ego functioning, uses transference interpretations when appropriate, connects free associations, and permits more benign object relating to occur, enabling-empowering the clinic patient (as well as the private patient) to resume the developmental process that has become derailed. Programs that teach the therapist that each individual who crosses their threshold is unique, worthy of respect, and doing the best he/she can, are teaching the kind of psychotherapy that, if given an opportunity, can give a second chance to the disadvantaged, the traumatized, and the abused who so often turn to addictive and other self-destructive behaviors.

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I saw this first hand in the early 1970s while working at Greenwich House, a mental health clinic serving the needs of drug users, many of whom were on welfare. At that time, fresh out of social work school, I was in a psychoanalytic psychotherapy program that gave me important tools with which to work. One group of seven African American ex-heroine users in their 40s and 50s and 60s, who still used occasionally and were mandated to come to the clinic by welfare, really took to the respect and benign curiosity with which I greeted them. First of all, being called Mr. and Ms. was a new experience for them. Being listened to without judgment was also a new experience and within a few months of weekly meetings, some requested private therapy. As the members in this group began caring about each other, they became a more cohesive group. When a member was arrested for petit larceny, the group wrote to him while he served his jail term. One thing I learned, that really surprised me, was that stealing was a valued skill; one addict told us that when he gave up using heroin, what he really had more trouble giving up was petty theft. He had no other skill and this was one that he knew he was good at. It gave him self-esteem.

Psychoanalytic psychotherapy must be given its place in the sun. In New York I have been privileged to join with colleagues to found two psychoanalytic psychotherapy programs: The New York School for Psychoanalytic Psychotherapy (NYSPP) training program in 1968, and the New York Freudian Society (NYFS) psychotherapy program in 2002. The philosophy of the NYFS and NYSPP is based on the premise that almost everyone who crosses the therapist’s threshold is looking for a second chance; a chance to live richer, less restricted lives (Hall, 1998). Even those patients who are required by the courts or other outside agencies to see a therapist (often at a clinic) had an often hidden wish to improve their lives. Both institutes created programs that teach clinicians that second chances depend on the therapist’s ability to show the patient that present life is colored by the past, and that understanding how the echoes of the past resonate and shape one’s life gives a person new choices and opportunities to resume development and resolve conflicts that are crippling. The idea of being listened to in a non-judgmental way in a safe, consistent, empathic setting is a new experience for most patients, and the psychotherapy students would learn that such an approach could contribute meaningfully to growth and development. Insight and empathic listening gives the patient a beginning sense of mastery not unlike the mastery achieved in learning a new skill. The training committees of these psychotherapy programs believed that beginning therapists would learn the skills necessary to deepening the treatment (technique) alongside the normal and pathological development of the human being (theory) – from birth through old age. Understanding developmental stages of life, and what can go wrong, enables the therapist to empathize rather than judge. In fact, in my mind, understanding the frustrations and calamities of the growing child is the most important ingredient in learning to empathize. Both programs stress the developmental approach and teach Freud during the first year. (See appendices for brief course descriptions for both programs.) I was recently impressed by a colleague who teaches at a high school for the disadvantaged where the children read Freud eagerly. These troubled children seemed to sense the power of the unconscious and the idea of repression before defenses had become rigid.

During the beginning stages of working with a patient the therapist has time to assess the patient’s potential for psychological mindedness, which is often over-shadowed by initial anxiety. In this same period, the patient has time to determine whether she feels enough rapport with the therapist to begin the gradual process of relating and revealing difficult, long-standing secrets. The way in which the therapist provides a safe environment while engaging the patient in psychoanalytic work, all the while maintaining her conviction that this work is effective in the face of the patient’s despair and negativity, is the centerpiece of psychoanalytic psychotherapy programs. Consistency is the A of the ABCs. Most patients have never experienced consistency and this goes far in engendering trust. A therapist who is there, waiting at the appointed time, rain or shine, is crucially important. A psychotherapist who respects the patient’s pushes towards and pulls away from exploring her inner life is on the way to enabling the patient to trust in the psychoanalytic process.

Psychoanalytic psychotherapy programs must aim to teach that it is up to us as therapists to see to it that our patients are presented with the “imperishable truth” of which Dr. Grotstein speaks. The NYSPP program, having been founded by both analysts and non-analysts, was not originally intended to be a stepping-stone to analytic training. The NYFS Psychotherapy Program, conversely, was created by analysts for the clinicians who, while not committed or ready to begin a program in psychoanalysis, were interested in a less rigorous training experience, an experience that would help the beginning clinician do psychoanalytically oriented treatment. As many people come to a therapist’s office, whether in a clinic setting or in private practice, prepared to undertake weekly therapy (sometimes referred to as counseling), so too do clinicians often need to wade in to practicing on a deeper level. Such wading depends on knowledge of the theory of human development and an education in basic psychoanalytic technique.

Patients often have little idea that their presenting problems are just the first few bars of their song (Hall, 1998). Weekly counseling is rarely enough to achieve
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lasting change, but it is a reasonable way to begin. This is true with beginning therapists who often ‘counsel,’ which includes such techniques as advice giving, sharing their personal experiences, giving information, taking sides, making judgments, and being supportive or punitive. Psychotherapy programs must be formed to give these beginning clinicians the tools for understanding development and the tools of technique, with an understanding of appropriate neutrality and abstinence and the concepts of transference and resistance. In short, the aim is to teach psychoanalytically oriented psychotherapy and also to interest those who wish to do deeper treatment to enter psychoanalytic training. These programs would be for the mental health professional interested in learning the basics of psychoanalytic technique, and for the clinician who knows that ‘fast cures’ are rare and understands that while a behavior modification approach can help specific problems it does not touch the deeper problems of living.

**Issues at NYFS**

The NYFS, a component society of the IPA, in business for 45 years, began with an established psychoanalytic program. When that program failed to attract analytic candidates for three consecutive years, a committee was formed to create a new, shorter program based on psychoanalytic thinking. The students for this program, wishing to learn how to improve their psychotherapy skills, would gain important understanding of the human beings coming to their clinics or offices, and those who wished to go on for in-depth training in psychoanalysis would be a bonus. In creating their psychotherapy program, the NYFS committee sought to address three issues: competition from other societies, the validity of psychotherapy, and morale in the society.

By the late 1990s, many psychotherapy based training programs had come into existence. The NYFS committee felt the need to compete with three-year programs and set about crafting a two-year program with the hope that the students would want further training later. The debate in the psychoanalytic literature between the values and differences in the two modes of treatment, psychotherapy and psychoanalysis, began with Freud. When thinking about the large-scale application of psychoanalytic treatment, he spoke of the pure gold of psychoanalysis vs. the copper of direct suggestion (Freud, 1918). The debate continues to rage, and perhaps it always will. In 1998 NYFS addressed the question.

Some members of the NYFS opposed the idea of a psychotherapy training program because they feared it would compromise the image of NYFS as a psychoanalytic training institute. This hurdle was finally overcome as the committee presented its plan to the Board of Directors; a plan that affirmed psychoanalytic psychotherapy as a specialty that requires specific training and that ensured such a program would not compete with the psychoanalytic program already in place.

Using the framework of the life cycle, this unique training program would focus on recognizing the unconscious, how it effects and is affected by development, and how it influences life choices. The curriculum would provide exposure to a wide range of psychoanalytic thought, and emphasize the integration of theory and technique. Clinical material would highlight theory throughout the coursework (NYFS 2002). It was hoped that studying development along with technique would help the clinician in his or her present clinical work. For instance, understanding how trauma and abuse along the spectrum of development affects a human being increases the clinician’s ability to empathize with a patient suffering from bulimia or drug addiction.

Another motivating factor in beginning this psychotherapy program had to do with addressing low morale at NYFS. This morale problem was closely linked to the lack of analytic candidates, which affected all members. Encouraging non-faculty members to gain teaching experience was an important goal. The same held true for supervisors not yet training analysts. The committee’s recommendations regarding instructors were based on a dual mandate:
for those NYFS members who had never before taught at NYFS, to provide the experience needed to apply for future positions in the analytic track; and to select teachers who had enough experience in other settings (clinics and private practice) to work with beginning clinicians. Every effort was made to offer teaching and supervising positions to this group. A senior faculty person was asked to visit or give one class during each 12-week course. Everyone taught and supervised without financial remuneration.

The committee enlisted Sheldon Bach, Fred Pine, Anni Bergman, Martin Bergmann, Ruth Lax, and Marsha Levy-Warren, all senior members of the NYFS Institute and well known in the field. They graciously donated their time, as did all teachers and supervisors. The donation of time is an indication of the enthusiasm and generativity of a large group of dedicated people.

**Issues at NYSPP**

Because NYSPP grew out of an institute in which analysis was not the focal point, the NYSPP curriculum was able to evolve without the having to fight the battle of supremacy: psychotherapy versus analysis. Morale was already high, as the founders were eager to carry on the work of their first mentors, the Blancks. And as for competition at its inception, there was none to speak of, as the Blancks were truly among the pioneers of this thinking. That is not to say that NYSPP never had any problems to surmount – all groups suffer growing pains as ideas evolve. But being a forerunner definitely had its advantages.

One important hurdle was the need to prove that the teaching skills were of high caliber. The Blancks had an excellent reputation and filling their shoes was a real challenge. Also, as years passed, and their name was no longer as well known, NYSPP lost the cache of its original mentors. The institute also suffered in the 1980’s as the other institutes sprang up offering programs in the Sullivanian method, Eriksonian hypnosis, a gender identity focus and other alternative programs. Fads came and went but NYSPP managed to survive and is now in its 27th year. The curriculum is basically the same, however it is updated each year as new literature abounds. The institute formed a society early on and this gave a sense of cohesiveness, a place for presentation of scientific papers, and a referral service. After a few years, some graduates wanted more training and an analytic track was formed, but never truly flourished, as it could not really compete with NYFS and other IPA institutes whose reputations were impressive. Interestingly, 12 graduates of NYSPP went on for analytic training at NYFS and several are now members of the NYFS psychotherapy faculty.

**NYFS Psychotherapy Program**

NYFS accepted its first class of psychotherapy students in the Fall of 2002, and from its inception there were a number of challenges. A look at the recent experiences of NYFS might be informative to others in the field who must also be grappling with these issues. The first class comprised five social workers, one research psychologist, and a journalist pursuing a career-change. The committee expected that candidates would come from diverse theoretical backgrounds, but no one anticipated the effect of accepting students who had no prior clinical experience. Those not working directly with patients had no cases to which they could apply the theory and techniques discussed in the classroom. This led to some frustration, not only on the part of those students, but also on the part of fellow students who felt that they were carrying the burden in class discussion, and on the teachers who found it difficult to gauge the effectiveness of their teaching.

Addressing this problem included providing those students with private referrals and/or assisting them with placements in agencies. This worked for some but not all. The people not in the mental health field could not be accepted by mental health agencies due to insurance requirements. Plans to better address this issue in the future include increasing outreach to mental health facilities, homes for the elderly, foundling homes, and hospices where those in need can be listened to. Learning to listen is a prime requisite for a psychotherapist. The NYFS consultation service has also agreed to refer low fee patients in need of psychotherapy.

Another related issue is that of faculty and supervisor expectations. While clinical work was a requisite for analytic candidates, not all of the psychotherapy students had patients. Furthermore, those who were seeing patients in a clinic setting were frequently unable to follow a case through, as many clinic patients, whether by virtue of a lack of money, family obligations, or psychopathology, do not continue treatment with any regularity, if at all. Accordingly, those who had taught and/or supervised in the analytic program found it necessary to adjust their approach for the psychotherapy program. A seminar for supervisors of psychotherapy cases is important in such programs because the skills needed are not formally taught in most institutes I know of. NYFS offers supervisory training for training analysts, but not for psychotherapy cases.

During the second year, another challenge emerged. The students, having realized all along that upon graduation they would not be eligible for professional NYFS membership, began to wonder if there was some way that they might be allowed to participate in NYFS activities that were restricted to members and current analytic students. In order to continue their affiliation with the Society they
asked if a special membership category might be created. The problem with giving the psychotherapy students a form of membership reflects the same bias that made the program difficult to start in the first place. Many analysts at NYFS continue to feel that the high standards of the analytic program would somehow suffer if psychotherapy students were granted even associate psychotherapy membership. This problem is compounded by the fact that in order to be open to incoming students, rigorous supervision and therapy requirements were not enforced. This dilemma of how to attract students with little or no clinical opportunities while at the same time exercising high standards is being debated. A compromise seems to be in the works: those students who do complete supervision and a number of their personal treatment hours may be granted an associate psychotherapy membership. As of this writing, the program is in its fourth year and students are coming primarily from clinics and therefore have cases. There is a list of applicants for 2006 so we are experiencing success as we grow.

When creating this program the committee’s intent was two fold: to train psychotherapists, and to interest students in entering analytic training at NYFS. While none of the psychotherapy program’s graduates have applied for acceptance to the analytic training institute yet, several have continued with supervision, and some have expressed a desire for further training sometime in the future. Two are pursuing areas of specialization: one, interested in child psychotherapy, enrolled in another training institute in New York City, and the other, with a special interest in autism, is working privately with autistic children and their families.

In the fall of the second year there were not enough applicants for a new class, so the committee redoubled its recruitment efforts and succeeding enrolling a class for January of 2004. At present, the psychotherapy program is back on track, and a waiting list is now employed when there are too many applicants. At present, classes meet in the instructor’s private office. Eight to ten students are accepted due to this space limitation. As the program grows, a classroom in a school will be rented. However, because the focus is on class discussion, case presentations and not on lecturing, large classes will never be feasible.

Maintaining an ongoing and open dialogue with students has been critical to the success of the program. In addition to the issues already discussed, two changes in the curriculum were a direct result of student input. The original curriculum did not include a course in psycho-pathology, and students were quite vocal in expressing their interest and need. To accommodate the addition of an additional course, the committee decided to combine the courses covering the adult phases of development, mid-life and aging, into a single semester. Another suggestion under consideration is the addition of an optional third year to provide courses addressing the diagnosis and treatment of borderline and narcissistic pathology. This is an idea that holds particular interest, as one of the committee’s intentions from the outset was to better equip clinicians working the more disturbed patient, and those patients in the lower socio-economic strata. Student interest in this possibility was evident at the graduation of the first year class when they expressed their sorrow at ending the program.

It seems clear to me that due to the success of the first year class and their wish to continue formal training, the program should evolve into a three-year program for those interested. Giving students a choice in advanced study maintains the idea of a two-year program and at the same time makes a three-year program viable.

The last challenge I will raise here is the issue of whether or not to require psychotherapy students to be in therapy themselves. While I feel strongly about this requirement, the program is run by a committee and a majority rules. Reasoning is based on the hope that an entrance level student will see the value of personal psychotherapy on her own, while making it a requirement might be alienating. The compromise is to “strongly recommend” personal treatment, but not to make it an absolute requirement.
However, only those students in their own personal therapy can receive referrals from the NYFS Consultation Service or clinical affiliates,

An important goal is to continue to make useful distinctions in the training, both theoretically as well as clinically, between psychotherapy and psychoanalysis. Although the two can be seen on a continuum for some patients, the aim is to better tailor the curriculum to address psychoanalytic psychotherapy as a discrete entity, and adapt supervisory techniques as well as theoretical understanding. Rather than feeling like stepchildren of the analytic program, the psychotherapy students should feel that they have a distinct and valid identity, while at the same time understanding that a more intensive process, psychoanalysis, is an important option, and one that they can see as inviting.

CONCLUSION

Thus far, a great deal has been accomplished (morale in the society, teaching and supervision opportunities for members, community outreach, and a pioneering spirit), but most importantly, it is a successful beginning in furthering the goal of serving a broader and more diverse population of both clinicians and patients. Psychoanalysis proper, as effective and important as it is, needs a widening scope more than ever.

The effort to see psychoanalytic psychotherapy as a treatment separate from yet influenced by psychoanalysis proper has been a long struggle. An innate belief exists among many analysts that psychoanalysis is almost always the treatment of choice (Rothstein, 1995) and is a superior form of treatment. As an analyst I believed this to be true for many years until my students in the psychotherapy programs taught me otherwise. Many of these students have not gone on to study psychoanalysis, although most of them continue in peer supervision and/or study groups. It has become my firm belief that their patients, by and large in once a week therapy at clinics and agencies, have been given second chances as illustrated by Ms. S. Across the diagnostic spectrum and across all socioeconomic strata, more patients are being listened to in non-judgmental ways by empathic, benevolently curious therapists, who rather than giving advice and direction, engage the patient in thinking through rather than acting on their dilemmas. This is a gift and an enticement towards building a stronger ego, allowing for a richer, less dependent life…a life where compulsions are replaced by choices, and where the stranglehold of the past cases.

The NYSPP psychotherapy program continues to be successful, and while the NYFS program may still be in its infancy, early indicators are positive. The experiences in both societies support the case for freestanding psycho-

therapy programs, programs steeped in the application of psychoanalytic theory and technique without the additional requirements of training in classical psychoanalysis for candidates.

More analytic work goes on in therapy sessions than is generally discussed. Mr. X, in the ex-heroin group mentioned earlier, was able to feel his hatred and rage when he said to a fellow group member who had insulted him: “You’re just like my father—a bully and a loser.” This insight opened the door to his past. On another occasion he skipped group one week after the therapist’s vacation and was able to see how this was a retaliation for the therapist’s absence, experienced as the abandonment he felt as a child. Heroin had been his way of dulling his pain. Words helped him face it. The insight was moving for the entire group. Like many others, Mr. X would never have been a candidate for formal analysis. But Mr. X’s experience was like an epiphany to him. When more clinicians are armed with the analytic tools needed for deep and long-lasting treatments, many more Mr. Xs and Ms Ss will benefit.

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Jack Novick and Kerry Kelly Novick (2006) Good Goodbyes: Knowing How to End in Psychotherapy and Psychoanalysis. Lanham, MD: Jason Aronson; 160 pp., $34.95


The major point for me of Peter Buirski’s book, Practicing Intersubjectively, was brought home while I was teaching. Like Dr. Buirski, I was brought up as a Freudian and have evolved, through different incarnations, into an intersubjective systems practitioner. In this postmodern age of psychoanalysis, I have been interested in integrating contrasting perspectives, however disparate, in an effort to create a balanced approach (as well as to achieve some hard-won self-continuity). Consistent with this spirit, I was presenting an article written by an eminent Freudian to my students, a group of avid intersubjectivists, in which the author was arguing that the therapeutic action in his case could be explained by intersubjectivity theory. He convincingly maintained that his overall attitude towards the case, which had been implicit in his interpretations and other interventions, had accounted for the therapeutic success. A good integration, right. Yes, but... my observant students cautioned, he didn’t fully appreciate how the context had contributed to the patient’s experience and the therapy process. What about the therapist’s delay in beginning the treatment, his privileging of sexuality and the Oedipus Complex, his avoidance of direct comforting? Didn’t these factors impact, didn’t they reflect unexamined aspects of the therapist’s subjectivity, including isolated-mind assumptions, which skewed and limited the process. Yes, I affirmed, my eyes opened wider to the distinctness and uniqueness of the intersubjective systems perspective.

My students’ critique captures the emphasis of Buirski’s writing. In this compilation of articles, he repeatedly demonstrates how practicing intersubjectively involves considering how the context is affecting people’s experience and that this approach cannot be integrated with perspectives which maintain isolated-mind assumptions. He simply asserts, “that whatever emerges clinically can be understood only as a phenomenon of the field consisting of both participants” (p. xviii). Writing with a range of collaborators, he practices intersubjectively in two principal ways. He reconsiders Freudian cases from his intersubjective systems perspective and he applies this perspective to cases which reflect a range of current social concerns, including racism, prejudice and trauma. The net effect is bracing, causing me to pause (much as my students’ critique did) and rethink many situations in terms of a consistent and thoroughgoing consideration of how context (present and past) impacts on experience and behavior. Have you deconstructed enough, really identified all the assumptions you are bringing into a situation and how they affect it? (Just think about the assumptions you are bringing to your reaction to my review so far.)

In reinterpreting Freudian cases, Buirski contributes to the literature on comparative psychoanalysis. Reviewing Silverman’s case of Miss K. (Silverman, 1987), he effectively shows how Silverman’s isolated-mind assumptions about Oedipal sexuality and masochism and his unexamined countertransference frustration lead him to retraumatize Miss K. during a therapeutic impasse and reinforce her tendencies toward pathological accommodation. Reconsidering Freud’s famous case, The Wolf Man, Buirski and Haglund convincingly demonstrate that Freud’s assumptions about sexuality and his own self-object needs in relation to Pankejeff prevented him from appreciating Pankejeff’s developmental needs and his unresolved mourning. This chapter leaves you with a wistful sense of what the Wolf Man’s treatment might have been if Freud had appreciated the yearning and the dread of loss which lay behind Pankejeff’s “obliging apathy.” (To top off his intersubjective critique of Freudian approaches, Buirski presents an interview in which his use of a structural theory approach inflicted narcissistic injury and evoked considerable defensiveness while his shift to an intersubjective stance enabled the subject to become more organized and self-reflective.)

In applying intersubjective systems thinking to a range of current cases, Buirski not only addresses socially relevant concerns, he also indicates how a “collision of subjectivities” in treatment is frequently necessary to facilitate change. By using the term, “a collision of subjectivities,” Buirski is referring to a process in which the therapist presents a person with an alternative view of themselves which challenges their characteristic perspective. This challenge is part of the two-fold process of making people aware of their assumed organizing principles and helping them to develop alternative ones. In two of the cases, the therapists enabled the person to change by implicitly and explicitly challenging her view of herself as worthless and defective. One young woman, a trauma survivor who had been violently mugged, could only truly process the impact of the trauma after she had challenged her historical view of herself as invisible and disposable and come to value her emotional experience. In appreciating the co-determining impact that organizing principles have on experience, Buir-
ski effectively balances his emphasis on the role of context. These case presentations then, can serve as a useful answer to some critics of intersubjectivity who I have encountered who try to dismiss this approach as being too environmentalist. As a further example of this balance between context and organizing principle, Buirski and Ryan analyze how a woman’s tendency to be prejudiced in certain contexts reflects her vulnerable self-organization, with her resorting to prejudiced attitudes serving multiple self-protective and self-restorative functions.

Buirski rightly places Practicing Intersubjectively in the theoretical tradition established by Stolorow et al., with their emphasis on understanding development and treatment in terms of the interaction and mutual influence amongst the involved subjectivities. This book represents a rich application of the intersubjective systems perspective to a wide range of clinical situations, helping to ground clinicians who may find some of the intersubjectivity literature too abstract or philosophical.

I’d like to end with a final note to tweak, but certainly not to collide, with Buirski’s overall contribution. In delineating what distinguishes intersubjective practitioners from therapists who espouse other perspectives, Buirski asserts that intersubjectivists are distinguished by what they do not say or do, rather than by what they actually say or do. Aware of the relativity of their perspective and seeing their patients as ultimately striving towards health, they avoid taking an objectivist stance and they eschew pathologizing. Here, I think, Buirski is only partially correct. In understanding and intervening from an empathic stance, which is informed by assumptions about people’s striving towards mental health and need for affect attunement, as well as other so-called developmental experiences, the intersubjective systems therapist does do many things, which reflect particular preconceptions. Many of these assumptions reflect the self-psychological orientation which intersubjective systems theory retains. So, we too are implicated in our treatment processes. In his many case examples, Buirski stresses the beneficial therapeutic impact of practicing these assumptions. But are there detrimental effects too in particular cases, especially in cases which don’t go so well? In the evenhanded, deconstructionist spirit of intersubjectivity, it would be interesting to consider problematic cases in which practicing intersubjective assumptions could be seen as having negative effects. Possibly a project for Dr. Buirski’s next book? Until then, keep Practicing Intersubjectively.

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Sebastiano Santostefano’s charming book on the proper way to conduct child psychotherapy covers many pertinent issues that often arise in work with young children, and offers many rich theoretical ideas and promising therapeutic techniques. In taking issue with child psychotherapy conducted solely in the office, Santostefano recalls envisioning his “relational psychoanalytical” perspective when his supervisor advised him to analyze why he thought it therapeutic, or even wise, to accede to a child patient’s request to go outside. In contrast to “classical” psychoanalysis, relational psychotherapy champions “the ideas of interaction, participation, negotiation, mutuality, and enactment, concepts defining therapeutic technique in ways that provided me with tools to articulate my views of how child psychotherapy should be conducted and understood” (p. 4).

Often citing Stern’s (1985) groundbreaking work on infant–parent attunement, the author likens the interaction between patient and therapist to the infant and his caregiver when he writes, “…principles of infant development can provide an heuristic guide for conducting child psychotherapy” (p. 3).

Santostefano delves into two clinical narratives of young children who progressed remarkably under his care. The narratives not only demonstrate the author’s inventive technique, they also testify to his gift as a psychotherapist to children, his empathic understanding of their needs, feelings, thoughts, and perspectives. He recognizes each child’s unique personality and life experience when he urges therapists to search for the child’s personal “matrix of embodied life-metaphors” (p. 18). To the usual arsenal of techniques used to communicate with children, such as speaking in language specifically geared to their developmental level (Zelan, 1991), the author adds “…nonverbal language that includes rhythms of gestures, facial expressions, tactile and kinesthetic perceptions, actions, postures, and emotional tones,” all aspects experienced by the child while interacting with the therapist (p. 17). Santostefano unearts the meanings behind these behaviors and resonates to them with his own expressed feelings and behaviors. He masterfully crafts his understanding of his young patients in language and behavior they can readily understand.

“Ernest,” a four-year-old whose behaviors suggest autistic spectrum disorder, and “Vera,” a little girl who’d spent the first three years of her life in an orphanage, engaged with Santostefano from the outset, making use not just of the playroom but also a “Therapeutic Garden,” constructed by the author to entice the children to explore and interact with the natural world, their attentive therapist ever-present at their side. The author shares with his readers not just interventions that work but those, too, that went awry, analyzing the hows and whys of these off-the-mark attempts in a way that invites us to think deeply about our own theoretical premises and favorite clinical techniques. The narratives and clinical interventions are complemented by photographs of the Therapeutic Garden, appealing line drawings of therapist and child engaged in activity together, and charts illustrating the convergence of child development theories pertinent to Santostefano’s theoretical framework.

Ernest’s story is particularly compelling. He is described as “wandering” in a detached, dreamy state, sometimes flapping his arms. He rarely gazed at people directly and spoke echolalically. His pediatrician wondered if he was developing an autistic disorder, or selective mutism, or Asperger’s syndrome. Santostefano’s therapeutic goal in working with Ernest was to free him from his autistic withdrawal.

Ernest was invited by his therapist to engage in human interaction by an intervention at once simple and exquisite. The boy hid behind a couch in the waiting room on which Santostefano sat while talking to Ernest’s mother. The prospective therapist dangled a rope over the back of the sofa, hoping Ernest would acknowledge the object, and by implication, his therapist. Eventually Ernest gave a slight tug on the rope, signifying to Santostefano that he silently understood his therapist was attempting, literally, to connect with him. When Ernest was ready to leave the waiting room, he insisted on grasping the rope, the other end held by Santostefano, as they ambled comfortably into the playroom.

Soon Ernest became interested in the Therapeutic Garden and accompanied his therapist outside to explore it, all the while hanging onto his personal rope-connection. Enticed by the garden’s layout, the young boy began to explore nature and the physical world in the manner of a child scientist (Gopnik, 1999). He later spoke of his physical connection to Santostefano as “our rope” and announced to his mother, “Seb likes me” (p. 79).

Santostefano’s relational orientation and the use of a special therapeutic setting echo aspects of psychoanalytic milieu therapy as it was developed at the University of Chicago’s Orthogenic School, where I worked with autistic children. Just as Ernest and his therapist explored their garden...
and collaborated on nature projects, an autistic girl I treated at the Orthogenic School explored one of its yards containing a sandbox, a seesaw, and a statue of a reclining lady. While the girl often perambulated slowly around the “lady” statue, and even sat on it occasionally, her first interest was in sifting sand through her fingers to observe the effect of the tiny grains landing on and sliding down tiny sand hills. Much like Santostefano’s patient, who learned from his therapist how to fashion a bow and arrow, the autistic girl implicitly invited me to teach her about the seesaw. After climbing up almost to its center, she observed the exact point at which the other side began to tip downward. Then she slowly and thoughtfully made her way down the other end in order to examine the fulcrum positioned below. Joining autistic or autistic-like children in their investigations acts as their window to the real world, including and most importantly, the world of people (Zelan, 2003). The autistic youngster realizes that he has benefited from being in the company of a trusted adult and, not least, from his improved ability to manipulate objects and acquire knowledge.

As Ernest learned about the natural world, he learned about himself: He learned that he could protect himself by acquiring the knowledge pertinent to the world’s dangers, both imagined and real. In Santostefano’s words, “Multiple environments provide the child with more opportunities to relive and master stressful events than does the landscape of an office or a playroom” (p. 5).

The virtue of a detailed clinical account is that more than one theoretical model can be brought to explain a patient’s progress. The teaching-learning model readily applies to the understanding of Ernest’s progress. Interactions with family, friendships with peers, and learning experiences, comprise the whole of any child’s experience. Yet, it is not so much that the therapist “teaches.” Rather, it’s that the child naturally learns, as his body grows (A. Freud, 1971, p. 214). Santostefano actually offers a “progressive” definition of learning, one particularly relevant to Ernest. Speaking of an important concept embedded in relational psychology, he writes, “One is the assumption of constructivism that a person continually interprets environments and acts on those environments according to those interpretations” (p. 148). In one textual stroke, the author evokes the psychological theories that helped to shape relational psychoanalysis, among which we may count Stern’s (1985) and Piaget’s (1952, 1969, 1973).

Ernest became comfortable with himself when he understood that he had some control over and an impact on the natural world, as he shot arrows into the air and predicted how far they would travel. The more protected he felt in the natural world, the more he developed as a person, someone who, because of his attachment to his therapist, could join the interpersonal realm with greater equanimity. Interestingly, Ernest began to spin a fantasy about a personified monster called “Monstro.” This represented a shift from his interest in nature to the personal qualities of others, wherein he recapitulated the search for what is dangerous, what is safe. Ernest and his therapist playfully forged in the Therapeutic Garden for the dangerous persona, “Monstro,” the boy vigorously shouting Monstro’s whereabouts to Santostefano, as the two monster-hunters pretended to outsmart their adversary. Soon thereafter, Ernest kissed his therapist and said it felt “good,” and he confided that he felt “sad” about a nursemaid leaving him.

Toward the end of the book, the author describes two traditions in psychology that link the impact of the environment with an individual’s mental health: environmental psychology, which addresses the relationship between environment and behavior; and ecopsychology, which proposes that interacting with nature promotes a sense of well-being. Though acknowledging the contributions of these disciplines, Santostefano draws contrasts between them and relational psychoanalysis, showing how the latter addresses the needs of children in psychotherapy more comprehensively. This occurs because relational psychoanalysis emphasizes the therapist and child patient “growing together” (p. 163), a process which is fostered by the therapist’s consistent focus on the psychotherapeutic interactions in both interpersonal and natural environments (p. 164). Under the aegis of the therapist’s vigilant attention to each and every new development in the child’s activity and expressive behavior, a “new self” appears to emerge, the result of new experiences in the therapeutic interaction. “…[T]he child begins to construct a new psychological landscape/self and matrix of embodied life-metaphors,” asserts Santostefano (p. 185). No longer beholden to past, traumatic life-metaphors, the child adopts a healthier perspective that, in turn, guides further growth and development. In essence, a child’s “new self” represents a new way-of-being (Stern, 1995; Zelan, 2005). Ernest’s story illustrates this well. He continued to learn prodigiously, for instance, about the life stages of butterflies, showing a “keen intelligence and sophisticated vocabulary” (p. 88). Upon conclusion of therapy, the boy continued to progress both at home and in school, where he excelled academically. Santostefano’s ingenious therapeutic methods essentially kept the young autistic boy on track developmentally. Summarizing, he writes, “Relational psychoanalysis, then, should develop techniques and concepts that address the unit formed by child plus therapist plus location in which they interact” to “integrate a child’s experiencing-developing self, behaving self, and interpersonal self” (p. 226). A worthy goal, as Santostefano’s book attests, is that is at once impressive and interesting for therapist and patient alike.
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Any reader expecting an easy answer to the modern-day gender conundrum should not read Adrienne Harris’s new book *Gender As Soft Assembly*. Quite in contrast to the current trend of offering simple, seemingly reassuring solutions to complicated psychological issues, Harris’s book requires patience and attention. Harris challenges her readers to engage in their own thinking with the detailed information she provides on developmental theories, chaos theory, gender development, psycholinguistics, attachment theory and developmental psycholinguistics. This is an extremely well researched book in which Harris has set herself the steep task of reworking developmental theory by looking at language and gender development at a time when many theorists have given up on developmental theory altogether.

In her introduction, Harris explains that she was trained in her early professional life as a developmental psychologist who was never taught to think of development in terms of linear, unfolding structures but rather in terms of functional and dynamically transformational processes. In her training, “structure and the more straightforward descriptions of stages took a back seat” (p. 3) with process, self-organization and transformation taking a front-seat. Rather than throwing the baby out with the bathwater and banishing developmental theory from the contemporary psychoanalytic scene altogether, Harris wants to re-inscribe developmental theory into the psychoanalytic canon in order to show how mind, gender and language emerge in various contexts and are “neither solely social and interactive processes nor reified into simply endogeneous experiences but...are historical, social, biological and intrapsychic processes [which] are always interacting, overlapping open systems” (p. 3).

Early on, Harris announces her plan of marrying chaos theory with relational theory and thinks of it as “a marriage made in heaven” because the former privileges “open systems, self-organization and dynamic processes” (p. 5), while the later emphasizes analytic work in “a set of relational matrices of intense mutual though asymmetric processes.” Though the marriage may not be complete, Harris proceeds with great care to work out the details of these intricate marriage partners to make the eventual wedding an undeniable success. She begins this marriage contract by defining the individual as “a complex site of multiple states in various stages of editing” (p. 19), and examines the various social and gendered contexts and processes in which such a multi-fractured individual comes to be. True to her relational roots, Harris is not so much interested in the individual per se but in the variations within and between individuals. Therefore, the term “soft assembly” is particularly well suited to her project because, as she explains, it encompasses “the protean, multi-pathed but planful and patterned unfolding of experience, such as becoming gendered. Multiplicity offers a certain flexibility that, in relation to shifting objective and social contexts, is distinctly adaptive” (p. 29). In this more flexible mode of looking at language and gender development, old terms like “arrest,” “fixation” and “stage” are cast aside and are replaced in favor of “process,” “transformation,” “function” and “context,” so as to comprehend the unique configuration of any individual. In this configuration, motivation is also no longer understood as a natural, given trait, but as a process emerging from simple infant capacities. Harris unequivocally states, “Following Ghent (2002), I suggest that motivational systems are not blueprints but outcomes” (p. 7). With Winnicott’s idea of “going-on-being” and with infant studies’ focus on “timing, rhythm and temporality,” Harris argues that our sense of time has to be re-written not as a unidirectional process but as a movement that flows back and forth, producing effects retroactively. Reinventing Freud’s luminous 1898 concept of Nachtraeglichkeit, she masterfully elaborates:

With the idea of Nachtraeglichkeit, psychoanalytic theory has thus issued a particularly acute challenge to any simple conception of time or its linearity in development. As experience unfolds and becomes part of what is fed back into memory schemas, memories alter and reconfigure. Powerful affects from contemporary experience enter and rework memory. An ever-altering and renewing developmental narrative takes shape (p. 64).

The scene is now set to show the usefulness of chaos theory which takes into full consideration multiple, differing developmental trajectories and lends itself so cogently to psychoanalysis because it does not explain behaviors from “the top down” but from the bottom up and is thus much more akin to infant studies which attempts to explain one specific story of one specific individual at a specific time without compressing this particular story into one grand master theme. Harris demonstrates with great elegance that any learning process usually thought to be biologically or maturationally driven, is indeed a process constituted by multiple stepping stones—cognitive structures, sensorimotor actions, semantic rhythms, and interactional patterns,
which come together (or often do not come together) in a distinctive way for any given individual. Non-linear, dynamic chaos theory can absorb a much greater variety of behaviors than linear developmental theory because it pays attention to detail and elasticity and also (paradoxically) observes idiosyncratic patterns within and between individuals.

The concept of attractor is fundamental to chaos theory, which Harris defines as “points of convergence without being exactly points of gravity and not structures as much as dynamic patterns, sometimes regular, sometimes bimodal and sometimes fractal and strange. Attractors can be defined as those fixed points in the stream of behavior, but fixed points that are nonetheless dynamic and potentially susceptible to transformation. Attractors can be modeled as deeply troughed or rigid pattern forms or as rather fluid assemblies that mutate and reassemble in new and distinct configurations. This concept identifies the unique ways that individual experience is unfolding and self-organizing, changing through multidimensional phase spaces and moving along multiple time scales” (p. 85). Attractors, Harris explains, do not drive a system but are the outcomes of activities and systems in perturbation and movement. In contrast to stage development theory, chaos theory has little predictive capacity, but instead is well equipped to look at a set of behaviors or dispositions retroactively (après-coup), examining the traces that have been left behind by a chain of intertwined, multiple variants.

Gender can thus function as a kind of attractor, a point of convergence of interrelated historical, cultural, familial and intrapsychic strands rather than operate as a given, predetermined biological identity. Citing Judith Butler’s work on melancholy gender, Harris elaborates and suggests that we see “gender as the charred remains of various fires, set intrapsychically and interpersonally, representing conflicts between loving and being that cannot be fully metabolized and “internalized… Gender as an attractor would be a touchpoint where systems intersect explosively or cooperatively: historical, familial and individual” (pp. 87-88).

Defining gender as an emergent, convergent system allows Harris to look at clinical case histories from a “kaleidoscopic,” moment-to-moment perspective rather than from of a “monarchical” top-down, judgmental position. Qualities that have been traditionally considered to be strictly feminine or masculine can now be re-written through the relational/chaos theory lens as properties emerging out of particular inter-and intrapsychic experiences in collaboration with distinct socio-cultural constellations. In a way, I think, Harris aspires to provide a theoretical scaffolding that finally offers people an infallible model to truly grasp gender as a construction and not as a biological essence, subject to multiple aberrations.

With Gender As Soft Assembly, Harris does not only respond decisively to the question of what constitutes gender today, but she also strives to provide a theoretical model that still works within the psychoanalytic domain, yet one that can shed the antiquarian skins which perspire scents of linearity and determinism. At a time when the world has become so unpredictable and when technology has created genetic and sexual possibilities never realizable before, the “old” theories insisting on a master theme can no longer contain nor explain the variations we encounter in everyday life and in our clinic. Either we are forced to pathologize that which does not fit into the master trope or we are tempted to cast the entire theory aside and deem it insufficient for our time. I think Harris wants to save psychoanalytic theory from such a fate and proposes chaos theory as a treatise that can adequately respond to and explain the complex sexual identities of the 21st century.

It is interesting to note that similar endeavors have occurred in fields closely related to psychoanalytic theory. Michael Andre Bernstein’s concept of sideshadowing, which he develops in Foregone Conclusions (1994), also attempts to address the kind of global, monolithic liter-

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ary thinking which privileges the literary unidimensional technique of foreshadowing, where the present is already always a “harbinger of an already determined future.” In a search of coherence, individuals tend to want to make sense of their history by looking backwards, using incidents from the past as luminous explanations of their pre-ordained present. In contrast to foreshadowing, Bernstein suggests sideshadowing as an alternative narrative technique, one that is less dismissive of variety and more responsive to the unpredictability of everyday life. Instead of seeing the present as an already pre-ordained future, sideshadowing permits one to regard the present as being “dense with multiple and mutually exclusive possibilities for what is to come” (p. 1). Sideshadowing, Bernstein writes, champions the incommensurability of the concrete moment and refuses the tyranny of all synthetic master schemes. It rejects the conviction of a code or law to be uncovered beneath the heterogeneity of human existence” (p. 4). In addition, much like chaos theory, sideshadowing pays attention to the randomness of human life, to the haphazard incidents and the small details that can shape one’s life decisively, but which can be passed over easily by a theory, insisting on unearthing a deeper truth.

And yet the idea of giving up on structural theory altogether because it is deemed to be antiquated and too rigid strikes me to be too premature a move. There is an aesthetic order to structural theory that is not necessarily rigid but rather ingenious in the ways it detects one irreducible variant among seemingly different traits or behaviors.

Wanting to find an order behind an apparent disorder, Levi-Strauss (1995), for example, recounts an old Peruvian tale where all newborns born with feet first, or with a harelip or as twins were being accused for causing a bitter cold and were asked to repent for their sins. Levi-Strauss was not so interested in the causal relationship between the three groups and the belief that they caused brutal weather conditions, but what intrigued him instead were the links by which the twins and the babies born with feet first or with a harelip were connected in the old Peruvian culture. Cross-studying various North and South-American myths, Levi-Strauss finally deducted one common element among this rather disparate group: All three members of the group shared an element of trickery and potential destructiveness for which they were held responsible and deemed suspicious all their lives. Now it is true that each member of this “first-feeted, harelipped and twinned” assembly could be studied individually, each in their own socio-cultural environment, but the fact that one invariant could be deduced from this ensemble allows for the kind of concise structural logic that risks being eclipsed by post-modernism.

Structural theory can certainly become too rigid and monolithic, losing sight of the particular detail, but post-modern reasoning can also become too porous and all encompassing and thus risk losing its explanatory force. I think Harris’s sophisticated study of Gender as Soft Assembly offers a timely response to these competing powerful theoretical currents.

References

The scarcity of Latin American psychoanalytic books translated into English seems puzzling in light of the highly respected and prolific literature produced in Latin American psychoanalytic centers. With the exceptions of few psychoanalytic books and papers translated into English, the contributions of Latin American psychoanalysis has remained unavailable for several analytic generations, particularly the North American ones.

The reasons for this overall neglect seem to mirror socio-political circumstances that historically demarcated a linguistic and cultural barrier between the Northern and the Southern hemispheres. Truth, Reality and the Psychoanalyst: Latin American Contributions to Psychoanalysis attempts to narrow existent intellectual gaps. Publications such as this one may foster an appreciation of other distinct analytic voices leading to an appreciation of conceptual and technical differences and similarities.

Henrich Racker, Angel Garma, and Jose Bleger are exceptions among Latin American analysts. They’ve become household names on the international psychoanalytic scene. Racker’s conceptualization on complimentary and concordant identification, Garma’s work on dreams, and Bleger’s work on the analytic frame are today mandatory readings for analytic candidates across the world. These seminal contributions conveyed from the 1950s forward, the sophistication of psychoanalytic thinking in the Southern cone of Latin American. Yet, other significant work by Latin American psychoanalysts are still held in foreign libraries waiting to be discovered by the North.

Surfing bibliographical references, precursors to Truth, Reality and the Psychoanalyst: Latin American Contributions to Psychoanalysis may be found in scientific events held in Spanish speaking countries that eventually ended up in a foreign press. The first Pan American Congress for Psychoanalysis, for instance, was held in Mexico City in March 1964. This Congress attempted to overcome the multiple barriers: cultural, geographical, and language, that precluded communication between North and South psychoanalysis to take place. A record of this encounter was published in 1966. It was called Psychoanalysis in the Americas, edited by Robert E. Litman and published by International University Press. Although viewed as an historic event, few copies were either distributed or sold. In 2005, almost forty year later, Truth, Reality, and The Psychoanalyst: Latin American Contributions to Psychoanalysis recreates Litman’s organizing principle, having analysts from the North discussing the contribution of their Latin Americans colleagues.

Another attempt to bring the South to the North is found in a 1993 FEPAL’s (Federation of Latin American Psychoanalysis) sponsored publication of Psychoanalysis in Latin America, edited by the Peruvian analyst Moises Lemlij. Joseph Sandler, President of the IPA at that time, wrote in the forward to Lemlij’s book: “With the publication of this book psychoanalysis takes on a global perspective…”

The cybernetic revolution assisted in overcoming Latin American isolation challenging Northern cultural hierarchies. Exchanges between the psychoanalytic regions increased exponentially with electronic mail. Latin American psychoanalysis gained global visibility and political status in international forums. For instance, until 1988, the presidency of the IPA was a privilege granted only to American and European psychoanalysts. The Argentinean analyst R. Horacio Etchegoyen proposed then a rotating presidency of the IPA, and he was elected as the first Latin American analyst to run the prestigious Association founded by Freud. The 37th IPA Congress was the first held in Buenos Aires in 1991, under a Latin American president. The congress was the big marker on the journey of Latin American psychoanalysis to the global scene.

The above-mentioned trend was established firmly with attention paid to contemporary Latin American publications. R. Horacio Etchegoyen’s monumental volume, The Fundamentals of Psychoanalysis was published in English in 1991. This book signified the coming of age of Latin American psychoanalytic publications in the English language. Etchegoyen’s book received a warm welcome at the 1997 International Psychoanalytic Congress in Barcelona. The Fundamentals of Psychoanalysis brought to the English-speaking world numerous lesser known Latin American analysts, enriching the existent theoretical, technical, and clinical repertoire.

American-trained analyst Nancy Hollander began to study the fate of psychoanalysis in Uruguay and Argentina under the military regimes. Thanks to Hollander, English speaking readers had access to Marie Langer’s Motherhood and Sexuality (1951) forty years after its publication in Buenos Aires. Nancy Hollander’s translation of this pioneer work on femininity and psychoanalysis, as well as her extensive reports on the analyst’s political and socially committed work in South America, had a powerful impact.
on American psychoanalytic intellectual circles. Subsequent to Hollander’s translation, an issue of the Journal of the American Psychoanalytic Association was devoted to Langer’s hitherto unknown work.

Truth, Reality, and The Psychoanalyst: Latin American Contributions to Psychoanalysis appears as a renewed attempt to import the Latin American psychoanalytic “South” (Argentina, Chile, Brazil, Mexico, Uruguay) to the psychoanalytic “North” (USA and Europe). As previous books have tried with a mixed degree of success, this edited compilation intends to convert unidirectional analytic North-South “publishing traffic,” to a bi-directional one. It is likely that this book may prove to be more relevant to American psychoanalysts than to Europeans, because Europeans, especially English and French analysts associated with Kleinians and Lacanians, respectively, have managed to establish and maintain ongoing reciprocal exchanges with South Americans from the early 50s onward (Balan, 1991, Tylim, 1996).

In preparing for this project, the editors concentrated on defining eight relevant concepts and asked Latin American psychoanalysts to expand on them. Each author was assigned a discussant with the mission to offer a commentary on one of the chapters written by a South American colleague. Although some of the discussants are originally from Latin American, all of them seem to share a common emigration pattern: at some point of their careers they relocated to the “North” where they’ve been practicing for decades. The analysts that emigrated--perhaps for political reasons not made explicit in the book--respond to the ones that have stayed behind.

In selecting analytic thinkers, Sergio Lewkowicz from Brazil and Silvia Flechner from Uruguay (editors) were very much aware of the trials and tribulations suffered by Latin American analysts who for decades worked under dictatorship regimes that constantly threatened the survival of our discipline. The editors stressed the “truth” in the practice of psychoanalysis in Latin America, making it a central topic of their reflections. Chapter 1 is devoted to this issue. However, the reader would have welcomed more chapters addressing the political “truth” of analytic practices during the military dictatorship.

A foreword from the past and present presidents of the International Psychoanalytic Association (the French, Daniel Widlocher and the Brazilian, Claudio Laks Eizirik) opens the nine papers discussed by eight commentators. R. Horacio Etchegoyen and Samuels Zysman (Chapter 1) present the history of psychoanalysis in Latin America. They include a courageous account of psychoanalysts working under extreme conditions. This section highlights the links between technique, theory, and ethics and the dilemmas confronted by those analysts working with people who were engaged in the political battle. References to psychoanalysts who were persecuted or disappeared during military dictatorship, as well as the case of a Brazilian analytic candidate who participated in torture sessions, force readers to look in their own backyards where the collaboration of mental health professionals with interrogation practices of prisoners of war made front page news.

Beatriz de Leon and Ricardo Bernardi (Chapter 2) report on countertransference and the vulnerability of the analyst, while Madeline Barenger (Chapter 3) and Luis Kancyper (Chapter 3) apply field theory to the psychoanalytic encounter and the area of intergenerational confrontations. Susana Vinocour-Fishbeim (Chapter 4) presents a fascinating work on the relationship between psychoanalysis and linguistics, a dear subject of a group of Argentinean analysts. Antonio Muniz de Rezende’s (Chapter 5) paper stresses the experience of truth in clinical practice, and Juan Francisco Jordan-Moore (Chapter 6) challenges the dichotomy of external reality/internal reality. Norberto Marucco (Chapter 7) writes about psychic zones and the process of what he calls “unconscientization.” Alejandro Tamez-Morales follows with a chapter on dreams written under the influence of Angel Garma. Lastly, Virginia Ungar (Chapter 9) concentrates on the development of child and adolescent psychoanalysis in Latin America. Over 300 hundred reference books and papers plus a comprehensive thematic index will satisfy contemporary analysts’ thirst for a cross-cultural dialogical umbrella within psychoanalysis.

In 1993, Kernberg recognized the strong development of psychoanalysis in Latin America, contrasting it to the relative stagnation of its American counterpart. He attributes the success of psychoanalysis in Latin America to the joint participation of non-medical and medical analysts in the psychoanalytic organizations, and to the more open and flexible nature of psychoanalytic education.

We (Americans) have attempted to console ourselves by assuming that their (Latin American) standards are lower, that what they are doing is probably not true psychoanalysis, and that they are simply going through a phase that American psychoanalysis experienced in the 1950s and 1960s. Such ideas, I believe, are more reassuring than factual.…. (Kernberg, p.61)

Truth, Reality and the Psychoanalyst invites analysts from the North to question old assumptions about their position in the analytic intellectual hierarchy. The latent message underlying this publication seems clear: a more open, less prejudicial attitude towards foreign voices is prone to enrich the psychoanalytic field and promote the development of our theory and practice.

CONTINUED ON PAGE 54
MOURING, SPIRITUALITY AND PSYCHIC CHANGE:
A NEW OBJECT RELATIONS VIEW OF PSYCHOANALYSIS
Brunner-Routledge, 2003  Foreword by Joyce McDougall, D.Ed.
Winner of the 2004 National Gradiva® award from the National Association for the Advancement of Psychoanalysis

"Mourning, Spirituality and Psychic Change is an adventure into the intricacies, dialectics and developmental sequences in critical psychic change, observed in vivo in the clinical situation. We frequently hear the patient's voice, facilitating a much needed integration of the various kinds, modes and levels of mourning that need to be navigated in order to achieve self-integration and to sustain growth in love and creativity."
- JOYCE MCDougall, D.Ed.

THE CREATIVE MYSTIQUE:
FROM RED SHOES FRENZY TO LOVE & CREATIVITY
Brunner-Routledge 1996 Foreword by Prof. Martin Bergmann

"The Creative Mystique maintains the fascination and profundity of the author's earlier work. Dr. Kavaler-Adler has uniquely integrated the "Otherness" of the creative process with the chimerical male figure in the female artist's internal mental world to create the concept of the "demon lover." The author spans the horizon of the Kleinian, Object Relations, and Developmental literature, on one hand, and the artistic/literary biographical literature on the other. The effect is compelling and riveting." - JAMES S. GROISTEIN, M.D.

THE COMPULSION TO CREATE:
WOMEN WRITERS AND THEIR DEMON LOVERS

"The Compulsion to Create is a superb account of distinguished female writers (Plath, Nin, the Bronte sisters, Dickinson and Sinwell) from a psychoanalytic object relations perspective. These women often suffered tragic fates including suicide, fatal illness, lifelong withdrawal from people, or alienation from the world. At this current time in the American psychoanalytic dialogue, there is a tendency to idealize the creative process and to discuss it only in terms of "healthy narcissism." While presenting a sympathetic and respectful attitude toward the creative process, Kavaler-Adler nevertheless does not idealize it and is forthright in discussing the problems the artist may encounter."
- JEFFREY SIBNIELD, PH.D.

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DR. SUSAN KAVALER-ADER is Founder & Executive Director of the Object Relations Institute for Psychotherapy and Psychoanalysis. She specializes in mourning, grief and the creative process, as well as private supervision of individuals & groups. She has received 4 Arlene Wolberg awards from Postgraduate Center for Mental Health, and 3 awards from the National Institute for the Psychotherapies (NIP) for her contributions to the field of psychoanalysis. In 2004, she received a National Gradiva® award from the National Association for the Advancement of Psychoanalysis for her book Mourning, Spirituality and Psychic Change. Dr. Kavaler-Adler is in private practice in New York City.
In this important third volume from the Stone Center at Wellesley College, founding scholars and new voices expand and deepen the center’s widely embraced psychological theory of connection as the core of human growth and development. In this integrative and extensive volume, the authors present a philosophical and practical examination of connection and disconnection at both individual and societal levels. The thirteen chapters included in this book explore issues of how experiences of race, sexual orientation, class, ethnicity, and gender influence relationships, and examine the ways in which people can connect across disagreement and difference.

The book presents practical material in addition to philosophical theory, and discusses the implication of theory for psychotherapy, for the raising of sons, and for surviving in the workplace as an ethical and fully functional person. The scope of the projects that the center has historically supported is extensive, and covers a range of human behavior, including: recovery from sexual abuse, African American intimate partner violence, developing direct connections, bullying and harassment, empowering children of divorce, early care studies, after school studies, teacher studies, gender studies, women’s self esteem, men’s self esteem, and human rights. The impressive partnership of the Center for Research on Women and The Stone Center for Developmental Services and Studies at Wellesley College, has as its mission, shaping a better world through interdisciplinary research, action, training, and publications. This book seeks to explore deeply relevant and important issues, with a utopian vision of wisdom for working and living. Harriet Lerner, in her review of this book stated, “the theoretical and clinical wisdom in this book is stunning in its power to change the reader in some fundamental way, and to move the field of psychotherapy toward a more accurate, compassionate, and multilayered understanding of what hurts and heals in human relationships.”

In chapter one, Toward Competence and Connection, the yearning for, and movement toward, connection, following the Stone Center model, are seen as central organizing factors in people’s lives, and the experience of chronic disconnection and isolation is seen as a primary source of suffering (p. 11). When we cannot represent ourselves authentically in a relationship, and our real experience is not heard or responded to by the other people, we must falsify, detach from, and suppress all authentic responses, and we learn that we cannot have an impact on other people in relationships that matter to us. The result of this is a sense of isolation, immobilization, self-blame, and relational incompetence. The quandary discussed throughout this book is the need to connect, to be competent, and to be creative, in a system that overvalues competition and individualistic goals, which fosters competition between individuals, thus resulting in conflict for people who are primarily relational.

The authors feel that the dominant myths of competence in our society coincide with the myths of masculin (p. 13-14). The different view of competence, with the former being called instrumental competence and the latter called relational competence (p. 15) hypothesizes that the capacity to move another person, to effect a change in a relationship, or to influence the well-being of all participants in a relationship might be called relational competence. This capacity does not simply mean influencing another person, which might produce a sense of power, but considers mutual influence as formative. Jean Baker Miller stated, “In order for one person to grow in a relationship, both people must grow.” From a relational point of view, the quality of the impact on the other person in any relationship involves being in touch with ourselves. The author feels that it is by being in touch with our own feelings, and with our own hearts, that we touch the hearts of others and help people grow.

In chapter two, Relational Resilience, Judith Jordan writes that life subjects all of us to tensions and suffering, and that relationships as well as individuals are buffeted by forces that create pain, disconnection, and the threat of dissolutions. Thus, the capacity for relational resilience or transformation is essential. Movement towards empathic mutuality is at the core of relational resilience (p. 28). When people are unable to move from disconnection to connection, the resulting combination of immobilization and isolation might become a prison. The author discusses traditional views of resilience and proposes that the traumas of life can lead to an explosive desire to assist others, and that the movement towards helping others often becomes the key to the transformation of private pain and isolation into compassion, for the sustenance of all human beings (p. 39). It is of particular importance that the author stresses that we would not choose pain, but the valuable lessons learned by working through trauma, results in a wisdom that eludes those who maintain illusions about their own invulnerability and develops an awareness of the human condition and of our
absolute need for love and support from each other.

The author describes ways in which relational resilience can be used in therapy by supporting vulnerability, and by assisting the patient to develop flexibility, relational confidence and awareness through the renegotiation and reworking of misunderstandings and empathic failures. Thus, therapy deals with a relationship in which the explorations of patterns of behavior are examined and the curative factor includes reframing relational awareness and resilience.

Chapter three, Transforming Disconnection, explores autonomy and self-sufficiency models and examines how consciousness of separation is at the core of the human condition. Disconnection from others is considered one of the primary sources of human suffering. Various schools of psychoanalysis are discussed and examined, with the conclusion that individuals frequently have habitual ways of reacting to particular situations, which render them vulnerable to disconnection. One goal of therapy is to explore these disconnections and transform them into struggles for connection. The chapter concludes with the suggestion that getting to know our own places of disconnection is an important means of developing a compassionate attitude toward our own needs, our tendencies to disconnect, our yearning to connect, and our many imperfections on the journey to connection (p. 63).

It is noteworthy that this volume follows Jean Baker Miller’s original conception of continuous searching and interpretation and is referred to as “works in progress.” Chapter four delves into the question of the therapist’s authenticity, stressing that the therapist should never use therapy to meet his or her own needs. The therapist’s emotional presence is considered to be an important source of information for the client and is a resource for growth in the therapy relationship (p. 67). According to Jordan, the engaging and authentic quality of treatment gives the therapist important information about the impact of the client on the therapist.

Chapters five, six, and seven provide a profound theoretical understanding of voice and racism, with the observation that people on both sides of the racial question may experience distortions, and require assistance to delve into their prejudices and to develop their ability to think relationally. Chapter six considers the issues of shame and humiliation as powerful factors that can disrupt connections, resulting in profound isolation. The authors propose that power and privilege are always at the core of these issues, regardless of the focus. Issues of sexual orientation, race, and gender are arenas for shame enactments, which can result in disconnection (p. 125), with empathic possibility seen as the only antidote. The question posed in this chapter is “How can we stay open and responsive in the face of shame?” Protected vulnerability and prudent trust are presented as prerequisites for a safe therapeutic environment. The basic question explored in this section is how a group that has less power, and is given less respect by the dominant group, can still manage to maintain dignity, particularly by resisting the attempt to be silenced or shamed.

Part II of this book, Applying the Power of Connection, proceeds to explore couples therapy in an attempt to develop the concept of “we” in relationships and addressing the relationship itself as the patient to be presented. Chapters seven and eight address the question of racial images and relational possibilities, and of women, race, and racism. Time limited therapy and therapy in groups are presented in chapters ten and twelve.

Chapter eleven is dedicated to utilizing this model to understand boys and men, with the final chapter (thirteen) exploring recent work utilizing relational thinking in the workplace and in organizations. The authors state that their goal in writing this book is to enable the reader to find resilience and a sense of possibility. The concept of RTC is utilized throughout the book and is contrasted with other forms of therapy. The basic ideas of religion, marriage, child rearing, and gender identity come into question when we consider organizing our social institutions around a concept of connection rather than separation, a concept of exploring how we are similar rather than how we are different. Another basic question explored in the book is “what makes for change in therapy.” The authors question how concepts learned in the treatment room can be applied to effect social change and produce a commitment to learning responsiveness in a world that is increasingly disconnected, violent, filled with fear, and where community needs are obscured by individual greed and incompetence. If connection is established, we are able to feel a commitment to connection, and in turning to connection we feel hope.

This book is well thought out and provocative, and raises as many questions as it answers. This book is suitable for those whose minds can tolerate both possibilities and uncertainties, but would not be suitable for those readers who are firmly tied to a particular philosophy of treatment. In this volume, practical considerations are explored, such as periodic counseling (p. 264) and short-term therapy (p. 265). Presenting problems are found to shape the treatment, with no “one way” of looking at things being suitable for all people. Focus is placed upon process, with the strong statement “the primary therapeutic ingredient in the relationship is the working alliance between the therapist and the client” (p. 266). The authors feel that whatever the course of treatment, it is important to be aware of life cycle shifts and transitions, and feel that issues raised during the course of treatment are best addressed in a relational,

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Race is one of the most commonly used words in modern parlance yet, by far, the most misunderstood. In fact, “race” as a biological construct does not even exist, though its sociopolitical salience cannot be denied. “Race” is commonly based on one’s skin color, though this definition all too easily disintegrates under close inspection. The sociopolitical definition of “race” is that one’s skin color defines their reality and the way they are treated by society. It is this definition that becomes increasingly relevant in the global, multicultural way of life in which we all participate. It is this facet of daily life that is the focus of Dalal’s work.

Dalal discusses a topic that is typically ignored in psychoanalysis. This can be understood as an effect of the focus of psychoanalysis on the individual, as opposed to group phenomena, although the effects of racism on the individual have been ignored in psychoanalysis as well. The only exception to this is racism as related to the Holocaust and Jewish victims, which is amply discussed in both theory and practice. Dalal chooses as his focus British culture, but the examples and effects he describes are relevant across human society. He fills a gaping hole in psychoanalysis for those clinicians hoping to work within a socio-culturally relevant framework. With the aid of this work, analysts may understand racism psychoanalytically, allowing them to incorporate this understanding when working with all patients. This is an imperative task for clinicians around the world, as immigration and globalization continually force cultural groups to interact in ways they never had to before. Dalal’s work convincingly and eloquently makes the case that “race” should be central to our understanding of psychic functioning.

Dalal begins with an introduction that provides the conclusions of the entire book. Specifically, he states:

The conclusions of the book may be summarized as follows: difference is not the cause of hatred, rather, particular differences are called forth by the vicissitudes of power relations in order to organize hatreds (and other emotions) in order to achieve particular ends. These mechanisms work by lending the differences and the required hatreds an air of naturalness and so legitimizes them. One such difference is that of race, which because of its fragility relies on the notion of colour. And finally, it is shown that the structures of society are reflected in the structures of the psyche, and if the first of these is colour coded, then so will be the second. (p. 7)

What seems like a relatively simple set of ideas is demonstrated by the chapters that follow to be incredibly complex and seemingly impenetrable beliefs of society.

The idea that “race” means nothing outside of “racism” becomes the focus of Chapter One, in which Dalal discusses the commonly espoused definitions of “race.” This includes the ideas of difference among human beings, ideas of “pure” and “mixed” race(s), and the scientific history of “race” as a construct. He discounts each of these definitions in turn, eventually allowing the reader to understand his first basic premise: “race” divides humankind so as to maintain hierarchical power relations. This is a strong statement, especially in psychoanalysis, given that it has been labeled a treatment of the elite in many regions. It is also a statement that forces us, as psychologists and psychoanalysts, to consider sociopolitical reality in addition to psychic reality. Dalal argues that the two cannot be separated:

The findings of psychologists concern the mechanism of cognition, and so in a sense where the discontinuities are made are logically arbitrary. But what the socio-political perspective adds is the idea that the place where these ruptures are inserted are not at all arbitrary but socio-politically meaningful. After all, it cannot be coincidental that the colour lines drawn to name the races matched so exactly the power relations during the epoch of colonialism. The most impressive of these being the great divide between the colonizer and the colonized, which fell neatly onto those designated as white and the rest, i.e., the coloured, the black. (p. 12)

He ends the chapter with the idea that race is an incredibly evasive construct to study, since it simultaneously disintegrates as a scientific construct under scrutiny while remaining an incredibly powerful socio-political construct.

In Chapter Two, Dalal continues his focus on racism, this time as it relates to psychoanalysis. Specifi-
cally, he discusses how theory is inevitably affected by the theorist’s worldview, a topic he returns to more generally in Chapter Four. He then discusses racism in relation to Freud, Klein, Fairbairn, and Winnicott’s theories. Because none of these thinkers discuss racism directly, Dalal considers the ways in which the theories account for hatred, aggression, envy, etc. and then extrapolates these conceptualizations to racism. Dalal’s extrapolations may be viewed as intelligent and thoughtful conjecture that, while interesting, ultimately do not provide clinicians with a clear way in which to ground clinical work dealing with racism in existing theory.

With Chapters Three and Four, Dalal continues to focus on psychoanalysis, thoroughly investigating what little work has been done on racism in the field thus far. He insists that psychoanalysis’ exclusive focus on the individual has resulted in lack of consideration of important contextual variables, such as the environment. It is through this crack that a focus on racism has fallen. The existing work on racism continues to consider it as a symptom of the individual, as opposed to a complex interplay of social forces and power dynamics, leading to incomplete, overly simplistic views of racism.

While these chapters provide useful and accurate arguments, one wonders if group phenomena should be the focus of a field that is quite specifically concerned with the individual. Must psychoanalysis concern itself with all socio-political phenomena that may affect individuals? While it is certainly the opinion of this writer that the field is sorely lacking in conceptualizations of racism, and that this likely serves to further “blame the victim” and negate their experience, one wonders to what extent psychoanalysis can ever effectively answer these questions. As Dalal shows in his later chapters, the questions are answerable, but only when one expands their viewpoint to include social phenomena. The reader is left wondering how this can ever be accomplished with psychoanalytic theories alone.

Dalal then shifts gears and focuses on the work of Franz Fanon, whose work is outlined in detail as it relates to racism and the myriad of ways it becomes internalized in the psyche of the oppressed. Dalal states that Fanon is to be credited as providing the impetus of his theorizations and, as such, is well summarized in this chapter. However, one wonders how relevant Fanon’s work is to clinical work, as he is mostly referring to colonialism and the effects thereof. Fanon’s work on the liberation from colonialism, however, are relevant to current societal behaviors, especially regarding the existential crisis placed on those who are oppressed and stripped of all history as a group.

In Chapter Six, Dalal focuses on the work of S. H. Foulkes, as he explains that psychoanalysis cannot possibly explain group phenomena because it intrinsically focuses on the individual. Foulkes explained that our fundamental need is to belong and the way we do this is through communication. Therefore, any psychological illness present is due to a breakdown in communication and does not lie within the individual. In this way, the social permeates the deepest levels of the psychic (i.e., content as well as structure). Foulkes’ work seems to offer something other theorists have not and, at the very least, gives analysts an “excuse” to consider the social when working with individuals. In other words, even a cursory reading of Foulkes begs us to reconsider the idea that all explanations for symptoms lie within the individual.

With Chapter Seven, Dalal discusses Norbert Elias, thereby moving out of psychoanalysis and into sociology. Elias argues that the psyche is interrelated with society to the degree that they both occur only as abstractions. Language is inevitably composed of evaluations unique to one’s social group, with embedded affect as well, all of which is based on power differentials existent in society. Therefore, “…the forms of society play a significant role in the moulding of the emotions” (p. 131). This is a tremendously useful, fascinating, and controversial set of statements. To claim that what we consider private, personal thought, is influenced by society flies in the face of analytic thinking and those ideas most comfortable to members of an individualistic society.

With Chapter Eight, Dalal investigates the use of “white” and “black” in the Authorised Version of the Holy Bible, published in 1611, because it was used to teach English as well as moral behavior. His investigation demonstrates that “white” is always associated with goodness while “black” is always associated with “evil” (see p. 145 for a summary of his findings). This is supported by his semantic history of “black” and “white” in the Oxford English Dictionary, the widely accepted authority on the English language. Dalal argues that these associations are not “natural” but instead develop within the context of power dynamics. These investigations are very interesting and provide a surprising, somewhat disappointing, history of the English language.

Dalal discusses Ignacio Matte-Blanco’s rules of asymmetrical logic in Chapter Nine, showing that “…all identities are continually menaced by the presence of other hidden relationships which threaten all the while to burst out and destroy them” (p. 178). He argues that when we defend against this kind of ambivalence, the main precursor to racism is present. For this reason, splitting should not be considered primitive or pathological, as it is something that we all do everyday. The ways in which others are subjected involves both the psychological as well as the socio-political, leading to the necessity of considering the social when working with individuals. In other words,
...the work of this chapter is putting forward an extension and a challenge to the psychoanalytic one-way street in which the vicissitudes of internal psychological worlds drive forms of social relatedness. Whilst there is a truth to this at the level of the individual, what has been argued in this chapter is that the forms, shapes and possibilities of that individual’s internal psychological world are severely constrained by the forms, shapes and preoccupations of the larger socio-historic milieu. Or more simply the vicissitudes of social relations drive what can take place in the internal world. The fact that both are true means that the relationship between them is a recursive one and so it is a two-way street. (p. 198)

The final chapter focuses on racism, now that Dalal has established that we all experience ourselves in racialized ways. This includes psychoanalysis, as it was created by individuals using the same color-coded language found in all of society! The reason that psychoanalysis only considers the individual, Dalal argues, is because it has been stripped of history, making all the causes of symptoms, internal ones. This is perpetuated by the practice of analysis in a sociopolitical vacuum. Dalal ends his work with a suggestion for another way of practicing, one that will allow the psychotherapist a means of working in a culturally relevant way:

The alternative hypothesis I am putting forward is that at times it is more useful to begin by explicitly accepting this presented experience of social reality, which then allows the patient to begin working with the internal....The model I am suggesting is one of moving from the outside in....This suggestion flies in the face of the belief in certain schools of psychoanalysis, which is that all things have to be taken up in the transference and only the transference, and therefore all clinical events are to be understood as ultimately due to the externalization of material from the patient’s psyche. The fact that each person’s experience of the social is peculiarly subjective is utilized defensively by some schools of therapy to stay away from the social altogether. In this way of thinking, any acknowledgement of the external social by the therapist is a capitulation of some sort, a seduction by the patient, and a defeat of the therapy. (p. 220)

One may argue that this is also a recipe by which the powerful will always emerge victorious!

As a graduate student with a concentration in psychoanalytic treatment and theory, I was never exposed to conceptualizations of “race.” In fact, I was never exposed to anything other than traditionally held beliefs about individual psychic development. As a person of color who works predominantly with patients from ethnically diverse backgrounds, the lack of adequate theory to guide my work has become increasingly problematic. Dalal’s piece changed all that. Although this book does not fill the theoretical gaps in psychoanalysis around conceptualizing “race,” Dalal’s focus on both individuals and individuals within society offer fresh insights that literally served a calming function for me. I felt validated as a human being while reading this book, instead of trying (unsuccessfully) to squeeze myself into the biased, unsatisfying theories I was taught as a doctoral student.

In summary, Dalal has produced a phenomenal work in which he not only accounts for our current state of affairs in postmodern society, but also provides psychotherapists with a way of working in a more responsible, relevant fashion. He is thorough in this enterprise, reviewing all historical analytical work that is even remotely related to his topic. His writing style is clear and considerate of all groups, complete with chapter summaries that allow his readers to better understand the main ideas. He exercises good boundaries and does not use the book to further a personal agenda. Instead, Dalal writes in a way that is relevant yet not overly personal or individually situated. His text was informative not only for my work with socially disadvantaged populations, but in my understanding of my own development within a race-based society.

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Essentially unknown until Aldo Carenuto published *A Secret Symmetry* in 1982, Sabina Spielrein (1885-1942) has since become a focal point around which many issues of psychoanalysis are discussed, especially the countertransference. A recently revived off-Broadway production, two movies and many publications since 1982, restore her place in psychoanalytic history and to the lay public. Her rediscovery coincides with the emergence of the feminist movement in society and psychoanalysis.

Covington and Wharton’s book, designed as a tribute to her, provides the reader with a comprehensive study of Sabina Spielrein, her life, her treatment with Jung, and her own contributions to psychoanalysis and language development. The editors succeed in their aim to continue a dialogue between analytic psychologists and psychoanalysts to which Sabina Spielrein was committed. This edited book contains well-documented and thoughtful articles by various contributors some of whom have not been previously published. These articles follow Spielrein’s life and also describe the psychoanalytic times in which she lived, especially the Zurich school. It also contains a few selected writings by Spielrein, which left this reader with the desire to read more of her writings. Freud commented that “...there is meaning in everything she says...” (p. 3). Jung’s letters to Spielrein as well as her hospital records are also included.

The editors note that they made no attempt to synthesize the themes, so gaps remain. Nevertheless, several themes emerge from the various perspectives provided by the contributors: her relationship to Jung first as a patient and then as a “friend,” her relationship to Freud, the triangular relationship that developed, the issue of boundaries, her place and omission from psychoanalytic history, her contributions to psychoanalytic theory which are evaluated, and her life and work in Switzerland and Russia which led to writings on language development. The editors wisely collected contributions that give a broad view to Spielrein’s life and her work. As a result the reader receives a sense of the early days of psychoanalysis and the personal involvement that generated psychoanalytic concepts such as countertransference, anima, and the death instinct, to name a few. Also, the reader receives some sense of a woman who collaborated and associated with such eminent leaders as Piaget, Vygotsky, and Luria in addition to Jung and Freud.

Nicolle Kress-Rosen in her contribution titled, “Kindred Spirits,” notes that gaps in the discovered records require “...hypotheses and constructions.” She writes, “Those who discovered Sabina also invented her, and ever since we have continued to do just that, discovering her and inventing her at the same time”(p. 251). In our creation of her we tend to see what is relevant to our current biases. By presenting various perspectives the editors allow the reader to form his own view. This review may be my invention of her. I was familiar with Spielrein having read Carenuto’s book when it was first published and having seen the play many years ago.

Sabina Spielrein was a Russian Jewess from Rostov-on-Don. She was the oldest child and only daughter of a wealthy merchant, the granddaughter of a Hasidic rabbi with a mystical tradition and herself religious until her adolescence. In 1904, at the age of 19, she was brought to the Burghölzli psychiatric hospital because she was not amenable to treatment at another institution. She apparently was rebellious and a management problem at a previous institution. She was diagnosed as hysterical. Minder’s and Graf-Nold’s chapters describe the meaning of hysteria at that time and her experience at Burghölzli. The hospital was a residential treatment setting, the doctors had hundred of patients, and the doctor was a management as well as a therapeutic force. Sabina Spielrein became Jung’s patient. He treated her according to Freud’s principles, which he gathered from his readings. So this treatment was in no way an analysis as we know it today but an experiment in a new treatment approach in the context of a milieu therapy with a philosophy espoused by Bleuler who emphasized “...patience, calm, and inner goodwill towards the patients, these qualities that must be completely inexhaustible.” Binswanger, stated “...the spirit of unconditional acceptance of the person, of the healthy as well as the sick...” was attributed to Bleuler’s model (pp148-149). Spielrein was seeking such an unconditional acceptance. Spielrein responded to Jung’s treatment. After her discharge in 1905, he maintained contact with her as a “friend.” What evolved was a passionate relationship, which Jung, concerned with his reputation, broke off in 1909, but which Spielrein never repudiated.

In his contribution, Cremerius makes the point that whether or not the passion was consummated is unimportant. Apparently kissing, at least, took place. He states, “Are not disappointment, betrayal, humiliation, and the abuse of trust, and the destruction of dignity and self-worth of more consequence for a young girl to whom all of this has happened?” (p.73) Spielrein seems to have handled this affront “...free of hatred and destructiveness, with dignity and great psychic strength” (p. 69). Lothane differs from Cremerius and has changed his mind as the result of new information he discovered. He no longer believes a consummated sexual act took place. He clarifies the meaning of love for in German there are different
words and nuances that can mean a love like caritas. He is also critical of Cremerius’s moral stance and judgment, which he sees as a denial of countertransferential feelings. He states that whatever may have taken place, it was done after the treatment had ended. Furthermore he notes that Spielrein was not an innocent, that is, she was an active participant and never denied her responsibility for her part nor blamed Jung.

In current terminology there was an enactment in which Spielrein sought the love of a parent and Jung acted in loco parentis and also expressed his feelings to her. As quoted by Lothane, Spielrein writes:

To me, life without science is completely senseless. What else is there for me if there is no science? Get married? But that thought fills me with dread: at times my heart aches for tenderness, love; but that is but a deceptive, passing, external display that hides the most pitiful prose. The price is subjugation of the personality.... No! I do not want such love: I want a good friend to whom I can bare my soul; I want the love of an older man so that he would love me the way parents love and understand their child (spiritual affinity). But my parents--they are not it--If only I was as wise a human being as my Junga [an affectionate Russian-sounding form of Jung].... And how stupid that I am not a man; men have it easier in everything. It is a shame that everything goes their way. I do not want to be a slave! (p. 194)

One chapter containing Jung’s letters to Spielrein indicates both his feelings and his inner state. On June 30, 1908 he writes her, “You can’t believe how much it means to me to hope I can love someone whom I do not have to condemn, and who does not condemn herself either, to suffocate in the banality of habit” (p. 33). On August 8, 1908, he writes, “I want you to be beautiful both inwardly and outwardly, for that alone is natural. No one who is not inwardly defective in feeling can love what is ugly and tasteless, and you are certainly not that! Your letter had a good effect on me; I realise how much more attached I am to you than I ever thought” (p. 35). On December 8, 1908, he writes:

My mind is torn to its very depths. I, who had to be a tower of strength for many weak people, am the weakest of all. Will you forgive me for being as I am? For offending you by being like this, and forgetting my duties as a doctor to you.... I am looking for someone who understands how to love, without punishing the other person, imprisoning him or sucking him dry; I am seeking this as yet unrealised person who will make it possible that love can be independent of social advantage and disadvantage, so that love may always be an end in itself, and not just a means to an end. It is my misfortune that I cannot live without the joy of love, of tempestuous everchanging love in my life. This daemon stands as an unholy contradiction to my compassion and my sensitivity. (pp 38-39)

This passionate relationship led to some actions that would be considered a boundary violation. Boundary issues are as much an issue today as in the earliest days of psychoanalysis (Dahlberg 1970, Sandler 2004). Boundary violations may be more aptly stated as a failure in coping with transference and countertransference feelings, especially the latter. Their involvement with each other was clearly an intense psychic attraction for Jung was intensely interested in this his first “analytic” case and she “demanded” being understood. They both grew, intellectually and professionally as well as emotionally, albeit painfully, from the relationship. In one letter to her, Jung mentions the anguish she caused him and he caused her. They were a muse to each yet Spielrein had concerns that her ideas would be stolen by Jung. Jung’s response is described as a way of deflecting her concern. Perhaps he did steal her ideas, but when two people are muse to each other who can really claim an idea.

Minder, in a second chapter, notes that Jung wrote Freud a letter describing his difficulty with a patient without identifying her by name. She was going around town creating a scandal. Freud sympathized with Jung. It was this sympathy and his contact with both Jung and Spielrein (unbeknownst to Spielrein) that suggest she was subject to the conventional male attitude towards women. Between themselves they refer to her condescendingly as a little girl. Freud’s initial letter to Spielrein declined
a consultation she requested and was aimed at protecting Jung. Freud consoles Jung and commented that he was ten years older than Jung when he started psychoanalytic work and therefore more able to withstand the transference. Today the analyst’s contribution to the transference is accepted and the reality of Jung’s feelings is noted by the contributors. Jung’s letter was prompted in part by Spielrein’s mother’s wish, which she later changed, to seek another doctor for her daughter. In his letters to Freud, Jung describes his success with Spielrein which was substantial in a short period of time and which today we might see as a transference cure. Jung describes Spielrein as possessing “…a certain callousness and unreasonableness in her character and she lacks any kind of feeling situation, and for external propriety, but much of this must be put down to Russian peculiarities.”(p. 139)

One month after meeting Freud, Spielrein presented her first theoretical paper in Vienna entitled “Destruction as the cause of coming into being.” She locates this destruction in the reproductive process. Freud (1975) cites this article in postulating his death drive although he disagreed with placing it in the reproductive process. However, as noted in this book, death has a different meaning for Freud and Jung. For Freud it is a symbol of regression to quiescence while for Jung it is a regressive pull necessary for rebirth. For Jung death is step in rebirth rather than a final step. Spielrein’s use seems to be closer to Jung than Freud. In communication to Jung, Freud noted that her destructive drive concept was personally conditioned and she was “abnormally ambivalent” (p. 3). Jung essentially concurs. Both Freud and Jung are criticized for having failed to see her destructiveness. One might also see her idealization as a defense against her rage. Covington sees Spielrein’s concept of sacrifice as a regressive pull to merger with the other resulting from failure in love. According to her there is no resolving of omnipotence or any evidence of the depressive position in Spielrein’s view of sacrifice.

Spielrein’s ambivalence is played out with Jung and Freud in that she maintains a connection to both. She claims allegiance to Freud yet she writes him that she hopes to bring Jung back into the fold. This unrealistic goal may indicate her lack of political sophistication and her desire to integrate the two essential parts of herself. However it may well be that Spielrein was beyond politics and was always looking for the ideal. Her ambivalence may be a reason that she is forgotten in that she does not chose one side or the other. Perhaps the political structure required loyal followers like Anna Freud and Melanie Klein. Spielrein’s independence and her personality, which Jones found abrasive, may also account in part for her being forgotten. Vidal, in his contribution, indicates that Spielrein abruptly terminated her analysis of Piaget because he was resistant to the theory, which may indicate her abrasive trait and lack of tact. Yet Piaget acknowledged that he was not seriously involved in his analysis and saw it as a trial experience. Another factor in her being forgotten is that her writings are not abstract ones contributing to theory but more impressionistic and intuitive.

Her articles, which are extensive, indicate an independent mind, writing on an intuitive and experiential level, yet raising conceptual questions that antedate many current ideas. Some of her thinking shows what today we would call a constructionist viewpoint. In discussing female beauty, she writes that a concept of beauty is not absolute but derived from female forms frequently encountered as pleasing. Her object related viewpoint is expressed by statements that suggest an awareness of what today we call projective identification. Her experiential approach exists in her view of empathy although she doesn’t use the word. She notes that an ex-smoker can understand a smoker but not one who has never smoked. This statement may also be viewed as concrete. Jung used to criticize her for being concrete. She describes two types of people who seek fame and sees herself as the type who suffered and therefore prizes thought. This shows a similarity to Jung’s introvert and extrovert and to Guntip’s schizoid person. In discussing art, it is the instinct of transformation and not of sexuality that is important, which is closer to Jung than Freud. In her article on the origins of the words “mama” and “papa,” she indicates the broad nature of language that is beyond verbal communication. Tone, musicality and the plastic arts are languages. She is viewed as a forerunner of Fairbairn since she sees language development as part of human development in interaction with parental figures. These examples do not mean that she was the sole forerunner of current ideas.

Spielrein has been viewed as masochistic and self-destructive. She writes about young people desiring to perform an heroic act. Sacrifice has a special meaning to Jung. It refers to changes within the self. In a letter to Spielrein dated Sept. 21/22, 1911 chiding her for not having attended a congress Jung writes, “But never forget that under no circumstances must you retreat from an immediate goal which your heart considers good and reasonable. Each time will mean a sacrifice of selfishness, of pride and of stubbornness.... in the course of this mysterious self-sacrifice you will gain yourself in a new and more beautiful form... and a source of happiness for other people” (pp. 41-42, italics his). Spielrein notes in her diary young people’s need to sacrifice for a cause. Hers may well have been psychoanalysis and fulfilling Jung’s goal. As noted earlier, Covington sees her use of sacrifice as pathological. One needs to remember that in addition to being Jewish she is Russian and educated in secular studies in Russia. When asked by Obholzer (1982) whether Freud understood him, the Wolf Man responded that Freud could not understand him since he was Russian. Some of the “saintliness” attributed to her at the end of her life may be her identification with Russian themes and/or her depression due to her brothers being in the Gulag, her husband having died, and psychoanalysis being banned in 1936 as a bourgeois activity, and her family property having been confiscated.
Whether her failure to leave Rostov-on-Don after Hitler broke the Nazi-Soviet Pact in June 1941 was masochism is open to question. As Lothane notes, Freud was able to leave Vienna because of a ransom paid by Marie Bonaparte. I might add that the American ambassador to France at the time was an instrumental agent. Covington and Wharton report that in 1942, when the German army retook Rostov-on-Don, she with her two daughters and other Jews were led to a gully where they were shot under Operation Barbarossa. Covington refers to it as her “ultimate sacrifice.” Perhaps she means it in a poetic sense and not in either Jung’s or Spielrein’s sense. If it is meant in Spielrein’s sense as defined by Covington it would be a pathological act. Her death may be a result of a perverse use of “Destruction as a cause of coming to being” on a social level. Hitler’s new world order required the destruction of the old world order, which for him meant to make the world Judenfrei (free of Jews.). The SS whose responsibility it was to execute this plan wore a death symbol on their caps.

Is she a forgotten pioneer? Yes, but the reasons vary. As noted in the book it was not simply the “old boy network.” Other factors come into play, such as her personality and her return to Russia (then the Soviet Union) in 1923, and being out of the center of psychoanalytic thinking and politics. She had no home in the Jungian circles nor had she a home in the Freudian circles, in part due to her independent thinking and in her loyalty to Jung, for she never really repudiated his premises. Perhaps she was a solitary worker. Her restoration has been due to Jungian analysts starting with Carenuto and now with Covington and Wharton. Perhaps each generation reclaims the past that is important to its current needs leaving behind other forgotten pioneers. So the finding of her documents that permitted Carenuto to write his book allows Spielrein to become part of Jungian and psychoanalytic history and a focal point for current concerns. Her life may also serve as an illustration of feminist concerns to psychoanalysts and to the lay public.

For the reader who is interested in the history of psychoanalysis, its ideas, and the interplay between people who lived and produced its history and ideas, this is an interesting and worthwhile book. The editors and contributors see Spielrein in her complexity with her strengths and weaknesses. They also provide different perspectives, which leads to some repetition of facts, but which affords an opportunity for a multifaceted view. The book is thorough and scholarly with only one minor editorial defect that is irritating. In a number of instances the page listed in the table of contents does not coincide with the actual page on which the chapter begins.

Most of the articles are worth a review in of themselves since the contributors tackle complex issues of clinical and theoretical significance, which her life and treatment with Jung raised. The issues that Sabina Spielrein faced in her life in the first quarter of the twentieth century are still with us although in different manifestations. This book offers a current view of the past that is relevant for the present. It has value to psychoanalysts today especially in the current interest in self revelation and in legitimate pleasures we derive as psychoanalysts. Using the Spielrein-Jung experience this book shows the power of the analytic dyad for cure and anguish.

REFERENCES

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Apprently soon after the God of Genesis despaired about the self-referenced meanderings of mankind (Genesis 6:1ff) and in a rage destroyed all but the Noahs with torrential rains and floods, He found himself once again confronted by the narcissistic nature of his creations:

The entire Earth was of one language and but several purposes. And it came to pass ... that they found a valley in the land of Shinar and dwelled there. They said, one to their friend ... Come let us build up a city and a tower with its top in the heavens and let us make a reputation for ourselves. (Genesis 11:1-8)

God became worried about these folk and their ambitions and said: “Come let us go down and confuse their tongues, so that they might not understand each other’s languages.” Scripture continues: “That is why it was called Babel, because it was there that God babeled the language of the entire Earth and it was from there that he scattered them over the face of the Earth.”

Sigmund Freud created a movement in Eastern Europe and he, too, sought to create with it a monolithic towering edifice—one, this time, which might proffer a coherent model for explaining the inner stirrings of mankind. The processes that babeled his students’ languages, however, were presumably not divine and the scattering of their centers of learning was not preordained (not at least in the usual sense), though what is a nascent contemporary rapprochement in the psychoanalytic discussion is, perhaps, not all that difficult to have predicted. As Young-Eisendrath has suggested: “Now that the field of Psychoanalysis has been attacked and devalued by various outside economic and cultural forces, it behooves us to function as a cooperative group and to heal the step-family mentality that has hurt us badly” (2004, p. 4). If only it were so simple to bring about such commonalities—as necessary as they might be for our survival!

It is notable that the diverse psychoanalytic camps—their existence being the byproduct of 100 years of schisms and temporary alliances, beginning perchance with Freud’s tongue-lashing of Adler in October, 1907 (Nunberg, p. 237)—have often functioned in such thorough isolation from each other that the similar results they produced failed to cohere into a single body of thought but rather remained “in the box” constructions within these differing models. It is often difficult to determine whether progress is being made toward integration or whether we remain in the Babel phase of our development wherein languages continue to proliferate and speakers of differing languages continue to vie against each other and to unwittingly reproduce each other’s works under differing titles.

This situation may or may not be more pronounced but, assuredly, is odder than schisms in other scholarly fields. In the psychoanalytic enterprise, two people locked into idiosyncratic ways of relating (transferences and countertransferences) attempt to make room for the Other in these endeavors and, indeed, when successful, develop a joint language that encourages relationship over symptom-formation and enactments. How odd it is that we who are often successful in executing such a conjoining of difference among differents in the consultation room, clumsily stumble in negotiating cooperation and common ground between and among inter-collegial groups.

This having been said, it is no wonder that one such as I (who theoretically lives somewhere in the world of object relations thinking) would be painfully struggling (as demonstrated by the first four paragraphs, above) to get started on reviewing a volume by one such as Jean-Michel Quinodoz (who borrows broadly from neo-Kleinian thinking), as I attempt such a review for an audience of classicalists, relationists, ego psychologists, self psychologists and others representing the dozens of (broadly speaking) psychoanalytic positions extant, today. I find myself oftentimes thinking how fortunate it was that I trained more than thirty years ago when Hartmann, Kris and Loewenstein’s students ruled psychoanalysis, at least in the United States. One at least knew, so to speak, where one’s footfalls landed in those days, whether into a land of orthodoxy or heterodoxy. Borrowing from The Pied Piper of Hamelin, one might say that our suffering in the contemporary psychoanalytic world is due not to the presence of too many rats, but rather due to the large number of theoretical Pied Pipers, each playing their own unique tune and each cloistered and leading bands of adherents in their own isolated communities.

Before turning to my task of commenting on Dreams that Turn Over a Page, let me aver unambiguously that I, too, am caught up in these selfsame processes. When writing a volume on suggested emendations of the oedipal (Covitz, 1997), I was ignorant of the overlapping and ear-
lier contributions made by Jessica Benjamin, Ronald Britton and, I’m confident, many others. I grew up theoretically in the American Lay Psychoanalytic movement and knew very little about folk such as Benjamin who was closer to Division 39 or Britton who was part of the neo-Kleinian movement in Europe and the UK. Alas! So it is when adherents of different isms attend churches whose preachers, generation after generation, bring us into schism and conflict based on power politics, theory and, not infrequently, such immeasurables as personality and fervor.

But enough by way of introduction. I came to Quinodoz’ book on dreams after being charmed some years ago by his Taming of Solitude (1991) and its usage of wisdom from de Saint-Exupery’s Little Prince and its characters. The style of his writing remains the same: accessible, clear, and warm. Quinodoz introduces a certain class of dreams whose contents he says, are paradoxically regressive. The patient, near the termination phase of analysis, has progressed beyond the anxieties that are still and all apparent in the manifest content of these dreams. Confronted by their primitive and regressive nature, the patient is beset by fears that, since such dreams can still be dreamt, all may have been for naught and wonders if a resumption of madness may not be, after all, near at hand. The analyst, too, may be fearful that the hoped-for successful termination may have been approached in haste. He cites Hannah Segal, for instance, who confronting a similar type dream noted (Quinodoz, p. 63): “Some may think that a patient who has such primitive fantasies and defenses ... is not ready to stop. That was what my patient often tried to make me think. I had few doubts that this decision was right.”

Quinodoz’ volume is full and rich with extensive clinical examples. It argues for a bimodal interpretive method for these dreams. Emphasis is placed on the need to go beyond the classical methods of dream interpretation, which Quinodoz sees as centered in removing repressions. Interpretation, he argues, must work in the space between paranoid-schizoid and depressive positions and must attend to the splitting that is more visible seen through these lenses.

As already noted, Quinodoz views interpretation of these dreams unfolding in two phases. A central aim of the first phase is “to achieve a preliminary degree of binding and integration of the scattered aspects of the experience of both patient and analyst” (p. 34) in response to the apparently regressive dream. The analyst is admonished to assist the analysand in understanding the degree of integration that the possibility of dreaming such a dream now represents. He goes on: “His disturbing dream is not necessarily a sign that he is seriously ill or going mad, as he imagines, but may instead reflect his increased capacity for representations of hitherto inaccessible fantasies.” Furthermore, at this stage of treatment: “It is essential for the psychoanalyst to take detailed account of the particular moment in the treatment, which is never repeated identically” (p. 35, orig. from Quinodoz, 1991). And a bit later: “It is only after the way the dream is used in the session has been interpreted that analysis of contents can ensue” (p. 36).

A second phase of interpretation is “characterized by the patient’s wish to use the psychoanalyst as a separate, different object, with a view to elucidating the manifest and latent meaning of the dream at a symbolic level” (p. 37) and symbolic interpretation of the elements of the dream. The transitional work from the first to second phases, Quinodoz reasons, correlates with a move from anxiety-ridden paranoid schizoid positions to depressive position functioning. As Quinodoz notes:

In order for a patient to realize that the manifest meaning refers back to a latent sense, he must possess an adequate capacity for symbolization. If not he will be unable to ‘detach himself’ from the manifest sense, and any interpretation by the analyst of the latent sense will seem to him to be mad. (p. 38)

I shall briefly discuss these contributions to dream analysis that Quinodoz proffers. First among Quinodoz’ contentions is that the content of the dream does not necessarily represent the degree to which progress has been made in the treatment nor does it directly represent the highest level of functioning of the patient. But as I shall note repeatedly in the forthcoming: who would argue otherwise? Has it not been a central tenet of psychoanalysis that das unbewusste, the Unconscious, continues to-the-grave to be dominated by primitive confusions (displacement) and pars pro toto thinking (condensations and the confusion of the similar with the identical)?

Feldman put it nicely thirty years ago:

The patient and his circle are usually more impressed with the accomplishments of psychoanalysis than we are. Our theoretical training gives us more than enough reason to believe that the changes on life’s surface, in matters of love, work, aggression and self-control, even though they may bring about a life of more conscious satisfaction, instead of a life of conscious torment and distress, are really only the great surface results of a small internal shift. (1974, p. 134).

Secondly, Quinodoz’ contends that these Dreams that Turn over a Page and their primitive content represent a progressive capacity—perhaps, newly acquired in closing phases.
of treatment—for allowing the primitive to be represented. But again let me say, who would argue otherwise? Is it not a central tenet of psychoanalysis that the unthought is father to the deed? That is: is it not a given in our view of the Psyche that it is precisely those endopsychic images, **vorstellungen**, that cannot be thought that are acted out or that are defended against by compromise formations in the form of symptoms. It has been, for instance, my experience, and I suspect that of psychoanalytic clinicians, in general, that non-abusing parents occasionally have dreams and fantasies of abusing their children, while abusing parents cannot imagine that their behaviors were anything but beneficial!

I refer to the distinction and blurring between thinking and doing which has been part of the conversation since antiquity and which psychoanalysis has taken up during the past century with vigor. For instance, we see that the writers of at least one of the Gospels introduces a moral equivalence between thoughts and deeds, as they ascribe the following to the Nazarene: “And I say whoever commits adultery in his heart has committed adultery” (Matthew 5:27). While one might think this was the only view prevalent two thousand years ago, the writers of the Talmud had it quite differently and closer to the psychoanalytic model:

> He who sees in a dream that he is (sexually) entering a married woman is assured that he is a child of the world to come. He who sees in a dream that he is (sexually) entering his mother will surely succeed in his activities. (BrachOTH, 57:2)

But, then, in a manner very similar to Jocasta’s admonishment to her son-husband, Oedipus, about the quotidian nature of wishes for union with mother, the writers of the Talmud conclude: “Only he should not obsess about it.”

Indeed, who would argue that it is to be expected that dreams towards the close of analysis would have a broader range of the manifestly primitive fantasies of humankind? Only one who privileges the importance of content over defense would be likely to view such primitive dreams at or near the close of analysis as paradoxical.

Thirdly, Quinodoz argues that in the initial phase of interpretation, attention must be paid to the purposes toward which the presentation of these primitive dreams aim: “the function it performs in the session” (p. 33; cited from Segal, 1991). But, for a third time let me query, who would argue otherwise? Admittedly, at the time of the Dora treatment and the writing of the Dream book (both in 1899), Freud was not yet aware of the functioning of transference resistances. Had he been aware of the need to pay attention to the communicative function of clinical productions, Dora’s dreams about her fear of being in a burning house or her being lost in a strange part of a city (Freud, SE 7: p 64ff and 94ff) would have been examined in the context of an overly eroticized treatment situation for which this adolescent girl felt ill-prepared. Furthermore, Dora’s prematurely terminated treatment might have gone on toward a more satisfying conclusion, and the narcissistically bitter woman that Felix Deutsch met much later in her life (Deutsch 1957) might have fared better in relationship to her husband and grown son. But who for the past many years would go directly for the content of a dream? This rhetorical question, indeed, has an answer: only those who don’t accept the need to work through resistances could imagine going directly for the content. The early Freud of the Dora era was to be counted in these ranks and later such content-centered analysis became largely the province of Kleinians, though in recent productions (e.g., the oft-cited work of Segal, 1991) a strong interest in resistance has appeared in workers in this camp, as well.

But back to Quinodoz’ recent discoveries. Fenichel (1941, p. 52) put forth his view of the need to first isolate that which later will be interpreted and generations of analysts have looked at the transference implications of the dream and when and how it was given by that patient to that analyst at that specific time in that treatment. It is plain to me (and I assume to Quinodoz), especially from the treatment of other therapists, that our expertise as analysts is not situated in our abilities to interpret dream material but in our understanding of the manner in which the dreamwork and the relationship in the immediacy of the treatment relationship extant on that day interweave with transferences and countertransferences.

I am reminded of the lesson of the Fox in de Sainte-Exuperey’s *Little Prince* that serves as a literary leitmotif in Quinodoz’ earlier volume. The Fox (very much a psychoanalytic type) is trying to help his disillusioned friend deal with the discovery that his much-beloved and needy Rose, which he left behind on some distant asteroid in the galaxy, is identical to an entire field of roses that he stumbled upon in his travels. The Prince, about to return to his Rose, bears three messages from the Fox: “What is essential is invisible to the eye….It is only the time you have wasted for your rose that makes your rose so important…. (And) you become responsible, forever, for whatever you have tamed” (p. 70). One hundred years of the treatment of obsessional has taught us, if nothing else, that interpretation of content bears few fruit without an understanding of and a resumption of love and relationship. Whether this is understood by us in the language of Klein or object relations or relational analysis matters very little; “what is essential is,” indeed, never a matter of parsing symbols and sentences and always a matter of understanding the vagaries of human relatedness.
Quinodoz’ work is, in some sense, reminiscent of one facet of the Freud-Adler controversy and psychoanalytic discourse, in general. Freud discounted Adler’s emphasis on aggression; Adler was thereafter extruded from the Vienna Psychoanalytic Society, and not too long afterwards we find Freud revising his instinct theory to include the aggressive drive. Fifty years later, we find Horney and Rosenfeld, Sullivan and Kardiner marginalized in the New York Societies, though within a short time we find the essentials of their work creeping into even the mainstream journals of psychoanalysis. And now, at least in my reading of Quinodoz’ Dreams that Turn over a Page, there is to be found a rediscovery of the functions of resistance in dream interpretation.

I can think of no better way to close these brief comments on Dreams than with a passage Quinodoz cites from Hannah Segal:

Following only the content of the dream has its limitations. If we analyze not the dream but the dreamer, and take into account the form of the dream, the way it is recounted, and the function it performs in the session, our understanding is very much enriched and we can see how the dream’s function throws an important light on the functioning of the ego. (Quinodoz, p. 33)

But as I have said now many times before: Who could possibly disagree?

References

Howard Covitz is in private practice in Melrose Park and for many years was Director of the Institute for Psychoanalytic Psychotherapies in Bryn Mawr. His Oedipal Paradigms in Collision, 1997, was nominated for NAAP’s Gradiva Book of the Year Award in 1998. He is Visiting Professor of Mathematics at Temple University’s Tyler School of Art.

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Karen Zelan has written extensively on the psychology of children’s learning. She is the author of Between Their World and Ours: Breakthroughs with Autistic Children.

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empathic, and validating manner (p. 261). Subsequent to the meeting of goals, clients will be more likely to return to a developmental path and fulfill their optimum potential while adjusting to new shifts and demands (p. 261). However, the danger is always present that people’s coping strategies will become paralyzed and they will renew old coping patterns because in times of stress people resort to what they know best (p. 262). This excellent and informative book provides a thoughtful and thought-provoking map for the growth of our patients and for ourselves.

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In Object Relations in Severe Trauma: Psychotherapy of the Sexually Abused Child, Stephen Prior writes about “dynamic theory without trauma and trauma theory without depth…” (p. 6). He contends that traditional psychoanalytic writing about severely disturbed children hasn’t taken into account the devastating effects of actual traumatic events as they influence child development. He reviews the existing literature about severely disturbed children, citing works on the “borderline child,” works by object relations theorists who focus on fantasied internal object relations, as well as Kernberg’s writing about constitutional weaknesses in metabolizing internalized bad objects. He concludes that none of this literature adequately addresses the etiology of severe disturbance in children, because some works emphasize constitutional differences between individuals and others completely leave out a discussion of etiology.

Prior also reviews the recent trauma literature and concludes that it focuses instead on externally observable symptoms at the expense of more fully elaborating the subjective states of these children and the extent of the disturbance caused by abuse. He points out that none of the available literature addresses how real events can shape the development of object relations in the child. He states that neither the writing on dynamics nor the writing on trauma adequately accounts for the failures in development of a healthy sense of self and relatedness in children who have suffered interpersonal trauma.

To address this gap in our understanding, he elaborates a clinical theory regarding the developmental consequences of sexual trauma to children. He synthesizes material from the bodies of literature cited above to paint a poigniant picture of the object relations of the severely abused child. He writes, “This theory attempts to go beyond description of the symptomatic effects of sexual abuse, toward an explanation of why sexual traumatization produces certain central effects and not others, why it so profoundly affects the child, how it distorts the dynamics and structure of the child’s psyche, and how sexual traumatization can be understood in relation to neglect and the child’s underlying relational needs” (p.5).

Prior arrives at his conclusions by synthesizing clinical material from the many severely abused boys he has treated in light of his understanding of the available literature and by developing a relational theory that describes the impact of severe sexual trauma on the development of object relations. He then sets out to integrate what we know about trauma with what we know about object relations. Borrowing the concept of “working models of relationships” from attachment theory, and citing the sparse literature on the dynamics of the sexually abused child, Prior’s work emphasizes the relational dilemmas these children constantly re-enact. He describes their core relational constellations as based in painful conflict arising from: “…repetition of abusive relational patterns, identification with the aggressor, self-blame, and the seeking of object contact through sexual or violent means. These factors are understood as deeply entrenched defenses against annihilation anxiety” (p. viii).

The child can be either victim or victimizer in his relationships. If he is victim, he faces unbearable feelings of powerlessness and vulnerability. To protect against these feelings, he may identify with the aggressor and enact the role of the victimizer. He will then feel intolerably bad as he must psychologically become the very thing he hates the most. If he does this, he will believe he deserved his abuse. Furthermore, guilt will force the child to take out on himself the rage he feels towards the perpetrator. If he does not internalize the others around him, he will feel empty. No child can bear to be alone and unconnected to others, so he uses perverse and aggressive means to seek contact, because he knows no other way. He is then “either nothing or he is bad.” He is forced to choose these negative models to ward off the more unbearable experience of feeling his self disintegrate under the intolerable pressure of annihilation anxiety.

In Prior’s viewpoint, these relational stances alternate rapidly with each other, based on identifications with the abuser as a deeply needed parent or parental figure. (He does not address the impact of abuse by strangers in this book.) The relational stances are re-enacted constantly because they provide the only possible working models of relationships. As each dilemma is reenacted it forces the child into the next, because each is too painful to sustain. The child then demonstrates labile, unstable functioning as he vacillates from one model to the next in rapid succession. Each is in itself a defensive constellation against the unbearable prospect of the emptiness, loneliness, and fear of annihilation that confronts a child who must face the evidence that his caretakers do not actually care for him. The rapidly shifting, un-integrated identifications that underlie the disturbed behavior of these children and the “perverse” means in which they have learned to seek contact with...
others account for the depth of the disturbance they present in clinical settings.

The articulate way in which the author illuminates the internal lives of these children is in and of itself an important contribution. However, he goes further and presents deeply empathic case material to illustrate how their play re-enacts the “relational dilemmas” he describes in his theoretical chapters. He offers vivid clinical vignettes about how he works with them in the playroom to do the necessary work of metabolizing their internalized bad objects. These case examples offer intriguing insights into the techniques most effective in working with these children.

In the chapter, “The Dilemma of Therapy and the Uses of Violence,” Prior emphasizes the transference fears and relational longings with which these children enter therapy and the counter-transference dilemmas faced by the therapist. He explains how the boys he has treated use “violent” and “perverse” means to frantically seek contact with and convey their relational dilemmas to the therapist. He explains that while they may display chaotically violent or sexualized ways of seeking contact, these children are terrified that if they reveal their true feelings they will be abandoned by the therapist. The abused child patient is also likely to believe that he can get the therapist to abuse and abandon him and that he has the power to damage the therapist. These are all variations on the basic relational dilemmas described earlier in the book.

In response, the therapist must decide how to set containing limits on these behaviors and how to engage in play that can at times be graphic, horrifying and repulsive. Prior states that the violent play is in itself a sign of a therapeutic alliance, because it is evidence that the child is taking a risk to show both his good and bad selves in the treatment. That insight alone makes the book worth reading. The author writes, “The therapist who fears retraumatizing the child with exposure to violent memories and impulses may actually run the risk of retraumatizing the child by rejecting the only way the child knows to convey the reality of his experience” (p.130). If the therapist seems to reject the primitive play, he may confirm the child’s fear that he (the child) is bad and that revealing who he is will cause him to be abandoned again, while also confirming the fear that his bad self has the power to damage the therapist. These are all variations on the basic relational dilemmas described earlier in the book.

In “The Dilemma of Therapy and the Uses of Violence,” Prior emphasizes that the processes of development differ for boys and girls. He states that girls must go through a different process of development than do boys. The implication, as in classical oedipal theory, is that the processes of development must progress differently because gender will influence potential identifications and their enactments.

It would be a contribution to see this work extended to girls and women with a history of abuse. Many of us have observed female patients of all ages who stay in or leave therapy for lack of hard scientific data. (As if the human tragedy he describes could be measured.) However, in his asides, he makes the disclaimer that object relations may not account for disturbance and motivations, defenses, conflicts, and anxieties are all embedded within the relational matrix. Theoretical purists may quibble, but the book has clinical utility that may be implemented by therapists of any persuasion.

Additionally, Prior carefully limits his theoretical generalizations to boys in order to stay close to his empirical data. This is good practice in a field plagued by criticism for lacking hard scientific data. (As if the human tragedy he describes could be measured.) However, in his asides, he makes the disclaimer that object relations may develop differently in girls. He seems to unquestioningly subscribe to the notion rampant in Freudian literature, despite his thorough familiarity with contemporary theories, that girls must somehow go through a different process of development than do boys. The implication, as in classical oedipal theory, is that the processes of development must progress differently because gender will influence potential identifications and their enactments.

It would be a contribution to see this work extended to girls and women with a history of abuse. Many of us have observed female patients of all ages who stay in a masochistic position and are terrified of any expression of aggression. It is as if they cannot bear to enact an identification with the aggressor for fear of losing control of their own rage or recognizing any likeness to their abuser. Evidently they are missing the experience and boundaries to know that not all expressions of aggression must be violent and destructive. This, however, does not seem to imply that they do not have an internal identification with

Phil Mollon is an experienced, dedicated psychoanalyst and clinical psychologist of courage and creative integrity. He is an unusually open-minded, careful, scholarly and integrative thinker and practitioner. His ninth book is without doubt of great importance because it represents a therapeutic turning point in the history of psychoanalysis – and in more than psychoanalysis for the number of traumatized people whose suffering the revolution in practice it foretells will surely alleviate. More than that, it is a book that takes a level look at complacent “accepted” and “here and now” relational psychoanalytic practice, and questions the assumptions that have become dislocated from original basic Freudian theory and practice.

Traumatologists (Van der Kolk 1993, Rothschild 2000, 2003) and neurophysiological pathologists today have no doubts about what can neither be symbolized nor told, that is the bodily encrypted basis of trauma memories and their programmed re-enactments that Freud depicted as the “repetition compulsion.” In her near unreadable, dry, but highly significant compendium of research evidence, Bradley (2000) demonstrated that affect regulation is the final common pathway of diverse methodologies for effective therapeutic action. In his monumental synthesis of data, compellingly well researched and written, Allen Schore (1994, 2003a,b) has further documented these findings. It is by processing the affects bound up in traumatic bodily-encoded memories that free association is facilitated and traumatic memories rendered accessible to narration without re-traumatization from the re-experiencing of overwhelming inadequately regulated affect originally experienced.

No one can ignore these contributions. Similar conclusions are derived from a quite different and fundamentally psychoanalytic perspective by Philip Bromberg (1998): in his accomplished critical overview of psychoanalytic theory) Bromberg convincingly argued a trauma-dissociation-affect regulation model for psychoanalytic understanding of personality development, psychopathology and therapeutic process. Mollon’s synthesis demonstrates how the remembered psycho-physiological underpinnings of such traumatic states are reactivated and how these states can be dealt with. Along the way he provides a fascinating articulation of core contributions of many pertinent psychoanalytic thinkers from Kohut to Lacan, Winnicott, Bion, Klein, and takes issue not only with Betty Joseph, but also Peter Fonagy’s relational style of analysis.

Mollon also takes a serious look at a sweep of ancient body energy practices such as acupuncture, shiatsu, and chi gong, along with recent therapies like EMDR (Eye Movement Desensitization and Reprocessing, Shapiro 1989, 2001), and TFT (thought field therapy) for treatment of post traumatic states. Their sometimes startlingly rapid effectiveness is solidly evidence-based: at the simplest level, neurologically they are known to link right and left brain (Schore 1994, 2003a,b). With his gift for grasping and succinctly elucidating the nub of a concept, Mollon compellingly demonstrates how their theoretical underpinning is found in Freud’s original 1894 Project and its later exegesis. With discerning quotations he leads us through and back to basic Freud. After reading this almost mathematically convincing section linking the energy therapies to classical Freud, I felt like exclaiming “Q.E.D.”

One can say of very few books that it might be irresponsible for a serious practitioner not to familiarize him or herself with it. Yet I cannot but call Phil Mollon courageous, for undoubtedly the book will arouse resistance and scepticism in the psychoanalytic world. Far too many dogmas of belief in what constitutes accepted contemporary “good” practice in psychoanalysis are challenged for an unquestioning acceptance of Mollon’s convincing and straightforward attack on what he perceives and demonstrates to be an over-emphasis of focus on partial counter-transference interpretations and often inappropriate and ineffective “here and now” interpretation.¹

Clearly current practice has deviated in many ways from Freud’s original evidently accurate observations and theoretical inferences, including the nature of transference proper. Mollon tackles this problem by taking apart a “model” case study published by Betty Joseph (1985) to provide an alternative analysis of how the material can be

¹ Paula Heimann’s original “complete interpretation” looked at the historical early reconstructed “why” this patient with his/her particular history is making the therapist feel whatever it is that does not belong to the therapist’s own countertransference but is being evoked, provoked, or projected into the therapist here and now, and she always linked the feelings to an historical reconstructive speculation as to who then might have been doing what to the patient that the patient burdens the therapist with these particular feelings in the counter-transference-countertransference interplay at a particular moment (Heimann 1950). Allan Schore’s chapter on “A Psychoneurobiological Model of Projective Identification” (2003b, pp. 58-107) is highly relevant to understanding this phenomenon.
understood (pp.82-91). It is difficult not to be persuaded by the stronger case Mollon makes. Especially because Michael Balint, who supervised my first psychoanalytic training case, used to caution: “Like polo neck sweaters and mini-skirts, currently transference interpretations are in fashion. But consider, are they always appropriate to the weather?” Mollon makes the same point arising from his psychoanalytic understanding of how the energy methods work and a close look at Freud’s original theory. He provides extremely clear and convincing case studies of his sage combination approach to defusing traumatic affects using the energy methods, thus improving the patient’s ability to free associate without increasing resistance by abreactive, overwhelming and often re-traumatizing memories. One readily follows how his application of these techniques is tempered astutely and guided by his psychoanalytic knowledge. In fact it is clear that Mollon is not describing a simple instant “feel good” and apparently generally lasting “cure,” but rather advancing the view that the deeper gains made during the process of liberating understanding, symbolization and verbalization that psychoanalysis facilitates, can be acknowledged once the bodily encoded memory states no longer interfere with the defensive states against recall. Thus, once emotional desensitization has been achieved, the body-based techniques free the symbolic cognitive processes necessary for analysis by permitting changes in the way memories are processed, allowing for conscious recall of the “repressed” traumatizing experiences.

Mollon also uses his psychoanalytic knowledge to understand the “negative therapeutic reactions” that are sometimes encountered in patients treated with the energy therapies. It is clear that practitioners in these fields will become better equipped by studying the psychoanalytic conceptual tools that Mollon brings to bear on their work.

George Allyn2 told me how Winnicott asked him to obtain some authentic Buddhist wisdom texts to send to a jailed adolescent who had phoned him from prison to ask for help. Winnicott commented: “They have helped people for thousands of years and he ought to find something in them to help him.” It should come as no surprise to us that analogous concepts to those basic to psychoanalysis are found in ancient practices, in particular traditional Jewish thought and traditions with which Freud was most certainly familiar (Steinshaltz 1960; Yerushalmi 1993; Drob 2000; Berke, Schneider 2003). Energy notions are at the core of ancient and tried Chinese “medical” practices such as chi gong, so, while having one of my regular shiatsu treatments, I mentioned Mollon’s book to my “master” practitioner friend, Ken Waight3. He proceeded, in his language, to treat me to a fascinating exposition that had many meeting points with those Phil Mollon put forward in his psychoanalytic-cum-body energy discourse. I select some significant points Ken Waight highlighted:

- In Chinese medicine there are points called Dragon points and ghost points.
- Dragon points are points related to emotions in the body and ghost points relate to the presences of past experiences that reside within us.
- When we work with our bodies we need to find resolution to problems with our past experiences and present manifestations of the energy of those experiences.
- The emotions have powerful physical aspects that manifest through the body very strongly--the Dragon points--and because of that, they are good to work with in movement therapy, or music, or art, or even in meditation because they are so strong.
- Ghost presences are much more difficult because they are invisible presences that have no one particular or strong apparition: a ghost can clothe itself like the mist, can evaporate in the sunlight and come back in the evening--it lingers.
- When people have had very strong traumatic experiences, when they dissociate and create these alter personalities or people within them, it becomes very different.

3 Ken Waight is a master of martial arts. He was a recognized 4th Dan in Karate, but being more concerned about his own personal inner development than outer form, discarded this practice for further studies as a novice in Japan. Through his practice and study he has pioneered methods of meditation in movement. After many years of intensive study working with chi, energy, concentrating on its unblocking and flow via his personal innovations: after studying traditional shiatsu and shin tai do, he developed what he called ki tai do, and seshin ki tai do. In addition he has qualified as an accredited practitioner of acupuncture and ancient Chinese medicine, including studying its philosophy. At one stage he worked artistically with paint, and with a ballet company. He is a superb creative cook and practitioner of Zen Buddhism. Currently, he is continuing his university studies in jazz guitar. For the past couple of decades since I watched him leap like a giant balletic flying frog across a park and recognized his artistry and bodily mastery, we have been friends.

Aged ten, I fell during gymnastics and injured my lower spine, extruding a sacral disc. I was encased in a brace for the next five years. Accordingly, rather than become “a helpless, bedridden cripple,” as a prognosticating neurologist suggested at the time, I have been interested in alternative techniques. Among others, I have experienced Alexander postural realignment and cross-crawling, Feldenkrais, shiatsu, sacro-cranial osteopathy, kinesiology, reflexologies, a taste of chi gong, and have periodically practised yoga and Rinzai Zen meditation.

2 Prof. George Allyn is a Paris-based, exceptionally erudite psychoanalytic psychotherapist, with PhDs in Eastern Philosophy and Religion and Psychology.

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difficult to connect to the ghost presence. It is difficult to contact because the person will ‘clothe’ the vulnerable hidden core and put another presence in front so it is difficult to connect to the ‘naked self’ because you will always come to one of these defensive protective personalities.

• To a lesser or greater extent, as I’ve learnt through meditation and body movements, we all have a number of selves which we call ‘the self’--‘the ego’ if you like--but it isn’t one fixed one, it is an idea, a condition which we form together with our environments to call ‘the self.’

• To people in general just being alive is traumatic because birth pulls us all over the place4. We create all kinds of mechanisms in order to survive and these are like extensions of the ego: they help us to survive and control our environment so what we call our ‘self’ can survive.

• But with people who have deep traumas these protective mechanisms are extended personalities and are much more fixed and stronger as extended presences. So when you are with someone who has this condition, it is very difficult because you might be working with one personality and talking to that personality and the other personality might not even be hearing.

• With body movement you see this by a lack of being able to inhabit the body or completely inhabit it—people like that can either be in their body or completely disconnected. They can be like ghosts… and because they are not aware of the link to their extended personalities, they can never find the connection to the ghost body to touch that. [Comment: I think we can all translate to our own metaphoric terminology of “depersonalization” and “derealization”]

• Ken Waight continued: I think that in most therapies they become the ways in which they help us to get along in life, learn a new skill. It is like riding a bike, as you learn you get on one, fall off a few times, and get back on till you have a feeling of how to do it. Then, more or less, you can do that for the rest of your life. And many therapies, meditation practices, movement practises are like that – they’re ways to help us get along. But maybe even a practitioner never learns to throw away the crutches. It is like jazz musicians who are jugglers or tinkerers, who have the skill to put things together but cannot completely be free enough to improvise creatively.

• The skill has closed them rather than opened them, and they haven’t gone far enough. It is just like when we form patterns in our body in order to learn something or do something, and they then become mannerisms deeply ingrained into our body structure, and they take on anatomical and psychological structures that are fixed in our bodies and our behaviours, and beliefs and their ways. It takes skill and wisdom and a high level of proficiency not to be a juggler but to be able to work spontaneously in the moment to connect with someone and be in contact: you need yourself to be able to be flexible enough and improvise and move in order almost to outwit or out-manoeuvre the presences fixed in the client....

• Working with the ego is like shadow boxing. It’s like you’re trying to hit something that is moving with you—difficult. You have to find a stillness—and awareness where the shadow and boxer can be separated.

Mollon has arrived at very similar conclusions using different metaphoric language derived from psychoanalysis and from his experience with personality disordered highly traumatized clientele. He clearly has no illusions about the difficulties many psychoanalysts will have in coping with the theoretical and practical implications of his work. He even devotes part of a chapter to discussing cults and comparing some psychoanalytic group rigidities to cultists who are defending against disintegrative anxieties. Such analysts will continue to hold with religious conviction to their theo-

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4 “Birth, n., the first and direst of all disasters,” Ambrose Bierce, in The Devil’s Dictionary (1911).
tical and current fashionable “accepted good practice” cru cheese and will persist that pedalling their crutches clothed in crutches and will persist in pedalling their bikes clothed in their self-fulfilling assumptions and beliefs with the same resistance to change as their clients, who are disabled by their repetition compulsions and defensive manoeuvrings.

Fonagy (2004, p. 1503) has argued that “as psychoanalysts engaged in the alleviation of suffering, it is our ethical obligation to make use of all the sources of knowledge at our disposal, and in any event an integration across disciplines is already well under way and probably unstoppable, as evidenced by Demasio’s keynote address” at the New Orleans International Psychoanalytic Congress. Etchegoyen commented that neuroscience, attachment theory and other voices outside of the psychoanalytic mainstream can be “taken as enriching, rather than detracting from psychoanalytic knowledge” (2004, p.1503). These comments are cogent and applicable to Mollon’s work: it restores Freud’s earliest work to its central and dominant place in psychoanalysis. It should have a major impact on psychoanalytic technique. Without doubt it merits major attention as a groundbreaking contribution.

References

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the aggressor, but rather that they are somehow reluctant to acknowledge and express it for fear of enacting the role of victimizer themselves. It also does not preclude the possibility of finding males who present with the same conflicts and defensive constellations.

In short, although it is academically rigorous of Prior to limit his theorizing to the boys he treated, it would be interesting to see his theory expanded to girls. Dr. Prior has much to contribute to both our theoretical and clinical discourse. Many of us cherish the hope of giving even one of these children a chance at a satisfying life. Evidently he has helped many of them and has given the rest of us a powerful tool for helping still more. A book by Stephen Prior on techniques of play therapy would also be a significant contribution to the literature about children.

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SAVE THE DATE : Saturday, May 6, 2006

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The book is composed of two parts. Part I; Roots and Early Development, and Part II; Bion’s Context: Contemporaries and Refinements. Each part takes five of Bion’s contributions or concepts and then using his words as a base, goes on to elaborate on his ideas within the work of his contemporaries, or later writers who have studied with and worked with his ideas. The structure is such a vital part of the book, and enables readers to better understand Bion’s works. This context helps us see the major contributions he made to the field of psychoanalysis in a very understandable and readable way. The format is like being part of a dialogue between Bion and multiple other analytic and non-analytic thinkers who all see his work from different points of view. I found it a very rich, exciting and readable book.

Robert Lipgar writes that the purpose of the book was to “bring together some of the best visions and re-vision building on Bion’s writings,” and thereby bring the reader “closer to the extraordinary depth and breath of Wilfred Bion’s thoughts and influence” (p. 7). I think he met his goal. The authors who are reacting to his ideas throughout the book are from all over the world: Italy, France, Argentina, Brazil, the United States and Great Britain. The diversity culturally and in discipline, “psychoanalysts, group analysts, psychologists, organizational consultants, as well as philosophers brings the book its great depth.

Volume I, Building on Bion’s Roots “explores formative influences affecting Bion’s emotional and intellectual development: including his personal experiences in his career, his battle field experience of World War I and the influence of Kant, Trotter, Freud, Klein and Folkes” (p. 6). Robert Lipgar explores how Bion uses the “essential psychoanalytic method to investigate group life much as Freud and others investigated the psychological life of individuals” (p. 29). Bion believed a group required a task and he made the study of the “patient’s tensions” as the task of the group. Bion observed three clusters of emotions that shape attitudes and beliefs in groups: Flight/flight, paring and dependency. His ideas about the intervention and leadership needed to work with a group depended on which cluster was prevalent in the group (p. 33). He believed that there is an innate need for people to be in a community or group and to belong, and a constant conflict with that need and our fear of annihilation and the need to be an individual. He called humans “group animals at war with their groupishness” (p. 173). He wrote about the great difficulty in maintaining a positive influence on the group and how difficult clear-headedness is at times of turmoil and conflict. The “primitive resistances to our learning from experience to change and development are powerful” (p. 51). He often confronted our difficulties in dealing with diversity and the projective identification and splitting that he believed were in evitable in a group.

Paulo Sandier, who writes about Bion’s War Memoirs, introduces the reader to “the grid.” Sandier clears up several questions about the grid and shows how Bion continued throughout his lifetime to improve on its usage. Bion believed, in contradiction to Freud, that groups are powerfully pulled toward the paranoid schizoid position and anxieties and the earliest defenses against them: projective identification and splitting. He wrote and spoke about how much we need, when in a group, to be aware of the pull toward “absolute truth” which he labels arrogant, and how destructive we can be when operating in this position.

In “Gregariousness and the Mind,” Nuno Torres writes about the works of Wilfred Trotter and Wilfred Bion, and the parallels between the herd instinct of Trotter and the group mentality of Bion. He shows us the powerful influence Wilfred Trotter had on Bion’s work, as much as Klein or even perhaps his war experiences. Trotter was an English surgeon and sociologist. Both Trotter and Bion wrote about the need for groups, which Trotter called the herd instinct or our need to be gregarious. Trotter remained a role model for Bion throughout his professional career. His ideas “can be seen traversing all of Bions work, however much in the background...” Torres shows us clear parallels between the work of Trotter and Bion in their theory of groups. “Trotter seems to be an intimate part of Bions personality—one of its functions or factors. It would also be worthwhile to inquire if Wilfred Trotter would not be in some ways an ‘imaginary twin’ of Wilfred Bion” (p. 112).

Claudia Neri in the chapter on “Anthropological Psychoanalysis” takes up three of Bion’s theories that have developed in an original way in Italy. 1) The container contained relationship, 2) The notion of Ps D oscillation, and 3) The intuition of the existence of “thoughts without a thinker.” He emphasizes Bion’s courage and risk in developing these theories and taking them beyond traditional analytic thought. He sees Bion as “not a pre-modern but a post-modern thinker.” A “psychoanalyst of the new beginning of psychoanalysis. Bion sees the limits of psychoanalytic...
practice and technique, but he also announces its fundamental value: the things that make it unique.” (p. 148) According to Neri, Bion’s view of psychoanalysis is in “considering it a truth verifying process, through which a person becomes him/herself, whoever that may be.” (p. 142) His view of analysis is that it concerns two people engaged in research to discover their truth or reality. Bion’s famous contribution of container/contained, takes Kleinian analysis another step.

In the Kleinian view, the analyst is the only agent who is capable of transforming the content of the projective identification. On the contrary, when considering the analytic relationship from the point of view of Bion’s container-contained relationship model, the stress is on reciprocity and the mutual undertaking in which analyst and analysand, from time to time, take the role of container or contained. In Bion’s model, the mind of the analyst is not the sole performer of the transformation. The transformation is carried out mainly through the interchange of the analysand and analyst, both as container and contained. (p. 143)

Volume II “explores the growing influence of Bion’s work as it is being applied beyond group psychology and individual psychoanalysis. (p.8) Part II, Bion’s Context Contemporaries and Refinements, begins with a chapter by Dennis Brown, “Pairing Bion and Foulkes Toward a Metapsychosociology?” The chapters in this part of the book illustrate the parallels and differences in Bion’s ideas and other thinkers, before, during and after his time. He drew on others for his ideas and other thinkers have drawn on and developed his ideas further since his death. Each has made a significant contribution to further development of Bion’s ideas of groups, other organizations, cultural groups, neurobiology. Brown reviews the developing theories growing out of, Bion’s thinking from such contributors as Morris Nitsun, Farhad Dalai, Yvonne Agazarian, Turquet, Lawrence and Hopper, as well as the work of organizational consultants, transcultural works, and the analogy with the body image. He comments:

We are not alone: psychiatrists, experimental psychologists, neuroscientists are on the trail with us. There is a potential in Bion’s work and writings which is highly stimulating, despite running into contradictions, and which remains a source of ideas and evidence to be mined in the future long after him. (p. 194)

These chapters go beyond psychoanalysis and survey how related fields are working on concepts similar to psychoanalysis.

Drawing on all these fields, various writers, like Earl Hopper in “Incohesion; Aggregation/Massification,” expand on Bion’s theories and explore the effect of traumatic experience on group cohesion and group-like social systems. He adds a fourth basic assumption, Aggregation/Massification to Bion’s three groups. He expands on fear of annihilation its intergenerational context and process and the response of individuals and groups that have experienced trauma. His expansion on trauma theory both for individuals and groups is well organized and takes us beyond our current thinking about trauma and its impact on groups and communities in a well organized way.

Victor Schermer, in “Building on O, Bion and Epistemology,” observes, “Bion had an uncanny ability to return to the basics and thereby to open up the field to new possibilities. Bion’s questions are more important than his answers” (p. 127). And further:

The debates about which school of psychoanalysis is correct must have seemed futile to Bion and more a reflection of the theorist’s narcissism than the search for truth. At the same time his broad vision of psychoanalysis is the highest praise one can give to Freud... that the founder courageously opened the door (and we have hardly begun to overcome our fear of walking inside). (p. 248)

Bion is not usually associated with empathy, but Malcolm Pines in “Bion and Foulkes and Empathy,” shows us how Bion’s contributions to compassion and truth show a parallel with empathy. Pine states: “Bion is involving the essential qualities in human relations or reciprocity and intersubjectivity. I am moved by this passage, by the counterpoint between truth and compassion” (p. 256).

The way this book is written with such openness to the ideas of others, from such a variety of analytic thought, cultures and disciplines, to me, is the way Bion would have liked us to think and to use his writing: to not take it as the answer, but a stepping-stone to further thought. Bion’s ideas are so dense and complex and to have them expanded on by other writers and thinkers was immensely helpful as well as enriching in terms of further understanding his writings and what his thinking has generated in others. His ideas are very intertwined and open to growth and further thinking which would please him, I think, as he was always searching for new ideas and ways to understand the mind and human behavior.

One of the most fascinating parts of this book to me is Bion’s experience in groups, and how he uses that to explain what happens to communities, specifically psychoanalytic communities. His contention on regression to paranoid schizoid mechanisms and their impact on indi-
individual thought and behavior in groups gives insight into the difficulties encountered in all groups to some degree. As he describes his ideas on projection, splitting, counter-transference and their impact on group function it makes more understandable to me how difficult it is for analytic communities to function effectively. His emphasis on responsibility for individual behavior and our own personal responsibility for the behavior of the group confronts all of us and holds us each accountable for group behavior in a way that is empowering on one hand and a heavy responsibility on the other. He sees the splitting wars in psychoanalysis and the competition for better or less good theoretical ideas as an expression of arrogance and regression.

Bion’s work, as well as those others who have pursued it further, offer us as a community many potential tools for growth as well as pitfalls to avoid. Robert Hinselwood writes about how an individual in a group can, on one hand, operate as a creator of meaningful communication but on the other destroy meaning. Victor Schermer addresses Bion’s ideas about the resistant to change exhibited in the psychoanalytic community and how difficult it is to assimilate genuinely new ideas. He further writes: “The debates about which school of psychoanalysis is correct must have seemed futile to Bion and more a reflection of the theorist’s narcissism than the search for truth” (p. 248). And finally,

As group members begin to recognize the truthful similarities and differences between themselves and the others, they can begin to appreciate the complexity of personality, to see what is similar and what is different in the other person(s). This inevitably counters the primitive defenses of splitting and projection which lead to other persons being perceived as similar to oneself or totally dissimilar. This occurs particularly in inter-group conflicts when groups draw together to create a common identity that gives them a sense of strength and righteousness, which inevitably leads to the other group being seen as dangerously dissimilar and a threat to security. This is a powerful force in ethnic, political and religious conflicts, but when persons can recognize similarities and dissimilarities within their own group, and break down stereotypes of what they see in other groups, then progress can be made to reduce inter-group conflict. (p. 260-261)

Sharon Grostephan is a psychoanalyst in private practice in Minneapolis, Minnesota.

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The Management of Affect Storms and Suicidality
Dr. Otto Kernberg and Faculty of the Personality Studies Institute
The Personality Studies Institute faculty, including Drs. Otto Kernberg and
Frank Yeomans, will present on the clinical management of Affect Storms
and Suicidality in the treatment of patients with borderline personality
organization. Dr. John Clarkin will serve as discussant and Dr. Pamela
Foelsch will moderate the discussion.
Dates: February 20 - March 6, 2006

Gender as Soft Assembly
Adrienne Harris and Discussants
Adrienne Harris will be discussing the themes of gender and development
from her book “Gender As Soft Assembly.” Along with being interviewed by
Sam Gerson, she will discuss her ideas about gender with Muriel Dimen,
Virginia Goldner, and Deborah Roth and then discuss her ideas about devel-
opment with David Olds, Billie Pivnik, and Steven Seligman.
Dates: March 20, 2006 - April 9, 2006

What is Deep and What is Superficial in Psychoanalysis?
The Boston Change Process Study Group
The Boston Change Process Study Group, which includes Daniel Stern,
Louis Sander, Karlen Lyons-Ruth, Alexander Morgan, Jeremy Nahum and
Nadia Bruschweiler-Stern, will discuss their latest work on implicit process
and the foundational level of non-conscious mental life -- on the relationship
between the implicit non-conscious and the repressed unconscious.
Commentators will include Jessica Benjamin, Adrienne Harris, Arnold
Modell, and Donnel Stern.
Dates: May 1, 2006 - May 21, 2006

Sign up for PsyBC's newsletter announcing the opening of
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<http://www.psybc.com>
I am working on using the APA Ethics Code as a projective test. How is that possible? Well we all know that the Rorschach inkblots have great projective value, but so can written statements. MMPI-2 statements have a projective aspect to them. For example, the MMPI-2 question, “I have often met people who were supposed to be experts who were no better than I” is a frequent response of workshop participants. Research has found that the very same people who said “True” to this item also get panic attacks when they present.

Similarly, I have noticed how much I can tell about a psychologist’s personality by how the psychologist interprets APA’s Ethical Principles of Psychologists and Code of Conduct. That insight has inspired me to develop a projective test of ethical reasoning. A good test should be anchored to a good theory. In the noble tradition of psychology, I stole key concepts from others and relabeled them. I have rejected the concept of “Superego.” This gives the impression that I am smarter than Sigmund Freud, which makes me feel important. I based my ethical levels of reasoning on what I call “anal strength.” I challenge anyone to measure “ego strength” physiologically, but anal strength can be easily empirically validated by sphincter’s ability to snap a pencil. This also proves that empirical validation works best in anal situations.

I will now move beyond my operational definition to the actual imagined constructs. These are the Gordon’s Levels of Ethical Reasoning. The Schizoid/Clueless sphincter level is characterized by an inability to even recognize ethical issues and to distinguish one’s own sphincter from a hole in the ground. A very tight sphincter characterizes the Paranoid/Cynical sphincter level. These are the Torquemadas who rigidly and cynically interpret the ethics code to persecute others. The Narcissistic sphincter level is characterized by sphincter expulsion on others. They feel above the societal demands for toilet training and ethics codes. The Masochistic sphincter level is characterized by sphincter receptivity. They end up getting into trouble since they secretly wish to be spanked by the Ethic Committee. The clean but impractical sphincter characterizes the Obsessive-Compulsive sphincter level. They may follow the letter of every standard to the point of absurdity, while totally missing the bowl. The Normal-Befuddlement level has an appreciation that there is more to it than meets the eye. The highest level is the Wise Sphincter Thinker. They are characterized by understanding the spirit and intent of ethical behavior: “Shit happens—so try to keep others from stepping in it.”

Next in the development of my projective test, I had to determine the projective value of each ethical standard. For example, 10.05 “Sexual Intimacies with Current Therapy Clients/Patients” is only a sentence long, with a clear “do not” in it. It is too unambiguous to have much projective value except in determining acute psychotic states. On the other hand, the standard, 3.05 “Multiple Relationships” requires a tolerance for ambiguity and high ethical reasoning. The standard provides a definition of “Multiple Relationships” since this term is so confusing that some psychologists fear having more than one friend. It even provides a test to determine if there is a problem:

A psychologist refrains from entering into a multiple relationship if the multiple relationship could reasonably be expected to impair the psychologist’s objectivity, competence, or effectiveness in performing his or her functions as a psychologist, or otherwise risks exploitation or harm to the person with whom the professional relationship exists.

This test requires the opinions of what most reasonable psychologists would expect to occur from the arrangement. This is where my new assessment would come in handy. I propose we first screen for reasonable psychologists before a determination is made.

The standard also includes a statement that multiple relationships per se are not unethical: “Multiple relationships that would not reasonably be expected to cause impairment or risk exploitation or harm are not unethical.” This is of great help, since the concept of “multiplicity” can be easily be confused by many psychologists with the concept of “harm.” Since 3.05 has such high projective value I used it as my first test item. I made up the following vignette (which is purely fictional and has nothing to do with my motivation to write this serious piece of research) and I presented it to several psychologists.

Dr. R’s wife was accepted into a doctoral program in psychology. He was proud of her and placed an announcement in their local newspaper and sent a copy to her parents. The announcement also stated that the wife would be working in the husband’s practice under his supervision. He wanted to make it clear that he has responsibility for her work and that she is not licensed to work independently. He was not supervising his wife as part of a requirement to fulfill hours for licensing or certification or for the purposes of a course or fulfillment of a practicum or internship. The definition of “super-
“visor” can have more than one meaning. He was not an evaluating supervisor. He was taking legal and professional responsibility for his wife’s work with her 1-2 patients a week in his small private practice. He screened the cases and was the most consistently available psychologist if something went wrong.

Soon after, the wife received a call from her university. Dr. R’s former wife had sent a letter to the department chair with a copy of the announcement. The ex-wife (also a psychologist) complained that Dr. R. and his wife were in a “clearly unethical dual relationship” and demanded that something be done in order to protect the integrity of the profession. Her intent was to have Dr. R’s wife removed from the program.

Here are examples of how I scored some psychologists responses to this vignette. Can you tell their level of development?

- Another reason not to advertise = 0.
- It’s unethical as long as he is still having sex with his wife. He has to choose which is more ethical = 0.
- It’s OK to have sex with his wife and be in the position of responsibility as long as they are not occurring at the same moment = 1.
- The key factor in this particular situation is that Dr. R is not in an evaluative role with his wife. The consistent availability of Dr. R. is a safeguard to patients as well as an aid to his wife. This serves the greatest good. A reasonable psychologist would not expect impairment, exploitation or harm to come from this situation. A backup supervisor could be appointed. Although not as readily available, this backup supervisor could be a source to go to if there is a problem. The former wife however used the ethics code in an unethical manner and is a Torquemada = 2, because of the level of ethical reasoning and any response of mine is a 2.

I must warn you that a possible source of error in scores could be if the psychologist has attended ethics workshops and/or read material on ethics and understood it. However when it comes to low functioning sphincters, it seems that learning may have little effect and that anality is destiny.

Robert Gordon is past president of Pennsylvania Psychological Association (PPA), and twice served as a APA Representative from PPA. He practices psychoanalytic psychotherapy in Allentown, PA.

ACADEMY OF PSYCHOANALYSIS INVITES DIVISION MEMBERS TO JOIN

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For more details and information on the application process, please refer to the ABPP website: www.abpp.org. Please feel free to contact ABPP officers Joe Reppen (jreppen@datagram.com), Marilyn Jacobs (m.jacobsphd@aol.com), or the administrator Jane Kerner, j.kerner@comcast.net for further information.

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CANADIAN PSYCHOLOGICAL ASSOCIATION SECTION ON PSYCHOANALYSIS GIVES 1ST WEININGER MEMORIAL AWARD  Jon Mills, PsyD, PhD, C.Psych, ABPP

This year’s annual convention in Montreal proved to be our best conference program since our inception as a section of the Canadian Psychological Association three years ago. Peter Fonagy was the first recipient of the Otto Weininger Memorial Award for Psychoanalytic Achievement, an international award developed to honor outstanding contributions to psychoanalytic psychology. The award will be given annually to a psychologist who has made substantial scholarly contributions, shown exceptional leadership, and has made important advancements in psychoanalytic theory, research, or practice. Otto Weininger was an outstanding educator, clinician, and theoretician, and was one of the most influential psychologists in Canada representing the psychodynamic tradition. He was internationally respected for his contributions to the understanding and treatment of children and their families, and for the advancement of Canadian psychology. Also a founding member of the Toronto Institute for Contemporary Psychoanalysis, he was revered for his devotion to his students, thus informing the next generation of psychoanalytic practitioners.

Dr. Fonagy was a fitting choice to receive the first Weininger Memorial Award. He is Freud Memorial Professor of Psychoanalysis and Director of the Sub-Department of Clinical Health Psychology at University College London, Chief Executive Designate of the Anna Freud Centre in London, and internationally known for his groundbreaking work on the relationship between attachment processes, borderline psychopathology, and violence in early childhood—work that successfully integrates empirical research with psychoanalytic theory. Fonagy’s keynote address centered on developmental perspectives of external reality and their impact on attachment processes, personality development, mentalization, and the self.

Mrs. Sylvia Weininger delivered the first memorial award. Mrs. Weininger gave a very emotionally touching speech before bestowing the award. The awards ceremony was extra-meaningful for her because it was held in Montreal where she met Otto while in university and fell in love. She explained that by the time he was 19, he had already decided to dedicate his life to helping children and families. Mrs. Weininger has also been very kind to our section and has established a trust for the award so we can continue to honor the best in our field and attract more illustrious keynote presenters. It is with extreme gratitude that we thank her for her generosity.

Our Section also recognized two books for their outstanding contributions to our field. The Goethe Award for Psychoanalytic Scholarship is given for the best psychoanalytic book written within a two-year period. This award considers any disciplinary or interdisciplinary subject matter in theoretical, clinical, or applied psychoanalysis and is judged on the basis of providing an outstanding contribution to the field. This year’s awards ceremony recognized two books. Peter Fonagy, Gyorgy Gergely, Elliot Juris, and Mary Target were honored for their greatly influential book, Affect Regulation, Mentalization, and the Development of the Self, for the best book published in 2002. Charles Strozier received the Award for his book, Heinz Kohut: The Making of a Psychoanalyst, published in 2001.

With the creation of these awards, we hope to attract international recognition from the psychoanalytic community and continue to offer a substantial and vibrant section program for years to come. Next year’s conference will be held in Calgary, Alberta, and Sidney J. Blatt will receive the 2nd Weininger Award. This will undoubtedly prove to be an equally satisfying conference and we invite all Division 39 members to attend.

We are accepting nominations for the Goethe Award for books published between 2003-2004. Information regarding the nomination process can be viewed online at our Section’s homepage accessed through the CPA website at www.cpa.ca or by contacting me at jmills@processpsychology.com.

DIVISION MEMBERS HONORED BY NAAP

The National Association for the Advancement of Psychoanalysis recently announced winners of the 11th Annual Gradiva Awards for 2005. These awards are “based on overall excellence of entry and degree to which it advances or makes a unique contribution to psychoanalysis.” Michael Eigen was recognized for his book, The Sensitive Self (Wesleyan University Press, 2004); Donna Bassin was honored for her art exhibit The Afterlife of Dolls. Gladys Foxe won an award for her article in Contemporary Psychoanalysis, “But that was in another country, and besides... Collision and Collusion in the Countertransference between German-Jewish Descended Analyst and German-Nazi-Descended Patient.” (2004, pp. 239-252). In the category of anthologies, Martin Bergmann’s book, Understanding Dissidence and Controversy in the History of Psychoanalysis (Other Press, 2004) was recognized. Congratulations to these Division members and the other Gradiva Award winners.
The International Conference on Prejudice and Conflict: Summary of Proceedings

Marilyn S. Jacobs, PhD and Laurel Bass Wagner, PhD

“I refuse to accept the view that mankind is so tragically bound to the starless midnight of racism and war that the bright daybreak of peace and brotherhood can never become a reality.” Martin Luther King, Jr.

The International Conference on Prejudice and Conflict, sponsored by The International Psychotherapy Institute,1 along with The International Journal of Applied Psychoanalytic Studies and The International Association for Applied Psychoanalytic Studies and numerous co-sponsors, was held December 1 – 4, 2005, in Salt Lake City, Utah. The conference objectives were: “1) to describe the origins and dynamics of individual and group prejudice; 2) to explore cultural and international implications of malignant prejudice; 3) to develop dialogue towards the mitigation of conflict based on prejudice; and, 4) to apply new understanding to the treatment of malignant prejudice in the clinical situation, in mental health institutions and in larger groups.”

Marilyn S. Jacobs, and Laurel Bass Wagner, attended this conference as representatives of Division 39. What follows is a summary of the conference highlights.

The conference presentations were directed towards applying psychoanalytic thinking to the intra-psychic and social problem of prejudice. The participants were internationally diverse and explored the role of prejudice in provoking inequality and discord and the need to resolve these conflicts at multiple levels. The program provided the opportunity for the speakers to articulate psychoanalytic-informed strategies for understanding and reducing prejudice and conflict.

A variety of theoretical orientations from within psychoanalysis were represented. Individuals were present from psychology, psychiatry, law, anthropology, and social policy. Both the presenters and attendees came from diverse backgrounds which led to provocative discussions after the papers and during the small group process break-outs.

Friday’s opening session began with “Prejudice: Definition, Varieties, Manifestations” by Salman Ahktar. Dr. Ahktar emphasized that prejudice isn’t “out there,” but rather it is within and he suggested we can only talk about the prejudiced and nonprejudiced parts of ourselves. The definition of prejudice involves a number of concepts (ignorance, hostility and externalization) which Ahktar views as valid, but incomplete. Dr. Ahktar noted that while prejudice often involves ignorance (judgment without facts), it also often involves an active rejection of knowledge. Prejudice involves not only hurting others, but also an idealizing, megalomaniac narcissism on the part of the prejudiced person or group. Prejudice doesn’t just involve externalization, but also a distortion of self. Dr. Ahktar challenged the concept of benign prejudice, saying it may be benign to the giver, but malignant to the receiver. Dr. Ahktar reviewed the history of psychoanalytic thinking relating to the concept of prejudice. He also cited the work of James Gilligan who notes that from the first communities until now people have equated their own culture with the term human being. In many early cultures the word for one’s own culture was the same as human being and all other cultures were defined as “not human beings.” Dr. Ahktar believes the treatment of prejudice lies in curiosity, sadness and concern. He emphasized the developmental pathogenesis of terrorism, saying that terror (such as 9/11) isn’t an act, but a process, which can be understood by exploring its development.

One of the most challenging and enlightening presentations, Elements and Dynamics of Prejudice in the Palestinian/Israeli Conflict, included George Awad, a Palestinian psychoanalyst, Carlo Strenger, an Israeli psychoanalyst, and as moderator, Nadia Ramzy, an Egyptian-born psychoanalyst.

Dr. Strenger described the taxonomy and dynamics of prejudice within Israeli politics vis-à-vis the Palestinians and Arabs. He also described how the state of Israel came into being based on the conviction that Jews would not be safe anywhere without having their own state. Two beliefs accompanied this conviction: 1) Israel has the right (necessity) to exist as a Jewish state and the right to defend the existence of that state and 2) The leaders of Israel are morally justified in their actions. He views the Israeli government as never having dealt with the inherent moral contradiction of its position that the development of the state of Israel led to the displacement and destruction of the Palestinian people.

Dr. Strenger discussed how all Israeli governments up until 1977, adhered to the “Iron Wall” thesis, which he summarized as the following: It is not possible to negotiate with the Arab people and so we will need to live for a long time by the power of the sword. Accompanying this thesis was the idea that if there was someone to negotiate with, we (Israel) would do so, but there isn’t so we do what we have to do. In 1974, two opposing groups arose in Israel, the Peace Now movement and the Gush Emunim move-
ment. Dr. Strenger described Peace Now’s solution to the Palestinian plight as Israel’s withdrawal from the territories and the establishment of a Palestinian state, while the Gush Emunim group believed Israel had a divine right to all of the territories, saw its position as moral, and believed that under these conditions it would be acceptable for the Palestinians to live under Israeli rule.

Dr. Strenger was a member of Peace Now for many years and he supported the group’s position. However, he reached the conclusion that Peace Now incorrectly assumed that the Palestinians would want what Peace Now thought they would want. Dr. Strenger defined prejudice as maintaining a set of beliefs without evidence for those beliefs, particularly when the evidence could be available. He views Peace Now as ignoring evidence that the Palestinians wanted something different than Peace Now wanted. Dr. Strenger discussed the narrative of the Israeli identity, which he believes has trouble living with the tragic nature of its position and existence. The problem is intractable, with no harmonious solution. Such conditions create a context where prejudice can easily arise.

Dr. Awad was born in Palestine, became a refugee in Lebanon at age six, left Beirut in 1968, and now lives in Toronto, Canada. He directly responded to Dr. Strenger’s presentation. Dr. Awad views the two national identities of Israel and Palestine as clashing in a downward progression. Zionism defined Judaism as a national identity and Dr. Awad sees the Arab world as responding by doing the same: Islamism became increasingly central to the Palestinian identity. He noted that when he left Beirut in 1968, anti-Semitism was not a part of the cultural discourse, but now it is. He cited a number of examples of the development of anti-Semitism by Palestinians, such as Hezbollah promulgating the idea of the blood libel, that Jews murder Muslim children. Dr. Awad lamented, “How have we come to this?” He followed with the observation that we each show our prejudice by how we rewrite history.

Dr. Awad provided an historical analysis of the deterioration of relations between Zionists and Arabs. It began with the Zionist immigration to Palestine near the turn of the 20th century. Dr. Awad stated that the Zionists arrived in Palestine ready to expel the Palestinians. He noted that the Palestinians experienced real danger in response to these intentions. Dr. Awad interpreted the Palestinian exodus of 1948 as the culmination of a half-century of Zionist political strategy. Following the exodus, the Palestinian leadership was decimated and Awad reflected that the 1967 defeat led to a fundamentalist political shift.

Dr. Awad spoke of how the Palestinian psyche is traumatized, much as the Jewish psyche is traumatized. He explained that the Palestinians suffered a narcissistic injury involving their self-esteem and the result has been an inability to mourn their loss. The Palestinians continue to experience more loss and Awad offers the view that many Palestinian actions reflect the unmourned, unresolved nature of their loss. Dr. Awad believes that Palestinian prejudice is based on rage and anger, particularly in the face of a lack of recognition from the west. Palestinian prejudice is, also, one of defense as they admire and envy the power of the enemy. Dr. Awad suggests Israeli prejudice has colonizing features, which include a belief that Palestinians are not quite human. He noted that both sides are at risk of losing their humanity and emphasized that the true fight is to maintain one’s humanity. Dr. Awad concluded that the goal is to influence both sides to move away from apocalypse.

The Saturday morning session opened with the paper, “Anti-black Racism and the Conception of Whiteness” by Forrest Hamer. In this paper, the concept of “racial whiteness” was elaborated as a “master signifier” and a social construction, which has influenced black identity and thus contributed to prejudice. Whiteness as an idea is connotative of cleanliness and purity, as an ideal it is a status to be achieved and as an ideology it represents white privilege. To be white is to achieve an idealized self representation. Within psychoanalysis, states of mind, categorical thinking and splitting can become elaborations of racism. The process of deconstruction of complex fantasies of whiteness and blackness as constructions was suggested as an important aspect of decreasing prejudice.

Peter Fonagy presented, “The Development of Prejudice: Explanations of it Ubiquity.” Dr. Fonagy began psychoanalytic accounts of prejudice with a review of core constructs from ego psychology, Kleinian theory, and self psychology. The key psychoanalytic ideas about prejudice relate that prejudice is an attempt to preserve the threatened organization of experience and to achieve self-regulation. He then reviewed the philosophical context, including Heidegger’s notion of prejudice that an individual’s actions emerge from a particular set of presuppositions toward the world. Since humans are embedded in the world within a distinctive web of meaning, prejudice captures the tide of these meanings into which an individual is born. Further emphasis was given to the attachment context of prejudice. “Normal” prejudice is a reaction to separation anxiety and loss and actually strengthens the attachment bond in creating affiliations in the face of difference. “Malignant” prejudice is associated with the disorganization of the attachment system. Everyday prejudice is a consequence of insecurity while malignant prejudice is a consequence of the disorganization of attachment. Risk factors for malignant prejudice include maltreatment or abuse in developmental periods, high level of arousal, adolescence and large group experiences. However, no particular risk factor is needed for prejudice to develop.
Dr. Fonagy concluded that prejudice is “a temporary response of mind to insecurity and disorganization” and that “prejudice is not a property of person but of relationships and a specific social reality.” Prejudice has implications for the nature of mental function that makes it very resistant to modification.

Elisabeth Young-Bruehl discussed “A Brief History of Prejudice Studies.” She reviewed 20th century literature in the area of prejudice and concluded that the literature has been distorted by the idea that prejudice evolves from a specific context. Dr. Young-Bruehl believes this is false. Instead, prejudice is multifaceted and evolves from unique social mechanisms of defense. An appreciation of the complex nature of prejudice is consistent with the complexity inherent in psychoanalytic thinking. Thus, there is no one single prejudiced personality. Three prejudicial character structures were delineated: the hysterical (defenses of splitting and dissociation); the obsessive (defenses of paranoia, moralism and rigidity) and the narcissistic (defenses of grandiosity and a lack of empathy). The requirement of the victim in the matrix of the prejudicial system is also distinctive to the different types. It is important to understand the experience of the victim to understand the prejudice. The different typologies fulfill different social needs and there is not one generalization about the nature of prejudice.

Insofar as strategies for intervention are concerned, a dialogue between the perpetrator and the victim of prejudice doesn’t guarantee improvement. However, Dr. Young-Bruehl spoke of the Truth and Reconciliation Commission convened in post-Apartheid South Africa as an example of a successful strategy for healing society where prejudice existed.

Ron Aviram, in his paper “Object Relations and Prejudice: From Ingroup Favoritism to Outgroup Hatred” applied object relations and social identity theories to consider whether the attachment to one group leads to favoring that group as the ingroup and the consequent devaluation of another group. He suggested the development of a transcendent human identity which can overcome the negative processes inherent in groups being regarded as dreaded objects.

On Sunday, Araf Mahfouz, discussed her own situation in “Multiple Facets of Prejudice: Personal Perspectives.” She provided what she termed a “sentimental journey” through her life’s events as a Sunni Arab living in various cultures of the Middle East and the West and becoming what she termed “a citizen of the world.” Her struggles to assimilate her own unique identity with the different cultures in which she lived gave her a singular reflection on the nature of prejudice.

Henri Parens presented “Prejudice—Benign and Malignant: Guidelines for Prevention.” He also agreed that prejudice is universal and that early development determines its extent. The parents are the representatives of society and community and thus an adequate response by caregivers to these normal processes can decrease the incidence of malignant prejudice. Dr. Parens further presented his parenting education curriculum for K-12 grades which encompasses a model for optimized parenting with the goal being to decrease hostile destructiveness.

Stuart Twemlow presented his paper, “The Everyday Prejudices of Life,” much of which is based on observations from field trials. Dr. Twemlow asked us to consider not only the dialectic between victim and victimizer, but also the “trialectic” which involves the victim, victimizer, and bystander all playing a part in the interaction. Dr. Twemlow contends that if we only pay attention to the Bin Ladens of the world we miss the point, which is the nature of the interaction of the trialectic. Dr. Twemlow conceives of prejudice as involving a power dynamic. The prejudiced person and the stigmatized person are in a victim-victimizer dialectic and need each other. Dr. Twemlow suggests that the stigmatized individual cannot be destroyed because the prejudiced person or group needs the presence of the victim. Dr. Twemlow and his associates have worked in schools addressing the issue of bullying and racial prejudice. Their answer to decreasing bullying was to promote natural leaders in the bystanders. Focusing on the behavior of the bystanders reduced racial prejudice without racial issues being addressed overtly.

In addition to the main papers, small group presentations considered specific problems of prejudice such as religious prejudice, prejudice in family life, Islamaphobia, anti-Semitism, moral reasoning, shame dynamics, the culture of elitism in American psychoanalysis, women and cultural restrictions of the love-object choice and the psychoanalysis of conflict and prejudice. Furthermore, facilitated discussion groups gave the participants an opportunity to further process the conference material.

The conference included viewing the exhibit “Exodus” by the photographer Sebastiao Salgado, who depicted the migration of the world’s poor, disenfranchised, traumatized and stigmatized people across 40 countries in a chronicle of the global movement of populations at the turn of the millennium.2

The conference was intense and overwhelming, but at the same time provided hope and optimism that psychoanalytic thinking and interventions, if applied, could make a difference. This is especially so given the dangerous and unpredictable context of the post 9/11 world. Drs. Jacobs and Wagner plan to submit a proposal to the Division 39 Board for a series of spring meeting programs and other projects devoted to the psychoanalytic exploration of prejudice and conflict.

2 www.terra.com.br/sebastiaosalgado/
This is a report of the Spring and Fall meetings (2005) of the Committee for the Advancement of Professional Psychology (CAPP). I am the Division 39 Liaison to CAPP. The Implementation Group for Integrating the Diverse Practice Agendas (IG), a sub-committee of CAPP also met in the Spring and Fall. I am also the chair of that committee as well as the Division representative.

CAPP is comprised of diverse psychologists all of whom are involved in professional psychology, broadly defined. The practice assessment, we pay, is used by CAPP to advance the practice of psychology. Psychotherapy is only one segment of practice. Yet it is important that the voice of psychoanalysis is heard at the CAPP. I provide that voice at IG and CAPP meetings.

Under the guidance of the CAPP, the Practice Directorate is working on behalf of Professional Psychology in a number of ways. Some of the most recent activities of the Practice Directorate are as follows:

- Public visitors to the APA web page, www.apa.org, can access the APA Consumer Help Center where interesting information about APA and psychology is available for those seeking information about mental health. Also there is a member section where one can gain access to information that is relevant to practicing psychologists. Members of APA who pay the practice assessment can access APAPractice.org and obtain many other services relevant to the practice of psychology. You can download helpful information that can assist in building your practice and marketing.
- One new feature to the Consumer Help Center is the “find a psychologist” feature. The public can get a list of psychologists who practice in their community. This is a free service to consumers. Psychologists can sign up to be listed in the locator directory at no cost, if they pay the practice assessment.
- Beginning January 2006 there will be new CPT codes for psychological and neuropsychological assessment. These codes will permit billing for the psychologist’s time, technician time and computerized assessment time. It is likely that these new codes will result in increased reimbursement for psychologists.
- In 2006 the Practice Directorate will be making contributions to the Corporation for Public Broadcasting. As a result listeners will hear spot announcements about psychology on National Public Radio programs. This is part of the effort the Practice Directorate is making to “brand” psychologists and to increase public awareness of psychology.
- A presentation was made to CAPP regarding the potential for licensed psychologists, especially early career psychologists, to participate in the National Health Service Corps loan repayment program. This program provides health care in designated underserved communities. Psychologists who work in such programs can get loan repayment for their student loans in addition to their regular salary.
- APA received many calls after the hurricanes. In conjunction with the Practice Directorate it responded to calls from media representatives and others. It is clear that in this disaster there was significantly more awareness of the mental health issues involved and more recognition that psychology had something to offer victims and those who responded to the disaster. Dealing with stress and trauma from a psychological point of view was more in the national consciousness and conversation. APA made donations to the hurricane recovery efforts. It also provided relief to psychologists who were directly affected by the hurricane.
- The Practice Directorate was invited to present a program at the National Press Club on trauma and response to disaster.
- CAPP will not pursue issues relevant to telephone psychotherapy such as CPT code and insurance reimbursement. These issues involve complex political processes. The obstacles to getting a specific CPT code for telephone psychotherapy are huge. APA will monitor advances in telehealth and rejoin the issue when timing suggests a greater likelihood of success.
- CAPP monitors and continues to try to help states that are struggling with the MA level practitioner and technician issues such as in New York, Indiana and Arkansas. Special emphasis must be given to these struggles as well as public education campaigns concerning unique skills of doctoral level psychologists and why it is a good idea to consult them.
- There continues to be concern about returning service personnel and meeting their mental health needs. CAPP and the VA are working together on this issue.
- Sixteen mental health organizations, including APA, have formed a coalition to transform mental health care in the United States. They have prepared a document called “A Road Map for Federal Action on American Mental Health Crises.”
- The next public relations campaign will be on Mind/Body Health. The campaign will be titled “Mind/
Body Health…For A Healthy Mind & Body Talk to a Psychologist.” On the Practice Directorate website there will be downloadable materials that can be used by psychologists in public education and outreach programs. Efforts on health care for the whole person, and education for resilience all remain active parts of the CAPP public education campaigns. Right after the hurricanes, material on resiliency that had been used previously in an APA public education program were put back on the web page. Thus interested groups that were affected by the hurricanes had access to them.

- Psychologists can now prescribe in Louisiana and New Mexico. CAPP is supporting other States that are trying to get prescribing privileges. CAPP is working with the National Register and the Association of State Boards of Professional Psychology on criteria that will be appropriate for training prescribing psychologists.
- Starting in 2006 there will be an increase in the practice assessment. We all have been notified of this increase and why it was instituted.
- CAPP has been actively supporting the APA mission to increase diversity in APA membership and governance.
- CAPP made contributions to the draft document on Evidence Based Practice. This task force report was adopted as APA policy by Council.
- At least 17 private health insurance plans are now reimbursing psychologists who are providing services under the health and behavior CPT codes. These codes permit psychologists to see patients who have a primary medical diagnosis and bill them for appropriate services.
- CAPWIZ, the APA computer program that allows psychologists to communicate with their Senators and Representatives on issues of significance to psychology, was demonstrated. This is a computer program that makes it very easy to contact our legislators concerning important federal issues. When our Federal Advocacy Coordinator, Frank Goldberg, sends out an alert asking us to contact our legislators, this program makes it very easy to do so.
- A National Provider Identifier program will go into effect in 2007. All HIPAA covered entities will need to apply for an identifier. The Practice Directorate was asked to add sub-specialties to the preliminary list of psychology sub-specialties.

More information on any of these items can be obtained from the APA Practice Directorate or by contacting me at mmanosev@earthlink.net.

**MULTICULTURAL USHA TUMMALA-NARRA, PHD**

The Multicultural Concerns committee wishes to thank Dolores Morris for her dedication to our education on issues of racial, ethnic, and cultural diversity, and for her willingness to continue on as a consultant to this committee. The new chair of the committee is Usha Tummala-Narra, a supervising psychologist at the University of Michigan Psychological Clinic. The committee will be sponsoring a program at the American Psychological Association’s Expert Summit on Immigration held in February 2006, in San Antonio, TX. The program will feature a presentation on psychoanalytic perspectives on specialized treatment services for immigrant populations. The committee chair and new members including Neil Altman, Patricia Harney, Belle Liang, Laura Westen, Daniel Hsu, and Peggy Whilde look forward to continuing and expanding the committee’s role in education and membership related activities in Division 39. For any questions, please contact Usha Tummala-Narra at utummala@umich.edu.

**MITCHELL AWARD JOSEPH REPPEN, PHD, ABPP**

I am very pleased to announce that, after an absence of two years, Kyle Arnold has won the Stephen A. Mitchell Award for a paper by a graduate student for his excellent paper, “The Need to Express and the Compulsion to Confess: Reik’s Theory of Symptom-Formation.” This paper and another by Mr. Arnold that was previously accepted for publication will be published in 2006 in *Psychoanalytic Psychology* in a symposium on the work of Theodor Reik. Honorable mention was awarded to Robin M. Ward from Widener University for “Discontinuity, Lack, and the Talk of the Internal Other: Toward a Phenomenology of the Unconscious.” He will also read his paper during the 2006 Spring Meeting.

Kyle Arnold is a PhD candidate in clinical psychology at Long Island University, and a psychology intern at Interfaith Medical Center. He began studying psychology at Rutgers University where he was mentored by George Atwood. He completed a psychobiographical thesis on Friedrich Nietzsche, which was published as a co-authored paper. With Dr. Atwood’s encouragement he continued to apply himself to psychoanalytic writing during his doctoral training and, in addition to commentaries on the work of Theodor Reik, he has published a psychobiographical study of Jung and a conceptual article on the relational unconscious. Mr. Arnold’s current interests include the methodology of psychoanalytic case formulation, Reik, theories of mental conflict, the debate between relational and Freudian approaches, and the differences between supportive and analytic psychotherapy. He plans to pursue a career as a psychodynamic clinician and scholar.
SECTION REPORTS: SECTION I PSYCHOANALYST PRACTITIONERS

Section I continues to have an active and collaborative involvement in psychoanalytic programs and developments. For example, through the initial incentives of David Ramirez and Arnold Schneider and, under the leadership of Mary Beth Cresci, Johanna Tabin, Nancy McWilliams and others, a joint committee for the encouragement of analytic candidates to become involved in the division and sections I and V was instituted last summer. It is hoped that this kind of activity will lead to future collaborations.

Another unique activity that Section I has been doing for many years is the site visit to a local Chapter of Division 39. Under this program, we have organized many trips through our Board representatives to various regions of the country, most recently Kansas City, Austin and Philadelphia. The site visit, originally yearly, now occurs every two years and involves a ½ day presentation by members of our board on a topic of analytic interest. Topics are co-selected by the local chapter and the board. Usually, the latter part of the day includes social activity and further interchange of ideas. It is a great way to keep in touch with analytically oriented therapists throughout the country and also helps promulgate the value of our Division and our Sections on a “face to face” basis. It goes one additional step beyond the Division Conference and the APA Convention.

In October 2006, we will be presenting a program in Seattle, Washington, co-sponsored by Section I, The Pacific Northwest Psychoanalytic Society (local chapter of Division 39) and the Northwest Alliance for Psychoanalytic Study (an umbrella organization for all Psychoanalytic Groups in the Seattle Area). The program involves a film presentation of An Affair of Love (Venice film Festival, 1999) and discussion on the topic: The Culture of the Moment and the Process of Involvement. Presenters and discussants include William Fried, Albert Brok, Steve Miller and other members of the Section I Board. The program, which is in its final stages of organization at this writing, was put together, along with our Board, by the collaborative work of Helene Russ, Susan Radant, and in the early stages, Gary Grennell, all of Seattle.

The Section I Presentation for the APA Convention in August is Trauma, Play, Humor, Illusion and Reality: What Can we Learn from Charlie Chaplin? With Albert J. Brok and Mary Beth Cresci. Dr. Brok will discuss the notion of an “aesthetic therapeutic contract” between analyst and patient as an analogue of the artist’s communication with his audience. Through the use of edited film clips, Charlie Chaplin’s long term relationship with his audience and its abrupt termination will be given as an example to demonstrate different qualities of his evolution and maturation as a person, as well as an example of “audience countertransference.”

The clinical relationship, unlike that of film artist and audience, involves the here and now interaction with mutual inter-subjective and objective receptivity between two intercommunicating participants, albeit with differing roles. The analyst as audience to his patient’s play communication, and the response he makes, can be crucial to the quality and progress of the clinical relationship. The reverse also applies under appropriate circumstances.

Although Chaplin’s use of play in his films to communicate serious and poignant thoughts about our human experience was masterful, his style was experienced in different ways by audiences as a function of the interaction between the particular developmental stage of his personal and career evolution with the moment and location in cultural history during which his films were viewed. The more Chaplin attempted to grapple with “current” social and political realities as he perceived them, the less the play element in his films was able to communicate the message intended, at least until the cultural context in which they were viewed had changed.

REFERENCES

CORRECTION TO BOARD MINUTES
In the Fall 2005 issue of the newsletter, the minutes of the Spring 2005 Board Meeting were published. On page 88, there is a report from Laurel Bass Wagner that was misleading. Minutes have been corrected to read: “Dr. Wagner reported that a new organization, NYS PAC, has formed to contest the NY licensing law in psychoanalysis through civil litigation. NYS PAC is comprised of local New York psychoanalytic institutes and societies. Division 39 and other national psychoanalytic organizations have not been asked to join NYS PAC, but may be asked to participate or contribute financially in the future.”
SECTION VII PSYCHOANALYSIS AND GROUP

Section VII continues to evolve and grow as the representative for the validity and efficacy of Psychoanalytic Group Therapy in our Division. At the 2005 APA Convention in Washington D.C., we presented a well-attended program on the topic, What Makes a Group Psychoanalytic? with presentations by Emanuel Shapiro, Gladys Foxe and Albert Brok. Of special interest was a lively interchange with a large group of foreign attendees from New Zealand, Australia, Europe and South America.

Also in 2005, we launched a second edition of our newsletter, which included the first of three interviews with Roberto Losso and Ana Pacquier de Losso on group and couples therapy in Argentina. These interviews were done in Spanish by Albert Brok, in Buenos Aires and translated by him with the Losso’s approval. They include: a discussion of the place of Analytic Group Therapy within the Argentine Psychoanalytic Association; the unique theoretical contributions of Dr. Pichon-Riviere, who is little known in the United States (a founder of the Argentine Psychoanalytic Association); the experience of group therapists during the times of dictatorship; and theoretical influences on practice in current democratic times. An additional interview is scheduled for Spring 2006, and will include a discussion of Analytically Oriented Couples Therapy as done by Dr. Roberto Losso, and Dr. Ana Pakciarz de Losso, who are prolific contributors to the theory and practice of group and couples therapy in Argentina.

Our program in Philadelphia will focus on the topic of Enactments, Unformulated Experience and the Development of Intimacy in Group. It includes recent work by Robert Grossmark, Emanuel Shapiro and Albert Brok. Also, we are looking forward to giving an excellent program at the APA in New Orleans on the Unique Efficacy of Analytic Group Therapy, with presentations by Tracy Ungar and Gladys Foxe.

SECTION VIII COUPLE AND FAMILY THERAPY AND PSYCHOANALYSIS

The members of Section VIII, Couple and Family Therapy and Psychoanalysis, sponsored a wonderful Invited Panel and Conversation/Social Hour in New York last April at the Division 39 Spring Meeting. The Invited Panel explored ethical issues that confront therapists and their patients in couple therapy. Gerry Stechler (“Ethics and Affects”), Justin Newmark (“Ethics and Impulses: An Uneasy Balance”), and Mary-Joan Gerson (“The Justice of Intimacy: Beyond the Golden Rule”) presented a number of thought-provoking ideas in their papers. Our Conversation/Social Hour on “Complicated Loyalties: The Dynamics of Blended Families and Stepparenting,” was well attended, and explored an increasingly prevalent issue for families and therapists. Steve Zeitlin and Toni Halton led the discussion.

In August, at the annual APA Meeting in Washington DC, Section VIII hosted a Conversation Hour, Discussion, and Reception for SOFAR (Strategic Outreach to Families of All Reservists), a psychoanalytic outreach project initiated by the Psychoanalytic Couple and Family Institute of New England (PCFINE). Ken Reich, Jaine Darwin, and Gerry Stechler talked about “Filling the Gap: Creating Volunteer Services for Military Families,” and the session was attended by a number of health professionals that work with the military. General (Ret.) Monty Meigs and his wife Mary Ann, chairs of the SOFAR Advisory Committee, were honored guests at the reception, and answered questions. Interestingly, General Meigs is no longer retired, having subsequently gone back to active duty in a training capacity. SOFAR’s aim is to help create groups around the country that can provide pro bono services to the military families, and a number of the people attending the meeting were interested in pursuing such a project in their area.

In September, Susan Abelson, Secretary, published a beautiful new directory of Section VIII members, which includes the members’ interests and specializations and a useful geographical breakdown by state and city.

The theme of ethics continues to be of interest to members of Section VIII. We use our listserv to post a monthly clinical question or dilemma for discussion. The December question concerned the issue of how a couple therapist can coordinate efforts with the individual therapist(s) that are also involved and may be inappropriately biased in favor of their own patient. This is a problem that most, if not all individual, couple, and family therapists deal with at some point. Finding an effective solution to these situations, on a case-by-case basis, may result in saving a family from a break-up or helping a couple to renegotiate their relationship. Section VIII tries to promote the awareness of individual therapy’s impact on couples and families, and our presentations next spring at the Division 39 meeting in Philadelphia address this issue as well. We hope to see you all there.
Announcements: Competitions and Awards

Section III (Women, Gender and Psychoanalysis)

A $500 grant is awarded yearly for the support of a dissertation in keeping with our mission of “promoting research and theory concerning gender and women’s issues, increasing the participation of women within the profession, advancing the psychotherapeutic treatment of women, and 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: 1) relevance of the topic to the Section’s mission, 2) importance of the contribution to the field, and, 3) 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 2006 award must be postmarked by March 1, 2006 and should be addressed to: Toni Vaughn Heineman, D.M.H., 2481 Clay St., #201, San Francisco, CA 94115

Deadline: March 1, 2006

American Psychological Foundation

The American Psychological Foundation requests nominations for the 2006 Harry and Miriam Levinson Award for Exceptional Contributions to Consulting Organizational Psychology. The 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). The recipient receives $5,000 and a certificate of recognition. The 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.” For more information, please contact the American Psychological Foundation at foundation@apa.org.

Deadline: July 1, 2006

Section V (Psychologist Psychoanalysts Clinicians)

Section V Student Essay Contest: Section V will award a $500 Prize for the Best Graduate Student Essay Entitled: Encountering the Unconscious: A Personal Essay Exploring the Concept & the Experience of the Unconscious. Rules for submission: Essays should be no more than 15 double-spaced pages. Submit to: Section V; Student Essay Contest; 333 West 57th St., Ste 103; NY, NY 10019. Submit your essay without your name on it and include in your submission, on a separate piece of paper, your name, phone number, address, e-mail, and the name of the school and program you attend.

Deadline: August 15, 2006
In a previous column, I noted that my term as editor would end with the Fall 2005 issue of the newsletter. This was technically correct, since the Division 39 Board had not formally reappointed me to another 6-year term, although the Publication Committee had already made the recommendation. In January, the Board did approve another term for me as editor. In the meantime, I had received a number of comments from members expressing their appreciation for my work as editor over the last few years. So I managed to elicit some compliments from our members. So there’s that.

I have appreciated both the compliments and the comments I have received over the last 6 years. I sometimes appreciate the criticisms as well. I have attempted to incorporate suggestions made by our members and to make the newsletter useful and interesting. Actually, I have wondered about the small number of comments I receive. Although I hope this speaks well for the quality of the newsletter, I would appreciate hearing more directly from readers what they found useful or helpful, as well as what they would like to see more of (or less of) in future issues.

The letter to the editor this month got me thinking about the uses and misuses of history. One of my goals for the 25th anniversary year was to get sections and committees of the division to update their histories and reflect on the challenges and changes they have met and the ones they will need to address in the future. Recently, Bob Lane sent me some early issues of the newsletter to copy for my records. In looking over these issues, two things stood out for me. First, I was struck by how little has changed in terms of the basic struggles psychoanalysts face in defining their profession in the face of opposition and indifference from both the public and our own professions. In the early years, if you will recall, division members had to do battle with APA’s willingness to cooperate with insurance companies who wanted our work reviewed “for quality assurance purposes.” Although much has changed, we still must remain vigilant to make sure that our parent organization is aware of the quality, validity and vitality of psychoanalytic psychology. Our division was formed to protect our interests, as practitioners and scientists, clinicians and researchers, and we need to stay watchful and involved with APA and its component committees and boards to make sure this effort continues. The recent success of Ron Levant’s committee on evidenced-based treatment is a case in point.

The second impression I had in looking over these early issues was how impassioned people were, with lots of letters and columns challenging or disagreeing with some issue or other. The newsletter was certainly a place for outspoken opinions. Perhaps our membership has mellowed over the years. Some of that is to the good, of course. There was one letter taking local chapters of the division to task for calling their organizations “societies.” The writer thought that this was too “grand” a term and possibly misleading. I believe that only one chapter followed his admonition and almost all current chapters use the term “society” for good or ill.

To continue with the theme of history, I recently attended a panel, during a meeting of the American Psychoanalytic Association, which brought together Bob Holt, Roy Schafer, Herb Schlesinger and Peter Wolff to discuss David Rapaport and his impact on psychoanalysis and psychology. No less interesting in their comments were two members of the audience, Herb Rosen and Howie Shevrin. The panel’s theme was actually to talk about the exodus from Menninger’s of Rapaport and his students, many of whom accompanied him to Austen Riggs. Dr. Schafer commented that it was difficult to address this issue without having the focus return over and over to the commending presence of Rapaport.

Here in this bastion of medical psychoanalysis then was a tribute to a scholar who is arguably the father of clinical psychology. Professionally and academically, Rapaport prepared the way for psychologists, initially to serve as the “last word” on diagnosis and personality structure and later to serve as psychotherapists and psychoanalysts. As an aside, all the panels I attended during the meeting were given by prominent psychologists, from Adrienne Harris and Jody Messler Davies, to Wilma Bucci and Beatrice Beebe, to Françoise Davoine and Jean-Max Gaudillière. The times indeed are a changin’...

As our division moves into its next quarter century, I hope that our members will want to benefit from the long view of our rich history and tradition. I hope to advance this goal as part of my plans for the newsletter to continue to include psychoanalytic profiles of our senior members to remind all of us that our current ideas and conceptions are rooted in a past that was productive and vibrant.
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- **Section III** - Ellen Toronto - etoronto@umich.edu  
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#### Terms of Office
- 2004-2006  
- 2004-2006  
- 2004-2006  
- 2004-2006  
- 2005-2007  
- 2003-2005  
- 2004-2006  
- 2006-2008  
- 2003-2005

#### Committee Chairs, Liaisons, & Appointed Officers
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#### Program Committee - Elaine Martin, PhD - emart@psychoanalysis.net

#### Psychoanalytic Consortium - Laurel Bass Wagner, Ph.D - lbwagner@flash.net

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#### Specialization and Accreditation - George Goldman, PhD - drgdgoldman@aol.com; and Nat Stockhamer, PhD - nstockhamer@earthlink.net

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David Ramirez

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Marilyn Jacobs and Laurel Bass Wagner

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CAPP and IG
Martin Manosevitz

MULTICULTURAL
Usha Tummala-Narra

STEPHEN MITCHELL AWARD ANOUNCED
Joseph Reppen

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Section VII
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ANNOUNCEMENTS
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FROM THE EDITOR
William A. MacGillivray

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